HIV&AIDS CURRICULUM

FOR THEOLOGICAL EDUCATION BY EXTENSION INSTITUTIONS IN AFRICA



Accompanied by ten HIV&AIDS-sensitive education by extension modules

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For Theological Education by Extension (TEE) Institutions in Africa

TABLE OF CONTENTS

FOREWORD	4
INTRODUCTION: HIV&AIDS EPIDEMICS AND THE CHURCH	7
RATIONALE FOR THE CURRICULUM	11
THE CURRICULUM AND TEE PROGRAMS	12
CURRICULUM GOAL AND AIMS	13
CURRICULUM FEATURES	14
MODE OF DELIVERY	15
ENTRY REQUIREMENTS	15
TARGET GROVPS	16
DURATION AND LEVEL	16
MODE OF LEARNER ASSESSMENT	16
PROGRAMME CONTENT	17
CONTENT OUTLINE	18
CURRICULUM DESIGN	21
TEACHING - LESSON METHODS	45

HIV&AIDS CURRICULUM FOR THEOLOGICAL EDUCATION BY EXTENTION INSTITUTIONS IN AFRICA

FOREWORD

This curriculum is part of the church's efforts to combat the HIV&AIDS epidemic. Since the discovery of HIV&AIDS, many churches have joined other actors in offering their unique resources to fight against the epidemic. Though there have been instances, especially in the early stages of the struggle against HIV&AIDS, when churches contributed to re-enforcing myths, misinformation, enhancing fear and promoting stigma, they have largely turned to play an *increasingly positive role*. Realising the complex nature of the epidemic, churches' efforts have been multi-dimensional, ranging from setting up home-based care and support, day-care centres for orphans, training of counsellors, training of trainers, initiating appropriate awareness and information campaigns, collaborating with other stakeholders and adjusting their various programs to respond to the HIV&AIDS context.

One such area of program review has been in the field of theological training and Christian education. In 2001, the World Council of Churches, Map International, UNAIDS and African theologians collaborated to produce the *HIV&AIDS Curriculum for Theological Institutions in Africa*. The latter sought to assist residential theological institutions to mainstream HIV&AIDS in their programs. The Ecumenical HIV&AIDS Initiative in Africa (EHAIA) became responsible for assisting both the academic and church institutions to also mainstream HIV&AIDS in their programs. During this process, it became evident that there are other institutions that are playing a key role in theological and Christian education: among them Theological Education by Extension (henceforth, TEE). Luckily, in 2002, when the World Council of Churches organised "The Journey of Hope in Africa" conference, they gathered people from institutions of theological education and ecumenical formation, including TEE. Representatives of the latter took the opportunity to meet and seek ways of

working together on specific programs, such as HIV&AIDS. For their way forward, TEE representatives' committed themselves to: "Sensitising people through training on overcoming violence, HIV&AIDS, ecology [and] poverty". The WCC Theological Education Programme took the TEE's commitment seriously and included them in their HIV&AIDS training of trainers' (TOT) workshops, run by the EHAIA theological consultant.

In 2004, the first ever continental HIV&AIDS training of trainers' workshop for Theological Education by Extension Institutions in Africa was held from 1st to 6th July at Jumuia Conference and Country Homes, in Limuru, Kenya. The workshop brought together 37 participants from various TEE programs in Africa. The aims of the workshop were to:

- 1. Review the *HIV&AIDS Curriculum for Theological Institutions in Africa.* The latter was produced to assist residential theological institutions and did not adequately address the long-distance and non-residential needs of TEEs.
- 2. Train TEE educators on mainstreaming HIV&AIDS in their teaching and programs.

At the end of the HIV&AIDS TOT workshop, the TEE participants made resolutions for the way forward, which included a request to EHAIA to:

- Use the reviews from the participants to produce a new HIV&AIDS Curriculum for TEE Institutions in Africa.
- Produce ten HIV&AIDS sensitive modules for long-distance learning and training to accompany the new TEE curriculum and to effectively enable the implementation of the latter.

This curriculum is, therefore, a product of the above resolutions of the TEE TOT of 2004. It reflects TEE's commitment towards the HIV&AIDS struggle through mainstreaming HIV&AIDS in their programs and lessons. The TEE curriculum has ten modules, which are grouped in four categories: Part 1 has two modules which deal with "Facts about HIV&AIDS"; part 2 has three modules addressing, "The Bible and African Indigenous Religions in the HIV&AIDS Context;" part 3 has three modules, dealing with "The Theology of HIV&AIDS"; and part 4 has three modules, dealing with "Applied Theology in the HIV&AIDS Context". Apart from the accompanying modules, the TEE curriculum will also greatly benefit from earlier resources such as *HIV&AIDS and the Curriculum: Methods of Integrating HIV/AIDS in Theological Programs* and *Africa Praying: A Handbook on HIV/AIDS Sensitive Sermon Guidelines and Liturgy*, which were produced to accompany the *HIV&AIDS Curriculum for Theological Institutions in Africa*.

We are grateful to Musa W. Dube who co-coordinated this whole process; to Seratwa Ntloedibe Kuswani and Kangwa Mabuluki, who used the reviews of the Limuru TEE-TOT to compile this curriculum. We are also grateful to the module writers (Isabel Phiri, Peter Ngure, Sarojini Nadar, Musa W. Dube, Ezra Chitando, Notando Hadebe, Moiseraela P. Dibeela and Paul Leshota) who wrote the ten modules and reviewed the second draft of this curriculum. Other contributors include Lucy Kithome and Nyambura Njoroge, who reviewed the earliest and final drafts of the curriculum respectively. We are also grateful to EHAIA programme for sponsoring the production of these TEE documents.

While this curriculum specifically belongs to the TEE educators, other theological educators and institutions can also use it if they find it useful. With this curriculum and the accompanying modules, TEEs have tools to move forward in an effort to make their programs even more relevant to the churches in Africa by responding to the HIV&AIDS epidemic in an integrated, systematic and informed way.

Rev. Charles Klagba EHAIA Theological Consultant Lome, August 2005.

INTRODUCTION: THE HIV&AIDS EPIDEMIC AND THE CHURCH

AIDS is an extraordinary kind of crisis; it is both an emergency and a longterm development issue. Despite increased funding, political commitment and progress in expanding access to HIV treatment, the AIDS epidemic continues to outpace the global response. No region in the world has been spared. The epidemic remains extremely dynamic, growing and changing character as the virus exploits new opportunities for transmission. Rates of infection are still on the rise in many countries in sub-Saharan Africa (UNAIDS 2004).

The above statement is backed by statistics released by the UNAIDS fact sheet of 4th March 2005, which reveals that by the end of 2004, approximately 39.4 million people worldwide were living with HIV&AIDS. Of this number, 25.4 million (more than 60 per cent) live in sub-Saharan Africa. In recent years there has been an increase in the level of information and awareness available to most people. An increased political involvement in many countries and communities resulting in a relative increase in the amount of resources and efforts put into fighting the epidemic. In spite of this in 2004 alone, 4.9 million new HIV infections occurred worldwide, with approximately 3.1 million of these occurring in sub-Saharan Africa. The critical question is: why does HIV&AIDS continue to be one of the greatest challenges humanity is facing in our time despite concerted efforts to arrest the epidemic?

HIV&AIDS is far from being eradicated, not only because no cure has been discovered, but also because HIV&AIDS is much more than just a disease or a medical condition. HIV is not just about physical immune deficiency, but is also a social immune deficiency epidemic. As Tinyiko S. Maluleke aptly puts it, "The human body is not just a network of nerves and veins with blood flowing in them...inside the human body is to be found the soul, conscience and the metaphorical heart. The HIV upsets much more than the physical immune system—it

affects the psychological, cultural, religious, and economic immune systems. It is at these levels where theology might have more to offer than medicine" (Maluleke 2002). The complexity of the HIV&AIDS epidemic has underlined for the necessity for the various stakeholders, institutions and organisations to be involved in the solution. Churches have emerged as one of the key stakeholders in the fight against HIV&AIDS, by adopting a holistic approach to the epidemic.

