EKTHA—UNITY

Newsletter of SAVE A FAMILY PLAN (SAFP)

Issue 11: 2006 ***"partnering with the poor for a just world"***

SAFP Attends the 2006 Sixteenth International AIDS Conference in Toronto

Colette Peters, Program Support Officer, SAFP

In August 2006, if you were reading the newspaper or watching any TV news at all, you likely heard something about the International AIDS Conference, which was held in Toronto. The statistics associated with this conference were quite mind-boggling: over 24,000 attendees representing 170 countries came to Toronto, including approximately 1,000 youth delegates. Over the course of the six days, more than 4,500 sessions were offered: from highly technical medical research sessions to practical, action-oriented ones. Topics included novel targets for drug development, new prevention technologies (including microbicides, vaccines and pre-exposure prophylaxis, or PREP), the connection between HIV (Human Immuno-Deficiency Virus) and Tuberculosis, and clinical evidence from early efforts to scale up prevention and treatment in resource-limited countries. Other abstracts sessions presented results in the areas of social, behavioral and economic research and policy.

A National Meeting of SPED Coordinators workshop, held in January 2007 at the SAFP India office, was entitled **"HIV/AIDS and Its Intensity in India–a clinical perspective."** *left: Dr. Smithy Jacob (Little Flower Hospital & Research Centre) standing: Fr. Augustine Bharanikulangara (Executive Director of SAFP India)*

The theme of the conference, "Time to Deliver," inspired much poignant debate on whether the time to deliver was now, or indeed, had long passed, given the current dire situation in Africa. The presence of power-broker supporters such as Bill Clinton, Bill and Melinda Gates, and celebrity Richard Gere was viewed by some as an indicator of success, but by others as a sellout of the radical political potential of the conference. Certainly, in terms of the role of the drug companies, numerous protests and discussions in conference sessions confirmed that the necessity for affordable treatment for HIV/AIDS continues to be a main concern and point of contention. Questions often asked by the audience were "What about women, the poor, the marginalized? What about access to treatment NOW? What about more funding?"

Numerous sessions were available that were related to India, and some focused exclusively on the dynamics of HIV/AIDS in India. The numbers were disturbing, and point to a potential calamity of such proportions that it is overwhelming to consider. Due to the sheer immensity of its population, India has now overtaken South Africa in terms of numbers with well over five million HIV/AIDS-affected individuals. Although these cases tend to still be in certain high risk groups, such as Injection Drug Users or Sex Workers, the spread into the general population has already begun.

For attendees, including SAFP Executive Director Lesley Porter and Program Support Officer Colette Peters, the conference provided an opportunity to access the most current information about AIDS itself and the situation in India, and to view the wealth of resources available on current research, program planning, case studies of successful programs, and peer education training manuals. Some of these have already made their way to the India office and are being shared with our Non-Governmental Organization (NGO) partners, who, through our "Sustainability through Participation, Empowerment, and Decentralization II (SPED II) program, are working to help improve the health status of communities. Overall, a very worthwhile opportunity for SAFP to gather information and create a new support network.

Attendance at this Conference was made possible through funding support from the Canadian International Development Agency

INDIA and HIV/AIDS

"Our diocese has the geographical coverage of five vast Civil Districts and HIV/AIDS is really spreading like wildfire in our region." (August, 2006)

***Fr. Jolly**, Amravati Diocesan Social Service Society (SAFP partner)*

The World Health Organization (WHO) is urging countries in South-East Asia to scale up HIV/AIDS prevention and treatment services in order to avert an all-out epidemic. New data published by United Nations AIDS (UNAIDS)/WHO shows that of the 39.5 million HIV-infected people in the world, one fifth, or 7.8 million, are from the South-East Asia Region, which includes India. "*Our window of opportunity is closing and now is the time to act if we are going to mount an effective response to this opportunistic disease*", warned the Regional Director of WHO's South East Region, Dr. Samlee Plianbangchang, on the eve of World AIDS day, November 30, 2006. "*Improving knowledge of the disease, increasing access to services, encouraging behaviour change and countering stigma all need to be at the forefront of our fight against AIDS.*"[1]

