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Zambia pushes for continued education, medication for HIV/AIDS patients



Sr. Mary Roche, a teacher at the Mary Aikenhead Open Community School in the Zambian capital of Lusaka, is a member of the Religious Sisters of Charity. (The Global Fund/Bruno Abarca)

This story is the first in a series looking at HIV and AIDS in Zambia.

LUSAKA, Zambia -- Sr. Mary Roche looked around at her students in the Mary Aikenhead Open Community School and said there were very few who have not been touched in some way by the HIV and AIDS pandemic.

"It's dreadful, dreadful," said Roche, 68, speaking with a quiet Irish lilt that does not betray her concern, passion or even anger about what HIV and AIDS have done to this southern African nation of 13 million.

HIV's deleterious effects are seen in ways both large and small, including people who are often sick and leaving work to find treatment and families having to channel day-to-day energies -- and parceling out small incomes -- to help the ill get to hospitals and clinics.

This, in turn, perpetuates cycles of poverty, illness and hunger, said Roche, a member of the Religious Sisters of Charity who has worked at the Lusaka school since 2008.

Zambia is seen as something of a recent economic success story, with one of the highest rates of economic growth currently in Africa, estimated this year at almost 7 percent. But Roche wonders if the benefits of an expanded mining sector (and increasing amounts of heavy Chinese investment) are really trickling down to the poor, like many of the families of her students.

"I don't see any evidence of that," Roche said. Still, she said she sees great resilience among Zambians, particularly in the capacity to overcome problems and adversity.

Certainly, she said, there has been some progress on the AIDS front, with anti-retroviral drugs and HIV treatment helping hundreds of thousands of Zambians live healthier lives.

Still, the toll HIV and AIDS have exacted has been considerable -- perhaps no more so than on women. There are a higher percentage of Zambian women living with HIV than men: roughly 16 percent of Zambian women compared with 12 percent of men, according to Zambia's National HIV/AIDS/STI/TB Council.

"It has been and continues to be more of a female epidemic," Clement Chela, the council's newly appointed director, said in a recent interview with a delegation of visiting journalists.

Mary Mutale, 17, a student at the Mary Aikenhead Open Community School who wants to be a doctor, faces the challenges a young Zambian woman has in furthering her education.

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In many ways, Mutale says, she is lucky. Unlike many at the school who are orphans, her life has only indirectly been affected by AIDS or HIV: Both of her parents are still alive and healthy.

But she sees what has happened to those around her -- families struggling with lost parents; the constant need for drugs and medicines among those who are living; the sacrifices involved in frequent hospital visits and medical care.

Mutale is focused on the future. "I just pray that I can finish my education" and do something for her country and her society, she said. "We are tomorrow's leaders. We've got to work hard to support our country."

That mixture of determination, even optimism, about Zambia and its future comingling with the often harsh realities of the ways HIV and AIDS have affected the country are not surprising.

When it comes to HIV and AIDS, Zambia's is a decidedly mixed picture -- though in several ways, the news is improving.

In advance of the XIX International AIDS Conference, held July 22-27 in Washington, D.C. -- and attended by numerous Roman Catholic church representatives and those affiliated with Catholic institutions -- UNAIDS, the principal United Nations' AIDS program, hailed the decline of new HIV infections among Zambian children, with the rate dropping 55 percent between 2009 and 2011.

In an interview with *NCR* before the international conference, Sithara Batcha, a senior program officer for the Geneva-based Global Fund to Fight AIDS, Tuberculosis and Malaria, the chief global AIDS funding body, said by far, Zambia's most substantial success has been in providing drugs and other medical treatment for almost 400,000 Zambians infected with HIV.

"Disease control -- that has been a success," Batcha said.

More than a third of the almost 1 million Zambians who are living with HIV are currently receiving treatment. The rate of HIV infection for those between the ages of 15 and 49 is 13.5 percent, according to the Global Fund. The rate was 16 percent in the mid-1990s, according to the National HIV/AIDS/STI/TB Council.

Chela acknowledged Zambia still faces steep challenges, including figuring out ways that HIV and AIDS programs can be sustained over a longer term. No one really knows how long the current level of international assistance Zambia receives will be sustained, for example. (Zambia has also had trouble in administering some of the funds it has received, though Global Fund staffers like Batcha say satisfactory reforms by Zambian officials are now in place.)

"It's a success story in many ways," Chela said. "But it's going to stall if we don't begin to do things that are sustainable."

Some of the most-praised programs are those geared to women. These initiatives include efforts to assist female sex workers as well as pregnant mother-to-child treatments -- so-called PMTCTs -- to help prevent the spread of HIV to unborn children by HIV-positive pregnant mothers.

Promoting better medical health, recovery and counseling for sex workers is the Lusaka-based Tasintha ("transition") Program, which was established in 1992 as the AIDS epidemic spread through sub-Saharan Africa.



Clotilda Phiri, who heads Tasintha, said the program has had clear successes

in providing health services for sex workers and helping women make the transition to life outside the sex industry.

That is not easy, as sex work is poverty-driven. Phiri and others said they are seeing younger women (and in some cases, those who are well-educated) becoming sex workers. Why? Many are "AIDS orphans" who lost their parents and don't have an immediate way of supporting themselves and their children.

Miriam Mushetu, 38, a former sex worker, acts as a mentor and role model for the younger women. Orphaned at 13, she came to Lusaka "looking for big money" and fell into the sex trade. She recalls enjoying the work at first ("I was enjoying it," she said, laughing heartily), and would have as many as seven or eight sexual encounters a night. She also liked what the profession brought: attention, money, nice clothing.

Eventually, Mushetu became HIV-positive, and she told her clients about her HIV status. Some used a condom while having sex with her, and some didn't. "The life," as Mushetu calls it, began to take its toll. The older she got, the more worried she became about her health.

Now, Mushetu is on medication, works as a tailor and mentors young sex workers. She tells them, "Life on the streets is not good." Mushetu is also married now -- her husband is HIV-positive as well, though he is not being treated with anti-retroviral drugs.

In some ways, that is not unusual, said Collins Mulenda, 33, a Catholic HIV peer counselor at Our Lady's Hospice in Lusaka, which treats both inpatients and outpatients for various HIV-related conditions.

"Women are more anxious to know their HIV status," he said, "and in many ways more concerned about their health in general."

Health, of course, is part of a larger relationship to life and the world. For women like Mushetu, reclaiming a sense of physical and mental well-being after working in the sex trade is a triumph of both body and spirit.

Said Lucy Bwalya, a senior program officer at Tasintha: "Mirriam has recovered what she lost when she was on the street."

Next: The church's role in fighting HIV and AIDS in Zambia

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[Chris Herlinger, a New York-based freelance journalist and frequent contributor to *NCR* on humanitarian issues, writes often about Africa. He was a member of a journalists' delegation that visited Zambia on July 9-13, sponsored by the Geneva-based Global Fund to Fight AIDS, Tuberculosis and Malaria.]

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