The initial response of churches to HIV&AIDS and PLWHA was influenced by selective use and misinterpretation of some passages from the Bible. The latter led to the unfortunate equation of the epidemic with God's punishment and the condemnation of PLWHA as deserving sinners, thus stigmatising and discriminating against them. But a closer look at the ministry of Jesus showed that he healed diseases unconditionally, an action which indicated that he forgave sin. By touching the lepers, Jesus restored them to health and allowed them to return to society. Jesus' actions show that he stands with the poor and socially marginalised. The church has thus quickly realised the need to make effort to move from suspicion, fear and stigma to faith, love and compassion. The church's focus is on wholeness of life, after the focus of the founder, who said, "I have come that they may have life and have it to the full" (John 10:10). The churches have realised that they cannot claim to be serious and committed to their holistic and healing ministry if they do not take the issue of HIV&AIDS seriously. Thus over the years churches have intensified their fight against HIV&AIDS through local congregations, various ecumenical bodies and church denominations.

To give a few highlights, in November 2001, the World Council of Churches (WCC) held a, *Global Consultation on the Ecumenical Response to the challenge of HIV&AIDS in Africa*, in Nairobi, Kenya. At this Global Consultation a plan of action was drafted. The plan of action was the outcome of a dialogue between three groups of partners: first, churches, ecumenical and church-related organisations in Africa; second, churches, ecumenical and church-related organisations in Europe and North America; and, lastly, the World Council of Churches. Through the plan of action, the above-named stakeholders made commitment for an urgent and systematic response to the HIV&AIDS epidemic in the following key areas: theology and ethics, PLWHA, education, training, prevention, care and counselling, support, treatment, advocacy, gender, culture, liturgy, and the mobilisation and use of resources. The consultation emphasised the need for each church and ecumenical organisation to own the plan and ensure its implementation. As part of implementing the plan of action, WCC established Ecumenical HIV&AIDS Initiative in Africa (EHAIA), which consists of a manager, two continental theological consultants and five regional coordinators. EHAIA has embarked on building HIV&AIDS competent churches in Africa through training theologians and church leaders, as well as producing relevant materials.

The Anglican Communion has also been making significant progress in their efforts to fight HIV&AIDS. Besides making the HIV&AIDS one of the key issues in all Bishops' meetings and workshops, in 2001 the Council of Anglican Primates in Africa (CAPA) organised the Boksburg AIDS Conference in South Africa. In the same year, an HIV&AIDS co-coordinating office for CAPA was established. In 2003, an AIDS Conference for all Anglican Provinces in Africa was held in Mukono, Uganda. A similar trend was followed by the Lutheran Communion, which adopted a denominational policy that began to inform programs targeting different groups and their particular needs.

In 2003, the All Africa Conference of Churches (AACC) held its 8th General Assembly in Yaoundé, Cameroon. A full day at the Assembly was dedicated to HIV&AIDS and culminated in the whole assembly adopting *The Covenant Document on HIV/AIDS* as a written statement of the churches' commitment to fight the epidemic. In 2004 the AACC organised a conference for all leaders of churches and church-related institutions, during which the participants received *The Covenant Document on HIV/AIDS*. This conference marked the way forward because it gave the assurance that the church leaders, who are the key people in determining the programs of the church, would support efforts of the churches in all levels.

Through their effort to fight HIV&AIDS, the churches have also realised that combating stigma and discrimination is a critical component. The fight to eliminate stigma, discrimination and HIV&AIDS cannot be done without the involvement of people living with HIV&AIDS (PLWHA). Because of this realisation, churches have begun to fully support the formation of groups such as The African Network of HIV-affected Religious Leaders living with or personally affected by HIV&AIDS

(ANERELA+) and greater involvement of people living with HIV&AIDS (GIPA). Founded in 2002, ANERELA+ is an initiative of African religious leaders—lay or ordained clergy—living with HIV&AIDS or personally affected through nursing or loosing a child, spouse or parents to HIV&AIDS. GIPA, on the other hand, is an international initiative of the Global Network of people living with HIV&AIDS (GNP+). Both ANERELA and GIPA are aimed at combating stigma and discrimination through providing support and an enabling environment for PLWHA to speak about their condition. The organisations encourage PLWHA to take initiative to improve their situation and use their resources to contribute towards all HIV&AIDS programs.

These examples are just a drop in the ocean compared to the amount of work done by various other ecumenical bodies, denominations and the daily activities of local churches. The churches, like the rest of the world, have no illusions that they have done all that is needed to fight the HIV&AIDS epidemic. However, through the efforts highlighted above, the churches have learned lessons that are used to strengthen the continuing fight. HIV&AIDS has challenged the churches to see the need for constant and active social engagement and the need to revisit and reformulate their theologies to focus on social transformation.

The need for constant social engagement in the struggle for justice arises from the well-documented attestation that the HIV&AIDS is a complex multi-faceted epidemic, that thrives on other social epidemics, such as poverty, gender injustice, racism, war, violation of children's rights and cultures of inequality (WCC 1997:14-15; UNDP 2000:26). This has challenged churches to move from creating artificial dichotomies, which often separates human beings into parts: the spiritual and physical. This viewpoint attaches more importance to spiritual needs and less to the physical. The need for churches to revisit and reformulate all their theologies is imperative to enable a constructive engagement in the HIV&AIDS struggle. Accordingly, the efforts of this curriculum and its accompanying modules seek to midwife the churches' theological growth during the HIV&AIDS struggle for healing.

RATIONALE FOR THE CURRICULUM

The imperative to review old theologies and develop new ones cannot be overemphasised. Even though theologising happens at all levels of the churches and by every member of the body of Christ, there are specific institutions and groups within the church established for this task. These are residential theological training institutions, seminaries, colleges and universities, as well as theological education and formation programs. Among the rapidly growing theological education programs is the Theological Education by Extension (TEE). Given that TEE is a diversified form of theological education, which utilises the distance education method, they are growing fast. Learners are not expected to leave their locality to go to residential theological institutions, rather they are able to study within their own context. This has a number of advantages; first, learners are able to study without leaving their jobs and/or families. Second, the cost of education is also reduced because the learners do not require transport, board and lodging services.

Third, one of the main requirements in TEE programs is for the learner to practically apply and relate what is being learned to daily life, struggles and the needs of the people. Thus a deliberate and well-articulated link between theology and daily life is a constant aim. In this process, the theology that emerges is likely to be socially-engaged and relevant. This potential for TEE courses to respond to everyday issues of life is an important feature, which led many TEE programs to mainstream HIV&AIDS into their programs. This, however, was done in isolated ways with many of the TEE programs experiencing difficulty in finding expert help required to formulate curricula and modules to adequately meet the needs of the learners. This curriculum, and its ten accompanying modules, therefore, seeks to enable effective and systematic mainstreaming of HIV&AIDS in TEE programs.

TEEs were started as a small experimental movement in Central America in the 1960's, but they have proved to be one of the key responses to the theological training and formation needs of rapidly growing churches, especially in Africa. TEE compliments and strengthens the residential theological training in seminaries, colleges and universities, since it gives opportunity to those who, due to cost factors or their jobs or family responsibilities, are not able to attend residential training.

THE CURRICULUM AND TEE PROGRAMS

Mainstreaming HIV&AIDS in TEE lessons and programs is a critical and challenging task. It demands commitment from all those concerned with the development and teaching of TEE programs. It requires adjusting the existing TEE curricula and syllabi, re-writing some of the courses and designing complete new ones in order to integrate the HIV&AIDS component. The task also calls for the retraining of tutors and providing additional instructions to local group facilitators. In some TEE programmes it will also require search and acquisition of additional books for the libraries and local group book collection.

