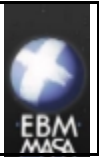


Sunday of World Missions 2004

Caring and Alleviating Need

Suggested Programme for the Service



Prelude

Welcome and Prayer

Hymn: Lord, the light of your love is shining

Announcements

Choir/Hymn (something like : God gives us His spirit to celebrate and to praise Him, to ask
and to thank Him, to live for Him – out of love for Him)

Creative Part

Song (something like: God loves children all over the world)

Part for Children

Hymn (something like: Sun of Justice, arise in our times)

Information on EBM work among HIV/AIDS patients

Offering

Choir/Hymn (something like: When Jesus is looking for people who want to follow Him, I
want to be there)

Message: Luke 10:25-37

Choir/Hymn (something like: Lord, let your truth be before our eyes)

Prayers

Hymn (something like: May God's gracious blessing be with you)

Benediction

Postlude

Sunday of World Missions 2004

Caring and Alleviating Need

Information on HIV/AIDS



40 million people worldwide live with HIV/AIDS. Last year 3 million died of the disease. Africa is affected the most, more than 70 per cent of all the people living with AIDS are Africans. However, in Eastern Europe and Asia, especially in India and China, the HI virus is spreading at breathtaking speed, too.

EBM focuses on the education of youths, treatment of patients as well as on assistance to families and AIDS orphans. In the context of “Aktionsbündnis gegen Aids” (Alliance for action to combat AIDS) German decision-makers in politics, industry and business are called on to make more funds available as well as cheap medicine in sufficient quantity. “Bread for the World”, a German charity, also sponsors several programmes and projects addressing HIV/AIDS, among others it has sponsored the Baptist Convention of South Africa as of 2004.



South Africa: Caring for AIDS patients

Ikageng, Jabavu and Thusong ... These names stand for practical help given to the poorest of the poor. For a number of years, certain Baptist churches – as well as the Baptist Convention of South Africa – have been committed to HIV/AIDS work. Infected and affected people (patients and families) are cared for through home-based care in many places throughout the country. On the initiative of their pastor, Rev Benjamin Ngcobo, the church in Ikageng has set up a counselling centre and a group visiting AIDS patients: This work is not limited to taking care of AIDS patients, but also includes counselling, education, hygiene, pastoral care and prayer. Those infected shall not be left alone in their distress. In cooperation with hospitals, people are also given medical care. The church has a team of more than 50 persons, who have partly been offered a short, 5-week training by the public Health Department in order to be care-takers. In addition to this, more than 600 people, AIDS orphans and destitute families, regularly receive food packages supplied by the Government. As of 2004, the AIDS programme of the Convention has been supported by “Bread for the World”.

Malawi: Lunch for AIDS orphans


When describing their home country, the people of Malawi talk about the “Warm Heart of Africa”. Malawi is situated in south eastern Africa. It is not only one of the most beautiful countries, but one of the poorest as well: Drought, famines and AIDS describe the people’s distress. For a number of years, EBM has supported the Baptist Convention of Malawi. Three national co-workers are given the opportunity by EBM to work as full-time missionaries in their country: Hauke Kuzalo is the pastor responsible for several churches near the big city of Lilongwe. He started his church work by going from door to door, bearing witness to his faith. So, since 1998, more than 20 churches have arisen. By now Hauke Kuzalo has trained many co-workers who lead these churches with the aim of bearing witness to the gospel in word and deed. Besides the fight against alcoholism, Hauke Kuzalo considers assistance to the AIDS orphans an important task for the churches in his region. Together, they have decided to ask for food in the churches in order to provide regular hot meals to the AIDS orphans. Apart from the commitment of the churches, the Convention runs a farming project, which aims to train youths who are AIDS orphans.

Cameroon: Medical care for AIDS patients

Mokong is a small village bordering on the Sahel Zone in Cameroon. At the beginning of the dry season, life is especially challenging for the people in this barren region. In addition to drought and hunger, malnutrition and inadequate sanitation, more and more people suffer from the HI Virus (AIDS). In past years, EBM has been in a position to build up an AIDS Counselling Centre, which provides AIDS testing, besides education and counselling. This is just one of many examples of how people get practical help through the medical work of EBM in Cameroon. In all of our hospitals and health stations we have the possibility of counselling and helping AIDS patients: in Mokong, Zidim, Nkoteng or Bonaberie, where European or national staff, such as Jutta Krebs-Mbiene or Dr Philippe Miko, are committing themselves round the clock, for the benefit of the people there.

