

# The Stigmatization of HIV/AIDS Victims in Sub-Saharan Africa and the Gospel

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## Abstract

One of the most challenging issues in dealing with HIV/AIDS in Africa is breaking through the stigmas surrounding the disease and building resilience in communities where large numbers of people are infected with HIV or otherwise affected by the pandemic. This article explores the relationship between shame, fear, guilt, witchcraft, and HIV/AIDS stigmatization by looking at key features of the African traditional worldview and culture. We point out predominant witchcraft beliefs and how they translate to community attitudes towards people living with HIV and AIDS. We highlight the influence of prevailing beliefs in witchcraft and how they aggravate the experience of fear, shame, and stigmatization by people infected with or otherwise affected by HIV. Relevant aspects of the gospel are brought to bear to answer these challenges.

## Keywords

*HIV/AIDS, stigmatization, shame culture, fear culture, witchcraft, ubuntu*

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## I. Challenge

**H**IV and AIDS—especially in sub-Saharan Africa—still constitute one of the most horrific disasters that the human race has ever seen. A quick look at some of the frightening statistics establishes this fact. A 2013 World Bank report states that since AIDS first appeared in 1981, more than 65 million people have been infected, and more than 30 million people have died of AIDS-related causes.<sup>1</sup> Worldwide in 2011, 2.5 million people were infected with HIV, and 1.5 million died of HIV-related causes.<sup>2</sup> In 2018, about 74.9 million people had been infected with HIV, and 32 million people had died of AIDS-related illnesses. UNAIDS figures published in 2018 reveal that although there had been significant reductions in deaths from AIDS-related illness, the downward trend was not enough for the General Assembly’s 2020 goal to be reached. The annual number of global deaths from AIDS-related illness among people living with HIV/AIDS (PLHA) has declined by 34%, but reaching the 2020 milestone would require a further reduction of nearly 150,000 deaths per year.<sup>3</sup> Sub-Saharan Africa accounted for 68% of all new infections, and nearly half of all deaths globally in 2010 occurred in Southern Africa.<sup>4</sup>

It is shocking and painful to see, as several researchers point out, that with regard to the number of PLHA, South Africa had the largest number in 2016, with more than 6.3 million.<sup>5</sup> In 2011, South Africa already had 2.09 million children orphaned from AIDS deaths. A 2010 research report, funded by the German Development Bank in collaboration with the National Department of Social Development, identified in South Africa a growing phenomenon of child-headed households.<sup>6</sup> Unlike other disasters, AIDS is taking more lives, impacting the health of more people, and leaving more children and orphans homeless than any hurricane, earthquake, or tsunami.<sup>7</sup>

<sup>1</sup> World Bank, “World Bank and HIV/AIDS: The Facts,” 2013, <http://www.worldbank.org/en/topic/hivandaids/brief/world-bank-and-hivaids-the-facts>.

<sup>2</sup> Ibid.

<sup>3</sup> See UNAIDS, “Miles to Go: Closing Gaps Breaking Barriers Righting Injustices,” 2018, [http://www.unaids.org/sites/default/files/media\\_asset/miles-to-go\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/miles-to-go_en.pdf).

<sup>4</sup> See World Bank, “World Bank and HIV/AIDS: The Facts.”

<sup>5</sup> M. Roser and H. Ritchie, “HIV/AIDS,” 2018, OurWorldInData.org, <https://ourworldindata.org/hiv-aids>.

<sup>6</sup> S. M. Mogotlane et al., “A Situational Analysis of Child-Headed Households in South Africa,” 2010, <http://www.scielo.org.za/pdf/cura/v33n3/04.pdf>.

<sup>7</sup> N. Keeba and S. Ray, *We Miss You All: Aids in the Family* (Harare: SAFAIDS, 2002).

## II. *Problem Statement*

The 2003 UNAIDS Fact Sheet on Stigma and Discrimination and a new 2018 report point out that all over the world, the AIDS epidemic is having a profound impact, having its worst effect when individuals are stigmatized and ostracized by their loved ones, their families, and their communities and discriminated against individually and institutionally.<sup>8</sup>

The problem of stigmatization and discrimination is so serious that it has even been described as a second epidemic next to HIV/AIDS.<sup>9</sup> The fear of stigmatization and discrimination leads to an endless circle of denial and silence. Fear of stigma makes people afraid to reveal their positive status by changing their behavior. Stigma and discrimination continue to play a huge role in the HIV response by hampering access to and uptake of critical HIV services. For instance, in Botswana, so as not to give away their HIV-positive status, 50% of new mothers continue to feed with infected breast milk instead of with uninfected formula, which would enable the babies to survive.<sup>10</sup>

Despite many efforts and programs to promote and facilitate disclosure, people with HIV often still conceal their status. Disclosure remains a contested practice among people with HIV and also brings anxiety to those to whom they do disclose. Research has revealed that most people on HIV treatment choose to manage stigma through nondisclosure.

How individuals discover and disclose their HIV status to others, as well as how they cope with their HIV status, is influenced by cultural and community beliefs and values regarding causes of illness, learned patterns of response to illness, social and economic contexts, and social norms.<sup>11</sup>

This article considers the relationship between stigmatization, resilience, and the predominant worldview of the people in the communities suffering from the HIV/AIDS pandemic.