The complexity of HIV&AIDS, as an epidemic within other epidemics, demands a curriculum approach that does not simply deal with symptoms. Rather, it must fully interrogate the complex factors behind the spread of HIV&AIDS and earnestly seek effective ways of halting the spread of HIV&AIDS. The curriculum must also articulate the various ways of delivering quality care to PLWHA and the affected, as well as equip teachers, tutors and learners with community leadership and program management skills. In view of this observation, the curriculum will engage the following cross-cutting issues wherever possible in its various modules, units and topics:

- Socio-economic issues (poverty)
- Gender (men and women's power relationships in society)
- Age (the impact of HIV&AIDS on children, youth and the elderly)
- People Living With HIV&AIDS (PLWHA) (prevention and care)
- Stigma (examining its impact and planning to minimise it)
- Cultural perspectives (the advantages and disadvantages of culture)
- Biblical and theological perspectives (to use the churches' resources)
- Liturgical approaches (to speak to the heart and change attitudes)

These were chosen as cross-cutting issues because even though HIV&AIDS infects and affects us all, it is the most powerless and discriminated members of the society such as the poor, women, children, the socially uprooted, sex workers, people of different sexual orientation and those injecting drugs are most likely to be infected and subsequently denied access to quality care. HIV&AIDS stigma hampers prevention, care and unless it is planned for, it often renders many good programs ineffective. There must, therefore, be deliberate efforts to involve PLWHA so that they speak for themselves; from their lived experiences and to help in breaking the stigma and the silence.

To speak to the heart and change attitudes of individuals and communities, there is need to employ the biblical, theological and liturgical resources of those communities. Information campaigns alone have proven inadequate.

GOAL

This curriculum seeks to contribute towards building HIV&AIDS competent churches through mainstreaming HIV&AIDS in TEE programs.

AIMS

This curriculum seeks to:

- **X** Strengthen the churches' and communities' role and capacity to stop the spread of the HIV&AIDS epidemic.
- **X** Train and equip Christian workers and leaders with the necessary knowledge, skills and attitude to serve their churches and society more effectively in the struggle against the HIV&AIDS epidemic.
- **X** Incorporate TEE and distance learning methodology into churches' intervention strategies against the HIV&AIDS epidemic.
- **%** Increase the capacity of tutors, learners and participants of TEE programmes in designing, implementing and monitoring of HIV&AIDS prevention, care and support in their communities of work.
- **%** Assist the churches and their leadership to fully exploit their own internal resources and heritage such as the Bible, theology, positive church traditions and liturgy to fight against HIV&AIDS.
- **%** Promote positive attitudes among the learners towards PLWHA.
- **X** Assist learners to understand the role the church and community should play in meeting the challenges of HIV&AIDS.
- **%** Empower learners with analytical skills to have a deeper understanding of social factors (poverty, gender inequality, class, race, national instability and international relations) behind the spread of HIV&AIDS.
- **%** Create HIV&AIDS prevention systems of care and support in TEE programs and institutions.

CURRICULUM FEATURES

This curriculum is designed to assist tutors, instructors, teachers and lecturers in TEE institutions in Africa to mainstream HIV&AIDS in their training programs. The goal is to produce church leaders and general church membership that are better equipped to serve in its social context and to meet the pressing needs of its people.

As a training tool, it is important to note the following factors in its use and design:

- **X** The curriculum examines some critical issues in the Christian response to HIV&AIDS from multifaceted perspectives.
- **%** The curriculum is meant to be ecumenical.
- **%** The tutor, instructor and the concerned institution may use the curriculum and accompanying modules in whole or in part. The material is designed to be easily incorporated into existing syllabi. Alternatively, the modules and their analytical methods could constitute courses on biblical, theological, counselling, liturgical, gender, African Indigenous Religions (AIR) and administrative approaches to HIV&AIDS.
- **%** The users of this curriculum and the recipients of its teaching will need to interpret and adjust its contents for their own cultural, organisational, church background, economic and educational context within an HIV&AIDS sensitive theological framework.
- **X** The time allocation for the topics covered in different modules and grading system will be left to the discretion of the institution.
- **X** Recommended readings, although provided, will also be left to individual coordinators, tutors, lecturers and their institutions.
- **%** The curriculum is divided into four parts.

- 1. Part I: *Facts about HIV&AIDS* has two modules: Gender, Religion and HIV&AIDS; and Human Sexuality and HIV&AIDS.
- 2. Part II: *The Bible and African Indigenous Religions* (henceforth, AIRs) has three modules: The Hebrew Bible; New Testament; and AIRs.
- Part III: *The Theology of HIV&AIDS* has three modules: Theologies of Life; Compassion; and Healing.
- Part IV: Applied Theology has three modules: HIV&AIDS Pastoral Care; Counselling, Preaching and Liturgy; and Programme Development.

MODE OF DELIVERY

It is expected that this curriculum will be utilised within established TEE programs and institutions. The mode of delivery or method of teaching is therefore by extension or distance learning. The distance mode of teaching and learning encourages selfstudy or a learner-centred approach. However, there is always a need for distance learners to have face-to-face tutorials as an opportunity for them to receive clarification, counselling and support from their tutors. The program will mainly be delivered through print media, in the form of modules and other readings, supported by face-to-face tutorials at designated venues or study centres, which will be decided by different institutions. Other communication technologies such as e-learning, email, online courses, interactive video-conferencing, audio, video, telephone and fax may be used as and when they become available in each institution.

It is necessary that at the first tutorial session, learners are introduced to the course materials in general, and, in subsequent sessions, they will discuss content areas with their tutors and address any difficulties they may be facing with regard to their studies. During residential sessions, learners will also be expected to write supervised tests or examinations as scheduled.

ENTRY REQUIREMENTS

The entry requirements for learners will depend on the institution's requirements and goals. In addition to paper qualification, work experience has to be taken into

consideration. However, institutions have to bear in mind that the group of learners can be very diverse as the educational background of the TEE learners vary greatly.

TARGET GROUPS

The curriculum is meant to assist tutors, instructors, teachers, and lecturers in TEE institutions and programmes in Africa, as well as developers of instructional study materials for distance or extension learning to mainstream HIV&AIDS in their training programmes.

This curriculum (with its accompanying modules) is designed for learners at the diploma level. However, individual institutions, lecturers, tutors, instructors and professors are free to modify the material to suit the different levels of educational training such as certificate, degree, and postgraduate level. It can be used to run short in-service courses for ordained ministers, church workers and the laity. It can also be used as a resource for Sunday school studies. It is our hope that the curriculum will stimulate specialisation in HIV&AIDS issues.

DURATION AND LEVEL

A three year diploma, with a minimum of two years and a maximum of four years.

MODE OF LEARNER ASSESSMENT

Assessment and evaluation of learners' performance will be based on continuous assessment, which will be made up of in-text activities, self-assessment tests, practical tasks, assignments and supervised tests and examinations. Each TEE institution will determine the specifics of the appropriate assessment.

PROGRAMME CONTENT

PART I: Facts about HIV&AIDS

Module 1: Gender, Religion and HIV&AIDS Prevention Module 2: Human Sexuality and HIV&AIDS

PART II: The Bible, AIRS and the HIV&AIDS Context

Module 3: Studying the Hebrew Bible in the HIV&AIDS Context Module 4: Reading the New Testament in the HIV&AIDS Contexts Module 5: African Indigenous Religions and the HIV&AIDS Contexts

PART III: HIV&AIDS Theology

Module 6: A Theology of Life in the HIV&AIDS Era Module 7: A Theology of Compassion in the HIV&AIDS Era Module 8: A Theology of Healing in the HIV&AIDS Era

Part IV: Applied Theology and HIV&AIDS

Module 9: HIV&AIDS Pastoral Care and Counselling Module 10: Preaching and Liturgy in the HIV&AIDS Contexts

CONTENT OUTLINE

MODULE 1: Gender, Religion and HIV&AIDS Prevention

- 1. Facts about HIV&AIDS, Gender and Religion
- 2. HIV&AIDS Prevention and Gender
- 3. HIV&AIDS Prevention and Religion
- 4. HIV&AIDS Stigma and Gender
- 5. HIV&AIDS Stigma and Religion
- 6. HIV&AIDS Care-Giving and Gender
- 7. HIV&AIDS Gendered Care-giving and Religions
- 8. The HIV&AIDS Affected in Gender and Religion Constructions

