The United States seems to be headed toward war against Iraq. But military action against Iraq could bring dire consequences for hungry and poor people—not only in Iraq, but around the world. As peacemakers and justice-seekers, Christians have a responsibility to weigh the ethical concerns raised by this impending war and make a faithful response.

The Bush administration has convinced the U.S. Congress and the United Nations Security Council that Saddam Hussein’s pursuit of weapons of mass destruction poses an urgent danger that must be met. On October 10, Congress approved a resolution giving the president the authority to use military force against Iraq. On November 8, the U.N. Security Council approved a tough new resolution giving Iraq a final opportunity to comply with disarmament resolutions and admit weapons inspectors without restriction. A full report from the inspection teams must be presented to the Security Council no later than February 21, 2003.

The U.N. resolution does not authorize war as a response to Iraqi failures to comply but requires the Security Council to discuss the report of the inspection teams and determine any further actions. However, the Bush administration continues to declare its intention to undertake military action against Iraq, unilaterally if necessary, if it determines that Iraq has not fulfilled its obligations under the U.N. resolution.

The administration has justified this threat of unilateral U.S. military action with a new national security policy that shifts away from the deterrence doctrine guiding U.S. foreign policy for more than 50 years, stresses U.S. military pre-eminence, and allows U.S. political leaders to take a first-strike, pre-emptive, go-it-alone-if-necessary approach toward governments deemed threatening. Disturbed by the prospect of such a war—despite the impassioned claims from the White House—an unprecedented number of U.S. religious leaders have formally and publicly called for restraint, urging our nation’s leaders to vigorously pursue the alternatives to war.

History has proven that war is one of the major causes of hunger.
AIDS and Famine in Southern Africa

The situation in Southern Africa today is more complicated and devastating than the famine caused by drought that we are accustomed to hearing about. It goes beyond food shortages brought about by armed conflict.

What is happening now is a widespread and growing plague that exacerbates, and is exacerbated by, the problems of food insecurity. Weakened by AIDS, millions of men, women, and children who once could weather the “seasons of hunger” are now too fragile physically to cope with food shortages.

The HIV/AIDS pandemic has ravaged families all over Southern Africa, and many of the people who would normally tend crops have died or are too weak to work the fields. Food aid workers say that either AIDS or the food crisis alone would put tremendous pressure on a population struggling to subsist. Together, they are catastrophic.

Every day in Africa 6,500 men, women, and children die of AIDS. Another 9,500 Africans are infected with the disease each day. In Malawi, an estimated 19 percent of the population is HIV-positive. In Zambia, the figure is 22 percent. Life expectancy has dropped to 39 years. In these two countries, each with populations of 11 million to 12 million, there are as many as 2 million AIDS orphans.

In South Africa, an estimated 6 million people are HIV-positive. In Botswana, more than one-third of the adults are HIV-positive. Life expectancy here, too, has plunged from over 65 to under 40. More than 65,000 children have lost their parents to AIDS, and that number is projected to double or triple by 2010. Statistics are similar all over sub-Saharan Africa.

—from the Christian Science Monitor, the Washington Post, and Jubilee USA

AIDS Treatment Gets a Boost in South Africa: Mandela Teams Up with Doctors Without Borders

CAPE TOWN, SOUTH AFRICA—In December Nelson Mandela and Doctors Without Borders/Médecins Sans Frontières (MSF) announced that they would join forces to create a new AIDS treatment project near Umtata, Mandela’s birthplace. During a visit to one of the AIDS clinics in Khayelitsha, Mandela expressed support for the treatment initiative, coupled with prevention programs, to protect the lives of people infected with HIV and to curb the impact of the virus.

Dr. Fareed Abdullah, director of HIV/AIDS programs in the Western Cape province said, “The AIDS program in Khayelitsha has been demonstrating for over a year that it is not only possible to effectively treat people with AIDS in poor settings, but that bringing antiretroviral treatment into the battle against HIV/AIDS radically changes a community’s perspective about the disease. The challenge is now to scale up treatment in order to reach the estimated 600,000 people who desperately need it in South Africa.”

