

AIDS And You Contents

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No one dies solely of AIDS

AIDS is a condition when a particular virus has weakened your body so other germs can invade and kill you. That's what the name 'AIDS' means: your body is usually very good at destroying germs. We call this immunity. When your immune defences are badly damaged, we say you are suffering from an immune deficiency. Some people are born with bad immune systems and others acquire a deficiency because of a disease. Because AIDS is acquired through an infection, we call it the Acquired Immune Deficiency Syndrome (AIDS for short).

HIV just stands for Human Immune-deficiency Virus, which is the scientific name for the virus which causes AIDS.

Whatever names we use, one thing is important and that is to realise that there are stages from being infected, where a person is an infectious carrier but well, through to early symptoms, and then finally to more severe illness or death. The process takes years. It is totally impossible to tell by appearances who is infectious and who is not.

What is a virus?

A virus is just like a robot or a computer program. It simply contains some written directions to

teach cells in your body how to make more viruses. A virus is made up of a bag of protein with a small strip of genetic code inside it. This is like the code that makes your hair brown, your nose short and your ears the shape they are. Everything inside you is programmed by these genes, and amazingly almost every cell in your body has inside it all the instructions to make a complete carbon copy of you!

The code inside the virus only contains one or two instructions, but wrong ones. If the virus sticks for more than a moment onto the outside of a special type of white blood cell, the virus bursts like a tiny bubble, squirting the lethal code into the cell. Within a few minutes the cell has taken a copy inside the cell brain (nucleus) and the cell brain has been permanently reprogrammed. This cell is doomed.

Killing off the soldier cells

For a few weeks or months, or even for a few years, the infected soldier cell keeps floating around in the blood, or swimming between the tissues of your body. The cell has one aim in life: locate and destroy germs. There are hundreds of different germs and each kind of white cell is designed to attack one kind of germ.

Why you get ill

Only certain kinds of soldier cells get attacked by the virus, but as they get fewer and fewer it gets harder and harder for your body to kill certain germs. You are fine with ordinary coughs and colds. Most common germs are quickly destroyed, but one or two just keep on growing. The result is a strange chest infection, TB or other illnesses.

When a soldier cell meets the right shaped germ it springs into action. After being sleepy for years it works overtime to help produce antibodies. These fit exactly onto the outside of the germ and destroy it. But if the cell has been reprogrammed, the mechanism gets jammed. The new program jumps into action and tells the cell to stop helping to make antibodies. Instead it starts to make new viruses. The cell gets sicker as it gets larger. Eventually it bursts, showering millions more virus particles into the blood. Each one stays in the blood for only a few minutes before it touches a fresh healthy white cell, bursts, injects the code and re-programmes new cells-soldier cells and brain cells, for example. After a while the body is

weakened and other infections start to take over.

Some of these infections simply cause you to feel run down or to lose weight, but the chest infections can kill and are very hard to treat. No one dies solely of AIDS. You die largely because of the other infections that take over your body when your defences are damaged, or from cancers related to HIV. TB is a common killer of people with advanced HIV infection.

Newsflash on Cures, Vaccines and Condoms

Almost every week it seems we read or hear about some new wonder cure for AIDS. They say someone has already found a vaccine, and they also tell us how sex is safe if you use a condom. These things are good news if they are true - but are they? Some say that if you have sex with a virgin you will be cured. Nonsense. It is amazing what people will believe.

A lot of what you read and hear is rubbish. If it was as easy as some people make out to find a cure, or if a good vaccine really had been found, doctors, nurses, hospitals and governments could stop worrying. The reason why there is so much fuss about preventing the spread of infection is because the truth is that there is no cure, nor is there one anywhere in sight. There is no vaccine that works, nor is there likely to be one for at least ten years. To make it worse, condoms are much less safe than some people think they are.

I hope that soon we will have a drug that kills viruses and is safe. When that happens, we will have a cure for flu, the common cold, polio, hepatitis, herpes and many other illnesses such as glandular fever; as well as a cure for AIDS. At the moment it is a long way off.

At the moment we don't have the technology to do it. Making a cure will involve us inventing some amazing tools that will allow us to work inside individual cells in the body. Landing a man on the moon or even on Mars is very simple compared to the skills needed to find a cure. The person who finds a cure will go down in history books as one of the greatest inventors of all time. Books will be written about him or her well into the twenty-second century.