MODULE 2: Human Sexuality and HIV&AIDS

- 1. Human Sexuality and HIV&AIDS
- 2. Human Sexuality, HIV&AIDS Transmission and Prevention
- 3. Sexually Transmitted Infections (STIs)
- 4. Biblical Views on Human Sexuality
- 5. Social and Cultural Issues on Human Sexuality and HIV&AIDS
- 6. Human Sexuality, Youth, Children, Women and HIV&AIDS
- 7. Contemporary Issues in Human Sexuality and HIV&AIDS

MODULE 3: Studying the Hebrew Bible in the HIV&AIDS Context

- 1. HIV&AIDS and Methods of Reading the Hebrew Bible
- 2. The Pentateuch in the HIV&AIDS Context
- 3. The Historical Books (Ruth and Esther) and Women in the HIV&AIDS Context
- 4. Wisdom (Job) in the HIV&AIDS Context
- 5. The Prophets (Hosea and Ezekiel) in the HIV&AIDS Context

MODULE 4: The New Testament in the HIV&AIDS Context

- 1. HIV&AIDS, the New Testament and Methods of Reading
- 2. The Gospels and the HIV&AIDS Story
- 3. Acts and the HIV&AIDS Story
- 4. The Letters and the HIV&AIDS Story
- 5. Revelations and the HIV&AIDS Story

MODULE 5: African Indigenous Religions (AIRs) and HIV&AIDS

- 1. The Problem of HIV&AIDS
- 2. The Basic Worldview of AIRs
- 3. HIV&AIDS Prevention Strategies
- 4. HIV&AIDS Prevention and AIRs Worldview.
- 5. HIV&AIDS Stigma and AIRs.
- 6. African Indigenous Religions and PLWHA
- 7. HIV&AIDS Affected Groups and AIRs

MODULE 6: A Theology of life and HIV&AIDS

- 1. Theology of Life and HIV&AIDS as an attack on Life
- 2. The Sacredness and Goodness of Life
- 3. Life in Communities and Institutions of Thriving
- 4. HIV&AIDS Stigma and Quality of Life
- 5. HIV&AIDS Care-giving and Life
- 6. Lives of Women and Children in the HIV&AIDS Era
- 7. HIV&AIDS, Death and Resurrection Hope

MODULE 7: A Theology of Compassion in the HIV&AIDS Era

- 1. Compassion, HIV&AIDS Stigma and Discrimination
- 2. The Compassionate God and Christ
- 3. Compassionate Churches and African Communities
- 4. Compassion with and to PLWHA
- 5. Compassion with and to Caregivers, Orphans and Widows
- 6. Compassion as Stewardship in God's Creation

MODULE 8: A Theology of Healing in the HIV&AIDS Context

- 1. Healing in the Context of HIV&AIDS
- 2. Types of Healing
- Theological Models of Healing from the Bible: Hebrews and the New Testament
- 4. The Church as a Healing Community in the HIV&AIDS Context
- 5. Healing in African Indigenous Religions in the HIV&AIDS Context
- 6. Islam and HIV&AIDS

MODULE 9: Counselling and HIV&AIDS Care

- 1. Basic Counselling and HIV&AIDS
- 2. Counselling Theories, Processes and HIV&AIDS
- 3. HIV&AIDS Counselling
- 4. HIV&AIDS Counselling, the Affected and Special Cases
- 5. Legal, Ethical and Policy Dimensions of HIV&AIDS
- 6. HIV&AIDS Counselling and the Church
- 7. Church, Advocacy and HIV&AIDS

MODULE 10: Preaching, Liturgy and HIV&AIDS

- 1. Preaching and Liturgical Challenges in the HIV&AIDS Context
- 2. The Role of Preaching and Liturgy in the HIV&AIDS Context.
- 3. Preaching, Liturgy as Embodying God and Christ in the HIV&AIDS Context.
- 4. Preaching and Liturgy as Embodying PLWHA
- 5. Preaching and Liturgy with Specific Groups
- 6. Non-Traditional Preaching in the HIV&AIDS Context
- 7. Preaching as Prophesy: Challenging the Social Injustice
- 8. Preaching as Group and Public Counselling

CURRICULUM DESIGN

MODULE 1: HIV&AIDS PREVENTION, GENDER AND RELIGION

Module 1 illustrates the link between gender inequality and the spread of HIV. It explores issues related to HIV&AIDS such as prevention, stigma, gender and religion. Module 1 also highlights how religion and culture have contributed to gender imbalances, which in turn has led to a significant increase in the spread of HIV&AIDS and stigma. Nonetheless, module 1 also explores how religion can play a positive role in the prevention of stigma and prevention of HIV&AIDS. The module also underlines the necessity for gender-sensitive HIV&AIDS prevention interventions. Module 1 uses examples from African Indigenous Religions (AIRs) and Christianity.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. Facts about HIV&AIDS, Gender and Religion	1.1. Know facts about HIV&AIDS, gender and religion	 1.1.1. Define HIV&AIDS, gender and religion 1.1.2. Explain the spread of HIV&AIDS 1.1.3. Describe the global nature of HIV&AIDS 1.1.4. Analyse the impact of HIV&AIDS 1.1.5. Discuss HIV&AIDS in relation to social structures 1.1.6. Explain how gender is constructed and maintained in AIRs and Christianity. 1.1.7. Discuss how gender is linked to the HIV&AIDS epidemic 1.1.8. Identify other ways of constructing gender-justice 1.1.9. Analyse the problem of HIV&AIDS in relation to Christianity and AIRs
2. HIV&AIDS Prevention and Gender	.2 Equipped with methods of HIV&AIDS prevention in relation to gender sensitive issues	 2.2.1. Outline HIV&AIDS prevention methods 2.2.2. Analyse how HIV&AIDS prevention is hindered by gender 2.2.3. Identify other ways of building gender justice
3. HIV&AIDS Prevention and Religion	3.3 . Acquire knowledge about how different religions can address HIV&AIDS prevention	 3.3.1. Explain HIV&AIDS prevention in relation to (AIRs) gender constructions 3.3.2. Explain HIV&AIDS prevention in relation to Christian gender constructions 3.3.3. Identify ways of gender empowerment in AIRs and Christianity for HIV&AIDS prevention

4. HIV&AIDS Stigma and Gender	4.4. Equipped to deal with stigma and gender issues in the fight against HIV&AIDS	4.4.2.	Define gendered stigma Explain how gendered stigma hinders HIV&AIDS prevention Identify ways of de-stigmatisation HIV&AIDS prevention
5. HIV&AIDS Stigma and Religions	5.5 . Know how to address stigma issues from various religious traditions	5.5.1.	
		5.5.2.	Identify Christian causes of illness and forms of gender related stigmatization
		5.5.3.	Analyse AIRs forms of de- stigmatizing illness and gender and their application to HIV&AIDS
		5 .5.4 .	Analyse Christian forms of de- stigmatising illness and gender and their application to HIV&AIDS
6. HIV&AIDS Care-Giving and Gender	6.6. Illustrate gender sensitive HIV&AIDS Care giving		Explain HIV&AIDS care-giving Describe how HIV&AIDS care-
	In variabs care giving	5.0.2.	giving is gendered
		5.6.3.	Identify other ways of gender- sensitive HIV&AIDS care-giving
7. HIV&AIDS Care-giving	7.7. Investigate how gendered	7 .7.1 .	Discuss gendered AIRs
and Religions	religious approaches to	772	perspectives of care-giving
	HIV&AIDS care-giving can be neutralised	/./.2.	Discuss gendered Christian perspectives of care-giving
		7.7.3.	Identify AIRs gender-neutral views in relation to HIV&AIDS care
			Identify Christian gender neutral views in relation to HIV&AIDS care
8. The HIV&AIDS Affected	8.8. Deconstruct gendered religious		
in Gender and Religion	approaches to accommodate	8.8.2 .	Discuss the affected children in
Constructions	the HIV&AIDS affected		relation to gender and religion
	people	883	(African and Christianity) issues Discuss the affected women and
		5.0. J.	men in relation to gender and
		1	religion (African and
		1	Christianity) issues
		8.8.4.	
			sensitive to the affected people in AIRs and Christianity