Sierra Leone: Young people commit themselves to profess their faith and to fight the spread of AIDS

After more than 10 years of Civil War Sierra Leone finds itself in a phase of reconstruction after the peaceful elections in 2002. After their traumatic experiences Sierra Leoneans are seeking their way into the future. The young generation in the churches of the Baptist Convention of Sierra Leone is making a strong contribution towards reshaping their country, having found their own way. Through the American initiative “True Love Waits” they would like to invite young people in Sierra Leone to dedicate their lives to Jesus Christ. This initiative advocates a Christian lifestyle, which backs a binding relationship with the God-given partner, meant for life, especially when it comes to sexual behaviour. Paul Conteh, the leader of the Youth Department, points out again and again that through this initiative young people are not only invited to become consequent believers, but that this is also an intentional and clear signal against the spread of HIV/AIDS.

 **Pictures** illustrating the above-mentioned projects can be found for download on our website: <http://www.ebm-masa.org/>.

Sunday of World Mission 2004

Caring and Alleviating Need

Part for Children on the AIDS Theme



By Volkmar Hamp

Secretary for Work with Children in the Gemeindejugendwerk (Youth Department) of the German Baptist Union in Elstal near Berlin

1. Let's begin with a puzzle*

Continent

A FRICA

Agent making people ill

V IRUS

Sailing round South Africa, sailors pass the Cape of

GOO D HOPE

Son of God

JE S US

**) Note by the translator: In most languages these words may work. You may have to find another word containing D having to do with AIDS (the German original suggests: Country in Africa: Südafrika).*

2. Information

AIDS is a disease. You have certainly heard about it or seen posters which inform on it and which call on people to protect themselves against this disease.

But what have the four words in our puzzle got to do with AIDS?

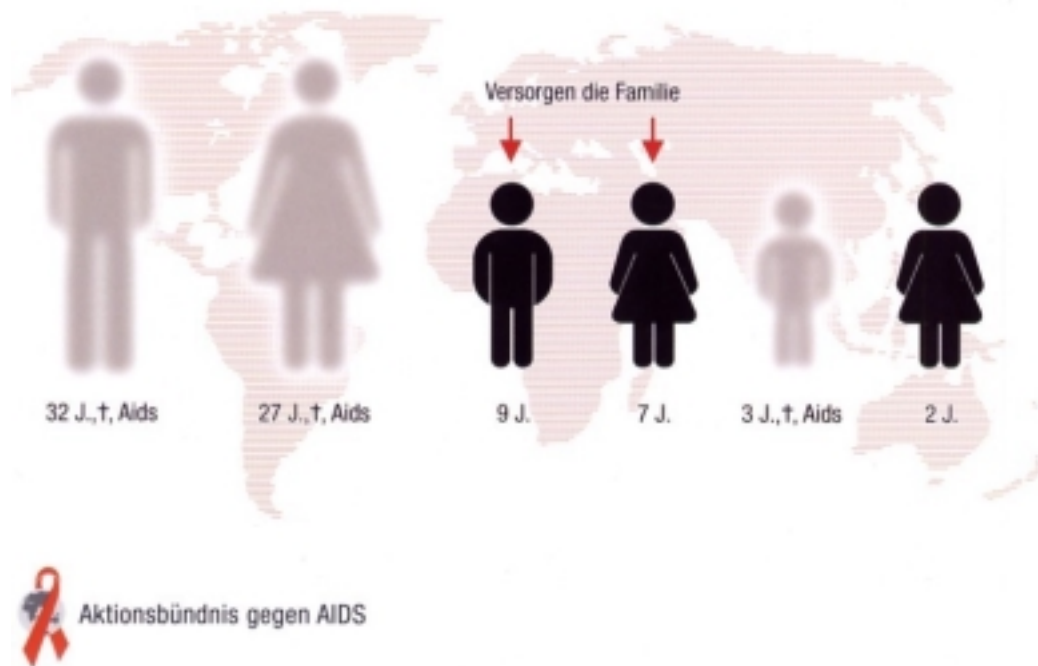
AIDS is an immune deficiency disease. This means that the bodies of AIDS patients can no longer really fight other diseases, which normally would be no threat to life. It is caused by a **virus**, the HI-virus, and it is transmitted through infected blood, for instance through unprotected sexual intercourse or when drug addicts use the same syringes. But children, too, may be infected even before birth in the womb, when their future mothers are HIV-positive.