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<sup>8</sup> See UNAIDS, "Fact Sheet," 2003, [http://siteresources.worldbank.org/INTEA/PREGTOPHIVAIDS/Resources/fs\\_stigma\\_discrimination\\_en\\_pdf.pdf](http://siteresources.worldbank.org/INTEA/PREGTOPHIVAIDS/Resources/fs_stigma_discrimination_en_pdf.pdf). Cf. also UNAIDS, "Miles to Go: Closing Gaps Breaking Barriers Righting Injustices," 2018, [http://www.unaids.org/sites/default/files/media\\_asset/miles-to-go\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/miles-to-go_en.pdf).

<sup>9</sup> M. W. Dube, "Towards Multi Sectoral Teaching in a Time of HIV/AIDS," in *HIV/AIDS: The Curriculum; Methods of Integrating HIV/AIDS in Theological Programmes*, ed. M. W. Dube (Geneva: WCC, 2003): vi–xii.

<sup>10</sup> L. Brown, L. Trujillo, and K. Macintyre, *Interventions to Reduce HIV/AIDS Stigma: What Have We Learned?* (New Orleans: Horizons Programme, Tulane School of Public Health and Tropical Medicine, 2001).

<sup>11</sup> Ibid.

Within the African context, life is perceived holistically. An individual is perceived to be in a continuous relationship with his community and the supernatural world, both of which have a distinct influence on the individual's life. The joys, struggles, and sufferings are interpreted within these relationship networks, and there ought to be an equilibrium between individuals and their environment. Sickness and suffering disturb this balance. Joseph Simbaya discovered that since HIV/AIDS became common in the late 1980s and 1990s, and as a result of stigmatization, secrecy, privacy, and individualism replaced the typical African culture of counseling in families in crisis times.<sup>12</sup>

The supernatural perception of sickness and suffering poses a pastoral care challenge in Africa, and the pastoral counselor may need to interpret God in terms of these supernatural perceptions and experiences.<sup>13</sup> Stigmatization and fear of disclosure pose huge challenges for pastoral care in Africa.

Some define resilience as a process of adapting successfully in the context of a threatening situation.<sup>14</sup> We understand resilience as a person's ability to bounce back and learn from adverse experiences to such an extent that they have gained the ability to reach out to others in adverse experiences, comfort them, and help them deal with their challenges. Second Corinthians 1:3–4 describes resilience from a Christian perspective: "Blessed be our God and Father, who comforts us in all our affliction, so that we may be able to comfort those who are in any affliction, with the comfort with which we ourselves are comforted by God."

We hope to add to the present discussion on stigmatization by investigating the influence of shame, guilt, fear, and witchcraft beliefs on HIV/AIDS interventions and doing so by looking at features of the African worldview and culture and the relevance of the Christian gospel.

In the South African context, the following negative effects and observations could be added to the problems referred to above:

Fear of witchcraft still prevents open and honest discussion and much-needed counseling for patients and their relatives. Adam Ashforth convincingly argues—based on field and statistical research—that as the AIDS epidemic sweeps through this part of Africa, *isidliso* ("sickness"

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<sup>12</sup> Joseph Simbaya, "An Ethnography of HIV/AIDS Care Transformation in Zambia" (PhD diss., University of Amsterdam, 2016).

<sup>13</sup> V. Magezi, "Pastoral Counselling: Towards a Diagnostic and Interpretational Approach in Africa," *In die Skriflig* 41.4 (2007): 655–72.

<sup>14</sup> S. E. Germann, "I Am a Hero—Orphans in Child-Headed Households and Resilience," *Commonwealth Youth and Development* 3.2 (2005): 39–53.

caused by witchcraft spells and ancestral spirits<sup>15</sup>) is the word that comes to mind among many in the epidemic's path.<sup>16</sup> Thus, in such cases, the HIV/AIDS epidemic becomes also an epidemic of witchcraft. When suspicions of witchcraft are in play in a community, problems of illness and death can transform matters of public health into questions of public power, questions relating to the identification and punishment of persons deemed responsible for bringing misfortune to the community—that is, witches. In addition is the following:

- Traditional healers sometimes exploit the fears of PLHA and impoverish them and their families and endanger their lives.
- PLHA are marginalized from communities and often suffer in loneliness without care.
- Vulnerable children and orphans cannot express their grief or receive proper Christian bereavement and resilience counseling because of the stigma surrounding the illness and death of their parents.
- Sex education and HIV/AIDS education is hampered because of the shame surrounding HIV/AIDS.
- Judgment and indifference, rather than compassion, continue to characterize the church's response to HIV/AIDS.