An estimated 6 million South Africans are HIV-positive. Only one in every thousand people who currently need antiretroviral treatment (ART) in South Africa receives it through public services, half of them through the AIDS clinics in Khayelitsha.

The Khayelitsha clinics are the result of a partnership between MSF, the Provincial Administration of the Western Cape and the Treatment Action Campaign. Established in 2000, this is the first program in the country to provide ART in public primary health-care services. Already clients have shown dramatic improvements. Ninety percent of clients on ART had undetectable viral loads after three months, a figure that remained constant over the following three months, indicating high levels of compliance. Patients on treatment for 6 months have shown an average weight gain of 19.4 pounds. Since the introduction of ARTs, voluntary counseling and testing in the community has also risen dramatically from 1,000 per year in 1998 to more than 12,000 in 2002.

By using generic versions of antiretroviral drugs, MSF has been able to provide triple therapy at about 10 Rand ($1 USD) per patient per day, a fourth of the price of the same medication purchased at a South African private pharmacy. Nevertheless, the cost of ART could still be substantially reduced, to as little as 2 Rand ($0.23 USD) per day.

—from Doctors Without Borders/Médecins Sans Frontières
Botswana: A Small Nation’s Big Effort Against AIDS

SEROWE, BOTSWANA—The southern African nation of Botswana has declared war on AIDS. With financial help from the Bill & Melinda Gates Foundation, material aid from the pharmaceutical firm Merck & Company, and research from Harvard University researchers, Botswana president Festus Mogae has launched an all-out assault. The effort has been called the developing world’s most intense attack on AIDS—including free antiretroviral drugs for any HIV-positive patient who needs them. Proponents say that the outcome of this project could shape the future of HIV/AIDS in developing countries.

However, project coordinators say that, at present, they are winning major battles but losing the war. Patients receiving antiretroviral drugs are doing far better than expected, often recovering from near death and rejoining the nation’s workforce. But their numbers are far smaller than expected, because the promise of free treatment has failed to persuade the vast majority of Botswanans to get tested for HIV, or to change their sexual behavior.

The virus is still spreading much faster than it is being treated, with an estimated five new infections per hour and 75 deaths per day—among a population of about 1.6 million. Two years into the five-year African Comprehensive HIV/AIDS Partnership, Botswana is learning what big money, free drugs, and strong leadership can and cannot do to halt the epidemic.

“We’re making astounding progress, and it’s astoundingly inadequate,” said Ernest Darkoh, a physician who runs Botswana’s antiretroviral program. The reality, leaders say, is that Botswana’s people spend their weekends at funerals.

Not too long ago, the small country was touted in among anti-hunger groups and nongovernmental organizations as one of the best success stories in Africa. Botswanans discovered diamond mines within their borders after gaining independence from Britain in 1966, but avoided the warfare and corruption that followed the discovery of gemstones elsewhere in the region. It evolved into a well-run democracy with a fast-growing economy, featuring the continent’s strongest credit rating and lowest infant mortality rates.

The Gates Foundation and Merck & Company have both pledged $50 million in assistance over five years. Merck is also offering an unlimited supply of antiretroviral medicines, which are available to only about one-tenth of one percent of infected people elsewhere in Africa.

The Harvard AIDS Institute has developed a training program for the nation’s health care workers and launched a new research laboratory in the capital city of Gaborone. Botswana’s president has provided aggressive leadership, chairing his country’s AIDS council and badgering his health officials with questions about condom distribution in prisons and construction timetables for clinics.

Since last January, more than 3,000 patients have enrolled in the new antiretroviral program—known as Masa, or New Dawn. So far, only three percent of the participants have dropped out, even though the drugs can cause side effects such as nausea, headaches and dizziness. About five percent have died. Darkoh, the program director explained that, although this might sound like a large number, the illness of these individuals had advanced to the point that their expected death rate without antiretroviral treatment would have been 30 percent to 40 percent.