Once the disease has broken out, it leads to death sooner or later. No remedy has (yet) been found, and no vaccination is possible. But when they get appropriate medicine, HIV positive people may now, under certain circumstances, be able to live for many years with the disease.

In the industrialized countries, i.e. also in this country, these drugs are widely available. In the so-called “developing countries”, however, many thousand people die of AIDS every day. All over the world, some 42 million people are infected. 30 million of them live **on the African Continent**. There, every tenth grown-up person is HIV positive, and every day, the number grows by many thousands.

South Africa is one of the countries most affected. Here, every third grown-up person is infected, and it is assumed that the average life expectancy will drop from 60 to 45 years in the years to come. Every fourth (in some region even every second!) pregnant woman has been infected; this means that about 30% of all children are born HIV positive! Besides, 4 million AIDS orphans are to be expected over the next years.

3. A picture illustrating this



This picture has been printed on a postcard by “Aktionsbündnis gegen AIDS” (Alliance for action to combat AIDS); the postcard calls on the German government to put more funds at the disposal of AIDS organizations in the 2005 budget than have so far been allowed for.

It shows a family situation which is typical of many children in Africa (and elsewhere): The parents have died of AIDS. The older children have to care for their younger brothers and sisters.

Through the service today (and the offering we’ll collect) such families shall be assisted, among other things.

And what has this got to do with Jesus?

Jesus always cared for people who were in distress: He took the children in his arm though the grown-ups wanted to keep them away from Him. He ate with tax collectors and sinners and forgave them their sins. He healed the ill and the lepers. And he said: “As the Father sent me, so I send you.” (Jn. 20:21) What else should this mean but that now we are to act in His name the way He did: to tell the good news of God’s Love for us and to care for the weak, the ill and those pushed towards the edge! This is the reason why we are celebrating this service on this Sunday of World Missions.



By Rev Andrea Klimt, Vienna (Austria)

1. Preliminary remark

The biggest problem about HIV/AIDS is the taboo surrounding it. People who have been infected realize very soon that others are afraid of them. It is the fear of being touched. The fear of talking about the disease. The fear of catching it. The fear of what's ahead. Thus, those infected often remain alone with their anxieties, isolated. Moreover, AIDS being a taboo increases the danger of its spreading. If HIV/AIDS is not talked about, there can be no preventive counselling or work. Catching it unknowingly is more likely when partners do not mention that they are HIV positive. In Matth. 9:19-22 (Mk. 5:25-34; Lk. 8:43-48) we see a woman who suffers from severe bleeding. Because of this disease she is excluded from society. She is "impure". People are afraid of touching her and don't want to be touched by her either. The fear of touching the person and/or her blood as well as the secretiveness, are parallels to the theme of our service.

2. How to present the theme

Material: We need a red "scarf", from which later on many small red ribbons (symbolizing AIDS awareness) can be cut (or picked). This scarf is to be visible throughout the service (laid or hanged so as to form the "red ribbon"). At the beginning of the creative part, a woman enters the "stage". Someone now drapes the red scarf around this woman. She stands still while someone else is reading. In case there is a cross in front /on the "stage", the woman could turn her eyes towards the cross and turn her body in its direction to stand facing it.