R. Parker and P. Aggleton have examined the influence of the broader cultural contexts in AIDS-related stigma and accompanying denial and concluded that stigma could not be fully examined outside the cultural contexts that give it meaning.<sup>17</sup> A three-year project funded by UNAIDS to develop a new direction for HIV/AIDS prevention in Africa, Asia, Latin America, and the Caribbean recommended culture as one of the five key

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<sup>15</sup> Zacharias Kotzé writes, "As an illness thought to be caused by witchcraft, *isidliso* slowly consumes the victim while causing all manner of hardship and pain along the way, such as friendships fading, lovers leaving, and jobs disappearing. The term is used to refer to a variety of symptoms affecting the lungs, stomach, digestive tract, or that leads to a slow wasting illness. Although sometimes attributed to *muthi*, *isidliso* is directed against victims by means of intention rather than the chemistry associated with toxic substances. For example, it is believed that a witch can place *muthi* in food consumed in a dream. However, this is only one of the many techniques of the witch who can use incantations, words, rituals, and magic objects to inflict harm on a victim." Zacharias Kotzé, "A Comparison of the Witchcraft Is Poison Metaphor in Soweto and Selected Old Testament Passages," *Old Testament Essays* (New Series) 24.3 (2011): 612–27.

<sup>16</sup> Adam Ashforth, "AIDS, Witchcraft, and the Problem of Power in Post-Apartheid South Africa," (Unpublished paper, 2001), <http://www.sss.ias.edu/publications/occasional.php>.

<sup>17</sup> R. Parker and P. Aggleton, "HIV/AIDS Related Stigma and Discrimination: A Conceptual Framework and Implications for Action," *Social Science and Medicine* 57 (2003): 13–24.

domains in HIV/AIDS prevention, care, and support, particularly in Africa.<sup>18</sup> V. Magezi rightfully states that a pastoral counselor in Africa, to make a meaningful diagnosis, should be aware of the crucial role that the African worldview plays.<sup>19</sup> The worldview provides the framework for probing and interpreting the conversation.

### III. *Central Theoretical Argument*

The hypothesis that forms our central theoretical argument is that one of the key aspects of the predominant African worldview in rural and semi-rural South African communities is the shame and fear culture and that Christian approaches to HIV/AIDS counseling and intervention have to be culturally sensitive and relevant to such contexts. We further hypothesize that the key message of the Christian gospel provides clear perspectives from which to deal with fear, shame, and stigmatization and thus may hugely contribute to the 2003 UNAIDS call with regards to stigma and HIV/AIDS: “Live and let live. Help us fight fear, shame, ignorance and injustice worldwide.”<sup>20</sup>

### IV. *Cultural Issues*

#### 1. *Unique Characteristics of the African Worldview and Culture*

Although it is an enormous generalization to speak of “African culture and worldview,” several researchers<sup>21</sup> have identified typical aspects of African culture commonly found on the African continent. Yusufu Turaki summarizes them as follows:

The details of African Traditional Religion vary from region to region, but all variants share five fundamental beliefs: belief in impersonal powers, belief in spirit beings, belief in divinities or gods, belief in a Supreme Being, and belief in a hierarchy of spiritual beings and powers.<sup>22</sup>

<sup>18</sup> UNAIDS, “2008 Report on the Global AIDS Epidemic,” <http://www.unaids.org/en/CountryResponses/Regions/SubSaharanAfrica.asp>.

<sup>19</sup> See Magezi, “Pastoral Counselling,” 655–72.

<sup>20</sup> UNAIDS, “Fact Sheet,” 2003.

<sup>21</sup> John S. Mbiti, *African Religions and Philosophy* (London: Heinemann, 1969); John S. Mbiti, *Concepts of God in Africa* (London: Heinemann, 1970); Yusufu Turaki, *Tribal Gods of Africa* (Jos: Crossroads Media Services, 1997); B. J. Van der Walt, *When African and Western Cultures Meet* (Potchefstroom: Institute for Contemporary Christianity in Africa, 2006); G. Van Rheenen, *Communicating Christ in Animistic Contexts* (Grand Rapids: Baker Book House, 1991); W. O’ Donovan, *Biblical Christianity in African Perspective* (Carlisle: Paternoster, 1995).

<sup>22</sup> Yusufu Turaki, *The Trinity of Sin* (Grand Rapids: Zondervan, 2012), 10. Cf. Jayson Georges, *The 3D Gospel: Ministry in Guilt, Shame, and Fear Cultures* (Kindle Edition: Timē Press, 2017) indicates that groups of people use the moral emotions of guilt, shame, and fear in their



Following John Mbiti, Turaki, L. Nyirongo, and others, B. J. Van der Walt summarizes the uniqueness of African culture over against typical Western culture with the following characteristics:

1. Unique ideas about God: Africans believe that their creator god is far away and not interested in them.
2. Unique worldviews: for Africans, the spiritual world determines the physical world—every visible event has a spiritual cause.
3. Unique views of society: Africans have communalistic views of society as opposed to Western individualistic views.
4. Unique views of and ways of experiencing time: Africans have an event-oriented vision of time that contrasts with the chronological (clock) time of the West.
5. Unique ways of thinking: Africa thinks more holistically, synthetically, while Westerners are more analytically oriented.
6. Unique ways of communication: Africans prefer a more indirect way of communicating and experience the direct way of communication of the West as rude.