The partnership’s officials said that as they build more clinics and train more staff—and as word spreads that there is hope for people suffering with the disease—they will make more progress.

—from a Washington Post story by Michael Grunwald

“Those Treatments Won’t Work in Africa Because…”

There is a raging global debate over the cost-effectiveness of antiretroviral therapies—often known as the “AIDS cocktail” or triple therapy, because the drugs must be taken in combination. The cost, skeptics (including the Bush Administration in the U.S.) say, would be high and patients would fail to follow the strict daily regimens required for the drug therapy to work. However, statistics, interviews and internal partnership documents have not borne this out.

Also, top U.S. foreign aid official Andrew S. Natsios—among others—have expressed warnings that patients in developing countries would skip doses and create drug-resistant strains of the disease. These warnings, however, have not been borne out in Botswana. The program’s adherence rates seem significantly higher than those at treatment centers in the West, the project’s leaders said, and an antiretroviral program at Debswana—the diamond-mining partnership between De Beers Centenary AG and the government that is Botswana’s largest employer—has produced similar results.

What studies do suggest is that the Botswana project is still struggling to recruit doctors, nurses and social workers, to build desperately needed infrastructure, and—most of all—to change the deadly culture of denial that still swills around AIDS in southern Africa.

—from a Washington Post story by Michael Grunwald
Who’s Hungry in America?

Comprehensive Study Unearths a Few Surprises

CHICAGO, IL—In a recent study by America’s Second Harvest (ASH), Hunger in America 2001, researchers interviewed 32,000 U.S. individuals and came up with a few surprises.

The study found that 23.3 million U.S. dwellers nationwide sought and received emergency hunger relief last year from the ASH network of food banks and affiliates. This is nearly two million more people than sought similar services in 1997.

The Faces of Hunger: Not What Most People Think

In addition to showing increased requests for aid, Hunger in America 2001 punctures the myth that hunger is only a problem of the inner cities, homeless populations, or chronically unemployed people. Although the food bank network serves all of these populations, nearly 40 percent of the households that received assistance in 2001 included an adult who was working. Almost 11 percent of all the clients served by the network were seniors. More than 9 million children received emergency food assistance. Women continued to disproportionately experience hunger, representing nearly two-thirds of adults seeking food assistance.

Although many people have come to consider hunger to be a problem of the inner cities, nearly half of all emergency food recipients served by food banks live in rural or suburban areas of the country.

The study also found that nearly half (45 percent) of people living in low-income households have to choose between paying utilities or buying food. More than 35 percent choose between buying food and paying their rent or mortgage.

Thousands of Agencies Not Enough to Meet Growing Need

The study also measured the response to hunger by a nationwide network of charitable agencies and volunteers. Researchers surveyed nearly 24,000 hunger-relief organizations in the ASH network to provide a picture of the work being done and the challenges the agencies face. Even though the network is distributing more food than it did in 1997, researchers found that the agencies are still not meeting the demand.

The study concluded that the efforts of these agencies must be complemented by continued support from federal nutrition programs—and that programs for food stamps, WIC (Aid for Women, Infants, and Children), and school meals are crucial to helping low-income families survive.

—from America’s Second Harvest

Report Measures the Cost of Hunger Among Children

WASHINGTON, DC—The Center on Hunger and Poverty, along with Brandeis University, has compiled, in The Consequence of Hunger and Food Insecurity for Children, evidence from recent scientific studies on the link between inadequate food and poor developmental outcomes in U.S. children.

The research reveals that children in food-insecure and hungry households have a below-average health status including more frequent ear infections, a higher incidence of iron deficiency anemia, and more frequent hospitalizations. One study researched children under the age of three who visited urban emergency rooms in six states, and found that food-insecure children were one-third more likely to be hospitalized than food-secure children.