MODULE 2: HUMAN SEXUALITY AND HIV&AIDS

The aim of module 2 is to provide information on human sexuality, sexually transmitted diseases (STDs) and HIV&AIDS. Sexuality is an area that is not openly discussed in African cultures and Christian churches. The tradition of not discussing sexuality however, entrenches the stigma and hampers HIV&AIDS prevention and care. Systematically breaking this silence is essential in the fight against HIV&AIDS. Module 2, therefore, seeks to expose learners to the facts about HIV&AIDS and equip them with skills to openly discuss matters relating to human sexuality. In addition, module 2 addresses issues of various sexual orientations; and women and youth in relation to HIV&AIDS.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. Human Sexuality and HIV&AIDS	1.1. Understand human sexuality in relation to HIV&AIDS issues	 1.1.1. Define human sexuality as a gift of God 1.1.2. Define human sexuality in relation to love 1.1.3. Explain human sexuality in relation to HIV&AIDS 1.1.4. Outline biological, socio-cultural and economic factors of human sexuality
2. Biblical Views on Human Sexuality and HIV&AIDS	2.2 Explore views from the Bible regarding human sexuality in relation to HIV&AIDS	 2.2.1. Explain human sexuality in the framework of the Old Testament 2.2.2. Explain human sexuality from the New Testament perspective 2.2.3. Analyse human sexuality to understand sex, sin and marriage
3. Human Sexuality, HIV&AIDS Transmission and Prevention	3.3. Examine HIV&AIDS transmission and prevention in relation to human sexuality	 3.3.1. Outline factors facilitating the transmission and spread of STDs 3.3.2. Explain HIV transmission and spread in relation to human sexuality 3.3.3 Analyse HIV&AIDS stigma and spread in relation to issues of human sexuality 3.3.4. Identify ways of 'Breaking the silence' in order to reduce transmission and spread 3.3.5. Outline methods of preventing HIV&AIDS
4. Sexually Transmitted Infections (STIs)	4.4 . Investigate sexually transmitted infections in relation to HIV&AIDS	 4.4.1. Explain consequences of Sexual transmitted infections 4.4.2. Identify common STIs. 4.4.3. Discuss prevention and control of STIs
5. Social and cultural Views on Human Sexuality and HIV&AIDS	5.5 . Explore cultural views regarding human sexuality in relation to HIV&AIDS	 5.5.1 Define culture 5.5.2. Discuss human sexuality from different cultural views 5.5.3. Analyse cultural views on human sexuality in relation to HIV&AIDS

6. Human Sexuality: Youth, Children and Women HIV&AIDS	6.6. Acquire knowledge on how HIV&AIDS affects children, youth and woman.	 6.6.1. Discuss women sexuality and HIV&AIDS 6.6.2. Analyse youth sexuality and HIV&AIDS 6.6.3. Discuss children sexuality and HIV&AIDS
7. Contemporary Issues in Human Sexuality and HIV&AIDS	7.7. Equipped to handle contemporary issues in human sexuality and HIV&AIDS	 7.7.1. Discuss emerging human sexuality issues that are a challenge to the fight against HIV&AIDS 7.7.2. Discuss homosexuality as a sexual orientation in HIV&AIDS 7.7.3. Analyse gender-based sexual violence at home and in communities 7.7.4. Explain the rights of women and children regarding sexuality and relationships in the HIV&AIDS context



RECOMMENDED READING FOR MODULE 1 AND 2

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Phiri, I. A. 2004. "HIV&AIDS: An African Theological Response in Mission." In *The Ecumenical Review*, vol. 56, no. 4, October 2004, 422-431.

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MODULE 3: STUDYING THE HEBREW BIBLE IN THE HIV&AIDS CONTEXT

The Hebrew Bible is an authoritative book of the Church that holds a significant place in Africa due to its many similarities to African traditions. In the HIV&AIDS context, the Church in Africa, and elsewhere, has often read the Hebrew Bible/Old Testament within the limiting framework that sees certain diseases as punishment for sin. The latter has not only fuelled stigma and discrimination against PLWHA; it has also promoted the epidemic itself. Module 3, therefore, intends to employ other methods of re-reading the Hebrew Bible in order to fight HIV&AIDS.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. HIV&AIDS and	1.1. Study the Hebrew Bible	1.1.1 . Read the Hebrew Bible to address the
Methods of Reading	using methods that will	problem of HIV&AIDS
the Hebrew Bible	contribute in the fight	1.1.2 . Group the Hebrew Bible Books as the
	against HIV&AIDS	Pentateuch, History, Wisdom and Prophets
		1.1.3 . Use Hermeneutics as a method
		(Literary, Liberation, Womanist) of
		reading the Hebrew Bible to answer
		HIV&AIDS questions
2. Reading the Pentateuch	2.2. Understand the	2.2.1 . Read the Book of Genesis in the
in the HIV&AIDS	Pentateuch within the	HIV&AIDS context
Context	framework of HIV&AIDS	2.2.2. Discuss the sacredness of life, 2.2.3 .
		Explain gender construction in the
		story of Genesis and its implication
		for the HIV&AIDS struggle
3 . Reading the Historical	3.3. Use the stories of the	3.3.1. Reading Ruth in the HIV&AIDS
books (Ruth and	Hebrew women in the	context
Esther) and the	historical books to address	3.3.2. Compare and contrast the story of
Situation of Women in	the situation of women in	Ruth with issues regarding widows,
the HIV&AIDS	the HIV&AIDS context	women and economic justice in the
Context		HIV&AIDS context
		3.3.3. Read Esther in the context of
		HIV&AIDS and rape
		3.3.4. Use the literary analysis of the Book
		of Esther to empower people to resist
		rape
4. Reading Wisdom (Job)	4.4. Understand the framework	4.4.1. Discuss the story of Job to understand
in the HIV&AIDS	of disease and suffering	suffering in HIV&AIDS context
Context	within the framework of	4.4.2. Compare the situation of Job with that
	the Book of Job	of women and the poor
		4.4.3 . Analyse Job's friends and God's
		response to suffering
5 Reading Prophets	5.5. Use the Prophets to talk	5.5.1. Give a brief history of the Prophets
(Hosea and Ezekiel) in	against violence and give	in the Hebrew Bible
the HIV&AIDS	hope to the marginalized	5.5.2 . Read Hosea in the HIV&AIDS
Context		context
		5.5.3 . Explain the Book of Hosea to address
		violence against women in the
		HIV&AIDS era
		5.5.4. Read Ezekiel in HIV&AIDS context

MODULE 4: READING THE NEW TESTAMENT IN THE HIV&AIDS CONTEXT

The New Testament is an authoritative book of spiritual and social wisdom for churches and Christians. The New Testament story is generally read in search of answers to all critical questions confronting Christian individuals and communities. Module 4, therefore, seeks to read the New Testament in the light of HIV&AIDS prevention, stigma, discrimination, care-giving, social justice, access to drugs, PLWHA and the affected groups. The module seeks to read the New Testament to inspire and restore compassion, hope, justice and healing against HIV&AIDS' major attack on life and its quality.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. HIV&AIDS, New Testament Literature and Methods of Reading	1.1. Understand the New Testament literature and methods of reading in relation to HIV&AIDS	 1.1.1. Describe the story of the discovery, spread and impact of HIV&AIDS 1.1.2. Narrate the story of the New Testament books 1.1.3. Outline methods of studying and reading the New Testament 1.1.4. Explain why we have to study the New Testament in the HIV&AIDS context
2. The Gospels and the HIV&AIDS Story	 2.2. Read the Gospels within the framework of HIV&AIDS complexities . 	 2.2.1 Give a brief history and themes of the Book of Mark 2.2.2. Discuss Mark and the HIV&AIDS Story 2.2.3. Give a brief history and themes of the Book of Luke 2.2.4. Discuss Luke and the HIV&AIDS Story 2.2.5. Give a brief history and themes of the Book of John 2.2.6. Discuss John's gospel and the HIV&AIDS story
3. Acts and the HIV&AIDS Story	3.3. Study the Book of Acts to champion social justice in the context of HIV&AIDS	 3.3.1. Outline the history and themes of Acts 3.3.2. Explain the origin of the early church 3.3.3. Describe how the early church kept the message of Christ by eradicating inequalities 3.3.4. Discuss how widows were cared for and how we can do the same for our widows
4. The Letters & the HIV&AIDS Story	4.4. Examine Pauline, Duetro- Pauline and Catholic Letters in the context of the HIV&AIDS struggle	4.4.1. Give a brief introduction on the history and themes of Galatians4.4.2. Analyse Galatians and the HIV&AIDS story

