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“The Female Face” of Hiv/Aids as an Ethical Challenge to the Catholic Church in Uganda: Lessons of Catholic Social Teaching

Athanasius Kikoba

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“THE FEMALE FACE” OF HIV/AIDS AS AN ETHICAL CHALLENGE TO THE
CATHOLIC CHURCH IN UGANDA: LESSONS OF CATHOLIC SOCIAL
TEACHING

A dissertation by
Athanasius Kikoba

Presented to
The Faculty of the
Jesuit School of Theology of Santa Clara University

In partial fulfillment of the
Requirements for the degree of
Doctorate in Sacred Theology

Berkeley, California
September 2018

Committee Signatures

_______________________________________
Dr. William O’Neill, S.J. (Director) Date

_______________________________________
Dr. Marianne Farina, C.S.C. (Reader) Date

_______________________________________
Dr. Teresia Hinga (Reader) Date
To my parents who led me into the Church
and whose love has nurtured me.
# CONTENTS

**ACKNOWLEDGEMENTS**  
VI  

**ABRREVIATIONS**  
VIII  

**ABSTRACT**  
XI  

**GENERAL INTRODUCTION**  
1  

**CHAPTER ONE:**  
GENDERED VULNERABILITY OF WOMEN AND GIRLS TO HIV/AIDS IN UGANDA  
13  

Introduction  
13  

A Personal and Ministerial Encounter with Persons with HIV/AIDS  
13  

Gendered Vulnerability of Women and Girls to HIV/AIDS on the Global Level  
18  

Gendered Vulnerability to Women and Girls to HIV/AIDS on Continental Level: Sub-Saharan Africa  
26  

Historical Implications of the HIV/AIDS Pandemic in Uganda  
29  

Gendered Vulnerability of Women and Girls to HIV/AIDS in Uganda Today  
37  

**CHAPTER TWO:**  
FACTORS RESPONSIBLE FOR GENDERED VULNERABILITY OF WOMEN AND GIRLS TO THE HIV/AIDS PANDEMIC IN UGANDA  
43  

Economic and Political Factors  
43  

Poverty  
43  

Corruption  
57  

Limited Domestic Funding  
62  

Social and Cultural Factors  
64  

Stigmatization and Discrimination  
64  

Excessive Alcohol Consumption  
69
CHAPTER THREE:
CATHOLIC SOCIAL TEACHING AS AN ETHICAL FRAMEWORK FOR ADDRESSING HIV/AIDS IN UGANDA

Human Dignity
Human Rights

A Historical Survey of Human Rights in the Catholic Tradition
Pope Leo XIII and Human Rights
Pope Pius XI and Human Rights
Pope Pius XII and Human Rights
Pope John XXIII and Human Rights
CHAPTER FOUR: PROPOSALS/POLICIES FOR A LIFE-AFFIRMING AND LIFE-ENHANCING THEOLOGY FOR WOMEN AND GIRLS WITH HIV/AIDS IN UGANDA 198

The Catholic Church in Uganda 199

Short-Term Goals 200

A Pastoral Letter Written in Collaboration with Women and Girls with HIV/AIDS 200
Tackling Stigmatization and Discrimination Against Women and Girls with HIV/AIDS 208

Mid-Term Goals 213

Advocacy and Education 213
Counseling 217
The Ministry of Reconciliation 217
Anointing of the Sick 220
Preparing the Sick for Death: The Need for Compassion, Patience and Hope 223

Long-Term Goals 226

Proclaiming the Gospel of Life 226
Working for a More Inclusive Church 227
Marriage Preparation in the Age of HIV/AIDS 232
The Church and the Condom Debate, A Case of Discordant Couples 236

The Responsibility of Women and Girls with HIV/AIDS in Uganda 238
Short-Term Goal 238
Responsible Lifestyle 238

Mid-Term Goal 240
Seeking Treatment and Care 240

Long-Term Goal 240
Ongoing Self Care by and for AIDS Patients 240

The Responsibility of Men in the Time of HIV/AIDS 242
Short-Term Goal 242
Living Responsibly 242

Mid-Term and Long-Term Goals 242
Ongoing Dialogue with Men Regarding Culture 242

Long-Term Goal 245
A New Paradigm: Understanding Masculinity from a Feminine Perspective 245

Physicians’ Responsibilities in the Time of HIV/AIDS 247
Short-Term Goal 247
Truthfulness with and to Patients 247

Mid-Term Goal 247
Observation of Confidentiality 247

Long-Term Goals 248
Focus on People, Not Money 248

The Government of Uganda 253
Short-Term Goals 253
Provision of Safe Bathrooms and Sanitary Pads for Girls in Public Schools and Prioritization of Education for Girls 253

Mid-Term and Long-Term Goals 254
Prioritize Spending on Health Care, Provision of Medications, and Timely Remuneration of Health Care Workers Over Purchase of Military Hardware 254

More Than Words: Enforce Human Rights 256

Tackling Corruption 260
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## Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ABCs</td>
<td>Abstinence, Being faithful, and Condom Use</td>
</tr>
<tr>
<td>Acfode</td>
<td>Action for Development Organization</td>
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<tr>
<td>AfD</td>
<td>Associates for Development</td>
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<tr>
<td>AIDS</td>
<td>Acquired Immunodeficiency Syndrome</td>
</tr>
<tr>
<td>ANERELA +</td>
<td>African Network for Religious Leaders Living with or Affected by HIV and AIDS</td>
</tr>
<tr>
<td>ARTS</td>
<td>Antiretroviral Therapies</td>
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<tr>
<td>ARVs</td>
<td>Antiretroviral Drugs</td>
</tr>
<tr>
<td>AUD</td>
<td>Alcohol Use Disorder</td>
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<tr>
<td>CA</td>
<td>Centessimus Annus</td>
</tr>
<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Discrimination Against Women</td>
</tr>
<tr>
<td>COR</td>
<td>Letter of Saint Paul to the Corinthians</td>
</tr>
<tr>
<td>CST</td>
<td>Catholic Social Teaching</td>
</tr>
<tr>
<td>DCE</td>
<td>Deus Caritas Est</td>
</tr>
<tr>
<td>DH</td>
<td>Dignitatis Humanae</td>
</tr>
<tr>
<td>DRC</td>
<td>Democratic Republic of Congo</td>
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<tr>
<td>EPH</td>
<td>Letter of Saint Paul to the Ephesians</td>
</tr>
<tr>
<td>FMG</td>
<td>Female Genital Mutilation</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>GFATM</td>
<td>Global Fund in the Fight Against AIDS, Tuberculosis and Malaria</td>
</tr>
<tr>
<td>GS</td>
<td>Book of Genesis</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>HSRC</td>
<td>Human Sciences Research Council</td>
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<tr>
<td>ICRW</td>
<td>International Center for Research on Women</td>
</tr>
<tr>
<td>IGA</td>
<td>Income Generating Activities</td>
</tr>
<tr>
<td>JN</td>
<td>Gospel of John</td>
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</tbody>
</table>
LE  Laborem Exercens
MT  Gospel of Matthew
MTCT  Mother-to-Child Transmission
MUWRP  Military HIV Research Program
NACWOLA  National Community of Women Living with AIDS
NAFOPHANU  National Forum of People Living with HIV/AIDS
NGOs  Non-Governmental Organizations
NIAAA  National Institute on Alcohol Abuse and Alcoholism
NRM  National Resistance Movement
NSP  National Strategic Plan
PERFAR  President’s Emergency Plan for AIDS Relief
PLHIV  Persons Living with HIV
PLWA  Persons Living with AIDS
PMTCT  Prevention of Mother-to-Child Transmission
PT  Pacem in Terris
PWA  Persons with AIDS
QA  Quadragesimo Anno
RDC  Resident District Commissioner
RDTs  Rapid Diagnostic Tests
RN  Rerum Novarum
SAPs  Structural Adjustment Programs
SCC  Small Christian Communities
SRS  Sollicitudo Rei Socialis
STIs  Sexually Transmitted Infections
TASO  The AIDS Support Organization
UEC  Uganda Episcopal Conference
UNAIDS  United Nations AIDS
UPE  Universal Primary Education
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>USCCB</td>
<td>United States Conference of Catholic Bishops</td>
</tr>
<tr>
<td>USE</td>
<td>Universal Secondary Education</td>
</tr>
<tr>
<td>VCT</td>
<td>Voluntary Counseling and Testing</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WIS</td>
<td>Book of Wisdom</td>
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Abstract

THE FEMALE FACE\textsuperscript{1} OF HIV/AIDS AS AN ETHICAL CHALLENGE TO THE CATHOLIC CHURCH IN UGANDA: LESSONS OF CATHOLIC SOCIAL TEACHING

Athanasius Kikoba

Since the emergence of the HIV/AIDS pandemic in Uganda in the 1980s, it has become increasingly evident that the HIV/AIDS scourge disproportionately affects more women and girls than men and boys. Women and girls suffer a particular vulnerability due to this pandemic. There are social, economic, political, and cultural factors that precipitate and aggravate the spread of HIV/AIDS among women and girls in Uganda.

This dissertation contends that Catholic Social Teaching offers us one of the best and most comprehensive and integrative ways for addressing the HIV/AIDS scourge. We argue specifically for a rights-based solidarity as the most comprehensive and integrative method for tackling HIV/AIDS.

Dignity calls upon us to treat all persons with equal consideration. Dignity challenges us to pay particular attention to those whose equal dignity is most threatened. It is also dignity that gives rise to human rights. Human rights spell out the conditions that are necessary for honoring, protecting and preserving people’s dignity. To protect and preserve the rights of people, in turn, calls for the participation of all to the common good. To participate in the common good demands that people live in solidarity with one another. This solidarity becomes more critical when it comes to the most vulnerable members of society. Solidarity as a paradigmatic key of encounter of people with one

another, challenges us to leave no one behind. The preferential option for the poor, on the other hand, becomes the hermeneutical principal for remedying social structures and policies so as to bring to the center everyone and especially the poor and vulnerable groups who are often left at the margins of society.

In this sense, Catholic Social Teaching invites and challenges us as members of society to cultivate a new way of “seeing, judging and acting” so as to bring on board the socially abandoned, the materially and economically impoverished, the politically oppressed and the culturally excluded members of society. The women and girls with HIV/AIDS in Uganda are among the most vulnerable, excluded, and impoverished group who merit our new way of “seeing, judging and acting” so that their suffering and illness serve to bring us in closer solidarity and not alienation.
General Introduction

For far too long, women and girls throughout the world have suffered great injustices due to discrimination, oppression, marginalization and exclusion in their societies. Although in some parts of the world, women and girls have and continue to register some improvements in their treatment and wellbeing, the plight and status of women and girls in general remains far from being perfect today as many societies and cultures continue to be marked and marred by oppression, exploitation, and degradation of women and girls in different ways and degrees. The Ugandan society is no exception to this shameful history.

It is, therefore, not surprising that today, all over the world, alarm bells are being rung to address the injustices that have long undermined and continue to undermine the dignity and equality of women and girls in particular ways such as unequal pay in the workplaces, domestic violence, sexual harassment, inaccessibility to health care, denial of active participation in public life and decision-making processes, lack of and unequal opportunities in education, forced marriages, female genital mutilation, rape in homes and conflict zones, dowry deaths, poverty, denial of women’s rights to property inheritance, trafficking of women and girls for labor and the sex industry, and overall silencing of the voices of women and girls in private and public domains.

In many societies around the world, women and girls tend to be portrayed as inferior and weak and are expected to be subservient to men and boys. While men and boys are given greater privileges and higher status, women and girls are denied them. On the contrary, women and girls are treated as subordinates and second-class citizens with limited rights and opportunities. This impedes their flourishing. Anne Nasimiyyu-Wasike,
a Kenyan theologian, explains that although both world and church history is replete with accounts of individuals who have made significant contributions in science, economics, religion, politics and other disciplines, women for the most part, remain unnamed and unremembered. Women have been the missing voices throughout history. Likewise, Mercy A. Oduyoye opines that, “Nevertheless, the fact remains that we have crucified women all over the world. Women carry in their minds and souls and their bodies, the wounds and pains of the violence of male-directed institutions, structures and cultures.”

Unfortunately, even today, genuine questions regarding women’s and girls’ role and status, and the advocacy for their rights and dignity have “become preempted by ideology and obscured by intense passions.”

It is important to point out that in order for women and girls to play their respective roles, live up to their capabilities and fulfill their God-given potential as members of society requires addressing the injustices and indignities that have historically plagued them. Anne Nasimiyu-Wasike points out that, “Equality and respect for all are important in any society because they bring about stability, harmony, and development. Each person should be viewed as an important part of the social, economic, political, religious, and psychic development of any society. It is unjust to marginalize

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4 Brooke Williams Deely, Pope John Paul II Speaks on Women (Washington DC: The Catholic University of America Press, 2014), Introduction, XI.
some members of the community and thereby dismiss the importance of their voices.”

The participation of women and girls in society is essential and cannot simply be set aside. Women and girls deserve to live as equals and to have dignified lives as their male counterparts. Kathleen A McManus, O.P. explains that, “This historical obscuring and denigrating of women has infiltrated the deep recesses of women’s souls and psyches, making it difficult—for some, impossible—to truly see and claim their equal dignity as bearers of the divine.” If history teaches us anything, it is the truth that unjust, indecent, and undignified treatment of another human being or other human beings is a moral perversity. The time has come for the people of our contemporary world to begin reckoning with the history of degradation and mistreatment of women and girls. The “best history” as President Barrack Obama once remarked, “helps us recognize the mistakes that we've made, and the dark corners of the human spirit that we need to guard against. And yes, a clear-eyed view of history can make us uncomfortable. It will shake us out of familiar narratives.”

There is no better place to start remedying our history in society today than with the women and girls infected, affected and prone to the exposure of the Human Immunodeficiency Virus (HIV) and the acquired Immunodeficiency Syndrome (AIDS),

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given its deleterious effects on women and girls.\textsuperscript{8} In our modern milieu, women and girls find themselves at the crossroads with regard to HIV and AIDS. From the statistical standpoint, it is glaringly evident that women and girls are the greatest victims of this deadly pandemic. In fact, women and girls suffer multiple burdens. Mary Jo Iozzio eloquently points out that, “Women worldwide disproportionately bear the weight of infection, care, and stigma that surround the pandemic.”\textsuperscript{9}

To the extent that HIV/AIDS in Africa in general, and in Uganda in particular, is a gendered pandemic, it is critical that this pandemic be given the due attention it deserves. Women and girls as persons created in God’s image and likeness, and equal in dignity with men and boys deserve to live full human lives. It is equally significant that women and girls not be viewed only in terms of victims, but also, as moral agents of transformation and resilience. This being the case, the voices of women and girls need to be heard and listened to.\textsuperscript{10} An ethical accountability of our common humanity demands it.

\textsuperscript{8} HIV is a highly pathogenic virus which infects and gradually disables the body’s natural capacity to fend off various infections. This results in a wide spectrum of diseases and clinical conditions generically designated as AIDS. The progression from HIV infection (sero-positivity) through a latent asymptomatic period, to full blown AIDS is directly proportional to the rate of compromise and depletion of the body’s cellular immunity in the form of CS4+ cells, the white blood cells which activate the host organism’s immune mechanism to infections. The origin of HIV/AIDS remains intensely contentious. However, scientific, medical, sociological and anthropological studies have firmly established that the outbreak of HIV/AIDS corresponds to a pattern of zoonosis, where the disease has crossed from its original hosts (macaque monkeys and sooty mangabey monkeys) to a human host. Cited in Agbonkhianmeghe E. Orobator, S. J., \textit{From Crisis to Kairos: The Mission of the Church in the Time of HIV/AIDS, Refugees and Poverty} (Nairobi, Kenya: Paulines Publications Africa, 2012), 87; from this point on, the Human Immunodeficiency Virus will be abbreviated as HIV and the Acquired Immunodeficiency Syndrome as AIDS.


Since, HIV/AIDS among women and girls does not happen accidentally, it is important that we pay particular attention to the cultural, economic, social, and political factors that cause and result from it. An ethical accounting demands that all these factors be taken into consideration as we search for life-affirming methods in addressing the HIV/AIDS pandemic. It is similarly critical that all parties, that is, persons living with AIDS (PLWA), the Government and Catholic Church in Uganda, the global community and Non-Governmental Organizations (NGOs), each play their respective roles in remedying the causes and resultant effects of women’s and girls’ vulnerability to HIV/AIDS.

It is in this vein that this dissertation is being written. The purpose of this dissertation is to attempt to construct an appropriate response to the female face of HIV/AIDS in the Ugandan society. It is our contention that in so far as HIV/AIDS is a gendered disease, affecting more women and girls than men and boys, poses an ethical challenge to the Catholic Church in Uganda.

An examination of statistics indicates that women and girls in sub-Saharan Africa, of which Uganda is a part, suffer a particular vulnerability with respect to HIV/AIDS. The question becomes why. Our response to that question will be guided by two secondary questions: First, why do women and girls in Uganda suffer a particular gendered vulnerability? Second, what can the Catholic Church and the government/state of Uganda do to rectify their situation? It is important that both the state and Catholic Church in Uganda play their respective roles in preventing and treating HIV/AIDS; in educating and sensitizing people about HIV/AIDS; and in joining the global community in the search for a cure for HIV/AIDS.
The Catholic Church as an institution exists to serve the mission of Jesus Christ, namely, to preach the kingdom of God and evangelize the people of God. The Church as hierarchy (represented by the Pope, Bishops and priests) exists to serve Christ and His people. The Church as the family of God and the Body of Christ includes both the laity as well as the clergy. Given the interconnectedness, interdependence and symbiotic relationship between the clergy and laity in terms of functionality, mission and membership in the universal Church, the Catholic Church in Uganda can and should play a crucial role in addressing the HIV/AIDS pandemic. To be clear, by the term Catholic Church in Uganda, I refer to the Church as “the family of God” or the “Body of Christ” as reflected in both the clergy and the laity. Every time we mention the word “Catholic Church” or simply “Church” it is this understanding that will be implied.

Furthermore, given the fact that women and girls with HIV/AIDS are part of the Church, it would not be surprising or even scandalous to contend that the Catholic Church in Uganda is sero-positive or has AIDS. The Church hierarchy in Uganda cannot speak with one side of the mouth, calling itself healthy, holy and whole while some of her members, the women and girls, are sick. The vulnerability of women and girls to HIV/AIDS calls for admission on the part of the Church hierarchy that she too is sick. This should not come as a surprise to any keen observer considering the fact that some of the members of the hierarchy are themselves infected, affected, living with and dying of HIV/AIDS. The Church can only be healthy and whole as long as all her

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13 Ibid., 124.
members are healthy and whole. Secondly, the Church cannot preach and proclaim the
respect, equality and dignity of all persons, while at the same time, denying the women
and girls full equality and participation in the life of the Church. The Church needs to be
a place where the voices, gifts and leadership of women and girls is welcomed and
nurtured. 14 For this reason, Agonkhianmeghe E. Orobator, S. J. wisely counsels that,
apart from expressions such as “The Church is sero-positive,” “The Body of Christ has
AIDS,” “AIDS is with us,” “The AIDS’ challenge is the Church’s challenge etc.,”
serving merely as opportunistic jargons, such expressions indicate the need for the
Church to engage theologically. 15

If the Church exists to preach the reign of God, as Archbishop Oscar Romero
pointed out, then “the Christian faith does not cut us off from the world but immerses us
in it.” 16 The “cry” of women and girls suffering from HIV/AIDS in Uganda today
beckons the government and Church in Uganda to comprehend their cry, suffering, pain
and death as tied up to the shared dignity and humanity of all Ugandans. Jean-Marc Ela
contends that the HIV/AIDS pandemic prevents the Church family “from shutting their
eyes and drifting off to sleep with the purring of a clear conscience.” 17 This is because the
“cry” of women and girls with HIV/AIDS must be the “cry” of the Church since women
and girls are part of the Church and play a significant role in the life of the Church.

14 Emmanuel Katongole, “The Church of the Future: Pressing Moral Issues from Ecclesia in
Africa,” In The Church We Want: African Catholics Look to Vatican III, edited by Agbonkhianmeghe E.

15 Orobator, S.J., From Crisis to Kairos: The Mission of the Church in the Time of HIV/AIDS,
Refugees and Poverty, 185.

16 Archbishop Oscar Romero, The Political Dimension of the Faith from the Perspective of the

women’s and girls’ involvement in the Church, as Sister Bernadette M. Beya from the Democratic Republic of Congo points out, is seen “in their activities in the liturgy, they devote their talents to the choir, direct and guide the young, proclaim the word of God and are at the offertory and alongside men, they offer to God the fruit of the earth, the work of their hands,” then the Church cannot fail to act and announce the good news that brings life, hope and redemption to women who are infected, affected, suffering and dying from the AIDS disease.18

The Second Vatican Council challenges the Catholic Church in Uganda to see the joy and suffering women and girls with HIV/AIDS as tied to the Church’s own joy and suffering. The Second Vatican Council states that, “The joys and hopes and the sorrows and anxieties of people today, especially of those who are poor and afflicted, are also the joys and hopes, sorrows and anxieties of the disciples of Christ, and there is nothing truly human which does not also affect them.” 19 The same Council goes on to elaborate that, “every type of discrimination affecting the fundamental rights of the person, whether social or cultural, on grounds of sex, race, color, class, language or religion, should be overcome and done away with, as contrary to the purpose of God.”20 In Rosemary Radford Ruether’s words, “Theologically speaking whatever diminishes or denies the full humanity of women must be presumed not to reflect the authentic nature of things, or to


19 Norman P. Tanner, “Church in World;” In Decrees of the Ecumenical Councils Trent to Vatican II (Sheed and Ward: Georgetown University Press, 1990), I.

20 Ibid., 3.
be the message or work of an authentic redeemer or community of redemption.”

It should also be noted that the hierarchical Church, or simply put, the clergy, quite frequently puts forth propositions or teachings and the laity is expected to adhere to, but the reality of HIV/AIDS and other sets of challenges reveals that the members of the laity do not always adhere to such teachings as fidelity and abstinence as they seem either far detached from the lived life experience of the lay faithful or are seemingly lacking in compassion and understanding. Church teachings enunciated and proclaimed from the pulpit by the clergy are often accused of being shallow and devoid of pastoral praxis. The challenge for the Church is to allow her teachings to be accompanied by a lived ecclesial reality. This is vital for the Church’s own credibility and witness. In this context and on the minimal level, the Church at all levels, local, national and international, needs to listen, learn and form a solid basis for its action plan or response when it comes to women and girls with HIV/AIDS.

Pope Francis has challenged the Catholic Church to become an evangelizing community, one that “gets involved by word and deed in people’s daily lives; it bridges the distances, it is willing to abase itself if necessary, and it embraces human life, touching the suffering flesh of Christ in others. Evangelizers thus take on the ‘smell of the sheep’ and the sheep are willing to hear their voice.”

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the years since HIV/AIDS emerged as a disease, is the fact that the HIV/AIDS pandemic particularly among women and girls defies vague solutions and mere moralizing, for instance, in terms of the condemnation of condom use or considering HIV/AIDS as a question of personal sin; and impugning responsibility and guilt on sick individuals without paying serious consideration to the nature and full scope of the factors that precipitate and result from HIV/AIDS infections.

In this dissertation, our focal point of study will be the particular gendered vulnerability that women and girls suffer due to HIV/AIDS in Uganda. We focus on Uganda in keeping with Stephen B. Bevans’ admonition, namely, that theology needs to be done in the local context. Bevans reminds us that, “There is no such thing as theology, there is only contextual theology.”

Bevans goes on to elaborate that, “Contextualisation points to the fact that theology needs to interact and dialogue not only with traditional cultural value, but with social change, new ethnic identities, and the conflicts that are present as the contemporary phenomenon of globalization encounters the various peoples of the world.”

In the same vein, Emily Reimer-Barry argues that, “Theology is always written from a particular context, by human beings embedded in particular historical, linguistic, and geographical spaces.”

Gustavo Gutierrez likewise points out that:

Theology is utterly practical, a reflection not merely on theories and concepts but on life as it really is and as it really can be. The various challenges to human life – economic, political, environmental, and medical – may seem disconnected from


\[26\] Ibid., 27.

theology, but they are not. Theology is a reflection about life in light of the reality of God. And this means that theology is very historical. It develops in the history of the Church as we try to announce the Gospel within a concrete situation and in a way relevant for daily life. Thus, theology is ‘in the middle,’ between the living faith of believers and the task of announcing that faith in the world.28

In addition, Emilce Cuda posits that, “In order for ethics not to be suspended in the political realm, it should be constructed on the basis of a concrete reality. A theological ethics would not be effective if it were built from a reflective judgment that, taking into account a revealed truth, did not also stem from social experience. A theological ethics should not be purely abstract, but should account for a concrete particularity.”29

These scholars make it clear that any sound theological scholarship needs to take the theologian’s context seriously. Theology must be done within the contexts of one’s cultural, historical, linguistic, political and economic settings. These contextual apertures and theological spaces inform and form the worldview of scholars. In keeping with the scholarly advice of Bevans, Barry, Gutierrez and Cuda, Chapter One of this dissertation will examine the gendered vulnerability of women and girls with respect to HIV/AIDS in Uganda. To situate the scope and nature of women’s and girls’ vulnerability to HIV/AIDS, we will briefly look at the global, continental (sub-Saharan Africa) and local (Uganda) overviews. Chapter Two will assess the causes for the persistence of such vulnerability and end by examining what various social actors in Uganda (the government, Catholic Church, global community, persons living with AIDS and non-

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governmental organizations) have accomplished so far, and, consider the missing links in addressing this disease. Chapter Three will contend that a more comprehensive ethical framework is required in addressing the HIV/AIDS pandemic. Here, Catholic Social Teaching (CST) will serve as the ethical framework for gleaning lessons. The final Chapter will propose the way forward, offering a set of proposals and policies for the State, Church, Physicians, Non-governmental Organization (NGOs), international community, and Persons living with HIV/AIDS, paying special attention to the women and girls with HIV/AIDS in Uganda.

Our methodology will be descriptive, evaluative (evaluation of the descriptive), analytical and synthetical. Chapter One will describe briefly the global, continental and local picture of HIV/AIDS. Chapter Two will evaluate the responses (evaluation of description) of the various social actors and the missing links in addressing the HIV/AIDS pandemic. Chapter Three will analyze how Catholic Social Teaching shapes our responses. The final Chapter will formulate policies synthetically that are life-affirming and life-enhancing for women and girls with HIV/AIDS.

The precarity of the lives of the women and girls living with HIV/AIDS and all other women and girls who may or will fall prey to this pandemic in the future challenges us to make an ethical choice: Whether we will sit back on the sidelines and watch our mothers, wives, daughters, sisters-in-law, aunts, friends and sisters continue to die, or act with a collective moral conscience to empower and liberate them. Either way, the ethical choice we make is implicating. Having given a general background and introduction, we will now proceed to address the gendered vulnerability that women and girls face in Uganda because of HIV/AIDS.
CHAPTER ONE

GENDERED VULNERABILITY OF WOMEN AND GIRLS TO HIV/AIDS IN UGANDA

Introduction

In this chapter, we consider the “thick” description of the nature and scope of the HIV/AIDS pandemic as it relates and impinges on women and girls on the global, continental (Africa) and state (Uganda) levels. We pay special attention to the particular gendered vulnerability of women and girls to HIV/AIDS in Uganda. To accomplish this, I will share a few stories of women I have met and encountered in our priestly ministry and journey of faith.

A Personal and Ministerial Encounter with Persons with HIV/AIDS

My first encounter and experience with an HIV/AIDS patient was in December of 1997 after my first semester in the college seminary. Mary was a woman in my home village.\(^\text{30}\) I was told by my parents that Mary was very sick and was suffering from “slim,” which is the term for AIDS in my local language that means “wasted away.” My parents encouraged me to visit her and her family as this gesture might be a source of comfort to the family as I was training for the priesthood. Up to this point, I had only heard of the HIV/AIDS pandemic and had never set my eyes on a person suffering from this deadly disease. Mary appeared completely worn out by her sickness: she was thin, pale and her cheeks were sunken in. By this time, Mary was at the point of death. She had stopped eating, drinking and talking, and so I could not hold a conversation with her. While as I was visiting, Mary’s mother tried to feed her by gently pouring a cup of milk

\(^{30}\) All the names used in this work are pseudonyms to protect the identity of the people I interviewed.
in Mary’s mouth, but everything seemed to run through her body and immediately flow out. The disease seemed to have eaten away at Mary’s internal organs so much so that the stomach could no longer hold any food or drink.

Mary’s family was very welcoming and open to sharing the story of Mary with me. Mary had left her family for a life in the city. She moved to Kampala, the capital of Uganda, to find work to support her family and to improve their lives. It was while she was working in Kampala that she became infected with HIV and later developed AIDS. Her family was devastated that their only bread winner was on the verge of dying. There was a pain and anguish in the face of her father that I had never encountered before. After listening to Mary’s father, I thanked him for trusting me enough to share his daughter’s story with me. I assured him that I would never forget Mary’s suffering. Thereafter, I requested Mary’s father to permit me and join me in offering up some prayers for Mary and the members of the family. He willingly obliged and I proceeded to recite some traditional prayers. I thanked the family for the warm welcome and promised the family my continued prayers for Mary and the rest of the family. I then left for home. Three days later, Mary died.

My second experience with HIV/AIDS came in 2000, when I learned that a very close family member called Susan had contracted HIV/AIDS. Susan’s husband had died two years back. He was professionally employed and had worked for the Government of Uganda. His work required that he move frequently as he was assigned to many places over short periods of time. In the meantime, even though Susan was professionally employed, her work situation was more stable. Susan and I have a special bond. At the time when the family found out that Susan was HIV positive, she was responsible for
paying my tuition for my college seminary education and formation. Upon learning of Susan’s status, I was heartbroken. I wondered what would happen to Susan, her four children and me. Over the years, my conversations with Susan have led me to believe Susan has always been faithful to her marriage vows. So why would a faithful married woman end up with AIDS?

The year 2000 happened to be the period where I began my theological studies in the United States of America, having obtained a scholarship through my home diocese. This meant leaving Susan behind. I struggled with the thought of abandoning my closest friend for a period of four years. Once I settled down in the USA, I kept in contact with Susan. Through work-study in the seminary, I began to support the education of Susan’s children to relieve her of stress and worries. I also encouraged Susan to seek out treatment with antiretroviral therapies. As a result, Susan is still alive today. She is a very prayerful woman who has given her life over to God.

More recently I have learned of another family member who has become infected with and affected by HIV/AIDS. She is about 14 years of age and still attending school. I am not sure how Felicity became sero-positive. I suspect that HIV/AIDS was passed on to her from her mother since her mother has long been deceased. She too is on antiretroviral therapies, but Felicity’s health is very fragile, and she is in and out of the hospital regularly.

Since becoming a priest in 2004, and as a result of my priestly ministry in parishes in rural Uganda, I have anointed many people known to have or suspected to be HIV-positive. Although some have been men, most of the people I have anointed, brought Holy Communion (Viaticum) to, and over whose burials I have presided, have
been women. Many of these women were married who spent their lives in rural areas, with only a few having lived in cities. Many had wounds all over their bodies and were emaciated. During one of my pastoral visits, Betty told me:

Father, I have never been unfaithful in my marriage. I stayed home, took care of the children, worked in the gardens and looked after my father and mother-in-laws. Now, here I am dying of slim. I cannot understand it. My husband told me he was going to town to look for a job. He stayed for two years in town. When he came back, his body had changed. His skin had spots. I wondered what the problem might be. But as you know, we women are not allowed to ask men anything. Father, pray for me.

In another pastoral visit to anoint a critically sick woman called Vivian, I learned of the struggles of many women and young girls when she said to me, “I have been faithful in my marriage. Why should I be sick and dying from this dangerous disease? I am dying now because death has been brought upon me.”

What the stories of Mary, Susan, Felicity, Vivian and Betty reveal is that behind every disease such as the HIV/AIDS pandemic are human beings, the very core of God’s creation. The stories of these women further portray the fact that behind social, economic, and political injustices are faces of human beings; behind the struggles for survival are human beings; behind poverty are human beings, and behind the lack of access to health care are human beings. Therefore, it is important to remember as Pope Francis reminded world leaders, in his speech to the United Nations, that behind all structural programs, there are “real men and women who live, struggle and suffer and are often forced to live in poverty, deprived of all rights…. we must allow them to be dignified agents of their own destiny.”

The narratives of these women show that HIV/AIDS infects and affects people in various ways. There are multiple narratives as to how people end up with the HIV/AIDS pandemic. For some, it is through the infidelity of marriage partners like Betty, Susan and Vivian; for others, it may be through mother to child transmission like Felicity; and still for others, they are forced into relationships because of poverty and the need to support their families like Mary. These narratives summon us not to draw quick conclusions but rather be willing to listen a little longer as Maria Cimperman observes. She points out that:

Narratives necessitate presence marked by a deep and embodied listening and sharing. When we invite a guest to share her story, we must be present in all possible ways to the person. In telling her story, the guest is offering us a part of her identity. In the sharing of her identity intertwines with ours; she becomes a member of our community and we a part of her community…We must also not be too quick to listen only for the “good news” of the story.\(^\text{32}\)

Furthermore, Cimperman elucidates that listening to others’ stories requires hospitality. This hospitality consists of honoring the guest by walking with the narrator along his or her journey of life. She writes that, “For people who live on the margins, this accompaniment is prophetic and can be transformative. The narrator and the narrative are shaped by the experience of being heard. For listeners attentive to experiences on the margins and to the pain of their own lives, such accompaniment is the beginning of solidarity.”\(^\text{33}\) It is equally important to note that the stories of the above women are also about memory. HIV/AIDS is a memory of individual persons such as the women mentioned above as well as a collective memory of the communities in which these


\(^{33}\) Ibid.
women have lived and continue to live. It is a memory of the past as well as of the present. Cimperman explains that:

…AIDS is both a memory of the past and an ongoing event. AIDS is our common history and our common present. Because it is a present event, HIV/AIDS affords us opportunities to intervene in the midst of the pandemic to halt the devastation. Whether a personal memory or not, with so many affected worldwide, HIV/AIDS is a collective memory of the global community. Memory entails remembering the victims of history who have suffered and died as well as those who are currently suffering.34

More importantly, HIV/AIDS is not a disease “out there.”35 It is a pandemic within families, churches and societies. The HIV/AIDS pandemic touches on the very core of society, namely, the human family. But most importantly, as the above stories attest HIV/AIDS plagues the most vulnerable members of our human family, namely, women and girls. As such, HIV/AIDS promulgates a gendered vulnerability.

**Gendered Vulnerability of Women and Girls to HIV/AIDS on the Global Level**

In our contemporary world, the Human Immunodeficiency Virus which is responsible for causing the Acquired Immunodeficiency Syndrome is recognized as one of the severest humanitarian threats of our time. It is a pandemic of great proportions with devastating effects on development, health, human rights, society and family. Globally, as of 2016, 36.7 million people were living with HIV; of these, 34.5 million were adults aged 15 and over and 2.1 million were children under 15 years of age. There were 1.8 million new infections and 1 million deaths due to AIDS.36 While it is commendable that


people with AIDS are living longer due to antiretroviral therapies, improved accessibility in HIV testing, and sensitization and awareness campaigns, the fact that 1.8 million people became newly infected with HIV and 1 million people died due to AIDS-related ailments in 2016 should perturb the conscience of humanity.\footnote{UNAIDS, “Fact Sheet-Latest Statistics on the Status of the AIDS Epidemic,” http://www.unaids.org/en/resources/fact-sheet (accessed July 27, 2017).} Owing to the sheer magnitude and impact of HIV/AIDS on the people of our world today, Teresia Hinga calls HIV/AIDS, one of the most perplexing issues of our time.

She elaborates:

Since the global community became aware of the virus in the early 1980s, infection rates have escalated dramatically and there does not seem to be any light at the end of the tunnel. The impact of the pandemic is particularly painful in Africa where it has been compounded and aggravated by other crises on a continent already ravaged by poverty, war, famine and environmental degradation. While there has been no lack of effort to seek answers, the HIV/AIDS crisis has turned out to be a multi-headed monster that has defied simplistic solutions.\footnote{Teresia Mbari Hinga, “AIDS, Religion and Women in Africa: Theo-Ethical Challenges and Imperatives,” In Women, Religion and HIV/AIDS in Africa: Responding to Ethical and Theological Challenges, edited by Teresia.M. Hinga, Anne N. Kubai, Philomena. Mwaura, Hazel Ayanga (Pietermaritzburg, South Africa: Cluster Publications, 2008), 76.}

Orabotor poignantly elaborates that HIV/AIDS is not just a major health problem but has long term effects on people as a multifaceted disease:

…HIV/AIDS has evolved from being a major public health concern to a massive developmental and security threat. Unlike any other previously known epidemic, it raises long-term challenges at various levels of socio-economic, political, cultural and religious organization. Startling and chilling as recent statistics may appear, they do not adequately convey the scale of devastation, nor the excruciating burden it imposes on people living with AIDS (PWA).\footnote{Orobator, S.J., From Crisis to Kairos: The Mission of the Church in the Time of HIV/AIDS, Refugees and Poverty, 87.}
Cassie J. E. H. Trentaz points out that:

The story of HIV infection & the experience of AIDS is not, nor has it ever been, a story about an isolated biomedical condition. The virus’ transmission from one place to the entire globe within ten short years demonstrates our interconnectivity as people and nations. But the impacts of the epidemic also show the interconnectivity of human cultural systems and ideological structures. The story of HIV & AIDS is a story about politics, economics, and transnational relations as well as health/medicine, and any adequate understanding of this pandemic must be placed in historical context.\(^{40}\)

Given the interconnectedness of people and nations today, no single person or nation can insulate itself from the world community and from the HIV/AIDS epidemic. Furthermore, when one considers the cultural, social, economic, epidemiological, moral, and political causes and consequences of the pandemic, it becomes easy to comprehend why HIV/AIDS must be understood in its multifaceted manner and not treated in isolation.

For decades, HIV/AIDS has been studied from a medical perspective. Today, the reality of HIV/AIDS defies this single model approach. It is important to note that although this model of therapeutic approach has had some successes, it has focused its attention on the “symptoms” of the pandemic. Laurenti Magesa, a key African theologian, points out that, biomedical approaches, “do not address the root causes.” He explains that what is required today is a comprehensive study. This study must take into consideration the socio-economic, cultural, religious, and political matrices that render women and girls prey to HIV/AIDS.\(^{41}\) Because of this multifaceted nature, HIV/AIDS


should be understood as a pandemic comprising of “a multiplicity of epidemics.”

HIV/AIDS is also “syndemic,” that is, “the result of the convergence of two or more epidemics in a place” interacting synergistically with each other inside human bodies and contributing, as a result of their interaction, to an excess burden of disease in a population.” It is therefore not surprising that HIV/AIDS manifests in not just physical illness but also in the “disparities, fractures and stresses in a given society.” In this sense, HIV/AIDS is an epidemic alongside other epidemics. Because of this, Alan Whiteside explains that AIDS has “found its most fertile locations in parts of the world where there is plenty of poverty and inequality, especially where this is gendered.”

In this context of inequalities, gender disparity and marginalization, it is not surprising that women and girls find themselves the most disproportionately affected social group to HIV/AIDS infections worldwide. Of the 34.5 million adults living with AIDS; 17.8 million are women aged 15 and over. This implies that, “Women account for more than half the number of people living with HIV worldwide.” And, “Young women (10-24 years old) are twice as likely to acquire HIV as young men the same age.”

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43 Ibid.


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In the same vein of the disproportionality and severity of HIV/AIDS among women and girls in the world, we should point out that:

In 2015, 20% of new HIV infections among adults were among women aged 15-24 despite this group only accounting for 11% of the global adult population. This equates to some 7,500 young women across the world acquiring HIV every week. In East and Southern Africa young women will acquire HIV five to seven years earlier than their male peers. In 2015, there were on average 4,500 new HIV infections among young women every week, double the number in young men.

In west and central Africa, 64% of new HIV infections among young people in 2015 occurred among young women. The difference is particularly striking in Cameroon, Côte d’Ivoire and Guinea where adolescent girls aged 15–19 are five times more likely to be infected with HIV than boys of the same age. Even in regions such as Eastern Europe and Central Asia, where the population most affected by HIV is injecting drugs users, the majority of whom are men, women make up a rising proportion of people living with HIV. In Russia, for example, the number of young women living with HIV aged 15-24 is double that among men of the same age.

Also, globally, AIDS remains the number one killer of women of reproductive age. This is especially true of Africa. In analyzing the conditions and status of women and girls with AIDS, Paul Farmer explains that, “the majority of women with AIDS had been robbed of their voices long before HIV appeared to further complicate their lives. In settings of entrenched elitism, they have been poor. In settings of entrenched racism, they have been women of color. In settings of entrenched sexism, they have been, of course, women.” For many women, “AIDS is just one more problem on top of many others …

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51 Paul Farmer, “Women, Poverty, and AIDS,” In Women, Poverty and AIDS: Sex, Drugs and Structural Violence, edited by Paul Farmer, Margaret Connors and Janie Simmons (Cambridge, MA: The
Attentiveness to the life stories of women with AIDS usually reveals it to be the latest in a string of tragedies.” In light of this argument, HIV/AIDS among women must be understood as part of the structural violence, “because it is neither nature nor pure individual will is at fault, but rather historically given (and often economically driven) processes and forces that conspire to constrain individual agency. Structural violence is visited upon all those whose social status denies them access to the fruits of scientific and social advances.”

It is equally significant to note that what the story of HIV/AIDS reveals is that, “The fact that certain ‘risk groups’ were identified early on often prevented medical practitioners and infected people’s own communities from seeing those who did not fall within one of those groups as not being afflicted with the same disease/illness.” Since HIV/AIDS was first identified among and associated with gay people, other social groups such as women and girls were not given the necessary attention. It took a while for the pandemic to be recognized as a serious ailment and threat among women and girls. This contributed to the unwillingness to diagnose, identify, name and treat the HIV/AIDS pandemic among women and girls with the urgency required and demanded. The implication of this is that, “The history of HIV & AIDS interpretations demonstrates that

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54 Trentaz, Theology in the Age of Global HIV & AIDS: Complicity and Possibility, 21.

the way the story is told influences what and who is seen and what and who is not seen in gathering and analyzing data and piecing together the fragments of an emerging disease pandemic.”\(^{56}\) The impact of HIV/AIDS on women and girls became the 2004 World AIDS Campaign with the catch phrase: “Have you heard me today?” In his message for the 2004 World AIDS Day, Doctor Peter Piot offered his assessment of the reality of HIV/AIDS on women and girls in the following way:

Half of all women live on less than US $2 a day; illiteracy rates among women are nearly 50% higher than men in many countries; only a small fraction of land is owned by women; and inheritance laws and criminal laws make it easy for men to take advantage of women. Each of these realities make women more vulnerable to HIV.

We need to give girls everywhere a chance at education, and petition governments around the world to enable women to win and inherit property. Women who are economically self-sufficient and secure are far less vulnerable to HIV. We need to get laws passed everywhere that make domestic abuse illegal, that treat rape as a real crime to be punished harshly.

To reverse these inequalities, we must focus attention and resources on increasing access to prevention and treatment services for women.\(^{57}\)

Human life is too precious a gift. And yet many women and girls do not simply live to their full potential or get to enjoy the benefits of a good life. HIV/AIDS is one of the setbacks that makes it difficult, if not impossible, for women and girls to enjoy their lives and full humanity, particularly in Africa. It is therefore imperative that as millions of people continue to die from HIV/AIDS, the world community, the country and the Church in Uganda should not be complacent in their prevention, treatment and the search for cure of the HIV/AIDS epidemic. The Bible teaches us that Jesus came so that human


beings might have life and have it to the full (Jn. 10:10). Today, however, the flourishing of human life is being curtailed and, in some cases, decimated by the HIV/AIDS scourge. The magnitude of suffering, misery, and deaths that emanates from HIV infections stand in direct contradiction of God’s plan for full flourishing of human life. More importantly, as Pope Francis reminded the world in his speech to the United Nations’ General Assembly during his pastoral visit in the USA, in making a critical assessment of political, economic, social or structural conundrums such as HIV/AIDS pandemic, we need to remember that “…we are dealing with real men and women who live, struggle and suffer and are often forced to live in great poverty, deprived of all rights…we must allow them to be dignified agents of their own destiny.”

In light of Pope Francis’s call to take seriously the place of the human person in policy making and transforming of structures as they impinge on the dignity of human person(s), we have reason to celebrate the fact that, globally, we have realized the reduction in numbers of the AIDS-related deaths and mother-child transmission of HIV; and increased numbers of people receiving antiretroviral therapies, the world community today must continue to pursue policies and take practical steps in the


prevention, treatment and finding of cure for HIV/AIDS.

*Gendered Vulnerability to Women and Girls to HIV/AIDS on Continental Level: Sub-Saharan Africa*

The need to be vigilant and work assiduously to prevent, slow down and eradicate the HIV/AIDS infections and deaths becomes more critical and urgent on the African continent. While HIV/AIDS is a global epidemic, the African continent has borne the brunt of this lethal pandemic. Festo Mkenda asserts that, “If God looked down on earth to assess the devastation wrought by HIV and AIDS, God would first see Africa. The reality in other parts of the world would only be a cut-down representation of the real thing.”62 Adriaan S. Van Klinken further points out that, “In the present-day sub-Saharan Africa, the HIV epidemic is one of the most disruptive social experiences on the continent. It causes bodily, social, and spiritual suffering of millions of people and it brings sickness and death.”63 It is also true that, “Although in the West HIV/AIDS is a chronic disease that has become increasingly treatable with proper medical care, among the poor of the global south it is often fatal. AIDS tends to cluster in families, killing adults and leaving their children orphaned and sick.”64

In mapping the severity of HIV/AIDS, it is significant to point out that already in the 1990s, Paul Nugent predicted that a startling figure of 12 million Africans would

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perish due to AIDS, a number, “equivalent to the obliteration of the entire population of a medium-sized African country,” or “the number of Africans transported to the New World during the trans-Atlantic slave trade over three-and-a-half centuries.” Nugent’s predicted numbers were exceeded. By 2002, 17 million Africans had died of HIV/AIDS and another 29 million were infected and living with the HIV virus. Today Africa is home to 25 million people living with HIV. As of 2015, Eastern and Southern Africa alone accounted for 46% of the global numbers of new HIV infections. The African continent accounts for 70% of people living with HIV in the entire world. While giving his assessment of the serious nature of AIDS in Africa, Peter Schwab states that, “the figures jump off the page” to “shock and numb.”

When one considers the Eastern and Southern parts of Africa, the number of adults aged 15 and over living with HIV in 2015 was 19 million and more than a half of these were women. According to Agbonkhianmeghe E. Orobator, “sub-Saharan records


70 UNAIDS, “Fact Sheet 2016 - Global Statistics 2015,”
the largest concentration of HIV infection (70%), the largest number of AIDS-related
deaths (75%), and the highest average of sero-prevalence among adults (8.8%).”

According to Linda Morison, sub-Saharan Africa “is the only region [of the world] where
more women than men are infected.” She attributes this anomaly to “Patterns of sexual
behavior whereby young women have sex with older men, in combination with high
susceptibility to infection in very young women has resulted in extremely high infection
rates in young women in some parts of Africa.” Morison’s assessment is right only to
an extent. It does not tell the entire story. Deeper questions need to be raised why such is
the case. Far beyond the issue of promiscuity that Morison seems to infer and indicate,
there are deep-rooted economic, social, political and cultural factors that exacerbate
women’s and girls’ vulnerability to HIV/AIDS in such a disproportionate manner in
comparison to men and boys as will be demonstrated in Chapter Two. Stephen Lewis, the
U.N. Secretary General’s special envoy for HIV/AIDS in Africa, asserts that:

In a pretty fundamental way the biggest challenge is gender. It is to get the entire
continent to understand that women are truly the most vulnerable in this pandemic,
that until there is a much greater degree of gender equality women will always
constitute the greatest number of new infections and there is such a degree of
cultural oppression that has to be overcome before we really manage to deal with
the pandemic. You simply cannot have millions of women effectively sexually
subjugated, forced into sex which is risky without condoms, without the capacity to
say no, without the right to negotiate sexual relationships. It’s just an impossible
situation for women and there has rarely been a disease which is so rooted in
inequality between sexes. Therefore, gender is at the heart of the pandemic and until

http://www.unaids.org/sites/default/files/media_asset/20150901_FactSheet_2015_en.pdf (accessed May 20,
2017).

71 Orobator, S.J., From Crisis to Kairos: The Mission of the Church in the time of HIV/AIDS,
Refugees and Poverty, 185.

72 Linda Morison, “The Global Epidemiology of HIV/AIDS,” British Medical Bulletin (September
2001), In Laurent Magesa, “Contextualizing HIV and AIDS in the African Reality,” In HIV & AIDS in
Africa: Christian Reflection, Public Health and Social Transformation, edited by Jacquineau Azetsop, S.J.
governments and the world understand that it will be very difficult to overcome it….