Research has also linked food insecurity to emotional and behavioral impacts. Hungry children are more likely to have poorer mental health, to be withdrawn or socially disruptive, and to exhibit behavioral disorders. These children have more difficulty getting along with peers, increased chances of being suspended from school, and a greater need for special counseling and education services.

A study in three cities showed that hungry children were more likely to exhibit impaired psychosocial functioning, including higher levels of anxiety, irritability, hyperactivity, and aggressive behaviors. A multi-state study revealed that hungry children under the age of 12 were more likely to experience fatigue and irritability and have difficulty concentrating.

The link between nutritional intake and the ability to learn has been well documented for several years. Researchers agreed that even mild malnutrition could be a developmental risk factor for children. Studies now indicate that children from hungry households do not perform as well on academic achievement tests, are more likely to repeat a grade in school, and have higher rates of tardiness and absences.

—from the Center on Hunger and Poverty and the Texas Association of Community Action Agencies
Anti-hunger activists now have an opportunity to make progress against world hunger by urging the U.S. Congress to rise to the challenge of shaping a Millennium Challenge Account (MCA).

In the year 2000, most of the nations of the world, including the United States, agreed to a set of eight achievable goals to reduce global poverty and hunger. These United Nations’ goals, known as the Millennium Development Goals, set a target date of 2015 to achieve significant improvements in hunger, poverty, education, health, the status of women, environment and other areas in developing countries.

The Millennium Development Goals call on the world’s wealthy nations to be full partners in this effort. In March 2002, President Bush proposed a dramatic increase in U.S. foreign assistance for poor countries that demonstrate their ability to use the money well. When fully implemented, this Millennium Challenge Account would double U.S. poverty-focused development. This historic proposal calls for an additional $1.7 billion in 2004, $3.3 billion in 2005, and $5 billion in 2006 and each year thereafter, for programs that help hungry and poor people become self-reliant.

The MCA has the potential to improve nutrition, health care, education and drinking water for millions of people in developing countries and to help these countries meet the Millennium Development Goals. This can only happen if Congress approves the legislation and funding for the MCA.

The president said that MCA recipient countries would be chosen for their commitment to use the funds well. The challenge is to ensure that fair eligibility standards are adopted, that the plan is fully funded, and that it is focused on reducing hunger and poverty. Bread for the World will work with a broad coalition of religious, development, and labor groups to urge Congress to fully fund the Millennium Challenge Account and to design the MCA to have a meaningful impact on the lives of people most in need.

“Rise to the Challenge: End World Hunger” will urge Congress to include the following key components in the legislation that creates this new development assistance program:

• Only the world’s poorest countries should receive assistance from the MCA.
• MCA funding should be directly linked to achieving the Millennium Development Goals in the countries that receive assistance. Countries must use MCA funds to increase spending in such areas as health, education, nutrition, clean water, sanitation, agriculture, small business development and infrastructure.
• MCA assistance should support national poverty reduction and development strategies designed with broad-based citizen participation.
• MCA assistance should strictly be used for poverty reduction.
• MCA funding in the US federal budget should be distinct from, and in addition to, current funding for other development assistance programs.
• MCA assistance should be coordinated with the development assistance programs of other countries.

For more information, log on to the Bread for the World web site: www.bread.org, or call 800-82-BREAD.
107th Congress Puts
U.S. Poor, World’s
Poor on Back Burner

WASHINGTON, DC—Last fall the U.S. Congress, as a result of what critics called political maneuvering, failed to act on two important pieces of legislation critical to U.S. working poor, and failed to pass several critical bills for global poverty relief.

**TANF Bill Slips from Docket**

The Temporary Assistance for Needy Families Bill (TANF)—the target of Bread for the World’s (BFW) 2002 Offering of Letters campaign, “Working from Poverty to Promise”—was unable to compete with war, homeland security, and corporate reform for a place on the docket. The action needed to reauthorize welfare was postponed until January, causing states that provide critical social services to working poor people to plan for their programs with a high degree of uncertainty.