5. Revelation and the HIV&AIDS Story	5.5. Highlight the role of international injustice in the HIV&AIDS epidemic	 4.4.3. Give a brief introduction on the history and themes of Corinthians 4.4.4. Discuss Corinthians and the HIV& AIDS story 4.4.5. Give a brief introduction on the history and themes of 1st Timothy 4.4.6. Explain 1st Timothy against the HIV&AIDS story 4.4.7. Give a brief introduction on the history and themes of James 4.4.8. Analyse James against the HIV&AIDS story 5.5.1. Outline the historical background and themes of Revelation 5.5.2. Explain the early church approach to international exploitation 5.5.3. Identify ways in which the current church can maintain its prophetic voice 5.5.4 Discuss ways of weaving justice-seeking stories of economic justice from Revelation
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MODULE 5: AFRICAN INDIGENOUS RELIGIONS (AIRS) IN THE HIV&AIDS CONTEXT

Module 5 highlights the importance of AIRs in the fight against HIV&AIDS. HIV&AIDS is a major issue of concern in Africa, where more people are affected than elsewhere. Module 5, therefore, seeks to address the following: change of attitudes to sexuality and disease; traditional beliefs and practices that increase vulnerability to HIV&AIDS; the influence of gender relations on HIV&AIDS; methods of healing in AIRs; and the positive role of AIRs in HIV&AIDS awareness, prevention, stigma, discrimination and care giving.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. The Problem of HIV&AIDS	1.1. Acquire knowledge about the impact of HIV&AIDS	 1.1.1. Explain HIV&AIDS impact on the human body 1.1.2. Discuss HIV&AIDS impact on family community and country 1.1.3. Analyse HIV&AIDS link with social injustice and the marginalised
2. The Basic Worldview of African Indigenous Religions	2.2. Explore African worldviews in relation to HIV&AIDS	 2.2.1. Explain divinity and well-being in African cosmology 2.2.2. Discuss ancestorhood in relation to well-being in African religions 2.2.3. Compare and contrast community and individual well-being in Africa 2.2.4. Explain evil and healing 2.2.5. Analyse African cosmology implications for HIV&AIDS struggle
3. HIV&AIDS Prevention Strategies	3.3. Acquire more knowledge on AIRs prevention strategies to be used for fighting HIV&AIDS	 3.3.1. Define prevention 3.3.2. Identify HIV&AIDS prevention methods 3.3.3. Identify poverty and gender factors in HIV&AIDS prevention 3.3.4. Give AIRs prevention strategies that can be used in the fight against HIV&AIDS
4. HIV&AIDS Prevention and AIRs Cosmology/worldview	4.4. Promote African understanding of disease prevention as a contribution to HIV&AIDS prevention	 4.4.1. Discuss AIR ideas of Illness & its contribution to HIV&AIDS prevention 4.4.2. Analyse AIRs understanding of sexuality & its contribution to HIV&AIDS prevention 4.4.3. Discuss AIRs gender relations and its contribution to HIV&AIDS prevention. 4.4.4. Identify AIRs approaches to poverty & their contribution to HIV&AIDS prevention.
5. AIRs and HIV&AIDS Stigma and Prevention	5.5 . Employ gender sensitive African methods to de-	5.5.1. Identify illness-related forms of stigma in AIRs

		stigmatise HIV&AIDS	 5.5.3. Analyse the impact of gendered stigma in AIRs on HIV&AIDS prevention and care 5.5.4. Identify gender neutral ways of destigmatising in AIRs
6 . AIRs and PLWHA	6.6.	Employ positive African ways of giving care to the sick to help PLWHA	 6.6.1. Explain AIRs ideas of health and illness 6.6.2. Discuss spiritual, mental, and social care-giving methods to PLWHA 6.6.3. Identify care-givers in AIRs
7. The HIV&AIDS Affected Groups and African Indigenous Religions	7.7.	Establish contribution made by African widows, children grandparents and healers in the fight against HIV&AIDS	 7.7.1. Discuss women, children and grand parents' contribution to the fight against HIV&AIDS in African communities 7.7.2. Give examples of contribution coming from communities of healing in African societies 7.7.3. Identify other ways towards a theology of healing in the Global Village



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MODULE 6: A THEOLOGY OF LIFE IN THE HIV& AIDS ERA

HIV&AIDS as the greatest challenge to life today, especially in Africa, requires a visionary theology in order to restore life. Theology addresses daily issues that affect people, of which HIV&AIDS is one of them. Research has shown that HIV&AIDS thrives in situations of social injustice, poverty, discrimination and gender inequality. Module 6, therefore, seeks to equip learners, especially leaders and lay members with skills to evaluate traditional theologies and construct new ones to provide the much needed hope and life assurance against the HIV&AIDS epidemic and its accompanying spirit of hopelessness.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. Theology of Life and HIV&AIDS as an Attack on Life	1.1. Understand theology of life and HIV&AIDS as an attack on life	 1.1.1. Give definition of theology of life from African Indigenous Religions (AIRs), Hebrew Bible (Old Testament) and New Testament perspectives 1.1.2. Explain HIV&AIDS as an attack on life 1.1.3. Outline the impact of HIV&AIDS in relation to poverty, gender inequalities and racism
2. The Sacredness and Goodness of Life	2.2. Examine the sacredness and goodness of life from different religions perspectives	 2.2.1. Define life as a gift of God 2.2.2. Explain the sacredness and goodness of life 2.2.3. Discuss sacredness and goodness of life in the African Indigenous Religions 2.2.4. Discuss the sacredness and goodness of life in the Hebrew Bible and the New Testament 2.2.5. Discuss the sacredness of life in the New Testament
3. Life in Communities and Institutions of Thriving	3.3. Explore different ways of preserving life at different levels	 3.3.1. Give reasons for preserving life at family, community, national and global levels 3.3.2. Discuss life preservation methods in African Indigenous Religions 3.3.3. Discuss life preservation methods in the Hebrew Bible 3.3.4. Discuss life preservation methods in the New Testament
4 HIV&AIDS Stigma and the Quality of Life	4.4. Review issues of HIV&AIDS stigma in relation to quality of life	 4.4.1. Define Stigma 4.4.2. Outline the impact of HIV&HIV stigma on the quality of life 4.4.3. Discuss health related stigma in African Indigenous Religions 4.4.4. Discuss health related stigma in the Hebrew Bible 4.4.5. Discuss health related stigma in the New Testament

5. HIV&AIDS Care giving and Life	5.5. Understand HIV&AIDS care giving as a method of preserving life	 5.5.1. Define care giving as a method to preserve life 5.5.2. Discuss HIV&AIDS care-giving and African Indigenous Religions 5.5.3. Discuss HIV&AIDS care-giving and the Hebrew Bible 5.5.4. Discuss HIV&AIDS care giving and the New Testament
6. Lives of Women and Children in the HIV&AIDS Epidemic	6.6. Understand approaches used by feminist theologies in the struggle against HIV and AIDS	 6.6.1. Analyse women and children's situation in the HIV&AIDS epidemic 6.6.2. Discuss the situation of women and children and African Indigenous Religions in HIV&AIDS era 6.6.3. Discuss Women and children and the Hebrew Bible in the HIV&AIDS era 6.6.4. Women and children and the New Testament in the HIV&AIDS era
7. HIV&AIDS, Death and Resurrection Hope	7.7. Examine HIV&AIDS deaths within the framework of resurrection hope	 7.7.1. Explain death and hope in the HIV&AIDS context 7.7.2. Discuss death and hope in African Indigenous Religions 7.7.3. Discuss death and hope in the Hebrew Bible 7.7.4. Discuss death and resurrection hope in the New Testament

MODULE 7: A THEOLOGY OF COMPASSION IN THE HIV&AIDS ERA

HIV&AIDS stigma and discrimination creates extremely difficult social situations for PLWHA. Module 7 explores a theology of compassion as a counterforce. The module recognises the experiences and voices of PLWHA as central to a theology of compassion that counteracts stigma and discrimination and creates safer spaces in society. Module 7 proposes a theology of compassion that uses voices of a church living with HIV&AIDS, the Bible and African cultures. Highlighting the compassionate perspectives of God, Christ and African cultures, module 7 challenges the church and African communities to be compassionate by being in solidarity with PLWHA, orphans, widows, care givers and by becoming good stewards of God's earth.

