

## **44<sup>th</sup> ASSEMBLY, 2003**

### **HIV/AIDS: A WORLDWIDE TRAGEDY**

*The Jewish tradition tells us, "Save one person, save the world."*

#### **Issue**

The HIV/AIDS epidemic continues to devastate populations throughout the world. Africa alone is experiencing an AIDS epidemic in which 8,000 people a day are dying and thousands of children are orphaned. In the United States the incidence of AIDS in women over the age of 50 is increasing rapidly.

#### **Background**

##### *HIV/AIDS Globally*

Jewish tradition teaches us to respect life and to value healthy living. Because Jews must strive to save and cherish life, the fight to control AIDS must therefore be treated as a major battle. Accordingly, in 1983 Women of Reform Judaism, then the National Federation of Temple Sisterhoods, called on affiliates to advocate that AIDS research, prevention, diagnosis and treatment become government health priorities. It also called for prohibition against discrimination and community education.

More than 43 million people in the world today are living with HIV/AIDS (human immunodeficiency virus/acquired immunodeficiency syndrome) and 95% of those people live in developing countries. In Africa the AIDS epidemic has killed an estimated 17 million people. Over 12 million children in Africa have lost a parent to the HIV epidemic.

AIDS is also impacting other regions: Asia, for instance, has almost 6 million persons infected with AIDS. Globally, about 4.5 million children have been infected with AIDS since the beginning of the epidemic, with girls making up a large proportion of these children. Globally, a child dies of AIDS every minute. The Global Fund to Combat AIDS, TB, and Malaria has been shown to be the single most effective tool available for turning the tide against these diseases and presently is inadequately funded.

In the developing countries of Africa and Asia it is the grandmothers and other older women who are left to care for children whose parents have died of HIV/AIDS. These older women have very meager resources and are unable to provide for the most basic needs of their enlarged families. No resources are available to meet the educational and emotional needs of the children. Therefore, it is imperative for the future of these countries that the governments recognize the need and commit the resources to support these caregivers and their charges by providing housing, clean water, sanitation, food, and education on methods of HIV prevention.

Debt relief for countries afflicted with HIV/AIDS, especially in Africa, would allow their governments to dedicate more desperately needed resources to fighting the epidemic. The limited debt relief already given to some impoverished countries has saved them a total of almost \$1 billion in debt payments. As a result, several countries have stepped up spending on their AIDS program. Unfortunately, the United States has not adequately supported debt relief or the broadening of it to more countries.

### *AIDS Among Women in the United States Over 50 years of Age*

Traditional attitudes about older women prevent public health officials, doctors and women themselves from understanding that the AIDS virus does not discriminate by age. The fact that older people are living longer and are healthier means that more of them will be sexually active, thereby increasing their risk of contracting HIV/AIDS.

The number of women with HIV infection and AIDS has been increasing steadily worldwide. At the end of 2002, according to the World Health Organization (WHO), 19.2 million women were living with HIV/AIDS worldwide. In the United States, 10% of all reported AIDS cases occur among people over the age of 50; a quarter of these people are over 60. Older women appear to have a higher incidence than older men. The number of new cases among people over 50 years of age increased by 40% during a recent five-year period.

In addition, experts say that women over 50 may not practice safe sex because they no longer worry about pregnancy and they have less experience negotiating as a full partner with men about the need to use condoms. Women also undergo physical changes as they age that affect their vulnerability to HIV. The number of new AIDS cases in the United States among people 50 years of age and over is rising twice as fast as in the 13-to-49 age group, and women—especially black women—have been hit hard, according to government figures.

Health providers often fall into the trap of age stereotyping, which can create problems in HIV/AIDS prevention and diagnosis. Social barriers to discussions on sexuality with aging people become even stronger with age, because of the traditional denial of sexual needs in this population. Health care workers are less likely to ask older patients about their sexual behavior and do not provide the prevention information they would routinely offer younger patients, nor do prevention education programs target older people.

### **Resolution**

In accordance with its long-standing commitment to seek resources for HIV/AIDS prevention, diagnosis and treatment, Women of Reform Judaism will continue to advocate and work with like-minded coalitions to address the international AIDS crisis and calls on its affiliates to:

1. Encourage their governments to endorse a comprehensive and balanced approach to AIDS prevention by instituting sexuality education programs that include

- abstinence, monogamy, and condom distribution and to challenge other nations to increase their efforts to address this international crisis;
2. Advocate increasing debt relief for developing countries so that their resources can be allocated toward prevention and treatment of HIV/AIDS and other serious medical problems;
  3. Call for adequate funding for the Global Fund to Combat AIDS, TB and Malaria;
  4. Work with coalitions, such as The Jewish Coalition Responding to HIV/AIDS in Africa, the Religious Coalition for Reproductive Choice and the World Conference on Religion and Peace, to respond to HIV/AIDS-related local needs in Africa, Asia and other parts of the world; and
  5. Hold programs for their Sisterhoods, congregations and communities that deal with the health and sexuality of the aging population and that encourage older people to discuss these issues with their health care providers;
  6. Call for educational programs that inform clergy and health care providers in their congregations and communities about the sexuality and sexual practices of older people;
  7. Urge local government agencies, hospitals and clinics to hold programming for HIV/AIDS service providers that emphasizes the need for age-sensitive services and literature about at-risk behavior related to HIV in an aging population.

Furthermore, WRJ urges the Canadian Sisterhoods to commend and support their government's efforts to combat HIV/AIDS by amending its Patent Act to permit manufacture of generic antiretroviral drugs under compulsory license for export to poor countries.