The sponsors of the Working from Poverty to Promise Act (HR 4210), Reps. Marge Roukema (R-NJ) and John Tierney (D-MA), along with 22 cosponsors, sought policies that would reduce poverty and help families make the difficult transition from welfare to self-reliance. BFW members flooded Congress with more than 200,000 letters and made tens of thousands of contacts through phone calls and faxes.

The House bill, however, included stiff work requirements that failed to consider the realities low-income families face in finding good-paying jobs that enable them to feed their families. The House bill also included a “superwaiver” and food stamp block grant proposal to allow states to divert federal money from nutrition assistance to other programs.

The Senate’s version of the bill, the Work Opportunity & Responsibility for Kids Act (WORK), was more promising, but became bogged down by the possibility of war in Iraq and the election-year dynamics of razor thin majorities in each house. The 108th Congress will revisit TANF reauthorization in 2003.

**CARE Act Fails in Senate**

Similarly, the CARE (Charity, Aid, Recovery, and Empowerment) Act—designed to promote charitable giving among individuals and offer new ways for low-income families to increase their assets—did not pass the Senate.

Despite broad bi-partisan support, several Senators added amendments related to charitable choice and hiring issues, bogging down the process. CARE would have provided charitable deductions for non-itemizers, expanded Individual Development Accounts, and restored full funding to the Social Services Block Grant. Senate sponsors say they will re-introduce the bill in January.

Yonce Shelton, director of public policy for Call to Renewal, expressed concern about “the manner in which TANF and CARE were so easily jettisoned from the national agenda.”

**Military Spending Only**

Bread for the World reported that the only two appropriations bills that Congress approved in 2002 were for military spending. Committees in both houses agreed to increase development assistance, but the bill was not finalized. The U.S. government does not have sufficient funding at this point to move available food to avert famine in southern Africa.

**Debt Relief, AIDS Acts Defeated**

The Debt Relief Enhancement Act Of 2002, introduced by Senators Biden (D-DE) and Santorum (R-PA) and Representatives Smith (R-NJ) and LaFalce (D-NY), failed to pass the House at the end of this congressional year. The legislation would have provided another $1 billion in debt relief for countries already in the Heavily Indebted Poor Countries Initiative (HIPC).

This would have been accomplished by saying that countries should not spend more than 10 percent of revenue on debt service, or for countries with a severe health crisis, like the AIDS pandemic, should not spend more than 5 percent.

This language on debt relief was incorporated into S. 2525 (The United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2002), which unanimously passed the Senate in July. However, this language was not as strong and binding as debt relief proponents would have preferred.

In the House, Rep. Bereuter (R-NE) held up the debt relief language from being included in a similar AIDS bill on the House side. Even though the debt language was removed, the whole AIDS legislation also failed to pass the House this year. The sponsors of the legislation, however, plan to re-introduce the measures next year.

—From Call to Renewal (Sojourners), Bread for the World, Jubilee USA

**Congo Parties Strike Peace Deal in South Africa**

Johannesburg, South Africa—Warring Congolese factions signed a peace deal in South Africa in December to end a four-year civil war that has drawn in six foreign armies and killed an estimated two million people.

After months of talks, negotiators for the Democratic Republic of Congo gov-
government, rebel factions, opposition parties and civil groups reached a power-sharing agreement that all hope will move Africa’s third biggest country toward its first democratic elections since 1960, officials said.

The Congo peace deal—if it holds—would mark a rare diplomatic victory for Africa, where headlines have been dominated by the war brewing in Ivory Coast, long regarded as one of the continent’s most stable countries.

Under the agreement, President Joseph Kabila will remain in office for at least two years. Four new vice presidents will be drawn from the government, the Rwandan-backed Rally for Congolese Democracy (RCD) the Ugandan-backed Congolese Liberation Movement, and opposition groups.