3. Reading

A voice is heard reading the following poem:

Here she comes

Furtively she steals about the crowd

She does not want to be seen

She knows that she has no right to be here

No one is allowed to touch her

And she is not allowed to touch anyone either

She is lonely

There is nobody she can really talk to

She is afraid

But today her courage outweighs her fear

She does want to touch Him

She wants to touch Jesus

She approaches Him from behind

She touches Him

And (short break)

He turns around
He looks her in her face
He talks to her

He allows her to touch him
He allows Himself to be touched by her suffering
He is not afraid

Those who believe
Allow themselves to be touched

Those who believe
Allow themselves to be touched

4. End

After the text has been read a further person arrives and cuts small strips from the woman's red scarf and passes them on to the worshippers. Each one gets a piece of the scarf. On the one hand, this is meant to express that we are all concerned and, on the other hand, that together we want to commit ourselves in prayer, in word and deed against the spread of AIDS/HIV. Everyone attending the service can now pin his ribbon on his or her garments (using a pin or safety pin). It would be advisable to have prepared many small strips beforehand for distribution. But by cutting some strips from the woman's scarf a link is established with what has just been experienced.

After that the scarf is either draped around the cross (reminding us of Isaiah: He took our suffering and our pain with Him onto the cross) or spread on the table or on the floor in the form of the "red ribbon".

While the small ribbons are being distributed someone (preferably not the person who read the text) can point out that by wearing the "red ribbon" we declare our solidarity with those suffering from HIV/AIDS. Feeling solidarity with those who suffer means: We allow ourselves to be concerned by their suffering – we pray for them – we are aware that Christ Himself suffers when they suffer (Matth. 25:40) – we'll do our best to contain the HIV/AIDS pandemic.

Sunday of World Missions 2004

Caring and Alleviating Need

Suggested Sermon on Lk. 10:25-37 (draft)



By Rev Thomas Klammt, EBM Regional Representative for Southern Africa and lecturer at the Baptist Convention College in Soweto (South Africa)

Reading: Lk. 10:25-37

Dear friends:

We've heard it, the story of the Good Samaritan. A nice story about a nice man. Or could it be more? We should not be too quick in crossing it off. Maybe we can try to continue the story. Imagine that one year later we are listening to the news on Radio Jericho:

And now, the latest news from the region. This morning there was a celebration to open the new road from Jerusalem to Jericho. The Minister for Transport, Ms Happy, explained the latest safety standards: The gradient has been reduced everywhere and slopes are announced by road signs; all along the 25 kms there is now lighting day and night. Cameras monitor the critical passages. And should anything happen in spite of this, there is an emergency telephone every kilometre. Within minutes, the police and the emergency doctor will be at the site of any accident, round the clock.

"Thus, we now are no longer dependent on the 'Good Samaritan' after all," said the Minister for Transport, with Jericho's road-users applauding.

The passage had become to be known as the "death mile" over the past years, fatal accidents and robberies occurred regularly. Last year, only the attention of a motor cyclist saved the life of Mrs. M. On his way back from his night-time visit to a disco, Mr O. found the seriously injured woman, gave first aid and informed the police by mobile. This morning he was awarded the medal of merit of our country.

After that, we talked to Mr. O.:

"It must be a great pleasure for you to know that your action has not only been rewarded but won't be necessary in the future at all."

"Oh well. But it is really crazy: you are honoured for simply helping another person. - And, by the way, I can't share your optimism: There will still be victims – whether on this road or elsewhere. I only hope that should I be driven off the road some day because I'm tight, that then you'll be there to save me."

Do we still need the Good Samaritan today?

We rather try to minimize the risks, make dangerous passages less dangerous, and, just in case, we have got a travel insurance or the private security service. And if something goes wrong all the same, we bitch about the police, who are too slow, or about the idle politicians.

Where does the Good Samaritan come from anyway?

Jesus is telling a story. Not in the evening round the campfire to his tired disciples, so they might fall to sleep. No. He is answering a question. And he is answering it in a way that the man who asked it is completely dumbfounded. At least we don't hear anything else about this expert later on. A "teacher of the Law" or a "scribe", as he is called. A "professor" we would say today. His question is quite direct and personal: "What must I do in order to receive eternal life?" (Verse 25)

What would have been your answer?

There is a very simple one, the evangelistic variety: pulling the four spiritual laws out of your pocket, explaining sin and redemption – that's it! Not such a bad method, by the way.

Of course, there is a more complicated method, the academic one: first analysing what the person means by 'eternal life'. Then stating, along with Luther and his understanding of Romans, the principle that you cannot and must not achieve anything by yourself in order to get eternal life.

