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**Report to XVIII General Assembly
Of Caritas Internationalis (CI)**

Action in Response to the HIV Pandemic 2003-2007



The HIV Pandemic: A Truly “Exceptional” Human Crisis

In June 2006, when opening the United Nations High Level Meeting to assess the global response to the pandemic of HIV, then-Secretary General Kofi Annan said:

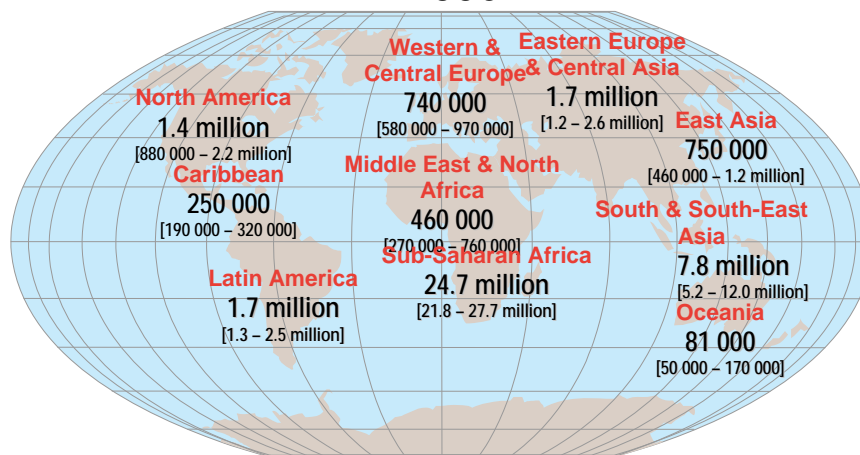
It is 25 years ago ... that the world first heard of HIV/AIDS. Looking back, that age of innocence -- if I may put it that way -- seems to belong not only in a different time, but in a different world.

Since then, HIV/AIDS has unfolded along a pattern we tend to see only in nightmares. It has spread further, faster and with more catastrophic long-term effects than any other disease. Its impact has become a devastating obstacle to the progress of humankind. In 25 short years, HIV/AIDS has gone from local obscurity to global emergency.

It took the world far too long to wake up. Denial dogged the response to AIDS. Millions paid with their lives.¹

¹ UN Secretary-General Kofi Annan, Opening Address to U.N. General Assembly High-level Meeting on AIDS, on 31 May 2006.

Adults and children estimated to be living with HIV, 2006



Total: 39.5 (34.1 – 47.1) million

The frightening dimensions and impact of the HIV pandemic on the human family include the following trends:

- According to estimates released by UNAIDS, the Joint Co-Sponsored Programme of the United Nations mandated to coordinate the global response to the HIV pandemic, some 39.5 million people worldwide were living with the virus at the end of 2006, some 4.3 million people became newly infected during that year, and some 2.9 million people lost their lives to AIDS-related illnesses during that same year.²
- With some 11,000 new infections each day in 2006, the greatest burden of HIV was felt in developing countries. This illness strikes most at younger people, with women carrying at least (and sometimes more than) 50% of the HIV burden in many parts of the world.
- Sub-Saharan Africa remains the worst-affected region in the world. A little more than one-tenth of the world's population lives in this area, yet it is "home" to almost 64% of all people living with HIV. Three-quarters of all HIV-positive women (15 years of age and older) live in sub-Saharan Africa. When compared with men, women in this region are disproportionately affected by AIDS; this seems to be living – and dying – proof of the highly unequal socioeconomic status of women in many of the concerned countries.³
- The major impact of the epidemic seems to be arriving later in Asia and the Pacific Islands. However, public health experts are deeply concerned about some emerging trends there. HIV prevalence is increasing in China, Indonesia, Papua New Guinea, and

² *Report on the Global AIDS epidemic: A UNAIDS 10th Anniversary Special Edition*, Geneva: UNAIDS, 2006, p.8.