The sides also agreed on the assignment of seven key cabinet portfolios, and five deputy ministers, setting the framework for the delicate power-sharing process to come.

Details of the new agreement will be worked out by a panel overseen by former Botswana President Ketumile Masire. Among the questions to be addressed are a new draft constitution and the date for the installation of the transitional government, expected early next year.

Officials said U.N. peacekeepers, thousands of which have already been approved for duty in Congo, would likely be tasked with buttressing the fragile peace process.

Finally, the plan calls for elections in about two years, the first truly democratic polls in the country since former Prime Minister Patrice Lumumba was assassinated in 1960.

Officials warned that the deal, while an important step, would not in itself guarantee peace in the country. But all sides agreed that the process had moved a big step forward, and that peace was finally in sight for one of Africa’s most troubled countries.

—from a Reuters story by Andrew Quinn.

How Will War with Iraq Affect Hungry People?

continued from page 1

U.S. devoted each year the cost equivalent of just one month of a war against Iraq to debt relief for poor countries and programs that improve health, education, agriculture, water, roads and sanitation, the lives of hungry and poor people around the world could be vastly improved.

This is a moment when all concerned parties—the United States, the other member states of the U.N. Security Council, as well as the leaders of Iraq—must make critical choices.

What You Can Do as a Person of Faith

• Reflect. What does your faith tradition say about war and peace, about international relations, about conflict resolution? What background materials has your denomination prepared about the issues raised by recent events? Encourage your congregation to provide opportunities for education and discussion as the situation with Iraq unfolds.

• Pray. Pray for peace among nations. Pray for a path that enables the United States to move away from the brink of war with Iraq and resolve the serious issues that threaten global stability. Pray that our leaders and the leaders of other nations will make wise decisions.

• Contact your members of Congress. Let Congress know what you think and feel about a war with Iraq. The phone number to reach your senators and representatives through the Capitol switchboard is 202/224-3121. For addresses and email information, as well as help in wording your responses, see the Bread for the World web site: www.bread.org.

Hunger News & Hope Winter 2003
“For the first time in human history, society has the capacity, the knowledge and the resources to eradicate poverty.”
—South African President Thabo Mbeki at the Johannesburg World Summit

Instead of the normal questions which we put to ourselves, these are the questions that the world asks us: “Well, what am I doing with my life? What can I do that the world needs?”

Try out this observation from the theologian Howard Thurman: “Don’t ask yourself what the world needs, ask yourself what makes you come alive, and do that. Because what the world needs is people who have come alive.”

The hard part for me, as I repent and repent, is the understanding that what our children need, what the world’s children need, is to grow up around people who have come alive in God’s calling; that is certainly different than as the world would have us live, work and breed.

—David Nybakke, a minister in domestic violence in Bloomington, Illinois

I want to honor God and God’s little poor ones with what I have. That’s why I give financially. That’s why I preach and teach prophetically. That’s why I spend my hours in that smelly St. Francis House downtown, so I can look the poor in the eye, learn their names, and honor them with the dignity that every one of them deserves. That’s my desire. My motives aren’t always what they should be, I’m sure. God help me in that.

—Fred Ball, Minister General of the Order of Ecumenical Franciscans

My dream has been an infrastructure of leadership across the land, who can educate and mobilize [Christians] in local congregations to find creative, tangible ways to live out their faith in ways that make a difference, in ways that benefit those who are voiceless and powerless, and to do so not primarily as an act of righteousness but as a spiritual discipline. Our encounter with “the poor” is first and foremost an issue of spirituality. It’s how we hear what God has to say with clarity. It’s the only context from which I think the Bible can be fruitfully read.

—Ken Sehested, a minister and peace activist in North Carolina

“...that affordable housing is lower on the President’s list of priorities than it is on ours.”
—Fred Ball, Minister General of the Order of Ecumenical Franciscans

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