Sr. Elsy Vembanadan (below, far right) chats with Stephen Lewis (below far left), who recently completed his term as United Nations Special Envoy for HIV/AIDS in Africa. Lewis was the keynote speaker at the 4th Annual "Celebrate with Coady" event in Halifax, November 1st, 2006. Sr. Elsy, who is a **SAFP Family-to-Family Development Program Coordinator** with SAFP partner Quilon Social Service Society in Kerala, India, recently completed the internationally recognized five-month Diploma in Development Leadership at the Coady Institute at St. Francis Xavier University in Antigonish, Nova Scotia. Her training there was supported by the Diocese of London.The Coady Institute works with innovative people and organizations to create effective and practical solutions to reduce global poverty and injustice.

Did You Know...

- India has the highest number of HIV/AIDS infected people in the world. Approximately 5.7 million people in India were living with the virus in 2005 (5.2 million were adults aged 15 – 49 years, a national prevalence rate of .9%).[2]
- About two thirds of reported HIV infections has been in six of the country's 28 states generally represented by the industrialized south and west (Maharashtra, Tamil Nadu, Andhra Pradesh, Karnataka), and in the north-eastern tip (Manipur, and Nagaland).
- In 2005, less than 10% of people in India requiring anti-retroviral drugs were receiving them.[2]
- Tuberculosis is the most common opportunistic infection for those living with HIV/AIDS in India.
- Over 80% of reported HIV cases in India occur through heterosexual intercourse.[2]
- Women account for a growing proportion of those living with HIV (38% in 2005), especially in rural areas.[3]
- Large-scale population mobility and migration, mostly through male migrant labour, contribute to the spread of the disease.
- A large proportion of women acquire the virus from their regular partners who were infected during paid sex.
- The HIV/AIDS Policy of the Catholic Church in India includes these statements: "Traditionally, sexual, economic and cultural subordination of women has taken a serious toll on women's health and HIV has worsened the situation..... The Church will be sensitive to gender inequality and address issues arising out of it in the context of HIV/AIDS, and will consequently work for gender equity in all activities related (to) prevention, treatment, care and support." [4]

Sources: [1]WHO Press Release (SEA/PR/143630 November 2006); [2]UNAIDS- 2006 Report on the Global AIDS epidemic- Fact Sheet ; [3]NACO (National Aids Control Organization) HIV Sentinel Surveillance Report-2005, p.2; [4]Commission for Healthcare; Catholic Bishops' Conference of India, 2005, "Commitment to Compassion and Care - HIV/AIDS Policy of the Catholic Church In India", p. 22

SAFP Partner Profile: Cultural Academy of Peace

-Frances Theilade, librarian, SAFP volunteer

"Every future becomes reality in part because of dreams." Forty-two years ago Mgsr. Augustine Kandathil had a dream of helping families in India by pairing them with families in Canada. This dream became Save A Family Plan. What was one man's dream has spread and has become for many the lifeline to a better life. In part SAFP has succeeded because of partnerships developed with like-minded organizations in India. It is through these partnerships with self-help groups, sanghams, Diocesan Social Services offices, and others, that the work of SAFP is done. A new partner is the **Cultural Academy of Peace** (CAP) based in Kochi, Kerala. Through SAFP's "Sustainability through Participation, Empowerment, and Decentralization II (SPED II) Program, CAP is working locally in three villages to improve health status through HIV/AIDS education, and to promote sustainable livelihood initiatives.

The Cultural Academy of Peace was founded in 1990. "Its members are committed to active non-violence and strive to cultivate a culture of peace based on justice, love and active non-violence. It strives for the upliftment and empowerment of the disadvantaged, oppressed, vulnerable sections of the society especially women, youth and children by providing rehabilitation, training and education to be healthy and contributing members of their communities." (Annual Report, 2005)

Some of the recent activities of CAP include the provision of temporary shelters for survivors of domestic violence, the creation of women's crisis intervention and counseling centers, educational and empowerment programmes, legal aid and referral centers, numerous public campaigns to focus attention on women's issues, advocacy and lobbying for women's rights, establishment of the Women Peacemakers Programme and skills training in non-violence and conflict management and peace education.