Another aspect of the traditional African worldview that has a bearing on the HIV/AIDS issue is the *idea of the limited good*. J. A. Van Rooy has pointed out that the presupposition of the idea of limited cosmic good explains many phenomena and aspects of African spirituality.<sup>23</sup> “Good” does not refer here primarily to goods in the sense of material possessions but rather of vital force, power, prestige, influence, health, and good luck.<sup>24</sup>

## 2. *Guilt, Shame, Fear, and Culture*

According to Van der Walt, the first researcher who used the model of guilt and shame to understand Western and non-Western cultures was Ruth Benedict (1946), who applied it to American and Japanese cultures.<sup>25</sup> Since then, many have used her model and worked it out in more detail. Van der Walt follows R. Lienard in stating that it is more accurate to speak about a contrast between an “honour orientation” and a “justice orientation.”<sup>26</sup> Andrew Mbuvi also argues that African theology should be developed from the perspective of honor and shame.<sup>27</sup> Only after an offense against the

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worldview to distribute resources among themselves. Phillipus J. (Flip) Buys, “Corruption, Bribery, African Concepts of God, and the Gospel,” *Unio cum Christo* 5.2 (October 2019): 168.

<sup>23</sup> J. A. Van Rooy, “The Christian Gospel as a Basis for Escape from Poverty in Africa,” *In die Skriflig* 33.2 (1999): 235–53.

<sup>24</sup> Van der Walt, *When African and Western Cultures Meet*.

<sup>25</sup> *Ibid.*, 6.

<sup>26</sup> R. Lienard, “A ‘Good Conscience’: Differences between Honour and Justice Orientation,” *Missiology* 29.2 (April 2001): 131–41.

<sup>27</sup> Andrew M. Mbuvi, “African Theology from the Perspective of Honor and Shame,” in *The Urban Face of Mission; Ministering the Gospel in a Diverse and Changing World*, ed. Harvie M. Conn, Manuel Ortiz, and Susan S. Baker (Phillipsburg, NJ: P&R, 2002), 310.

community is exposed does a person in an honor-oriented culture experience shame, whereas in a justice-oriented society, someone experiences guilt after transgressing the norms, even when it has not been exposed or is not known by the community. In the first instance, the honor must be restored by the community; in the other, care must be taken that justice be done.

Hannes Wiher's well-documented work provides a treasure of information. He documents in detail and analyzes the origin and development of this approach in a variety of disciplines (psychology, cultural anthropology, philosophy, theology, and missiology). Further, in a chapter on shame and guilt in the Bible, he deals with a wide variety of biblical examples, perspectives, and insights.<sup>28</sup> He uses biblical perspectives to analyze Western and African cultures critically, and his intimate knowledge of the African context enhances the book's value. (He has served as a medical doctor and lecturer in theology for more than twenty years in Conakry, Guinea.) He starts with the human conscience, which shapes and influences human existence and culture, though he does not deny that the surrounding culture forms a certain type of conscience in individuals. He does not, however, address the crucial role of fear and witchcraft in the traditional African worldview.

Similarly, Magezi also asserts that the challenge of pastoral diagnosis in Africa is to develop an interpretational frame in which the assessment focuses on interpreting the influence of the complex network of relationships. A "shame-oriented conscience" is linked to honor and status in the community. A "guilt-oriented conscience" is linked to a transgression of norms that a person has accepted as binding.<sup>29</sup>

Jayson Georges notes that guilt, shame, and fear, as well as being cultural criteria for the distribution of goods, are three different cultural responses to sin and so have become the foundation for three types of culture: (1) guilt-innocence cultures, individualistic societies (mostly Western), where people who break the laws are guilty and seek justice or forgiveness to rectify a wrong; (2) shame-honor cultures, collectivistic cultures (common in the East), where people shamed for not fulfilling group expectations seek to restore their honor before the community; and (3) fear-power cultures, animistic (typically tribal or African), where people afraid of evil and harm pursue power over the spirit world through magical rituals.

These three types of culture are like group personalities defining how people view the world. Just as individual people have a personality, cultural

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<sup>28</sup> Hannes Wiher, *Shame and Guilt: A Key to Cross-Cultural Ministry*, Mission Academics 10 (Bonn: Verlag für Kultur und Wissenschaft, 2003), 179–81.

<sup>29</sup> Magezi, "Pastoral Counselling," 661.



groups share a *groupality*, an “organized pattern of behavioral characteristics of a group.”<sup>30</sup> A person’s cultural orientation, or groupality, shapes their worldview, ethics, identity, and notion of salvation even more than their individual personality does. For this reason, awareness of culture types helps us anticipate cultural clashes and communicate the gospel three-dimensionally to the world.<sup>31</sup>

Likewise, Thias Kgatla concludes that

witchcraft discourse in South Africa has increasingly permeated all social structures, thereby becoming a real threat to the process of reconstruction and development. The neglect of witchcraft accusations and their resultant consequences can cause the country to lose all it gained as a result of the liberation struggle.<sup>32</sup>

These categories, as Wiher, Van der Walt, Magezi, and Georges repeatedly state, are not watertight. Measures of guilt, shame, and fear are present in every culture. In general, people have mixed conscience orientations with a tendency toward the dominance of either guilt, shame, or fear. In other words, people may have a strong guilt orientation combined with a weak shame and fear orientation or the other way around. Therefore, one cultural group cannot think that another (foreign) culture does not have a conscience—they merely have a different kind of conscience. In personal interaction with the people in the KwaNdebele region in South Africa and personal pastoral interaction with many people infected with and affected by HIV, I think that most people have a predominantly fear but also a shame cultural orientation.