Jesus uses his own method: He asks a question in return. And he gives the expert an opportunity to show what he knows. The question about the Law, of course, is something like a "joker" for the expert. He knows all about it and comes up with an excellent answer right away, and he basks in his intelligence.

And Jesus confirms him: Excellent. This merits an A.

"Do this and you will live."

This really should be the end of the story. From a theological point of view, everything is clear and correct.

But Mr Expert is not content. He feels the sting. Somehow Jesus has spoiled his fun at being right. He would like things to be a little more complicated than that – and a brilliant question comes to his mind: "Who is my neighbour?"

We are familiar with this discussion: Where are the limits to our willingness to help? We cannot save the whole world, can we?

And today our questions may be far more complex: Which charities can be trusted, to be true? And which kind of help is meaningful? Is this really "help for self-help"?

The professor's second question leads Jesus to tell the story of the Good Samaritan. Probably one of the best-known stories of the world. Hardly anyone today knows where Samaria is. But everyone knows the Samaritan. A classic among the stories. Told and retold a hundred times, interpreted anew or even continued. Just as at the beginning of this sermon. It almost seems that we ought to have to invent something new to it. For the story itself is so clear and simple that it doesn't allow for much expounding.

I once heard the sentence: "The Bible asks for living it, not for expounding it." I think this is generalizing too much. But, to be honest, Jesus claims something along these lines here. He terminates the nice discussion by saying this simple sentence: "You go, then, and do the same." (Verse 37, Good News Bible)

This is and remains a story describing an example. You must take it as an example if you want to truly understand it.

Having a closer look at it we discover that there isn't only a good example in this text but also a bad one. Or even two: the priest and the Levite. This is one of the provocations of the story. The priest and the Levite – they could be expected to be the 'good guys', the role models! But they are unmasked here: they don't do what has to be done, they do not lend a hand although they see the distress; obviously they can only serve God during the service.

We see that this fits right in with modern church criticism. The churches and especially their full-time representatives, pastors and bishops, are easily reproached that "they like to talk a lot but don't do anything."

You can get a lot of applause from the according audience with the story of the Good Samaritan. After all, someone is telling these hypocrites the truth! We knew it all the time: they are no better...

But Jesus is not interested in applause. And it is not his aim either that we all should feel a little better because the pastor and the theologian have been rebuffed. He stands there with his commission: “Go and follow the Samaritan’s example.”

And none of the listeners felt like laughing. They would have been pleased if a poor peasant had set the example to the priest and the Levite. One of us, who are still better than “those up there”. After all, we are normally pleased when others are unmasked. And it serves to justify our own little sins.

But Jesus introduces this Samaritan into the story. No one belonging to this group was among the listeners. And they would have had no right to be there. This, indeed, produced the very shock. The bad guy is presented as the role model to be followed. That can’t be it. And, depending on where I tell this story, different people would serve to be this “bad person”: Here, in a good Baptist Church I might say this is your gay colleague, the esoteric neighbour, the Muslim cleric. People that as a ground rule we cannot take for role models. Maybe in (Germany) in 2004 I should say: “Then a politician came along” – this is probably the least respected class in our society. And, just imagine, this politician, this corrupt person, who usually doesn’t do anything but say nice things, who never really acts – this very man helps the poor victim!

Jesus is not interested in debasing any one group of people nor in praising any other. In his eyes, Samaritans were no better people. Jesus simply says: “Do this.” Do what you so eagerly profess to be the truth. Do what you have understood to be God’s Will. Do whatever is necessary and right. Do it!

Jesus very simply asks us to help the poor victim right in front of our nose.

The whole point of the story is the fact that all three of them see the injured man on the road, isn’t it. Twice we read “he saw ... and walked on by” and then, in the third instance, “he saw ... and his heart was filled with pity. He went over to him and helped him.”

Thus, seeing is one thing. Again and again we are called on not to close our eyes at the misery of the world... Open your eyes!

But the difference here lies not in the way of seeing. The point is not the necessity to get more thorough information, nor the necessity to see, to know and understand everything.

Thinking of help and charity we are often all too ready to think in terms of places far away. And in this case, costly information material and fund-raising letters are necessary to waken our charity and to fill in the transfer form...