In the meantime you will read of hundreds of false 'cures'. The trouble with AIDS is that people

who have it don't actually die of AIDS alone. As we have seen, they die of the infections and problems that come in when AIDS has weakened the body. Anything that helps the body get rid of these other infections can help someone make a dramatic recovery. They go home looking well, and are sometimes still completely well some months later. Until they get another chest infection, people think they have been cured. This gives rise to rumours and false reports:

'I took this special antibiotic and within a day I was out of hospital and haven't looked back since. I don't have AIDS any more.'

The first comment is right, the second is wrong. The person could die quite quickly at any time. The soldier cells are getting weaker and weaker, and with each passing day the body is more and more wide open to new germs. Although the person may be looking well he is sitting on a time-bomb.

Rubbish cures

In Uganda a few years back, drugs for tuberculosis were being talked about as a cure for AIDS. Nonsense. People with AIDS are especially likely to die of tuberculosis. The drug kills tuberculosis, not AIDS. In the USA, treatments for syphilis have been called treatments for AIDS. They are not - they help People recover from syphilis alone.

Some people are pushing fad diets, whole-meal foods, vitamins in large doses, exercise, sleep and psychotherapy in varying combinations as a cure for AIDS. What value do these things have?

It is true that if your soldier cells aren't working too well then anything that helps your immunity is going to help keep you healthy, and things which make you run down and prone to being ill should be avoided. Common sense tells you to take care of yourself. Eat proper regular meals, take some exercise, keep your weight reasonable, eat plenty of fresh fruit, cut out the smoking, cut down on alcohol and stop all other recreational drugs, and make sure you get enough sleep. These low-cost measures are likely to prolong the life and well-being of most people and especially of those with AIDS or early HIV infection.

However, some people are advertising all kinds of very expensive and useless remedies. A lot of people are making a lot of money out of AIDS.

It's true that there are some very expensive medicines available in the West called HIV protease inhibitors and other things. But these just damp down the fire, they don't put it out. They are all poisonous so you can die from over-treatment and that means many hospital tests. The medicines have to be taken for life.

A Burundi doctor would have to save his entire salary for five years to pay for treatment and monitoring of just one person on these drugs for one year - and the person will still die of AIDS in the end. Because of this there has been a huge outcry for justice and the manufacturers have taken steps to provide the drugs at much lower cost. But to people on \$2 a day of income, they will still have to save their entire earnings for two years to pay for two days of treatment for a relative.

Just as the idea that everyone in the poorest nations can afford to use condoms when they have sex, it is also stupid to pretend that these lower cost drugs will make any difference at all to the vast majority of the poorest people in the world. Remember too, even if you can afford them, these treatments are dangerous and useless without good laboratory facilities and experienced medical teams. The most appropriate use of such medicines is often to give them to pregnant mothers who have tested positive, in a short course of treatment, designed to reduce the risk to the unborn child of becoming infected.

What about a vaccine?

Vaccines are our only weapons against viral diseases. Polio, whooping cough, measles and other illnesses are becoming more rare now thanks to vaccines. A worldwide programme against smallpox has now succeeded in wiping it off the face of the earth. So why not AIDS?

A vaccine is made by giving you a germ that is harmless but is the same shape on the outside as the disease germ. Within a week you will develop special antibodies to get rid of it. The first time it always takes longer. The next time you meet the same germ, it takes only an hour or two to get your soldier cells into battle. Your soldier cells can remember a germ they have met before several years ago.

If you now meet a completely different and dangerous germ, and the shape is the same as a germ your body has met previously, your body is well prepared, and instead of dying of polio, for example, you feel slightly unwell and get better in a day or two. The vaccine has made you immune.

Master of disguise

The trouble with AIDS is that the virus keeps changing its shape so it confuses the soldier cells. A vaccine you give someone today might protect him or her next week, but what about next month? Here we have a virus that is immune to your soldier cells. That is why your body can virtually never get rid of it. There are other viruses that change shape as well. You may have wondered why flu is still a major cause of lost days at work or at school, or why all our skills are defeated by the common cold.

The reason is that both of these illnesses are caused by viruses that tend to look a bit different every time you meet them. By the time you have passed your cold on to a friend, and it has been passed on another few dozen times, it has travelled halfway round the world, infected maybe 10,000 people in total, and has altered shape. Each person infected makes new viruses inside their nose cells and sometimes the viruses coming out are not exactly the same shape as the virus that came in.