### **3. African Communalism, Shame, and Fear Orientation**

Several African scholars have concluded that African culture and worldview are embedded in a communalistic understanding of society. L. Nyirongo, along with Mbiti, asserts that a person’s individuality is fulfilled through his or her participation in the tribe.<sup>33</sup> The individual is not a person until he or she has been accepted by the community. Africans believe that everything that exists is in an organic relation to everything else that exists, including

<sup>30</sup> Cf. “Understanding Guilt, Shame, and Fear Cultures,” *HonorShame Resources for Global Ministry*, 2021, <https://honorshame.com/understanding-guilt-shame-fear-cultures/>.

<sup>31</sup> Georges, *The 3D Gospel*, 129.

<sup>32</sup> S. Thias Kgatla, “Moloi Ga A Na Mmala (A Witch Has No Colour): A Socio-Religious Study of Witchcraft Accusations in the Northern Province of South Africa” (PhD diss., University of South Africa, 2000), iii.

<sup>33</sup> L. Nyirongo, *The Gods of Africa or the God of the Bible? African Traditional Religion in Biblical Perspective* (Potchefstroom: Institute for Reformational Studies, 1997), 102; Mbiti, *African Religions and Philosophy*, 108.

how human beings interact. Turaki puts it this way: “People are not individuals, living in a state of independence, but are part of a community, living in relationships and interdependence.”<sup>34</sup> G. Setiloane adds,

In traditional life, the individual does not and cannot exist alone except corporately. He owes his existence to other people, including those of the past generations and his contemporaries .... The community must make, create or produce the individual; for the individual depends on the corporate group. Physical birth is not enough. ... I am because we are, and since we are, therefore I am.<sup>35</sup>

In Africa, the issue of *human relationships* is a matter of primary importance; relationships determine ethical norms, modes of conduct, and principles of education.

In communalistic societies, the community thus is of the utmost importance. Therefore, a very high premium is placed on interpersonal relationships and harmony among people. It is vital to emphasize that what the *community does to the individual* matters most, not the individual’s view of himself or herself. This identity is gained step by step, through various rites, but the initiation ceremony truly incorporates the individual into the social group. Without this transition, one remains a child, an outsider, a “half” person, or a nobody. Individuals will not fully enjoy the privileges of the community on their own. The community sets the norm and ideal for human existence. Consequently, it is all-important to be honored and accepted by one’s own people.

Turaki makes it clear that fear of spiritual powers and of the unpredictable contingencies of life before which humans are powerless is fundamental to the African psyche.

Traditional religious rites, rituals, ceremonies, sacrifices, and offerings provide only temporary comfort. Indeed, they often enhance fear, rather than reduce it, especially when they have to be repeated time after time.<sup>36</sup>

The ethical code and education of African people reflect the communal character of moral principles. Characteristics inculcated in children in traditional education are those that facilitate human relationships and prevent disunity in the community. These include respect for authority and seniority, humility, modesty, politeness, friendliness, willingness to compromise, sharing with others what one acquires, helping people in need, and hospitality. Harmony and acceptance mean honor and lead to a

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<sup>34</sup> Turaki, *The Trinity of Sin*, 19.

<sup>35</sup> G. M. Setiloane, *The Image of God among the Sotho Tswana* (Rotterdam: A. Balkema, 1976); G. M. Setiloane, *African Theology* (Johannesburg: Skotaville, 1986), 55.

<sup>36</sup> Turaki, *The Trinity of Sin*, 14.

good conscience. Not meeting the ideals of one's group gives rise to a bad conscience; when such a shortcoming is discovered, a person subsequently loses status and honor. To be marginalized by one's group then leads to a personal identity crisis.

In an individualistic culture, living correctly (obedience to internalized norms) leads to a good conscience. Transgression of these norms gives rise to a painful feeling of guilt (even psychological depression) or a bad conscience. Someone who has committed an offense in a communalistic culture is never directly called to account for it in the presence of others—and definitely not someone with high status—since such an accusation tarnishes the offender's good reputation and as such is an insult even more serious than murder. Sanctions by the community thus take place more indirectly in such forms as gossip, stories, proverbs, parables, dramas, and other symbolic actions.

In summary, the difference between a shame-oriented conscience culture and a guilt-oriented conscience culture is as follows: In the case of an individualistic, guilt-oriented conscience culture, the transgression of norms leads to a feeling of guilt and fear of punishment. In more communalistic cultures, failure to meet the ideals of society leads to fear of rejection and, when it is discovered, to a feeling of disgrace or shame.<sup>37</sup>

In their holistic approach, traditional Africans believe that they can deal with the fear of being marginalized by accessing spirit power by consulting specialists who have access to these powers through rituals, divination, ceremonies, sacrifices, incantations, symbolism, witchcraft, sorcery, charms, fetishes, and white and black magic.<sup>38</sup>

#### ***4. Implications of the High Sensitivity for the Opinion of the Group***

The feeling of shame is a very serious matter with far-reaching consequences because it hits the individual hard and disturbs him or her deeply. It leads to a loss of status, low self-image, a feeling of inferiority, little or no confidence, uncertainty, and deep depression that may even lead to suicide. Some, instead of hiding or removing themselves from the community, may instead be stirred by great anger and led to strive to avenge themselves on those who publicized their offense and thus caused them to lose face and be disgraced in the community.