Given the severity of devastation and mortality that HIV/AIDS has caused, it is not surprising that Africa is also home to the largest number of orphans in the world due to HIV/AIDS:

Worldwide, it is estimated that 17.8 million children under 18 have been orphaned by AIDS, and around 15.1 million, or 85% of these children live in sub-Saharan Africa. In some countries which are badly affected by the epidemic, a large percentage of all orphaned children – for example 74% in Zimbabwe, and 63% in South Africa – are orphaned due to AIDS.

Reflecting on the plight of orphaned children in our world today, Father Donald H. Dunson says:

All across our world, children are falling victim to powerful forces beyond their control, forces that sabotage the bright promise tomorrow should bear on them. Never before has the world faced the possibility of so many orphans. The expectation of secure love and hope in the future that is so natural to young children is being replaced by the reality of rejection and near despair when death from AIDS pandemic robs millions of children of their parents.

**Historical Implications of the HIV/AIDS Pandemic in Uganda**

Located in East Africa, Uganda is a landlocked country. It borders Kenya to the East, the Democratic Republic of Congo to the West, Tanzania and Rwanda to the South, and South Sudan to the North. Uganda was a British colony. The first explorers to arrive in Uganda were John Hannington Speke and James Grant (1856). They were later joined

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by Sir Samuel Baker and Henry Morton Stanley in 1875. The external borders of Uganda were first determined by international agreements at the Berlin Conference in 1884-1885. The boundaries were drawn without regard for cultural groups and ethnic patterns. To the British colonialists, latitudes and longitudes were more acceptable as territorial limits than peoples.\textsuperscript{76}

Uganda’s political history has been turbulent from the time Uganda became independent from the British. There are a number of factors that account for this. According to Richard Stanbrook:

The Imperial powers failed in various ways to erect a sturdy base for responsive and effective post-colonial states. In the first place, the territories created by imperialism were, in a dual sense, artificial entities, and this has produced severe problems in state building. First, their political forms at independence had not evolved organically out of local tradition. Instead, Colonial Powers transferred Western models of State organization to Africa. These imports might have taken root in local political cultures, given an extended germination period. However, Colonialism was an almost fleeting experience in most of Africa, too transitory to institutionalize alien political structures and norms. Secondly, the Colonies and protectorates were artificial in the sense that the late nineteenth-Century European imperialists paid no heed to cultural and linguistic criteria in carving out national boundaries. Diverse and sometimes hostile peoples were grouped within common borders. These differences were exacerbated, albeit unintentionally, by colonial-induced social, economic and political change, the legitimacy crisis and ethnic tensions that bedevil post-colonial politics must be understood in the context of the colonial epoch.\textsuperscript{77}

In addition to these catastrophic failures on the part of the British colonialists, the economic policies set in place served to precipitate a risky environment for further political instabilities. According to Cassie J. E. H. Trentaz, in Uganda, the British colonial history and the economic policies put in place revolved around the cultivation of


cash crops of cotton and coffee. This meant keeping the Ugandans in rural areas to work the fields. The British discouraged Ugandans from embracing trade in the cities. They placed trade and the processing of crops in the hands of Asians. This created racial and economic class tensions. The animosity between Ugandans and Asians became more pronounced with the rise to political power of Idi Amin in 1970s, resulting in the expulsion of people of Asian descent from the country.78

The failure to establish stable political systems and prepare local people to take up the leadership mantle resulted in political upheavals, state-sponsored violence, economic meltdown, and the breakdown in the legal systems and the healthcare sector, all of which crippled Uganda. It meant that the country was not just vulnerable to political turmoil, it was enfeebled economically, socially, legally, and medically. It is in this environment of political vacuum, sick economy, immoral social fabric, and the collapse of the rule of law that HIV/AIDS emerged.

According to John Iliffe, a professor at the University of Cambridge who has done extensive research and writing on HIV/AIDS in Africa, “AIDS first appeared on the Uganda-Tanzania border in the late 1970s and HIV a few years earlier.”79 This was along the shores of Lake Victoria among the fishing community in Kyotera, Masaka, and Rakai regions of Uganda and Kagera region on the Tanzanian side. By the 1982, Kitovu Mission Hospital in Masaka district in Uganda had recorded 84 cases. The local people branded the new disease “slim” “because of the wasting that was commonly associated

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with the disease.” At the very onset, HIV/AIDS spread like a bush fire, killing many adults and leaving children orphaned. According to Doctor S. I. Okware, symptoms that were familiar and seen among the AIDS patients were reported in 1982:

When several businessmen died in Kasenero, an isolated small fishing village on Lake Victoria. This small town was also known for smuggling and illicit trade, and when these deaths occurred fellow traders shrugged it off as witchcraft. Others thought it was a natural justice against those who had cheated. The only common characteristic the victims had was that they were all young and sexually active and stayed away from home for several days chasing wealth and presumably using it generously for their recreation and merriment.”

Similarly, another doctor, Anthony Lwegaba, while describing the symptoms associated with HIV/AIDS or ‘slims’ as it has been known in Uganda for a long time, reported in 1984 from the Rakai district, the following:

1. The patient experiences general malaise, and on and-off ‘fevers, for which he may be treated ‘self’ or otherwise with Aspirin, chloroquine and chloramphenicol etc. In due course, the patient develops gradual loss of appetite.

II. In the next six months, diarrhea appears on-and-off. There is gradual weight loss and the patient is pale. Most patients at this point in time will rely on traditional healers, as the disease to many is attributed to witchcraft.

III. After one year, the patient develops a skin disease … which is very itchy. Apparently it is all over the body. The skin becomes ugly with hyperpigmented scars. There may be a cough usually dry but other times productive.

IV. Earlier on after a year, the patient may be so weak that even when taken to hospital (not much can be done due to late reporting), she goes into chronicity and death.

Doctor Lwegaba placed the culpability for the spread of “slim” on the fishermen


and smugglers who frequented the lakeshores of Lake Victoria for the exploitation of the Nile perch fisheries and the Magedo (illegal) economy. As HIV/AIDS spread and progressed, it was evident that women and girls became the greatest victims of the pandemic. The reason for such severe and negative consequences of HIV/AIDS on the health of women and girls was in part due to the subordinate position of women and girls in society; lack of access to information, education and communication; poorly equipped health facilities; lack of training, independent income, property and legal rights. From the Lake Victoria shores, HIV/AIDS spread to other parts of the country. It became an epidemic both in the rural and urban areas due to the mobility of people from the Lake Victoria area and surrounding towns of Rakai, Kyotera and Masaka to other parts of the country. There were three main groups that were responsible for the transmission of HIV/AIDS. The first groups were the truck drivers along the trans-African highway, that is, the Mombasa-Nairobi-Kampala-Kigali highway; the soldiers; and the migrant workers. John Iliffe explains that:

The prominence of the trans-African highway was one indication that the epidemic had by the mid-1980s spread far beyond the west lake region. Three categories of mobile men appear especially to have carried it. One was the military: General Amin’s soldiers retreating from the infected border region in 1978-9, Tanzania troops pursuing them through western and northern Uganda, and Ugandan forces seeking to repress rebellion in the north and east during the 1980s. The northern Gulu district, the chief source of Amin’s troops, recorded 15 per cent prevalence among pregnant women in 1987 and probably became the main route by which HIV entered the Southern Sudan...A second group carrying the virus were long-distance drivers who infected or were infected by the girls at the overnight stops in towns like Lyatonde...The third occupational group, with a more diffuse and less certain impact, were migrant labourers, carrying the disease


to rural areas.\textsuperscript{85}

It is evident from the above citation that conflicts and political upheavals play a role in driving the spread of the AIDS pandemic. Undisciplined soldiers find it easy to target, rape and infect women and girls with ailments such as HIV/AIDS and other sexually transmitted diseases.

In all this, what emerges is that HIV/AIDS does not happen by accident. HIV/AIDS is “produced by social, cultural and economic realities. Each ‘risk environment’ is different based on the history of the place and its peoples. Migration of peoples, rapid change, economic growth or depression, warfare and conflict, and other structural inequalities all provide potential for the creation of ‘risk environments’ as the reordering of health/wellness and disease/illness.”\textsuperscript{86} What is evident also is that although individuals have some responsibility as moral agents in the choices and decisions they make, “Social and ideological structures impact the decision available to those people living within an environment … People who live, love, learn, and work within a ‘risk environment’ make decisions that are rational for them in their particular circumstances.”\textsuperscript{87} In cases of risk environment, people are compelled to make decisions that may not or are not in their best interest in the long term.\textsuperscript{88} Cassie Trentaz points out that:

The language of ‘risk environments’ is not meant to exempt people from


\textsuperscript{86} Trentaz, Theology in the Age of Global HIV & AIDS: Complicity and Possibility, 27.

\textsuperscript{87} Ibid., 28.

responsibility or accountability for their actions. Rather, it refuses to reduce culpability merely to the one at the end of chains of decisions. By broadening culpability beyond the individual, one also increases the number and breadth of possible options for addressing and interpreting the problem at various points along the chain of causation. The actions of individuals are important. But complicity is shared by all who participate in the structures that produce increased risk for some while maintaining decreased risk for others. Recognizing the multifaceted, mutually influencing nature of the pandemic reveals why people are contracting the virus. It will also better enable adjustments in areas that will more likely impact the virus’s further spread. The framework of ‘risk environments’ resists easy blaming of those already infected and the conflation of structural violence with ‘cultural differences’ linking personal agency with structural constraints and places responsibility upon us all to take a look at how our ideas and organizing structures operate to the benefit of some and detriment of others. By doing so, it opens up the possibility of seeing new connections and creating new responses that will require a communal ethic of ‘risk-sharing’ in the age of global HIV &AIDS. 

With the advent to power of the National Resistance Movement (NRM) government of President Museveni in 1986 and recognizing the devastating effects of HIV/AIDS on the Ugandan population, it became clear that the NRM government needed to take steps to turn the tides. The NRM government acknowledged the dangers posed by the HIV/AIDS pandemic and embarked on a campaign of mobilization, sensitization, education and strategic planning to avert the pandemic. According to Agbonkhianmeghe E. Orobator, S.J., “In the history of HIV/AIDS in sub-Saharan Africa Uganda enjoys a double reputation.” This is precisely due to two reasons: “Uganda was the first to report AIDS cases in 1982” and was “the first African country to have subdued a major HIV/AIDS epidemic.”

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Orobator points out that the declining sero-prevalence rates in Uganda could be attributed to a number of factors: “the openness of the government about the disease, the political will to mobilize local and international resources to combat the threat of HIV/AIDS, the government’s ability to galvanize a wide spectrum of civil society, business organizations, NGOs, voluntary associations, religious groups, and all strata of Uganda’s demographic configuration to enlist in the campaign.” However, glorious as Uganda’s image seems on the global stage, as a country, Uganda is still far from subduing the HIV/AIDS pandemic. If recent statistics are anything to go by, much needs to be done in terms of reduction, education, and prevention of HIV/AIDS infections.

The challenge for the country and Church leadership in Uganda, Non-Governmental Organizations, and the private as well as the public sectors is to stay vigilant, actively engaged, and foresighted in terms of drawing attention to the dangers posed by the HIV/AIDS pandemic. The various social actors need to continue to promote moral choices with regard to the choices people make with regard to the gift of sexuality, to encourage people to be forthright about testing and getting the needed treatment, and to find ways to close loopholes in terms of addressing the factors that cause and result from infections with HIV/AIDS and other sexually transmitted infections (STIs).

The HIV/AIDS pandemic presents Uganda with a “moment of reckoning.” But it is also an “opportunity moment” to harness every resource available to deter further spread of HIV/AIDS. Festo Mkenda is right in observing that HIV and AIDS have manifested the preexisting conditions that need healing and that to ignore such healing might hamper our efforts to combat the disease and cripple our preparedness to deal with other future

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Gendered Vulnerability of Women and Girls to HIV/AIDS in Uganda Today

In Uganda, the burden of HIV/AIDS among women is no less telling. Of the 1.5 million people infected with AIDS in 2012, 52% were women. As of 2015 UNAIDS HIV/AIDS report on Uganda, a total of 1.4 million adults aged 15 years and over were living with HIV; of these 790,000 were women aged 15 and over, 56% of the total.

According to The AIDS Support Organization (TASO) in Uganda:

The HIV epidemic in Uganda continues to disproportionately affect women and thereby hindering progress in the attainment of gender parity and development goals. These are the hard facts; HIV prevalence is higher in women than for men, there are more new HIV infections in women than in men with the number much higher in young women aged between 15 and 24 years than young men in the same age bracket; the burden of care at family and community squarely rests on women. Related issues to these facts include gender-based violence (including sexual abuse), lack of access to information and education, health services, social protection and productive resources to cope with these unfortunate inequities and injustices.”

According to the 2013 Uganda HIV and AIDS Country Progress report to the United Nations AIDS (UNAIDS), since the emergence of HIV/AIDS in Uganda, HIV prevalence has consistently been higher among women than men. Likewise, the total burden of HIV in Uganda as shown by the number of persons in the country who are living with HIV (PLHIV) has continued to increase. In 2012, the number of persons

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95 Ibid.

living with HIV accounted for 93% of the adults aged 15 years and above, women alone accounting for 56% of the adults.\textsuperscript{97} As of 2014, “HIV prevalence among young people aged 15-24 in Uganda was estimated at 3.72% for women and 2.32% for men.”\textsuperscript{98} The good news for Uganda is that the AIDS related deaths are declining and the number of people living with HIV on antiretroviral therapies is growing as the 2014 country report indicates.\textsuperscript{99} Even though AIDS-related deaths are declining and more people with HIV/AIDS are accessing the antiretroviral therapies, as of 2015, 40% of people with HIV/AIDS did not receive antiretroviral therapies; and again as of 2015, the HIV prevalence among adults between ages 15 and 49 stood at 7.1% and among men having sex with men at 13% as of 2013.\textsuperscript{100} Also, Uganda continues to register new cases of infection. According to the Ugandan Newspaper, \textit{The New Vision}, every week, “570 young women aged between 15 and 24 years get infected with HIV. In Africa, Uganda is second to South Africa where 2,363 people get infected with HIV weekly, compared to 468 for Kenya, 491 for Tanzania, 25 for Rwanda and 2 for Burundi.”\textsuperscript{101} Uganda has the highest percentage of new HIV infections in eastern Africa.\textsuperscript{102}


\textsuperscript{102} Vision Reporter, “Uganda HIV Infection Highest in Region,” New Vision,
Furthermore, as 2017 Uganda Country Report to UNAIDS, of the 1200000 adults aged 15 and over living with HIV; 750 000 were women aged 15 and over and 490 000 were men aged 15 and over; implying women accounted for 62 % of the total HIV infections and men accounted for 48%. Also, the HIV prevalence rate among adults aged between 15 and 49 stood at 5.9. The HIV prevalence rate among women aged between 15 and 49 stood at 7.3 and among men of the same age bracket at 4.5.\footnote{UNAIDS, “Country factsheets Uganda/ 2017,” http://www.unaids.org/en/regionscountries/countries/uganda (accessed August 2, 2017).} While there is a general decline of HIV infections among the Ugandan population; among women and girls, the infection continues to rise.

Moreover, “male infidelity in marriage is one of the principal causes of HIV infection among women.” According to Dr. Sheila Ndyabanabangi in the Ministry of Health, Kampala, Uganda, “There is a high incidence of infection amongst faithful wives of errant husbands. The woman most at risk is a woman in a monogamous marriage.”\footnote{Dr. Sheila Ndyabanabangi, Mental Health Program, Ministry of Health, an Interview with Human Rights Watch, Kampala, Uganda, January 14, 2003; In Human Rights Watch, Just Die Quietly: Domestic Violence and Women’s Vulnerability to HIV in Uganda (Kampala, Uganda: Human Rights Watch Uganda, 2003), 22.} Even in cases of discordant couples where men are HIV-positive, and women are HIV-negative, it is not uncommon for such women to be compelled to have intercourse with their husbands; to be battered and to be threatened with harm if they refuse.

From the above demographic and statistical figures on the global, continental and national levels, it would not be far-fetched to conclude that HIV/AIDS has a human face and that face for the most part is female or feminine. It is the face of women and girls.
This is especially true in Sub-Saharan Africa and certainly the case in Uganda. Although Donald H. Dunson was speaking specifically about children, the same can be said of women and girls with HIV/AIDS. The female faces of women and girls with HIV/AIDS are an “open wound, a festering sore that calls into question our very humanity: Do we possess hearts that know how to nurture our own offspring?”105 I might add: do we possess hearts that know that women and girls are our own kin? Do we see women and girls as the most vulnerable and exploited members of our society and so opt to take a stand against their oppression, alienation and exploitation, and exposure to HIV/AIDS?

The proliferation of HIV/AIDS among women and girls in Uganda is a wakeup call to set priorities right when it comes to policy making and redressing the deprivations that women and girls suffer and are exposed to. The HIV/AIDS scourge calls us to question the very structures that render women particularly vulnerable to this pandemic and to lift up those structures and policies that promote women’s dignity, gender justice and empowerment. Dunson asserts that, “Every human face is an epiphany. In the face of the other, especially the vulnerable other, is a wordless call that awakens us to solidarity, to our connection with that other.”106 In the faces of women and girls with HIV/AIDS are human faces that invite us to solidarity, to see our humanity as bound to and with that of these women and girls.

The HIV/AIDS epidemic among women in Uganda presents the Catholic Church with a crisis with regard to its prophetic witness. If the Church has a prophetic role in scrutinizing the “Signs of the Times” in light of the Gospel, as the Second Vatican

105 Donald H. Dunson, No Room at the Table: Earth’s Most Vulnerable Children (Maryknoll, New York: Orbis Books, 2003), 9-10.
106 Ibid., 9-10.
Council states in *Gaudium et Spes*, then HIV/AIDS is one of the signs of our days.

Teresa Okure challenges the church-family to:

- Reexamine whether our current way of being church in terms of interpersonal relationships, organizational structures, and use of language, actually mirrors what we claim to be, the church-family of God…
- To be the Church-family of God in service to reconciliation, justice, and peace impels us to be God’s building and tilling (1 Cor 3:9; Eph 2:10), the visible, tangible witnesses of this divine reconciliation, by relating to one another as divine siblings.

Okure’s call for internal introspection in regard to the women question continues to be the need of the hour and is also reiterated by the Second Vatican Council when it states that, “Every renewal of the Church essentially consists in an increase of fidelity to her own calling … Christ summons the Church as she goes her pilgrim way … to that continual way … to the continual reformation of which she always has need, insofar as she is a human institution here on earth.”

Given the fact that HIV/AIDS thrives in conditions of inequalities, gender biases, socio-economic marginalization, deprivation and discrimination, liberation theologians have sought to question such injustices perpetuated against the most vulnerable members of society, in our case, the women and girls affected by and living with HIV/AIDS.

Awareness of such oppressive structures demands a transformation of such structures so that they are better positioned to serve human persons, particularly the most vulnerable.

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among us. In the words of Miguel A. De La Torre, “Those who benefit from the power and privilege of social structures can encounter the Absolute only through their own self-negation by crucifying their power and privilege.”

De La Torre also notes that:

The ethical task before those who are oppressed and those who are privileged by the present institutionalized structures is not to reverse roles or to share the role of privileged at the expense of some other group but, rather, to dismantle the very structures responsible for causing injustices along race, class, and gender lines, regardless of the attitudes bound to those structures. Only then can all within society, the marginalized as well as the privileged, achieve their full humanity and become able to live the abundant life offered by Christ.

This first chapter has given an overview of the HIV/AIDS pandemic as it relates to the world, the African continent and the country of Uganda, including the historical context in which HIV/AIDS arose. We have also spelled out the particular vulnerability that women and girls suffer and experience in relation to the HIV/AIDS pandemic. Since the context of this dissertation is Uganda, we argue that the female face of HIV/AIDS in Uganda challenges the Church and the State of Uganda to play and fulfill their critical and respective roles in responding to the HIV/AIDS pandemic, that is, in the prevention, reduction in the infection rates, treatment, and in the search for a cure to the HIV/AIDS by coordinating, collaborating and cooperating with the international and continental communities. We will now proceed to assess the factors that are responsible for the feminization of HIV/AIDS in Uganda.

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111 Ibid.
CHAPTER TWO

FACTORS RESPONSIBLE FOR THE GENDER VULNERABILITY OF WOMEN AND GIRLS TO THE HIV/AIDS PANDEMIC IN UGANDA

In this chapter, we analyze the principal reasons for the persistence of gendered vulnerability of women and girls to HIV/AIDS in Uganda today. We pay particular attention to the economic and political factors; social and cultural factors; gendered violence; and stigmatization. Following this, we will proceed to analyze the attitudes and beliefs (description of evaluations) underlying the responses of the various social actors, for example, the HIV/AIDS patients themselves, especially women and girls; the Church and nation of Uganda; Non-governmental organizations (NGOS) and the international community.

Economic and Political Factors

Poverty

Today, it is acknowledged that there is a direct link between HIV/AIDS and poverty. Poverty contributes to and aggravates immensely the rapid spread of HIV/AIDS pandemic in Uganda and all over Africa. Poverty, as Michel S. Kamanzi points out, “is at once a cause and a consequence of AIDS in Africa. It leads many people to be exposed to a probable infection. The circumstances of poor persons often compel them to engage in high risk behavior to survive. A prime instance of this is prostitution.”112 Similarly, Eileen Stillwagon points out that HIV/AIDS infection “is a predictable outcome of an

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environment of poverty, worsening nutrition, chronic parasitic infection, and limited access to medical care."\textsuperscript{113} Ronald Nicolson concurs with Stillwaggon by pointing out that HIV/AIDS is "a sickness of the poor. It is a sickness of the Third World. It is a sickness of women and children."\textsuperscript{114} It is not a coincidence that the majority of HIV/AIDS infections occur among the poorest people and nations of the world. If there is something we have learned over the past three decades, it is the fact that HIV infections occur mostly in the poorest region of the world: sub-Saharan Africa.\textsuperscript{115} Mulligan rightly observes that:

Poverty creates a certain set of social conditions that facilitates the rapid spread of HIV among a population…. Among the poor, women emerge as a group that is particularly disadvantaged. They often lack the same economic opportunities and financial independence as men, but their poverty is associated with and exacerbated by their lack of social independence. It is not uncommon for women to find themselves economically, socially, and culturally dependent on their male counterparts.\textsuperscript{116}

This is the predicament that women and girls in Uganda find themselves. Poverty not only increases, but also, worsens women’s vulnerability to HIV/AIDS infections. Paul Farmer notes that the desire for survival and the need to feed the children drives some women to engage in high risk sexual activities in exchange for money. In these


\textsuperscript{116} Ibid., 122.
cases, sex remains the last resort and the only option for survival. And again, in most cases, women do not have the bargaining power to negotiate or refuse risky sex.  

Brooke Schoepf, writing from the viewpoint of Congo, points out that AIDS has “transformed many women’s survival strategies into death strategies.”

Writing in the context of poverty and AIDS in Africa, Agbonkhianmeghe E. Orobator, S.J, states that, “Even within these impoverished populations, the concentration of HIV/AIDS rises significantly in proportion to the intensity of social exclusion, economic marginalization and pauperization.” It is vital to note that social exclusion, economic marginalization and pauperization are obstacles and inequalities majorly experienced by women and girls.

Lisa Sowle Cahill encapsulates the devastating nature of poverty with the following insight:

People living in poverty not only suffer a general loss of physical well-being, they often are forced to adopt ‘survival strategies’ that expose them to health risks. Married couples may be split apart when men leave traditional agricultural work to find higher paid employment in the cities. There they meet women who, themselves under economic duress, have either turned to prostitution, or are willing to enter a more long-term arrangement, in which they trade sexual access and emotional or domestic support to a man in exchange for financial support for themselves and possibly their children. Meanwhile, the rural wives of the city-employed men remain financially dependent on their wages, and socially dependent on the marriage relationship for recognition and respect in the local community. Their men may bring home disease along with their pay. Upon the deaths of such men, their wives may in some cases be by custom passed on to male relatives, through whom HIV is transmitted ever-more widely in the extended family. Granting the centrality in some cultures of an ethic of promoting

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life through childbearing, and the value of levirate marriage in providing for widows, the unequal position of women in defining these traditional priorities certainly plays a role in exposing women and children to HIV/AIDS. In any case, women remain on the losing end. The power imbalance between men and women in the social, economic and gender relations all serve to compound women’s and girls’ vulnerability to HIV/AIDS. According to ActionAid International, Uganda:

Women are especially at risk in heterosexual marriages or long-term unions where men commonly engage in sex outside the union and women face abuse if they insist on condom use. Many girls and women are subjected to rape, cannot stop husbands’ infidelity, or are within abusive relationships and lack the negotiating power to insist on condom use. These factors contribute to exposure to HIV.

Rural Ugandan women are particularly vulnerable. Even in homes where women are the breadwinners and perform most of the agricultural and manual labor, it is the men who control the proceeds that come from the sale of crops and any business ventures. In times of famine, young girls are forced into marriages, not of their choosing. In educational settings, girls and women are compelled by some of their professors and sugar daddies to offer sex in exchange for better grades and financial support respectively. In all the above settings, women and girls remain vulnerable. Carolyn, a student at Kyambogo University in Uganda, attests to the following:

Here at the university, if one does not take care of herself, one dies. You have professors going after beautiful girls. Sometimes, they promise one good grades but those grades come with sicknesses. Then you have your fellow students, the boys, chasing after you. The problem with most of us is that we come from poor families and we have needs. By the time some of us graduate, we also graduate with AIDS.


Reflecting on the ethical conundrum that women and girls face today in relation to the HIV/AIDS epidemic, Margaret Farley raises an important question:

Why do the women bear a disproportionate share in the burden of the AIDS pandemic? Without power over their sexual lives, they have little control over occasions of infection. Whether they are pressured into marriages not of their choosing, or as widows coerced into sexual relations with relatives of former husbands, or prevented from the knowledge and medical assistance necessary to limit their childbearing, they live in a context where their subordination to men determines their health or sickness, life or death. Even in university settings, where education regarding sex and sexually-transmitted disease is presumably available, massive numbers of women students become infected.\footnote{Margaret A. Farley, “Compassionate Respect: A Feminist Approach to Medical Ethics and Other Questions,” (New York/ Mahwah, NJ: Paulist Press, 2002), 20, In Reflecting Theologically on AIDS, A Global Challenge, edited by Robin Gill (London: SCM Press, 2007), 12.}

Mercy Amba Oduyoye concurs by contending that, “Whatever poverty women as mothers struggle with, cannot be understood apart from the real poverty-maker, powerlessness, the inability to influence the decisions that condition one’s life.”\footnote{Mercy Amba Oduyoye, Beads and Strands: Reflections of an African Woman on Christianity in Africa (Maryknoll, New York: Orbis Books, 2004), 59.}

Human Rights Watch, Uganda, observes that, “lack of economic autonomy hampers women’s capacity to escape from abusive relationships, thereby exacerbating their vulnerability to violence and HIV infection.”\footnote{Human Rights Watch, Just Die Quietly: Domestic Violence and Women’s Vulnerability to HIV in Uganda (Human Rights Watch: Human Rights Watch Uganda, 2003), 2.} The burdens that women and girls carry are many and excruciating. Poverty is one among the many burdens. It is critical that any serious solutions to control, prevent and halt the spread of HIV/AIDS must entail efforts to reduce and stop the scourge of poverty.

Furthermore, poverty together with the high cost of antiretroviral therapies makes it difficult to combat HIV/AIDS in developing countries. Most people in developing countries like Uganda simply cannot afford to pay for or buy the medications. This,
coupled with sometimes the unavailability of these medicines in rural clinics and hospitals, makes it hard for women and girls trying to find ways to keep alive. The drugs may be sold and available in cities but not in the rural settings. The medical personnel are likewise ill-equipped or insufficiently trained to deal with complicated illnesses like HIV/AIDS. It is also the case that most of the clinics in rural areas have no running water, medical gloves, syringes and many other medical supplies. The implication is that most of the people living with HIV/AIDS in developing countries like Uganda do not have access to medications nor proper health care. The Fifth Conference of the Ecumenical Association of Third World Theologians writing about the plight of women states that:

Poverty and oppression in the Third World are not just a situation of deprivation; they bring unjust and untimely death to millions of women, men, and children through hunger, disease, and repression. But death in the Third World is not only physical. Countless persons are degraded and have suffered the loss of their identity, dignity, and personhood. Not only individual persons are killed, but also entire cultures and religious traditions have been annihilated by colonialism and by more modern forms of repressions. The poor and the oppressed are struggling not only for a better economic standard but for freedom and dignity, for life and full humanity. They risk their life for the sake of life and undergo death to undo the powers of death.125

Women and girls are the poor majority in third world countries and have to depend on men for their survival. It is not surprising that, caught up in poverty and oppression; women tend to be the greatest victims of the HIV/AIDS epidemic.

It is also true that poverty has contributed greatly to the rural-urban migrations.

People desperate for employment and better living conditions and opportunities are

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forced to leave their villages for cities with the hope of earning a better living for themselves and their families. The rural-urban migrations have resulted in separation of families and led to street children. Once in the cities, most rural and uneducated people find it difficult to secure employment. They are compelled to live in poor conditions, often find accommodations in slum areas, where women and girls are exposed to sexual violence, and social and economic hardships. Even in cases where female workers are given employment in households in the cities, female domestic workers are exposed to sexual encounters with all male partners within households. This, in turn, exposes women and girls to HIV and AIDS.\textsuperscript{126} In these circumstances, when the workers return to their rural or village settings, “they bring home not just their meager salaries or payments but diseases” as well. As Aylward Shorter and Edwin Onyancha put it, “The acute poverty of Africa’s rural villages and teeming urban slums is the classic breeding ground for the HIV virus.”\textsuperscript{127} Poverty has also been responsible for the early child labor. Ruth Muthei James explains that:

On the one hand, children facing extremes of poverty drop out of school in search of work. On the other, prospective employers facing their own economic problems often choose to employ young children whom they can underpay and exploit at will. Hence, those children who work as “house helps” are underpaid and are most often poorly treated. Forced to rise at 5:00 A.M. many only go to bed past midnight. While working in such homes, many girls are subjected to physical and sexual abuse with life threatening consequences including psychological trauma, the risk of early pregnancy and the danger of contracting HIV/AIDS and other STIs.\textsuperscript{128}


\textsuperscript{128} Ruth Muthei James, “Factors that Render the Girl-Child Vulnerable to HIV/AIDS in Kenya,”
It is critically important to note that poverty in Uganda and the rest of Africa is not a result of an accident. Poverty is a product of social, political, economic and cultural factors. The poor, Gustavo Gutierrez reminds us:

are a by-product of the system in which we live and for which we are responsible. They are marginalized by our social and cultural world. They are the oppressed, exploited proletariat, robbed of the fruit of their labor and despoiled of their humanity. Hence the poverty of the poor is not a call to generous relief action, but a demand that we go and build a different kind of social order.  

Leonardo Boff elaborates that, “The poor are those who suffer injustice. Their poverty is produced by mechanisms of impoverishment and exploitation. Their poverty is therefore an evil and an injustice.” Similarly, Paul E. Farmer observes that, “Every careful survey, across boundaries of time and space, shows us that the poor are sicker than the non-poor. They are at increased risk of dying prematurely, whether from increased exposure to pathogens (including pathogenic situations) or from decreased access to services — or, as in most often the case, from both of these ‘risk factors’ working together.”

Poverty is a result of social, economic and political conditions that work together

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to create and compound situations of deprivation, marginalization, and exploitation. Inferring from Gustavo, Boff and Farmer, it is not surprising then that the majority of people infected and dying from HIV/AIDS are the poor. This is certainly true in both developing and developed nations. Lesley Doyal and Len Doyal are right in drawing a conclusion that, “HIV (and the conditions associated with AIDS) are not diseases of poverty so much as diseases of the poor.”132 The poor have long been robbed of their voices and cultural identities. They are the socially excluded and politically oppressed. Poverty only worsens their situations.

In the case of Uganda, as is the case with most of Africa, poverty owes its roots to slavery trade, colonialism and neocolonialism. Through slavery and colonialism, African nations were robbed of human and material resources. According to a Ugandan theologian, Peter Kanyandago:

It can be argued that the external impetus that triggered the reckless exploitation of Africa’s resources was essentially caused by a lack of resources in Arab and Western countries. However, in addition to the slave trade and colonialism as root causes, one should add many other factors, including the betrayal of the continent by its past and present leaders. Foreign agents of exploitation, whether states or multinational companies, have usually found accomplices among Africans themselves. Other factors to be noted include ill-adapted education systems in Africa, which contribute to poverty because through them African governments, parents, and students often invest in practices and ideologies that promote exploitation…In addition to the lack of resources that pushed Western Europe and Arab states to search for resources outside of their borders, the plundering of Africa’s resources often was justified by an ethico-anthropological belief that non-Westerners were not human or fully human. This belief was used to exploit and plunder these people’s human and natural resources.133

George B. N. Ayittey likewise explains that the imperial scramble for Africa and

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its colonization were motivated by three major factors: the need for new markets for surplus manufactured goods as a result of the growing industrialization in Europe, increasing industrial competition for raw materials such as cotton, rubber, and minerals propelled by an impetus to control or own resources for the supply, and the need for colonies for investment of surplus capital. Unfortunately, as European powers benefitted in all the above aspects, African nations were left in poverty.

Today, Lesley Doyal and Len Doyal contend that poverty is “linked to a more recent global restructuring which has exacerbated old problems while simultaneously creating new ones. The mechanisms by which these changes occur are complex and multifaceted, but the overall impact has been to put severe constraints on those aspects of development needed for improvements in population health.” Structural adjustment programs (SAPs) that are imposed from above without taking into consideration local conditions of the people and the local economies of countries have been detrimental to the development of African nations such as Uganda. While the intentions of the developed nations were to move Africa out of poverty, they ended up marring Africa and miring it deeper in poverty.

To assess the magnitude of poverty and the structural adjustment Programs (SAPs) on Uganda in particular and on Africa in general, Jozef D. Zalot and Benedict Guevin, OSB, argue that:

African economies are externally dependent and lack both the capital and the

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135 Lesley Doyal with Len Doyal, *Living with HIV and Dying with AIDS, Diversity, Inequality and Human Rights in the Global Pandemic*, 17.

technical know-how to produce a variety of needed goods. They must deal with unfavorable trade relationships in the global marketplace, ill-advised exchange rates policies, wasteful government bureaucracies, political unrest, and the ongoing scourge of HIV/AIDS. Both the scope and complexity of problems that face sub-Saharan nations are tremendous.\footnote{137}{Zalot and Benedict Guevin, OSB, Catholic Ethics in Today’s World, Revised Edition, 99.}

Furthermore, the structural adjustment programs in Africa were problematic and unethical for a variety of reasons: increase cost of living for the poor, force many to live in sub-human conditions with no opportunity for accessing basic needs, and linking financial aid with political reforms. According to Jozef D. Zalot and Benedict Guevin, OSB:

By forcing governments to end price subsidies for consumer goods and services, the World Bank and IMF caused a dramatic increase in the cost of living on the African continent. This cost of living, coupled with rampant poverty, forced many people to forego food, basic education, and health services. The World Bank and IMF also forced many African governments to trim their budgets and cut spending, resulting in the firing of large numbers of civil service employees with the safety net of retraining programs or alternative employment opportunities. Also, because a large percentage of a nation’s revenues had to go toward debt repayment, less money was available for maintaining infrastructure (including drinking water and sanitation systems, and ecological concerns were largely ignored). A Second reason is that structural adjustment focused attention away from creating the conditions necessary for democracy to take hold. The World Bank and IMF drew a direct link between democracy and economic development and praised free market as the solution to Africa’s economic difficulties. They then imposed political reforms that assumed that historically repressive governments would suddenly demonstrate a respect for human rights. Unfortunately, there is not an example of an African country where structural adjustment has led to greater political stability or democracy. A third reason structural adjustment has been ineffective is that in many countries it essentially amounted to the reorganization of a bankrupt company. Nondeveloping countries were infused with massive amounts of capital but were then returned to the control of the incompetent managers (political leaders) who ruined them in the first place.\footnote{138}{Ibid., 105-106.}

Alongside the structural adjustment programs, high interest rates on loans charged...
to African nations leave them perpetually indebted to their rich creditors, the powerful developed nations. This serves to benefit the rich developed countries in terms of influencing the local politics and economies. To say the least, the monetary aid in form of loans is at best paternalistic. These paternalistic and neocolonialistic tendencies ensure loyalty and subservience on the part of the developing nations to their rich masters.

Laurent Magesa rightly points out that:

If Africa is an economic basket-case today, it is not because it lacks resources, but because its natural wealth is expropriated from it for the benefit of others. There is no fair trade; instead, the so-called aid that is often offered puts Africa in a state of indignity on account of the conditions attached to it by such organizations as the World Bank and the International Monetary Fund. Plans hatched elsewhere without Africa’s participation are often imposed on the continent.  

More recently, statistics also depict a widening gap of income inequalities between the rich and the poor of the world. According to Oxfam International, “Since 2015, the richest 1% has owned more wealth than the rest of the planet. Eight men now own the same amount of wealth as the poorest half of the world… The incomes of the poorest 10% of people increased by less than $3 a year between 1988 and 2011, while the incomes of the richest 1% increased 182 times as much.” Given the global income and trade inequalities, it is the poorest of the poor who find themselves victims of unfettered economic greed and injustices. An economy that serves the top 1% while excluding or pushing aside the 99% of the world’s population is unsustainable in the long run.

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Uganda has received praise for her progressive agenda in improving the national economy. It is noted that, “During 2006 to 2013, Uganda had the second fastest percentage point reduction in poverty per year in Sub-Saharan Africa.”\textsuperscript{141} And yet, “this progress is not without its challenges. Uganda remains a very poor country. In 2013, more than a third of Ugandans lived below the international extreme poverty line of US$1.90 a day.”\textsuperscript{142} While Uganda has registered improved income growth in some regions of the country, the northern and Eastern regions remain poor. Women and girls also remain the poorest social group in Uganda and, wealth is concentrated among the top richest Ugandans in cities while the rural areas with their agro-based economy continue to lag behind in terms of poverty reduction and acquisition of income and property.\textsuperscript{143} Among the most impoverished are people living in rural areas. Again, within the rural settings, women are the poorest social group in Uganda.\textsuperscript{144} Like everywhere, within Uganda itself, the rich are getting richer while the poor are getting poorer. In such an environment of deprivation, marginalization and exclusion, “The joy of living,” as Pope Francis points out, “frequently fades… It is a struggle to live and, often, to live with precious little dignity.”\textsuperscript{145} In cases of deep economic inequalities and injustices, Pope Francis further contends that, “everything comes under the laws of competition and survival for the fittest, where the powerful feed upon the powerless. Consequently,


\textsuperscript{142} Ibid.

\textsuperscript{143} Ibid.

\textsuperscript{144} Ibid.

\textsuperscript{145} Pope Francis, The Joy of the Gospel, 27.
masses of people find themselves excluded and marginalized: without work, without possibilities, without any means of escape.”

The Pope challenges trickle-down economic theories that assume that free markets inevitably lead to economic growth and results in greater justice and inclusiveness. For Pope Francis, such a theory has no factual basis. It is premised simply on the assumption of the goodness and naïve trust of those who wield economic power and sacralized workings of the prevailing economic system.

Pope Francis also chides the “throw-away” culture that is responsible for the great chasm between rich and the poor; and that grounds the exploitation and exclusion of the poor. In such a culture, “Human beings are themselves considered consumer goods to be used and then discarded.” In the “throw-away” culture, “those excluded are no longer society’s underside or its fringes or its disenfranchised — they are no longer even a part of it. The excluded are not the “exploited” but the outcast, the “leftovers.””

To sustain a lifestyle of exclusion of the poor, Pope Francis, points out, “a globalization of indifference has developed.” This global apathy makes people “incapable of feeling compassion at the outcry of the poor, weeping for other people’s pain, and feeling a need to help them, as though all this were someone else’s responsibility and not our own.”

However, it would be disingenuous to blame and place the entire scandal of poverty and HIV/AIDS in Uganda and the rest of Africa on rich nations, slavery, colonialism, foreign aid and indebtedness alone. While we cannot downplay the role of

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147 Ibid.

148 Ibid.

149 Ibid.
the above factors in causing and resulting in poverty and HIV/AIDS, Uganda like many African countries suffers from: corruption; predatory politics employed by wily politicians which pits particular tribes against others; the failure of leadership; chronic conflicts; failure to uphold the rule of law and human rights; tampering with national constitutions enabling leaders to run for endless terms of office; dictatorships; and a lack of a business-friendly environment that encourages locals and foreigners to invest in Uganda and many parts of Africa – all make it hard for the country or countries to develop and overcome poverty. Poverty, in turn, creates and speeds an environment for diseases and ignorance. Poverty, in the end, is a very ‘expensive’ thing. It deprives people of good living conditions, reduces people’s life expectancy, keeps people illiterate and ignorant, and ultimately, leads to death as people are coerced to live lifestyles that endanger their very lives and cause fatalities. In the case of Uganda, poverty and corruption are like cancers that waste away people’s lives and eat away at the local resources and the foreign aid received for the development of the country.

Corruption

Systematic and endemic corruption leads to stealing of public funds that are meant for the purchase of essential life-saving drugs for HIV/AIDS. In 2005, for instance, the Health Ministry of Uganda was rocked by a major scandal when it was reported in the media that $4.5 million from the Global Fund meant for combating AIDS, malaria and tuberculosis, and another $800,000 from the Global Alliance meant for immunization and vaccination was stolen. Kofi Annan underscores the grave nature of corruption by


151 Human Rights Watch, “Uganda: Free Pass on High-Level Corruption,”
asserting that, “Corruption undermines economic performance, weakens democratic institutions and the rule of law, disrupts social order and destroys public trust, thus allowing organized crime, terrorism, and other threats to human security to flourish … And it is always the public good that suffers.”

The ultimate victims of corrupt governments are our poor and marginalized groups such as women and girls with HIV/AIDS. It is they also who are left without life-saving medicines, hospitals in pathetic conditions, and are in general denied access to basic needs. As the Resident District Commissioner of the Masaka District in Uganda, put it, those who embezzle money meant for HIV/AIDS are mass murderers. He added, they risk being arrested and prosecuted.

It is also the case that corruption makes it difficult to prosecute cases of domestic violence and the abuse of women’s rights. Maureen Owor, a Ugandan lawyer, observes thus:

Virtually all cases [of reported domestic violence] that I know of are killed off at the police station. They [the police] are the first to negotiate with the wife. If a man pays a handsome fee, the file is not sent to the court. If it is not sent, the [prosecutor’s] office will not know it was reported. Many of my present clients will say they went to the police but it was not followed up, or relatives exerted pressure. I never prosecuted domestic violence cases [at the Directorate of Public Prosecutions].


Corruption by law enforcement officials makes it difficult to report cases of abuse and violations. Those with political, social and economic influence can buy their way out of the most heinous crimes. A famous slogan in Uganda is that “money talks” and those with it “talk big”. In such corrupt systems and circumstances, women and girls who are majorly the victims of domestic violence and rape end up being re-victimized by the very people who are supposed to protect them. This, in turn, creates a vicious cycle that silences women from reporting the crimes of violence, rape, domestic abuse and discourages them from standing up for themselves.

Uganda’s government leadership like many African countries’ leadership tends to spend colossal sums to fund the president and his ministers. One supplementary budget after another is initiated to fund the luxurious lifestyles of political elites with no accountability for those funds. In this case, corruption is used as a patronage tool by the president to keep his subordinates happy and in check. In the meantime, hospitals are left without drugs, running water, and electricity. For example, the New Vision, a Ugandan newspaper, reported on October 20th, 2013, that Bukwo Hospital had no electricity.

Further still, while political figures have excess funds to spend on their lavish lifestyle, health care providers and workers suffer untimely and delayed payments of their hard-earned salaries. This in turn affects the morale of the health care workers. As George B.N. Ayittey points out, since independence, the African ruling class has also


smuggled, embezzled funds, plundered state treasuries, and illegally transferred their funds abroad. When corrupt ministers are caught, they are immediately exonerated by the president, and if they are prosecuted, they get light sentences and end up back in the very governments they stole from.\textsuperscript{157} This is certainly true in the case of Uganda. Despite repeated endless promises of zero-tolerance for corruption in Uganda, corruption remains a major obstacle. According to Chris Obore and Stephen Otage:

Despite these pledges, major corruption scandals have surfaced again and again and no high-ranking member of government who managed the implicated offices – for example, not a single minister – has served prison time for corruption related offence during Museveni’s long tenure. The only conviction of a minister was overturned on appeal in 2013, after the president himself offered to pay his legal costs.\textsuperscript{158}

Some other people have remarked that corruption is the way the regime of Museveni survives.\textsuperscript{159} A prosecutor in the Anti-Corruption Court once observed, “Untouchables. Come rain, come sun shine, they’re never going to court, not while there’s somebody close to them in power. That’s because of the politics involved.”\textsuperscript{160} In the same vein, Justice John Bosco Katutsi, former member of the Anti-Corruption Court remarked thus, “This court is tired of trying tilapias when crocodiles are left

\textsuperscript{157} Ayittey, \textit{Africa Betrayed}, 122.


\textsuperscript{159} Human Rights Watch and the Lowenstein Clinic, Interview with anti-corrupt activist, Kampala, May 19, 2013. In Human Rights Watch, \textit{Letting the Big Fish Swim Free: Failures to Prosecute High Level Corruption in Uganda} (Yale Law School: Allard K. Lowenstein International Human Rights Clinic, October 2013), 11.

\textsuperscript{160} Human Rights Watch, \textit{Letting the Big Fish Swim Free}, 1.
swimming." It is not uncommon to have senior public officials be accused of corruption only to be exonerated by the president. It is equally not uncommon for senior politicians and public officials to fix the blame on their juniors when public funds are stolen. The junior officers also become targets of prosecution while their senior officials are left to go free, continue to work for the government and to enjoy the protection of the president. They seem to be immune to prosecution and above the law. The saying that “when two elephants fight it is the grass that suffers” is especially true in this case. In a sense, there is a bifurcated and binary system of justice, a lenient one for the elites and a swift and brutal one for the peasants and poor. Is it not ironic that a poor man in the village will steal a cow and as a result have to spend two years in jail while the rich and powerful who steal millions of Uganda shillings or dollars walk free or end up with only a day’s media publicity?

In such a corrupt system as in Uganda, it is not surprising that medicines are stolen from public hospitals and diverted to private clinics owned by doctors and nurses. The funds meant for the prevention, education, care and treatment of HIV/AIDS end up in the pockets of individuals while persons with HIV/AIDS and other diseases are left without services, and in most cases, end up dying. The failure to be accountable and responsible in the use of national financial resources on the part of public officials creates an atmosphere of corruption, and corruption in turn, leads to deprivations particularly for the poor. Apart from corruption, limited domestic budgets affect the funding of HIV/AIDS programs.

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161 Human Rights Watch, *Letting the Big Fish Swim Free*, 1.

Limited Domestic Funding

Uganda’s ability to mobilize financial resources for HIV/AIDS programs has been and is still beset by limited domestic funding sources. Most sources for HIV/AIDS policies, interventions and purchases of medication remain chiefly external. Ezra Chitando is right in observing that, “While international initiatives such as the Global Fund to fight AIDS, the President’s Emergency Plan for AIDS Relief (PEPFAR), the Bill and Melinda Gates Foundation, the Stephen Lewis Foundation, and others have played an important role in stemming the tide of HIV and AIDS in Africa, it remains critical for African countries to fund their own programs.”  

According to the AVERT Organization:

Funding for Uganda’s current National Strategic Plan (NSP) (2015/2016 to 2019/2020) is projected to require US $ 3,647 million. Care and treatment accounts for 55% of this, prevention interventions accounts for 23%, while social support and system strengthening account for 4% and 18% respectively. The cost of the NSP for the next five years is set against projected resources of US $2,868 million from domestic and international spending, which leaves a financing gap of US $918 million by the year 2019/2020. However, this assumes domestic funding will rise to at least 40% of the NSP requirements from the current 11%. With this being the case, more efforts have to be made by Uganda to increase their domestic resource mobilisation. The concentration of donor funding for HIV among a very small number of donors in Uganda suggests potential vulnerability should the magnitude of their funding commitments change in the future.

Uganda will need to mobilize domestic resources to ensure that the funding for HIV/AIDS programs are given due consideration and the priority it deserves in the national budget. Uganda must also ensure it fulfills its obligations to international and regional protocols in light of the prevention, reduction of stigma, and implementation of

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HIV/AIDS programs.