Cultural Academy of Peace: Services — **Director: Mrs. Beena Sebastian**

Sakhi – ("friend") A short stay rehabilitation home for women and children.

Shanti Bhavan – A night shelter for women established in 1994.

Family Counseling and Reconciliation Centre – Professional staff include psychologists, psychiatrists and social workers.

Training Production Units – Includes vocational and recreational therapy training. The aim is to enable clients to earn a livelihood by developing specific skills in areas such as: floral arranging, tailoring, paper bag and cloth bag making, dry flower wall hangings, table mats and screen printing.

Women Peacemakers Programme (WPP) – supports and strengthens women's peacemaking initiatives.

Training in Mediation and Conflict Management Skills – provides skills that help transform conflict into opportunity. Training has been given to business people, government, police and local leaders, religious groups, and students.

SAFP AT 2006 MICROCREDIT SUMMIT IN HALIFAX

-Laurie Chan, Program Support Officer, SAFP

The Global Microcredit Summit 2006 was held in Halifax, Nova Scotia, Canada from November 12 to 15. Among the 2000 delegates attending were SAFP President Lois Côté, Executive Director Lesley Porter, and Fr. Paul Moonjely, Executive Director of Welfare Services Ernakulam (WSE) , Kerala, India (a SAFP partner). Promotion of income generation through sustainable livelihood initiatives and microenterprises, and the facilitation of such efforts, are integral components of SAFP's programming. The Summit provided an excellent opportunity to learn about the latest microfinance issues,concepts and practices. On November 27 Moonjely made a presentation on microcredit, together with Mennonite Economic Development Association Executive Director Allan Sauder, at King's University College in London, Ontario, He discussed various aspects of microfinance initiatives (credit, insurance, etc.) that have been implemented with WSE's facilitation, and shared success stories and information on microenterprises undertaken by local poor people, including agricultural projects such as dairy cooperatives, rabbit and quail rearing, vegetable vending, mussel cultivation, silk production, coir weaving, coconut drying, and jasmine farming.

Attendance at the Summit was made possible through funding support from the Canadian International Development Agency (CIDA)

Positive Impacts of Microfinance Reported by Fr. Moonjely of WSE

SOCIAL: Development of knowledge and skills, social cohesion, development of leadership
ECONOMIC: Resource mobilization, increased employment income, economic independence
INSTITUTIONAL: common platforms, collective sharing and learning, networking
CULTURAL: integration (ie. indigenous/ayurvedic health promotion), strengthening secular fabric
POLITICAL: participation in local governance, improvement of status, strategic gender roles

An inspirational presence at the Summit was Nobel Peace Prize winner **Dr. Muhammad Yunus,** who started lending very small ("micro") amounts of money to the poor over 30 years ago, and founded the Grameen Bank in Bangladesh. The two new goals for Phase II of the Microcredit Summit are, by the year 2015:

- **to reach 175 million of the world's poorest families with credit** for self-employment and other financial services, impacting 875 million family members in total.
- **to ensure that 100 million of the world's poorest families rise above the dollar-a-day threshold,** lifting 500 million people out of extreme poverty.

The following is the third article in a series on Catholic social teaching (see EKTHA-UNITY issues 9 & 10).