A year or two later you meet someone with a cold - the same cold you had before. If the virus were like measles or chickenpox, your body would have remembered it and killed it straight away. But the virus looks so different on the outside that when the soldier cells get their picture library out, they just can't identify it. There is no pre-made antibody that is a good enough fit, so the soldier cells have to start all over again.

A vaccine for flu

There is a vaccine for flu and it just about works because the virus tends to stay the same shape for a bit longer than the cold virus. We have a look at what's coming round the corner from the other side of the world. We take samples from people in Hong Kong and Australia and we know that if we can get the vaccines made and give it quickly to old people in the UK then we may be able to reduce the number of flu deaths this winter. But you have to have a new

vaccine each year.

So even if we do find a vaccine for AIDS which is safe and works, we will probably have to revaccinate everyone at frequent intervals. The virus may still not be destroyed. It can change shape in small ways even in the same person over a few weeks, so antibodies that were a good fit at the beginning of the month are almost useless by the end of the month.

A virus dressed up to look like you

Whatever you may read, the truth is that we have never yet found a single human antibody that is powerful against HIV - even if it is exactly the right shape. Almost everyone who is infected produces antibodies, but they still get ill and die. This virus is immune to antibodies.

So when you next hear of some wonderful scientist who has given himself a dose of AIDS vaccine, take care. The only way we will know if it works is by giving him an injection of blood from someone who has AIDS and seeing what happens. But how long do you think you will have to wait to be absolutely sure, that he will never develop AIDS? Possibly ten years. Until then his wife and children will be living in suspense, knowing that he might die, and also that he may be an infectious carrier.

Give him a test?

You may ask why we can't give him an AIDS test. Unfortunately, the AIDS test is nothing of the sort. It is extremely difficult to detect this tiny virus. The only widely available test we have at the moment is not for the virus itself, but for the antibodies that almost all infected people make. So people wanting a test often have to wait a while after they were last at risk before being tested - up to twelve weeks. If we find antibodies, it means that the person has been exposed to the infection - or that he or she has developed antibodies because of a vaccine. We cannot tell the difference.

Most experts are very depressed when it comes to talking about vaccines. They say that we are almost certainly at least ten years from a vaccine that works, and even if we find one it will

take years to make sure it is safe enough to give to large numbers of people and to produce at low cost in large quantities.

Condoms are not the whole answer to AIDS

Many churches don't like talking about condoms at all. But what is the truth? Are condoms the medical answer? Is promoting the use of condoms something that is opposed to the values of Christ? And another question.

If AIDS kills, the body can't fight it, drugs don't really touch it and vaccines are as good as useless, then what hope is there? Whenever I go into schools or talk to young people they all tell me that safe sex is sex with a condom - even though they may have also decided never to use one. But even if they were to change their minds and to use condoms, do they really work as well as people make out? Something no one likes to tell you is that condoms may not be as safe as you think they are.

Here is the truth:

Condoms can reduce the risk of HIV spreading enormously but they are not 100% safe.

And here is a concern:

Sometimes indiscriminate promotion of condoms can give a mixed message to young people: on the one hand encouraging them to be celibate and then faithful, and on the other seeming perhaps to encourage them to have multiple partners in situations where they could be exposed to infection unless they use a condom.

Everyone agrees that one major thing more than any other produced the sexual explosion of the swinging sixties, with liberation of women from the fear of pregnancy, the ability to plan a family reliably, and to explore free sexual relationships. The swinging sixties were produced by

the pill not the condom.

Condom babies

Before the sixties every mother warned her daughter that if she slept around she could land up with a baby she didn't want. Condoms have been around for years-since 1850 BC (not AD), in fact. The ancient Chinese and the Romans knew all about condoms and they were no more reliable then.

During the Second World War condoms were freely available and were the main form of contraception, yet 'war babies', born to women after hasty affairs with soldiers on leave, became a standing joke. Thousands of parents and grandparents and aunts and uncles today were born as 'war babies', or after the war, as 'condom babies'. These were babies that surprised and shocked young girls who thought they were safe from pregnancy because their boyfriends or husbands were wearing condoms.

