

World AIDS Day 2011

On Thursday we commemorate World AIDS Day. This annual reminder at the beginning of December recalls our human fragility and susceptibility to disease. In South Africa and other countries on the continent, we remember friends, family, colleagues and acquaintances who are living with the HIV virus, or who have died because they did not receive the necessary treatment. In management- and resource-poor countries like ours, with phenomenal HIV-infection rates, this is an all-too-common reality.

We ask how this year is different to previous years, and why we should continually confront ourselves with this sad aspect of modern life. In the past twelve months the South African Government decided no longer to distribute free formula milk to nursing mothers. Their argument goes that exclusive breastfeeding, even when a mother is HIV-positive, is much better for the health of the baby. The risks to the mother's health are apparently also much reduced if she is breastfeeding. So, after years of the distribution of formula milk, there has been a *volte face* on this policy. What was once deemed necessary for both mother and child has now been shown "in the light of further research" to be detrimental.

The decision might conceivably have been taken on purely medical grounds (although it would be surprising if this were possible.) A doctor-friend of mine, working in the public sector, constantly has to make life-and-death decisions based on cost-effective use of resources in short supply. One wonders what economic and political considerations were influential in coming to the decision to discontinue formula milk. For example, South Africa is now in line with the recommendations of the World Health Organisation.

Pretoria locuta, causa finita. Pretoria has spoken, the matter is closed. Ultimately there is very little we can do about the decision announced by Health Minister Aaron Motsoaledi. The discontinuation of the distribution of formula milk illustrates one aspect of the lives of people dependent on government services: Decisions are made on their behalf, depriving them of their independence and agency, effectively disempowering them. We need to be more sensitive to the desire of people living with HIV or AIDS to be treated as adults who have not lost all of their own decision-making responsibility and power. We must be careful not to de-personalise them, by ignoring them, or treating them as invisible, or not consulting them on matters concerning their own health, welfare and social integration.

Thus, as we reflect on World AIDS Day this year, we are challenged in our attitude to *all* people who suffer *all* sorts of sickness. In a prevailing culture that promotes and glorifies the body beautiful, youth and vitality, we shy away from the realities of ageing, illness and death. Often our inclination is to look the other way. We are uncomfortable in the presence of people who are not strong or healthy. As a result of our avoidance of their realities, our neglecting to visit them at home or in hospital, our less-and-less frequent phonecalls, Twitters and e-mails, sometimes ill people suffer a “social death” long before their actual death. We need to focus on the whole person and not the illness, to recall the graces that person is receiving, rather than their receding capacities.

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