On the global level, some of the rich nations’ inward-looking policies such as “America First” and with its racial overtones do not do justice to our world where the majority of those falling prey to HIV/AIDS are also the most impoverished, disadvantaged, marginalized and oppressed people, namely, women and girls.

According to The Washington Post, the proposed White House budget of 2018, “would reduce funding from $30 million to $8 million to carry out the closure of the United States African Development Foundation, which supports local enterprises in 30 countries. It also would reduce funding by about $1 billion to the U.S. President’s Emergency Plan for AIDS Relief, or PEPFAR, which supports anti-retroviral therapy for over 11 million people, many in sub-Saharan Africa.”

This self-centered turning in and closing off one’s self as rich nations and peoples is what Pope Francis calls “the globalization of indifference.” It manifests itself in the lack of compassion, care and solidarity with the poor and suffering other; and where “all those whose lives stunted for lack of opportunity seem a mere spectacle; they fail to move us.”

As the Joint United Nations Programs on AIDS (UNAIDS) notes, “Many of the world’s more marginalized countries also need long-term international solidarity, cooperation and financial support. More equitable investment and trade flows can help ensure that global economic progress also profits the world’s poor.”

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cooperation and financial support are especially needed in the global efforts to combat HIV/AIDS.

**Social and Cultural Factors**

**Stigmatization and Discrimination**

A chronic challenge for women and girls infected and living with HIV/AIDS is the persistent stigmatization and discrimination they suffer. According to the Windhoek Report, “Stigmatization implies the branding or labeling of a person or a group of persons as being unworthy of inclusion in human community, and results in discrimination and ostracization. The branding or labeling is usually related to some perceived physical, psychological or moral condition believed to render the individual unworthy of full inclusion.”

Stigmatization involves the construction of damaging stereotypes and the perpetuation of injustice and discrimination and entails “conscious or unconscious exercise of power over the vulnerable and marginalized.” Since the emergence of HIV/AIDS, it has become increasingly clear that stigmatization is one of the greatest obstacles to effective prevention, treatment and care.

A number of factors account for the stigmatization of people living with HIV/AIDS, “the terminal character of the illness, the fear of being infected, the lack of confidentiality on the part of caregivers, the tendency to blame PLWH for their illness, and the belief that HIV is due to moral

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169 Ibid., 19-20.

170 Ibid., 19.
failings.”

Stigmatization can be carried out by individual persons, groups of people, governments through policy enactment, and religious groups. For example, the Resident District Commissioner (RDC) of Tororo district in Uganda told “parents not to waste money paying school fees for HIV-positive children.” He also told parents to ensure that all children joining universities and tertiary institutions undergo mandatory testing before parents can commit their financial resources to paying their tuition; otherwise parents would be wasting their financial resources on children who die before completing a semester in a university.

According to the AVERT organization:

Prejudices and social discrimination are some of the leading causes for certain groups of Uganda’s population, such as sex workers and men who have sex with men, to avoid seeking health care or HIV testing. However, even the general population of people living with HIV are subjected to excessive amounts of negative judgment.

A 2015 survey conducted by HIV support organizations, in partnership with the National Forum of People Living with HIV/AIDS (NAFOPHANU), of people living with and affected by HIV in central and south-western Uganda found stigma, both internal and external, to be high. When the study began, more than half (54%) reported experiencing some form of discrimination or prejudice as a result of having HIV.

The Health Ministry of Uganda in 2013 launched the mandatory HIV testing for all people who seek health care in public or government run facilities. In the words of


Doctor Alex Ario, the Acting Manager of the Uganda AIDS Control Program,

“Mandatory HIV testing will now form the many tests conducted when a patient is admitted. It will be part and parcel of our routine medical care practice to let more people know their status to augment HIV prevention and treatment campaigns.” Good intentioned as such policies may sound, they discriminate, violate people’s rights to confidentiality, education and enjoyment of basic services and is an affront on the dignity of people living with HIV/AIDS. The unjust treatment of people based on the HIV status leads to stigmatization, ostracism and rejection.

Underscoring the problem of stigma, Gideon Byamugisha, a Ugandan Anglican priest, himself HIV-positive, writes, “It is now common knowledge that [with] HIV/AIDS, it is not the condition itself that hurts most (because many other diseases and conditions lead to serious suffering and death), but the stigma and the possibility of rejection and discrimination, misunderstanding and loss of trust that HIV-positive people have to deal with.”

Addressing the stigmatization and discrimination of women with AIDS, Philomena Njeri Mwaura, points out that:

Women’s experience of stigma and discrimination is increased when they are divorced or separated from their partners on account of their HIV status. Whereas a woman is expected to care for her HIV + partner and not concern herself with where his infection came from, an HIV + woman is perceived as immoral, a threat to family status, security and wellbeing; even her own relatives may join in the alienation. Heart-rending testimonies exist and are constantly rehearsed by and about such women. These are the modern-day lepers of ancient Jewish culture and

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the witches of traditional African society. They cry out for justice and understanding.\textsuperscript{176}

Teresa Okure puts it this way:

There are two more viruses that are more important than HIV…the first virus is one that stigmatizes and demeans women in society. This virus causes men to abuse women. It is the virus that is responsible for the shocking fact that in many countries in Africa the condition that carries the highest risk of HIV infection is that of being a married woman. HIV and AIDS thrive on disordered gender relations. It is a virus which is deadly for the poor woman who lives in a patriarchal relationship and has little control over what happens to her body. The second virus that enables HIV and AIDS to spread at a devastating speed is found mostly in the developed world. It is the virus of global economic injustice that causes terrible poverty in parts of the developing world. Capitalist market economies are thrust on societies that are not geared for them and structural adjustment programmes imposed that do not meet the needs of the poor, who too often consist of uneducated, rural women and their dependents.\textsuperscript{177}

The African Network for Religious Leaders Living with or Affected by HIV and AIDS (ANERELA +) writes that the time has come to raise voices and call for an end to silence about the disease - the silence of stigma, the silence of denial and the silence of fear.\textsuperscript{178}

Even in religious settings, stigmatization of people living with HIV/AIDS is very common. Even though Jesus taught and called for the love of God and one’s neighbors, some members of the clergy and laity in the Church have perpetuated the stigmatization of and discrimination against people with HIV/AIDS. Paul Chummar asserts that:

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While the Catholic Church shoulders about 26 percent of the care of AIDS patients and education for prevention worldwide, in the Church as a whole there is no real acceptance of the reality of AIDS within the Church community. People infected and affected by the virus are often frowned upon by the pious Christians and by the clergy, and often regarded as bad people. However, HIV/AIDS is about persons and their lives and deaths, and thus it confronts us as a theological-ethical issue.  

The twisted views of some Church leaders and their followers on HIV/AIDS patients undermine the concept of the body of Christ. While the Church does a lot of work in providing care, treatment, and pastoral visits to HIV/AIDS patients, some of the Church leaders have not abandoned the condemnatory language and stigmatization of AIDS patients. Furthermore, according to Emily Reimer-Barry, within the church communities, stigmatization takes place by associating sexual activity with sin and HIV-infected persons as sinners. It also entails othering, blaming, and shaming of HIV positive people and the resultant acts of discrimination include silence, social exclusion, insults and verbal abuse. Chummar explains it is vital that Church leaders understand that:

The Church is a community of weak and strong, healthy and ill, holy and sinful, which God manifests God’s presence and activity in all people, including those infected by HIV. This theological truth has not, however, been understood or accepted at a deep level. The provocative but powerful expression “the body of Christ has AIDS” does not resonate well in the Church.

It is high time the Church admitted that many of her members and children are sick both physically and spiritually. AIDS has infected and affected many of her members. The proper response is not to deny, stigmatize or discriminate against those infected.

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burdened by the disease but to live up to the demands of the Gospel, namely, to be a compassionate, caring and loving community. The biblical command of love of God and neighbor challenges all members of the Church to exclude no one. Rather, the Church community is called upon “to love tenderly and to act justly” (Micah 6:8). This is especially true when it comes to the persons infected, affected and living with HIV/AIDS. To stigmatize people because of their HIV-positive status is not of Christ. Neither is it humane and dignifying. The challenge for the Catholic Church and all churches is, “to be the church in deed and in truth: to be the church as a healing community.”

It is equally important that the United Nations General Assembly’s Declaration of Commitment on HIV/AIDS, which called for the fight against stigmatization, denial, discrimination and lack of confidentiality, be taken seriously by all governments and Church institutions. As we continue to grapple with the challenges that HIV/AIDS poses, Beverly Haddad suggests that the Church will need to “become a true community where acceptance, love and belonging flourish.”

Excessive Alcohol Consumption

Uganda ranks number 8 among the top10 nations in the world in its high

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consumption of alcohol. Excessive consumption of alcohol also plays a major role in the spread of HIV/AIDS. Studies have shown that there is a high correlation between alcohol consumption and HIV. According to the US National Institute on Alcohol Abuse and Alcoholism (NIAAA):

Abusing alcohol or other drugs can impair judgment, leading a person to engage in risky sexual behaviors. People who drink heavily may delay getting tested for HIV and, if they do test positive, they may postpone seeking treatment. Alcohol misuse may make it difficult for infected patients to follow the complex medications regimen that is often prescribed to treat HIV/AIDS. Alcohol use disorder (AUD) can contribute to conditions such as liver disease and other disorders that have an impact on the progression of HIV infection.

Also, it should be pointed out that men and women who drink too much will not necessarily know how to handle themselves or their spouses or sexual partners. Sometimes, intoxicated people engage in sexual encounters they are not ready for or end up with several sexual partners. This in part has been responsible for the spread of HIV/AIDS. Alcohol consumption also weakens the immune system, decreases the effectiveness of antiretroviral therapies, leads to failure or inability to use condoms effectively, and hampers the body’s immune response to infection.

Excessive alcoholic consumption has also in some cases been responsible for violence in homes. The violence takes the form of verbal abuse, physical beating, marital rape and mutilation of genitals. Because of the patriarchal nature of the Ugandan society, the victims of violence remain largely women and girls. Jackline testifies thus, “After drinking, he would come home and bang the door so hard. If I delayed to open because I

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187 Ibid.
was deep asleep, my husband would accuse me of being with other men. He would insult me and sometimes slap me.”

Alcohol misuse is mainly due to lack of employment for many young people graduating from colleges and universities. In some cases, alcohol is viewed as a source of leisure in rural areas where up to-date there is no electricity and places for entertainment. In this context, alcoholism is emblematic of poverty, lack of employment opportunities, and a product of disillusionment. But excessive alcoholic consumption is not the only problem that leads to HIV/AID; sexual violence plays a role as well.

Gendered Sexual Violence

*Rape in Conflict Areas*

Sexual violence, particularly, rape has been part of conflicts for a long time now. Janie L. Leathermann notes that, “Sexual violence in armed conflict has been part of the spoils of war from time immemorial.” Sexual violence takes many forms such as rape, incest, forced marriage, sexual slavery, splitting open pregnant women’s bellies etc. as the following stories illustrate.

“They forced me to have sex with my daughter… I refused…. They ordered my son…. For fear of a cocked gun he complied…. I was then forced to have sex with a hole they had dug in the floor using a knife…. They forced my private part in the hole several times… the skin was totally destroyed…. It was impossible to fight someone who is armed …. This was all done in front of my wife, son and the daughter…. my wife went mad to date.” Female Survivor, Uganda.

“I was hiding under the bed with my father. I was about 14 years… A soldier pulled me out and took me with him to the detach …. he raped me for a full day while other girls he had abducted were watching…. When he was transferred he sold me to another soldier for one thousand shillings…. This was to happen to me three times”…. Female survivor, Uganda.

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190 These interviews are cited in Christine Butegwa and Maria Magezi, eds., *Uganda Baseline*
A number of reasons account for the conflict-related sexual violence. First, in conflict settings, “sexual violence can be seen as a result of breakdown of the rule of law, social systems and discipline with combatant groups.” Secondly, “rape and other forms of sexual assault” can be viewed as a “way of placating troops.” It can also be employed as a “strategy to destroy or humiliate those thought to harbor or sympathize with an opposing group”; and can be used as “a tool of ethnic cleansing or genocide”; in this case, sexual violence is used to take revenge on one’s enemies, to purge people of cultural and ethnic identities; and sometimes, as “a tool of repression.”

While sexual violence has been part of warfare for a long time, what is new is the rate and brutality at which rape is and has been orchestrated; and the massive numbers of women and girls who fall prey to this barbaric act, as recent conflicts and statistics have demonstrated. For example, 500,000 women are believed to have been raped during the Rwandan genocide; 60,000 in the wars in Bosnia, Herzegovina and Croatia; and 64,000 in Sierra Leone between 1991 and 2001. In addition, over 32,000 cases of rape and sexual violence have been reported in South Kivu in the Democratic Republic of Congo (DRC) since 2005. Secondly, rape is now recognized as a weapon of war, a crime against humanity, prosecutable in international law. Rape is no longer viewed as

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194 United Nations, “Updated Statue of the International Criminal Tribunal of the Former
simply an inevitable outcome of conflicts and wars. Thirdly, what is also new is the fact that conflicts in Uganda and the rest of sub-Saharan Africa have become avenues through which people are infected with the HIV/AIDS. In all this, women and girls remain the greater victims of conflicts and HIV/AIDS infections. Obijiofor Aginam highlights that:

One striking difference between the use of rape as a weapon of war in pre-1990 conflicts and in latter-day wars is the emergence and “willful” transmission of HIV to the victims. Serious questions have been raised in the social science literature about the actual time of transmission and infection, and whether the “intent” of the perpetrators could conclusively be to infect the victim with HIV. Nonetheless, there is evidence from the victims’ accounts confirming the deliberate nature of these acts.\(^{195}\)

It is horrifying today that conflicts in many parts of the world, particularly, in Africa, have resulted and continue to be one of the sources of the willful transmission of HIV/AIDS to women and girls through rape. In the context of Uganda, Travis Hasler, for example, points out that:

HIV/AIDS has been one of main consequences of war and displacement in northern Uganda (Brown, Fraser & Kiruswa, 2005; Diop, 2000). In the three main districts of the north, Gulu, Kitgum, and Pader, the HIV prevalence rates reached as high as 11.9 % (Ugandan Ministry of Health, 2005), which stands at nearly double that of the country’s national average of approximately 4.1% in rural areas and 6.5% in major towns (Uganda AIDS Control Council, 2010). The mass abduction of people by the LRA, the IDP camps, and the phenomenon of “night commuting” for safety are the three main reasons for the unique nature of HIV in Northern Uganda (Westerhaus, et al, 2007) and the extraordinarily high infection rates in that region.\(^{196}\)

In the case of Rwanda, Paula Donovan explains that:

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\(^{196}\)Travis Hasler, HIV/AIDS Communications Strategies in Northern Uganda: Development Workers Opinions on What Works (Manhattan: Kansas, Kansas State University, 2013); See also http://jmc.k-state.edu/graduate/TravisHasler2013.pdf (accessed August 18, 2017).

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Integral to the plan to annihilate the Tutsi population was the systematic sexual molestation, mutilation, and rape of women and girls... Among the weapons of choice calculated to destroy while inflicting maximum pain and suffering was HIV. Eyewitnesses recounted later that marauders carrying the virus described their intentions to their victims: they were going to rape and infect them as an ultimate punishment that would guarantee long suffering and tormented deaths.\textsuperscript{197}

According to the World Health Organization (WHO):

In armed conflicts, the breakdown of social infrastructures, the disintegration of families and communities and the disruption of responses leave women and girls vulnerable to sexual and other forms of gender-based violence, including rape by combatants and intimate partners or acquaintances and, at times, sexual exploitation by humanitarian actors. The sexual and gender-based violence perpetuated against women in conflict and humanitarian settings is increasingly being reported and documented. This human rights and peace and security problem has begun to be the focus of international attention, with efforts being made to prevent its occurrence, to respond to the survivors' needs and to address impunity for those responsible.\textsuperscript{198}

Christine Butegwa and Solome Nakaweesi-Kimbugwe are right to point out that in conflict and post-conflict societies, “women bear the brunt of violent conflicts and their bodies become the site on which national and regional politics is played out.”\textsuperscript{199}

Their bodies “become the frontline of unnecessary and cruel battle.”\textsuperscript{200}

In conflict situations:

Women and children make up the majority of the world’s refugees and internally displaced persons. They are often separated from their immediate and extended families. Daily tasks such as firewood and water collection or farming are typically the work of women. These are necessary for survival in areas of insecurity but increase their exposure to sexual violence. Sexual assault of women

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\textsuperscript{199} Christine Butegwa and Solome Nakaweesi-Kimbugwe, eds., “The Power of Women’s Leadership and Movement Building: Gender Based Violence, Sexual and Reproductive Rights in Conflict and Post Conflict Africa,” Regional Consultative Meeting 28\textsuperscript{th} - 29\textsuperscript{th} April 2009, Held at Munyonyo Commonwealth Speke Resort Hotel – Kampala, Uganda (Akina Mama Wa Africa, 2009), 15.
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\textsuperscript{200} Jordan A Prescott and Adrian M. Madsen, eds., Sexual Violence in Africa’s Conflict Zones, 63.
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and girls engaged in foraging for wood or water has become commonplace. While men and boys are also affected by conflict in many terrible ways, women and girls are the main victims of rape, mutilation, abduction into sexual slavery, and sexual exploitation during times of conflict.\footnote{Prescott and Adrian M. Madsen, eds., \textit{Sexual Violence in Africa’s Conflict Zones}, 63-64.}

Sexual violence feeds on and is shaped by gender relationships, patriarchy and gender injustices in socio-economic and cultural settings in societies. In all these circumstances, women and girls remain the most vulnerable population. They are raped by soldiers meant to protect them, by combatant militia groups, and men and boys and neighbors in camps. For women and girls, as Janie L. Leatherman explains, “Hegemonic masculinity is the preeminent disciplinary mechanism undergirding the global political economy of sexual violence.”\footnote{Leatherman, \textit{Sexual Violence and Armed Conflict}, 149.} It is encouraging, though, that silence which has long characterized sexual violence is now “giving way to the voice of survivors, the documentation of sexual violence, the creation of national and international laws against the use of sexual violence as a weapon of war, and accountability for the perpetrators.”\footnote{Ibid.} These mechanisms are critical because women and children tend to be most vulnerable social group in conflict settings. Holding the perpetrators accountable and letting the survivors tell their stories in courts of law are vital for the restoration of the dignity and agency of women and girls. While it is difficult to speak of full justice and redress in cases where women and girls are infected with HIV/AIDS during conflicts, the fact that perpetrators of rapes are beginning to be held accountable is a step in the right direction.

In addition, women’s health needs in conflict situations are rarely met as they are quite different from those of men. Because women are sexually targeted during armed

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\footnote{Prescott and Adrian M. Madsen, eds., \textit{Sexual Violence in Africa’s Conflict Zones}, 63-64.}

\footnote{Leatherman, \textit{Sexual Violence and Armed Conflict}, 149.}

\footnote{Ibid.}
conflict, many of the crimes committed against them result in damage to the sexual and reproductive system or result in sexually transmitted infections including HIV/AIDS. Women are predisposed to a range of reproductive health problems not only due to their vulnerability to sexual torture but also due to the breakdown of health care services. It is critical that women’s health needs and basic rights to security and protection be prioritized. Apart from sexual violence in conflict-related areas, domestic violence too creates an atmosphere that precipitates and exposes women and girls to HIV/AIDS.

**Domestic Violence**

The United States Conference of Catholic Bishops (USCCB) defines domestic violence as:

Any kind of behavior that a person uses to control an intimate partner through fear and intimidation. It includes physical, sexual, psychological, verbal, and economic abuse. Some examples of domestic abuse include battering, name-calling and insults, threats to kill or harm one’s partner or children, destruction of property, marital rape, and forced sterilization or abortion.

Domestic violence is a global problem. Despite its chronic and widespread nature, domestic violence has eluded prosecution in many countries. This is in part due to the fact that, “Traditionally, domestic violence has been considered a private matter of the home and outside the purview of other family members, neighbors, friends, community, or local or national government and its authorities. Yet domestic violence is one of the

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most pervasive manifestations of structural violence that women face.”

Domestic violence is dangerous in the sense that it affects the very basic unit of society, namely, the family. Homes that are meant to be places of comfort and peace have in some cases, turned out to be a hell on earth because of the violence and abuse meted out at women and girls in homes and families. Pope Francis points out that, “The verbal, physical and sexual violence that women endure in some marriages contradicts the very nature of the conjugal union.”

A study by Human Sciences Research Council (HSRC), International Center for Research on Women (ICRW) and Associates for Development (AfD), done in five districts of Uganda (Iganga, Mubende, Rakai, Apac, and Kampala) points out that, “Ugandan women confront a male-dominated power structure that upholds and entrenches male authority in the home.” In the same vein, the Uganda Baseline Survey on the African Women’s Rights Protocol- The Maputo Protocol spells out that:

- Violence against women is widespread across ethnic, social, class, educational, and religious groups and is caused by an imbalance between men and women that is rooted in gender norms and attitudes. Traditional norms indicate that women must accept and tolerate violence. This attitude is accelerated by a culture of silence where women are hesitant to report or seek help for violence from appropriate authority.

In this male-dominated cultural setting, many women and girls are battered, verbally

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207 Leatherman, Sexual Violence and Armed Conflict, 73.

208 Pope Francis, Amoris Laetitia (On Love in the Family), Apostolic Exhortation (Huntington, IN: Sunday Visitor, 2016), 43.


abused, and in some cases, burned with hot water or acids. They are exposed to emotional and psychological torture, deprived economically, and are victims of harmful traditional practices.

What is also distressing is that domestic violence has become an avenue through which many women and young girls become infected with HIV/AIDS. The Uganda Baseline Survey on the African Women’s rights Protocol-The Maputo Protocol explains that HIV/AIDS is:

A result of several factors including lack of control of their sexuality and increasing domestic violence. Women have been found to have a higher prevalence of HIV/AIDS at 8% as compared to 5% in men. Married women are more at risk of HIV infection because of low couple counseling and testing and limited negotiation power for condom use. Women generally are unable to negotiate for safer sex and their full sexual rights. In a separate survey, 42% of women admitted that they cannot ask their partners to use condoms, compared to 25% of the men. The burden on women is worsened by their traditional roles as caregivers where other members of the family get affected by HIV/AIDS.211

It is heartening that social movements such as “The Me Too” are beginning to expose the harassment and violence that women and girls have had to endure in all aspects of their lives. It is important that concerned people are calling for exposure, accountability and reform of laws; not only to protect the dignity of women, but also, to hold perpetuators of such crimes accountable.

The Objectification of women: Media and Language

It is an indisputable fact that the communication media is one of the most powerful tools in our modern society. Communication media can be used to shape society, but it can also be used to the detriment of society. Today, the people of our world are more connected than ever before. Today, events happening in one location of the

globe can be broadcast simultaneously and instantaneously as the events are taking place. Letha Kumari points out that, “The media in any society has two roles: to serve as a chronicler of current events and as an informer of public opinion, thereby fostering different points of view.”212 The media can play a pivotal role in the HIV/AIDS discourse. It can play an important role in “educating and empowering individuals to avoid contracting HIV.” It is can be used in breaking silence and encourage people to go for testing and to seek treatment; it can be instrumental in challenging stereotyping, stigmatization and discrimination against individuals who are infected and living with HIV/AIDS and inform people about the available options for treatment.213 In the same vein, Kofi Annan, the former Secretary General of the United Nations states that:

> When you are working to combat a disastrous and growing emergency, you should use every tool at your disposal. HIV/AIDS is the worst epidemic humanity has ever faced. It has spread further, faster and with more catastrophic long-term effects than any other disease. Its impact has become a devastating obstacle to development. Broadcast media have tremendous reach and influence, particularly with young people, who represent the future and who are the key to any successful fight against HIV/AIDS. We must seek to engage these powerful organizations as full partners in the fight to halt HIV/AIDS through awareness, prevention, and education.214

In the context of Uganda, the media has been credited for reducing HIV/AIDS because of the government’s open policy of HIV/AIDS discussion in the media. For example:

> The Straight Talk Foundation, which has a strong media department, fosters an environment in which young people can explore delicate and intimate issues. The foundation publishes a range of newspapers and also produces a weekly radio programme in English and a number of local languages. Through these popular shows, made by and for young people, listeners can hear their peers discuss sex

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214 Ibid.
and relationships in a clear and straightforward manner, as well as how to keep themselves safe.215

While the media in Uganda has been credited for playing a significant role in the education and sensitization of the Ugandan population about the dangers of HIV/AIDS and how to prevent it, some within the media have been responsible for the objectification of women and girls. The obsession with beautiful women and girls in some media houses like The Red Pepper has contributed to stereotyping, objectifying, and false curiosity that gives the impression that every beautiful woman or girl exists merely for the gratification of men’s sexual appetites. On the other hand, the ‘seemingly’ ugly women are portrayed negatively, and are, in some instances, subjects of scorn, cyber bullying and ridicule. Today, the objectification of women and girls is made worse by the pornographic industry and trafficking of women and girls for the sex industry.

Admittedly, some men and boys suffer the same fate. However, it is mostly women and girls who are the major target for the pornographic industry and human trafficking. In an interview with Elizabeth, a student at Makerere University, she told me the following:

We, women, are targeted in every way, at work, at home, on the streets. Some of the newspapers and TVs are all obsessed with pretty and beautiful women and girls. When you are looking for work, some of the bosses want sex before they will offer you a job. How can women avoid AIDS? How can anyone blame women? After that they accuse us of being prostitutes.

The objectification of women and girls is part of the consumer mentality that has characterized many of our modern societies. It is a mentality that commodifies people and feeds on an attitude that, “sex is just another nice thing ‘to have.’” Sex is each one’s

own business, a matter of each one’s individual preference and private behavior… It is morally equivalent to eating and drinking, a response to appetite and geared to pleasure.”

For the African people, this mentality is part and parcel of the downward spiral of morality that needs to be guarded against. The Catholic Bishops of Africa and Madagascar echo that:

We are deeply alarmed by the promotion of pornography in all forms through all types of media, which corrupt children and the youth and contribute to the further spread of HIV. We further deplore the liberalization and commercialization of sex for all, which is contrary to human and religious values of sex and sexuality and contributes to the promotion of unchristian sexual tendencies and the destruction of the family institution as it has been known since time immemorial.

What is also of particular concern is the language used in writing and speaking about women and girls. Laurenti Magesa writes that, “Language constitutes the carrier of culture by the power of ‘word’ in Africa. The clout of language and its associated symbols is that they do not only describe but also shape attitudes of the community.”

Magesa continues to observe that:

Often in African languages, women’s bodies are portrayed as objects of men’s pleasure through various symbols and metaphors. As a consequence, women are deprived of a voice in negotiating sexual experience — precisely, when, how, or where sexual activity can take place. This fosters cultural gender inequalities and renders women vulnerable to sexual manipulation. By stereotyping women, such language does not affirm their humanity; it leads, instead, to women’s sexual mistreatment and thus dishonors their role in African culture as the main custodians of life. It violates the deeper unity of the female and male life force on which African spiritual traditions base themselves. Needing particular

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transformation are therefore linguistic imageries and metaphors that encourage attitudes that foster behaviors leading to the transmission of HIV. Sayings such as, “Honey Sucker which drinks at distant pools,” depicting male pride about promiscuity, must be changed through a form of socialization that underlines respect for women.²¹⁹

The language used to communicate not only forms culture but forms the people of that culture. It is therefore important that the communication media use language that is dignifying and ethical. Any language that degrades and objectifies women and girls needs to be challenged and guarded against.

Johnnette S. Benkovic is right in pointing out that, “The words we speak have power. They can build up or they can tear down. They can restore, or they can lay low. They can divide, or they can bind together. And once spoken, their effects can linger a lifetime. Words can bring comfort, hope, and life — or they can bring anguish, devastation, and death.”²²⁰ The same can be said of written words. It is critical that we use words and language that honors, respects, dignifies, recognizes and promotes the equal dignity of women and men.

**Cultural and Traditional Factors**

Dowry, Widow Inheritance and Female Genital Mutilation (FGM)

Impractical cultural traditions, practices and customs are like chains binding women and intensify their exposure to HIV/AIDS. In the case of Uganda, customs and traditional structures/practices such as the payment of dowry, or “bride price or wealth,” and widow inheritance contribute significantly to the mistreatment of women at the hands


of men. Once some of the grooms have given cows, goats, kerosene, clothes etc., to the
family of his bride, they feel they “own” their brides. The practice of paying dowry
effectively renders women the property of men. They have little power, freedom and
choice over their bodies and sexuality. According to Human Rights Watch interview
with Jackie Asiimwe Mwesigye, the Coordinator of Uganda Women’s Network
(UWONET), in many marriage settings in Uganda and many African societies, sex is
considered “a marital obligation” and so, “men proceed on the common law assumption
that “I do” means that you no longer have the right to say “I don’t.” Given this
assumption, even in cases where a husband might be HIV-positive, it is expected that
when he needs to have intercourse, his HIV-negative wife will oblige. In these
circumstances, with little or no option, women remain vulnerable to HIV/AIDS
infections. Likewise, widow inheritance, an old tradition in many African societies has today
become one of the routes through which women are exposed and endangered in the age
of HIV/AIDS. The logic behind this old traditional practice is that when a man dies and
leaves behind a wife and children, one of the brothers, or a chosen member within the
family or clan, must take responsibility to care for and raise up the children and provide

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221 Human Rights Watch (HRW), Just Die Quietly: Domestic Violence and Women’s Vulnerability

222 Human Rights Watch interview with Jackie Asiimwe-Mwesige, coordinator, UWONET,

for the widow. The provision for the widow quite often meant fulfilling marital responsibility of intercourse as well.\textsuperscript{224} This practice may have had good intentions in the beginning and in earlier traditional settings, but today, given the scourge of HIV/AIDS, the moment has come to evaluate such traditional practices.

In addition to dowry and widow inheritance, women are exposed to HIV through dangerous cultural practices such as FGM that has continued among some tribes in Uganda. This practice and form of control, chauvinism and subjection exposes women and girls to trauma, but also HIV/AIDS especially in rural areas where the so-called “local women physicians” use the same contaminated knives to carry out the genital mutilation of women and girls throughout the village. According the World Health Organization, female genital mutilation (FGM) is culturally viewed as an initiation into adulthood and womanhood, ostensibly to limit excessive sexual desire, encourage chances of marriageability, meant to keep girls virgins before marriage, and ensure fidelity in marriage.\textsuperscript{225} Among the long-term effects of FGM include:

- Urinary problems (painful urination, urinary tract infections);
- Vaginal problems (discharge, itching, bacterial vaginosis and other infections);
- Menstrual problems (painful menstruations, difficulty in passing menstrual blood, etc.);
- Scar tissue and keloid;
- Sexual problems (pain during intercourse, decreased satisfaction, etc.);
- Increased risk of childbirth complications (difficult delivery, excessive bleeding, caesarean section, need to resuscitate the baby, etc.) and newborn deaths;
- Need for later surgeries: for example, the FGM procedure that seals or narrows a vaginal opening (type 3) needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes genital tissue is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing both immediate and long-term risks;
- Psychological


problems (depression, anxiety, post-traumatic stress disorder, low self-esteem, etc.)"\textsuperscript{226}

Margaret Farley asserts that, “Women live all too often in contexts where subordination to men determines their health or sickness, life or death. As powerful as women might be in some familial lives, they are often powerless in persuading male spouses and partners, or in refusing sex when it is demanded on traditional and religious grounds.”\textsuperscript{227} It is also the case that women’s status and power is usually determined by their husbands or male family members. Women’s subordinate roles in families and societies place them at a disadvantage in most aspects of society in Uganda. Furthermore, Uganda’s family system is patriarchal in nature and male dominated. Men wield the power and have control over what goes on at home; make financial decisions, and in many ways, control what women and girls can and cannot do. In cases of power differential that places women in subordination, Kevin Kelly observes that:

> It would seem unrealistic and even harmful to suggest that the only solution to the HIV/AIDS pandemic lies in the traditional ‘faithful to one partner’ sexual ethic. That offers no help to many women. For them, what is lacking is the very foundation without which such a sexual ethic is virtually meaningless. As long as their full and equal dignity is not accepted in theory and in practice, many of the norms of this traditional sexual ethic are likely to work against the well-being of these women and may even prove to be the occasion for their becoming infected by HIV.”\textsuperscript{228}


Paul Chummar explains that:

Traditional African society gives women and girls less status than men and boys. Sexual violence is tacitly accepted and fuels the infection rate. Gender inequality and subordinate roles that marginalize women and prevent their self-sustenance and self-empowerment result in economic powerlessness, feminized poverty and feminized illiteracy.\(^{229}\)

Cultural and customary practices such as dowry payment, FGM and widow inheritance (levirate marriages) that victimize women and girls in Uganda, Africa, and elsewhere have also the potential of increasing their chances of HIV exposure. Despite the fact that the United Nations Declaration of Human Rights of 1948 calls for equal respect and dignity of all peoples, women in many developing countries remain powerless and oppressed. To break the cycle of degradation and life-threatening cultural “norms,” one must not only become critical of personal choices, attitudes and actions, but also be aware of those societal forces and structures that contribute and perpetuate the degrading of women’s and girls’ dignity. The commitment to empower women and girls invites us to work towards transforming our society and to take a stand against these oppressive structures. It is also important that dialogue take places around cultural norms. It is critically important to promote cultural norms and practices that are life-affirming and call into question those that threaten the lives of women and render women vulnerable to HIV/AIDS infections.

A critical assessment of such cultural and traditional practices and customs needs to be undertaken. While some customs, traditions and practices may have served a purpose in the past, today questions need to be raised regarding the relevance of such customs, traditions and practices. We must ask ourselves, what Ugandan and African

customs, traditions, and cultural practices are life-giving and which ones are not. In other words, the age old cultural practices need to be exposed to the hermeneutics of suspicion.

Musimbi R. A. Kanyoro explains that although women in Africa have been and are still the custodians of cultural practices, cultural prescriptions are strictly guarded by and for fear of breaking taboos. Many of these cultural practices continue to be adhered to at the expense of women and girls. Many practices are harmful, oppressive and unjust to women and girls. She argues that the time has come for theological engagement to expose such practices. For this to happen, Kanyoro recommends that:

The complexities inherent in cultural debate require space and a safe environment of mutual trust and mutual vulnerability in order for dialogue to take place .... A new aspect of feminist analyses has been brought to theology mainly by studies of women from Africa. This new thing deserves its rightful place in the theological paradigms. It could be called ‘cultural Hermeneutics.’

Perhaps as a litmus test, we must ask which particular customs, practices and traditions are life-affirming, life-enriching and life-uplifting; and which ones are not. In the same vein, we must ask which customs, practices, and traditions protect the dignity of women and girls, and which ones inhibit it. Illustrating this point, Mercy Amba Oduyoye, writes that:

Dealing justly with African women must begin with taking seriously women’s questions and concerns about their status. Trivializing women’s concerns – as is done regularly in our newspapers – does far more harm than good. Women’s voices should be listened to when they speak about the God-ordained dignity of every person and the consequent need of each person for respect. To expect women to uphold all that is humanizing in African culture and yet deny their participation in the politics of family and nation is like asking them to make bricks without straw. In the end, even if this means challenging much that is ingrained in our religio-culture, we need to acknowledge that women are not merely symbols of morality, but that they are equally human. Perhaps, then, we

can remove the obstacles in women’s paths to self-actualization and moral being and continue on our path to democratization based on the full participation of all women and men.\textsuperscript{231}

Patriarchal Biases: Denial of Full Opportunity in Education, Access to Health Care, Participation in Politics and Public Life and Right to Land Ownership

Some of the impediments to women and girls in Uganda are patriarchal biases manifested in the denial of full equality of opportunity in education, access to health care, participation in politics, and the right to ownership of land and property. Even though the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights, and the Convention on the Rights of the Child and other pertinent international instruments -- all point out that everyone has a right to education, girls and women have not always enjoyed this particular right as persons.

As a nation, Uganda has made significant progress in promoting the education of boys and girls. The government of Uganda has introduced universal primary education (UPE) and universal secondary education (USE) - efforts that have helped to improve education opportunities for both boys and girls, however, the education of the girl is still fraught with challenges. The \textit{Uganda Baseline Survey on the African Women’s rights Protocol-The Maputo Protocol} notes that:

Access to education raises girls and women’s knowledge, empowerment and increases opportunities for them to beat the gender divide. With the introduction of UPE initial progress was witnessed with the tremendous increment of primary enrolment to 5.3 million in 1997 from 3 million in 1996. By 2001, over 3.3 million girls had been enrolled and by 2008, gender parity had almost been achieved in enrollment of girls (49\%) and for boys (50.1\%), However, the success story has been curtailed with the high dropout rate and low completion levels for girls.\textsuperscript{232}


\textsuperscript{232} Butegwa and Maria Magezi, eds., \textit{Uganda Baseline Survey on the African Women’s Rights}
The situation is further compounded by early marriages, pregnancies, absence of gender sensitive sanitation facilities in schools, sexual harassment by boys and male teachers, family preference for boys’ education, family responsibilities, sickness, lack of education on adolescent rights and financial constraints. This lack of upward mobility leaves girls vulnerable to poverty, ignorance and diseases, including HIV/AIDS, because they have limited means or simply inadequate access to health care.

It is not a secret to any keen observer of Uganda that one of the recurring challenges to the health care sector has been and still is inaccessible and inadequate health care services. Domestic health care services are overstretched, ill-equipped, under-resourced and in some cases, simply, non-existent. This is especially true in rural areas. It is not uncommon to find health care facilities in rural and town settings with no beds, running water, medications, electricity, and sufficient medical workers. In addition, health care facilities are overcrowded, dirty, and neglected. In these circumstances, HIV/AIDS and other infectious diseases are readily transmitted to patients and endanger the lives of healthcare workers. Diseases that have been overcome in developed nations such as malaria, tuberculosis and sexually transmitted infections are still killing Ugandans. “Misconceptions about family planning abound due to lack of information, limited access to services, and high costs… Maternal health is further compromised by long distance to health centers, absenteeism of health officers from health centers, limited

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access to drugs through corruption.” In all this, women and girls are the most disadvantaged. The health care industry in Uganda is driven by money. Those without money are often neglected and left unattended. A tragic example of this lack of care for the poor occurred when my sister-in-law had problems delivering a baby in the village. Because of the threat involved to her health and the life of the baby, she ended up in a town hospital a few miles from the village. Even though my family succeeded in getting her to the hospital, she could not be attended to because my brother did not have funds to pay for medical services. Sadly, but not surprisingly, the baby in the uterus died as a result. In many cases, the Hippocratic Oath and duty to focus, first and foremost, on saving lives is simply not adhered to by some physicians and other health care providers. The HIV/AIDS pandemic challenges us as a Ugandan society to evaluate whether our health care system is people-centered and grounded in the principle of social justice or not. According to Paul Farmer, the practice of medicine or health care rooted in social justice begins with the acknowledgement of the fact that “things should not be this way; that the world as it is, is flawed; and an analysis of the fact that what happens to the poor is not divorced from the powerful and making an option for the poor” who die of treatable diseases.235

The disrespected and disrupted dignity of the poor people who die of HIV/AIDS and other diseases and who are left unattended as in the case of my sister-in-law, calls into question “our shared destinies and common humanity.”236 The current health care

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236 Ibid, Forward, IX.
system in Uganda and many parts of the world invites us to ask deeper questions such as whether our institutions exist to serve the needs of people or whether they are driven and motivated by money and profits. What value systems and ethical norms guide public institutions such as hospitals? Do such private and public health care facilities have an ethical responsibility to the poor?

The participation in public life and politics is still problematic for many women and girls. The current government of Uganda has made strides in encouraging women to participate in the political process of the country. For example, each district in Uganda has a female member of parliament. The Action for Development organization (Acfode), in its analysis of 2011 women election experiences notes that:

With regard to the participation of women in politics and decision making, Uganda has made reasonable progress. The Constitutional provisions with respect to women representation at national and local government level have been implemented. The Constitution of Uganda provides for affirmative action in politics with a provision for a woman representative to parliament from each district and one third of local councils to be women.237

However, Acfode observes that women’s rights are not understood by all men and women. There is limited consciousness of gender equality; the male-dominated culture and patriarchy are still prevalent, and men feel challenged by the emergence of women in politics. Violence is still meted out against women during campaigns and elections, for example, “Women are coerced by their male partners/spouses to vote for candidates of the spouses/partner’s choice and when women assert themselves and vote otherwise, this is sometimes followed by violence.”238 Also, because there are few women in leadership

237 Acfode, Silent Voices: Capturing Women’s experiences during the 2011 Elections in Uganda (Kampala, Uganda: Acfode, 2011), 17.

238 Ibid., 18.
roles and public offices, they cannot enact policies that promote women’s well-being. In summary, gender inequalities still exist in the political process and participation, and women are still marginalized in this respect. In addition to political power, “Property and land rights are absolutely essential to economic survival. Historically, both statutory and customary laws govern women’s right to land… claims for women’s property rights are sometimes resisted by vacillating between the two systems and successfully neutralizing any reforms that may be instituted.”

In traditional settings and under customary law, women in Uganda may have had access to usage of land but they did not own it.

“Traditionally, women did not inherit land; a boy usually took over the land allocated to his mother by his father for her use and care in the event of the father’s death.” Also, “in patrilineal settings, wives were permitted to claim 15 per cent of the husband’s estate when he dies. Whereas when a woman dies, her husband becomes automatically the owner of everything she possessed.” This discrepancy, the violation of women’s rights, and their subordination in society have all contributed to the economic miseries of women. Left without land and property, they remain poor. This poverty, in turn, exposes women and girls to HIV/AIDS as noted already. And so, “Since Uganda primarily relies on agriculture and women form the core labor force, it is understood that [securing] women’s rights [to] land can be a strategic tool for poverty reduction.”

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240 Ibid., 88.

241 Ibid.

242 Ibid., 90.
Progress Made So Far and Remaining Challenges for the Future in the Fight against HIV/AIDS

Since the emergence of HIV/AIDS, a lot has been achieved by the international community, the Catholic Church, and the Government of Uganda, and the non-governmental organizations (NGOS). In the remaining part of this Chapter, we will examine the successes that have been recorded and the challenges that still have to be grappled with by the above social actors.

International Community

The international community has made great progress in its efforts to fight, prevent, and eradicate HIV/AIDS. Laurenti Magesa notes that, “Internationally, the scientific and medical communities have expended great effort to try to understand and spread knowledge about the nature of the epidemic and how to tame it.” Magesa goes on to argue that it is vital to recognize the fact that:

Some remarkable advances have taken place in the medical field in the fight against the virus. With the production of antiretroviral drugs (ARVs) that control the consequences of the HIV infection by slowing down the physical hazards of AIDS, research has produced quite positive results. Whereas previously infection by the virus spelled certain death, in the regions of the world where people can access and afford them, ARVs have helped many to lead relatively long, normal, and productive lives after infection.  

In fact, according to the World Health Organization (WHO), because of increased access to the ARVs, 54% of adults and 43% children living with HIV are now receiving life-saving therapies or treatments, implying roughly 19.5 million adults with HIV/AIDS have access to the antiretroviral therapies (ARTs). Furthermore, “Global ART

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244 World Health Organization. “Female Genital Mutilation.”
coverage for pregnant and breastfeeding women living with HIV is high at 76%.”245 The rapid diagnostic tests (RDTs) which detect the presence or absence of HIV antibodies are a step in the positive direction. The RDTs, which are the same day tests, enable people who test positive to seek immediate treatment and care.246 Furthermore, roughly “70% people of people with HIV know their HIV status. Also, between 2000 and 2016, new HIV infections fell by 39% and HIV-related deaths declined by one third, with 13.1 million lives saved due to ARTs.”247

However, despite the promising and remarkable progress that has been made, the disease continues to ravage humanity, particularly in sub-Saharan Africa, with 25.6 million people living with HIV and accounting for two-thirds of the global new infections. Also, risky groups such men having sex with men, sexual workers and their patrons, drug and injection users, and transgender persons are still at increased risk of infection, stigmatization, and discrimination.248

While the biomedical approach has led to the discovery of ARTs, this therapeutic method focuses on the “symptoms of the pandemic.” It does not address the root causes. What the history of this deadly pandemic has demonstrated in the last 35 years, is that HIV/AIDS defies a-single-model-approach. It is important that sociological, economic, political and cultural linkages and other attendant factors that precipitate and result in


245 World Health Organization. “Female Genital Mutilation.”

246 Ibid.

247 Ibid.

248 Ibid.
HIV/AIDS be given due attention by the international community.\textsuperscript{249} Michel S. Kamanzi strongly suggests that poverty, corruption, ignorance, and political instability need to be addressed and should be among the viable solutions, as they are “both a cause and a consequence of AIDS.”\textsuperscript{250} Funding too is still falling short for all over the world, particularly, in developing countries. The funds for the HIV/AIDS programs in many developing countries have been majorly from external sources. Internal sources are still limited and meager. There is up to 7 billion dollars in HIV/AIDS funding gap globally.\textsuperscript{251} This gap will need to be closed if the international community hopes to continue registering positive results.

The self-test kit is another innovation that will make it easier for people to know their status. However, this works better in developed countries where people are educated. Moreover, in cultures and places where women experience violence, testing at homes comes with risks. Women who test positive for HIV might risk being exposed to beatings at the hands of their husbands. Without proper counseling and preparedness to accept the result of one’s status, self-test kits stand to create new challenges.

Stigmatization and discrimination of people living with HIV/AIDS is still a painful and looming reality for many. This unfortunate reality happens in places of work, homes, hospitals and schools. Women and girls still remain the most vulnerable populace.


in sub-Saharan Africa, and globally, there are 1800 new cases of HIV infections every day among the young. The HIV/AIDS pandemic is far from being over; and no vaccine to cure and treat HIV has been discovered to date.\textsuperscript{252}

The accessibility and affordability of ARTs is also a critical issue that still needs to be addressed. Most pharmaceutical companies that manufacture ARTs are found in developed nations. This leaves the poor and developing nations still dependent on their developed counterparts for life-saving medications. Similarly, these medications have to be imported and are expensive. Patent rights to manufacture the same medications are likewise controlled by pharmaceutical companies in developed nations. All these factors make it hard for people in developing nations to have access to life-saving medications.

While the United Nations Declaration spells out various human rights to be enjoyed by all people worldwide, and many countries have signed and ratified this Declaration, the enforcement of these rights depends and is left to each member country. This makes it difficult to enforce various human rights. In most cases, impunity among militia groups leads to disregard for the injunction prohibiting the rape of women because the militia groups know they cannot be identified or prosecuted. The militias know that the more violent the rapes and crimes are, the more the victims’ shame and scars, and the less willingness to talk about them.\textsuperscript{253} Violations against women and girls such as rape and domestic violence are difficult to enforce and prosecute because many member countries have weak legal and statutory mechanisms for dealing with such crimes and


violations. This is further compounded by cultural norms that complicate the reporting of such crimes and enforcement of the rights of women and other vulnerable groups. Therefore, the international community needs to work doubly hard to close the missing gaps when it comes to enforcement of human rights and prosecution of heinous crimes such as rapes.

The Ugandan Government

The government of Uganda has received a lot of praise for its open policy regarding the HIV/AIDS pandemic. Unlike other African governments, Uganda’s leaders never wasted time with futile denials of the existence of HIV/AIDS among its populace. Rather, the Ugandan government acknowledged the presence of the pandemic and embarked on a systematic campaign of informing people how HIV/AIDS is transmitted, the ways to prevent infection, and encouraged people to test and know their status, and in this way, seek treatment. In brief, there was dissemination of information regarding transmission, education in terms of preventing the contraction, and an effort to encourage people to know their status through testing and to seek treatment for those infected with HIV/AIDS. In other words:

From the outset, the Ugandan government recognized the gravity of the HIV and AIDS epidemic and initiated public health strategies for containment. The approach, colloquially known as the ‘ABCs’ (abstinence, being faithful, and condom use) has been the backbone of the HIV-prevention strategy. This has since included voluntary counselling and testing (VCT), the prevention of mother-to-child transmission (PMTCT), antiretroviral treatment (ART) and HIV and AIDS care and support. In addition to acknowledging the public health consequences of the problem, the government recognized the impact it would have on all other spheres of public life, including on the developmental challenges

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of the epidemic such as the labor withdrawal from the production process both in industry and agriculture and its impact on GDP.255

Although the number of new infections increased by 21% between 2005 and 2013, new infections have been on the decline in recent years. For example, new infections fell from 140,000 in 2013 to 83,000 in 2015.256 This is encouraging but more needs to be done to decrease the number of infections.