Even today the success of the latest condoms is not as good as many people think when it comes to reliably preventing pregnancy. If, as a doctor, I have 100 young women patients who have chosen the condom to prevent themselves having babies, then each year I can expect maybe fourteen of the 100 to come into the surgery in a state of shock and confusion because they have missed periods, but just can't believe they are pregnant because their partners were using condoms.

Holey condoms!

Just for the record, condoms on sale, which are poor quality can have up to seven out of ten with holes in them, faults when you open the packet. The best have only one in 200 with a hole in before you start. But what happens after you open the packet is far more important. It can be quite difficult to use a condom correctly. Fumbling in the dark it can be torn, caught in a woman's jewellery, it can burst, fall off, roll off and leak if not removed carefully at the end of making love.

If we are honest we have to say that no one is quite sure why condoms have such an appalling habit of letting you down. One good reason may be that people who say they are using them, do buy them with good intentions, but when it actually comes to the heat of the moment they don't get as far as putting them on.

You can get infected even with a condom

If you were to draw a sperm and a virus on the same scale, then if a sperm were ten centimetres long, a virus would be the size of a pinhead. If sperm can cross from a man to a woman, then viruses can too. They can also cross from a woman to a man. It is not surprising then to find that reports are now coming in of men who have infected their wives, or the other way round, with the HIV virus, despite using condoms carefully.

Even if a condom fails, a woman is unlikely to get pregnant. You can only get pregnant on three out of thirty days a month, and even if it happens to be a day when there is an egg around to be fertilised, many people have to try many times before a baby is conceived. In fact five in 100 people will never manage it. Another five in 100 will take months or years of anxious trying before they succeed in having a baby. Mr and Mrs Average take around four months of trying.

But with HIV, you can in theory get infected any day of the month. Once can be enough to get it from him or from her.

Condoms are like seat-belts

Seat-belts save thousands of lives a year, but it is feared that because people feel safer wearing them they actually encourage speeding, jumping lights and crazy overtaking. In the end people may land up in riskier situations, and the number of lives saved may not be as great as it should have been.

Condoms are exactly the same: they reduce your chance of dying from an activity which can be highly dangerous. By pushing condoms and making out they are more reliable than they are, some health campaigns may actually encourage people not to alter the way they live. 'Carry

on as normal, but just remember, when you can, to use a condom.'

It is very simple: if you are going to take a risk by having sex with someone who could be infected (and how will you ever know, since people don't tell the truth and you can't tell by looking) and you don't use a condom, you are crazy.

A condom may well save your life. Condoms have without a doubt saved millions of people from dying of AIDS already.

When using condoms, make sure they are good quality. Condoms can deteriorate in hot countries if kept for many months before use. In conjunction, use a spermicide containing nonoxynol to reduce risk further. If you want to use a lubricant, use those which are water based and contain nonoxynol spermicide. Oil-based lubricants can rot condoms in minutes.

But don't kid yourself that just because you use a condom there will never be a baby or you will never become infected.

If you are having sex regularly with someone, or with people who are carrying the virus, then one day, condom or no condom, you may get infected. It is the same as someone who enjoys driving a fast sports car beyond the limits of road - safety, thinking he could never be killed in an accident because he always wears a seat-belt. The seat-belt makes him safer -but it does not guarantee he won't get hurt.

You can't have an abortion for AIDS

Condoms reduce the risk by about 85-95%, but I wouldn't trust my life to a condom. There are people who are infected or have died, despite using them. Condoms are not as safe as some of you think. All the health literature says that 'for safer sex use a condom'. The trouble is that we hear what we want to hear. We hear 'safe'. As someone said recently, you can abort a baby, but you can't have an abortion for AIDS.

Condoms can be worn by women

There are some new kinds of condoms available now. They are made of the same material as ordinary condoms, but with reinforcement to keep them in place inside a woman. They can provide an added measure of protection. The trouble is that when a man and woman are actually making love, these very thin membranes of rubber; whether worn by a man or a woman, can slip or move. Things happen, and neither partner is aware until afterwards when it is too late. The stronger and thicker you make these things, the less and less people want to have anything to do with them. The ideal condom is invisible, with neither partner aware at all of anything feeling any different. It doesn't exist, although some say the female condom is an improvement, and it can be re-used many times. 35 million have been sold world-wide.