³ *Ibid.*, p. 9

- Vietnam, and there are signs of new outbreaks in Bangladesh and Pakistan.⁴
- Eastern and Central Europe also give cause for serious concern. The majority of people living with HIV in this region can be found in two countries: the Ukraine, where the number of new HIV diagnoses increases each year, and the Russian Federation, which has the largest HIV epidemic in all of Europe. More recent epidemics are emerging in Kazakhstan, Tajikistan, and Uzbekistan.⁵
 - The HIV situation in the Caribbean has made this region the second most affected in the world. In Latin America and the Caribbean, as in many other places, this epidemic is strongly related to deep poverty and gender inequality.⁶
 - In the Middle East and North Africa, except for Sudan, national HIV prevalence is quite low and does not exceed 0.2%. However, available data indicate that epidemics are growing in several countries, including Algeria, Islamic Republic of Iran, Libya, and Morocco.⁷
 - In high income countries, such as the United States of America, Canada, and some countries of Europe and Oceania, HIV-infected people are living longer, and many are able to maintain a higher quality of life due to the availability and use of combination anti-retroviral medications. However, more women are becoming infected in these countries, as are people of colour and other marginalized and poor people.⁸

For some engaged in Caritas activities, the above-mentioned trends may seem little different from a host of other health and social crises which call for coordinated response by the Catholic Church and other people of good will. During a speech at the London School of Economics, however, Dr. Peter Piot, Executive Director of UNAIDS, explained why HIV is an “exceptional” pandemic:

*This pandemic is exceptional because there is no plateau in sight, exceptional because of the severity and longevity of its impact, and exceptional because of the special challenges it poses to effective public action.*⁹

⁴ *Ibid.*, p. 9.

⁵ *Ibid.*, p. 34.

⁶ *Ibid.*, p. 38.

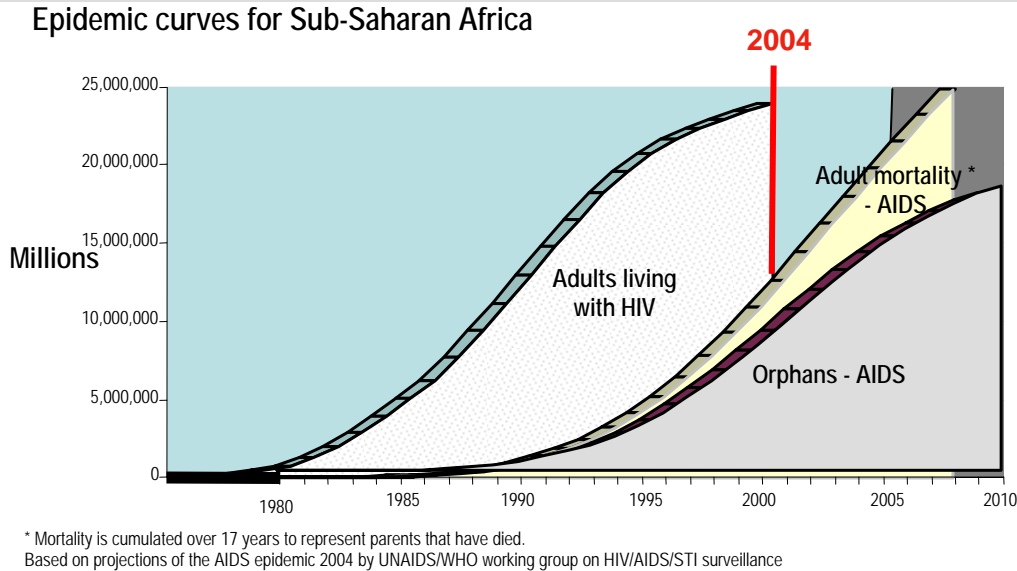
⁷ *Ibid.*, pp. 48f and presentation by UNAIDS representative to Caritas MONA Workshop, Alexandria, Egypt, 6 February 2007.

⁸ *Ibid.*, pp. 45-47.

⁹ Dr. Peter Piot, “Why AIDS is Exceptional”, speech given at the London School of Economics, 8 February 2005, www.unaids.org

The worst is yet to come

The number of orphans will rise even after the number of adults infected levels off or declines



It is necessary to move beyond numbers, however, in order to take into account the “human face” of HIV. This disease has caused untold physical, emotional, and spiritual pain and loss, resulted in premature loss of life and skills, disrupted family integrity and harmony, exacerbated poverty, and produced increasing disrespect for human rights. In efforts to halt the dissemination of this global emergency, it is necessary to delve even more deeply - to the roots of the HIV disease cycle – to the social, economic, cultural, and gender issues which cause people to be vulnerable to infection with, or prone to transmitting the virus to others. Such urgent efforts seem to be in full conformity with the theme of the Caritas Internationalis 18th General Assembly, **“Witnesses of charity, builders of peace”**.