The HIV/AIDS related deaths have been on the decline as well. This is in part due to improved availability of ARTs and prevention initiatives undertaken in recent years. More and more people with AIDS are living longer because of the medications.257 Yet, disparities remain regarding who accesses ARTs medications. There is also widespread stigma and discrimination of people with HIV/AIDS despite the government’s efforts to fight these vices.258 Women and girls are more likely to have difficulties in obtaining vital medications due to their limited incomes and dependence on their spouses.

It is equally important to point out that since the launch of the prevention of mother to child transmission (PMTCT) in Uganda; great progress has been made in slowing down such transmissions. For example, “In 2015, more than 95% of HIV-positive pregnant women received antiretroviral drugs to reduce risk of mother-to-child transmission (MTCT), equating to 117,887 women.”259

257 Ibid.
258 Ibid.
Despite the tremendous progress made, Uganda remains a high-risk HIV/AIDS country. Furthermore, attempts by the Uganda government to enact and pass laws such as the Anti-Homosexuality Bill in 2013 — which was later annulled in 2014 due to international pressure — contribute to the stigmatization and discrimination of people with HIV/AIDS. Such laws discourage people from testing and seeking treatment. The effort by the Ugandan government to criminalize homosexuality does a disservice to those infected. It stigmatizes and discriminates against people based on their sexual orientation.

Uganda has limited funding for its HIV/AIDS programs. It relies heavily on donor funds to implement its prevention, social support and care and treatment strategies. Donor funds have been unpredictable and often come with attached conditions. In this regard:

For Uganda’s severe HIV epidemic to be reduced, a series of comprehensive health, political and social strategies will need to be implemented. There is also an urgent need to invest in impactful interventions to drastically reduce the number of new infections. This will require more government commitment and for tough decisions to be made at multiple levels - political, technical and operational. This includes domestic funding for the national response, which is currently underfunded and heavily donor dependent.

In addition to the above obstacles, and despite the fact that Uganda has made great ‘progress in enhancing women’s rights and incorporating gender equality’ in its social, economic, political and legal programs:

Rhetoric has failed to translate into action. Classic example — such as the failure to secure co-ownership of land for spouses in land legislation and the summary shelving of the draft Domestic Relations Bill in 2005 on the flimsy grounds of insufficient consultation — are a blow to the seemingly positive environment. They show the absence of political will to directly tackle gender issues and the

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261 Ibid.
use of productive resources.\textsuperscript{262}

With the intention of tackling gender inequality in Uganda, “In 2005, the National Gender Policy was revised to emphasize the mainstreaming of gender concerns in the national development process with a view to improving the social, legal, civic, political, economic and cultural conditions of women.”\textsuperscript{263} However, it must be noted that, “the overall level of gender responsiveness still remains low because of inadequate capacity among sectors and local government planners and implementers to apply gender analysis, limited gender awareness among communities and bureaucratic resistance to gender mainstreaming among decision-makers.”\textsuperscript{264} These decision-makers are for the most part, men. There are intentional efforts to thwart gender mainstreaming by some men who resist such efforts by appealing to culture. The empowerment of women is seen by some men as a threat to their status quo. As the \textit{Uganda Baseline Survey on the African Women’s Rights Protocol: The Maputo Protocol} points out:

Women are also increasingly facing a backlash from male population which has had to cede some of the privileges and powers bestowed by patriarchy. As women empowerment takes root and gender equality becomes more of a reality, patriarchal patterns of behavior continue to rear an ugly head culminating in increased violence against women. Rising religious and cultural fundamentalisms that seek to keep women subordinate to men in all sphere of public and private have further compounded the situation.\textsuperscript{265}

The Uganda government’s “failure to eliminate violence against women; provide

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\textsuperscript{264} Ibid.

equal protection under the law; ensure women’s rights to the highest attainable standard of health, and protect women’s rights to their own autonomy,” leaves a lot to be desired.\textsuperscript{266} The failure to enact and enforce laws that offer equal protection to all citizens, particularly the vulnerable woman and girls, enables and facilitates predatory behavior on the part of men. The wealthy and powerful men easily bribe their way out of such glaring and should-be punishable crimes. Women and girls bear the burden of such predatory behaviors, including infection with HIV/AIDS.

It is also our contention that while Uganda may have had a fine start in its handling of HIV/AIDS, the passage of time has led to complacency on the part of the government, Church and NGOs. As the statistics demonstrate in Chapter One, this complacency has created a void and explains the spike in the number of infections of especially young women and girls. It is also the case that corruption which eats away at the national resources is still a major problem. The government does not seem to have the political will and commitment to fight corruption. Health care facilities are in deplorable conditions and lack required medications, piped water, and electricity. These conditions all compound and make it hard to contain and treat diseases such as HIV/AIDS. And so, while Uganda is portrayed as having successfully managed to reduce the spread and controlled the infection rates of HIV/AIDS, the truth of the matter is that Uganda has still a long way to go in subduing the rate of infections particularly among women and girls.

The Catholic Church in Uganda and Other Faith-Based Organizations

Since the coming of Christianity to Uganda, the Catholic Church and other faith-

\textsuperscript{266} Human Sciences Research Council, Associates for Development and International Center for Research on Women, \textit{Women’s Property Rights, HIV and AIDS, & Domestic Violence, Research Findings from Two Districts in South Africa and Uganda}, 90.
based organizations have played enormous roles in the public square. The Catholic Church built schools and has educated many, built hospitals, clinics, orphanages, homes for children with disabilities, and brought the Gospel with its values to bear on the Ugandan society. The Church’s hospitals and clinics today provide treatment to many HIV/AIDS patients. Many people without financial means are offered treatment and other services such as counseling, free of charge. This is a positive step.

In many respects, the Catholic Church in Uganda has been the voice and conscience of society, by not only announcing the Gospel values and virtues that nurture and guide society, but also in denouncing evils in the Ugandan society. By doing so, the Church has acted and borne witness to Jesus’ prophetic mission of annunciation and denunciation. In terms of corruption that eats away at the country’s resources, including funds meant for HIV/AIDS programs, the Uganda Episcopal Conference (UEC) has denounced corruption in the government and in public services; and called for accountability and transparency. In their Pastoral Letter, With a New Heart and a New Spirit, the Bishops write:

Forms of corruption that we have to denounce are the following: embezzlement of funds, demanding money from the public in order to perform the very duties that one is salaried to perform (bribery), exacting an undue percentage on public contracts, careless or irresponsible administration of public funds, even when there is no out-right theft as it often leads to a break-down in the national economy; disorganization of administrative services.

In another Pastoral Letter, Shaping Our National Destiny, the Bishops, invite the government of Uganda and all Ugandans to treat women with respect and dignity since all share in God’s dignity. They write, “Women share the human nature, they have

immortal souls and are destined for eternal life […] it is […] likeness to God that we respect in every human being, man, woman or child, strong or weak […] there is no essential difference between human beings because they are all children of God.”

In light of HIV/AIDS, the Uganda Episcopal Conference issued a Pastoral Letter in 1989, entitled, *The AIDS Epidemic: Message of the Catholic Bishops of Uganda*. In this letter, the Bishops point out that, “HIV/AIDS is a direct consequence of a coalition of “three enemies,” namely, poverty, ignorance and disease “intricately tied together in one.” The Bishops also admit that HIV/AIDS constitutes a “matter of a grave concern for the Church.” The Bishops attribute the rampant spread of HIV/AIDS to “a loosening of sexual behavior,” compounded by the recent political turmoil, and negative external influences reflected in the importation of books, magazines, films, and songs that “teach that sex can be separated from married love.”

The Bishops further call for conversion by advocating for “faithfulness to God’s law regarding sex and marriage and to rediscover the value of chastity.” The Bishops go on to categorically state that AIDS should and must not be seen as “a punishment from God. Rather than looking at those who have contracted it with feeling of condemnation, we reach out to them in love, understanding and compassion.” The Bishops also commit themselves to “challenge unchristian and untruthful literature, educate people in Christian principles, challenge traditional customs which spread the disease, form youth

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271 Ibid., 6.
support groups in which responsible behavior patterns are encouraged, … and to use available means of communication to bring the Christian message home.”

In *The AIDS Epidemic: Message of the Catholic Bishops of Uganda*, the Bishops call for reaching out to people with HIV/AIDS, orphans and solidarity with the suffering. Solidarity is achieved by visiting the sick, praying with them, listening with sympathy and empathy. By doing so, the Bishops point out that Christians and all Ugandans of good will fulfill Jesus’ healing ministry. Just as Jesus healed the lame, cured lepers, cast out demons and forgave sins, “We too are called to do the same to those who in our day suffer from this new and deadly disease AIDS.” The Bishops also encourage people especially preparing for marriage to test and know their status. The Bishops note that this is optional and where testing is done, there is need for “confidentiality between the counselor and the person intending to get married.”

Orobator, who has done great work on examining the various responses of the Catholic Church in East Africa observes that:

In a move characteristic of the Church in Uganda, the Bishops pledge their support for the government and NGOs and announce their willingness to make moral spiritual and material contribution to the struggle to bring the disease under control. Their first practical step was to create a new post as the Uganda Catholic Secretariat, that of an AIDS programme coordinator, with a special AIDS-desk within the Uganda Catholic Medical Bureau. The AIDS-desk was later replaced by HIV/AIDS Focal point.

All in all, Orobator explains that the Uganda Episcopal Conference’s Pastoral Letter on

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273 Ibid., 8.

274 Ibid., 13.

AIDS Epidemic, recognizes that HIV/AIDS poses a challenge for society and the Church as a community of faith; Bishops affirm the theological position that the current AIDS pandemic represents a special time of grace, challenging the Church to become the sacrament of God’s unconditional love; and in cases where the Church is opposed to condom use on moral and practical grounds, the Bishops’ resistance does not devolve into an antagonistic controversy with Uganda’s government. This has positioned the Church to be a major player in the fight against HIV/AIDS.276

It is also worth noting that the Catholic Church in Uganda has provided sacramental services to the sick, counseling and burying the dead. Other contributions of the Church have come in form of individual member contribution. For example, the Meeting Point, founded by Noelina Namukisa, which offers support and encouragement to HIV-positive group members, acts as a foster home for orphans due to HIV/AIDS, and now receives financial backing from the international donors as well as the local parish community.277

Despite the positive image the Catholic Church in Uganda seems to project in the fight against HIV/AIDS, the Catholic Church still needs to confront within its circles the stigmatization of people with HIV/AIDS. Likewise, and as Orobator points out, the pastoral letters, pastoral directives, and lofty ideas espoused by the Church’s Bishops are often devoid of pastoral praxis. For example, the work of ministering to HIV/AIDS patients has majorly been the work of lay people: catechists, religious women and health


277 Ibid., 91-93.
care workers.\textsuperscript{278} It is rare to see Bishops going into villages to visit people suffering from HIV/AIDS. If there are some, the number is very small. The humility, example and pastoral witness of Pope Francis should serve as an encouragement for the clergy to engage pastorally and theologically. The Bishops and priests also need to listen and learn from people who are living with HIV/AIDS. Orobator rightly observes that listening and learning from people with HIV/AIDS does not undermine the teaching role of the Church. Instead, it would give credibility to the Church as “a caring and responsive community” in this age of HIV/AIDS.\textsuperscript{279}

Likewise, the debate regarding condom use needs to be given attention. Scientific studies do suggest that if used properly, condoms do prevent HIV infection. The issue of condom use is especially critical in the case of sero-discordant couples. It is important to recall that many couples do not arrive at the decision to use condoms easily. Perhaps, the Church might do well to give primacy to formed individual conscience, something the Church values greatly. Margaret A. Ogola, who describes herself as Catholic and a practicing physician, lobbyist, and defender of ecclesiastical teachings, points out that:

The Church has tried to wish away the condom… It is my contention…. that this is impossible. The condom is simply the most accessible and most effective way of keeping infection levels low…. The HIV/AIDS epidemic is a battle that will eventually be won, but there will never be a single silver bullet for it. One of the things that HIV/AIDS has done for humanity has been to remove us from our comfort zones and un-thought out dogmas. The human is a thinking being; one cannot stifle thought and still be fully human…. While it is true that we are all on an epic journey to eternity, eternity begins in this life. We cannot claim to value endless life while we hold the lives of others so cheaply as we sojourn here on earth. Every moment that we live longer is an eternity in microcosm.\textsuperscript{280}


\textsuperscript{279} Ibid., 127.

\textsuperscript{280} Margaret A. Ogola, “Looking Back and Looking Forward at HIV/AIDS in Africa: Serodiscordant Couples, Re-infection, the Role of Women, and the Condom,” In., \textit{Catholic Theological
The Catholic Church in Uganda will do well to examine her attitudes and ways in which women and girls are treated in ministry, holding of offices within the Church, and the ways in which the Church addresses issues of culture. The Church values culture. It is part and parcel of human beings and societies. Pope Francis explains that, “The people of God [are] incarnate in the peoples of the earth, each of which has its own culture. The concept of culture is valuable for grasping the various expressions of the Christian life present in God’s people. It has to do with the lifestyle of a given society, the specific way in which people relate to one another, to other cultures and God.”

In this light, the Church in Uganda has not done a good job in addressing cultural issues that oppress, marginalize and exclude women from public and Church life. Important as culture is, culture is not static. Every culture needs to undergo internal introspection, and where need be; it must evolve or change for the better. In fact, culture is not something “out there.” It is people who form and shape culture and vice versa. Therefore, it is necessary that every culture and people discern what aspects of their culture are life-affirming and which ones are not. Those aspects of culture that degrade, exclude and oppress women and girls need to be challenged and changed.

The Church further suffers from the anachronistic and dualistic divide with the mentality that what is spiritual is better than the material; that the soul needs to be given greater attention than the body. This mentality is partly responsible for the Church’s discomfort to address matters of sexuality in an open manner especially in the age of HIV/AIDS. There is a certain level of discomfort on the part of Bishops and priests to

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speak openly about sexual matters. This reluctance to speak openly about issues of sexuality sometimes gives the impression that the clergy are either callous or not in touch with the daily moral issues that their own congregations grapple with. The HIV/AIDS pandemic challenges the Church’s leaders to be open and appropriately address issues of sexuality at the diocesan, parish, formation institutions, and community levels in small Christian communities (SCC). Both the body and soul of the human person must be given attention they deserve. The entire human person must be formed, not just the soul.

Moreover, the kind of traditional marriage preparations and catechesis that emphasize procreation, unity, and complementary role in marriage is inadequate in the age of HIV/AIDS. While these elements are important, in light of HIV/AIDS, marriage preparations need to be expanded to deal with issues of HIV/AIDS and other sexually transmitted diseases, gender justice, gender roles, respect for one’s spouses, issues of domestic violence, chastity and boundaries within marriage, conscience formation and decision-making process as far as sexual matters are concerned.

It is also our contention that the Church has not fully made good use of its structures such as the media. Church media tends to focus on piety and devotions (Soul formation); but the needs of the body tend to be given little or no attention as they are perceived to be secular. In light of the enormous challenges and the needs of the laity in Uganda, it is important for the Church to discuss topics of development, poverty reduction, encourage HIV testing and seeking of treatment, self-care, to mention a few. The Church needs to take a more proactive stance and embrace the formation of persons that is holistic in these matters and not view them as simply peripheral. A good Catholic theology is one that takes seriously the entire person, body and soul, as created in God’s
image and likeness. Therefore, it is important that the Church refocus her attention to the formation of the entire person, and not just spiritual needs. Furthermore, although the Church publicly condemns discrimination, stigmatization and ostracization of HIV/AIDS patients, there is still a veiled negative attitude that those who fall prey to this ailment are promiscuous. This insidious attitude on the part of some clergy impacts people seeking testing, counseling and treatment.

The Non-Governmental Organizations (NGOs)

NGOs have played an outstanding role in supplementing the governments’ efforts to prevent, reduce and eradicate the spread of HIV/AIDS. John Iliffe, a great historian of Africa points out that, “Along with government bodies, NGOs were largely responsible for the preventive work and the support of HIV-positive people during the incubation stage. Initially, they also attempted to care for those sick with AIDS, but the numbers quickly overwhelmed them and instead this burden fell chiefly on the patients’ families.”

We will single out three major NGOs. This is because all the three NGOs were founded by women. This demonstrates that women and girls do not see themselves as victims, but more importantly, as transformative agents in the fight against HIV/AIDS. They view themselves as charting the way forward and determining their own destiny despite the odds against them.

The AIDS Support Organization (TASO)

According to Iliffe, and in the context of Uganda, by 1992, Uganda had “600 NGOs involved in AIDS work.” The first NGOs in Uganda was The AIDS Support

Organization (TASO), founded by Noerine Kaleeba, a physiotherapist, whose husband had died of a painful death of AIDS. The mission of TASO was to fight stigmatization of people living with HIV/AIDS, and to teach them to live positively by accepting their status and seeking treatment.\textsuperscript{283} TASO has been taken over by the government and now serves as the Ugandan government’s main coordinating body in the prevention, reduction, education and strategic planning in the fight against HIV/AIDS. As of 2003, TASO is believed to have held 75,263 counseling sessions. At the end of that same year, TASO had supported over 100,000 people with HIV/AIDS; two-thirds of whom were women and became the largest NGO in the whole of Africa.\textsuperscript{284} TASO has offices in every district of Uganda.

According to the late John Mary Waliggo, a renowned Ugandan theologian:

TASO is both a movement and an organization. As a movement, TASO invites all individuals and groups in Uganda to unite with it in the struggle to contain the spread of AIDS through massive sensitization of communities, especially the young. It calls on all persons and communities to respect the dignity and rights of infected persons and to give them support for positive living. Employees with HIV/AIDS should be supported to continue working. They should be assisted to meet the medical expenses and allowed rest whenever they need it.\textsuperscript{285}

As an organization, TASO has a board of trustees. Its activities are five-fold:

“sensitization and advocacy; training counselors at various levels of society; giving counseling to people infected and affected by AIDS; providing medical services; and, carrying out social welfare services.”\textsuperscript{286} Furthermore, more recently, TASO has been

\textsuperscript{283} Iliffe, \textit{The African AIDS Epidemic, A History}, 99

\textsuperscript{284} Ibid.


\textsuperscript{286} Waliggo, “A Woman Confronts Social Stigma in Uganda,” In \textit{Catholic Ethicists on HIV/AIDS
involved in:

The fight against stigmatization and discrimination directed at HIV/AIDS infected people and their families; building of competencies for HIV and AIDS service provision and in creating AIDS awareness among the general population; contributed to the establishment of other HIV and AIDS service organizations and these include AIDS Information Centre, Uganda Network of AIDS Service Organization, Positive Men’s Union, National Community for Women Living with HIV/AIDS in Uganda and THETA among others; Health Systems Strengthening; support of orphans and other vulnerable children; provision of Antiretroviral Therapy and medical and psychosocial care and support.287

In a nut shell, TASO has been the most important major player in the prevention, education, support of infected people with HIV, and the largest supporter of orphans and families of HIV-infected people in Uganda. In the person of Noerine Kaleeba, the founder of TASO, we see a woman with a clear vision who does not see herself as just a victim of HIV/AIDS but one who is also willing to play an active role in crafting solutions, in the transformation and resilience of people with AIDS and the entire Ugandan society.

National Community of Women Living with HIV/AIDS (NACWOLA)

The creation of TASO was followed by the National Community of Women Living with AIDS (NACWOLA). This particular NGO was initiated in 1992 by Beatrice Were, who was HIV-positive, to specifically care for sex workers who tested HIV-positive or had AIDS as they sought treatment at Nsambya Hospital in Kampala, Uganda.288 The mission of NACWOLA is “to improve the quality of life of women living with


HIV/AIDS and their families in Uganda.” This NGO has 23 branches/locations throughout Uganda. NACWOLA is involved in the:

- Fight [against] stigma and abuse directed towards HIV/AIDS positive women and their families.
- Access information on HIV/AIDS through networking with other AIDS service organization’s so as to reduce fear and isolation among women living with HIV/AIDS.
- Empower women living with HIV/AIDS economically, so as to reduce their vulnerability and dependency. Unite all women living with HIV/AIDS in order to attain psychological support and act as one strong voice in the fight against AIDS.
- Empower family members, especially children, with coping mechanisms for the future. Contribute to the prevention of further spread of HIV/AIDS in the community.

NACWOLA also produces a newsletter titled “Positive Woman” in six local languages; encourages and supports women with HIV/AIDS to become self-reliant; provides psychological and social support to AIDS patients through visits and counseling; memorializes deceased members by supporting their children economically and educationally; builds capacity of staff members and participates in international forums to shape the HIV/AIDS agenda on the international level. NACWOLA is another example of visionary leadership on the part of HIV/AIDS infected and affected women playing a critical role in shaping the HIV/AIDS agenda. It is an encouraging example of women acting as active agents of their own resilience, and of women moving from “silence to speech, from invisibility to presence, and from submission to co-responsibility.”

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290 Ibid.

291 Ibid.

292 Anne Arabome, “Women in the Church: Models of the Past- Challenges of Today,” In Catholic
KITOVU Mobile Home-Based Care

Noerine Kaleeba and others note that, “The first organizations to develop home-based care programmes for people with HIV in Uganda were the Catholic Hospitals at Nsambya (in Kampala) and Kitovu (in Masaka District). Kitovu Mobile Home-Based Care was “the First of its kind in Africa.” Like the two previous NGOs, Kitovu Mobile Home-Based Care was founded by a woman, Sister Ursula Sharpe, MMM in 1987. According to Orobator, the mission of Kitovu Mobile Home-Based Care was unique in the sense that it reached out to people with HIV/AIDS in the remote areas by providing patient care, orphan care, education, HIV-awareness, behavioral change, income generating activities (IGAs), counseling, family support, and housing construction. Furthermore, what was also special to this Home-Based care was the non-sectarian nature. Though founded by a Catholic nun, it ministers to all people with HIV/AIDS regardless of one’s faith background. It is non-sectarian. The organization also offers spiritual care and support. In addition, the organization was and is run mostly by women.

What is also unique is that, “The team of home care nurses and counselors do offer a measure of spiritual care and support. Each clinic at the various consultation


294 Ibid., 101.

centers in the villages open with a brief prayer and exhortation. It also ends with a prayer. Kitovu Home-Based care is an example of pastoral work done at the grass roots level -- offering prayers, bringing Holy Communion to the sick, and healthcare to the people infected and affected by HIV/AIDS, in the “messiness of people’s lives.” Here is an example compassion lived to the fullest. This particular NGO pursues a holistic and wholistic approach— engaging HIV/AIDS from all aspects of life, and by doing so, accompanying the HIV/AIDS patients in their pain, suffering and sickness.

In general, NGOs have relied heavily on external sources for funding their activities. Some of the NGOs have been involved in corruption scandals as some were brief-case NGOs. It is equally important that NGOs learn to coordinate their works and efforts to avoid duplication of services. The NGOs also need to depoliticize their work. While it is important to coordinate their work with the government of Uganda, the intentional working with and supporting of government policies and positions that seem partisan in nature should be avoided. This is because it undercuts the credibility of the important work NGOs do.

In this chapter, we have examined the factors that are responsible for the gendered vulnerability of women and girls to HIV/AIDS. We have paid special attention to the socio-economic, and, political and cultural factors that undermine the dignity of women and lead to their infection with HIV/AIDS. In the last part, we have assessed briefly the various roles played by the various social actors in Uganda in the fight against HIV/AIDS and the challenges that still confront them. It is our contention that these challenges as

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missing linkages need to be addressed for effective prevention, reduction and eradication of HIV/AIDS in Uganda.

In the chapter that follows, we intend to argue that Catholic Social Teaching provides one of the best avenues to achieve that. We will explore the ethical implications of such a framework. More importantly, we will argue that a “thicker” or more robust conception, that is, a human rights-based solidarity, offers us one of the best ways for addressing the HIV/AIDS pandemic.
CHAPTER THREE

CATHOLIC SOCIAL TEACHING AS AN ETHICAL FRAMEWORK FOR ADDRESSING HIV/AIDS IN UGANDA

Catholic Social Teaching (CST) has become a critical theological framework for the Catholic Church in addressing modern social, economic, cultural and political matters as they impinge on the dignity, rights and the overall flourishing of human persons in the world. Meghan K. Clark explains that:

Frequently called Catholicism’s best kept secret, Catholic social teaching is the Church’s explicit and official grappling with contemporary social problems. While initially employing faith and reason to provide moral guidance to all the faithful, beginning with Pope John XXIII, the tradition explicitly engaged not only the Catholic Church but all people of goodwill. Today, Catholic social teaching is a primary resource for the Catholic contribution to the public sphere on matters of globalization, justice, human dignity, and peace.²⁹⁸

On the other hand, Catholic social thought involves “reflections, analysis, and social ethics by theologians and other scholars in light of Catholic social teaching.”²⁹⁹ It entails “the broad tradition of theologians, intellectuals, activists, social movements and others responding to the signs of the times.”³⁰⁰

In appealing to CST, the Church uses key elements of CST, namely, human dignity, the common good, participation, solidarity and subsidiarity, the option for the poor, and human rights to shed light on modern issues as they either promote or impede the flourishing of human persons. Thomas Massaro points out that, “Christian social ethics in every era is a product of dialogue between Church and world, gospel and

²⁹⁹ Ibid.
³⁰⁰ Ibid.
culture….in its mission to evangelize culture, the Church does consistently address issues of economic and political order.”\textsuperscript{301} By doing so the Church as “a whole pursues a mission that includes public witness and socially responsible engagement with worldly affairs.”\textsuperscript{302}

The Synod of Bishops meant this in its document \textit{Justitia in Mundo} (Justice in the World) when they wrote, “Action on behalf of justice and participation in the transformation of the world fully appear to us as a constitutive dimension of the preaching of the Gospel or in other words, of the Church’s mission for the redemption of the human race and its liberation from every oppressive situation.”\textsuperscript{303} In a similar manner, and in speaking about the mission of the Church in the world today, the Second Vatican Council in its document, the \textit{Pastoral Constitution on the Church in the Modern world} (\textit{Gaudium et Spes}, no. 40), states that:

Thus the Church, at once a visible organization and a spiritual community, travels the same journey as all of humanity and shares the same earthly lot with the world: it is to be a leaven and, as it were, the soul of human society in its renewal by Christ and transformation into the family of God …. The church, then, believes that through each of its members and its community as a whole it can help to make the human family and its history still more human …. Similarly, it is convinced that there is a great variety of help that it can receive from the world, in preparing the ground for the Gospel, both from individuals and from society as a whole, by their talents and activity.\textsuperscript{304}


\textsuperscript{302} Ibid., 5.


This mutual engagement between the Church and the secular world brings about mutual transformation.\footnote{Richard R. Gaillandetz, “The Ecclesiological Foundation of Modern Catholic Social Teaching,” In Modern Catholic Social Teaching: Commentaries and Interpretations, edited by Kenneth R. Himes et al. (Washington, D.C: Georgetown University Press, 2005), 75-76.}

It is in this context that we will contend that CST serves as a critical lens and provides us with one of the best avenues for dealing with HIV/AIDS. We will argue that a more robust or “thicker” conception, namely, a human rights-based solidarity, offers us one of the best ways for addressing the HIV/AIDS pandemic.

The suffering and pain caused by HIV/AIDS among women and girls in Uganda presents a watershed moment for the Ugandan society. It invites us to work for the empowerment and liberation of women and girls. It also challenges us to take a critical look at ourselves as persons; and our structures and policies as they affect and impinge on the life and dignity of women and girls. We must ask ourselves whether we have lost the power to lament and weep at the injustices and oppression brought upon our own mothers and sisters, the women and girls of Uganda. The particular vulnerability of women and girls to HIV/AIDS beckons the Catholic Church in Uganda not merely to lament but also to exercise its prophetic role. As a hermeneutical framework, lamentation is crucial because it enables the Church to name the suffering, pain and cry of women and girls caused by HIV/AIDS but also gives:

Voice to the cries of the guilty seeking forgiveness and reconciliation. Lament offers us a language which names the suffering, questions power structures, calls for justice and recounts to God that the human situation should be otherwise. Lament further expresses hope and trust in God’s compassion and willingness to deliver us from suffering. It is both an individual and community activity.”\footnote{The Windhoek Report: HIV- and AIDS-related Stigma- A Framework for Theological Reflection; In Reflecting Theologically on AIDS: A Global Challenge, edited by Robin Gill (London: SCM Press, 2007), 25-26.}

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Similarly, Musa W. Dube explains that:

Lamentation is a framework that insists on exposing injustice and calling for justice to be established. Those who lament are making a social protest against oppressive conditions of their existence as unacceptable; they are underlining the need for transformation. Their voices are insisting on the need to let justice roll down into our streets and homes. Lamentations are themselves a call for the establishment of justice.  

Arguing from the same perspective of lamentation, the Circle of African Women Theologians calls for the:

Dismantling of patriarchy, which in the HIV and AIDS context has become a death-sanction to women through its feminization of poverty, violence against women, and the disempowerment of women from the ability to make choices over their lives and bodies. It follows that a theology of lamentation points to the fact that an HIV+ church must be a prophetic Church.  

The Church exercises its prophetic ministry in a two-fold manner, namely, through denunciation and annunciation. Walter Brueggemann points out that, “The task of the prophetic ministry is to nurture, nourish, and evoke a consciousness and perception of the dominant culture around us.” The United States Conference of Catholic Bishops (USCCB) underscores this point by writing, “The preacher represents his community by voicing its concerns, by naming its demons, and thus enabling it to gain some understanding and control of the evil which afflicts it.” The Church’s prophetic imagination must entail not just the denouncing of the social, economic, political, and

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308 Ibid., 16-17.


cultural structures, and traditional customs and practices that have been instrumental in bringing about the infection and death of Ugandan women and girls from HIV/AIDS; it must also energize the Ugandan society and Church, and the global community to re-imagine, renew and rebuild structures, policies and lifestyles that promote and enhance dignified life and the flourishing of women and girls.

What HIV/AIDS reveals is that a world of inequalities “is basically an unhealthy world.”[^311] Therefore, a prophetic Church must not only denounce and expose the national and international structures of injustice that have precipitated the spread of HIV/AIDS. It also calls for justice for all, especially the vulnerable women and girls by proclaiming the goodness and sacredness of all human life and the need to preserve all life. It affirms the dignity of all persons and promotes the service of all members particularly the marginalized and vulnerable.[^312]

From a Christian perspective, if human persons are created in God’s image and likeness; and bear the imprint of God and have equal dignity and worth; then we must ask whether society’s social, economic, cultural and political structures enhance the dignity, rights, and worth of individuals or diminish it. Furthermore, a prophetic Church engages society in an active manner, that is, it does not “merely sit, watch and cry in pain for the suffering and the pain of one another.”[^313] Rather, a prophetic Church is a revolutionary Church that seeks lasting changes and transformation of society from its current status quo. It seeks justice expressed in concrete action and empowerment and liberation of the


[^312]: Ibid.

[^313]: Ibid.
We will now proceed to analyze the framework of CST and its ethical implications in the fight against HIV/AIDS.

**Human Dignity**

The concept of human dignity is very crucial in CST. CST teaches that all persons have innate worth and equal dignity. Because of this, human persons must always be treated as ends in themselves and never as a means. Thomas Massaro points out that, “The claim that people have great worth and dignity is certainly a familiar one.” He goes on to assert that all or at least most cultures and religions do in “some way affirm the value of human life and personhood.” Human life is understood to be sacred, and therefore, “inherently dignified and worthy of protection.”

Human dignity is so important that it finds support in an “overlapping consensus” in religious as well as secular traditions, for example, in the Universal Declaration of Human Rights. In this case, human rights serve “as the ‘deep grammar’ of public reasoning.” However, dignity finds its ultimate grounding in the doctrines of creation and redemption. It is this understanding of human persons that the Catholic Church

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317 Ibid.

318 Ibid.

appeals to, in order to spell out her position on various issues. In addition, the Church appeals to the origin, nature and destiny of human persons.\footnote{Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 6.}

Alluding to the creation of human persons in God’s image and likeness, Pope John Paul II writes the following in \textit{Sollicitudo rei socialis}:

> The Church has confidence also in [people], though she knows the evils of which [they are] capable. For she knows well that — in spite of the heritage of sin, and the sin that each one is capable of committing — there exists in the human person sufficient qualities and energies, a fundamental ‘goodness’ (cf. Genesis 1:31), because he [or she] is the image of the Creator, placed under the redemptive influence of Christ, who united himself in some fashion with every [person], and because the efficacious action of the Holy Spirit “fills the earth” (Wis. 1:7).\footnote{Pope John Paul II, “Sollicitudo Rei Socialis,” Vatican, http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_30121987_solicitudo-rei-socialis.html (accessed October 25, 2017); see also, Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 6.}

Here, we see Pope John Paul II show great sensitivity to the nature of the human persons. Despite the potential for sin and sinfulness that people have, there remains an ontological goodness in each person. This is because persons are created in God’s image and likeness. They are redeemed by Jesus Christ, and under the influence of the Holy Spirit who prompts them to do good.

The equal dignity of persons requires that those whose dignity is most threatened or imperiled, as is the case with women and girls affected by and infected with HIV/AIDS in Uganda, be given priority and preferential consideration when setting policies to address the vulnerability of such groups. CST advocates that such decisions, institutions and policies must be appraised on the basis of whether they protect or undermine the dignity of human persons.\footnote{United States Conference of Catholic Bishops (USCCB), \textit{Economic Justice for All} (Washington, D.C.: USCCB, 1986), no. 13.} Viewed from this perspective:
The promotion of human dignity becomes a key criterion for social development, allowing us to judge the intentions, strategies and outcomes of social processes in terms of the realization of conditions compatible with human dignity. While identifying these desirable conditions remains a legitimate source of much dispute, no one seeking to promote human dignity can for long avoid asking the question: amidst these social realities, what is happening to human persons?323

In the words of William O’Neill, “respect for persons as moral agents implies, a fortiori, respect for the conditions of their exercising agency (i.e., the provision of basic liberties and welfare)”; persons are “entitled, not merely to ‘negative liberties,’ but to basic welfare rights.”324 Quoting Gaudium et Spes, Massaro writes that, “If we wish to protect human dignity, we must also pursue an allocation of resources which allows people at least an opportunity to live in a manner commensurate with their innate worth.”325 He notes that, “Whenever possible and prudent, a decent minimum or absolute essential of life, should be provided for. Other goods beyond subsistence (participation, equity, some measure of equality) may be identified as a further and necessary implication of a commitment to human dignity.”326

From the religious and Catholic tradition point of view, if human persons are created in God’s image and likeness, CST teaches that, “God is present in every person, regardless of his or her race, nation, sex, origin, orientation, culture or economic standing. Catholic social teaching asserts that all human beings must see within every person both a reflection of God and a mirror of themselves, and must honor and respect

323 Massaro, Catholic Social Teaching and the United States Welfare Reform, 8.


325 Massaro, Catholic Social Teaching and the United States Welfare Reform, 7. Here, Massaro quotes Mater et Magistra, no. 55.

326 Ibid., no. 69.
this dignity as a divine gift (GS 26-27).”

Similarly, Thomas Massaro contends that, “Reverence for human persons is a reflection of the reverence due to God, just as ‘human nature’ is a partial reflection of ‘divine nature.’” This being the case, any form of violence such as sexual and domestic violence that are often directed at women and girls, and which are also among the causes of HIV/AIDS among women and girls in Uganda, are a violation of their dignity.

Both the dignity and rights of every person must be protected. Human rights, in this case, serve as a framework for establishing specific and “minimum conditions for a just social order irrespective of how the society is structured.” Rights serve as a yardstick for establishing those conditions that are relevant to the protection of the dignity of persons. We will proceed to address human rights.

**Human Rights**

In today’s modern world, the language of human rights plays a critical role. But what precisely are human rights? According to Meghan Clark:

> In popular discussion, the term right is broadly used to identify those services or protections one can lay claim to in society (the right to freedom of speech, movement, education, access to health care, and so on) …. A right begins with a person who is the bearer of the right (subject) and includes a particular substance (object) that is claimed against another individual or group who has the correlative duty to respect this right.

Jack Donnelly puts it this way:

> Human rights are literally the rights that one has simply because one is a human  

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329 Thompson, *Introducing Catholic Social Thought*, 64.

being.... Human rights are equal rights: one either is or is not a human being, and therefore has the same human rights as everyone else (or none at all). Human rights also are inalienable rights.... And they are universal, in the sense that today we consider all members of the species Homo sapiens “human beings” and thus holders of rights.”

Understood this way, human rights “[specify] minimum conditions for a dignified life, a life worthy of a human being.... Human rights thus are constitutive no less than regulative rules and practices.” In our contemporary social, economic and political milieu, “the language of human rights has emerged as compelling rhetoric and framework. Our social conscience struggles with the expanding recognition of the humanity of all peoples and the ambiguity of the claims the suffering of others places upon us.” In this regard, human rights serve as a basic structure for adjudicating various responses and positions in the global order.

From the perspective of the Catholic tradition, human rights “[offer] a profound grounding of the concept of ‘human dignity, realized in community,’ a coherent integration of political and economic rights, and a balanced appreciation of both rights and duties.” CST links rights with duties or responsibilities. From the above perspective, the Catholic tradition offers a more robust comprehension and treatment of human rights. This is a distinctive mark in the way CST embraces human rights in addressing various issues as they affect the human person. Despite the great appreciation and role human rights have gained in modern discourse, human rights remain highly

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332 Ibid., 16.

333 Ibid., 1.

334 Ibid.
contested. For example, “Some contend that human rights are a Western construct imposed on other cultures and others argue that cultural diversity and pluralism make a universal declaration of human rights theoretically impossible.”

In the same vein, some scholars like Claude Ake point out that “the liberal human rights tradition is sociologically specific and African communities have little interest in choice for there is no choice in ignorance. There is no freedom for hungry people or those eternally oppressed by disease. It is no wonder that the idea of human rights has tended to sound hollow in the African context.” And because the secular doctrine of rights lacks the grounds that the Catholic tradition offers, it is considered “thin,” that is:

Lacking a solid theory or cosmology behind them... such secular rights theories are susceptible to the weighty charge that, in their portrayal of social reality, rights just seem to float around, adhering to people without any satisfying justification behind their passing claims and sweeping assertions. Because of the resulting inability to link rights claims with corresponding obligations that specific parties must discharge for the benefit of others, rights within such theories tend to remain vague and merely hortatory in nature.

Regardless of one’s position, it is indisputable that human rights today have become a tour de force in addressing issues of poverty, structural injustice, health care, politics, economics and social aspects of persons. Isidore Bonabom, S.J. explains:

The notion of human rights belongs to a repertoire of abstract, ethical norms, but it provides two unifying principles in the real world. One is that respect for human dignity is a unifying principle for society because it underpins a specific way in which human beings have rights by virtue of their humanity. To recognize the values of human dignity, equality, and freedom is to realize the meaning of our

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335 Thompson, Introducing Catholic Social Thought, 64.


shared humanity; to fail to recognize the human in the other is to diminish the meaning of our shared humanity; for this reason, violations of human rights dehumanize the victim and the perpetrator alike. The second is that human rights expose the falsity of policies and practices that justify human beings’ inhumanity to others. This is derived from an understanding of human dignity and is didactic for our time as well as for future generations.338

We will now proceed to analyze the history of human rights in the Catholic tradition.

A Historical survey of Human Rights in the Catholic Tradition

A number of salient points are worth mentioning here. To be clear, the discourse of natural or human rights has a long history. However, human rights emerged as a lingua franca in the 20th century in response to the tragic events of the Holocaust and World War II. Given the devastation and horrors wrought by both events, the world needed some form of response to deal with these tragic and sad events. One of the major responses was the formation of the United Nations and Universal Declaration of Human Rights.339 It is equally important to point out that although the Catholic Church and her intellectuals were actively involved in both events, “the official moral teaching of the Roman Catholic Church did not embrace the language of human rights. Catholic moral theology preferred the language of natural law, in which the Church sought to discover and explain moral laws based upon relationships within the created world.”340

A shift, however, was later to take place in the 1960s when the language of human rights began to be more explicitly incorporated and systematized in official


339 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 9.

340 Ibid.
teachings of the Church, starting with Pope John XXIII. Speaking about the development of human rights theory in the Catholic tradition, David Hollenbach observes that it “has roots all the way back to Thomas Aquinas, Augustine, the Bible and Aristotle. More proximately, it emerged from the social doctrine of the modern papacy.” We will now proceed to examine the contributions of various Popes to the development of human rights. The writings of the Popes principally in the form of encyclicals were precipitated by specific social, economic and political quagmires. It is these contexts which “shaped both the content and tone of the teachings.” The primary focus here is to highlight the various papal teachings on human rights.

Pope Leo XIII and Human Rights

David Hollenbach explains that, “The history of modern Roman Catholic teaching about human rights begins with the pontificate of Leo XIII (1878-1903). It was with Leo XIII that the Church began to move from a stance of adamant resistance to modern Western developments in political and social life to a stance of critical participation in them.” Pope Leo XIII’s teachings on human rights were contained in his encyclical *Rerum Novarum* (RN) of 1891. In authoring this particular encyclical, Leo XIII was responding to the social chaos sparked by the industrial revolution and the spirit of nationalism taking place in Europe. This nationalism was perceived as an existential

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341 Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 10.


343 Ibid., 42.

344 Ibid., 43.
threat to the Papal States. Pope Leo XIII’s encyclical was a product of two social movements: liberalism and capitalism on the one hand, and Marxism and socialism on the other. Explicating the historical nature of human rights, Thompson writes:

The language of rights, a product of enlightenment, emerged in the contemporary world in two strands or traditions. Liberalism and capitalism emphasized freedom and thus civil and political rights, such as the right to political participation, juridical rights, the rights of economic initiative and private property, and the rights to freedom of press, of assembly, and of religion, and so on. Marxism and socialism emphasized the equality and thus social and economic rights, such as the rights to food, shelter, education and health care, and to work and a just wage. Civil and political rights are generally immunities that are more readily subject to incorporation into law. Social and economic rights are empowerments or entitlements that require government policies and subsidies.

While liberalism and capitalism tend to put emphasis on individual freedom and rights; Marxism and socialism place emphasis on the community. The Catholic tradition avoids overemphasis on both individualism and collectivism since both distort the ethics of human rights. To do so, the Catholic Church speaks of the unique nature of persons but within the context of the community. For the Catholic tradition, “The goal is neither the autonomous individual of liberalism nor the submersion of the individual into a commune or state of collectivism, but persons flourishing through relationships and community.”

By this careful balancing act, the Catholic tradition recognizes the uniqueness and worth of each individual person but also the value of the community or state in guaranteeing provision and protection of certain rights.

In writing *Rerum Novarum*, Pope Leo XIII places the human person at the center.

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346 Thompson, *Introducing Catholic Social Thought*, 63-64.

347 Ibid., 64.
He writes, “[The human person] precedes the State.” The human person “is the standard by which political and legal institutions are to be evaluated. Politics and law are to serve persons …. The human person is never simply of functional or utilitarian value.” The implication here is that the human person should never be subjected to conditions that dehumanize him or her. Dignity requires that human persons be treated as beings with utmost respect. Furthermore, because of the transcendental nature of the human person, Pope Leo XIII writes:

Life on earth, however good and desirable in itself, is not the final purpose for which man is created; it is only the way and the means to that attainment of truth, and that practice of goodness in which the full life of the soul consists…. No man may outrage with impunity that human dignity which God himself treats with reverence, nor stand in the way of that higher life which is the preparation for the eternal life of heaven.

For Leo XIII, human persons as the ultimate creation of God are meant for eternal life. No human act may impede the human persons’ ultimate journey to heaven or eternal life. Leo sees the Church’s role as guiding and facilitating people in their attainment of this higher life. From this perspective, the Pope is able to condemn forms of governments that subordinate persons. In other words, dictatorial or supremacist governments or those that put overemphasis on the pursuit of liberty at the expense of human persons and their dignity are by no means proper governments.

According to David Hollenbach, Leo’s

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349 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 43-44.


351 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 44.
condemnation of such governments was in part motivated by the spirit of anticlericalism and the opposition to the Church’s role in the public sphere that was prevalent at the time and that emerged as a result of the French revolution.\textsuperscript{352}

Pope Leo XIII emphasizes the equality of persons in the economic and legal spheres. For example, as far as the rewards of human labor are concerned, he points out that all are entitled to have equal benefits to the fruits of labor. He wrote, “In this respect all men [and women] are equal; there is here no difference between rich and poor, master and servant, ruler and ruled.”\textsuperscript{353} Similarly, in the legal area, he teaches that, “As regards the State, the interests of all, whether high or low, are equal. The members of the working classes are citizens by nature and by the same right as the rich; they are real parts, living the life which makes up, through the family, the body of the commonwealth.”\textsuperscript{354} While Leo emphasizes equality of persons in the economic and legal structures; socially, with the Church’s organizational nature in mind, he envisions a paternalistic or hierarchical society.\textsuperscript{355} This, one might say, is one weakness of his encyclical and teaching.

Another noteworthy concern for Leo XIII in the area of economics is the concentration of capital and the benefits of labor in the hands of a few rich people while the poor languish in poverty, wretchedness and misery. In response to the appalling situation in which the majority poor live, Leo XIII writes that, “No [person] may with

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\textsuperscript{352} Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 44.
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\textsuperscript{354} Pope Leo XIII, “Rerum Novarum: On Capital and Labor,” no. 33; Also see, Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 45.
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\textsuperscript{355} Ibid.
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impunity outrage that dignity which God Himself treats with great reverence.”

In addition, and as part of the solution, he explains that, “The first thing of all to secure is to save the unfortunate working people from the cruelty of men of greed, who use human beings as mere instruments for money making.”

The equal dignity and fundamental worth of human persons requires this. To view people as mere instruments of labor debases the dignity of persons.

The encyclical also goes on to point out “the relative rights and mutual duties of the rich and poor, of capital and labor.”

According to David Hollenbach, “These rights and duties were seen as the demands of human dignity refracted and differentiated through the concrete structures of human existence in nature, society and the economic sphere.”

Pope Leo XIII also defends:

The right to adequate remuneration for one’s labor and the right to retain the results of labor in the form of private property. Furthermore, the encyclical calls for the extension of actual property ownership to as great a number of persons as possible. The right to private property derives not simply from the freedom of individual persons to act in a way unimpeded by others, but also from the fact that persons necessarily depend for the preservation of their dignity upon material conditions. All have a right to have these needs fulfilled at least minimally.

In the same vein, people have a right to food, shelter and clothing; and because of this, they need a just wage. Workers and employers are free to engage in contracts.

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357 Ibid., no. 42.

358 Ibid., no. 2.

359 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 47.

360 Ibid., 47-48.
However, these contracts must be guided by natural justice.\(^{361}\) Furthermore, Leo clearly indicates that all people must contribute to the common good (RN. 34). The contribution to the common good will differ from person to person depending on the availability of resources to individuals. The State or government has a duty to provide for people in need and to protect all persons from exploitation and instrumentalization (RN. 37). In spelling out the special obligation of the State or government in protecting the poor, Leo XIII wrote:

Rights must be religiously respected wherever they exist, and it is the duty of the public authority to prevent and to punish injury, and to protect everyone in the possession of his own. Still, when there is question of defending the rights of individuals, the poor and badly off have a claim to special consideration. The richer class have many ways of shielding themselves, and stand less in need of help from the State; whereas the mass of the poor have no resources of their own to fall back upon, and must chiefly depend upon the assistance of the State. And it is for this reason that wage-earners, since they mostly belong in the mass of the needy, should be specially cared for and protected by the government.\(^{362}\)

It is Leo XIII who lays the foundation for Catholic social teaching as it has come to be known today. It is also Leo who begins to use the language of human rights in his writings, something which had been brushed aside in magisterial teachings in previous centuries. Other Popes follow and build upon the initiatives undertaken by Leo XIII. We will now look at Pope Pius XI.

Pope Pius XI and Human Rights

Pope Pius XI’s encyclical *Quadragesimo Anno* (After Forty Years) was written on the 40\(^{th}\) anniversary of Leo XIII’s *Rerum Novarum*. Its major functions were fourfold:


\(^{362}\) Ibid., no. 37; Also, Hollenbach, *Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition*, 49.
to confirm the Church’s solidarity with the workers; to condemn widespread disparities between the rich elites and the poor majority during the great depression; to clarify the rights and duties of the poor and wealthy, labor and capital; and to point out some safeguard against the social and economic evils prevailing in Europe. With the above points in mind, Pope Pius XI sets out to explain what *Quadragesimo Anno* (Q.A.) was about and clarifies some misconceptions that emerged as a result of Pope Leo XIII’s teachings. To those who accused the Church of siding with the wealthy class because of Leo XIII’s teaching regarding the right to private property, Pius XI highlights that dual nature of private property. He writes:

> The Creator Himself has given [people] the right of private ownership not only that individuals may be able to provide for themselves and their families but also that the goods which the Creator destined for the entire family of [humankind] may through this institution truly serve this purpose. All this can be achieved in no wise except through the maintenance of a certain and definite order.