WHAT IS THE COMMON GOOD?

by Fr. Michael Smith, associate professor of philosophy,
St. Peter's Seminary, London, Ontario

The common good is perhaps the most underrated and neglected of the pillars of Catholic social teaching, and has received bad press. This difficulty can be addressed if we take a close look at what the common good is, and how human fulfillment depends on it.*

The common good is a good or goal that is one's own, but which one can achieve only in union with others. One way of expressing the common good is to speak of the common goal or goals of a group. If one were to ask the question, "What is the common good of Save A Family Plan?", the question would seem abstract and would lead to confusion. If, however, one were to rephrase the question, "What are the common goals of Save A Family Plan?", then suddenly the question would become concrete. Everyone associated with SAFP would then be able to describe why the organization exists, and there would follow an ongoing discussion of how best to achieve those goals. What is presupposed by this discussion is that no one currently involved with SAFP can achieve those goals alone, and that it is only together that we can achieve the goals, or do the good, for which SAFP exists.

Now, apply this analysis to any group, whether it be your family, your club, a political party, or society itself. No community exists just for the sake of existing. All communities exist for some goal or goals beyond themselves. If the goal is truly a good, then it is at the same time my good and my neighbour's good. Thus, there are goods that are truly mine, but which I could not achieve if I did not belong to communities on various levels. Human flourishing depends on communities.

The Church's understanding of the common good goes as least as far back as Aristotle and St. Thomas Aquinas. According to this teaching, we are social by nature. Each human person is born into a family, on which the child is dependent for survival. Our personal and social development is enhanced throughout the years by contact with family members and with friends. As time progresses, we forge other ties, such as acquaintances at school and the members of clubs and other groups to which we belong. As we extend the circle even further, we recognize that we are part of a broader society, and that our own well-being depends to no small extent on whether or not we live in a good society. A good or just society has some measure of social equality and enables people to live in peace. A bad or unjust society has rampant social inequalities, which in turn foment strife, even violence. This is the same thing as a breakdown of the common good. In recent times, we have become increasingly aware of a much broader interdependence: interdependence among societies, and indeed among the species that comprise the ecosystem. If the whole flourishes, then each part stands at least a chance of flourishing. If the whole is threatened, then the part is threatened.

This understanding of the common good also affects how we relate to God. Since I am not just an individual, then my relationship with God is not just one-on-one, although it is indeed that. All of us, and all creation, exist together as creatures of God. The question of whether we are in union with one another directly touches upon the question of whether we are truly in union with God.

For the past century, the Church has had some difficulty trying to convey the importance of the common good. Totalitarian and various forms of authoritarian States have frequently invoked the words 'common good', but they mean something different from what the Church means. The language of the common good has all too often accompanied the promotion of a massive State bureaucracy. Although bureaucracies are intended to serve good purposes, they frequently degenerate into structures that crush people rather than contributing to people's flourishing. When the common good exists, however, people must be able truthfully to say that a goal which society is promoting is truly for their own good.

In conclusion, the Church's teaching on the common good challenges us to think again about what it means to be human persons: Are we individuals only? How does our involvement in communities fulfill us? How do we promote social justice in such a way that bureaucracies do not become bloated and suffocate us? These questions do not have easy answers, but the ongoing public discussions necessary to address them are activities basic to human life itself.

**see Vatican II, Pastoral Constitution Gaudium et spes, no.74, and Bl. John XXIII, Encyclical Mater et magistra*

Kindly recycle this newsletter by sharing it with a friend.

We gratefully acknowledge the support of
Canadian International Developmental Agency (CIDA)
in the funding of this newsletter.

Canadian International Development Agency

www.acdi-cida.gc.ca

The editorial team responsible for EKTHA-UNITY:
Frances Theilade, Carmen Sprovieri, Lesley Porter,
Lois Côté, Laurie Chan

SAVE A FAMILY PLAN

P.O. Box 3622
London, ON
CANADA
N6A 4L4

P.O. Box 611832
Port Huron, MI
U.S.A.
48061-1832

Phone: (519) 672-1115
E-mail: safpinfo@safp.org

Fax: (519) 672-6379
Web: www.safp.org

Charitable Registration Numbers
CANADA: BN 11914 1943 RR0001 **USA:** 98-600-4051

SAFP complies with the Federal Government of Canada's Personal Information Protection & Electronic Documents Act (PIPEDA) to ensure the confidentiality of our benefactors' personal information.