Condoms must be part of the Christian answer to AIDS

Churches take very different positions on the condom issue but however anti-condom a church may be, consider this: a man comes to the pastor because he has been infected through a blood transfusion and is worried about the health of his wife. Both have been tested. He is infected but she is not. What advice will he be given? Surely the only advice that makes sense is for both husband and wife to understand that there is a serious risk to her life if they have unprotected sex, but that if they use a condom carefully, every time they make love, it will reduce the risk of her getting infected enormously. In such a situation it would be madness, almost perhaps an act of murder, not to inform the couple of the real benefits of condom use.

In such a situation let us work out the risks. We know that if both partners are healthy, apart from one having HIV, that is to say if neither have untreated syphilis, gonorrhoea, chancroid or another chronic sexually transmitted disease, then in normal heterosexual intercourse, the chances of transmitting HIV during a single episode is probably less than one in 200. And we know that using a condom may reduce this risk further by 90% or more. That means that the risk of getting HIV from your husband or wife if you are using condoms carefully in such a situation is probably less than one in 2000. In other words, on average such a couple would need to make love 2000 times before the uninfected partner gets HIV. Of course it could happen after just twenty times, or not even after 10,000 times. It's an average figure that you would get by following up what happens to hundreds of couples.

So for a Christian it seems obvious that in some circumstances at least there should be no reservations whatsoever about the use of a condom where the aim is to save the life of a

husband or wife in marriage . How much further we go down this route depends on the church and as I say traditions and cultures vary hugely.

Dilemmas for engaged couples

Incidentally, some church leaders in badly affected countries are saying that they will not marry couples unless they have been tested, and if one or both have HIV they forbid them to marry. But I cannot find a bible passage that supports such action. Clearly we should encourage people to be very caring and responsible. If both man and woman have HIV I cannot see any reason medically why they should not marry, any more than two people with cancer. Most likely they will think very carefully before attempting to have children, partly because of the risk of infecting them, even though HIV drugs can reduce that risk if taken in pregnancy. But partly also because of the risk to the welfare of the child if orphaned at a young age.

An engaged couple where one is infected and the other is not are in a terrible situation, because they are entering a life-long relationship where the act of greatest intimacy could kill one of them. But even so it seems to me that these things are matters of sensitive personal counsel and cannot be made absolute rules of the church.

What about smoking?

I was recently debating this whole issue of condoms with many church leaders in Burundi. I asked them if they approved of smoking. They said no. I pointed out that you can smoke cigarettes with filters or without but filtered cigarettes are far safer, they kill less people. So if they had a friend who insisted on smoking, would they encourage them to smoke filtered cigarettes? Would they explain how much safer it was? Or would they feel it was just encouraging people to smoke even more?

They agreed that however much they were against smoking, the last thing they would want is for cigarettes to be even more dangerous and they would agree that government advertising should explain that smokers are better off using filtered brands.

I pointed out it was in many ways the same kind of argument with condoms. If someone is going to take a risk anyway (despite all our persuasions), and could lose their life as a result of having sex with an infected partner tonight, don't we have the same obligation to warn them of the risks, and explain how to avoid a slow death sentence?

So for me the issue is clear: we do all we can to encourage celibacy and faithfulness, but we also make people aware that there is a way of reducing the risk of death, if they choose to go their own way.

Condoms are very costly for poor nations to give to everyone

There is another problems with condoms: cost. Only the female condom can be used more than once safely. So who is going to supply them?

ACET International Alliance - the network of AIDS programmes in many nations that I helped found in 1988 - was once offered 140 million Chinese condoms delivered to any port in Africa for a certain price. I told them that even if we had the money, I calculated that 140 million condoms would last the continent of Africa just one night - and then what would people do? And what is more it would wipe out our entire budget for HIV for a very long time. Even the World Health Organisation does not have enough money to fund such schemes on a sustainable basis. The Health Ministry in Uganda was offered half a million condoms by a wealthy business man in 1990 and had the same reaction: "thanks very much but it will last our country a day". We have to think more deeply than pieces of rubber. We have to face reality. We have to think on a far larger and longer scale.

Condoms may be a solution for wealthy people, able to buy as many as they need, or for those fortunate enough to live near a free distribution point but one thing is clear: wealthy nations are unwilling and unable to pay out enough money for every sexual act to be rubberised in the 2/3rds world, so the idea that we should just tell everyone to use condoms is a cruel joke. And when 2 billion people exist on incomes of less than \$2 a day, living in countries where the health budget is only \$2 a person for a whole year, how can condoms be a sustainable and affordable, locally appropriate solution.