Here, we see Pius XI do a careful balancing act by lifting up both the individual as well as the social character of private property. On the one hand, he avoids individualism by emphasizing that private property has a social or common good aspect to it. On the other, he avoids collectivism by arguing that the right to private property is a right, given by God. For Pope Pius XI, to chose or prefer one and neglect the other, is to be “swept from [one’s] course upon the shoals of that moral, juridical, and social modernism.”

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Where necessary the government or civil authority can and should intervene in the use of private property. In light of the common good, civil authority can and should specify the usage of private property. However, civil authorities must do this carefully so as not to forego the individual character of private property (Q.A., nos. 47-48).³⁶⁶

The most important contribution that Q.A. makes is Pius XI’s call that the structures of society and its economy, whatever the type, must be regulated by the principle of social justice. In explaining the role of social justice, David Hollenbach points out that, social justice requires that the economy reflect the dual nature of private property, that is, individual as well as social (common good). Social justice serves as regulatory measure for social institutions in order to protect the dignity of people. It also serves to explain the fact that human rights have social and individual aspects, and as such, demand the protection of society’s institutions and government.³⁶⁷ In the framework of social justice, Pope Pius XI advocated for proportionate and fair distribution of the fruits of labor. Profits and the overall outcome of labor should be evenly distributed between the workers and the owners of industries. Neither should the capital flow benefit the owners to the disadvantage of the laborers. This is precisely so that the common good of all is protected. The dignity of workers warrants that they share in the benefits of their labor. Above all, both the owners and workers need to understand that material resources have God as the original and sole owner.³⁶⁸ Proper stewardship


³⁶⁷ Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 55.

³⁶⁸ Hinze, “Commentary on Quadragesimo Anno (After Forty Years),” In Modern Catholic Social Teaching: Commentaries and Interpretations, edited by Kenneth R. Himes, OFM, editor, Lisa Sowle...
must be exercised in the use of these resources. In the words of Pius XI:

To each, therefore, must be given his own share of goods, and the distribution of created goods, which, as every discerning person knows, is laboring today under the gravest evils due to the huge disparity between the few exceedingly rich and the unnumbered propertyless, must be effectively called back to and brought into conformity with the norms of the common good, that is, social justice.\textsuperscript{369}

Pope Pius XI like his predecessor Leo XIII demonstrates his sensitivity and concern for the poor majority caught up in abject poverty and dehumanizing conditions in which they live. By doing so, Pius XI demonstrates the Church’s solidarity with the poor and shows particular (preferential) concern for the poor working class, themes that have become central in CST. Similarly, as Leo XIII had done in \textit{Rerum Novarum} (no. 34), Pius XI calls for just wages for the work done. A just wage is one that permits the workers to support themselves and their families. To achieve this right, the principle of commutative justice must be observed; and where need be, contracts should be modified to reflect equitable distribution of wealth.\textsuperscript{370} Pius XI insists that Christian charity alone is not sufficient. There has to be real and tangible structural changes that promote and protect the dignity of persons.\textsuperscript{371} The rights of persons can be fully supported only in societies where both social and commutative justices prevail. In the words of David Hollenbach, part of Pope Pius XI’s major contribution was the recognition of how social conditions

\textsuperscript{369} Pope Pius XI, Quadragesimo Anno, no. 58.

\textsuperscript{370} Ibid., nos. 63-68. See also, Hinze, “Commentary on Quadragesimo Anno (After Forty Years),” In \textit{Modern Catholic Social Teaching: Commentaries and Interpretations}, edited by Kenneth R. Himes, OFM, editor, Lisa Sowle Cahill, Charles E. Curran, David Hollenbach, S.J., and Thomas Shannon, associate editors,159.

\textsuperscript{371} Hinze, “Commentary on Quadragesimo Anno (After Forty Years),” In \textit{Modern Catholic Social Teaching: Commentaries and Interpretations}, edited by Kenneth R. Himes, OFM, editor, Lisa Sowle Cahill, Charles E. Curran, David Hollenbach, S.J., and Thomas Shannon, associate editors, 158-159.
render it possible to uphold the dignity and rights of persons.372

Understanding the needs of the poor requires us to take a closer look at how policies are formulated. The principle of subsidiarity states that, “Nothing should be done by a larger or more complex organization which can be done as well by a smaller and simpler organization. In other words, any activity which can be performed by a more decentralized entity should be.”373 In paragraph 80 of Q.A., Pius XI reaffirms the principle of subsidiarity by stating:

The supreme authority of the State ought, therefore, to let subordinate groups handle matters and concerns of lesser importance, which would otherwise dissipate its efforts greatly. Thereby the State will more freely, powerfully, and effectively do all those things that belong to it alone because it alone can do them: directing, watching, urging, restraining, as occasion requires and necessity demands. Therefore, those in power should be sure that the more perfectly a graduated order is kept among the various associations, in observance of the principle of "subsidiary function," the stronger social authority and effectiveness will be the happier and more prosperous the condition of the State.374

In another encyclical, Divini Redemptoris, Pope Pius XI points out that human beings have, “the right to life, to bodily integrity, to the necessary means of existence; the right to tend toward his ultimate goal in the path marked out for him by God; the right of association and the right to possess and use property.”375 In both Quadragesimo Anno and Divini Redemptoris, Pius XI mentions the rights which Leo XI had earlier affirmed. By

372 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 56.


374 Pope Pius XI, Quadragesimo Anno, no. 80.

doing, he demonstrates continuity with Leo XI. He also indicates that these rights can be fulfilled in a society and realized only when the social conditions are such that they enable such realization or fulfillment.376

Pope Pius XII and Human Rights

The pontificate of Pius XII ran from 1939 to 1958. The social and political order was that of World War II, the increasingly repressive regime of Stalin, and deplorable situation of the Church in Eastern Europe after the Second World War.377 Furthermore, what is so peculiar is that unlike his two predecessors, Pope Pius XII did not author a single social encyclical. His primary way of speaking, writing and continuing the tradition of CST was by way of Christmas messages broadcast on the radio.378 While Pius XII did not write and promulgate a single social encyclical, he saw himself as following in the footsteps of his predecessors, affirmed the indisputable role of the Church in the public square, and strongly asserted that the role of public authority or the state must be, “To safeguard the inviolable sphere of the rights of the human person and facilitate the fulfillment of his [or her] duties.”379 Pius XII was concerned about the forms of totalitarian governments in Europe that seemed to oppress the human person.

To leave no room for guesswork, Pope Pius XII brought to the center and explicitly spoke about human dignity in Catholic social teaching and social morality. As

376 Hollenbach, *Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition*, 56.

377 Ibid.


379 Ibid.
he saw it, at the core of the root causes of social, economic and political disorder in his day was the failure to respect the dignity of human persons within society. To restore international order and to bring about meaningful social, economic and political reforms meant supporting the dignity and rights of human persons. He also opposed advancement of technology that subverted persons, pushed human beings to the peripheries of labor and thus degraded their dignity. According to Pius XII, the dignity of people was intrinsic to the very nature of social organizations. As a result, all social, economic and political organizations must be at the service of the dignity of human persons. Such an approach was inconceivable outside “a community of morally responsible citizens.”

David Hollenbach encapsulates Pope Pius XII’s position by asserting that:

His vision of a society in which human dignity is respected was neither an anarchist paradise nor the Marxist eschaton which will arrive after the withering away of the state. The task of respecting human dignity is a moral task present within the conditions and limits of human life. Thus the achievement of the goal is not an impossible ideal, but realizable moral imperative. Respect for human dignity occurs within and through these conditions and limits... It is structured by that finite form of mutuality which is transcendental dignity’s human form. These finite conditions which are necessary for the promotion of human dignity are human rights.

He saw social institutions of family, property, association and government as the ones that shape the community of morally responsible citizens and the form of human interrelationship within social institutions condition human dignity. Further still, with respect “to the dignity of the human person,” Pius XII was:

Most concerned about the practical realization of the following fundamental rights: the right to maintain and develop one’s corporal, intellectual and moral life

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381 Ibid., 59.

382 Ibid., 59-60.
and especially the right to religious formation and education; the right to worship God in private and public and to carry on religious works of charity; the right to marry and to achieve the aim of married life; the right to conjugal and domestic society; the right to work, as the indispensable means towards the maintenance of family; the right to free choice of a state of life, and hence, too, of the priesthood or religious life; the right to use of material goods, in keeping with the duties and social limitations.383

All in all, in Pope Pius XII, we see a vigorous defense of the dignity of the human person, of social unity and collaboration among various classes or groups. He denounces the attitude of “us and them,” an attitude that sees people in terms of masses or herds, and, racism and extreme nationalistic tendencies. Furthermore, he emphasizes the dignity of all work or human labor. He views work as a participation in the mastery of the world and so as part of God’s plan; he sees human rights are the necessary condition for the realization of human dignity; and envisions a Christian conception of the state built on ‘kindliness, responsible Christian spirit and guided by morality and dependent on the will of the Creator.”384 Yet in the world of today, Pius XII would have a hard time convincing those who argue for the separation of Church and State; and would equally have difficulties in persuading Jews and non-Christians that his message is not divisive and exclusionary.385 We will now move ahead and examine the teachings of Pope John XXIII.


385 Ibid., 185.
The systematic treatment of human rights in the Catholic tradition received its amplified recognition and support in Pope John XXIII with the publication of *Mater et Magistra* (Christianity and Social Progress). He challenged the Church to read and examine the *signs of the time*. In this sense, the encyclicals became the primary way of the Popes to addressing modern issues as they impact human persons, human dignity, and human rights. For John XXIII, human rights are contextualized and understood as applicable to and possessed by all persons but within the community.\(^{386}\)

Referring to Pope Leo XIII’s encyclical, *Rerum Novarum*, Pope John XXIII argues that, “Private property, including that of productive good, is a natural right possessed by all, which the state may by no means suppress. However, as there is from nature a social aspect to private property, he who uses his right in this regard must take into account not merely his own welfare but that of others as well.”\(^{387}\) John XXIII shows sensitivity not only for the dignity and welfare of the individual persons but also the entire society. Earthly goods or material possessions have both a personal as well as a communal aspect. And so, to amass material possessions and maximize profits at the expense of the community and common good would be to forfeit one’s moral responsibilities. The transcendental nature of the human person demands that created and material possessions be at the service of human persons. In the same light, important as earthly goods or possessions are for the sustenance of human persons, they are not ends.
in themselves. They are meant to facilitate people’s lives and not become obstacles to people’s eternal destiny. In the words of Massaro, it is God who has permanent and absolute lordship over all creation and to whom all are accountable. Furthermore, material possession or property have a universal destination that is, they are meant for sustaining life for all, not just a few; and all persons have a responsibility in the way they exercise stewardship over material possessions.³⁸⁸

It would be an injustice to hoard so much for oneself while the rest of the members of society is living in poverty or great need. In fact, Gaudium et Spes (Pastoral Constitution on the Church in the Modern World) goes on to assert that individuals in extreme need “are entitled to take what they need from the riches of others.”³⁸⁹ Accordingly, CST “underscores the belief that with increased power comes increased accountability, with great wealth comes great responsibility, and with human rights come human duties.”³⁹⁰

The delicate balancing act of personal and communal use of private property and the dignity of human person as well as the welfare of the community are seen in the way Pope John XXIII defined the common good in Mater et Magistra. According to John XXIII, the common good is, “the sum total of those conditions of social living whereby [people] are enabled more fully and more readily to achieve their own perfection.”³⁹¹

³⁸⁸ Massaro, Catholic Social Teaching and the United States Welfare Reform, 17.
³⁹¹ John XXIII, Mater et Magistra., no. 65.
number of salient points are worthy of mention here. First:

The common good is here described primarily in structural terms. It is not a summation of the goods of individual citizens, but a set of social conditions which facilitate the realization of personal good by individuals. These conditions are themselves social realities. They are structural and organizational. Thus, in a significantly new emphasis within the tradition John XXIII moved toward a definition of human dignity in social and structural terms.\footnote{Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 64.}

Secondly, this new understanding of the common good is derived from the recognition of the fact that:

Human dignity is always supported, conditioned and limited by the forms of social life within which it is found; 2) all arguments about the foundation of morality must take this social context of dignity into consideration as one of their starting points; and 3) the moral response to the claim of worth of persons will be more and more mediated through social structures.\footnote{Ibid.}

This happens even “in the more intimate aspects of personal life.”\footnote{John XXIII, \textit{Mater et Magistra}, nos., 60, 65 and 66 in Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 64.}

The genuine community, as envisaged by John XXIII, exists “only if individual members are considered and treated as persons and are encouraged to participate in the affairs of the group.”\footnote{Pope John XXIII, \textit{Mater et Magistra}, no. 65.} Therefore to claim any rights for oneself corresponds to and entails necessarily the duty to respect the rights of others.\footnote{John XXIII, \textit{Pacem in Terris}, no. 30.} Additionally, John XXIII states that to claim one’s rights while denying others theirs is tantamount to building with one hand and destroying with the other.\footnote{Ibid.} He goes on to state that “It is not enough, for example, to acknowledge and respect every [person’s] right to the means of subsistence if

\footnote{392 Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 64.}
\footnote{393 Ibid.}
\footnote{394 John XXIII, \textit{Mater et Magistra}, nos., 60, 65 and 66 in Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 64.}
\footnote{395 Pope John XXIII, \textit{Mater et Magistra}, no. 65.}
\footnote{396 John XXIII, \textit{Pacem in Terris}, no. 30.}
\footnote{397 Ibid.}
we do not strive to the best of our ability for a sufficient supply of what is necessary for his sustenance (PT 32).”398 In other words, it is one thing to claim rights and duties; it is a different thing for individuals to exercise those rights and duties. Clark Meghan explains that:

Recognizing and living out our own individual human rights is not sufficient; all human rights include the primary duties of reciprocity and mutual collaboration. Founded on the equality of all human persons, human rights demand that when we recognize our own rights, we have a duty to recognize the human rights of others; “once this is admitted, it follows that in human society to one [person’s] right there corresponds a duty in all other persons: the duty, namely, of acknowledging and respecting the right in question (Pacem et Terris, no. 30).”399

To be a human person is to be a rational agent or subject with rights and duties. Human dignity specifies the rights of individuals. Accordingly, if we respect persons as rational and moral agents with the capacity to exercise their agency, it follows that we must respect those conditions that facilitate the exercise of people’s rational agency. In this case, human rights serve to provide us with the vocabulary or language for the specification of the conditions that are necessary for the treatment of human persons. Kenneth Himes explains that “human rights give specificity to the language of human dignity; they articulate the freedoms, the goods and the relationships that are expressive of a person’s dignity.”400

As bearers of rights, the women and girls with HIV/AIDS must be seen and treated with dignity, just as everyone else. In addition, the specific condition of HIV/AIDS status demands that we work for those conditions that facilitate their exercise

398 Clark, The Vision of Catholic Social thought, the Virtue of Solidarity and the Praxis of Human Rights, 14.
399 Ibid., 13-14.
400 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 64.
of their moral and rational agency. The conception of equal respect and consideration becomes the foundation and standard for moral judgment, evaluation of policies, the preference option for their treatment, and our moral judgment regarding justice, dignity and the universal human rights of such persons. In Massaro’s words, “No person is to be considered a surplus person.” Rather, the social membership of all persons that is universal in nature “calls particular attention to the plight of those who are in danger of falling out of the mainstream.”

The social membership of persons requires equality in treatment and participation of all in the life of society. This equality and participation are necessary for establishing social order which is necessary for human flourishing.

Since as Michael Walzer explains, “the primary good that we distribute to one another is membership in some human community,” the Catholic Bishops of the United States contend that “Basic justice demands the establishment of minimum levels of participation in the life of the human community for all persons. The ultimate injustice is for a person or group to be actively treated or passively abandoned as if they were nonmembers of the human race.” Human dignity which is an inherent quality of all human persons as moral agents demands the fulfillment of basic human rights, that is, those conditions or capabilities which facilitate human flourishing, including participation; and the correlative duties of forbearance, provision and protection of all

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402 Ibid.


persons, particularly the most vulnerable.

In yet another encyclical, *Pacem in Terris* (PT), translated as *Peace on Earth*, Pope John XXIII, set out to offer “the most systematic of the modern papal statements on social and political questions. Borrowing the language of the U.N. Universal Declaration, *Pacem in Terris* elaborated a theory of human rights as a framework for international and national peace. *Pacem in Terris* is organized around the most basic principle of Catholic social thought, the dignity of the person.”⁴⁰⁵ *Pacem in Terris* was unique as a papal encyclical. Unlike other previous encyclicals that had been addressed to only Catholics, this particular encyclical was addressed to all people of good will.⁴⁰⁶

While *Pacem in Terris*’s main focus was peace, Drew Christiansen points out that “the encyclical’s recourse to rights language itself constituted an intellectual challenge. For some it seemed a capitulation to the enlightenment; to others it amounted to an overdue encounter with the secular (Western) world.”⁴⁰⁷ Pope John XXIII sought to transcend the usual old debates by integrating and expanding the list of human rights. Meghan Clark explains:

> While much of the world was debating whether or not civil-political rights (those emphasized by Western democracies) or socioeconomic rights (those often associated with communism) were the primary or ‘real’ rights, the actual cause of human rights suffered as a result. The UN declaration sought to transcend this debate by including all categories of rights and leaving it to the member states to implement and prioritize them. John XXIII, instead, sought to integrate and expand further the canon of human rights by offering a systematic listing of

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⁴⁰⁵ Hollenbach, *Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition*, 64.

⁴⁰⁶ Clark, *The Vision of Catholic Social thought, the Virtue of Solidarity and the Praxis of Human Rights*, 12.

human rights and corresponding duties.\textsuperscript{408}

Because of its wide ranging exposition on human rights (socio-economic, civil-political, and cultural and religious and their corresponding duties), \textit{Pacem in Terris}, was branded “the Catholic charter of human rights.”\textsuperscript{409} To set the stage for his elucidation on human rights, John XXIII in \textit{Pacem in Terris}, begins by defining the human society in which rights are lived and protected. He asserts that:

Any human society, if it is to be well ordered and productive, must lay down as a foundation this principle, namely, that every human being is a person; that is, his nature is endowed with intelligence and free will. Indeed, precisely because he is a person he has rights and obligations flowing directly and simultaneously from the very nature. And as these rights are universal and inviolable so they cannot be surrendered.\textsuperscript{410}

He goes on to categorize rights in three major sections, that is, “order between persons, between individuals and public authority within a state, and between states.”\textsuperscript{411}

John XXIII, then, proceeds to give a detailed analysis of human rights and duties. He contextualizes rights within the community and links rights with correlative duties. In David Hollenbach’s words, “To the moral claims which arise from human dignity there correspond duties and responsibilities of society. To every human right there corresponds the duty that this right be respected by the subject of the right himself or herself, by other individual persons and by society.”\textsuperscript{412}

\begin{footnotes}
\item[408] Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 12-13.
\item[409] Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 86.
\item[410] Pope John XXIII, Pacem in Terris, no. 9. See also, Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 13.
\item[411] Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 13.
\end{footnotes}
Pacem in Terris emerges as a major document on the question of human rights. It combines and expands socio-economic rights and liberal-political rights. David Hollenbach explains that, “Rights to life and an adequate standard of living are the rights to life, bodily integrity, food, shelter, clothing, rest, medical care, necessary social services, security in case of sickness, unemployment, widowhood, old age or unemployment, (PT. 11).”

It also spells out moral, political and cultural rights. Among these rights, Pacem in Terris mentions the right to respect oneself, a good reputation, freedom of communication, pursuit of art, truth (PT 12), and education (PT13). Pacem in Terris further mentions the right to active political life (PT 26), and the right to meeting and association (PT 23-24).

Pacem in Terris goes on to explain economic rights. These include the rights to work, healthy working conditions, appropriate participation in the economy, just wages, and private property with social duties. In addition, the encyclical also stipulates that people have rights to a state or vocation in life, including setting up a family, support of family life, and parents have rights to educate their children. There are also religious rights, for example, the right to honor God with one’s conscience and to practice religion in private as well as in public.

Further still, of significant importance, Pacem in Terris recognizes the social nature of human persons and the encyclical points out that, “Human society can neither be well-ordered or prosperous unless it has people invested with legitimate authority to

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413 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition, 66-67.

414 Ibid., 67.

415 Ibid.
preserve its institutions and to devote themselves as far as necessary to work and care for the good of all” (PT 46). However, the common good or simply the good of all, demands of the legitimate authority the protection and promotion of the rights of its citizens. The failure to engage citizens in political participation as well as to permit civil disobedience to unjust laws, and to provide social support and services renders such authority or government illegitimate. In Meghan Clark’s words:

The relationship between the individual and the state is to be judged, based on the promotion of human rights. The power and legitimacy of the government are directly related to its promotion of justice for its citizens through human rights, and human rights for the individual oblige participation in the civil society and political process of the state. Expanding active participation is crucial to the evaluation of both.

In a similar manner, Pacem in Terris recognizes the equal dignity of all states or countries. States have a right to self-existence, self-development and the means for attaining such development and the primary responsibility of developing themselves. And “Just as it is the duty of individuals to recognize the rights of others, so too justice requires that states recognize the rights of others (PT 91). Rights and their respective duties always require mutuality and reciprocity (PT 92-93).” In addition to mutuality and reciprocity, and beyond the negative duty or responsibility of not infringing on the rights of others, rights have a positive duty to promote and protect the rights of one and those of others.

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416 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 14.

417 Ibid.

418 Ibid., 15.

419 Ibid.

420 Ibid., 16.
The Second Vatican Council and Human Rights

The Second Vatican Council produced two major documents that deal with the questions of human dignity and human rights. They were *Dignitatis Humanae* (the right to religious liberty) and *Gaudium et Spes* (the Pastoral Constitution of the Church in the Modern World). David Hollenbach points out that:

The Council’s most important contribution to the human rights tradition was its important new acknowledgement that the demands of human dignity are historically conditioned ones…. The Council’s understanding of the relation between the transcendental worth of persons and the historical realization of this worth leads it to conclude that the full implications of dignity of the person cannot be known or affirmed apart from the concrete conditions of an historical epoch.⁴²¹

It is this understanding that moved Pope John XXIII to invite and challenge the Council Fathers at the Second Vatican Council to study and interpret the *signs of the times*, that is, the cultural, economic, social and political structures that caused deep anxieties and uncertainties at the time. The Church has the mandate and responsibility to do so in light of the Gospel.⁴²²

The Second Vatican Council manifests its new understanding of the fact that human dignity and human rights are historically conditioned by asserting that:

Though proud of its discoveries and its power, humanity is often concerned about the current developments in the world, about humanity’s place and role in the universe, about the meaning of individual and collective endeavor, and finally about the destiny of nature and of humanity…. Ours is a new age of history with profound and rapid changes spreading gradually to all corners of the earth…. We are entitled then to speak of a real social and cultural transformation whose repercussions are felt at the religious level also.⁴²³


⁴²³ Ibid., nos. 3-4, 164-165.
Gaudium et Spes shows continuity with Mater et Magistra when it speaks of the social nature and interdependence among people by pointing out that:

Nowadays, for various reasons, mutual relationships and interdependence increase from day to day and give rise to a variety of associations and organizations, both public and private. Socialization, as it is called, is not without its dangers, but it brings with it many advantages for the strengthening and betterment of human qualities and for the protection of human rights.\(^{424}\)

Gaudium et Spes argues that human rights are an important reality because of the social and interdependent (communal) nature of people. It counters the liberal individualistic perception of rights in political and economic life that are normally hard to justify such as “access to all that is necessary for living a genuinely human life: for example, food, clothing, housing, … education, work” (26) … Basic goods such as food and work are essential for a dignified life in community, so respect for human dignity implies that persons have rights to these goods.”\(^{425}\)

Similarly, rights to free speech, expression of one’s beliefs in public and active participation in political life are demands for living in the community with dignity. In situations where these rights or freedoms are denied, human dignity is diminished. It is also the case that the duties to respect and protect all human rights, whether civil-political or social-economic-cultural rights are concrete ways of solidarity.\(^{426}\) Furthermore, Pope Leo XIII “affirmed that the equal dignity of all persons as images of God did not

\(^{424}\) Pastoral Constitution of the Church in the Modern World (Gaudium et Spes) In The Basic Sixteen Documents, Vatican Council II: Constitutions, Decrees, Declarations, Gen. edited by Austin Flannery no. 25, 190.


\(^{426}\) Ibid., 281.
necessarily translate into equality of society. It could be compatible with stratified society
governed by unequal rights. The Council rejected this position…. It affirmed equality of
rights.”

Another important development by the Second Vatican Council was the mention
of genocide, abortion, torture, arbitrary imprisonment, slavery, prostitution, the selling of
women and children, and degrading working conditions, euthanasia, deportation, willful
suicide, all violations of the integrity of the human person, such as mutilation, physical
and mental torture, and undue psychological pressures harm the dignity of persons.

In explaining Dignitatis Humanae (Declaration on Religious Freedom), the last
document of the Second Vatican Council to be written and promulgated, David
Hollenbach says that:

The Declaration’s chief purpose was to bring Catholic teaching abreast of modern
western thought on the right to religious liberty and to overcome the historical lag
between Catholic and Western constitutional thinking on this subject. In
rethinking [the right to religious freedom], the Council brought Catholic social
thought into a new relationship with the entire Western liberal tradition. Like
Gaudium et Spes, Dignitatis Humanae frames its doctrinal position with an
analysis of the moral problematic of contemporary society. Article 1
acknowledges and affirms the increasing consciousness of human dignity and
personal responsibility which characterizes contemporary humanity. Article 8
notes the ambiguity of this new consciousness. Human personhood and
responsibility are simultaneously more threatened and more esteemed than in
previous history.

Dignitatis Humanae (DH) sought to clarify a number of things: to identify the

427 Hollenbach, S.J., “Commentary on Gaudium et Spes (Pastoral Constitution on the Church in
the Modern World),” In Modern Catholic Social Teaching: Commentaries and Interpretations, edited by
Kenneth R. Himes et al., 281.

428 Pastoral Constitution of the Church in the Modern World (Gaudium et Spes) In The Basic
Sixteen Documents, Vatican Council II: Constitutions, Decrees, Declarations, Gen. ed. Austin Flannery,
no. 27.

429 Hollenbach, Claims in Conflicts: Retrieving and Renewing the Catholic Human Right
Tradition, 75.
awareness of human dignity and the demand for minimal government interference in religious liberty; to reaffirm the traditional held view that Catholicism is the one true religion and reject indifferentism, the view that all religions are equally true; it also pointed out that conscience cannot be compelled to believe the truth and must be immune from coercion; and ‘to develop the teaching of recent popes.’

DH pointed out that the “human person has a right to religious freedom” (no. 4). This right applies to individuals, religious bodies, and families. This includes the freedom of families to educate their children (no. 5). The right to religious freedom is not absolute in itself and so religious bodies must not abuse it (no. 7). DH allows Christian witness and forbids coercive proselytization since this is considered a form of infringement on other people’s freedom (no. 4).

All people are bound to follow their conscience (no. 3). What is also significant is that DH explains that governments have a moral responsibility to protect religious freedom. However, governments must be careful not to hinder by legislation or administration action the selection, training and appointment of ministers. The religious bodies or communities have the right to teach publicly and to bear witness by spoken or written word, just as it is equally important religious communities not proselytize.

DH was an important document that called for religious freedom. Today, DH works as a fire wall against those who are opposed to religious tolerance. It invites and calls for respect of people’s conscience. However, as Judge Noonan pointed out, DH failed to deal with the history on the part of the Catholic Church’s intolerance towards

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430 Leslie Griffin, “Commentary on Dignitatis Humanae (Declaration of Religious Freedom),” In *Modern Catholic Social Teaching: Commentaries and Interpretations*, edited by Kenneth R. Himes et al., 254.
other religious traditions; and also it leaves open and vague the civil authorities’ power to actions based on religious conviction.  

Pope John Paul II and Human Rights

More recently, the doctrine of human rights has received great attention in the pontificates of John Paul II and Benedict XVI. Meghan Clark writes that, “The election of Pope John Paul II … marked a transformation in Catholic social teaching’s vision and perspective. In Karol Wojtyla, the Church found a leader who was a philosopher and an ethicist by training….”

The thoughts of Pope John Paul II are contained in four major documents: 

*Redemptor Hominis* (Redeemer of Man), *Laborem Exercens* (On Human Work),

*Sollicitudo Rei Socialis* (On Social Concern), and *Centesimus Annus* (On the Hundredth Year of *Rerum Novarum*). What is so central in these documents is Pope John Paul II’s personalist anthropology, philosophy, and theology. The framework of personalism is reflected in his emphasis on human dignity, human rights and solidarity.

For Pope John Paul II, personalism “is not primarily a theory of the person or a theoretical science of the person. Its meaning is largely practical and ethical: it is concerned with the person as a subject and as an object of activity, as a subject of rights, etc.” For the Pope, “The person, therefore, is always a rational and free concrete being,

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433 Ibid.

capable of all those activities that reason and freedom alone make possible.”

Human beings are free beings but this freedom is not any kind of freedom. It is a freedom that enables human beings to act and live lives that conform to their rational nature. It is a freedom that directs human persons to act and live in ways that correspond to people’s higher ends, thus enabling them to actualize themselves. In this sense, “freedom is not given to us as an end in itself, but as a means to a greater end…. [F]reedom exists for the sake of morality and together with morality for the sake of a higher spiritual law and order of existence -- the kind of order that most strictly corresponds to rational beings which are persons.”

Human beings possess human dignity and nature by virtue of the fact that they are human beings. “The human being is not simply an individual substance of a rational nature; he or she is a free agent, simultaneously subject and object of deliberate action…. The person self-reveals in and through action.”

Pope John Paul II positions his philosophical and theological thrust of personalism in the human person and in his or her ability to act in a rational manner and freedom. The initial point is the “experience of the human being in two senses simultaneously, for the one having the experience is a human being and the one being experienced by the subject is also a human being. The human being is simultaneously a

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435 Ibid.


437 Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 25.
subject and an object.”438 In a sense, we can say that human beings live interdependently with each other. No single person can and should live in isolation like an island. And because people live in relationship with other people, “one has to recognize everyone’s fundamental right to act and thus everyone’s freedom to act, through the exercise which the self fulfills itself.”439

Recalling Kant’s categorical imperative, Pope John Paul II points out that, “Whenever a person is the objectivity of your activity, remember that you may not treat that person as only the means to an end, as an instrument, but also allow for the fact that he or she too should have distinct personal ends. This principle, thus formulated, lies at the basis of all human freedoms.”440 Perhaps, by way of criticism, Pope John Paul II’s use of the word “object” in reference to human persons can easily be mistaken for “objectifying” people. Better words like respondents or recipients could have been used.

In Laborem Exercens (LE), reflecting on the nature of the human person, the dignity that is due to human persons and work, Pope John Paul II explains that because human persons are created in God’s image and likeness, they are called to work and to share in God’s creative power. They are called to be co-creators. He states that, “Thus work bears a particular mark of [a person] and of humanity, the mark of a person

438 Karol Wojtyla, “Person Subject and Community,” In Person and Community. 221; In Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights (Minneapolis, MN: Fortress Press, 2014), 25.


operating within a community of persons.” In the same vein, because the person is the subject of work, “Because as the ‘image and likeness of God’ he [or she] is a person, that is to say, a subjective being capable of acting in a planned and rational way, capable of deciding about himself [or herself] and with a tendency to self-actualization. As a person, [he or she] is therefore the subject of work.” Because the human person has dignity and rights, work is meant for the human person and not the human person for work. The priority is placed on the subject of work, that is, the person as ‘a conscious and free subject capable of self-determination’; and not the object of work (the kind of work being done). This is not to minimize the nature of work but rather to place emphasis on the person who does the work.

Paying particular attention to freedom and agency of persons, Karol Wojtyla posits that human beings are capable of participating in the common good and the humanity of others. To be a neighbor is to participate “in the very humanity of other people, and because of this every human being can be our neighbor.” Solidarity is a necessary ingredient for authentic community living.

Patricia A. Lamoureux explains that, “At the core of LE and the context for understanding John Paul’s agenda for social ethics is his theological anthropology…. The

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442 Ibid., no. 6, 385.

443 Ibid.


445 Karol Wojtyla, “Participation or Alienation?” In Person and Community: In Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 26.
important insight of this encyclical is the integral connection between the person’s self-
actualization and human labor."\textsuperscript{446} In the same trend of thought, Pope John Paul II argues
that, “The basis for determining the value of human labor is not primarily the kind of
work being done, but the fact that the one who is doing it is a person. It is the human
person who organizes, creates, and bears accountability for the work that is being
done.”\textsuperscript{447}

When it comes to discussing rights and responsibilities, Pope John Paul II in
\textit{Laborem Exercens} grounds his arguments in the wider schema of the Church’s exposition
on rights. For example, while he maintains the right to private property, he points out
that:

\begin{quote}
The only legitimate title to the possession of property, whether in the form of
private or collective ownership, is that it ‘should labor and thus …. Should make
possible the achievement of the first principle of this order, namely, the universal
destination of goods and the right to common use of them …. The right to private
property is subordinate to the right to common use, to the fact that goods are
meant for everyone (LE 14).\textsuperscript{448}
\end{quote}

Underlying Pope John Paul II’s understanding of private property and their
common usage is the fact that God is the Lord of creation and thus the only authentic
owner (LE 12).\textsuperscript{449} John Paul II also explains that workers have rights to employment, to
a just wage, and to form workers’ associations or unions. Also, “The human rights that
flow from work are part of the broader context of those fundamental rights of the person”

\textsuperscript{446} Lamoureux, “Commentary on Laborem Exercens,” In \textit{Modern Catholic Social Teaching:
Commentaries and Interpretations}, edited by Kenneth R. Himes, OFM at al., 394.

\textsuperscript{447} Ibid., 395.

\textsuperscript{448} Ibid., 397.

\textsuperscript{449} Ibid.
In the context of Catholic Social Teaching, Patricia Lamoureux explains that:

[R]ights are rooted in human dignity, which is more fundamental than any specific human right. Human dignity makes claims on others that it be recognized and respected. Human rights are moral imperatives that express the more specific contexts of these claims. Also, because of the essentially social nature of humankind, the uniqueness and dignity of the person always exists in the context of relations in a larger community. It is in the context of human rights properly understood, promoted, and guaranteed in and through the existence of commonality and solidarity that we should read the encyclical’s treatment of the rights of workers.  

In *Sollicitudo Rei Socialis* (SRS), Pope John Paul II “recognizes the growing awareness and support for human rights as a major positive development since *Populorum Progressio*, in which, ‘the full awareness among large numbers of men and women of their own dignity and that of every human being’ (SRS 26) emerged.”  

For John Paul II, “the only way to overcome structures of sin and have authentic development both nationally and internationally is through solidarity.” Solidarity helps people recognize the need for one another and to honor the dignity of one another since all have equal dignity and are created in God’s image and likeness.

Pope John Paul II notes that material possessions have a common good or “social mortgage” aspect to it. They are meant for the good of all. In explaining this particular aspect, Pope John Paul II, in *Sollicitudo rei Socialis*, argues that:

The goods of this world are originally meant for all. The right to private property

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452 Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 28.

453 Ibid., 32.
is valid and necessary, but it does not nullify the value of this principle. Private property, in fact, is under a 'social mortgage,' which means that it has an intrinsically social function, based upon and justified precisely by the principle of the universal destination of goods…. The motivating concern for the poor must be translated at all levels into concrete actions, until it decisively attains a series of necessary reforms.\textsuperscript{454}

Some of the reforms may be accomplished voluntarily by individuals and others may require the active involvement of the state to legislate and enact policies that protect members of society, particularly the poor and vulnerable groups.\textsuperscript{455}

In \textit{Centessimus Annus} (CA), Pope John Paul II reaffirms the significance of the rights of the person but this time in the context of universal human rights.\textsuperscript{456} CA points out that, “[a person] receives from God his essential dignity and with it the capacity to transcend every social order so as to move towards truth and goodness.”\textsuperscript{457} He also insists that, “development must not be understood solely in economic terms, but in a way, that is fully human” (CA 29).\textsuperscript{458} Development must take into consideration the totality of people.

Pope Benedict XVI and Human Rights

In \textit{Deus Caritas Est} (DCE), love acts as the framework or hermeneutical lens through which human rights are addressed. Meghan Clark points out that, “Pope Benedict

\begin{itemize}
\item \textsuperscript{455} Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 21.
\item \textsuperscript{456} Ibid.
\item \textsuperscript{458} Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 32.
\end{itemize}
uses the theological focus on caritas as a building block for his first social encyclical, *Caritas in Veritate* (Charity in Truth)." For Pope Benedict, love is at once a gift and demand. Love is first initiated by God and is a gift to human beings to which all are called to respond. And while charity is usually associated with almsgiving, charity is more than that. Charity or love involves a relationship and friendship with God, to which all persons are called to respond to with gratuitousness. 

The Christian person models his/her love of God and neighbor by following the example of Jesus Christ. Through his death and resurrection, Jesus reconciles humanity with God and reveals the “unbreakable bond between love of God and love of neighbor.” Pope Benedict goes on to point out that:

Union with Christ is also union with all those to whom he gives himself. I cannot possess Christ just for myself; I can belong to him only in union with all those who have become, or who will become, his own. Communion draws me out of myself towards him, and thus also towards unity with all Christians. We become “one body,” completely joined in a single existence. Love of God and love of neighbor are now truly united: God incarnate draws us all to himself.

This love of God and love of neighbor is not an abstract concept. This love is expressed in concrete actions, in the way we care for one another as the body of Christ. Therefore:

Love of neighbor, grounded in the love of God, is first and foremost a responsibility for each individual member of the faithful, but it is also a responsibility for the entire ecclesial community at every level: from the local community to the particular Church and to the Church universal in its entirety, as a community, the Church must practice love. Love thus needs to be organized if it

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459 Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 33.

460 Ibid., 34.


462 Ibid., no. 14.
is to be an ordered service to the community.⁴⁶³

The most concrete example of this kind of love is in Acts 2: 44-45; where “within the community of believers there can be no room for a poverty that denies anyone what is needed for a dignified life.”⁴⁶⁴ In the same vein, Meghan Clark explains that:

This union with Christ with the community is important for expanding the theological significance of solidarity; however, it is imperative to address the identity of neighbor. Christians are called to be a community of believers in which they are required to organize love of neighbor so as to provide the conditions (material and spiritual) of a dignified life. However, while the purpose of this encyclical is an internal one, the practice of caritas within the community of believers cannot be limited to the Christian community. In the unity of love of God and love of neighbor, one cannot understand love of neighbor as an internal command limited to the Community. An essential aspect of this encounter with the incarnate love of God, in which Benedict XVI presents the perfect union between love of God and love of neighbor, is that the concept of neighbor is universalized.

The concept of neighbor is expanded to include not just one’s faith community of believers but also all of humanity. The love of God and neighbor sets no limits to who should be loved or excluded. While we are invited to love our faith communities, the concept of neighbor is expansive, since it includes all people. Using the parable of the Good Samaritan and the last judgment scene in Matthew 25, Pope Benedict XVI points out that a neighbor is, “Anyone who needs me, and whom I can help is my neighbor.”⁴⁶⁵ In this sense, love of God and love of neighbor become a concrete call for solidarity with all people because “love of God and love of neighbor have become one: in the least of the


⁴⁶⁴ Ibid.

⁴⁶⁵ Ibid.
brethren we find Jesus himself, and in Jesus we find God.”466 This love of God and love of neighbor can concretely be expressed when it is accompanied by justice. To love someone implies to act and treat someone in a just manner. Benedict XVI explains that, “I cannot ‘give’ what is mine to the other, without first giving him what pertains to him in justice. If we love others with charity, then first of all we are just towards them.”467 The Pope posits that genuine love of neighbor is only possible if we treat our neighbor justly. In this manner, justice is a prerequisite for charity and love. 

For Pope Benedict as with his predecessors, solidarity plays a major role in relationships and in the love of neighbor, and so, in Caritas in Veritate, he links rights with solidarity specifically in and through duties and thus argues that “The right to food, like the right to water, has an important place within the pursuit of other rights, beginning with the fundamental right to life. It is therefore necessary to cultivate a public conscience that considers food and access to water as universal rights of all human beings without distinction or discrimination.”468 Pope Benedict XVI goes on to elaborate why it is necessary that rights go hand in hand with duties:

The link consists in this: individual rights, when detached from a framework of duties which grants them their full meaning, can run wild, leading to an escalation of demands which is effectively unlimited and indiscriminate. An overemphasis on rights leads to a disregard for duties. Duties set a limit on rights because they point to the anthropological and ethical framework of which rights are a part, in this way ensuring that they do not become license. Duties thereby reinforce rights and call for their defense and promotion as a task to be undertaken in the service of the common good. Otherwise, if the only basis of human rights is to be found in the deliberations of an assembly of citizens, those rights can be changed at any time, and so the duty to respect and pursue them fades from the common

466 Pope Benedict XVI, Deus Caritas Est, no. 15.
467 Ibid., no. 6.
468 Ibid., no 27.
Here we see a conscious effort by various popes throughout the centuries to make the issue of the development of human rights an integral part of their teachings, mostly accomplished through various encyclicals. Grounding human rights in dignity, various Popes call for social, economic, cultural and political rights to be observed.

Pope Francis and Human Rights

In the few years of his pontificate, Pope Francis has already proven to be an avid supporter and advocate for people's dignity and rights, particularly of the poor. In his encyclical letter *Laudato Si*, Pope Francis writes that, “Our world has a grave debt toward the poor who lack access to drinking water, because they are denied the right to a life consistent with their inalienable dignity. This debt can be paid partly by an increase in value to provide water and sanitary services among the poor.” 470 Similarly, Pope Francis denounces economies that exclude the poor and place emphasis on profits over the dignity and rights of workers and rules rather than serve the people.471 Furthermore, Pope Francis sees human life as a sacred gift that comes directly from God. As such, human life needs to be protected and defended. He deplores the throwaway culture of our modern society. He writes:

Unfortunately what is thrown away is not only food and dispensable objects, but often human beings themselves, who are discarded as unnecessary….For example, it is frightful even to think there are children, victims of abortion, who would never see the light of the day: children being used as soldiers, abused and killed in armed conflicts: and children being bought and sold in that terrible form

469 Pope Benedict XVI, *Deus Caritas Est*, no 43.


of modern slavery which is human trafficking which is a crime against humanity.\textsuperscript{472}

Pope Francis equally decries economic conditions that force women to live a life unbefitting of their dignity. He explains that:

It is troubling to see the increasing number of young girls and women forced to earn a living on the street by selling their own bodies, victims of exploitation by criminal organizations and at times by parents and family members. This is shameful reality in our societies, which boast of being modern and possessed of high levels of cultures and development. Widespread corruption and unrestrained greed are robbing the innocent and the vulnerable of the possibility of a dignified life….No one can remain unmoved before the pressing need to safeguard the dignity of women, threatened by cultural and economic factors.\textsuperscript{473}

Like his predecessors, Pope Francis upholds the rights to religious freedom. However, he points out that although laws are necessary to protect religious freedom, religious freedom is a shared space, which entails an atmosphere of respect and cooperation. People of various faith traditions need to see each other not as enemies, but as brothers and sisters. In this sense, religious freedom should also be understood as part of service of the common good.\textsuperscript{474}

The above historical treatment of human rights in CST by different Popes reveals some major distinctive aspects of the Church’s appropriation of human rights. One such aspect is that human rights are grounded in the innate dignity of moral persons created in God’s image and likeness, that is, as moral agents endowed with intelligence and


freedom. The fundamental respect for persons as moral agents involves recognition of and respect for the necessary conditions or capabilities for exercising their agency. These conditions or capabilities constitute the object or substance of human rights. David Hollenbach explains that, “The preservation and promotion of human dignity are the sum and substance of all such claims, rights and duties…. The reality of human dignity makes claims on others that it can be recognized and respected…. It is the source of all moral principles, not a moral principle itself. Particular human rights can therefore be understood only when they are seen as rooted in this fundamental norm.”

In CST, the interpretation of human rights is both comprehensive and integral: comprehensive inasmuch as all rights, negative and positive, are recognized; integral inasmuch as those rights necessary for the realization of human dignity are accorded priority. Basic human rights to security, welfare, and civil-political liberties thus assume priority over rights instrumental to the realization of these goods, for example, private property. Finally, in CST, recognition of human rights implies recognizing correlative duties or responsibilities: not only of non-interference or forbearance as in philosophic liberalism, but of protection and provision. Correlative duties of protection and provision, moreover, generate structural imperatives falling not only upon individuals, but social bodies and institutions, including the state.

Here, we note how the Church offers a richer, more communitarian understanding of human rights than philosophic liberalism. In offering a comprehensive and integral interpretation of human rights and correlative duties, the Church now offers a rights-

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476 Ibid., 97.
based interpretation of the political common good. Subsidiarity, in turn, mediates the realization of the common good, by emphasizing the effective participation of those most affected by policy.

The Common Good

In explaining the common good, Thomas Massaro states that, “To speak of the common good is to recognize that there are numerous proper goals in life beyond our own private benefits. Responsible people look for opportunities to contribute to worthy causes and to improve society however possible, even when the benefits of this progress will go primarily to others.”

While some modern political liberal scholars and theorists tend to project tension between the demands of the community and individual freedom, CST sees a necessary link between the goods of individuals and the community. CST argues that since human persons are social by nature, they are naturally interdependent and need one another for support, formation and growth. Charles Taylor explains that, “As organisms, we are separable from society…. But as humans this separation is unthinkable.” Human persons are “always in relation to others. By definition, a person is both a subject and respondent, a being to whom a question can be asked and who can respond.” Human beings are interlocutors in a society of other interlocutors. Expressing the same idea of

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477 Massaro, Living Justice, Catholic Social Teaching in Action, 88-89.


479 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 46.

480 Charles Taylor, Sources of the Self: The Making of Modern Identity (Cambridge: Cambridge University Press, 1992), 105; In Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and
the communitarian nature of persons, Pope Francis explains that:

Persons always live in relationships. We come from others, we belong to others, and our lives are enlarged by our encounter with others. Even our own knowledge and self-awareness are relational; they are linked to others who have gone before us: in the first place, our parents, who gave us our life and our name. Language itself, the words by which we make sense of our lives and the world around us, comes to us from others, preserved in the living memory of others. Self-knowledge is only possible when we share in a greater memory.481

In this network and web of relationships, we have a collective responsibility towards individual members as well as to the community. To forfeit one’s responsibilities or duties in the community would be to fail the community and to rupture relationships in the community. In this social fabric, “no one flourishes unless all of us are flourishing.”482 In a similar manner, Michael Sandel argues that “we can know a good in common that we cannot know alone.”483 Or as David Hollenbach puts it, “A shared social life together makes practical pursuit of this common good a social necessity.”484

Furthermore, Meghan Clark contends that:

The good of the community, as a whole, is essential because it is a necessary condition for the development of individual agents…. A commitment to universal human rights must be a commitment to human persons, which means a commitment to communities…. By examining the human person within

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482 Todd David Whitemore, “Catholic Social Teaching: Starting with the Common Good,” In Kathleen Maas Weigel and Alexia K. Kelly, Living the Catholic Social Tradition (Lanham, MD: Sheed and Ward, 2005), 75; In We Hold these Truths and American Political Life, edited by Richard Miller (Ligouri, Missouri: Ligouri Publishers, 2008), 47.


communities, including the one human community as a whole, we begin to see that our responsibility for others extends beyond our interpersonal encounters to the distant neighbor. The obligation to sustain, protect, and promote the social matrix required for the substantive exercise of human rights must be global.\footnote{Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 53-54.}

It is also the case that the commitment to honor the dignity, rights and the duties of individual persons goes hand in hand with honoring the dignity, rights and duties of the community. It is also from this perspective that claims to the common good and universal human rights remain abstract and unsustainable if they are not grounded in our sense of belonging to the human community.\footnote{Ibid., 55.} In Pope Paul VI’s view, “Development of the individual necessarily entails a joint effort for the development of the human race as a whole.”\footnote{Pope Paul VI, \textit{Populorum Progressio: On the Development of Peoples} (Vatican City: Libreria Editrice Vaticana, 1963), no. 43. Also, http://w2.vatican.va/content/paul-vi/en/encyclicals/documents/hf_p-vi_enc_26031967_populorum.html (accessed November 21, 2017).} To realize the common good and the rights of individuals as well as those of the community, solidarity is necessary.

The common good is, therefore, not an abstract term. “It is not merely the conglomeration of private interests or preferences, but an objective set of conditions which advance human flourishing.”\footnote{Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 8.} It is necessary that institutional arrangements be made to realize it. The common good is achievable when social systems, institutions, and socio-economic and political environments all foster and promote those goods that benefit every member of society. The common good is realized with the participation of all members of society, whether on the local or international levels.