Stating it in the first person, the whole process can be summarized as follows: (1) I fear that my offense will be discovered; (2) my being discovered

<sup>37</sup> Cf. Wiher, *Shame and Guilt*, 60.

<sup>38</sup> Turaki, *The Trinity of Sin*, 23.

would change to (3) shame (4) because I have failed to meet (5) my duties according to the ideals of my community. (6) Consequently, I have lost esteem/honor and (7) am open to ridicule, contempt, and rejection by my own people. I thus need to either (8) withdraw or hide myself and (9) even clear away myself completely (suicide) or (10) avenge myself on those who brought shame on me. Consultation of specialists like witchdoctors or wizards with access to a wide range of spiritual powers is seen as a crucial means to solve life challenges.

Ashforth also explains how suspicion of witchcraft aggravates painful feelings of shame through marginalization from the communal and social group. He relates his finding in Soweto that no person who is afraid or suspects that they are ill because they have been cursed wants to publicize their fear or suspicion. Such publicity would not only be embarrassing but also dangerous because it would enable the witch who has caused the sickness to become aware of any efforts made to counteract his or her occult assault. Such knowledge allows the witch to redouble his or her efforts or seek out other avenues of attack; for this reason, traditional healers typically enjoin their clients to silence.<sup>39</sup> The experience of our home-based care workers in the squatter villages in KwaNdebele is that they are often called aside and whispered to that a relative or friend also has had “caffir poison” (referring to suspected witchcraft as the cause of someone being infected with HIV).

### ***5. Difficulties in Giving and Receiving Forgiveness***

In shame cultures, replacing the pain of a guilty conscience with the restored joy of a good conscience is a complicated process. Both repentance and forgiveness are problematic.<sup>40</sup>

Firstly, acknowledging guilt and repentance (confession) is difficult since those guilty further disgrace themselves. Therefore, the offense, especially in the case of an important person, is preferably hidden as long as possible. If the offense can no longer be hidden (usually a result of gossip), the guilty person will not confess guilt but make use of a mediator (someone who does not share the shame) to acknowledge the offense publicly and negotiate reconciliation. Those thought to be wayward are asked to look within to find out where they have broken harmony or relationships and are then told to do restitution by offering gifts and sacrifices to restore peace and find

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<sup>39</sup> Ashforth, “AIDS, Witchcraft, and the Problem of Power in Post-Apartheid South Africa,” 13.

<sup>40</sup> Cf. Wiher, *Shame and Guilt*, 151.

forgiveness. In the traditional worldview, sin is a lack of harmony or a broken relationship with the ancestors, the spirits, and the natural world. Atonement is the way to restore harmony and relationships.<sup>41</sup>

Secondly, it is difficult after guilt has been acknowledged not only to offer forgiveness but even to accept forgiveness. For if the offended person forgives the guilty one, they are implying that the guilty one is a bad person. And for the guilty, accepting forgiveness is tantamount to acknowledging the superiority of the other person!

Since the process of reconciliation can be so laborious in shame cultures, it is often easier to sweep an offense under the rug and keep silent about it in the hope of eventually forgetting it. The cultural trait of just keeping silent about sensitive issues aggravates stigmatization.

## **6. Fear, Shame, and HIV/AIDS Infected and Affected People**

Based on extensive research done in Soweto, Ashforth expresses the issue in strong terms:

To talk of a “stigma” attached to AIDS in contemporary South Africa without understanding the witchcraft dimensions is, in my view, to risk misunderstanding both the nature of community power relations and the impact of the epidemic.<sup>42</sup>

The idea of the limited good stimulates and confirms belief in witchcraft. As soon as a person prospers because they are somewhat more hardworking than their neighbors, that person is almost automatically suspected of drawing away the life force of another through witchcraft—that is what black magic amounts to. If one man’s children by different wives differ in health, prosperity, scholastic, and other achievements, the less fortunate ones will naturally suspect the others of witchcraft.<sup>43</sup>

In our daily encounters with HIV/AIDS patients in KwaNdebele, we often found patients marginalized from the community and left without any care because they were suspected of being bewitched. Being in touch with them is considered dangerous because the evil spirits of bad luck might affect the caregiver as well. That made it extremely difficult to break through the stigmas surrounding AIDS.

Because of the vital importance of group identity for the experience of personal identity, the fear of being marginalized and losing one’s place

<sup>41</sup> Cf. Turaki, *The Trinity of Sin*, 17.

<sup>42</sup> Ashforth, “AIDS, Witchcraft, and the Problem of Power in Post-Apartheid South Africa,” 12.

<sup>43</sup> Van Rooy, “The Christian Gospel as a Basis for Escape from Poverty in Africa.”

within a group leads many PLHA rather to want to die than to speak openly about their status. When their condition cannot be hidden any longer, it is often too late for them to receive antiretroviral treatment.