TOPICS	GENERAL	SPECIFIC OBJECTIVES
	OBJECTIVES	
1. Compassion, HIV&AIDS Stigma and Discrimination	1.1. Justify the need for compassion when dealing with HIV&AIDS stigma and discrimination	 1.1.1. Define compassion, stigma and discrimination 1.1.2. Describe how compassion is expressed 1.1.3. Give reasons why compassion is needed in the HIV&AIDS struggle 1.1.4. Discuss the churches commitments to compassion 1.1.5. Analyse the link between HIV&AIDS and social injustice
2. The Compassion of God, Christ and Church	2.2. Establish theological, Christological and ecclesiological basis for compassion in the Church and community	 2.2.1. Explain the theological basis for the compassion of God 2.2.2. Discuss the coming of Christ to earth as God's compassion to humankind 2.2.3. Identify compassionate programs for your faith community to implement. 2.2.4. Discuss Christ's healing of the sick as acts of compassion 2.2.5. Analyse Christ's teaching on solidarity as central to compassion 2.2.6. Discuss examples of the compassionate church at various levels 2.2.7. Discuss the agency of PLWHA in building a compassionate church 2.2.8. Identify ways of challenging your church and faith community to undertake compassionate acts of healing and solidarity with
3. Compassionate African Communities	3.3. Understand compassion from the perspectives of African communities	 PLWHA and the affected 3.3.1. Explain compassion as understood by PLWHA in Africa 3.3.2. Define compassion using African words, sayings and proverbs

		 3.3.3. Discuss compassion using African worldviews on humanity and community 3.3.4. Discuss African indigenous views of <i>God</i> that encourage compassion 3.3.5. Analyse how African Human Rights cultures can inspire compassionate communities
4. Compassion with and to PLWHA	4.4. Collaborate with PLWHA to provide quality-care as compassion	 4.4.1 Describe the situation and agency of compassion with and to PLWHA 4.4.2. Explain the magnitude of AIDS-related illnesses and death 4.4.3. Discuss the African and biblical theological base for access to medicine 4.4.4. Identify collaborative projects with other stakeholders
5. Compassion with and to Caregivers, Orphans and Widows in the HIV&AIDS Context	5.5. Work with caregivers, orphans and widows in the fight against HIV&AIDS stigma and discrimination and to meet their needs	 5.5.1. Explain the demands of caregiving in HIV&AIDS context 5. 5. 2. Discuss biblical and African theological perspectives on care giving 5.5.3. Describe the magnitude of orphans in the HIV&AIDS era 5.5.4. Discuss the theological basis for compassionate acts with and for orphans 5.5.5. Discuss the biblical basis for compassionate care with and for widows 5.5.6. Outline practical ways of empowering widows 5.5.7. Discuss the church's commitment towards caregivers, orphans and widows. 5.5.8. Design a church project for collaborating with NGOs and governments to empower caregivers, orphans and widows
6. Compassion as Stewardship in God's creation	6.6. Understand compassion as good stewardship of God's creation	 6.6.1. Define stewardship 6.6.2. Explain the link between stewardship and compassion 6.6.3. Discuss biblical basis for human stewardship over creation 6.6.4. Analyse Genesis 1 for compassionate stewardship 6.6.5 Discuss the commitments of the church as acts of compassionate stewardship

MODULE 8: A THEOLOGY OF HEALING IN THE HIV& AIDS CONTEXT

Christianity, African Indigenous Religions and Islam are the main religions in Africa. HIV&AIDS has presented many challenges and religions have been led to develop new of theologies healing. This is because HIV&AIDS is more than just a biological or medical condition. HIV&AIDS is linked to the injustices that are found in social and global structures such as economics, politics, trade, culture, religion, gender and race. The latter are the root causes of HIV&AIDS. A theology of healing in the context of HIV&AIDS, therefore, needs to address social and structural injustice as well as the needs of PLWHA and the affected. Module 8 seeks to explore a theology of healing within the framework of *justice for all is health for all*.

TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. Healing in the Context of HIV&AIDS	1.1 . Examine initial responses to HIV&AIDS healing	 1.1.1. Define different methods of healing in the HIV&AIDS context 1.1.2. Initial response to healing HIV&AIDS by the church 1.1.3. Initial response to healing HIV&AIDS by African Indigenous Religions 1.1.4. Initial response to healing HIV&AIDS by Islam 1.1.5. Initial response of healing HIV&AIDS by national governments and international organisations
2. Types of Healing	2.2. Examine different types of healing in the HIV&AIDS context	 2.2.1. Identify spiritual models of healing 2.2.2. Discuss psychological models of healing 2.2.3. Discuss physical models of healing 2.2.4. Discuss structural models of healing
3. Theological Models of Healing from the Bible: Hebrew Bible and New Testament	3.3. Review various frame- works of understanding disease in the Bible	 3.3.1. Identify Biblical models of healing from the Hebrew Bible and New Testament 3.3.2. Discuss health and illness/disease from the Hebrew Bible 3.3.3. Discuss health and illness from the New Testament
4. The Church as a Healing Community in the HIV&AIDS Context.	4.4. Understand how churches are healing communities in the HIV&AIDS context	 4.4.1. Compare the healing ministry of the early and the current church 4.4.2. Discuss life, diseases and healing in the church 4.4.3. Analyse the prophetic role of the church during HIV&AIDS era
5. African Healing Methods in the HIV&AIDS Context.	5.5 . Review how healing in churches can be used to care rather than condemn PLWHA	 5.5.1. Define healing in African Indigenous Religions 5.5.2. Outline methods of healing individuals

		 5.5.3. Outline methods of healing and care giving to the community 5.5.4. Discuss counselling as a method of healing in African Indigenous Religions and HIV&AIDS context
6. Islam and HIV&AIDS	6.6. Explore relevant healing methods from Islam for HIV&AIDS healing	 6.6.1. Define healing in Islam 6.6.2. Outline method of healing individuals 6.6.3 Outline methods of healing and care giving to the communities 6.6.4 Discuss counselling as a method of
		healing in Islam



RECOMMENDED READING

FOR MODULE 6, 7 AND 8

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MODULE 9: HIV&AIDS PASTORAL CARE AND COUNSELLING

HIV&AIDS is, so far, an incurable disease and has had an extensive impact on all sectors of society. Therefore, care giving for PLWHA and the affected remains central. Module 9 seeks to equip learners with counselling skills, to enable them to assist PLWHA and the affected to live positively and with hope. In counselling PLWHA, learners are expected to address issues of stigma and discrimination in order to restore hope in PLWHA. Further, as church leaders, they are expected to revive the churches to take up a central role in counselling families and the public.