\footnote{Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 53-54.}
\footnote{Ibid., 55.}
\footnote{Massaro, \textit{Catholic Social Teaching and the United States Welfare Reform}, 8.}
James P. Bailey asserts that:

The common good cannot be broken down into individual goods but is a shared good that emerges from the participation of all for the good of all. To the degree that ownership is correlated with greater participation at all levels of society, expanding the number of owners not only contributes to the individual good of these new owners but also to the common good of all members of society.\(^{489}\)

Apart from calling for the participation of all members, Catholic Social Teaching clearly advocates that in order to achieve the common good, people’s basic rights and dignity must be taken seriously and upheld. And so, while John XXIII in *Mater et Magistra* defines the common good as “the sum total of those conditions of social living, whereby [we] are enabled to achieve [our] own perfection”\(^ {490}\); *Pacem in Terris* appeals in deontological terms to “rights and obligations.” *Pacem in Terris* glosses the pre-modern perfectionist teleology of *Mater et Magistra*, defining the common good in terms of the social structures preserving personal rights and duties.\(^ {491}\) John XXIII recognizes the pluralism of modern societies in offering a rights-based, political interpretation of the political common good by defining the common good thus:

> It is generally accepted today that the common good is best safeguarded when personal rights and duties are guaranteed. The chief concern of civil authorities must therefore be to ensure that these rights are recognized, respected, coordinated, defended, and promoted, and that each individual is enabled to perform his duties more easily. For “to safeguard the inviolable rights of the human person, and to facilitate the performance of his duties, is the principal duty of every public authority.”\(^ {492}\)

\(^{489}\) Bailey, *Rethinking Poverty, Income, Assets and the Catholic Social Tradition*, 49.


\(^{492}\) Ibid., no. 60.
Pope John XXIII does not assume agreement in the way modern people conceive of human perfection or flourishing. Rather, he analogically recognizes the common good in terms of preserving and protecting basic human rights of all in the family, associations, the state and the community of states.

It is this rights-based interpretation that enables Pope John XXIII to extend the common good globally in *Pacem in Terris* where he intimates that both the common good of individual states and all states must be grounded in the human person, and argues that “the public authority of the world community must likewise have as its special aim the recognition, respect, safeguarding and promotion of the rights of the human person. This can be done by direct action, if need be, or by the creation throughout the world of the sort of conditions in which rulers of individual States can more easily carry out their specific functions.”493 Indeed while philosophic liberalism emphasizes negative rights and duties of forbearance; CST, as we have seen, looks to positive duties of protection and provision correlative to basic human rights. And so, not only individual agents, but social groups and structures must preserve and protect the basic rights of all in establishing a fitting rights regime. Basic human rights therefore guarantee systematic imperatives to realize the political common good.

In proposing a rights-based, political understanding of the common good, the Church thus proposes and integrates the threefold understanding of justice:

“Commutative or contractual justice deals with relationships between individuals, groups, and classes. This aspect of justice is the basic building block of society in that it deals

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493 John XXIII, *Pacem in Terris*, no. 139.
with how individuals enter into relationships and agreements with each other.\textsuperscript{494} Commutative justice appeals to equal dignity and freedom of the people involved in the contracts. People are bound by the strictest justice or arithmetic equality.\textsuperscript{495} However, this kind of justice as exercised in private contracts “can only generate a partial account of the order of rights which regulates human interrelationships in their richness and multiple dimensions.”\textsuperscript{496} This is because sometimes people involved in contractual agreements may be required to do more or go beyond merely arithmetic or strictly egalitarian demands depending on the structures that shape and influence human relationships in private spheres or relationships.\textsuperscript{497} As a result, commutative justice needs to be integrated with distributive justice. This requires us to examine what distributive justice entails.

Distributive justice entails “the recognition of the right of all persons to have access to those good which are essential for the protection of their dignity in the actual conditions of social life. This means equality of opportunity for entry into the social, economic, cultural and political relationships which constitute the common good...”\textsuperscript{498} In this case, what is distributed is the dignity and equal respect for all to participate in society and to have full access to public goods and services. To accomplish this, it is necessary that social, economic and political institutions be reformed to reflect the active participation of all members of society in the common good. To realize this, a just social

\textsuperscript{494} Groody, \textit{Globalization, Spirituality, and Justice: Navigating the Path to Peace}, 100.

\textsuperscript{495} Hollenbach, \textit{Claims in Conflicts: Retrieving and Renewing the Catholic Human Right Tradition}, 146.

\textsuperscript{496} Ibid., 147.

\textsuperscript{497} Ibid.

\textsuperscript{498} Ibid., 149.
order is needed to ensure that the dignity, rights and equality of all men and women are protected, paying special attention to those of the poor. Daniel Groody observes that:

While individuals have a responsibility to the common good, the larger society has an obligation to individuals and groups as well. Distributive justice deals with the society’s duty to the individual. It pertains to the relationship of the whole to the parts, and seeks to provide the minimum material resources that are necessary for individuals to have a humane and dignified life. As members of a human community, individuals have a right to have their basic needs met unless absolute scarcity makes this impossible. Distributive justice seeks the well-being of all members of a community, which means one’s basic rights must be safeguarded and protected. It also puts special emphasis on protecting society’s weaker members, advocating a greater solidarity with the poor.

Distributive justice spells out and expresses the social rights as well as the social goods that all members of society share for the benefit of the common good. David Hollenbach explains that distributive justice advocates that it is not sufficient to guarantee core personal rights in private interactions in a mere formal way. It is important that the actual public conditions be taken into consideration as we adjudicate between competing claims. He continues to state that:

Distributive justice demands that social rights be protected. It does this by granting priority to those rights which make claims to a share in public goods over claims which reinforce patterns that deny some persons all access to these goods. It also does so by limiting the exercise of the claims of those whose social power, wealth or status grant them privileged ability to make or implement claims. Distributive, in other words, sets limits to the validity of claims based on a simply formal notion of equality. The important result of this view is the conclusion that those claims which are recognized as valid by the norm of commutative justice such as freedom of contract and the right to private property may in fact be limited or restricted in scope by distributive justice. The exercise of personal rights by persons in privileged social positions may be limited in order to guarantee the social rights of those not so privileged.

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500 Groody, *Globalization, Spirituality, and Justice: Navigating the Path to Peace*, 100.

Social justice, on the other hand, “Is the measure which orders personal activities in a way which is suitable for the production and protection of the common good. It is an aggregative principle.”

Hollenbach points out that social justice is the type of justice that enables the creation of social, economic and political conditions that facilitate the minimal fulfillment of the needs and participation of all in society. It requires that the institutions of society be organized or ordered in such a way so as to make possible to protect both social and personal rights of all. As a result, “It is the practical guideline for the use of the instruments of power, especially government power.”

The government has power to protect social goods through legislation and where necessary through direct intervention in order to regulate the activities of individuals or social groups for the sake of the common good. This is because there is an “institutional or political dimension to the dignity of all persons.”

In addition, Hollenbach explains that, “The realization of social justice will occur when institutional and juridical power of society is deployed in a way that meets minimum needs and guarantees political participation for all. The wealth and power of the privileged are limited by this more fundamental claim.”

By way of summary of these three types of justice, distinctive as they are, they are also complementary. Commutative justice seeks to:

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503 Ibid., 152.

504 Ibid., 153.

505 Ibid., 154.

506 Ibid., 155.
Guarantee the equal dignity of persons in interpersonal or private transactions. In the concrete, however, commutative justice always exists within social context, and the fulfillment of the particular rights claims of individuals is limited by the claims of all people to share in public goods to some minimum level. Distributive justice orders the exercise of competing rights claims in such a way that no one (or at least a minimum number of persons) is excluded from participation in those goods which are essentially social. The entire society is under obligation to create conditions which make the satisfaction of these demands of distributive justice possible. Social justice, therefore, is the ordering of rights through legislation and other forms of government activity.  

To achieve the common good requires people, nations and the world community to work together in a spirit of solidarity. Let us now look at solidarity.

**Solidarity**

Explaining the concept of solidarity, Thomas Massaro states that:

Solidarity is a single word that captures a complex of meanings. It calls attention to the readily observable and indisputable fact that people are interdependent; they rely on each other for almost all their biological and emotional needs. The complex fabric of social life, including human achievement such as language, art, culture, and education, testifies to the many ways in which people depend on shared efforts in all fields of human endeavors. To employ the term ‘solidarity’ entails recognizing human interdependence not only as a necessary fact but also as a positive value in our lives.

Solidarity enables us to recognize that our lives and destinies are interconnected and interwoven. Viewed from this perspective, “Developing the virtue of solidarity is thus the perfect antidote to any modern temptations toward egoistic individualism that neglects social obligations or subordinates the needs of others to self-preserving and possibly narcissistic agendas.” While dignity and rights are significant to individuals, they are not lived in isolation. We live in a community, and so, people’s rights and dignity require

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508 Ibid., 87-88.

the protection within the community. It is also in the community that human persons
must participate in for the sake of the common good. Therefore, solidarity is crucial.
Underscoring the theme of solidarity, Meghan Clark points out that, “Human dignity, as
an ontological characteristic of the human person, includes relationality. Not only are
human persons social by nature, but human dignity itself includes relationality and
participation.”

Similarly, Pope Francis, while explaining the relevance of solidarity
points out that, “The culture of selfishness and individualism that often prevails in our
society is not what builds up and leads to a more habitable world: it is the culture of
solidarity that does so, seeing others not as rivals, but as brothers and sisters.”

It is this understanding of solidarity that led Martin Luther King Jr. to write:

As long as there is poverty in the world I can never be rich, even if I have a billion
dollars. As long as diseases are rampant and millions of people in this world
cannot expect to live more than twenty-eight or thirty years, I can never be totally
healthy even if I just got a good checkup at Mayo Clinic. I can never be what I
ought to be until you are what ought to be. This is the way our world is made. No
individual or nation can stand out boasting to being independent. We are
interdependent.

To invoke solidarity “as a central value of ethical life is to call new attention to
the relations among individuals. In order to be truly morally good, these relationships
must be characterized by mutual concern for the well-being of others and by a
willingness to make necessary sacrifices for the common good of the human community


\[510\] Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 101.

\[511\] Pope Francis, “Address of Pope Francis, Visit to the Community of Varginha (Manguinhos),
Brazil, July 25, 2013,” Vatican,
https://w2.vatican.va/content/francesco/en/speeches/2013/july/documents/papa-francesco_20130725_gmg-

\[512\] Martin Luther King Jr., Measure of a Man (Minneapolis: Fortress Press, 2001), 45-46.
as a whole.”\textsuperscript{513} Solidarity, in this sense, is the affirmation of common concern and the unity of humankind. It is critical that human persons cooperate and work together for the sake of the common good. Maria Cimperman explains that, “Solidarity identifies us with one another, as we honor each ‘other’ as embodied agents, even while connected by the bonds of our common humanity.”\textsuperscript{514} Solidarity then involves, “recognizing human interdependence not only as a necessary fact but also as a positive value in our lives. We cannot realize our full potential or appreciate the full measure of our dignity unless we share our lives with others and cooperate on projects that hold promise for mutual benefit.”\textsuperscript{515} Pope John Paul II argues that when the shared bonds, interdependence, and humanity are taken seriously, solidarity becomes a moral category or a virtue. He writes:

> When interdependence becomes recognized in this way, the correlative response as a moral and social attitude, as a ‘virtue,’ is solidarity. This then is not a feeling of vague compassion or shallow distress at the misfortunes of so many people, both near and far. On the contrary, it is a firm and persevering determination to commit oneself to the common good; that is to say to the good of all and of each individual we are all responsible for all.\textsuperscript{516}

Solidarity reminds us that we can only find our truest selves in relation with other people. To be truly human is to care and be concerned about the humanity of others. Our common humanity becomes the starting point of solidarity, encounters and interdependence. Solidarity reminds us that, “My dignity is bound up in yours, and mine is attacked where yours is attacked—this challenges hard distinctions between us and

\textsuperscript{513} Massaro, Catholic Social Teaching and the United States Welfare Reform, 8.

\textsuperscript{514} Cimperman, When God’s People have HIV/AIDS, An Approach to Ethics, 79.

\textsuperscript{515} Massaro, Living Justice, Catholic Social Teaching in Action, Third Classroom Edition, 85.

\textsuperscript{516} Pope John Paul II, Sollicitudo Rei Socialis, no. 38.
Professor John S. Mbiti, an African philosopher captures the concepts of solidarity, interrelatedness and interdependence in the following words: “I am because we are and since we are I am.”

From a Christian perspective, solidarity requires that we view each and every person, far and near, as a neighbor. Since every person is created in the *imago dei* and since love of God and love of neighbor go hand in hand, Roberto Goizueta writes that, “in order to truly serve the neighbor, [that] love must be born out of an identification or solidarity with the neighbor in his or her joys, suffering, and struggles. The call to solidarity is a call to affirm in one’s life the interdependence and unity of humankind before God; what happens to one happens to all.” Goizueta observes that:

If solidarity implies an affirmation of human community, then it implies a special affirmation of those persons who have historically been excluded or ostracized from the human community: the hungry, the naked, the sick, the ‘least ones’ (see Mt. 25:31-46). Chapter 25 of Matthew’s Gospel speaks of Jesus Christ’s identification with the powerless, hence the Christian’s identification with Jesus Christ is verified by his or her own identification with the powerless.

Similarly, responding to the suffering of others and in this case, the Ugandan women and girls who are victims of AIDS is a form of solidarity. Our response to the suffering of others, by working to transform structures that are responsible for their suffering, is a form of discipleship and solidarity. Jon Sobrino, S.J. notes that the call to respond to the suffering of the poor and those on the margins of society in any way is not

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517 Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 130.


520 Ibid.
only an ethical one but is also:

A practice that is salvific for those who enter into solidarity with the poor. Those who do so often recover their own human dignity by becoming integrated into the pain and suffering of the poor. From the poor they receive, in a way they hardly expected, new eyes for seeing the ultimate truth of things and new energies for exploring unknown and dangerous paths. For them the poor are ‘others,’ and when they take on solidarity with them they undergo the experience of being sent to others only to find their own truth. At the very moment of giving they find themselves expressing gratitude for something new and better that they have been given.521

This gratitude in turn enables us to enter and live in solidarity with the suffering other.

Also, Marie Vianney Bilgrien points out that if solidarity is to be genuine, it must entail the following:

1. Interdependence is a fact and solidarity emerged through consciousness of that actuality.
2. Solidarity is based on the reality of our human equality and dignity.
3. Solidarity works for the common good of all.
4. Solidarity must be practiced with an awareness of the poor.
5. Solidarity must be a firm and persevering determination.
6. Solidarity is not just a virtue of individual persons, but also of groups and nations.
7. Compassion, empathy, and mercy move solidarity into action and help sustain the disposition.522

The kind of solidarity advocated by Pope John Paul II and Marie Vianney Bilgrien stands in stark contrast with the philosophy that places overemphasis on the maximization of profits at the expense of people who need antiretroviral drugs; where the rich and powerful are what count as persons over the poor and marginalized; and where


men and boys are culturally considered more important than women and girls.

True solidarity invites us to live by the African concept of “ubuntu.” Ubuntu “is an African concept for personhood in which the identity of the self is understood to be formed interdependently through community.” The implication of Ubuntu is that each person’s humanity is tied to the humanity of others. Each person’s humanity is “expressed in relationship with others. A person depends on other persons to be a person.”

Or as Archbishop Desmond Tutu put it, “A person with Ubuntu is open and available to others, affirming of others, does not feel threatened that others are able and good, for he or she has proper self-assurance that comes from knowing that he or she belongs in a greater whole and is diminished, when others are tortured or oppressed.”

In this sense of Ubuntu, solidarity invites humanity to recognize the suffering, pain and the disease of HIV/AIDS among women and girls in Uganda as afflicting the entire humanity or personhood of the global community. Therefore Ubuntu-ism calls for a concerted effort on the international, continental, national and local community levels to do all we can to eliminate or at least stop the spread of HIV/AIDS. Solidarity, in the spirit of Ubuntu, necessitates that developed countries with resources and with accessibility to anti-retroviral drugs to be willing to share, provide and support the poor and developing nations with vital medications and financial resources to tackle the AIDS pandemic. It calls for collaboration in the search for scientific cure, research into

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524 Ibid., 3.

vaccines, and sharing of information on the most available cutting-edge technology and the evolving nature of the virus. The Compendium of the Social Doctrine of the Church reminds us that this is necessary because, “The new relationships of interdependence between individuals and peoples, which are *de facto* forms of solidarity, have to be transformed into relationships tending towards genuine ethical-social solidarity. This is a moral requirement inherent within all human relationships.”

Solidarity grounded in the spirit of *Ubuntu*, further calls upon the world and local communities, to examine the structures that have been responsible for gender inequalities, violence and denial of women’s rights to property inheritance — all of which increase women’s vulnerability to AIDS. In this case:

Solidarity must be seen above all in its value as a moral virtue that determines the order of institutions. On the basis of this principle the ‘structures of sin’ that dominate relationships between individuals and peoples must be overcome. They must be purified and transformed into structures of solidarity through the creation or appropriate modification of laws, market regulations, and juridical systems.

This includes a critical look at the policies that govern international markets, foreign debts, loans and structural adjustment programs. And when solidarity rises and is viewed as a social virtue, “It places itself in the sphere of justice. It is directed par excellence to the common good, and is found in ‘a commitment to the good of one’s neighbor with the readiness, in the Gospel sense, to ‘lose oneself’ for the sake of the other instead of exploiting him, and to ‘serve him’ instead of oppressing him for one’s own

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advantage (Mt. 10: 40-42; 20:25; Mk. 10: 42-45; Lk. 22: 25-27).”\(^{529}\) Understood in this manner, “Solidarity thus emerges as a regulative norm for judging the working of social institutions.”\(^{530}\)

Further still, solidarity expressed as *Ubuntu*:

Requires the integration of the community in compassion, love and care for all, including anyone suffering from AIDS. At the same time, it also places responsibility upon the person with the illness to uphold the health of the community, the most important duty of any member of the community in whatever situation: to make sure that it is maintained in health.\(^{531}\)

By the same token, however, those who enjoy good health in the community should be willing to embrace the sick, care for them and provide welcome, and not isolate themselves from the sick such as the HIV/AIDS-afflicted women and girls of Uganda. The spirit of *Ubuntu* expressed in solidarity, challenges us to break down boundaries of private space and to be more willing to welcome those who have lived on the margins of our societies. In the spirit of *Ubuntu*, no single person is left out. Rather, all are included and invited to participate in the common good for the sake of the entire society. For Pope John Paul II, among the good indications of solidarity “are the growing awareness of solidarity of the poor among themselves, their efforts to support one another, and their public demonstrations on the social scene which, without recourse to violence, present their own needs and rights in the face of inefficiency or corruption of public

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authorities.”

As moral agents, solidarity among the poor and marginalized should be supported and encouraged. The poor should be part of society’s search for viable solutions to the evils that plague society, and not mere spectators. In Catholic Social Teaching, “The message of the Church’s social doctrine regarding solidarity clearly shows that there exists an intimate bond between solidarity and the common good, between solidarity and the universal destination of goods, between solidarity and equality among men and peoples, between solidarity and peace in the world.”

The question that remains unanswered is: How is solidarity understood as a virtue habituated by and through the practice of human rights? As a moral virtue, solidarity is acquired through habituation and as “a disposition to judge, act, will, and feel well and rightly in accordance with practical reason. The focal point of this process is the combination of human agency and human dignity…. As a virtue that can be acquired by both individuals and communities, solidarity is built on a holistic and participatory understanding of the human agency.”

As socially embedded human beings, solidarity as a virtue impels us to ask, “What kind of person do I wish to be? What kind of community do we wish to become? These questions are raised in an effort to realize more fully human lives within a more fully human community.” To ask the above questions is the first step in cultivating the


533 Pontifical Council for Justice and Peace, Compendium of the Social Doctrine of the Church, 86.

534 Bilgrien, SSND, Solidarity: A Principle, an Attitude, a Duty? Or the Virtue for an Interdependent World, 112.

535 Ibid., 112.
virtue of solidarity. However, this is not sufficient in itself. These questions must be followed by other questions, for example, what is it that I am doing or what will I do to bring about a more fully human society and to enable people live more fully human lives? What kind of disposition or character traits do we as individuals and communities have to cultivate? What kind of social, cultural, economic and political conditions do we need to cultivate in order to become the virtuous societies that we ought to be?

Meghan Clark points out that, “The substantive meaning of solidarity, as a virtue, includes not only political or social conditions but also a commitment to personal flourishing and the participation in the common good.”\(^{536}\) This understanding of solidarity leads Pope John Paul II to describe solidarity as “a firm and persevering determination to commit oneself to the common good; that is to say to the good to all and of each individual because we are really responsible for all.”\(^{537}\)

Marie Vainney Bilgrien, points out that understanding solidarity in this manner, one can trace its development as a virtue in *Sollicitudo Rei Socialis* as follows:

1. A need for conversion to overcome the moral obstacles to development.
2. An awareness of a positive moral value — a growing interdependence among individuals and nations.
3. This interdependence is a moral category because of relationships in the economic, cultural, political and religious spheres.
4. The response to this interdependence is a moral and social attitude of solidarity and the virtue of solidarity.
5. This response is a firm and persevering commitment to the common good.\(^{538}\)

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\(^{536}\) Clark, *The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights*, 111.


\(^{538}\) Bilgrien, SSND, *Solidarity: A Principle, an Attitude, a Duty? Or the Virtue for an Interdependent World?* 96.
Like all virtues, solidarity has as its formal object, our common humanity; and the end (telos), the participation in the universal common good. This participation ought and should be undertaken by all people. Participation is critical because it is only possible to achieve the common good by the active and unified efforts of all. Secondly, the equal dignity of all persons demands it. Rights, on the other hand, provide us with the specific ways in which this participation in the common good is to take place.

In a world of interdependence, the virtue of solidarity is valid:

When its members recognize one another as persons. Those who are more influential, because they have a greater share of goods and common services, should feel responsible for the weaker and be ready to share with them all they possess. Those who are weaker, for their part, in the same spirit of solidarity, should not adopt a purely passive attitude or one that is destructive of the social fabric, but, while claiming their legitimate rights, should do what they can for the good of all. The intermediate groups, in their turn, should not selfishly insist on their particular interests, but respect the interests of others.

It is clear from the above citation, taking solidarity seriously as a virtue implies the participation of all members of society, rich and poor alike. The rich, though, have greater responsibility, because of their easy access to goods and services. Nonetheless, all need to play their respective roles in exercising their human agency by contributing to and participating in the common good. This is precisely due to the following reasons: “Solidarity demands that we recognize the other as person. All persons are equal and deserve respect with their individual differences. From looking at the other as other, we have become more aware and conscious that the other is a neighbor, a friend, the living

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image of God, a brother and a sister.” By implication, solidarity demands we recognize women and girls in Uganda with HIV/AIDS as human agents, equal in dignity and worthy of consideration. Whatever is done for them must begin with this understanding.

Solidarity as social virtue requires that we cultivate and habituate those habits, characters and structures that will promote individuals and communities as well as their dignity and rights, and enable them to fulfill their responsibilities or duties. Meghan Clark explains that:

According to Catholic social teaching, our obligation with regard to human rights also includes a positive requirement to promote these rights. Promoting human rights by focusing on substantive freedoms involves practicing acts that support and create economic and social opportunities such as education and health care. Within the context of the social virtue of solidarity, this incorporates the related principle of subsidiarity, in which decisions should be made at the closest level possible or at the highest level necessary, recognizing the need for all levels of society (family, local, regional, national, global) …. The virtue of solidarity through the practice of human rights strives for an integrated community in which we progressively move toward equality, mutuality and reciprocity in our very interdependence.

Sometimes, solidarity as a social virtue may manifest itself in opposition to the perceived violation of the dignity, rights and common humanity that we share. She writes, “Groups united by the virtue of solidarity are not merely unified in a cause or against an oppressor; instead, they are unified in the positive, active assertion of their own common humanity. If the virtue of solidarity is to be cultivated, there must be participation and equality of human persons.”

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541 Bilgrien, SSND, Solidarity: A Principle, an Attitude, a Duty? Or the Virtue for an Interdependent World? 123.

542 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 122-123.

543 Ibid.
is the third constitutive element of the virtue. Interdependence is a fact, the recognition of each one’s dignity directs interdependence and is directed to the good of all.”

Solidarity understood as a virtue offers the most compelling reason why it needs to be cultivated and practiced in our societies. Solidarity is a call to realize our interconnected and bondedness. Our humanity is bound with the humanity of all human beings, whether they live near or far. One can never be truly and sincerely comfortable when the majority of the people are languishing in poverty. Solidarity challenges individualism, greed, selfishness, and structures that are vicious or sinful and that keep certain groups of people from fully participating in the common life and good of the community.

Virtue ethics teaches us that as human persons, we:

are always developing; we are becoming what we do…. The human person is always called to relationship, called to conversion, and called to develop a more authentically human life. This is the basis for the very ability to acquire virtues as well as our ability to more fully image God. Through the virtue of solidarity, we can begin to be more fully what we ought to be.  

Meghan Clark continues to elaborate that:

The virtue of solidarity is not a naïve vision of utopia. Instead, it is the recognition that through practicing human rights, as the right kind of actions and emotional reactions, individuals and communities can develop solidarity as a firm and persevering disposition. It is based upon a theological commitment that we are able to become more fully human, more fully who we are. As it becomes a firm and persevering character among individuals and communities — that is, as it becomes an acquired moral social virtue — more substantive human rights will exist.

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545 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 123-124.

546 Ibid., 124.
The challenge before us is to stay actively engaged in cultivating the virtue of solidarity as individuals and as communities, and resist the lure of individualism and collectivism.\textsuperscript{547}

Marie Bilgrien explains that:

An ethic of virtue requires a society where virtue can be practiced, but also as the virtues are practiced, the society itself becomes more virtuous and in this way structures of sin, become structures of virtue and aid virtuous living…. An ethic of virtue — the vision or goal of the common good for the individual person and the community directs persons to live a life of virtue in order to achieve that goal and in the process of acting and relating in society for that goal, the person is transformed and then is better able to carry out his or her role in the society. Each one is formed and transformed in the process of working for the true common good and solidarity is the virtue that assures us that the interdependence we are creating and at the same time transforming will truly be for the common good of all and the integrity of creation.\textsuperscript{548}

Solidarity as a virtue challenges us to be or become who we are meant to be. As a virtue, solidarity calls upon us to habituate our interdependence so that we can build a more just society and world and be more fully the kind of people we are called to be and become. In the words of Paul Ricour, this requires all of us as individuals and societies, to undertake a self-interpretation of our actions, choices, and decisions as we consider and work for a good life in our world. He writes:

It is in unending work of interpretation applied to action and to oneself that we pursue the search for adequation between what seems to us to be best with regard to our life as a whole and the preferential choices that govern our practices …. [B]etween our aim of a good life and our particular choices a sort of hermeneutical circle is traced by virtue of the back and forth motion between our idea of the ‘good life’ and the most important decisions of our existence.\textsuperscript{549}

\textsuperscript{547} Clark, \textit{The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights}, 124.

\textsuperscript{548} Bilgrien, SSND, \textit{Solidarity: A Principle, an Attitude, a Duty? Or the Virtue for an Interdependent World?} 169.

Solidarity challenges us to view each person as a person of dignity, and because of this dignity, each person is worthy of respect. The dignity of persons confers upon them rights and duties. These rights and duties are lived in the community. The social nature of human persons demands that all participate and contribute to the common good. This common good, as David Hollenbach explains, “Is the realization of the human capacity for intrinsically valuable relationships, not only a fulfillment of needs and deficiencies.” There is something inherently good about human relationship beyond individuals being provided for and having their needs met in the community. Human relationship among people is part of human flourishing. And so, to ignore the social bonds among people is to ignore part of the common good.

David Hollenbach expresses this idea thus, “The common good, therefore, is not simply a means of attaining the private good of individuals, it is a value to be pursued for its own sake.” For the women and girls of Uganda who are affected by HIV/AIDS, the conditions of depravity due to poverty, poor health care systems, cultural and social exclusion, and the failure of the government to encourage their participation in the political life, all serve to curtail their participation in the common good. Solidarity which then stems from the sense of responsibility and reciprocity in the lived experience of the community and the common good, serves as affirmative call and obligation to bring the poor into full membership of the community. The plight of women and girls infected

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551 Ibid., 81-82.
552 Severine Deneulin, Mathias Nebel and Nicholas Sagovsky, eds., Transforming Unjust Structures, the Capability Approach (Cambridge, UK: Springer, 2006), 170.
with and affected by HIV/AIDS in Uganda is an invitation to the citizens of Uganda and members of the global community to enable women and girls to assume their rightful place. This begins with the recognition of the fact that women and men are equal in dignity and deserve to be treated as such. Solidarity challenges us as a nation and world community to leave no one behind. Rather, all are invited to shape the future together. All must participate in shaping that future. And just as solidarity embodies our fundamental respect for people’s basic rights in a moral community, so the preferential option for the poor is a necessary consequence of such solidarity. If solidarity seeks to preserve and to protect the rights-based common good of all persons and since all persons are endowed with fundamental dignity and equal human rights, the central question for policy is, whose equal dignity and rights are most threatened? The preferential option for the poor therefore does not set aside the concepts of justices or fairness. Rather, it is a fundamental condition for establishing fair and impartial relations. The preferential option for the poor seeks to expose social sin and systematic injustice for the sake of solidarity.\(^\text{553}\) Let us now examine the option for the poor.

**An Option for the Poor**

Since women and girls in Uganda bear the more excessive burden of HIV/AIDS in comparison to men and boys, deliberating and seeking ways to alleviate their burden requires that a preferential option or consideration be given to them. The option for the poor understood as those who basic rights are denied or threatened, demand that their equal dignity and equal rights be respected. To do so requires that we pay special attention to the most vulnerable and poor in our societies. The option for the poor

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becomes a hermeneutical lens for policy formulation.

In the case of HIV/AIDS patients, particularly women and girls in Uganda, Lisa Sowle Cahill explains, “Affirmative action toward those most grievously affected by the AIDS crisis is a duty both of human justice and of Christian love.” For Pope Benedict XVI, love is at once a gift and demand. Love is first initiated by God and is a gift to human beings to which all are called to respond. And while charity is usually associated with almsgiving, charity is more than that. Charity or love involves a relationship and friendship with God, to which all persons are called to respond to with gratuitousness. This gratuitousness is further reflected and expressed in acts of compassion to our neighbors, particularly the poor and vulnerable, and not in pity.

Gene Outka points out that, in so far as all human persons are equal in dignity and worthy of respect, and in as much as equal consideration does not entail identical treatment, there is a sense in which, it is possible to distinguish legitimately between indiscriminate regard for moral persons and discriminate response to their varied situation. In other words, although all persons deserve equal treatment and respect, because the poor and vulnerable suffer in a particular way, it is possible to discriminately respond to their basic needs, rights and dignity. Gene Outka argues that the biblical injunction of agape bids us to respect our neighbor “as irreducibly valuable” prior to

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555 Clark, The Vision of Catholic Social Thought, the Virtue of Solidarity and the Praxis of Human Rights, 34.

distinctions of “particular merit or other excellences.” As in the parable or story of the Good Samaritan, impartial respect for our neighbor’s equal dignity justifies preferential attention for our distressed neighbor. The person in need deserves to be given priority in accessing his or her basic needs and rights than the one who is not in need. This partiality exercised in this case, is a question of distributive justice. Similarly, Wolfgang Schrage argues that the “exemplary narrative” of the Good Samaritans reveals the “boundless” universal nature of agape by enjoining precisely a “comprehensive solidarity” with “those who suffer,” for example, “victims of robbers, tax collectors, people who are hungry or sick.”

In Catholic social teaching, the ‘essential’ dignity of persons implies respect for persons’ basic claim rights as a moral minimum. Such a discriminate response finds resonance in the graduated moral urgency of differing human rights and demands that those whose basic rights are most denied or threatened to be given a priority in the allocation of resources, meeting of needs and in fulfilling the demands of basic rights. In this case, although all have universal claims to basic rights, equality, and consideration; the moral exigency of those systematically deprived demands that the basic rights of the most vulnerable and deprived be satisfied and attended to over less exigent claims such as property rights.


Stephen Pope explains that this kind of partiality:

Rests upon the belief that moral concern should be proportioned to need, where ‘need’ can be interpreted to include poverty, but also, vulnerability, powerlessness, marginality, etc. Other things being equal, Christians assign priority to addressing the needs of the poor and otherwise powerless rather than to the needs of others because the former are by definition less capable of providing for themselves than are the latter…. This of course by no means suggests that the poor as people possess more worth than other people or that behavior that is morally wrong for others is morally acceptable to when engaged in by the poor….  

Pope continues to assert that this, “partiality is justifiable when it contributes to inclusiveness,” In other words, when, “the preferential option appeals to an expansion rather than contraction of love and wisdom.”

From the Christian perspective, Caroll Stuhlmueller observes that:

Called to be a compassionate person like God in the Hebrew Scriptures and like Jesus the Messiah, we have no other option than to respond to the outcry and affliction of the poor. A Prophetic imperative brings pressure upon our conscience. This response is not a call to a more sublime holiness, which we can accept or reject and still be saved in our mediocre state. Rather, it is a summons to salvation whose only other option is dissociation from the poor and therefore from the Messiah Jesus. Put plainly and severely, in typical prophetic style, the only option is salvation or damnation in caring for or disregarding the poor.

The preferential option for the poor requires more than charitable giving. It is a call for biblical compassion which entails social justice, changing of structures. As the Conference Canadian Catholic Bishops teaches, the option for the poor, demands that,

“In a given economic order, the needs of the poor take priority over the wants of the

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rich…. This does not mean simply handouts for the poor. It calls instead for equitable redistribution of wealth and power among peoples and regions.”

Similarly, the preferential option for the poor is a clarion call to recognize that the many needy, hungry, homeless, and AIDS patients are part of humanity, and as such, warrant some consideration. This consideration may take the form of provision of funds for research into vaccines, availability of medical therapies, medical missions, feeding the homeless at soup kitchens, orphanages, and so forth. The regard and consideration for the most vulnerable and the poor is not meant to create dependence but aimed at cooperation and participation among nations and states. The morality of our societies is determined by how we treat the poor. In Forming Consciences for Faithful Citizenship, the United States Catholic Bishops write that, “While the common good embraces the good of all, those who are weak, vulnerable, and most in need deserve a preferential concern. A basic moral test for our society is how we treat the most vulnerable in our midst.” The Bishops go on to point out that a good society encourages the participation of all members, it ensures no single members falls by the wayside. As subjects of creation with dignity and rights, “all peoples have rights to self-determination, to define their own future and to participate effectively in the decisions affecting their lives…. This is essential if working people, the poor and the marginalized are going to exercise their rights to be subjects of their own history…. In effect, the participation of the

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marginalized takes precedence over an order that excludes them.”

Likewise, Pope Francis clearly states that, “The dignity of each human person and the pursuit of the common good are concerns which ought to shape all economic policies.” The preferential option for the poor summons us to solidarity grounded in commitment. It is a commitment to “seeing differently, judging differently and acting differently.” It is a commitment that leads to an encounter with the poor. Above all, it is a commitment to the love of God and love of neighbor: “The love which is caritas appreciates the good things of creation and the basic goodness of our human longings, desires, and loves, knowing that it is through these very things that God draws us beyond ourselves transforming our lives.” Also, “If love of neighbor is the test and mark of the genuineness of our love of God, justice is the concrete manifestation of love and a condition for love’s growth.”

Joseph F. Egan observes that:

God’s plan for humanity is not only that all persons know, love, worship and obey God, but that in this life they enjoy a life befitting their human dignity. The major preoccupation of Jesus’ life was to establish the reign of God on earth. He began his public life in the synagogue at Nazareth by applying to himself the words of the Prophet Isaiah: “The Spirit of the Lord is upon me; he has sent me to bring the good news to the poor, to proclaim release to the captives and recovery of sight to the blind, to let the oppressed go free, to proclaim the year of the Lord’s favor”


569 Ibid.
This is the message we are challenged to announce and make the centerpiece for the liberation of women and girls living with HIV/AIDS in Uganda and all of humanity. Better ordering of society and progress are seen as concern for the kingdom\(^{571}\) and in turn, “the preaching of the kingdom calls of necessity for the transformation of human relationships.”\(^{572}\) Thus the Ugandan person and Christian, who takes part in the present-day socio-economic development and the fight for the dignity, justice, love, and equal treatment of women, should be convinced that he or she is making a great contribution to the prosperity of humankind and promoting the reign of God. Whoever seeks first the kingdom of God is doing the work of justice under the inspiration of charity.\(^{573}\) Enda McDonagh remarks that:

> In the world of HIV/AIDS, the poor, the weak and the excluded are the most vulnerable to infection and the least likely to be attended. In the steps of Jesus, attention to these people above all enables kairos to issue in a kaine ktisis (new creation) and a kaine koinonia (new community). It is the way to ensuring that the reign of God is emerging among us, however, partially.\(^{574}\)

The need to respond to the needs of the poor exists “not because they are necessarily better than others, morally or religiously, but simply because they are poor


\(^{571}\) *Pastoral Constitution on the Church in the Modern World (Gaudium et Spes)*, no. 39.


\(^{573}\) Ibid., no. 105.

and living in an inhuman situation that is contrary to the will of God.\textsuperscript{575} The suffering, marginalization, and vulnerability encountered by the women and girls of Uganda infected and living with HIV/AIDS raise an important question: How are we as local, national, regional, continental and international communities to respond to the suffering of these women and girls? To ask such a question is to implicate oneself and leaves no room for callousness. It is from this point of view that we argue for a “thicker” description or approach grounding human rights and solidarity as one of the best ways for addressing the HIV/AIDS pandemic among women and girls in Uganda. This “thicker” description takes seriously the inherent dignity, the common good, effective participation and the preferential option for the poor in advocating for structural change and policy formulation as we seek more meaningful and fuller human ways in addressing the HIV/AIDS scourge among women and girls in Uganda.

These fundamental themes of CST have been incorporated in major Church documents of the African Church, in particular, the two recent African Synods; the SECAM (The Symposium of Episcopal Conferences of Africa and Madagascar) and AMECEA (Association of Member Episcopal Conferences in Eastern Africa) documents; \textit{Africae Munus}; and UEC (Uganda Episcopal Conference) documents. In the next chapter, we will incorporate these appropriations of the local church where applicable.

CHAPTER FOUR

PROPOSALS/POLICIES FOR A LIFE-AFFIRMING AND LIFE-ENHANCING THEOLOGY FOR WOMEN AND GIRLS WITH HIV/AIDS IN UGANDA

As we saw in Chapter Three, the principal themes of CST comprise an integral and comprehensive framework for evaluating public policy in modern, pluralist contexts. The fundamental dignity of persons as moral agents created in God’s image and likeness grounds the Church’s theological appeal to basic human rights as the conditions or capabilities of exercising agency, including rights of effective participation of those most threatened. As we have argued, such rights involve not only “thin,” individualistic appeals to negative liberty, but positive claims to liberties of effective participation, basic welfare, and security. Moreover, correlative duties involve not only forbearance, but positive duties of provision and protection, so that the political common good will be realized when the basic rights of all, and especially the most vulnerable, are suitably guaranteed.576 Solidarity in promoting the common good thus presumes an option for the poor: preference in policy must be given to those whose equal dignity and rights are most imperiled or threatened.

In this final chapter, we will consider how such a theological interpretation of rights-based solidarity supports proposals/policies for a life-giving and life-enhancing theology for women and girls with HIV/AIDS in Uganda. We will consider short-term, mid-term, and long-term policy implications of rights-based solidarity for the key social actors, that is, the Catholic Church in Uganda, the government of Uganda, women and girls with HIV/AIDS in Uganda, the men and boys of Uganda, the international

576 Professor William O’Neill’s discussion of human rights with the author (Bekerley, Jesuit School of Theology, May 2018).
community and non-governmental organizations.

To set the stage, we make mention of a few salient and pertinent points. In light of the foregoing discussion, the second African Synod in Proposition 47, appreciated the indispensable role women and girls play in the life of family, Church and society. The Synod further challenged various Episcopal conferences to “champion the rights of women especially with regard to widowhood, bride price, pregnancy, delivery, single mothers, justice in marriage, adequate remuneration for their work and to give them spiritual assistance.”577 Similarly, in Proposition 51, the Synod Fathers recognized AIDS as a major threat to many families in Africa. They also identified poverty and misery as some of the unsettling factors that contribute to HIV and AIDS infections.578 Given the indispensable role women play in the family, Church and society, their precarious exposure and vulnerability, and death due to HIV/AIDS, calls for urgent action to be taken to protect the women from this scourge. It is from this perspective that we will now proceed to analyze what the various social actors need to do to address the HIV/AIDS pandemic among the women and girls of Uganda; and in this way, bring about more life-affirming and life-enhancing policies for these women and girls.

The Catholic Church in Uganda

The Uganda Episcopal Conference (UEC), a member of AMECEA and SECAM recognizes that AIDS is a global problem, but in the context of Uganda, AIDS reveals a breakdown in moral values reflected in illicit sexual behaviors and a breakdown in family life. UEC sees the need to shape people’s behaviors and attitudes as part of her mission to

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578 Ibid., 104.
Since the Catholic Church in Africa in general and in Uganda particularly, is still considered credible to some extent as many people look to Church leaders for guidance and education in the area of morality and for hope in many desperate situations, the role of the Church is therefore indispensable in the fight against HIV/AIDS. 

Short-Term Goals

**A Pastoral Letter Written in Collaboration with Women and Girls with HIV/AIDS**

The intention of the pastoral letter written by the Catholic Bishops in collaboration with the women and girls with HIV/AIDS would be to acknowledge the historical injustices that women and girls have had to endure in the Ugandan society. The pastoral letter would also serve as a listening and learning forum for the Bishops to hear directly from the women and girls who have endured and continue to endure the scourge of HIV/AIDS. Orobator points out that learning on the part of the Church, occurs on two levels: outwardly and inwardly. Outwardly, the Church contributes to the domains of its competence, admits its limitations, and collaborates with other sectors on how best to minister and meet the needs of people with HIV/AIDS. Inwardly, the Church learns by harmoniously directing all sectors of the Church which “actively reflect its identity and implement its mission in the context of HIV/AIDS.” For example, the Church can

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582 Ibid.
learn from people and institutions within and outside the Church that are already directly working with people with HIV/AIDS, AIDS orphans, widows, health care workers and providers of community home-based care. Furthermore, the pastoral letter would help assess the prevailing attitudes and beliefs regarding people with HIV/AIDS, paying particular attention to women and girls and forging the way forward.

Scholars like Heather Snidle and David Yeoman explain that, “AIDS challenges the Church …to be in the midst of the world’s pain, not just diagnosing its problems from afar but close to people, accepting them as they are and helping them to see and know God’s acceptance of them.” Similarly, Edna McDonagh points out that:

With such a new phenomenon as AIDS/HIV and its continuing developments only a learning Church can be an effective teaching Church …. Learning can and must take place at many different levels in the Church and deal with many different aspects of the pandemic and response to it. In this learning process persons living with AIDS/HIV, their partners, companions and carers have much to contribute. Through their experience they may have unique access to understanding some of the moral needs and possibilities arising out of the pandemic.

It has been close to four decades since Edna McDonagh referred to HIV/AIDS as a new phenomenon. Sadly, today, HIV/AIDS is still a major pandemic in many parts of the world. This is especially true in Sub-Saharan Africa, a continent that also finds itself prone to the highest levels of poverty, illiteracy, and many infectious diseases. Thirdly, the pastoral letter should serve as a clarion call to the Church that HIV/AIDS is now

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found within her confines. Many members of the Church are either infected with, living with or dying from the HIV/AIDS disease. Therefore, the Uganda Episcopal Conference challenges all Ugandans:

The people of God [to] be the family that embraces and sustains those who are sick, caring for them as brothers and sisters without barriers, exclusions, hostility or rejection… By providing direct care to the sick, by visiting them, praying with them, consoling them with the word of God, being supportive and sympathetic listeners and understanding their many problems and frustrations, we can offer our companionship and solidarity with them, along with the refreshment and reconciliation of the Lord.

The pastoral letter would likewise need to pay specific attention to the proposals women and girls with HIV/AIDS have to offer, as moral agents. By giving voice to the women and girls with HIV/AIDS, the pastoral letter would enable them to exercise not only their moral agency, but also would enable the Bishops to respond to the HIV/AIDS pandemic in more meaningful, life-affirming and life-enhancing ways. Allison Mauel Moore explains that, “Moral agency includes the actions women take to respect and care for themselves …. Moral agency means that women take actions to shape their own lives rather than expecting other people or situations to shape their lives for them without their participation or assent.” Listening to women and girl with HIV/AIDS tell their stories and participate in crafting meaningful solutions is key. Pope Francis explains:

We need to practice the art of listening, which is more than simply hearing. Listening, in communication, is an openness of heart which makes possible that closeness without which genuine spiritual encounter cannot occur. Listening helps us to find the right gesture and word which shows that we are more than simply


bystanders. Only through such respectful and compassionate listening can we enter on the paths of true growth and awaken a yearning for the Christian ideal: the desire to respond fully to God’s love and to bring to fruition what he has sown in our lives.⁵⁸⁹

Emily Reimer-Barry points out that, “Compassionate listening communicates to the speaker that her voice matters, that she counts. It communicates: I’m here. You are not alone. We are in this together.”⁵⁹⁰ Listening and honoring the stories of women and girls with HIV/AIDS is important for emotional healing. It is also a form of solidarity with the suffering other.

Similarly, listening would be helpful in challenging some preconceived assumptions about how these women and girls became infected, and lead to re-examination of previously-held rigid positions regarding Church teachings. Church leadership would do well to listen before they speak, preach and advocate changes in public policy.⁵⁹¹ Listening also demonstrates that Church leaders care, respect and honor the dignity of women and girls living with the pandemic. By providing the space to listen to women and girls, the Bishops would be able to go outside of themselves, reach out to the marginalized women, and imitate the inclusive love of Christ for the broken people of our world. Reimer-Barry writes, “Jesus privileged the needs of the poor, welcomed the outcast, healed the sick, challenged the use of the law to enslave instead of to liberate, and Jesus suffered death as a witness to the transforming power of living in right


⁵⁹¹ Ibid.
relationship with God.” She goes on to elaborate that, “The Church must embody the inclusive, salvific love of Christ in our broken world. As we make meaning of our lives, Christians have the opportunity to evangelize in words and actions by demonstrating to those we encounter ‘God loves you and desires your full flourishing’” The Church, “As a community of disciples of Jesus Christ, should be a sanctuary, a safe place, a refuge, a shelter for the stigmatized and the excluded.”

By providing space to women and girls living with HIV/AIDS and listening to their stories and concerns, the Church would send a signal that as the body of Christ, we are one with those who suffer. As the body of Christ, when one suffers, we all suffer; moreover, the Church exists for the good of all and in relation to all its members and all of humanity. In the same vein, Musa Dube explains that the Church, as a compassionate community that lives in solidarity, is called upon to identify with, instead of distancing itself from its marginalized and suffering members. Therefore, the Church must take a more proactive role in the prevention and implementation of HIV and AIDS programs.