Condoms have to be produced in high-tech factories, to high standards, packaged carefully,

and stored well. That's why they are expensive and an odd "Western-style" solution for a low-tech society where many villagers may have very few manufactured items: a plastic water container, a couple of metal cooking pans, a battery radio and the clothes they wear. Everything else is produced locally from what grows or is dug from the earth. Are we really expecting condoms to be the answer in places like this? Of course, condoms also have an advantage of providing birth control for those that want it, but the practical issues remain.

HIV is a development issue

That's one of the reasons we conclude that HIV is a development issue. For many reasons, poverty encourages spread. Ignorance, lack of health care, poor communications, destitution, children earning money or food from casual sex, and so on. These cycles of deprivation need to be broken together. Just focussing on HIV will not itself succeed in halting AIDS.

Take for example an infected commercial sex worker: how is she to live if she stops providing her services to men? Who will feed her children? Who will pay for her medicines? Prevention campaigns are not enough. We need a holistic approach.

That's why one of the weapons against HIV is economic growth: encouraging investment, business and international trade. Microbanking, income-generation schemes, and other self-help programmes have a vital role to play, not only in raising general incomes in a nation, but also in helping those with HIV rebuild their lives and helping orphans survive. I have seen 40,000 people lifted simultaneously out of absolute poverty in places like Delhi: people who had been in tents and slum dwellings now living in two story houses with all facilities, and with successful businesses, largely as a result of micro-banking schemes, where groups of women take out small loans together for several businesses and guarantee each other.

As we have seen, AIDS is a terrible disease for which there is no cure and no vaccine. The only hope is to teach people how to protect themselves from infection. If there is no cure, no vaccine, and condoms merely reduce the risk as well as being unaffordable or unavailable for hundreds of millions of people, what is the answer?

Experience in Africa

Just a few weeks ago I flew to a country where an answer has been urgently needed to prevent a big part of a whole generation from being wiped out. Uganda has had in the past more reported cases of AIDS than any other country in Africa. You might think that means it is the worst affected: it is not. It is certainly the country with the most honest and courageous leaders. And has had one of the most successful campaigns in the world with dramatic results.

There were several other African nations that had as bad a problem, or maybe even worse, who would not speak up. One country actually reduced the number of AIDS cases it admitted to, even though doctors in that country knew the figures were fixed. If people think you have a lot of AIDS then big companies pull out and tourists stop coming. The economy collapses and in addition to having thousands of extra sick young people to look after, you now have high unemployment and increasing poverty.

The government of Uganda openly admitted there was a big problem. This opened the doors for international aid and also for education. How can you educate people about a major cause of death when you don't officially admit anyone is actually dying of it?

In some parts of central Africa, one in three of all the truck drivers who drive lorries up and down the main highways are infected, and half the young girls who hang around the bars at night. Maybe one in five of all young men and women in some of these towns are infected. Some have said they think there are towns in central Africa where maybe half of all the sexually active young people are dying.

Like any other sex disease

I met a mother who had lost two daughters. Her face was a picture of grief. Composed and dignified, she told me how they had died. 'I wish it had been me,' she said, 'they were so young.' In Africa the infection has always spread like any other sex disease: from man to woman and woman to man. Europeans who stay in these countries often come home infected after having had sex only a few times.

In 1988 I visited Uganda for the first time: we spoke to over 20,000 people in around ten days, at the request and invitation of the Ministries of Health and Education. When we went into schools and asked for a show of hands from those who knew personally of people who had

died because of AIDS, half would put up their hands. Two years later it was almost everyone.

We held large open-air meetings with a big noisy African band, a huge public address system and interpreters. Thousands attended from local villages. Up to 2,500 people sat in the square or stood motionless, six deep for around three hours, while we assisted the local people in educating and answering questions. Most of the audience were men - hardly ever turning up to such things normally. They came because in the area where we were, AIDS had become a life and death issue for everyone there.

Desperate for a test

Many young people came to me wanting to be tested. They had good reason to be worried. They knew there was a very high chance that either of two people about to get married could be infected. If they both are, that is one thing, but if not, then one could kill the other. What should they do? It is quite feeble just to tell them to use condoms carefully for the rest of their lives.