The strong beliefs in the healing powers of wizards and witchdoctors also often prove detrimental to patients and their families. Families already impoverished because of a lack of income as a result of the disease may slaughter their last goat or cow or chicken to pay for the services of a *sangoma* to win the healing power of ancestral spirits in cleansing rituals. Ashforth has convincingly shown that “traditional healing” in South Africa is usually more expensive than Western medical treatment.<sup>44</sup> Some *sangomas* convey that they possess traditional healing medicines or potions that can heal AIDS or at least raise the CD4<sup>45</sup> count levels of terminally ill patients. Patients and their relatives may then sometimes get into deep debt buying witchcraft potions. We have seen traditional healers throwing sand or dirt on patients’ open bedsores or wounds or encouraging them to replace their use of anti-retroviral medicine with traditional laxatives that cause diarrhea and death.

The idea of the limited good also explains the strong feeling of obligation to reciprocity, repaying benefits with other benefits, as practiced in customs of bride price or loans and gifts. This practice is then also applied to ancestors. The widespread beliefs in the power of ancestral spirits to guarantee health, wealth, and happiness lead to very elaborate funeral rituals. Thus, many Africans in rural areas bury their economic future with these expensive funeral rites. In a rural area like KwaNdebele, funeral parlors are mushrooming, and such businesses are flourishing.

People seem to fear that the group would suspect them of witchcraft or marginalize or ridicule them if they do not organize a “proper” (large-scale) funeral.

Shame is the emotional pain that comes upon the discovery of a transgression of God’s laws or biblical or social norms for morality for which the perpetrator has previously felt no pangs of conscience. As long as a wrong is hidden and unspoken, nobody feels badly about it. This pattern sometimes leads to people fearing disapproval from their families or tribe more than they fear God’s wrath over sin. In such cultures, communities are extremely vulnerable to peer group pressure. In fact, one must even tell lies just to avoid offending one’s people. Someone’s consciousness of the shame and

<sup>44</sup> Ashforth, “AIDS, Witchcraft, and the Problem of Power in Post-Apartheid South Africa,” 14.

<sup>45</sup> CD4 is a type of immune cell that stimulates killer T cells, macrophages, and B cells that make immune responses. A CD4-positive T lymphocyte is a type of white blood cell and a type of lymphocyte also called a “helper T cell.”



disappointment experienced by one's family—especially the elders and ancestral spirits—is more painful than the fear of God's wrath. These various aspects of the shame culture make it extremely hard to break through the stigmas around HIV/AIDS.

## **V. *The Christian Gospel Removes Guilt, Shame, and Fear***

Wiher gives an elaborate discussion of guilt-oriented and shame-oriented consciences in light of the Bible.<sup>46</sup>

- After the fall, Adam and Eve were ashamed and tried to hide from God. God restores their personal relations with himself and covers their shame (Gen 3).
- God forgives the iniquity of his people and covers all their sins (Ps 85:2).
- “Love and faithfulness meet together; righteousness and peace kiss each other” (Ps 85:11 NIV).

Most Christian theologians in the West interpret Christ's atoning death on the cross in the New Testament solely from the perspective of a guilt-oriented conscience. Christ paid for or made good in our place the guilt of our disobedience to God's commandments. Wiher, however, repeatedly shows that this is a one-sided understanding of the cross.<sup>47</sup>

Similarly, Georges explains that the gospel is a multifaceted diamond and that God wants people in all cultures to experience his complete salvation;<sup>48</sup> Western Christianity, however, emphasizes only one of the gospel's facets. Georges explains that “the unsearchable riches of Christ” (Eph 3:8) involve each of the three components of salvation. First, he takes away guilt: “in him we have redemption through his blood, the forgiveness of sins” (1:7a). Second, he takes away shame: “when we were dead in transgressions” (2:5), in love God predestined us to be adopted as his sons through Jesus Christ” (1:5) so that we are “no longer foreigners and aliens but fellow citizens with God's people and members of God's household” (2:19, cf. 2:12–13). Third, he takes away fear: the fear-power emotions are addressed in that God's “power is like the working of his mighty strength, which he exerted in Christ when he raised him from the dead and seated him at his right hand in the heavenly realms, far above all rule and authority, power and dominion” (1:19–21); therefore, Christians can be “strong in the Lord and in his mighty power and put on the full armor of God so that [they] can take [their] stand

<sup>46</sup> Ibid., 179–281.

<sup>47</sup> Ibid, 151.

<sup>48</sup> Georges, *The 3D Gospel*, 158–60.

against the devil's schemes" (6:10–11). The three aspects of salvation also emerge from Paul's central prayer: "I pray that the eyes of your heart may be enlightened in order that you may know the hope to which he has called you, the riches of his glorious inheritance in the saints, and his incomparably great power for us who believe" (1:18–19).

Finally, though the gospel always remains an indivisible whole, examining the facets individually provides a more complete understanding of salvation. Reading Ephesians three-dimensionally may help Christians to perceive fully "the riches of God's grace that he lavished on us with all wisdom and understanding" (1:7–8).