A pastoral letter would also tap into the deep African cultural tradition of storytelling. In the context of HIV/AIDS, “Storytelling bears the fruits of empathy,


593 Ibid.


596 Ibid., 13.
solidarity, networking, and collaboration.” 597 Furthermore, “The voices, stories and lived experience become the foundation of a theology of compassion. Compassion, in other words, does not patronize, silence or replace [people living with AIDS] and the affected as active subjects in the struggle against HIV and AIDS. Rather, compassion empowers companionship and solidarity.” 598 Letting women and girls with HIV/AIDS tell their stories empowers them to reflect on the memories of their struggle with poverty, diseases, gender inequalities and violence. James Cone elucidates thus:

Every people has a story to tell, something to say to themselves, their children, and to the world about how they think and live, as they determine their reason for being …. When people can no longer listen to other people’s stories, they become enclosed within their own social context …. And then feel they must destroy other people’s stories. 599

Any meaningful articulation of the experience and suffering encountered by women and girls with HIV/AIDS can only come from the women and girls themselves since they are the primary sufferers and victims. Maria Cimperman observes that, “The starting point for any discussion of AIDS must be the experience and reality of suffering. If theological anthropology explores the meaning of human existence, it must encounter the reality, the voices, and the faces of human suffering.” 600 Likewise, Johannes Baptist Metz writes that, “There is one authority recognized by all cultures and religions: the authority of those who suffer. Respecting the suffering of strangers is a precondition for


598 Ibid.


every culture; articulating others’ suffering is the presupposition of all claims to truth. Even those made by theology.⁶⁰¹ In light of this, the women and girls with HIV/AIDS in Uganda are the most privileged group to speak about their conditions and state of life. The suffering and death experiences of these women and girls demand that they take the center stage in the formulation of any viable policies and solutions. Moreover, as noted in Chapter Three, the dignity of persons and the right to effective participation in one’s own society demand that women and girls with HIV/AIDS in Uganda take on a more active role in the formulation of policies and decision-making processes that affect their lives. A pastoral letter concerning women and girls with HIV/AIDS and searching for solutions to the pandemic among women and girls must involve their voices. This would allow Bishops “to sit down together” with women and girls who are members of the Church as “equal partners” in deliberating and prescribing policies, and in strategizing and engaging the leadership of the Church, both Bishops and lay women and girls.⁶⁰²

Only after attentive and attuned listening to these women and girls can the Bishops speak prophetically to their lived experiences and the suffering brought upon them by HIV/AIDS. The prophetic Church seeks to engage all social actors in the fight against HIV/AIDS. It seeks to be active in the day-to-day workings and structures of society. It also seeks and serves justice within its boundaries, among its members, communities and countries. A prophetic Church dismantles patriarchy, stigmatization and gender inequalities within its own structures since these are among the driving forces in


the spread of HIV/AIDS. It works to liberate and transform people from all forms of oppression.603

The clergy or hierarchy of the Church needs to be circumspect in moralizing and portraying the cause of suffering for many women and girls infected with HIV/AIDS as simply a question of sexual immorality. Such an analysis only tells part of the story. Listening to women and girls with HIV/AIDS would help Church leaders realize that there are deep-rooted structural problems in our society that precipitate and compound the situation as we have seen in Chapter Two of this work. These must be addressed if viable and lasting solutions are to be found and constructed. Given the persistent political, cultural and socio-economic structures and injustices of poverty, violence, gender inequalities, sexism, and abuse of rights that are leveled against women and girls, critical attention needs to be paid to these evil structures.

Transforming such structures according to Ada Maria Isasi-Diaz implies that, “The goal is not the participation of the oppressed in present social structures but rather the replacement of those structures by ones in which full participation of the oppressed is possible.”604 The Church must name, call into question and work for the transformation of structures that bring about the massive deaths of women and girls in favor of those that bring life. Working for structural justice or conversely overcoming structural injustices in social, economic and political matters is part of Christian discipleship. As Lumen Gentium reminds us, “The Church encompasses with her love all those who are afflicted


by human misery and she recognizes in those who are poor and who suffer, the image of her poor and suffering founder. She does all in her power to relieve their need and in them she strives to serve Christ.”

Since the Catholic Church provides about 25% of all the care for people with HIV/AIDS worldwide, the Church has credibility to advocate for the transformation of structures that render people poor and vulnerable to the HIV/AIDS pandemic such as poverty-reduction, debt relief, equitable distribution of world goods and services, and accessibility to basic medications.

**Tackling Stigmatization and Discrimination Against Women and Girls with HIV/AIDS**

As mentioned in Chapter Two, stigmatization and discrimination against persons with HIV/AIDS is one of the major hindrances to testing for HIV and AIDS. It also prevents HIV-positive people from seeking care and treatment and frightens caregivers who might be willing to show concern and compassion to the affected and infected persons. Denise M. Ackermann points out that, “Women [and other people] who are HIV + are at the receiving end of prejudice [and discrimination], social ostracism and violence.” In this sense, stigmatization is a tragedy of a multidimensional nature. Ackermann explains that:

When the HIV virus enters, lurks, and then makes forays into the immune system

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of a person, life changes forever. The body is not only diseased but it also becomes the focus of stigmas. Stigmas are socially constructed ways of negatively marking people. Stigmas brand or disgrace individuals or groups, tainting them and making them alien to the dominant culture. The question of stigma is particularly poignant when it is attached to persons suffering from HIV/AIDS. Ignorance, prejudice, stereotypes, issues of power and dominance all conspire to stigmatize sufferers and in doing so to label them and distort their true identity. 608

Within the Catholic Church and other churches, stigmatization emanates from the fact that HIV/AIDS was originally portrayed as a by-product of people’s sins, a fruit of those who engage in sexual behaviors that are evil such as fornication, marital infidelity or homosexual acts. This eschewed theological mentality and teaching, reduced the victims to silence and prohibited them from seeking treatment and care. 609 It is equally cruel and painful to portray HIV/AIDS as a punishment from God. The South African Conference of Catholic Bishops decries the idea that AIDS is a punishment from God by categorically stating: “AIDS must never be considered as a punishment from God. He wants us to be healthy and not die from AIDS. It is for us a sign of the times challenging all people to inner transformation and to the following of Christ in his ministry of healing, mercy and love.” 610 Similarly, Reimer-Barry writes:

In describing persons living with HIV as sinful, or in describing illness as a punishment for sin, some church communities have contributed to the suffering


and stigmatization of people living with HIV. It is this harm, the stigma itself, and corresponding acts of discrimination, that should be clearly named as sinful.\textsuperscript{611}

Theologian Bryan Massingale points out that, “Whenever a religious belief or practice supports or leads to the marginalization or exclusion of any human community, it is not and cannot be of God.”\textsuperscript{612} It is for this reason that Pope John Paul II in his pastoral visit to the United States in 1989 invited people to imitate the unconditional love of God as the yardstick for treating people with HIV/AIDS when he declared while visiting AIDS patients: “God loves you all, without distinction, without limit… He loves those of you who are sick, those suffering from AIDS. He loves the friends and relatives of the sick and those who care for them. He loves all with an unconditional love and everlasting love.”\textsuperscript{613} It is from this point of view that the World Council of Churches explicitly states:

As churches, we must now take up the responsibility to overcome stigma and discrimination within our own structures, while being a voice of moral strength demanding that our communities, nations, and wider society respect the rights and dignity of people living with HIV/AIDS and condemn acts that stigmatize. The truth is that we are all made in the image of God. This means that discrimination is a sin, and stigmatizing any person is contrary to the will of God.\textsuperscript{614}

The Catholic Church in Uganda and other churches cannot be places where love

\textsuperscript{611} Reimer-Barry, Catholic Theology of Marriage in the Era of HIV and AIDS, Marriage for Life, 101.


of God, welcome, care, hospitality, embrace, patience, hope and love of neighbor is preached, while also serving as centers of stigmatization of and discrimination against people living with HIV/AIDS. The Catholic Church in Uganda and all churches therefore must do all within their powers to combat and eliminate stigmatization and discrimination of people infected with HIV/AIDS. Reimer-Barry challenges the Church as a community that proclaims faith:

To affirm all persons as created in the image of God and beloved by God. Parishes should explicitly welcome those affected by AIDS in the church community. To do so is to live according to the principle of solidarity, of hospitality, an ethic proclaimed in the ministry of Jesus both in his preaching and in his ministry to the marginalized within the world: women, the sick, and those accused of sinful behaviors. If the Church is to be the body of Christ on earth, the Church simply must be welcoming. To be otherwise risks an incoherent ecclesiological message.  \(^{615}\)

Pope Francis exhorts the Church to be “a place of mercy freely given, where everyone can feel welcomed, loved, forgiven and encouraged to live the good life of the Gospel.” \(^{616}\) He goes on to assert that, “The Church is called to be the house of the Father, with doors always wide open.” \(^{617}\) The Compendium of the Social Doctrine of the Church reminds us that, “no society can achieve justice unless it respects the transcendental dignity of the human person.” \(^{618}\) Likewise, Reverend Robert J. Vitillo observes that, “In his powerful and prophetic mission of the Last Judgment (Matthew 25: 31–46), Jesus went as far as identifying himself with those who are hungry, and naked, and sick, and

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\(^{617}\) Ibid., no. 47.

imprisoned and proclaimed that personal salvation itself would be conditioned on an adequate response to the needs of the poor.⁶¹⁹ Like Jesus himself, the Church is therefore called upon to be open, welcoming, hospitable, accepting and loving, and a place where people live in solidarity with one another. This is especially needed in the time of HIV/AIDS. More importantly, because each person is created in God’s image and likeness, and,

Because all humans marvelously reflect the image of God, they are all entitled to be treated with the greatest respect and dignity. Because we are intelligent, rational and free beings, God intends us to be immune from all forms of slavery, manipulation, or exploitation. At all stages of our lives—from the moment of conception through the vulnerable years of childhood and old age to the very moment of natural death—we deserve the care and attention that belong to beings of inestimable worth.⁶²⁰

It is precisely for this reason that discrimination and stigmatization of people with HIV/AIDS is wrong and morally reprehensible. It is also for the same reason that unjust treatment of women and girls and homosexual persons on the basis on their gender and sexual orientation respectively is morally aberrant and abhorrent. Moreover, solidarity, a theme of CST, requires that both the members of the church and society offer support and care to women and girls living with HIV/AIDS and prevent any form of discrimination and stigmatization. In its action plan, SECAM challenges member conferences to find meaningful ways to address political, social, religious and cultural practices and norms that lead to and perpetuate the discrimination and stigmatization of people with HIV/AIDS. Furthermore, SECAM calls upon member Episcopal conferences to promote

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solidarity, empathy and compassion among all members of the Church, particularly with regard to those with HIV/AIDS. Stigmatization and discrimination of people with HIV/AIDS is ultimately an abuse of people’s rights and dignity.

Mid-Term Goals

**Advocacy and Education**

One of the key roles of the Church and other faith organizations is that of advocacy on behalf of people who are infected and living with HIV/AIDS. Alison Munro O.P. writes, “Advocacy for health care and social security, care for the orphans, for the provision of affordable medication, speaking on behalf of the poor as we are called to do by the Gospel, is on the continuum of prevention and care.”

Advocacy for affordable medications is particularly crucial. Even if the anti-retroviral medications do not currently bring about the cure of AIDS patients, they enable them to live a relatively longer and higher quality of life. The Church needs to challenge and advocate for easy and ready access to medications for HIV patients in Africa thus improving the current state in which these treatments and medications are available mostly to people in the developed nations of the world. Pope John Paul II, in his apostolic exhortation *Ecclesia in Africa*, mentioned HIV/AIDS as one of the most serious

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challenges confronting the Church in Africa. He called for a response grounded in solidarity within the human family:

The battle against AIDS ought to be everyone’s battle. Echoing the voice of the Synod Fathers, I too ask pastoral workers to bring to their brothers and sisters affected by AIDS all possible material, moral and spiritual comfort. I urgently ask the world’s scientists and political leaders, moved by the love and respect due to every human person, to use every means available in order to put an end to this scourge.\(^624\)

In a similar manner, Pope Benedict XVI in his apostolic exhortation, *Africae Munus*, saw a link between our concerns for HIV/AIDS patients with Jesus’ own concern for the most vulnerable. He argued:

In the spirit of the Beatitudes, preferential attention is to be given to the poor, the hungry, the sick — for example, those with AIDS, tuberculosis or malaria — to the stranger, the disadvantaged, the prisoner, the immigrant who is looked down upon, the refugee or displaced person (cf. Mt. 25: 31-46). The response to these people’s needs … depends on everyone. Africa expects this attention from the human family as from herself.\(^625\)

Genuine love of neighbor calls for nothing less but to lovingly care for those whose dignity is threatened. As noted in Chapter Three, CST advocates that those whose rights and dignity are most threatened must be given priority when it comes to preventative measures, care for AIDS patients and treatment options. Alison Munro O.P. challenges governments, pharmaceutical companies, the private sector and the Church itself to respond to the HIV/AIDS pandemic by demonstrating greater responsibility to reduce infection, put in place more prevention and treatment measures and interventions, in

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order to avert the further spread of the HIV/AIDS epidemic. This is especially critical among the poor, marginalized and seemingly visible and yet invisible women and girls in societies. It is precisely for this reason that, in June 2002, the African Religious Leaders Assembly on Children and HIV and AIDS in Nairobi, Kenya, committed itself to:

Advocate with all levels of government and their agencies to establish policy priorities and devote resources that adequately support and protect children, in particular we will push African governments and the international community to fulfill the commitments they have made through the Abuja Declaration, the Global Funds for AIDS, TB, and Malaria, and at the G8 Summit meetings, as well as at the United Nations General Assembly Special Sessions on HIV and AIDS (June 2001) and children (May 2002).

When it comes to women and girls who are the most infected and affected group in Uganda and Sub-Saharan Africa, the Church needs to use its structures such as the media and other ecclesial organizations like Small Christian Communities (SCC), the mission churches, parishes, dioceses, and the Episcopal offices to state categorically that social, economic, political and cultural practices that put women and girls at the risk of this deadly pandemic cannot be allowed to continue. There is a need for people to be informed about the dangers of HIV/AIDS, formed in making decisions that are life affirming, and informed about the possible and available medical care and support for the patients and their families.

Songs, drama, poems, and art must all be utilized to carry messages throughout the country to educate citizens about HIV/AIDS prevention methods including abstinence.

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and faithfulness in marriage, available options for treatment, and long-term care, counseling and support for those already infected by HIV/AIDS.\(^{628}\) Songs, drama, poems and art have ways of capturing people’s imagination and getting people to think about their behaviors, choices and actions.

More importantly, as Edwina Ward explains:

The Church and ministers are tasked with unveiling mysteries, fear, and ignorance that surround HIV and AIDS. The correct information given in a clear and factual manner is the most empowering of ministries. This awareness comes from preaching, educational sermons, and testimonies. The Church needs to encourage people to talk about responsible sex, because without this frank and open conversation, HIV education is impossible.\(^{629}\)

The sharing of information and education regarding responsible sexual behaviors need to take into consideration the appropriate age and levels of maturity.

Likewise, the Church needs to take her responsibility of advocacy for HIV/AIDS patients seriously before the government, international community and non-governmental organizations. It is precisely for this reason that the AMECEA Bishops committed themselves “to undertake a strong campaign of advocacy for persons infected and affected with HIV/AIDS before the governments, all sectors of society and international community, so that policies of affirmative action are made and greater financial and holistic assistance and support are given.”\(^{630}\)

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Counseling

One important role Church leaders and pastoral ministers can play is that of counseling. This is critical after people have tested and been found to be HIV-positive.

Hugh Slattery, MSC writes:

To get counseling before and after testing is a great help to people living with AIDS. They also desperately need the love and acceptance and help of family and friends to cope with the dramatic change in their lives. This is especially the case when it comes to the final stages of AIDS which can be very painful with the breakdown of bodily functions and the increasing sense of despair and hopelessness. With the loving support of family and friends and community along with devoted pastoral care there is no doubt that many people with AIDS undergo a profound conversion in their lives. In their pain and suffering they discover and pray to a merciful God who forgives them and loves them unconditionally.631

In speaking about the advantages of counseling, Ugandan theologian, John Mary Waliggo explains that counseling helps “people to accept testing, live positively after the test, and continue to work as normally as possible while taking precautions and better care of themselves. Counseling is prolonging the life and usefulness of many infected people.”632 He goes on to elaborate the vitality of counseling:

Many infected people work until they are fully bedridden. They inform some of their family members and relatives. They plan for the future of their dependents: making proper wills, preparing an income-generating project, discussing support for their dependents with relatives and friends, and preparing themselves spiritually to meet a happy and dignified death. Proper counseling helps to remove any bitter feelings in the infected and affected persons against God, neighbor, and society as a whole. It replaces despair with hope; self-condemnation with re-assurance; fear of having been bewitched with proper facts about HIV/AIDS; and fear of contracting the disease through causal contacts with the sick with facts on how such care should be provided.633

Counseling is crucial since it helps HIV/AIDS persons cultivate a reasonable way


633 Ibid., 54.
of dealing with their infection by accepting their health status and seeking treatment. Counseling is one of the life-affirming and enriching ways to support women and girls with HIV/AIDS in Uganda and everyone else who is infected with the HIV/AIDS pandemic. It is also a form of empowering the AIDS patients to live with dignity despite their HIV/AIDS status. The Church definitely has a major role to play since most people tend to turn to their priests or clergy for support and counseling.

**The Ministry of Reconciliation**

Given the fact that HIV/AIDS is currently incurable, people infected with this disease can feel helpless and hopeless. Their initial response upon diagnosis can include: fear; confusion; blaming of self, others and God; and a great deal of mental anguish.

It is critically important that women and girls and all persons with HIV/AIDS be supported and comforted during this time by their pastors and clergy. By demonstrating acceptance, openness, compassion and unconditional love for people with HIV/AIDS, Church leaders demonstrate the healing power of Christ that is in the Church and among God’s people. One way for the Church to execute this ministry is through the Sacrament of Reconciliation. Harold Wells points out that, “Reconciliation is part of the ongoing mission of Jesus Christ in the power of the Holy Spirit. It is therefore part of the Church’s mission and of the ministry of every Christian.” Agbonkhianmeghe E. Orobator, S.J. argues that in light of HIV/AIDS, reconciliation is a deeply-felt need. The need for reconciliation and healing manifests itself in the plea for:

- Healing from past actions and behavior which may have led to the HIV infection;
- forgiveness of those who may have infected the person;
- forgiveness from those

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whom the person may have infected; reconciliation with spouses, children and family, who become co-sufferers of PWA [people with AIDS]; and reconciliation with God, especially in view of the person’s impending death.\textsuperscript{635}

In addition, there is also a felt need to accept forgiveness for oneself and to overcome feelings of guilt, shame and fear.\textsuperscript{636} The mission of the Church to reconcile the sick is also part of the Church’s invitation to call the people of God (the faithful) to continuous conversion of heart and life and renewal.\textsuperscript{637} This is especially pertinent for those seriously ill and who await death. The ministry of reconciliation prepares people for the final encounter with God.

Beyond HIV/AIDS, the second African Synod chose the themes of reconciliation, justice and peace to call upon the attention of the African people to work for the above ideals on a continent riven by conflicts, divisions and violence. The virtues of reconciliation, justice and peace are not only necessary in the general society but also within the Church.\textsuperscript{638} Reconciliation should take place on family, parish, diocesan and Episcopal levels. As Sister Felicia Harry, OLA, made clear to the Bishops during the Second African Synod, “If the Church wants to bring reconciliation, peace, and justice to the African continent, then it had better start at home [within the Church].”\textsuperscript{639} One might surmise that one of the long-overdue dialogues has to do with women’s role in the


\textsuperscript{636} Ibid.

\textsuperscript{637} Pope Paul VI, \textit{The Rites of the Catholic Church}, Volume One, 524.


Church, their treatment and dignity as members of the household of God and Church-family. Even as the Church continues to preach equality and to uphold dignity of all people, she has not always lived up to these ideals within herself. To put it succinctly, humiliation and marginalization of women by some clergy within the Church has not been redemptive and befitting of the Church of God; and hence the need to ask for forgiveness and atonement for the past and present sins by taking concrete steps to lift up the dignity of women and girls within the Church. The present Church could take a cue from Pope John Paul II who asked for forgiveness for the sins committed by the Church.  

Anointing of the Sick

In the *Rites* and specifically in the General Introduction to the Pastoral Care of the Sick, we read:

Suffering and illness have always been among the greatest problems that trouble the human spirit. Christians feel and experience pain as do all other people; yet their faith helps them to grasp more deeply the mystery of suffering and to bear their pain with greater courage. From Christ’s words they know that sickness has meaning and value for their own salvation and for the salvation of the world. They also know that Christ, who during his life often visited and healed the sick, loves them in their illness.

Theologian Stuart C. Bate of South Africa observes that:

All ministry to the sick and dying needs to be constructed around four principal activities where God is acting in the Spirit through his ministers: healing of the sick, bringing life to what is dying, promoting the journey from death to life in raising up the dead, and preparing the dying for new life.

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In addition, Bate points out that the above four pastoral activities can be further unpacked into four major pastoral strategies:

1. The principal response to the sick and dying is that of mediating healing, life and resurrection.
2. The response to the family is one of concern, comfort, and hope.
3. Healing and life are family and communal events, not just those of a sick or dying person.
4. The principal prayer mode is to God who is our help.  

Stuart Bate explains that pastoral prayer care for the sick needs to clarify that:

First, healing the sick person means that even if the disease may not disappear, the person lives in the fullness of life through faith in Jesus and the promise of eternal life. Second, pastoral care of the dying has as its goal that even though the person may die of the disease, that person dies healed. This is the fundamental truth of this ministry. Third, the healing ministry needs to raise up the sick person in the fullness of awareness that they are saved. This implies effective transmission of the real meaning that “the sick are to be anointed in order to raise them up and save them.”

The Sacrament of the Anointing of the Sick is particularly helpful in cases of lingering ailments such as HIV/AIDS. It is a source of comfort and assurance that God is with the patient(s) as he or she undergoes the crucible of suffering and pain. This sacrament can be a great source of comfort and hope to the patient(s), their families and communities.

Bate, writing from the background of South Africa, points out that:

Since AIDS is indeed constructed differently in cultures as an illness, especially on the moral level. AIDS stigma is part of this. In some cultures, AIDS patients within the family can be hidden away. The diagnosis of a person with HIV and particularly its manifestation in AIDS and AIDS-related sickness has consequences that create negative feelings in the family and local community.

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644 Ibid.
This aspect of AIDS can reduce the personal dignity and worth of the sick person as the community sees a sinner, a moral weak person, and a bringer of shame on all, which can create feelings of anger about the sick person. People construct all kinds of coping mechanisms to deal with this, such as silence and not naming the illness, even at the funeral. Such feelings are also a manifestation of illness, an aspect that needs to be dealt with in the process of ministering concern, comfort, and hope to the family and community.  

In exercising the ministry of the anointing of the sick, it is important that the pastors or clergy be keen to attend to the emotional and psychological issues that may arise. Above all, priests need to assure people with HIV/AIDS of God’s unconditional love for them even as they help such persons come to contrition, confession and penance; and to experience God’s mercy in absolution in the sacrament. The prayer of the anointing of the sick speaks to this unconditional love and mercy of God when it states, “Through this holy anointing, may the Lord in his love and mercy help you with the grace of the Holy Spirit. May the Lord who frees you from sin, save you and raise you up.”

Stanley Hauerwas invites the Church to practice the ministry of presence when it comes to the sick. He writes that just as God is present to us, both in our sinfulness and faithfulness, the Church community is called upon by God to exercise unwavering commitment to the ministry of presence to those who are sick and vulnerable. He points out that, “our willingness to be ill and to ask for help, as well as our willingness to be present with the ill, is no special or extraordinary activity, but a form of the Christian obligation to be present to one another in and out of pain.”

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646 Pope Paul VI, The Rites of the Catholic Church, Volume One, 784.

647 Stanley Hauerwas, “Salvation and Health: Why Medicine Needs the Church,” In On Moral
elaborate that:

Those involved in medicine need the Church as otherwise they cannot help but be alienated from the rest of us. For unless there is a body of people who have learned the skills of presence, the world of the ill cannot help but become a separate world both for the ill and/or those who care for them. Only a community that is pledged not to fear the stranger — and illness always makes us a stranger to ourselves and others — can welcome the continued presence of the ill in our midst. The hospital is, after all, first and foremost a house of hospitality along the way of our journey with finitude …. If the Church can be the kind of people who show clearly that they have learned to be with the sick and the dying, it may just be that through that process we will better understand the relation of salvation to health, and religion to medicine.\footnote{648}

The Uganda Episcopal Conference (UEC) appeals to pastors thus:

Realizing that many young people are facing premature death often with all kinds of anxieties and feelings of guilt, we ask you, dear co-workers in the Vineyard of the Lord, to be active in visiting the AIDS victims. Frequently console them with the Sacrament of healing and use the celebration of the Eucharist to bring interior joy, wholeness and consolation to all the people concerned. Above all else, try, through your goodness and understanding, to be witnesses of God's love for His children.\footnote{649}

\textit{Preparing the Sick for Death: The Need for Compassion, Patience and Hope}

One important aspect of the ministry of healing in the Church is preparing the sick to die by accepting suffering and death as part of our earthly journey. The practice of medicine has done a great deal to alleviate pain and comfort the dying in their last days and hours. Important as the practice of medicine is, however, it has not succeeded in keeping us alive for eternity. At some point, all of us have to die. This reality confronts every person. As Christians, we know that death is not the end of our lives. The end of our earthly lives marks the beginning of our lives with God in eternity. This sacred truth

\footnote{648}Stanley Hauerwas, \textit{On Moral Medicine: Theological Perspectives in Medical Ethics}, 50-51.

\footnote{649}UEC, \textit{The AIDS Epidemic: Message of the Catholic Bishops of Uganda}, no. 17.
must be proclaimed in moments of sickness. The Church therefore has a responsibility to prepare people for this journey and reality. This preparation takes many forms. First, it entails “listening to the voices of the suffering.” It invites us to lay aside our preconceived notions of what might be the cause of the suffering of another person. In other words, we must lay aside the moralizing of the suffering of other people. Instead, we are invited to listen in a compassionate manner.

Secondly, compassionate listening leads us to “feeling the pain of the other as our own.” The pain of others must move us, affect us, and is in some sense, shared. In the words of Diana Frietz Cates, compassionate listening beckons us “to take in, or be taken in by, a friend’s original physical sensation, her [or his] dislike of that sensation, her wanting that sensation to cease, and her [or his] accompanying agitation, such that we can be said to feel one and the same pain.” The third element of compassionate listening is empowering the sick and dying persons to “discern with God the meaning of their experience” and how God is inviting them to face their pain and suffering. This implies for Christians joining our suffering to that of Jesus Christ, thereby fortifying our patience in the midst of pain, suffering and impending death. It also entails recognizing that we are

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651 Ibid.


not the center of the universe. While we must do all we can humanly speaking, to alleviate suffering and pain, and care for ourselves, we must recognize the fact that we cannot live for eternity on earth. Our lives must come to an end at some point.

As we wait for death, both patients and caregivers need to exercise patience. Christopher Vogt explains that, “To be patient in a Christian manner is also to wait expectedly for God’s activity in the world to be revealed. Christian patience includes an expectation that suffering, pain, and death are not the final words about life. In other words, a final aspect of patience is hope.” Vogt goes on to point out that Christian hope is not naïve optimism. Rather, Christian hope is unique in three ways. It takes a cautious view regarding what we can know about life after death and a modest interpretation of the language of afterlife. It also calls for continual conversion of the sick and dying and promises resurrection, not resuscitation. And lastly, Christian hope has a social aspect in the sense that members of the community are encouraged to support and care for the sick and dying. The Christian journey on earth and in heaven is travelled and lived in a community and in solidarity with one another. On Earth, we live as a community of sojourners. In heaven, we live as a communion of saints. Our social and interdependent nature as persons calls us to solidarity with the sick and dying on Earth, so that after this life, we may share in the fullness of life together.

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656 Vogt, *Patience, Compassion, Hope and the Christian Art of Dying Well*, 75.

657 Ibid., 77.

658 Ibid., 80.
Long-Term Goals

Proclaiming the Gospel of Life

The Church must continue to proclaim the Gospel of life and the sacredness of life to women and girls suffering from HIV/AIDS. As Pope John Paul II taught, “[Every person’s] life comes from God; it is [God’s] gift, [God’s] image and imprint, a sharing in [God’s] breath of life. God therefore is the sole Lord of this life: [Human beings] cannot do with it as [they] will.”659 The Church must continue to teach that both men and women are created in God’s image and likeness. Therefore, both males and females are worthy of respect, dignity and equal treatment. It is important for the Church to continue teaching that HIV/AIDS and other ailments do not do away with people’s dignity. HIV/AIDS may diminish and distort that dignity but never eliminates or destroys the dignity of such persons. Therefore, it is extremely important that HIV/AIDS-infected women and girls and all persons be treated with dignity. Furthermore, men and women are made up of bodies and souls. Attention needs to be paid to both aspects of the human person. Human beings have material, emotional, psychological and spiritual needs. Satisfying all, if not most, of these needs is critical for the flourishing of human persons.

Human persons are social by nature. Therefore, there is a need to relate to one another in a spirit of solidarity. This implies seeing every person we encounter as one of us, as a being of our species, and as such, to be treated always as an end in himself or herself. It is true that any serious proclamation of the Gospel of life must also proclaim the beauty of the gift of sexuality. The AMECEA Bishops point out that, “Sexuality is a

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precious gift from God our Creator to every man and woman. We are therefore called to honor it, respect it, and use it according to God’s commandment and the teaching of the Church.”

**Working for a More Inclusive Church**

Emmanuel Katongole, a Ugandan theologian, observes that, “The African woman is the backbone of African society and the African Church.” He also notes that, “The major challenge facing the Church is not simply pastoral, namely whether the Church can recognize, affirm, and defend the dignity of women, but ecclesiological, namely whether the Church can be space and community where women feel particularly at home, and where their voices and gifts of leadership are welcomed and nurtured.”

In a similar manner, the African woman theologian, Anne Nasimiyu-Wasike, in analyzing the African traditional history, underscores the fact that, “Although there have been both patriarchal and matriarchical societies in traditional Africa, it is the minority that are matriarchical, and even in these societies — where lineage is marked maternally— it was and is the men in the mother’s family that make decisions affecting the family.”

Women’s voices have been and continue to be missing in many societies. The male-dominated African culture promotes misogyny, abuse and subjugation of women and

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662 Ibid.

Nigerian theologian Anne Arabome, while reflecting on the feminization of poverty, points out that, “The life of [the] African woman is filled with struggles and challenges. She faces subordination, hard work, family care, limited economic resources and opportunities; her joys and hopes are very dim, as she has to depend often solely on men.” Arabome explains that, “The life of [the] African woman unfolds along a trajectory of servitude: from her home, where she serves every family member, to her church, where she continues to serve at the pleasure of ordained clergy and with very limited opportunities for leadership or the recognition of her value as a disciple of Jesus Christ. Indeed, what would the African church be without women?” More recently, both Pope Benedict and Pope Francis acknowledge the challenges that confront the Church with respect to women’s dignity and rights. Pope Benedict, writing in the context of Africa in *Africæ Munus*, explains that:

> While it is undeniable that in certain African countries progress has been made towards the advancement of women and their education, it remains the case that, overall, women’s dignity and rights as well as their essential contribution to the family and to society have not been fully acknowledged or appreciated. Thus women and girls are often afforded fewer opportunities than men and boys. There are still too many practices that debase and degrade women in the name of ancestral tradition.


Pope Francis, speaking in the context of the universal Church writes, “Demands that the legitimate rights of women be respected, based on the firm conviction that men and women are equal in dignity, present the Church with profound and challenging questions which cannot be lightly evaded.” The observations by the two pontiffs imply that although they are part of the Catholic Church and society, women remain for the most part on the margins. Therefore, it is imperative that the Church become a more welcoming space for women and girls.

To accomplish this, the Church will need to be more hospitable and transformed enough so as to become a more inclusive community for women and girls. Pope Francis explains that although the reservation of the priesthood to men is “a question that is not open for discussion,” associating sacramental power with hierarchical power and authority can be detrimental to the understanding and function of the sacrament of the ministerial priesthood. Pope Francis points out that whenever we speak of the power derived from the sacrament of ordained ministers; this power is spoken of and understood in terms of function and not that of dignity or holiness. He goes on to elaborate that:

The ministerial priesthood is one means employed by Jesus for the service of his people, yet our great dignity derives from baptism, which is accessible to all .... Even when the function of ministerial priesthood is considered ‘hierarchical,’ it must be remembered that ‘it is totally ordered to the holiness of Christ’s members.’ Its key and axis is not power understood as domination, but the power to administer the sacrament of the Eucharist; this is the origin of its authority, which is always a service to God’s people.

In the same vein, Sister Joan Chittister, a social psychologist, argues that:

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669 Ibid., no. 53.

670 Ibid.
Discipleship stands naked in the middle of the world’s marketplace and, in the name of Jesus, cries aloud all the cries of the world until someone, somewhere hears and responds to the poorest of the poor, the lowest of the low, the most outcast of the rejected …. The Church of Jesus Christ is not called to priesthood, the Church of Christ is called to discipleship.\textsuperscript{671}

Discipleship is a gift that Jesus extends to both women and men within the Church. All are sent out to proclaim the reign of God and bear witness to the Lord. Anne Arabome observes that, “As proclaimed by Jesus, the reign of God was meant to be particularly inclusive of the marginalized and the outcasts of society.”\textsuperscript{672} Since women and girls are among the marginalized today, it is only appropriate that women and girls on the margins of the Ugandan society and Church be brought into full membership in the fold of Christ, the Church. One way to do this is to have women and girls on all Church councils and in leadership roles. This is necessary for their effective participation in the life of the Church. For the Church in Uganda and Africa in general, to incorporate women and girls fully in the Church requires that meaningful partnerships based on dignity and equality, and rooted in solidarity, be formed at all levels of Church administration. It means that we need to create, “A process that allows men and women to sit down together as partners at the decision-making process table to consider the problems facing the Church, to plan strategies for all of God’s people, and together, to engage in leadership for the Christian community.”\textsuperscript{673} By doing so, women and girls will

\begin{itemize}
  \item Joan Chittister, In the Heart of the Temple: My Spiritual Vision for Today’s World Discipleship (London: SPCK, 2005)
  \item Ibid., 122.
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play a more active role and contribute to the common good in society. Arabome goes on to explain that:

To bridge the gap between official Church pronouncements and the African women’s lives and cultures, we need to unmask the contradictions and generate new paradigms and narratives capable of sustaining the hopes and responding to the aspirations of African women for full inclusion in the community called church in Africa and [the] world.674

Anyone who has served in Africa knows that women form the majority of church goers. Given the monumental task of evangelization today, this ministry and mission to evangelize cannot be left to men alone and should include these faithful, church-going women. There is need for all to collaborate in this task. Pope Francis reminds us that God calls all to salvation. All are called together as a people of God. Salvation is first and foremost the fruit of God’s initiative.675 Human beings, men and women, are called upon to join God in this divine drama of inviting others to God’s salvation through evangelization. To do so, requires cooperation, collaboration and solidarity. Pope Francis further reminds us that:

As part of his mysterious love for humanity, God furnishes the totality of the faithful with an instinct of faith—sensus fidei—which helps them to discern what is truly of God. The presence of the Spirit gives Christians a certain connaturality with the divine realities, and a wisdom which enables them to grasp those realities intuitively, even when they lack the wherewithal to give them precise expression.676

The same Holy Spirit endows both women and men with unique and varied gifts, all of which are necessary for the smooth running of the Church and society. In the spirit of sensus fidelium (sense of faith), Teresa Okure, a Nigerian theologian, suggests that it is

676 Ibid., 119.
important for the Church to ask herself some important questions: where are women in the decision-making process of the Church? How consciously aware are women of their noble vocation to proclaim the Gospel? Where are women leaders in Church structures and how do Church structures provide opportunities for women to exercise their charisms in the Church? Are our theologies at the service of women and the marginalized? The Church cannot afford to ignore these questions. To do so would be to ignore a larger segment of her membership. It would be a failure to heed Pope Francis’ call to go to the margins of society and invite the marginalized into the Church. The Church in Uganda would be well advised to heed Pope Francis’ call to begin listening to women and other marginalized groups.

**Marriage Preparation in the Age of HIV/AIDS**

It is important to point out that HIV/AIDS constitutes a major challenge to the institution and vocation of marriage in Africa. According to United Nations on AIDS, “60% - 80% of HIV+ (positive) African women have had sexual intercourse only with their husbands …. While women are often perceived as bearers of HIV/AIDS, it is usually men who bring HIV into a family.” In this case, something must be said about the institution and vocation of marriage in Africa in general and in Uganda in particular. If the major source of transmission and infection of women with HIV/AIDS is their spouse, we need to understand what is happening in the sacred vocation of marriage.

In that regard, a good theology should begin by affirming the goodness of

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marriage and the gift of sexuality. It should also affirm the values of abstinence, chastity and faithfulness in marriage relationships. Pope Benedict notes that:

The Church’s contribution to the goal of eradicating AIDS from society cannot but draw its inspiration from the Christian conception of human love and sexuality. The understanding of marriage as the total, reciprocal and exclusive communion of love between a man and a woman not only accords with the plan of the Creator; it prompts the most effective behaviors for preventing the sexual transmission of disease: namely, abstinence before marriage and fidelity within marriage. It is for this reason that the Church dedicates no less energy to education and catechesis than she does to health care and corporal works of mercy.679

And yet, while it is important that the Church continues to teach openness to children and the unity of the couple, faithfulness in marriage, and abstinence in the case of the unmarried as indispensable values, HIV/AIDS poses unique challenges. For example, what happens in cases where a couple in a marriage relationship discovers that one spouse is HIV-positive? What should those Catholics who are HIV-positive and who wish to marry do? Couples are expected to commit themselves to each other; part of this commitment entails the unity of the couples. In this case, should a spouse who is HIV-negative be open to unite herself or himself with an HIV-positive partner? Is authentic self-giving of couples only possible in cases where there is no use of contraceptives such as condoms?

Emily Reimer-Barry points out that, “HIV-positive persons are not prohibited from marrying. But on the other hand, married persons are expected to consummate their love in sexual union …. Marriage is also, by its very nature, ‘ordered to the well-being of

the spouses."\(^{680}\) In cases where this well-being is endangered, should a spouse continue in such a relationship? Similarly, what happens in cases of persistent domestic violence and abuse as is often the case in patriarchal societies?

In light of these new questions, some Catholic theologians have challenged the Catholic Church to find new ways of dealing with these realities. Theologian Kevin T. Kelly, for example, proposes a revision of sexual ethics grounded in six foundational beliefs:

1. Belief in the full and equal dignity of women as human persons as a major touchstone in our age for judging the credibility of the Church’s commitment to the dignity of the human person;
2. Belief in human freedom;
3. Belief in friendship, intimacy, and love;
4. Belief in the goodness of the human body, sexuality, and sensual joy;
5. Belief in the giftedness of human life;
6. Belief in the uniqueness of the human person and respect for personal conscience.\(^{681}\)

In the same vein, Margaret Farley asserts that rather than Catholic sexual ethics concerning itself with the moral evaluation of specific or particular sexual acts, far broader questions need to be raised. She explains that:

The most difficult question to be asked in developing a sexual ethic is not whether this or that sexual act in the abstract is morally good, but rather, when is sexual expression appropriate, morally good, and just, in a relationship of any kind. With what kind of motives, under what sort of circumstances, in what forms of relationships, do we render our sexual selves to one another in ways that are good, true, right, and just?\(^{682}\)


Farley goes on to suggest six norms for sexual justice:

1. Do no unjust harm
2. Free consent of partners
3. Mutuality
4. Equality
5. Commitment
6. Fruitfulness
7. Social justice

In addition, a theology of marriage in the time of HIV/AIDS must acknowledge the dignity of each spouse. Couples need to be helped to understand that they are God’s beloved children, loved and created with dignity. Couples need to speak honestly with each other, name their needs and desires, respect each other, care for themselves and resist practices that threaten their well-being including domestic violence and abuse. Marriage should be understood as a mutual and equal partnership.

Pope Francis further intimates that marriage is a lifelong sharing and commitment. It is a commitment to a life of fidelity. Conjugal love should be established on the basis of “concern for the good of the other, reciprocity, intimacy, warmth, stability and the resemblance born of a shared life.”

Furthermore, a theology of marriage must recognize that marriage in our earthly lives is never completely perfect. Marriage involves:

A human process of striving whiles spouses simultaneously experience finitude …A realistic theology of marriage will promote monogamy, fidelity, fruitfulness, and indissolubility in such a way as to raise these up as prophetic

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685 Pope Francis, Amoris Letitia: On Love in the Family, Apostolic Exhortation, 82.
ideals for which all couples should strive, even as we recognize with pain and sensitivity that some married couples will be unable to realize these completely, the faith of the Church requires not that these couples be abandoned but that they be supported, nurtured, and reassured of God’s love for them.\textsuperscript{686}

Another important element that couples need to engage in constantly is discernment of what God might be calling couples to do and how they should live out their lives and vows. Reimer-Barry writes that:

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There is not a “one size fits all” code for every question a Christian married couple will face, instead, each couple must discern together how they will subjectively live out their commitments. This openness to discernment and respect for conscience is life-affirming because they trust they will be given the tools to understand how God is inviting them to act.\textsuperscript{687}
\end{quote}

The Church should accompany couples as they journey through life. In the case of HIV/AIDS, couples who are affected need to be supported and not condemned; to be assured of God’s love for them in their struggles and not discouraged; and above all, to be accompanied on the journey of life and not abandoned.

\textit{“The Church and the Condom Debate, A Case of Discordant Couples”}

The HIV/AIDS pandemic has had enormous effects on family life and marriages. One such case has been the rise of what is called discordant couples, where one partner is HIV negative and the other is positive. While it is generally agreed that faithfulness to one’s spouse in marriage and abstinence for the unmarried are the ideal ways to prevent infections with HIV/AIDS and other sexually transmitted diseases; some have argued that in the case of discordant couples, condom use should be permitted. In the case of discordant couples, particularly where the husband is HIV-positive and the wife is HIV-

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\textsuperscript{686} Reimer-Barry, \textit{Catholic Theology of Marriage in the Era of HIV and AIDS: Marriage for Life}, 147. \\
\textsuperscript{687} Ibid., 146.
\end{flushright}
negative; condom use would not be a form of contraception as the Church teaches but a way to prevent infection of the HIV-negative partner or spouse and in this way, save the life of that person.  

Perhaps, today, we as a Church might do well to listen to the voice of Pope Francis who invites us in pastoral situations to find new ways of discerning and approaching people; to see human beings as persons who struggle and whom we need to approach with compassion and the merciful love of Christ. Pope Francis points out that, “The Church must accompany with attention and care the weakest of her children …. Let us not forget that the Church’s task is often like that of a field hospital.” In this field hospital, we have wounded children of God. This is the place that Jesus chose to come to by his incarnation. It is a wounded world that is constantly in need of Jesus’ healing and God’s merciful love. And so, while it is vital that the Church teach and insist on her children adhering to the truth regarding fidelity and abstinence, it is equally important for the Church to realize, her children are still on the pilgrim way. The Church is therefore called upon to have epistemic humility, namely, that she does not have answers to all challenges that confront her and her children. The Church as reflected in both the clergy and laity is called upon to engage in communal as well as individual discernment. And if all are called to discernment, and the limited knowledge of all requires that all participate in this discernment process, epistemic humility becomes a conditio sine qua non.


690 Charles E. Curran, “John Paul II’s Understanding of the Church as Teacher of the Truth about Humankind,” In A Just & True Love, Feminism at the Frontiers of Theological Ethics: Essays in Honor of Margaret A. Farley, edited by Maura A. Ryan and Brian F. Linnane, S.J. (Notre Dame, Indiana: University
William O’Neill argues that while condom use is not a panacea, and while fidelity and abstinence remain the ideal ways to avoid infection, given the systematic violation and deprivation of the basic rights of women and children and their vulnerability to HIV/AIDS, an integrated policy that promotes the use of prophylaxis can be part of the comprehensive approach to stemming the HIV/AIDS pandemic.\(^{691}\)

*The Responsibility of Women and Girls with HIV/AIDS in Uganda*

**Short- Term Goal**

**Responsible Lifestyle**

As observed in Chapter Three, rights come with responsibilities or duties. While the right to life is given to all; in the same measure, all have the duty of protecting life. Accordingly, while all attention should be given to the women and girls who are most affected and infected with HIV/AIDS, this does not free them of responsibility. Like everyone else, women and girls with HIV/AIDS have a moral responsibility to themselves and to other members of their societies. One such responsibility is that once a person becomes aware of one’s HIV-positive status, he/she has a moral responsibility to avoid infecting others. Elias K. Bongmba explains:

If an individual finds out that he or she is seropositive, that person should act in a responsible way by making sure that he or she refrains from actions that would transmit the virus to a child, a young woman, or spouse. This means abstaining from sexual intercourse. It also means informing one’s sex partner about the situation so that the partner is not taken unaware. Failure to communicate candidly about one’s status could lead to the infection of one’s partner. Such behavior violates the ethics of justice. The personal and individual dimension of the HIV/AIDS crisis is very important and calls for vigilance and the use of good

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judgment by everyone. 692

Life is a gift from God. Life as such is sacred and precious. We must value and treat every person with dignity, respect and equality. Women and girls with HIV/AIDS are urged to honor and respect other individuals by not violating the sacredness of life through deliberate infection of such individuals. At the same time, women and girls with HIV/AIDS need to be treated with equal regard because their HIV-positive status does not mean loss of their dignity. Acts of discrimination, stigmatization, and shaming of HIV-positive persons run counter to a life-affirming and life-enhancing theology and solidarity.

Women and girls and all people with HIV/AIDS have a moral responsibility to inform others about their HIV-positive status particularly when dating or in marriage. The moral responsibility to warn and to do no harm is germane to the principle of justice and individual responsibility. 693 Individuals who know or suspect themselves to be sero-positive neglect their responsibility if they do not forewarn a current or prospective partner. If they knowingly infect another, they likewise disregard their responsibility of justice which demands equal treatment of persons with respect, concern and protection. 694 It is therefore imperative that HIV-positive women and girls and all infected persons live responsibly. This includes avoiding intentional and willful transmission of HIV/AIDS infections.

692 Bongmba, Facing a Pandemic: The African Church and the Crisis of AIDS, 171.


694 Ibid., 710-711.
Mid-Term Goal

Seeking Treatment and Care

Once a person has been tested and proven to be HIV-positive, women and girls have a responsibility to seek medical care and treatment. Although infection with HIV/AIDS can be traumatizing, with the discovery of anti-retroviral medications, infection does not mean a death sentence. Justice Edwin Cameron of South Africa, who is HIV-positive, remarks, “AIDS no longer has to be a fatal illness. Life-saving combinations of anti-retroviral drugs have shown that illness and death from AIDS can be contained. Under the right conditions, HIV is now a chronic, manageable infection and AIDS a treatable disease.” As such, people found to have HIV/AIDS must seek care for themselves and loved ones. Their innate dignity requires this. Similarly, women and girls with HIV/AIDS must be treated with care and respect by medical care providers. This includes but is not limited to respecting people’s HIV-positive status by not disclosing it and thereby violating their confidentiality.

Long-Term Goal

Ongoing Self Care by and for AIDS Patients

HIV/AIDS patients need ongoing self-care. James Keenan defines self-care as a “unique responsibility to care for ourselves, affectively, mentally, physically, and spiritually.” As persons created in God’s image and likeness and as subjects with dignity and rights, women and girls with HIV/AIDS need to do everything possible

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within their own powers to tend to their own needs and to seek care that is necessary for coping with their ailment, pain, emotions and grief — all of which come with the diagnosis with HIV/AIDS. This self-care may involve taking antiretroviral therapies to bolster one’s immunity and prolong one’s life. It may entail seeking counseling so that one is able to cope with the pain as well as the emotional and psychological trauma. It might involve seeking spiritual direction and support groups. All these are forms of self-care that are relevant for women and girls and other infected individuals to deal with the HIV/AIDS sickness. Edward Vacek explains that as human persons, we are:

Most constantly present to ourselves, whose needs we are usually most able to fill, and whose moral self we are able to form, we are therefore our own nearest neighbor’… our love for ourselves is irreplaceable and indispensable. We have talents and a personal identity that we alone can develop. We have a relational self that we alone we enact.  

While reflecting on self-care, Maria Cimperman notes that:

Commitment to growth requires a level of self-awareness. I need to know how I am relating to myself, to others, to my God, and to the larger community around me…. A commitment to growth sees growth in the long haul and yet responds to the immediacy of a situation…. Self-care requires that one be in a relationship, not only with oneself, but also with others. We care for ourselves when we develop significant, positive, supportive relationships. Healthy, positive relationships, community supports, and a relationship with our God are crucial elements of self-care. 

All these are important for coping with devastating illnesses such as HIV/AIDS. Self-care is therefore a critical element in dealing with sicknesses. Caring for oneself is not equivalent to selfishness or self-centered behavior or even closing off oneself from the concerns of the wider society. It is being proactive and practical in caring for oneself


698 Cimperman, When God’s People Have HIV/AIDS: An Approach to Ethics, 50.
so as to cope well when faced with a serious ailment such as HIV/AIDS. The practical and proactive measures entail seeking counseling, spiritual direction and group support or therapy.

**The Responsibilities of Men in the Time of HIV/AIDS**

**Short-Term Goal**

**Living Responsibly**

Whether healthy or infected, men have the responsibility to test for HIV/AIDS. For those men who are healthy, this information is helpful in enabling them to make choices regarding their sexual lives. Those who are married are called to faithfulness to their spouses and to their marriage vows. Those yet to be married are called to abstinence. This is critically important in the time of HIV/AIDS. For those infected with HIV/AIDS, it is important that they seek treatment and on-going care.

**Mid-Term and Long-Term Goals**

**Ongoing Dialogue with Men Regarding Culture**

Culture is an important aspect of human beings and human societies. In *Evangelium Gaudium*, Pope Francis writes:

The people of God is incarnate in the people of the earth, each of which has its own culture. The concept of culture is valuable for grasping the various expressions of the Christian life present in God’s people. It has to do with the lifestyle of a given society, the specific way in which its members relate to one another, to other creatures and to God …. The human person is always situated in a culture…. Grace supposes culture, and God’s gift becomes flesh in the culture of those who receive it.