The Caritas Response to the HIV – One of Foresight and Long-Term Commitment

During their General Assembly in 1987, the member organisations of Caritas Internationalis identified the HIV pandemic as a concern for prioritized reflection and action in their Confederation Work Plan. At each subsequent CI General Assembly, the HIV pandemic has warranted similar attention and commitment.

The Caritas response to HIV and AIDS is grounded in the traditional teaching of the Catholic Church which mandates the Catholic faithful and Church-related institutions and agencies to read the “signs of the times” in order to accompany the most vulnerable and marginalized persons found in contemporary society. This doctrinal foundation has inspired and facilitated the Caritas’ ability to develop creative HIV and AIDS programming which remain faithful to the Church’s *magisterium*. Such programmes have been enhanced through partnerships with a wide range of Catholic, other faith-based, and non-governmental organisations, as well as with governmental and inter-governmental structures.

The first partnering task to be faced by Caritas Internationalis was within its own membership. A strategic and ongoing programme of education about HIV and AIDS was undertaken through global, regional, national, and local seminars. The target audience for these educational programmes were the bishops who, in most cases, served as the presidents and other officers in the Caritas organisations as well as the professional staff and volunteers who designed and managed the programmes. Also included in these seminars were participants who came from other Catholic Church-related agencies and structures that were not officially part of Caritas in the respective countries, such as clergy, religious, and lay pastoral workers as well as those working in health care institutions, family life ministries, schools and catechetical programmes, and youth ministry.

Caritas has reached far beyond its usual partners in order to promote an effective response to HIV and AIDS. In order to animate greater solidarity with people living with or otherwise affected by HIV and AIDS, CI convened a network of Catholic development, humanitarian, and pastoral agencies from Europe, North America, Australia, and New Zealand, that has been meeting regularly as the AIDS Funding Network Group (AFNG) since 1992 and that recently re-named itself as Catholic HIV/AIDS Network (CHAN). This group regularly reviews trends in the pandemic to be aware of emerging needs for support by Catholic agencies in low- and middle-income countries. Together with their partners in the South, the AFNG developed principles, guidelines, and funding criteria in order to encourage holistic HIV programming.

In its advocacy with the Specialised Agencies of the United Nations, Caritas enjoys excellent partnership with UNAIDS. Perhaps the best evidence of this cooperation can be found in the Memorandum of Understanding between UNAIDS and Caritas Internationalis which was first signed in 1999 and then renewed in 2003. Areas of joint work include promotion of:

- Education to facilitate HIV and AIDS awareness and responsible behaviour, particularly among young people;
- Activities to mitigate the social and economic impact of the epidemic;
- Advocacy in line with the UNGASS (United Nations General Assembly Special Session on AIDS – 2001) Declaration of Commitment;
- Efforts to eliminate all forms of discrimination and stigmatisation of persons living with and affected by HIV and AIDS.

Thus Caritas Internationalis has contributed significantly to the global response to HIV in the following ways:

- by disseminating information and educational opportunities about HIV and AIDS among its member organizations and other Church structures in all parts of the world;
- by promoting solidarity in support of HIV care, support, treatment, and prevention programmes sponsored by Caritas and other Catholic structures in developing countries;
- by advocating on the global, national, and local levels for a more comprehensive laws and policies to assure full access to care, treatment, support and education among those living with and/or affected by the pandemic;
- by discouraging stigma and discrimination and encouraging compassionate, non-judgmental care and attention toward those who directly know the impact of HIV.

Caritas Maintained its Response to HIV and AIDS during its 2003-2007 Mandate

At its 2003 General Assembly, Caritas Internationalis recommended strengthening the Confederation's response to the HIV pandemic at regional and national levels and intensifying its advocacy role in this field at the level of the United Nations agencies and other international organisations engaged in HIV work. Following this Assembly, the CI Secretary General established a full-time consultant post of Special Advisor on HIV and AIDS, to be based in Geneva, Switzerland, and invited Fr. Robert J. Vitillo, former staff member of the CI General Secretariat, to accept this post. During the past several years, in collaboration with global, regional, and national Caritas structures, the CI Special Advisor on HIV and AIDS has undertaken actions, including the following:

- maintains frequent contacts with officials of UN and other international agencies responding to the HIV pandemic;
- serves as co-convener of the HIV Strategy Group for the Ecumenical Advocacy Alliance;
- facilitates training workshops for Caritas regional structures and national member organisations and assists other Catholic organisations with similar programmes;
- consults with the Pontifical Council on Health Pastoral Care, the Council of Latin American Episcopal Conferences, and the Symposium of Episcopal Conferences of Africa and Madagascar, and various national episcopal conferences;
- assists the Unions of Superiors General of Catholic religious orders with a mapping exercise of HIV activities undertaken by their respective orders (NOTE: this exercise is proceeding in close collaboration with UNAIDS and WHO);
- assists the Permanent Observer of the Holy See to the United Nations and Specialised Agencies in Geneva in following HIV-related and health-related issues at UNAIDS, WHO, and other international fora;
- served on Holy See Delegations to UN Special Session on AIDS (2006), World Health Assembly, UNAIDS Programme Coordinating Board, and High Level Meeting on HIV Impact on Women and Girls;
- served on the UNAIDS Global Steering Committee on Universal Access to HIV Care, Support, Treatment, and Prevention;
- served as a consultant to UNAIDS in strengthening relations among the Catholic Church, the UNAIDS Theme Group on AIDS, and the National AIDS Control Programme in the Philippines;
- served on UNAIDS Advisory Group outlining a strategy for "Uniting for Prevention";
- wrote a Best Practice book on the Catholic Church response to HIV in Southern Africa, which was published by UNAIDS in December 2006.



CI Special Advisor on HIV joined Mrs. Nane Annan at U.N. Headquarters to open Ecumenical Advocacy Alliance exhibit to combat HIV-related stigma

During the past four years, the Caritas response to HIV extended far beyond the activities of the CI Special Advisor on HIV and AIDS. This work was integrated into the everyday activities of many Caritas organisations at regional, national, and local levels. Some examples of this integration can be found in the initiatives described below:

- Caritas and other Catholic organisations in Africa assisted SECAM (the Symposium of Episcopal Conferences of Africa and Madagascar) to conduct a special HIV seminar for bishops in conjunction with the SECAM General Assembly held in Dakar in October 2003; the bishops, in turn, prepared a Work Plan on HIV and AIDS for the Catholic Church in Africa.

During their Assembly in June 2005, the bishops of the AMECEA (Association of Member Episcopal Conferences of Eastern Africa) dedicated additional study and reflection time to the pandemic and invited testimony from those engaged in practical action in response to HIV on behalf of Caritas and other Catholic organisations. They also issued a statement entitled, “Called to be a Good Samaritan: Responding to the Challenge of HIV/AIDS in the AMECEA Region.”

As another activity to promote the implementation of the SECAM Plan of Action, the Caritas Regional Secretariat for Africa convened a workshop, held in Lomé, Togo, on 26 February to 2 March 2007, for representatives of zonal coordinators of HIV and AIDS activities as well as representatives of SECAM and other Catholic organisations.

We, Cardinals, Archbishops and Bishops of Africa and Madagascar greet you in faith and with warm affection. Gathered in the 13th Plenary Assembly of our Bishops Conferences of Africa and Madagascar (SECAM), we have taken up the AIDS pandemic

and its horrible consequences. In doing so we have been very close to you, our dear brothers and sisters who are infected and affected by HIV/AIDS and also to you who have been moved to join in the fight against the scourge of AIDS.

... As heads of our Christian communities, we commit ourselves to making available our Church's resources be they our educational and healthcare institutions or social services. We will work closely with all funders who are disposed to support and work with Christian and faith-based organisations. We are open to partnerships with them and others who are happy to put their resources to work in the struggle, and do so knowing well that we work according to our Gospel convictions. For "man does not live by bread alone, but by every word that issues from the mouth of God" (Mt 4: 4).

Source: "Our prayer is Always Full of Hope", SECAM Message, December 2003.

- In August 2004, Caritas and other Catholic organisation representatives, especially those associated with Health Pastoral Care, assisted the CELAM (Council of Episcopal Conferences of Latin America) Office for Justice and Solidarity to propose a Pastoral Strategy in Response to the HIV Epidemic in this region.

