

Catholics for  
AIDS Prevention  
& Support

*2020 Newsletter  
World AIDS Day  
December 1st*



# CAPS

CAPS

## About

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# CAPS

## Catholics for AIDS Prevention & Support

CAPS

## Objectives

We are a network of Christians in Britain and Ireland promoting HIV prevention and support.

We aim to be a voice in the church for people living with HIV/AIDS and a catholic voice in the world of HIV/AIDS.

To promote education and prevention, treatment, care and relevant pastoral ministry for all those living with and affected by HIV/AIDS, particularly but not exclusively in the UK and Ireland.

To promote the practical, financial, emotional, spiritual, sacramental and pastoral needs of people living with or affected by HIV/AIDS and to develop appropriate responses.

To promote continuing reflection on all aspects of ethical, theological, and other challenges raised by HIV/AIDS, not least issues of social justice, through publication, seminars, and other relevant means.

## Chairperson's message

In loving memory of John  
Sherrington C.P



I have been asked to introduce myself as the new CAPS' Chairperson, elected last August. I feel both humbled and honoured by the confidence my fellow Trustees have shown in me. I accept the role counting on their support.

Before saying a little about myself I want to thank previous Chair and founder, Vincent Manning, for his leadership. Since 2003 Vincent's vision and faith, his passion for this ministry and his service for others has guided us. Trustees agreed that for CAPS to develop as a sustainable charity, Vincent should resign as a Trustee and be appointed to the new role of Charity Director. I also congratulate Rev. Packiaraj Asirvatham on his appointment as CAPS' Ministry Team Leader. 'Packia' and his family

are welcome to our Christian community: this 'fellowship of the weak'. As Chair, with our members, Trustees, volunteers and supporters, guided always by The Holy Spirit, I pray that CAPS will faithfully continue to serve our sisters and brothers living with HIV.

I also want to celebrate the life of Fr John Sherrington C.P who died at the start of 2020. In this CAPS News he is mentioned frequently. On page 7 we see Fr. John pictured in his Passionist habit, at the foot of the cross, preparing to celebrate Mass. The stole around his shoulder depicts the 'Black Power' movement's fist, here grasping the Cross of Jesus. John wore it as a sign of solidarity with Black people. It is a sign of John's commitment to struggle alongside, and when necessary suffer with oppressed and marginalised people. We miss John, whose influence upon CAPS ministry cannot be underestimated. This edition is dedicated to his memory.

My first job was as a teacher in my homeland, Zimbabwe. Later I trained as an Engineer and that work brought me to the UK in 2000. I enjoy gardening in my spare time.

Like many of the members of CAPS I know what it means to seek refuge

in the UK. It took me ten years to establish 'leave to remain' during which time I was not allowed to work. Amongst the many obstacles, the Home Office lost my passport. Thank God I now enjoy the stability of employment and my home in Surrey. 2020 has been a sad year for me because my mother died. Not being allowed to travel back to Zimbabwe to attend the funeral was a tremendous suffering.

I retain strong links with Zimbabwe and visit each year with my partner Abigail. As a young man I was actively involved in the struggle for Independence, we had great hopes for Zimbabwe. Today, the country remains in crisis. There is a reliance upon those of us who live and work abroad. I continue to support people back home.

My HIV diagnosis in 2002 came as a shock. Diagnostically I was dangerously ill, but I felt strong. My first thought was, 'my God how long am I going to survive?' I knew friends who had become weak who later died but I was spared the ravages of AIDS. I felt God had a message for me, that God was taking care of me. In gratitude, I became an HIV activist. I wanted to help others. With the African Health Policy Network, I was involved in

educational campaigns directed at faith communities. The HIV agencies helped me, and their work remains crucial. Yet, I recall feeling that, for me, something was missing. During 2010 I attended my first Positive Catholics Peer support meeting at the home of Stephen Portlock SJ in London. Christians of all denominations living with HIV prayed together. We shared our faith and our experience, without judgment. As I listened, I understood that within this sacred space, each person was 'making faith sense of HIV'. HIV is more than a medical condition. Diagnosis is a life-shock that changes everything. For HIV to make sense in the life of any Christian the question: 'where is God in this' must be addressed. Here was the missing piece: a Christian community of faith living with HIV. I remember saying to myself 'this is where I belong'.

That is how this journey in faith with HIV began for me. I have been actively involved ever since, giving talks in churches and leading one of our peer-support groups. I sense God's call to serve. There are too many of our sisters and brothers to mention who have helped me grow in my faith. Thank you for reading this short personal introduction. If you are a person who prays, please pray for us all.