Pope Francis affirms the value of our culture. He also points out that Jesus became incarnate in the culture. Likewise, God’s word is proclaimed in the culture of the people. The Pontifical Council for Culture states that, “This Good News addresses human

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persons in their complex wholeness, spiritual and moral, economic and political, cultural and social. The Church therefore does not hesitate to speak of the evangelization of cultures, that is to say mentalities, customs and behavior.\footnote{Pontifical Council for Culture, Towards a Pastoral Approach to Culture (Vatican City: Libreria Editrice Vaticana, 1999), no. 4. Also available at Vatican, http://www.vatican.va/roman_curia/pontifical_councils/cultur/documents/rc_pc_pc-cultur_doc_03061999_pastoral_en.html (accessed January 16, 2018).} The same Council goes on to explain that:

The evangelization of cultures and the inculturation of the Gospel go hand in hand, in a reciprocal relationship which presupposes constant discernment in the light of the Gospel, to facilitate the identification of values and counter-values in a given culture, so as to build on the former and vigorously combat the latter. Through inculturation the Church makes the Gospel incarnate in different cultures and at the same time introduces peoples, together with their cultures, into her own community. She transmits to them her own values, at the same time taking the good elements that already exist in them and renewing them from within. Through inculturation the Church, for her part, becomes a more intelligible sign of what she is, and a more effective instrument of mission.\footnote{Ibid.}

From the above viewpoint, it is clear that the Church respects people’s cultures. As the Church proclaims the Gospel of Christ, it is mandated to seek out and lift up the good elements in each culture, while at the same time, combating the bad ones. Culture as Pope Francis points out is, “a dynamic reality which a people constantly re-creates; each generation passes on a whole series of ways of approaching different existential situations to the next generation, which must in turn reformulate it as it confronts its own challenges.”\footnote{Pope Francis, The Joy of the Gospel (Evangelii Gaudium), Apostolic Exhortation (Vatican City: Libreria Editrice Vaticana, 2013), no. 122. In Tina Beattie, “Maternal Well-Being in Sub-Saharan Africa: From silent Suffering to Human Flourishing,” In The Church We Want, African Catholics Look to Vatican III, edited by Agbonkhianmeghe E. Orobator (Maryknoll, New York: Orbis Books, 2016), 179.} Culture is therefore not static but dynamic. However, culture can be distorted and used to justify oppressive practices in society. It is from this perspective...
that we argue that as a Ugandan people, we need to have dialogue regarding which elements of our culture are life-affirming and life-enriching and which ones are not. Dialogue, as the Second African Synod pointed out is, “the way of being for the Christian within the community and with other believers and men and women of good will.”

To determine which elements of our culture are life-affirming and which ones are not, will require communal discernment. In the spirit of communal discernment and of *palaver* (word), Juvenal Ilunga Muya suggests thus:

In the logic of the palaver, everyone has the right to speak. In this sense the palaver guarantees equality and everyone’s access to speak in view of building the community. The final decision arrived at its end is not the result of compromise or of voting according to the majority, but of a solid consensus among all members. The fundamental experience at the basis of the word is that of communion. Communion is not true unless it promises and guarantees the originality of each member, and unless each member is conscious of not being free except in relation with the community … Individual freedom is not therefore a value absolute in itself, but in relation to the community, in the same sense that the community is not absolute value but one linked to the individuals.

Benezet Bujo is quick to point out that in the spirit of palaver, neither relationality nor autonomy is compromised. Instead, they complement and reinforce each other. In the spirit of *palaver*, it is important to ask ourselves what customs, traditions, and values are life-affirming for every member of the family and society? Those customs, traditions and values that are life-affirming need to be supported and those that are not should be set aside.

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This is crucial in this era of HIV/AIDS where some African cultural practices, customs and traditions such as polygamy, widow inheritance, forced early marriage of girls, and lack of respect for widowhood or outright denial of widows’ rights have been identified as particular vectors through which HIV/AIDS infects some women and girls in Africa and Uganda. In general, all cultural practices need to be exposed to cultural hermeneutics.

Long-Term Goal

*A New Paradigm: Understanding Masculinity from a Feminine Perspective*

Owing to gendered nature of HIV/AIDS, some scholars have called for a paradigm shift, one that views masculinity through the lens of femininity or what is simply referred to as “redemptive masculinity.”

Ezra Chitando argues that “redemptive and liberative masculinity must be nurtured in the face of gender-based violence and HIV. Men must be able to cry if women, children and men [are] to thrive in environments that are littered with pain and death.”

The cry of men is a cry of identification and compassion with women who are infected with HIV/AIDS. James Keenan proposes that no meeting of social responsibilities should ever be held without the participation of women in it. He argues that “wherever we are, we need to have women as active participants, simply because their perspective is their perspective, and it

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707 Ibid.
is one that is often lost in single gendered gatherings and deliberations.\textsuperscript{708}

Likewise, David Moscrop insists that:

If true equality is to be achieved between men and women, men are going to have to enlist as feminists. This begins with men realizing that being a “man” is complicated, variable, and has nothing to do with sports, worn jokes, and preserving unjust and unearned privilege. It proceeds when men realize that they are bound up in those social structures that obscure, oppress, and abuse many women. But the pursuit of equality never ends. Instead it remains active as a constant and critical reflection about how we engage with one another as gendered human beings and action toward remedies.\textsuperscript{709}

Mandy van Deven suggests that:

For male feminists, maintaining an awareness of their own privilege in order to vigilantly disassemble male dominance is crucial. It is not enough to talk the talk; one must also incorporate principles of equality into one’s daily life. This means not only treating individual women with respect (for example, sharing household and child care responsibilities, encouraging women’s financial independence and economic success) and refusing to be complicit when other men demonstrate sexist behavior, but also taking steps to shift societal dynamics that benefit men as a group (such as raising awareness about the links between dominant constructions of masculinity and gender-based violence, promoting reproductive justice policies and rejecting unearned authority). And it means recognizing that while individual power varies, in most places around the world men receive institutional benefits and power to the detriment of women. Being accountable for the deconstruction of male privilege means men should find creative ways to undermine and disassemble patriarchy.\textsuperscript{710}

The above authors invite us to be vigilant insofar as the role and place of women is concerned in society and church. If women as well as men are created in God’s image and likeness and have inherent dignity, then the women’s dignity calls for nothing less


\textsuperscript{709} David Moscrop, “Why All Men Should be Feminists,” In Feminist Catholic Theological Ethics, Conversations in the World Church, edited by Linda Hogan and A.E. Orobator (Maryknoll, New York: Orbis Books, 2014), 228.

than to bring them to full participation in decision making in their societies and church as well. This includes respecting the feminine gender and treating women with utmost respect as bearers of the *imago dei*.

**Physicians’ Responsibilities in the Time of HIV/AIDS**

Short-Term Goal

*Truthfulness with and to Patients*

Truth telling is an important aspect of any human relationship. David Thomasma points out that “respect for persons demands it…. It is the basis of interpersonal trust, covenants, contracts and promises.”

In the physician-patient relationship, particularly in a case where a person is sero-positive, it is important that the physician be forthright about the diagnosis of HIV/AIDS so that individual can talk openly to the physician about the available options for treatment. It is also important that the physician carefully review the ongoing care of the patient, prevent complications and spread of infections, and be concerned about the overall wellbeing of the person. It is equally important that the physician be sensitive in discussing such issues. A physician must be compassionate and attentive in answering questions that a patient may have.

Mid-Term Goal

*Observation of Confidentiality*

Doctors or physicians are required by the nature of their profession to observe confidentiality between the patients and themselves. Confidentiality serves two major purposes:

In the first place, it acknowledges respect for the patient’s sense of individuality

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and privacy. The patient’s most personal physical and psychological secrets are kept confidential in order to decrease a sense of shame and vulnerability. Secondly, confidentiality is important in improving the patient’s health care — a basic goal of medicine. The promise of confidentiality permits people to trust (i.e., have confidence) that information revealed to a physician in the course of a medical encounter will not be disseminated further. In this way patients are encouraged to communicate honestly and forthrightly with the doctors. The bond of trust between patient and doctor is vitally important both in the diagnostic process (which relies on an accurate history) and subsequently in the treatment phase, which often depends as much on the patient’s trust in the physician as it does on medications and surgery.  

This confidentiality is especially important in cases of high risk and vulnerable groups such as women and girls who are often driven out of their homes once their sero-positive status is discovered. Failure to keep confidentiality may result in patients failing to seek testing, treatment and any continuing medical intervention. It is imperative that physicians keep confidentiality between their patients and themselves. The relationship between physicians and their patients is so important since it is based on trust. To violate confidentiality would be tantamount to betraying the patients’ bond of trust and right to privacy.

**Long-Term Goals**

**Focus on People, Not Money**

The health-care system in Uganda is a two-tiered system. There are public/government and privately-run hospitals. As described already, most of the public hospitals are in poor shape, with no running water, electricity, beds, mattresses, decent floors, medicines, or properly-paid care workers. Because of the pathetic conditions of government hospitals, patients tend to go to private hospitals or clinics. These hospitals and clinics are sometimes run by the very doctors and nurses who should ordinarily be

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working in government hospitals, but because of poor working conditions and inadequate remuneration they are forced to find alternative avenues to supplement their government pay. However, some health care workers flee the government hospitals in favor of the private sector for purposes of profiteering from their profession. Private health care providers tend to be more efficient and better equipped and therefore attract more health care seekers and thus, make more money.

Needless to say, the obsession with making money has, to a great extent, been detrimental to the health care industry in Uganda. Important as making a living is, it cannot be the driving force behind the practice of medicine. An overemphasis on money becomes a distraction to the internal and external practice of medicine. It excludes people who need treatment but cannot afford to pay; it corrupts and distorts professional relationships. Health care professionals need to re-focus their attention from making money to creating a health care system centered on people. Primacy must be given to people, not money. In an age of incurable illnesses like HIV/AIDS, this shift is pertinent and long overdue. In other words, as a society, Uganda needs a health-care industry that is built on ethical principles, not greed, and rejects exclusion and inordinate consumption that breeds inequalities.

Furthermore, the option for the poor, in the case of the Ugandan women afflicted with AIDS, challenges us to eliminate the ‘invisible’ walls that are often erected and created among us, that is, between the rich nations and the poor ones, the healthy and the sick, men and women, the strong and weak, the educated and ignorant. On the international level, Pope John Paul II argues:

The AIDS epidemic calls for a supreme effort of international cooperation on the part of governments, the world medical and scientific community, and all those who exercise influence in developing a sense of moral responsibility in society. The threat is so great that indifference on the part of public authorities or condemnatory or discriminatory practices toward those affected by the Acquired Immunodeficiency Virus, or self-interested rivalries in search for a medical answer to this syndrome, should be considered forms of collaboration toward this terrible evil which has come upon humanity….Those members of the Church will continue to play their part in caring for those who are suffering with AIDS, as Jesus taught his followers to do (Mt. 25:36)…. Our individual and collective concern for them is a definite measure of our humanity, taken in the loftiest sense of the words.  

The care and concern for citizens in our own countries must be extended to the citizens of the world. It calls for universal solidarity. John Paul II further explains that:

An option, or a special form of primacy in the exercise of Christian charity, to which the whole tradition of the Church bears witness. It affects the life of each Christian inasmuch as he or she seeks to imitate the life of Christ, but it applies to our social responsibilities and hence to our manner of living, and to the logical decisions to be made concerning the ownership and use of goods. Today, furthermore, given the worldwide dimension which the social question has assumed, this love or preference for the poor, and the decisions which it inspires in us, cannot but embrace the immense multitude of the hungry, the needy, the homeless, those without medical care and above all, those without hope for a better future. It is impossible not to make account of the existence of these realities. To ignore them would mean becoming like the ‘rich man’ who pretended not to know the beggar Lazarus lying at his gate (cf. Lk. 16: 19-31).

The poor, Leornado Boff reminds us, “are those who suffer injustice. Their poverty is produced by mechanisms of impoverishment and exploitation. Their poverty is therefore an evil and an injustice.” For Gustavo Gutierrez, poverty, “while it consists of social, economic, and political deprivation, ultimately signifies, “death, unfair death,


715 Pope John Paul II, Sollicitudo Rei Socialis, no. 42.

the premature death of the poor; physical death…. [And] the refusal to recognize the full
dignity of women.”

For physician Paul Farmer, who has dedicated his career to assisting the most
afflicted populations, the preferential option for the poor challenges and invites us to
observe, judge and act, and ultimately see the poor for who they are. He argues that “To
those concerned with health, a preferential option for the poor offers both a challenge and
an insight. It challenges doctors and others health providers to make an option—a
choice—for the poor, to work on their behalf.” In his model of “observe, judge and
act,” Paul Farmer suggests that it is vital to understand the root causes of poverty and
diseases among the people and how these are distributed in a given population; it is
equally significant to express distaste, namely, that things should not be this way and a
resolve to make poverty and diseases such as tuberculosis and AIDS a top priority in
being addressed; and in terms of the actions to be taken, early diagnosis and treatment of
ailments is necessary. Most importantly, Farmer suggests the preferential option for the
poor demands that we examine those structures that have been responsible for causing
poverty, diseases like HIV/AIDS among women and girls, gender inequalities, and so
forth. For this analysis to be so deep requires us to view such structures from a social
justice point of view. For Paul Farmer, the social justice analysis begins with indignation,
that is, when people come “to see the conditions of the poor as simply unacceptable and

717 Gustavo Gutierrez, Essential Writings, ed. James B. Nickoloff (Maryknoll, NY: Orbis Books,
1996), 144.

718 Paul Farmer, Pathologies of Power: Health, Human Rights and the New War on the Poor
(Berkeley: University of California Press, 2005), 139-140.

719 Ibid., 141-152.
as a result of structural violence and is man-made.” In this case then, the preferential option for the poor implies, “working for social justice, working with the poor people as they struggle to change their situation…” It may entail declaring health and health care to be a human right, in order to protect the dignity of the poor. By now, it should be clear from the above extensive analysis that the high rates of HIV/AIDS infections among women and girls in Uganda and many parts of Africa are not a result of an accident. HIV/AIDS among women and girls is a result of social structures that have worked together to exacerbate and compound infection levels. In so far as there are social structures that create conditions for HIV/AIDS infections, they are part of structural or social sin. It is important that the social conditions which promote human dignity and the common good be part of our search for meaningful ways of tackling HIV/AIDS.

As Cahill observes, “AIDS is a justice issue, not primarily a sex issue. AIDS as a justice issue concerns the social relationships that help spread HIV and fail to alleviate AIDS, relationships of power and vulnerability that are in violation of Catholic norms of justice and the common good.” It also raises moral questions about gender equality, gender roles, and ethical concerns regarding the distribution of wealth, accessibility to medical care and treatment among women and girls in Uganda. The fact that AIDS infections in Uganda affects the most vulnerable members of the community, women and girls, should not surprise us. As earlier demonstrated, abject poverty, lack of education, cultural and tribal practices, and other structural problems have worked together to

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721 Ibid., 159.
deliver havoc in the form of HIV/AIDS upon the women and girls in Uganda.

The Government of Uganda

The government of Uganda has the most important role to play in the prevention, treatment, education, and research to find a cure for citizens who are infected and/or will become infected with HIV/AIDS. As the custodian of public goods and services, the government of Uganda has a tremendous responsibility to ensure that basic goods and services are available to all citizens. It is this light that we now consider the goals for the government of Uganda.

Short-Term Goal

Provision of safe bathrooms and sanitary pads for girls in public schools and prioritization of education for girls.

Uganda has both public and private school systems. To a large extent, private schools are better run, perform better academically and are better financed since it is only the rich and middle-class people who can afford to send their children to these schools. The well-to-do are also able to provide their children with most of the basic requirements.

On the other hand, as is the case with public hospitals, public schools tend to be poorly managed and in terrible condition. The teachers are inadequately paid and experience delays in the payment of their monthly salaries. Sometimes, these schools have no permanent structures or buildings. It is not uncommon in rural areas, for example, to find students learning under trees.

Although Uganda introduced both universal primary and secondary education, a policy which has increased the number of students attending school, many of these schools lack the basic facilities such as chalk for writing, writing boards, bathrooms or
toilets, first aid kits, and drinking water. It is from this background that we propose and argue that the government of Uganda needs to prioritize funding within its budget to ensure that as a safety requirement, all public schools have separate bathrooms for boys and girls as well as teachers. These bathrooms also need to have proper doors for privacy. In addition, girls of puberty age in the public-school system should be provided with sanitary pads to avoid skipping or dropping out of school due to the menstrual cycle.

The government of Uganda also needs to prioritize the education of girls. Although the government of Uganda has accomplished a good deal in this regard, more can be done to encourage girls to complete their education. For example, offering scholarships to the best performing girls in the public school system; working with parents to discourage them from leaving girls at home to do domestic work while missing out on their education; reducing and eradicating poverty, and tackling the traditional gender roles that keep girls out of schools. According to the Global Partnership Organization, traditional gender roles and poverty are some of the major challenges to the education of girls in Uganda.723

**Mid-Term and Long-Term Goals**

*Prioritize spending on health care, provision of medications, and timely remuneration of health care workers over purchase of military hardware.*

The government of Uganda needs to prioritize its spending. Instead of giving priority to improvement in the health care infrastructure, the Ugandan Ministry of Finance and Parliament allocate a large share of the national budget to military spending.

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Most of this money is spent on the purchase of military hardware to keep politicians in power and to please subordinates, a form of patronage. One supplementary budget after another is passed and rushed through the corridors of the Ugandan Parliament under the guise of special and emergency spending, with no proper accountability and oversight of these funds. It is not surprising that corruption is rife in the Uganda military and military officers are among the richest people in Uganda today.724 It is difficult to track down the real financial figures on military spending because its operations are shrouded in mystery. For example, while 1.8 trillion Uganda Shillings was allocated to the health sector for the financial year 2017-2018, there was no mention of how much is to be spent on the military under the same budget.725 Despite the fact all African heads of states and governments pledged to commit themselves to increase and allocate 15% of their national budgets to the health care sector, Uganda has so far not been able to reach this goal at all.726 It is from this perspective that we argue for a commitment on the part of the Ugandan government to prioritize its spending on health care to improve on the country’s health care infrastructure, provide leadership, and allocate funds in its budget to fight HIV/AIDS.

Similarly, the government of Uganda needs to prioritize its spending so that the government can purchase lifesaving medications such as anti-retroviral therapies that are


badly needed in the fight against HIV/AIDS. It is not uncommon for hospitals in Uganda to run out of these and other vital medications, such as anti-malarial therapies. Many Ugandans still die of diseases that have been eliminated elsewhere.

It is equally important that the government pay attention to the timely remuneration of health care workers to boost their morale. It is not just, for one to work so hard and at the end of the month, receive no pay for the work done. This frustrates many health professionals and explains why sometimes doctors and nurses are absent from work. These structural problems in the health care industry will need to be addressed if Uganda’s health-care infrastructure is to meet and serve the needs of Ugandans and to restore people’s dignity and enhance life.

Elias Bongmba challenges all African governments to “make every effort to reform the health care infrastructure of their countries, to eradicate poverty, and to remove the structural imbalance that promotes discrimination of women and children in society. African states must avoid frivolous spending on arms, but instead devote their resources to fighting HIV/AIDS.”  

More than Words: Enforce Human Rights

In explaining what human rights are, Henry Shue points out that, “Human rights are the rational basis … for a justified demand.”  

Shue’s analysis of human rights is very critical. To him, a person is possessor or a subject of rights simply by virtue of the fact that she or he is a person. Because of this, human rights make demands. Shue writes:

A right is something that can be demanded or insisted upon without

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727 Bongmba, Facing a Pandemic, the African Church and the Crisis of AIDS, 173.

embarrassment or shame. When that to which one has a right is not forthcoming, the appropriate reaction is indignation; when it is duly given there is no reason for gratitude, since it is simply one’s own or one’s due that one received. A world with claim rights is one in which all persons, actual or potential claimants, are dignified [respondents] of respect, both in their own eyes and in the view of others.

For Shue, the “object” of rights signifies the substance of the social good that is asserted, protected, or enforced, for example, basic security, liberty, and welfare. He explains that, “The substance of a right is whatever the right is a right to.” Therefore, to enjoy a right, the bearer of a right or rights demands that social arrangements be made to guarantee the enjoyment of that right or rights. This is more so when the bearer (s) of that right or rights cannot secure them on their own.

In the context of Uganda, the 1995 Constitution of Uganda provides for equal status for all citizens and “prohibits discrimination on the grounds of sex, race, color, ethnic origin, tribe, birth, creed, or religion, or social or economic standing, political opinion or disability.” The same Constitution in article 33 calls for equality of women and men and clearly states that, “Laws, cultures, customs or traditions which are against the dignity, welfare or interest of women or which undermine their status, are prohibited by this Constitution.”

In addition, Uganda has signed and ratified the Convention on the Elimination of All Discrimination Against Women (CEDAW). The Convention demands that all

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729 Shue, Basic Rights: Subsistence, Affluence, and U.S. Foreign Policy, 15.

730 Ibid.

731 Ibid., 16.

732 Constitutional Assembly, Constitution of Uganda (Kampala-Uganda, 1995), articles 21 (1) and (2).

733 Ibid., article 33 (6).
member governments agree:

(a) To embody the principle of the equality of men and women in their national constitutions or other appropriate legislation if not yet incorporated therein and to ensure, through law and other appropriate means, the practical realization of this principle; (b) To adopt appropriate legislative and other measures, including sanctions where appropriate, prohibiting all discrimination against women; (c) To establish legal protection of the rights on an equal basis with men and to ensure through competent national tribunals and other public institutions the effective protection of women against any act of discrimination.  

Human Rights Watch, Uganda notes that:

The protection of women’s rights must be central to the HIV/AIDS strategies of government and international donors. The Ugandan government should respond to this challenge with the courage and energy it showed in its initial response to the HIV/AIDS epidemic and support a countrywide response to domestic violence and women’s vulnerability to HIV at the highest levels. The Government should not use traditional practices or the sanctity of the family to ignore the plight of these women and to abdicate its responsibilities under national and international law. 

Similarly, the Handbook on HIV and Human Rights for National Human Rights Institutions intimates that:

Through the long struggle against HIV, it has become clear that human rights are essential to effective national responses to HIV. Where human rights are not protected, people are more vulnerable to HIV infection. Where the human rights of HIV-positive people are not protected, they suffer stigma and discrimination, become ill, become unable to support themselves and their families, and if not provided treatment, they die. Where rates of HIV prevalence are high and treatment is lacking, whole communities are devastated by the impact of the virus.

Furthermore, the Declaration of Commitment on HIV/AIDS clearly explains thus:

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The full realization of human rights and fundamental freedoms for all is an essential element in global response to the HIV/AIDS pandemic, including in the areas of prevention, care, support and treatment [...] it reduces vulnerability to HIV/AIDS and prevents stigma and related discrimination against people living with or at risk of HIV/AIDS.\textsuperscript{737}

Since Uganda is a party of CEDAW, the African Charter on Human and People’s Rights, and the UN Declaration of Human Rights and since its own Constitution calls for equality of men and women and prohibits discrimination of any kind against women and/or any other persons; and since women and girls with HIV/AIDS are subjects of rights; the government of Uganda is obliged to protect women and girls with HIV/AIDS and all persons from stigmatization, discrimination, and violence. Similarly, women and girls with HIV/AIDS need to be provided with access to health care, medications, food, and security as well as the social, economic and political conditions that enable them to participate in the life of society. To accomplish this, human rights need to be translated from mere words in Constitutions, Protocols and Covenants to reality through enforcement of these rights by the government of Uganda and the governments of other nations.

In the words of Carol Rittner: “Women need full human status in social reality. For this, the Universal Declaration of Human Rights must see the ways women distinctively are deprived of human rights as a deprivation of humanity. For the glorious dream of the Universal Declaration to come true, for human rights to be universal, both

the reality it challenges and the standard it sets need to change.”738 In the words of Hillary Rodham Clinton at the United Nations’ Fourth Conference on Women in Beijing in 1995, the time has now come when, “The world must begin to recognize that human rights are women’s rights, and women’s rights are human rights.” 739 If women and girls with HIV/AIDS are understood as the respondents to or recipients of rights, human rights can be described as the goods and services which the human person, who is the subject of rights, enjoys, asserts, or enforces for its own sake.740 Understood this way, human rights serve as “the morality of the depths” that distinguishes basic rights from less expedient moral or legal rights.741 Basic rights serve as fence points as they provide a minimum protection for the powerless and vulnerable groups such women and girls with HIV/AIDS.742 It is imperative that the government enforce and protect the rights of women and girls with HIV/AIDS if it is to be a serious actor on the international stage. More importantly, the citizenship of women and girls of Uganda demands that their rights and dignity be respected. The government of Uganda has a moral responsibility to ensure this becomes a reality, and not mere words on paper.

**Tackling Corruption**

Corruption negatively impacts the basic human rights of people. For example,

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when access to life sustaining services like clean water, food and health care are denied to people, especially to the poor, because public resources have been stolen by those entrusted with the custodianship of public offices, corruption becomes an affront on the dignity and rights of such individuals. It also does harm to the common good and prevents people from fully participating in the life of society, including the enjoyment of goods and services. Moreover, as Lisa Fullam and William O’Neill elaborate, “The basic rights are mutually implicative: denying one imperils all.”

Furthermore, corruption is a form of injustice and affects the development of nations and peoples. According to Human Rights Watch, Uganda:


Corruption is a direct threat to the rule of law and accountability. It is an illegal diversion of available resources away from basic services that are needed to meet the fundamental rights and obligations. The misappropriation of state resources budgeted for public services, including life-saving treatment or infrastructure projects to deliver clean water, negatively impacts the realization of the right to health. Unplanned or off-budget expenditure used for patronage spending seriously undermines government obligations to protect and fulfill human rights by diverting money from essential government services such as health and education, causing consistent and dire underfunding of these sectors.

It is precisely because of the above adverse effects that the Second African Synod in Proposition 54 deplored corruption in public life and banking; and made a plea to people of integrity in Africa and abroad to investigate, recover and return the funds stolen from poor African nations.

Corruption at its core is a form of social sin and a human rights violation because

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744 Human Rights Watch, *Letting the Big Fish Swim Free*, 17-18.

the poor are compelled to pay bribes for the very services they should be receiving without charge. It is imperative that the government of Uganda cultivate the political will to fight corruption. Corruption can easily end, but this will require concerted efforts. According to Professor Jane Onsongo, the political will to fight against corruption can be strengthened by an independent and vocal press to investigate and expose corruption cases and mobilize public opinion; a vibrant civil society that recognizes the value of reform, effectively checks political leaders’ abuse of power and challenges the status quo; good governance that focuses on the provision of goods and services; increased public education and raising awareness; an active private sector that is independent and fosters integrity; and independent judicial, legislative and executive branches with appropriate power for checks and balances.\footnote{Jane Onsongo, “Political Will and the Fight against Corruption in Kenya,” In Corruption in Africa: A Threat to Justice and Sustainable Peace, edited by Elizabeth Nduku and John Tenamwenye (Geneva, Switzerland: Globethics.net International Secretariat, 2014), 96-98; Available at Globethics.net.} In addition, donors need to develop more stringent accountability policies and more goal-oriented and tailored developmental projects for the foreign aid given to developing countries.

**International Community**

HIV/AIDS is a global problem, and as such, it requires a global response to tackle the transmission and prevention, and to find a cure. Given the devastating effects of HIV/AIDS on the dignity, life, and human rights of mostly the poor in the Southern Hemisphere of the world, the international community has a profound role to play in this. We will now examine the goals of the international community.
Short-Term Goals

Commitment to Funding HIV/AIDS Programs

Kofi Annan, the former Secretary General of the United Nations once remarked:

In the war against HIV/AIDS, there is no us and them, no developed and developing countries, no rich and poor—only a common enemy that knows no frontiers and threatens all peoples. But we must remember that while HIV/AIDS affects both the rich and poor, the poor are much more vulnerable to infection, and much less able to cope with the disease once infected.747

Given the fact that the poor suffer a particular vulnerability to HIV/AIDS, the rich and more resourceful nations will need to collaborate and cooperate with the poor ones in the spirit of solidarity and interdependence to prevent transmission, find vaccines and work closely to find a cure for HIV/AIDS. Accomplishing this requires a commitment on the part of the international community to fund HIV/AIDS programs. The poor in developing nations should not be abandoned to the HIV/AIDS pandemic. The AVERT Organization points out that:

Recent years have seen a regression. Donor funding for the HIV response in low- and middle-income countries declined by 7% between 2015 and 2016. This continuing trend of disinvestment towards the global HIV response follows several years of flat-line funding since the economic crisis hit in 2008 and global aid budgets began to constrain. Competing funding demands such as humanitarian emergencies and refugee crises combined with ongoing fiscal austerity in many countries has meant a reduction in funds made available for the global HIV response.748

The AVERT Organization goes on to explain that, “In order to make significant progress, the investments to reach the end of AIDS as a global public health threat by

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2030 need to be increased and front-loaded during the next four years or we will drown with increasing costs.” Although organizations such as The President’s Emergency Plan for AIDS Relief (PEPFAR), USA; the Global Fund in the Fight Against AIDS, Tuberculosis and Malaria (GFATM); the European Commission, and RED have all played major roles in fund raising, prevention, advocacy, and provision of antiretroviral therapies, the recent cuts in funds for HIV/AIDS programs in developed nations because of the recent economic recessions and inward-looking policies by some threatens to derail the progress that has been made. There is need for collaborative, concerted and sustainable efforts to continue funding for HIV/AIDS initiatives. A commitment to funding HIV/AIDS programs is a form of solidarity with the women and girls of Uganda with AIDS. This solidarity is necessary among individual families, as well as at the national and international communities. It is critical that solidarity be seen at all these levels. Pope John Paul II writes that:

Solidarity is most important on the international level. International interdependence must be transformed into the virtue of solidarity by recognizing that the goods of creation exist to serve the needs of all so that what human industry produces by processing raw materials through human work must serve equally the good of all. Solidarity opposes any form of imperialism or hegemony of the rich and powerful nations over the poor nations. The international system must rest on the foundation of the equality of all peoples and the necessary respect for their legitimate differences. 

Emmanuel Katongole, a Ugandan theologian, likewise explains that beyond the humanitarian intervention through the provision of antiretroviral medications and beyond

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advocacy for distributive justice and inclusion, genuine solidarity is needed:

To call into question the asymmetrical power, the seeing without being seen, the distance that the age of miraculous medicine now institutes and patrols between the West and the rest of us. What AIDS has exposed is not only the urgent need for treatment of the sick bodies of Africans, but the need for healing of the divide between Africa and the rest of the world — between a people whose average life span is 75 and rising and one whose average life span is 45 and falling.  

Solidarity requires that the distances between the West and Africa be closed through more collaboration and cooperation. This collaboration and cooperation can take the form of joint research efforts, provision of antiretroviral medications, vaccines, and more personal interfacing.

**Poverty Reduction**

As noted in Chapter Two, there is a link between poverty and HIV/AIDS. Orobator explains that, “The connection between poverty and HIV/AIDS operates along the lines of mutual reinforcement, the key terms of which are causation and complication; enablement and aggravation; cause and effect.” It is the case that, “HIV/AIDS increases poverty, and poverty increases the risk of HIV infection and the impact of HIV/AIDS on families and communities.” Given the link between poverty and HIV/AIDS and vice versa, it is important for the international community to collaborate in reducing poverty especially in developing nations. It is not a coincidence that HIV/AIDS is more prevalent among developing nations of the global South. Orobator

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explains that people with AIDS constitute a clear manifestation of the poor in Africa, and hence dealing with poverty or HIV/AIDS necessitates tackling the other.\textsuperscript{754} In \textit{Evangelium Gaudium}, Pope Francis challenges both the national and international communities to categorically denounce and say, “No to an economy that excludes; no to the new idolatry of money; no to a financial system which rules rather than serves; and no to the inequality which spawns violence.”\textsuperscript{755} The need to address issues of poverty becomes more urgent when it comes to women and girls who in the words of Pope Francis are doubly poor due to exclusion, mistreatment and violence.\textsuperscript{756} Similarly, the second African Synod in Proposition 54, “calls on industrialized countries to promote real growth on the [African] continent by paying fair and stable prices for the raw materials.”\textsuperscript{757}

In light of the ethical framework of solidarity, theologians Zalot and Guevin argue that:

For any corporate action to be considered ethical, those who are charged with its planning, formulation, and execution must look beyond the fiduciary responsibility they have to their shareholders and judge to the best of their ability how the proposed action will both respect the dignity of others and promote the societal common good. Stated differently, corporate actions must be expressions of social solidarity.\textsuperscript{758}

In other words, corporate businesses must avoid greed and profiteering at the expense of


\textsuperscript{755} Pope Francis, \textit{The Joy of the Gospel}, nos. 53-60.

\textsuperscript{756} Ibid., no. 212.


\textsuperscript{758} Zalot and Benedict Guevin, O.S.B., \textit{Catholic Ethics in Today’s World, Revised Edition}, 85-86.
the common good and the marginalized people of our world. Theologian Peter Henriot challenges the world community to do, “Economics as if people mattered…. The first and fundamental question to ask in any planning and evaluation is ‘what is happening to the people, and not what is happening to the economy?’”  

Catholic Social Teaching demands that an economy should be for the overall growth of the quality of human life and should be measured “Not by what it produces but whether it protects or undermines the dignity of the human person.” Pope Paul VI, similarly, emphasized that for development to be authentic, “it must be complete: integral, that is, it has to promote the good of every person and of the whole person.” Similarly, CST “calls for a preferential option for the poor and solidarity with the poor, where we put the needs of the poor and the vulnerable first.”

Poverty can be reduced. However, the scandal of poverty will require the international community to work together. There has to be cooperation, collaboration, and collective efforts in solidarity, for the sake of the common good of the entire human family, while paying particular attention to the basic needs of the poor and most neglected.

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762 Pope Paul VI, Populorum Progressio, no. 14.


764 Pontifical Council for Justice and Peace, Compendium of the Social Doctrine of the Church,
Debt Relief

Debt and debt servicing is one of the hindrances to development in developing countries. Owing to large debts, many developing countries like Uganda, find it difficult to allocate resources for guaranteeing basic necessities to the citizens and especially the poor. Developing countries are perpetually indebted to the developed ones because of the large debts they owe and have to service. According to the Ugandan newspaper, *New Vision*, Uganda has a debt of $8.7 billion United States Dollars which accounts for 33.8% of its Gross Domestic Product (GDP). 765

The Compendium of Social Doctrine of the Church spells out that:

The right to development must be taken into account when considering questions related to the debt crisis of many poor countries. Complex causes of various types lie at the origin of the debt crisis. At the international level there are fluctuation of exchange rates; financial speculation and economic neocolonialism; within individual debtor countries, there is corruption, poor administration of public monies or improper utilization of loans received. 766

The Compendium of Social Doctrine of the Church goes on to state that the suffering brought about by the debt crisis can be traced back to structural questions and personal behavior of individuals. However, what is most alarming is the fact that the debt crisis disproportionately affects the poor and hence there is a moral obligation to pay attention to the debt crisis. While debt repayment is a genuine concern, it is necessary that attention be given to the poor’s fundamental rights to subsistence and progress. 767

193-194.


767 Ibid.
his Apostolic Letter *Novo Millennio Ineunte*, Pope John Paul II, writes:

The question of multilateral debt contracted by poorer countries with international financial organizations has shown itself to be a rather more problematic issue. It is to be hoped that the member States of these organizations, especially those that have greater decisional powers, will succeed in reaching the necessary consensus in order to arrive at a rapid solution to this question on which the progress of many countries depends, with grave consequences for the economy and the living conditions of so many people.\(^\text{768}\)

The Catholic Bishops of the United States also challenge the rich nations to forgive the debts of poor nations on the basis of three major reasons:

First, the burden of the external debt of the poorest countries is crushing the lives and dignity of vulnerable children, women, and men. In most cases, those who bear the burden of repaying the debt had no voice in the decision to borrow and did not benefit from it; in some cases, the borrowed funds were wasted, used for extravagant activities, or even stolen by unprincipled officials. Second, debt is symptomatic of a larger unfinished agenda of this century: the problem of underdevelopment in so many parts of our world. The debt crisis is one critical aspect of a much wider problem of development that must be addressed if large segments of the world's population are to avoid a future of marginalization, despair, and hopelessness. Third, the coming of the Great Jubilee in 2000 offers us a time to make new beginnings and to right old wrongs.\(^\text{769}\)

The Bishops argue that the basis of their concern is the dignity and life of the human persons, particularly the poor and vulnerable, who end up bearing the greater burden of foreign debts. In the terms of the common good:

A moral assessment of debt policies, therefore, must include the extent to which the debt burden undermines the ability of governments to fulfill their obligation to promote the common good, forcing them to spend their scarce resources on debt service rather than on critical investments in health, education, or clean water. Debt policies cannot be judged solely in terms of their impact on individual countries or institutions but must take into account the interests and needs of all

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those affected by debt, at home and abroad.\textsuperscript{770}

In the context of the theological framework of solidarity:

Solidarity also calls for co-responsibility on the part of debtors and creditors in finding fair and workable solutions to this crisis, as part of a broader commitment to protect human life and respect human dignity. They are co-responsible not because they share the blame for the debt crisis, though that is often the case, but because solidarity demands that those who have a capacity to resolve the crisis work together to find a just and effective solution. The failure to do so is not only a technical or political mistake, but also a failure of solidarity.\textsuperscript{771}

In the framework of the option for the poor:

The option for the poor calls attention to the condition of those in debtor nations who had no voice in contracting the debts and who by and large derived no benefit from them but whose lives are often negatively affected by the choices made in resolving the debt problem. By assisting those who are most vulnerable, those animated by an option for the poor strengthen the entire community, becoming a true expression of solidarity.\textsuperscript{772}

It is from this perspective that we argue for the need to cancel or forgive the debts of developing nation since foreign debt inordinately impacts more the poor and vulnerable.

\textit{Ensuring that Ethical Norms Guide Research and Trial Vaccines}

Since the emergence of HIV/AIDS in the world, Uganda is one of the few countries in Africa that have partnered with and participated in the vaccine trials for both HIV/AIDS and Ebola. Makerere University has collaborated with the United States Military HIV Research Program (MUWRP) since 1998 and expanded its portfolio in


\textsuperscript{771} Ibid.

\textsuperscript{772} Ibid.
Although this initiative is noteworthy as the international community searches for a vaccine and cure to AIDS, a few salient points need to be mentioned.

Apart from ensuring the developing countries benefit from such research, sharing of information, and modern technology, since these vaccine trials involve human subjects, it is important that three basic ethical principles guide such initiatives:

First, there is need to respect the human subjects or persons involved. The respect for persons entails:

(a) Respect for autonomy, which requires that those who are capable of deliberation about their personal choices should be treated with respect for their capacity for self-determination; and
(b) Protection of persons with impaired or diminished autonomy, which requires that those who are dependent or vulnerable be afforded security against harm or abuse.

It is important that no human person be taken advantage of by being forced to receive trial vaccines. Human subjects must of their own initiative and volition give in to such initiatives, having been educated about the benefits and risks involved. The fact that one is HIV-positive does not mean loss of one’s dignity. Human persons must always be treated with dignity and respect. This includes giving informed consent. In the same vein, care must be taken to ensure that the benefits accruing from research outweigh the harms and wrongs. The principle of beneficence requires that “the risks of research be reasonable in the light of the expected benefits, that the research design be sound, and that the investigators be competent both to conduct the research and to safeguard the

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welfare of the research subjects.\textsuperscript{775}

The principle of justice demands that each person be treated with dignity. In other
words, in the ethical research involving human subjects, distributive justice should be the
guiding norm. Distributive justice requires equitable distribution of burdens as well as
benefits.\textsuperscript{776} As the international community searches for a viable solution to the scourge
of HIV/AIDS, it is important to keep these ethical norms in mind and that care be taken
to avoid taking advantage of people in developing countries like Uganda. Also, for such
research partnerships to be worthy, the countries and people where the trials are
conducted need to benefit from such efforts in terms of medicines or financial
compensation.

\textbf{Non-Governmental Organizations (NGOs)}

NGOs have become instrumental in the fights against HIV/AIDS. Beyond the role
the Catholic Church and other churches play in the education, advocacy and prevention,
and offering of treatments, the role of NGOS is second to none. NGOs have been and
continue to be instrumental in the fight against HIV/AIDS.

\textit{Short-Term Goal}

\textit{Forming Support Networks}

The NGOs should help HIV-positive people to form networks and share their
experience. These networks can serve as a source of support to share stories, struggles,
and to provide space for them as moral agents to be part of the solution to the HIV/AIDS

\textsuperscript{775} Council for International Organizations of Medical Sciences (CIOMS) in Collaboration with
World Health Organization (WHO), International Ethical Guidelines for Biomedical Research Involving
and LeRoy Walters (United States: Thomson Wadsworth, 2003), 359.

\textsuperscript{776} Ibid.
pandemic.

These networks can be forged nationally as well as internationally. These networks or partnerships can serve as forums for exchanging ideas on preventions, treatment options, counseling, advocacy and formation of long-term friendships among HIV-positive persons, their families and supporters. These networks can further be facilitated by modern means of communications today such as cellular phones, apps and social media platforms.

Mid-Term and Long-Term Goals

*Universal Access to Antiretroviral Therapies and Mobilization of Funds to Finance HIV/AIDS Programs*

Since most of the NGOs have international connections, they can serve as advocates for the provisions of urgently-needed medications. By doing this, NGOs “offer a slim hope that globalization may indeed have a human face.” By working with pharmaceutical companies to provide generic drugs to the AIDS patients, NGOs serve as strong advocates for sero-positive peoples.

NGOs have also played a major role in mobilizing funds for HIV/AIDS programs. This needs to be continued particularly in the context of Uganda and many African countries since the major source of funding is external. NGOs can serve as ambassadors of goodwill in advocating for the much-needed funds in the fight against HIV/AIDS.

*Collaboration with Churches to Eliminate Harmful Practices such as Domestic and Sexual Violence and Female Genital Mutilation*

Non-governmental organizations should collaborate with churches to eliminate

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777 Bongmba, *Facing a Pandemic, the African Church and the Crisis of AIDS*, 165.
harmful practices including domestic violence and female genital mutilation. It is a known fact that in some Ugandan homes, domestic violence is a major concern affecting families. It particularly affects women. However, children and men are not spared either. Whatever the reasons for domestic and sexual violence within families and marriages, it must be stated unequivocally that violence of any sort is contradictory to God’s plan for marriages and families. It is an evil that harms and wounds many marriages and families. Pope Francis points out that, “The strength of the family ‘lies in its capacity to love and to teach how to love.” The Pope goes on to explain that, “The verbal, physical and sexual violence that women endure in some marriages contradicts the very nature of conjugal love.”

In the same light, Pope Francis points out that practices such as genital mutilation, the lack of equal access to dignified work and roles in decision-making, the exploitation and commercialization of the female body in the current media culture, and consideration of women as inferior due to patriarchy— are all burdens that women in general have endured and continue to endure.

Given the untold suffering that violence and the above mentioned practices cause to women in societies like Uganda, it is critical that NGOs work together with churches to educate, sensitize and commit resources to eliminating these harmful practices. For example, Trocaire, Irish Aid and the Uganda Episcopal Conference with the theme “Raising Voices; No longer Silent” have been collaborating and coordinating to run a

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779 Ibid., no. 54.

780 Ibid., no. 53.
campaign against domestic violence since 2008. The Campaign dubbed “Shared decisions, shared development, shared happiness” has been a joint effort between the Uganda Episcopal Conference, the umbrella arm of all Catholic Bishops in Uganda and Trocaire, Irish Aid to bring the issue of domestic violence in the Uganda Society to the center and to the preaching of the Gospel.

The intention of NGOs and churches should be to raise awareness about these pertinent issues of violence, female genital mutilation, and early and forced marriages and so forth; to support and empower victims; and lastly, to take action, by advocating for passage and enactment of laws to criminalize harmful practices. The programs initiated by NGOs in conjunction with churches need to be well-planned, sustainable and long lasting so as to be impactful on the Ugandan society.

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CONCLUSION

In Chapter One, we explored the gendered vulnerability of women and girls to HIV/AIDS at the global, continental and local levels. We paid particular attention to the vulnerability of women and girls to HIV/AIDS in Uganda.

In Chapter Two, we analyzed the persistent causes or factors that are responsible for the particular vulnerability of women and girls to HIV/AIDS in Uganda and assessed the accomplishments and missing links by the various social actors (the Catholic Church in Uganda, the State, women and girls with HIV/AIDS, the men and boys, and non-government organizations) in addressing the HIV/AIDS pandemic.

In Chapter Three, we looked at the lessons CST offers in addressing the HIV/AIDS pandemic. We specifically argued for a theological framework of a rights-based solidarity as one of the best ways for tackling the HIV/AIDS pandemic.

In the Fourth and final Chapter, we offered short-, middle-, and long-term proposals/policies for a life-giving and life-enhancing theology for women and girls with HIV/AIDS in Uganda.

In this dissertation, we have argued that as long as HIV/AIDS affects women and girls who are part of the membership of the Church, the Church cannot take solace and call itself holy and whole while some of her children are sick and dying from this lethal virus. The Church needs to engage theologically and find meaningful ways to address this deadly pandemic. In the Fourth Chapter, we demonstrated in details some of the ways the Church can do this.

Furthermore, we also observed that HIV/AIDS goes beyond the question of personal behavior. There are social, economic, cultural and political factors that work
together to render women and girls in Uganda vulnerable to HIV/AIDS. Any meaningful solution needs to pay attention to these factors. Similarly, as long as women and girls have been denied their rights and participation in society, the dignity of women and girls challenges us as a Ugandan society and global community to right the violations that have long been directed at women and girls. The social nature of human persons challenges us to leave no member of the human family by the wayside. Rather, like the Good Samaritan (Lk. 10: 30-37) and in the spirit of solidarity, we have the moral responsibility to bring the women and girls of Uganda who have fallen by the roadside into the mainstream; and in this way, allow the vulnerable to participate and contribute to the common good. The option for the poor calls upon us to look at particular ways in which women and girls have been rendered vulnerable to HIV/AIDS.

The story of HIV/AIDS among women and girls in Uganda is more than a single story of infection and death. It is also a story of transformation and resilience on the part of women and girls. As demonstrated in Chapter 2, many of the women with HIV/AIDS have founded organizations that today care for women and girls living with HIV/AIDS and AIDS orphans, and have formed support groups. In this sense, women and girls with HIV/AIDS bring us hope. By supporting one another, they act as examples of genuine solidarity for all Ugandans and the people of the world. In the midst of prolonged pain, suffering and death, these women and girls act as beckons of life and hope; in the midst of darkness, they serve as instruments of light and faith. Their example is worthy of imitation.

In a similar manner, the particular vulnerability of women and girls in Uganda challenges us to find new ways to address what has apparently been lacking: namely, the
ascription of human dignity and rights to all men and women; but which has often not translated into attributing the same dignity and rights to women and girls in many of our societies and in the global community. If human dignity and human rights are moral categories attributed to all persons, then, nothing less can be expected when it comes to women and girls. The systematic deprivation of the rights of women and girls due to poverty, gender discrimination, stigmatization, violence in homes and conflicts areas, corruption, cultural practices and traditions such female genital mutilation, denial of education opportunities and access to health care, and ownership of property – all challenge us as a Uganda society to seek new ways of being a caring and compassionate society and Church; and to be a society and Church that respects and promotes the fundamental dignity, rights, and liberty of all Ugandans, women included.

David Hollenbach is right in observing that, “The promotion of human rights and women’s rights will require practical wisdom based on experience and prudential choice guided by the spirit of solidarity,” since “true solidarity involves mutual recognition of the equal personhood of all.” It is this mutual recognition of the rights and dignity of all persons that challenges all of us to create the conditions or capacities that are necessary for the exercise of agency, development and capabilities of women and girls and all people. To turn this vision into a reality, the Ugandan government and Church, and the international community have to work together to restore the dignity and rights of women and girls and all people. There is a need for us to live in solidarity with one

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783 Clark, The Vision of Catholic Social Thought: The Virtue of Solidarity and the Praxis of Human Rights, 30.
another knowing that we belong to one family of humanity. In this family, we are especially obligated to care for the weak, the sick, the poor and the most vulnerable. To be keepers and defenders of one another especially of the most vulnerable members of our human society is a task worthy of all our efforts and endeavors.

Lastly, as part of the future questions for exploration, the proposals made in this work will need to be tested. There is need to develop strategies for implementation of the proposals/policies contained in this dissertation. Furthermore, this work for the most part is theological in nature. An empirical and sociological based study of the HIV/AIDS pandemic in Uganda would be a great compliment to this work.


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