TOPICS	GENERAL	SPECIFIC OBJECTIVES
	OBJECTIVES	
1. The Problem of	1.1 . Acquire knowledge on	1.1.1 . Explain the pervasiveness of
HIV&AIDS and Basic	basic counselling skills	HIV&AIDS in relation to stigma
Counselling	to meet challenges raised	discrimination, death and grief
	by HIV&AIDS	1.1.2 . Define counselling
		1.1.3. Discuss theories and values of
		counselling
		1.1.4 . Outline aims and challenges of
		counselling
		1.1.5. Outline stages of a counselling
		process
		1.1.6 . Identify basic communication skills
2. HIV&AIDS Counselling	2.2 . Take positive steps of	2.2.1 . Explain the relation between
Theories and Processes	counselling people living	HIV&AIDS counselling
	with HIV&AIDS	2.2.2 . Identify different counselling
		theories and methods in
		HIV&AIDS context
		2.2.3 . Outline processes of HIV&AIDS
		counselling
		2.2.4 . Explain ways of being an effective
		HIV&AIDS counsellor
3. HIV&AIDS Counselling	3.3 . Appreciate the	3.3.1. Explain counselling in relation to
	importance of ethics or	HIV&AIDS
	good conduct as part of	3.3.2 . Outline aims of HIV&AIDS
	HIV&AIDS counselling	counselling
		3.3.3. Discuss pre and post-test
		counselling
		3.3.4. Explain supportive counselling
4. HIV&AIDS Counselling	4.4. Employ HIV&AIDS	4.4.1 . Outline and discuss different types
of the Affected and	counselling to the	of caregivers
Special Cases	affected and special	4.4.2 . Compare stress and burnout
	cases	4.4.3 . Describe how caregivers are
		vulnerable to stress and burnout
		4.4.4. Identify ways of managing stress
		and burnout
		4.4.5 . Discuss abuse and its different
		forms
		4.4.6 . Discuss the experience of pregnant
		women and orphans in situations
		of HIV&AIDS
		4.4.7. Describe the specific needs of the
		terminally ill

		4.4.8 . Discuss grief counselling and stages of grief process
5. Legal, Ethical and Policy Dimensions of HIV&AIDS	5.5. Investigate the various dimensions of HIV&AIDS counselling	 5.5.1. Explain how the rights of people living with HIV&AIDS are recognised in law 5.5.2. Analyse the legal dimension of HIV&AIDS counselling 5.5.3. Identify some ethical principles and apply them to concrete cases of HIV&AIDS 5.5.4. Explain the importance of policy on HIV&AIDS in the workplace
6. HIV&AIDS Counselling and the Church	6.6. Appropriate the church's mission in HIV&AIDS context	 6.6.1. Define in general terms the mission of the Church 6.6.2. Discuss the role of the church in HIV&AIDS situations 6.6.3.Identify ways in which the church can be present to PLWHA 6.6.4. Describe ways in which the church can be present to the terminally ill 6.6.5. Analyse the role of the church in grief counselling, through funerary rites and individual counselling
7. Church, Advocacy in HIV&AIDS Context	7.7. Transform the church to see HIV&AIDS as an occasion to exercise its prophetic role	 7.7.1. Define advocacy and identify its essential components 7.7.2. Link the church's prophetic call and advocacy 7.7.3. Identify the focus of HIV&AIDS related advocacy 7.7.4. Discuss the prophetic call of the church in HIV&AIDS situations

MODULE 10: PREACHING AND LITURGY IN THE HIV&AIDS CONTEXT

Module 10 addresses issues of HIV&AIDS in relation to preaching. It revisits the meaning and function of preaching, the preacher and the worshipping community in relation to HIV&AIDS. It underlines solidarity with the most affected groups and the use of liturgical space as communal and individual healing space. Module 10, therefore, seeks to help learners to establish the role of preaching and liturgy in the fight against HIV&AIDS.

TODICS	CENEDAL	
TOPICS	GENERAL OBJECTIVES	SPECIFIC OBJECTIVES
1. Preaching and Liturgical Challenges in the HIV&AIDS Context	1.1. Appreciate the role of preaching and liturgy in the HIV&AIDS context	 1.1.1. Define preaching and liturgy 1.1.2. Identify challenges facing preaching and liturgy in the HIV&AIDS context 1.1.3. Discuss silent and stigmatising sermons in HIV&AIDS context
2. The Role of Preaching and Liturgy in the HIV&AIDS Context	2.2 . Appropriating the role of preaching and liturgy	 2.2.1. Discuss the role of preaching and liturgy 2.2.2. Give examples of preaching from the Bible and preaching models from the church 2.2.3. Produce new and HIV&AIDS sensitive liturgy 2.2.4. Prepare examples of HIV&AIDS sensitive Sermons and liturgy
3. Preaching as Embodying God and Christ in the HIV&AIDS Era	3.3. Understand preaching as embodiment of God and Christ	 3.3.1. Preach God as creator and Christ as the proclaimed 3.3.2. Preach God as liberator and Christ as healer 3.3.3. Preach the loving and forgiving God 3.3.4. Preach Christ as the prophet against social injustice 3.3.5. Conduct HIV&AIDS sensitive sermons
4. Preaching as Embodying PLWHA	4.4. Establish a compassionate and healing Church to identify with PLWHA	 4.4.1. Identify ways of allowing PLWHA to partake in preaching sermons 4.4.2. Indicate ways of being in solidarity with PLWHA 4.4.3. Conduct sermons embodying God's grace, love and forgiveness 4.4.4. Prepare sermons to create a compassionate and healing Church
5. Preaching About Specific Topics in the HIV&AIDS Context	5.5. Employ preaching to reach specific groups in society	 5.5.1. Identify ways of preaching to and with PLWHA 5.5.2. Identify ways of preaching to reach youth orphans, women and widows 5.5.3. Identify ways of preaching to revive the church on issues of sexuality, sin and care giving
6. Non-Traditional Preaching in the	6.6. Establish non-traditional methods of preaching	6.6.1. Identify non-traditional methods of preaching

HIV&AIDS Context	and utilize them to reach people in the HIV&AIDS era	 6.6.2. Prepare a sermon for preaching over radio and television 6.6.3. Prepare a sermon for weddings, and birthdays 6.6.4. Prepare a sermon for funerals and tombstones unveiling 6.6.5. Prepare a sermon for the World AIDS Day
7. Preaching as Prophesy: Challenging Social Injustice	7.7. Utilize preaching as prophecy to challenge social injustices	 7.7.1. Prepare sermons on poverty; challenging national & international injustice 7.7.2. Prepare sermons against gender inequalities 7.7.3. Prepare sermons on youth disempowerment and sexual exploitation 7.7.4. Prepare sermons against stigma and discrimination
8. Preaching as Group and Public Counselling	8.8. Understand preaching as public counselling	 8.8.1. Define preaching as individual, group and public counselling 8.8.2. Use preaching to counsel those dying, grieved and hopeless 8.8.3. Use liturgical power to preach hope to reach people through public counselling



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METHODS OF TEACHING, ASSESSMENT AND EVALUATION

TEACHING

- Assigned readings
- Library based research
- Fieldwork based research
- Focus group discussions
- Seminars
- Case studies
- Public lectures
- Creative writing and reflection papers
- Practical through attachments and internships
- Simulation and role-play (drama, song, dance, poetry, etc)
- Value clarification
- Audio-visual aids
- Information technology based research

ASSESSMENT OF LEARNERS

The following methods are recommended:

- Institutions to decide on marking and grading
- Continuous assessment
- Term papers/test and final exam
- Class presentations
- Observation
- Research projects and reports
- Learner self-assessment

ASSESSMENT OF LECTURERS

The following methods are recommended:

- Institutions to use their own assessment methods
- Course planning
- Qualification
- Peer assessment
- Attitude and commitment
- Capacity and ability to deliver
- Presentation and follow up
- Credibility

EVALUATION OF THE COURSE

The following areas can be evaluated:

- Content
- Scope
- Depth

- Suitability
- Level of Difficulty
- Duration
- Qualifications required
- Comparison with similar courses elsewhere
- Qualification attained
- Staff requirements
- Administration details
- Mode of teaching
- Relevance and adaptability
- Mode of Integration within the overall curriculum
- Level of sensitization and influence

RESOURCES

Human Resources

The Institution could use:

- Available academic staff
- Visiting resource persons (eg. Medical personnel, social workers, community leaders, counsellors, pastors, PLWHA, women and youth activists, economists and social workers)
- Human resource development (recruiting and training of personnel).

Financial Resources

• Institutions should consider the financial implications of this curriculum and make the necessary budgetary provisions.

Material Resources

- Library books and journals
- Textbooks
- Institutional manuals and curricula
- Audio-visual facilities
- Information technology

Physical Facilities

- Lecture rooms
- Counselling rooms
- Library
- Offices

Write the vision, make it plain on the tablets, so that a runner may read it (Habakkuk 2:2-3)