In our world that is suffering from HIV/Aids the pandemic has been linked in a complex fashion to structural inequalities, to a lack of respect for human dignity, the vulnerability of human rights and power abuse (in particular in relationships between men and women and regarding those who have been marginalized by society). Conscious of this reality, Caritas and CELAM have presented the need to work more intensely on the issue of HIV/Aids in a unified fashion, identifying needs, capitalizing resources and opportunities.

The priority focus assumed by CELAM has been prevention, both in the health field and in terms of education. As a fundamental methodological criterion, it does not address HIV/Aids in an isolated manner but rather as something integrated with other risk situations such as addictions, family violence, the mistreatment and abuse of children and adolescents.

Source: Pastoral Strategy on HIV and AIDS, CELAM , Office for Justice and Solidarity, December 2005.

In response to this Pastoral Strategy, the CAMEXPA (Central America-Mexico-Panama) Zone of Caritas convened representatives in June 2006, in Honduras, to develop an Action Plan for its respective zone.

- In March 2005, with logistical support from the Medical Mission Institution, in Wurzburg, Germany, representatives of several European Caritas organisations joined with those from other Catholic organisations interested in giving support to Church partners in Eastern and Central Europe in order to better understand and respond to the burgeoning HIV epidemic in this region. Subsequently, Caritas Europa established a Working Group on HIV and AIDS and conducted a seminar on the theme, "Stigma or Solidarity: New Challenges for Church Responses to HIV and AIDS in Europe", on 24-26 April 2007, in Kiev, Ukraine.

We ... have become increasingly aware of the more recent and rapid spread of HIV in the region of Eastern and Central Europe. Thus we are compelled by the demands of the Gospel, by our professional ethics, and by our need to share experience from other parts of the world, to reach out to Church-related and other development partners in Eastern and Central Europe, in order to share our resources in solidarity with them and to build, in partnership with them, a comprehensive approach of HIV prevention education (based upon the values and teaching of the Catholic Church), of treatment for those living with HIV, and of support and development projects for all those affected by the pandemic.

... [We] hope that this “hearing” will move beyond an expansion of our knowledge concerning the situation of HIV and AIDS in Eastern and Central Europe ... [and] will arrive at a practical programme of action ... [in collaboration] with many other Church partners already active in both relief and development projects in the region in order to integrate and mainstream HIV and AIDS work within their ongoing programmes.

Source: Words of Welcome by Fr. Robert J. Vitillo, to participants in Hearing on AIDS in Eastern and Central Europe, March 2005, Wurzburg, Germany.

- In January 2006, with the financial, technical, and logistical assistance of World Health Organisation (WHO), UNAIDS, and International Labour Organisation (ILO), Caritas Internationalis collaborated with the office of the Permanent Observer of the Holy See to the United Nations and Specialised Agencies in Geneva, Archbishop Silvano M. Tomasi, to convene representatives of major Catholic organisations engaged in the HIV response in various parts of the world. The objectives of the meeting included experience sharing among the participants and dialogue with staff of international agencies in order to learn about opportunities for funding and capacity-building, and strategic planning on how best to promote and coordinate “scale up” and replication of Catholic Church-sponsored HIV education, care, support, and treatment programmes.

In his words of welcome, Archbishop Tomasi stated that the meeting represented the type of initiative that the Pope encourages but also reflected the sense of urgency that we feel for a “scaled up” response, and gave evidence within our faith community of a growing awareness that intensified collaboration, communication, outreach and professional capacity are becoming indispensable tools for an efficient response. He thanked Caritas Internationalis for convening this important gathering; for enlisting the active financial support of WHO, UNAIDS and ILO and their expert participation together with other agencies; and for outlining in a clear and concise way the reasons and objectives of the meeting.

Representatives of United Nations and other international organisations, such as the Global Fund to Fight AIDS, Malaria, and Tuberculosis, assured the participants of their appreciation of the Church’s efforts in this field and of their interest in strengthening mutual collaboration in the hope of expanding outreach to people vulnerable to, living with and/or otherwise affected by the pandemic, especially those who are most poor and marginalized and frequently are reached only by faith-based organisations.

The commitment of Caritas Internationalis and of many of its members to those living with HIV and AIDS goes back almost to the sad dawn of the virus ... [We have] helped in ridding [AIDS] of fearful and sinful connotations and insisted that it was a human phenomenon, not just a health or developmental one, and therefore came within the ambit of Caritas activity which is to 'spread social justice and solidarity throughout the world' with the focus on promoting the dignity of the human person and restoring the humanity of those from whom it has been robbed.