What about children? If the girl has a baby, she knows that the infection can be passed in the milk. She wants to be tested to make sure she does not accidentally kill her baby. A wife came to me. She was worried because her husband was often out with other women late at night. He admitted he had been repeatedly unfaithful over the last ten years, and they both realised that he could easily be infected, like so many of the people he knew who had died. They wanted to know if it was safe for him to sleep with anyone again - let alone his wife.

All these anxious people: they do not only need counselling. Some of them have an urgent need for a test. Testing is one of the most powerful weapons we have in the fight against AIDS because it helps identify people who are carrying the virus so they can take steps not to kill those they love or have casual relationships with. It also helps other people discover that they and their partners are not infected, so they can enjoy anxiety-free, rubber-free sex for life with no risk whatever of HIV unless one or other is unfaithful.

One partner for life

The response of the Ugandan government to the crisis was prompt and impressive. No watered down messages. For them the answer was obvious and clear: 'Safe sex is sex between virgins now married for life. (If you really can't manage it a condom might save your life.)'

In Africa many governments have been very worried too about spread from medical treatments. In some areas one in five pints of blood donated to the hospital blood banks is full of virus. Fortunately almost everywhere now in Africa they have facilities to test all blood. Needles can also be in short supply, or equipment to heat and sterilise can be broken or unavailable. No one will ever know just how many people doctors and nurses have killed in Africa without knowing it. So an important part of the health campaign has been making sure that everyone is aware of the dangers of blood and needles.

People say Africa is different

A lot of people have tried to think up various reasons why Africa is different. You must make up your own mind. Some said that Africans are especially sensitive to HIV and that is why it spread so fast. They worked out that answer from experience in a London clinic. For six months that was the answer trotted out around the world, until the doctors made a public confession that they had wrongly added up the figures.

The next answer given was that Africans are much more promiscuous. People believe what they like to believe. While it is certainly true that some patterns of behaviour encourage multiple sexual partners in parts of Africa, the difference is not enough to explain what is happening.

Another suggestion was that medical treatments with dirty, needles and infected blood was the reason. It is easy to make armchair assessments when you are 6,000 miles away. The fact is that if that were true then every age group that receives medical care by injection would be likely to get AIDS, whereas most of those infected are young sexually-active men and women.

Finally, some suggested that infection first with one disease could open the body to infection by another. We have very strong reasons to think this happens. Common sense tells us that if you are already chronically sick and then you are infected by the AIDS virus, you are not in the best possible shape to fight it. Malaria and other tropical diseases could be responsible.

However, the most likely explanation is other sex diseases. These spread in all countries but chronic untreated STDs are far more common in poorer nations where there are fewer health care facilities. In addition, tracing sexual partners of those infected can be harder in nations with less well-organised community systems. We do know that if a man or a woman is infected with gonorrhoea or syphilis or similar diseases, the small wounds made by these germs become easy ways into the body for the AIDS virus.

One of the reasons that HIV is spreading so fast in places like Mumbai in India is that around half of all adults in that vast city are carrying an active untreated STD.

You can see for yourself that everything that has happened in central Africa is bound to happen to some extent in the West. It is a stupid man who comes back from a detailed look at what is happening in Africa and says AIDS will never spread affect people other than gay men and drug addicts in the UK. Not only stupid but ignorant too: in 2001 the majority of people newly infected in the UK were heterosexuals - and mostly infected in other nations.

How can I keep uninfected ?

You need to make a decision if you have not already done so, that the next person you have sex with will be the person you are committed to making love to for the rest of your life. Some say life is not that simple. What if that person has had several partners before, or what if you have? What if your partner is unfaithful or is injecting drugs?

The question of testing is a difficult and complex one and every person or couple is different. Where the risk is significant it may well be worth one or both being tested for the sake of the other. You need expert medical advice from your doctor or from a special clinic.

The other decision-you need to make, if you have not already done so, is never, never under any circumstances to allow yourself to be injected with a needle that could contain traces of someone else's blood.

Zero risk

If you keep to these two very simple things you will reduce your risk to nearly zero. Any remaining risk would be if your partner was continuing to take risks - especially if you are kept in the dark - or if you are in the medical or caring professions. If you fall into this group you should already have clear instructions on how to protect yourself while also giving excellent care. The basic rule is to keep blood and any other body fluids off your skin as far as possible.

In the next chapter we look at some of the common worries and problems people have.

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