Wiher also shows through numerous examples how different Bible characters accommodate to the particular conscience orientations of their audiences. Christ himself approaches Nicodemus, a (guilt-oriented) man of the law, directly (cf. John 3:1–21). But in the following chapter (John 4:1–42), he approaches the Samaritan woman (a shame-oriented person, rejected by her own community) first in a subtle, indirect way before asking her an outright question about her husband. After careful analysis of a wealth of biblical material, Wiher convincingly concludes that the word of God does not choose between cultures but prefers an orientation that balances guilt and shame. In our relationship to God and our fellow men and women, and with other people, we have to live honorably (in love) so as not to act shamefully; and in our relationship to God's norms (which have greater authority than our social values), we have to live correctly (in obedience) not to be guilty.

This biblical balance, however, does not mean a mere compromise between various conscience orientations. Apart from finding points of contact, Christ also criticizes. He bluntly rejects the legalism of the guilt-ridden Pharisees because they have forgotten the most important thing—love. Likewise, he cannot accept the ordinary people's admiration for status, honor, and esteem (typical of a shame conscience) but calls them (including his own disciples) to humility and to regard others more highly than themselves (cf. Matt 23:12; Phil 2:3).

## **VI. *Evangelical Churches and the HIV/AIDS Crisis***

From an evangelical faith perspective, we offer the following solutions for consideration to living and preaching the gospel to those dealing with HIV/AIDS.

First, Evangelicals believe that the gospel is the power unto salvation (Rom 1:16). It is also the power for the transformation of lives and communities

(Rom 12:1–2). It has unmatched power to bring about the end of AIDS stigmatization.

Second, if the evangelical church cares for the sick and the dying, comforts the orphan and widow, shares its message of redemption, victory over all evil spirits, and transformation, disciples its members, and works for justice, then the worth and truth of the gospel of Jesus Christ will shine like a light on a hill, and the nations will stream toward it (cf. Isa 60:3; Rev 21:24).

Third, holistic mission and ministry can spring only from a church that is composed of reconciled believers living from grace, forgiveness, and assurance that shame is covered and taken away. Being assured of access to the power of the Holy Spirit, church members need to work toward creating an environment of hope and spiritual transformation in the midst of desperate suffering, poverty, fear, and despair.

Fourth, believers from the diverse classes and races of a local village or region must unite in sacrificial fellowship and service to ensure that the spiritual, physical, and emotional needs of the people in the community are met and to make God's tangible love for the poor and suffering a reality. The church ought to work hard to be a place where everyone, including the poor and PLHA and their affected relatives feel welcome and valued. Corporate worship, small group ministry, and culturally appropriate outreach are vital in a Christian response to AIDS.

Fifth, it is absolutely necessary to develop indigenous leadership. We must encourage and develop community people and leaders to bring spiritual, moral, and economic renewal to their communities. This task is the work of holistic disciple-making where holistic ministry implies that the church provides servant leadership in a community, and models healthy Christian lifestyles.

## **Conclusion**

Evangelical Christians ought to recognize and affirm that all people are made in the image of God and that all Christians are sinners saved by grace alone. All people are equal and have innate value, whether they are young, aged, disabled, or illiterate. Living by grace alone in the power of the Holy Spirit will provide not only the strength to forgive one another as God has forgiven us in Christ (Eph 4:32) but also the love that covers a multitude of sins (1 John 5:20). Also, it will help us realize that as children of God we have overcome evil spirits, "for he who is in you is greater than he who is in the world" (1 John 4:4–5).

We should also affirm that all people have a vocation. God has a calling for each person's life that requires them to be an agent—and not just a client or a lifelong beggar. Some of our best workers at Mukhanyo Community Development Centre were PLHA who had come to a saving knowledge of God's grace in Christ, including forgiveness of our sins, the covering of our shame, and the filling of the Holy Spirit with power for healthy lives (through, among other things, faithfully taking antiretroviral medication). PLHA may render the best service to other people infected and affected by HIV/AIDS.

In a Christian response to AIDS, we ought to recognize that all people have gifts and talents that they can use to the glory of God both in the church and in the community.

A Christian response to AIDS should emphasize as well that labor and employment affirm dignity and contribute to our identity. Not only do we work to earn money, but work is also a fundamental way to participate in the activity of God in the world.

Evangelical Christians believe in a personal relationship with God as well as the communion of the saints, the fellowship of believers, and the common call to serve humanity around us with compassion. In this regard, the African concept of *ubuntu*<sup>49</sup> may be enriched with the biblical concept of *koinonia*. Within this paradigm, it is possible to accommodate those who have grown up in predominantly shame-oriented conscience cultures and to seek solutions for challenges through communal action.

The only way to overcome fears of witchcraft is a firm knowledge and an overwhelming conviction that Christ not only forgave our sins when he died on the cross but also disarmed all spiritual powers and authorities and triumphed over them (Col 3:15).<sup>50</sup> An experiential understanding that all power in heaven and on earth has been given to Christ (Matt 28:18) drives away fear and instills assurance that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord (Rom 8:38–39).

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<sup>49</sup> *Ubuntu* refers to behaving well towards others or acting in ways that benefit the community. Such acts could be as simple as helping a stranger in need or much more complex ways of relating to others. A person who behaves in these ways has *ubuntu*.

<sup>50</sup> Cf. M. S. Wolford, *Free Indeed from Sorcery Bondage: A Proven Scriptural Ministry* (Cleveland, TN: Pathway Press, 1999).