Source: Words of Welcome by CI Secretary General, Mr. Duncan MacLaren, at Catholic Organisation Meeting, Geneva, Switzerland, 23 January 2006.

- On 6-10 February 2007, more than 40 participants gathered, in Alexandria, Egypt, in order to study and enhance "The Role of Catholic and other Faith-Based Organizations in Response to the Pandemic of HIV-AIDS in the MONA (Middle East and North Africa) Region". Organized by the Regional Caritas Secretariat for Middle East / North Africa, with the support of Caritas-Egypt, the workshop was attended by practitioners in Caritas and other Catholic organizations from Morocco, Tunisia, Libya, Djibouti, Palestine, Lebanon, Jordan, and Egypt, along with other non-governmental organisation representatives. Also participating were religious leaders from the Coptic Orthodox and Muslim communities, and officials of UNAIDS, of other UN agencies, and of the Egyptian Ministry of Health. Acknowledging the underestimated importance of the issue in the Region, and aware of the great potential of faith-based organizations, participants committed themselves to work together to share experiences and best practices, and to design new perspectives of action. The participants were honoured with the participation of the Patriarch of the Coptic Catholic Church and of the Apostolic Nuncio in Egypt and Holy See Delegate to the Arab League.

After having reflected on the situation of the AIDS pandemic in the world, it is very easy to categorize this problem as impossible to resolve and to feel totally incapable of mobilizing ourselves in response to an emergency with such catastrophic dimensions. However, neither our professionalism or the universal strategies of heads of states all over the world, nor all the financial or economic resources will be sufficient to eliminate this pandemic in our world.

Our response to AIDS should be based on the foundation of our heart (...) as well as that of our consciousness that no human person is capable of eliminating the problem of AIDS without the grace of God (...) who is present in our time and who, consequently, is very sensitive to our sufferings and challenges. But this same God also is eternal and thus has a vision capable of seeing a future world where AIDS no more exists.

(...) God's grace is present amongst us with all its strength and all its dynamism; it also will accompany us to our offices and homes to transform our humble efforts in response to AIDS into effective, supportive actions full of charity and justice capable of improving the situations of our brothers and sisters touched by this pandemic.

Source: Homily of Fr. Robert J. Vitillo, Closing Mass, MONA Workshop on HIV and AIDS, Alexandria Egypt, 10 February 2007.

“Roadmap” for Future Action: Recommendations for the CI 2007-2011 Mandate

The participants in the above-mentioned Geneva meeting of representatives of Catholic organisations with major engagement in the global response to the pandemic of HIV, held in January 2006, offered some strategic recommendations that seem most appropriate for consideration by the delegates to the 18th General Assembly of Caritas Internationalis and, most especially, for integration into 2007-2011 Caritas Work Plans at global, regional, national, and local levels: These included the following:

- Expansion of structure and role of Geneva office of Caritas Internationalis Special Advisor on HIV and AIDS to collect and disseminate information and advocate on behalf of Catholic organisations and structures in addition to those which are member organisations of the Caritas Confederation;
- Commitment to increase opportunities for information and experience exchange among Catholic organisations active in HIV services on local, national, regional and global levels,
- Pursuit of capacity-building and funding opportunities extended through the United Nations and other international agencies;
- Intensification of relationships with ecumenical, interfaith and other civil society organisations responding to the pandemic.

Perhaps the most comprehensive and compelling “roadmap” for Caritas to follow as it maintains its long-term commitment to respond to the HIV pandemic can be found in the urgent appeal and wise counsel offered by our Holy Father Pope Benedict XVI:



Appeal of Pope Benedict XVI for solidarity with those living with infectious diseases



“How can we forget the many people with infectious illnesses forced into segregation, and sometimes marked by a humiliating stigma? The seriousness of these lamentable situations is highlighted by the disparity of social and economic conditions between the North and South of the world. Such situations must be answered with concrete initiatives that favor proximity to the sick, enliven the evangelization of culture, and inspire the social and economic policies of governments.”

Source: “Proximity to People Suffering from Infectious Illnesses,” article on address of Pope Benedict XVI to International Conference organised by the Pontifical Council on Health Care, on the theme “Pastoral Aspects of the Treatment of Infectious Diseases”, 24 November 2007, Vatican Information Service.

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