But there is a much simpler way. What have you seen today so far? Which victim have you walked past? What misery has come before your eyes? It needn’t be the fringe groups of our society. Many of us come across distress in their own house. And we walk past. We don’t give our marriage another chance, keep well clear of our own children or parents. And here, in this service, you may see distress – you may be sitting just one row behind a victim.

And then Jesus says: “This is your neighbour, your fellow man. You are being called on. Do something about it!”

In Africa you can’t help thinking of AIDS when you hear the cue ‘Misery’. Whatever statistics say, the problem is there. And it’s not a problem of gays. Death comes to young men, faithful wives, little children. The AIDS pandemic is ubiquitous. At school, even first graders learn that they mustn’t help a bleeding classmate with bare hands, without any protection. AIDS is transmitted through body fluids – this is common knowledge among South Africa’s primary school pupils!

It is unfortunate that for a long time Christians behaved like the priest or the scribe. We do see the problem but we don't want to tackle it. And, of course, there is an academic Christian discussion about the causes of the scourge. As is well known, AIDS has got a lot to do with sexual behaviour. So you can easily point to the victims and talk about guilt.

But when a human being is in distress he or she needs help. All the discussions about the causes have their place, but they mustn't take first place.

I know the temptation in parenting. When my boy, full of high spirits and in spite of my warnings, has hit the wall with his scooter. Then I am at first tempted to lecture him and to prohibit the scooter for three days. But this I cannot do. I must cool the bump on his head first, dry up his tears, give comfort. All the rest can wait. It's true, then he has to be admonished at times, even punished. And precaution has to be taken to avoid a second time. But all this can only happen after I have helped the injured boy.

It is really crazy how much time we spend on discussing instead of helping – so many times.

One of the major problems in South Africa seems to be the fact that AIDS has become a topic of political discussions and controversies. And a lot of precious time is spent quarrelling to find out about the real cause and core of the problem. And whether the risks and side effects of drugs justify their use. Much strength is used up in discussions while the patients are still waiting for help.

And even the right prevention, too, is a matter of controversy: At the latest World AIDS Conference the President of Uganda was harshly criticized. He had pointed out that sexual abstinence was a more effective way to combat the spread of AIDS than using condoms. He is right, isn't he. And not only this: Uganda has in fact succeeded in slowing down the spread of AIDS and in achieving some control over the terrible plague. But instead of listening carefully to what a successful politician has got to say the conference delegates harshly criticize him. Most of the time, we find discussing easier than actually helping.

And where are the Good Samaritans? They still exist. A volunteer from Berlin is helping to take care of and to nurse AIDS patients in the Johannesburg area for six months. She is ready to pay quite a lot to do so. She is working in one of the numerous projects which have by now been set up by Christians in South Africa: where nurses are sent into the homes of the people affected or orphans are taken care of. This task is wearing down, sometimes frustrating. But the misery is so widespread and obvious so you just have to do something about it. And often it is not the pastors and Christian professionals who are the first to tackle the job.

Jesus makes the most ordinary people our role models, often even the absolutely impossible people, who help in a simple and practical way. Who devote themselves to do good and to combat misery. Who feel pity instead of quarrelling about words. Who help in a sacrificial way instead of producing percent numbers and then questioning them again.

Jesus Himself did it that way. He did not leave it at the theological discussion. He did not publish this story in a nice picture book, enjoying the view of the Sea of Galilee. Before He told this story, He had already brought deliverance to those obsessed, He had healed sick people and distributed bread to the hungry. And in the same chapter, Luke 10, He instructed his followers to do the same. Theological debates and story-telling were not his main occupation. He did see those suffering and devoted Himself to them. Jesus was not only a teacher who knew the answer to everything. He was a man of action. He was often overwhelmed by the sheer amount of misery. Therefore he also had to retire, in order to get new strength.

But He never simply went past those who needed Him.

He is our role model. To many, not an agreeable role model. He came from the wrong area, from Nazareth. His career and His followers did not correspond to what was expected. His theology was debated in heated discussions and was not straight according to the standards of His time.

Jesus – the friend of AIDS patients. Not because he approves of their sexual behaviour. Not because He wants to talk about their guilt. But because they need Him.

“Go and follow His example!”

AMEN