John Thornhill

## Remembering Fr. John Sherrington CP

In January 2020, CAPS and Positive Catholics lost their beloved chaplain, brother and fellow-traveller, Fr. John Sherrington CP. John was a member of the Passionist Congregation and he had chosen to share the past four decades walking alongside women and men living with HIV and AIDS on his journey towards Jesus Christ. His brother in the Passion, Fr. Martin Newell CP said of John:

*“...his Passionist vocation was first and foremost about standing at the foot of the Cross, standing with the crucified of today, in solidarity and with love, and finding God and Jesus with them, among them and in them. It was about finding, in his own phrase, ‘sites of suffering’ and standing there, staying there, being with those in whose wounds we can see the cross of Christ. And in whom, especially, we can see Jesus.”*

I met John at a difficult and pivotal moment in my own life. He was a modestly imposing man with a magnificent beard and an embroidered kofia; but I was immediately impressed by his attentive stillness, and how with

very few words and the slightest of gestures, he could convey a sense of absolute attention towards and perfect presence with those with whom he encountered. John lived most of his life with speech and hearing impediments. He had also practised the ancient art of contemplative movement Tai Chi. He had learned deeply and personally the challenges of being heard and being listened to, and he understood how spirit gently infuses action. His wordlessness assured me, and many others who came to know him, that he stood in solidarity in body and spirit with those whom he accompanied.

John was a man of great talent, abundant experience and incredible modesty. He was an artist with a promising career in design, who chose instead to follow his religious vocation as a Passionist priest. His personal journey took him from Newcastle and the mother and father whom he loved deeply, to the ‘crucified’ poor of the Philippines and back to pioneering Passionist inner-city missions in Canning Town and Newcastle-Upon-Tyne once again. He spent many years living his vocation as a road-sweeper: a ‘worker priest’. This movement saw clergy set aside their traditional clerical roles to take ordinary jobs, sharing the living conditions and



*Above: Fr. John Sherrington CP at Jubilee Mass*

challenges of their fellow workers. In the 1980s John became active in accompanying people living with HIV and AIDS. This was a time of great fear and prejudice; and John was a powerful presence of Christian action alongside his sisters and brothers living with HIV; but he was also an important advocate for them in the church.

I shall never forget John’s strengthening and healing liturgies at the Positive Catholics retreats at Douai Abbey. For many retreatants, having shared

their fears, their hurts and their hopes, John would gently embrace these shared experiences, words and prayers and invite the life-giving Spirit to bring hope and peace to all present. These times were always beautiful, deeply moving and profoundly restoring.

By the time John was able to celebrate his final retreat with us at Douai, he

was already very ill with Parkinsons. I remember him preparing to celebrate our final Eucharist together, so exhausted and so unwell that he was unsure if he could repeat the words of Jesus as he celebrated his last supper with his friends: "This is my body, given for you" - and in a very real way, following in the footsteps of Jesus, our friend and saviour, his brother and Lord; John also gave his strength and his gentleness, his love and his life to his sisters and brothers living with HIV and Aids.

I shall end here with John's own words:

*"God chooses what is considered weak in the world's eyes to confound what the world thinks is strong; God's foolishness is wiser than human wisdom and God's weakness is stronger than human strength. 1Cor 1:25ff.*

*Paul also reminds us, and the early followers of Jesus, that God chose them many of whom were not highly regarded by the world's standards, 'God chose the weak to shame the strong, the common and contemptible, those who counted for nothing to reduce to nothing all those considered to count for something'. 1Cor 1:26ff). God's choice continues to challenge*

*us, to be with those that the world counts as nothing. So, here we are proclaiming a Crucified Christ, we witness to his passion as it continues in our day in women and men at Sites of Suffering, our modern day Calvary. We witness to a Crucified Christ, in a crucified humanity, on a crucified planet."*

May he pray for us in Heaven as we remember him here on Earth.



**Fr. John Sherrington CP**

28th March 1947 – 4th February 2020



#### Prayer for World AIDS Day (Tuesday 1<sup>st</sup> December)

#### Prayer resources

Loving God, in the midst of fear and suffering, we pray that all those who are affected by HIV and AIDS would experience your merciful love through their loved ones and through people around them.

We pray that all the children who are affected by HIV will never be abandoned or marginalised, but instead they will be loved and cared for no matter what condition of health they are in.

We pray for the resilience and strength in the hearts of those who are responding to HIV, so that they will never give up hope.

We pray for the healing of our human family on earth from brokenness, sadness and separation due to HIV and all kinds of sicknesses.

We pray for faith in our heart, knowing that You are always present with us, especially in our brothers and sisters who are living with HIV or AIDS today. Amen

*Prayer prepared by Fr. John Toai, MI Order of St Camillus, Ministers of the Sick, Vietnam*



Vincent Manning

## Black Lives matter? Diversity, inclusion and the preferential option for ‘the poor’.

The enduring effects of Racism have resurfaced in public debate during 2020. To speak of inequalities seems inadequate. We need to speak about historic and enduring injustices.

About slavery, genocide, lynching and incarceration, poor educational attainment and grinding poverty, assaults and murders, the UK governments’ ‘hostile environment’ immigration policies, discrimination, lack of opportunities and poorer health outcomes for Black people. The list is much longer.

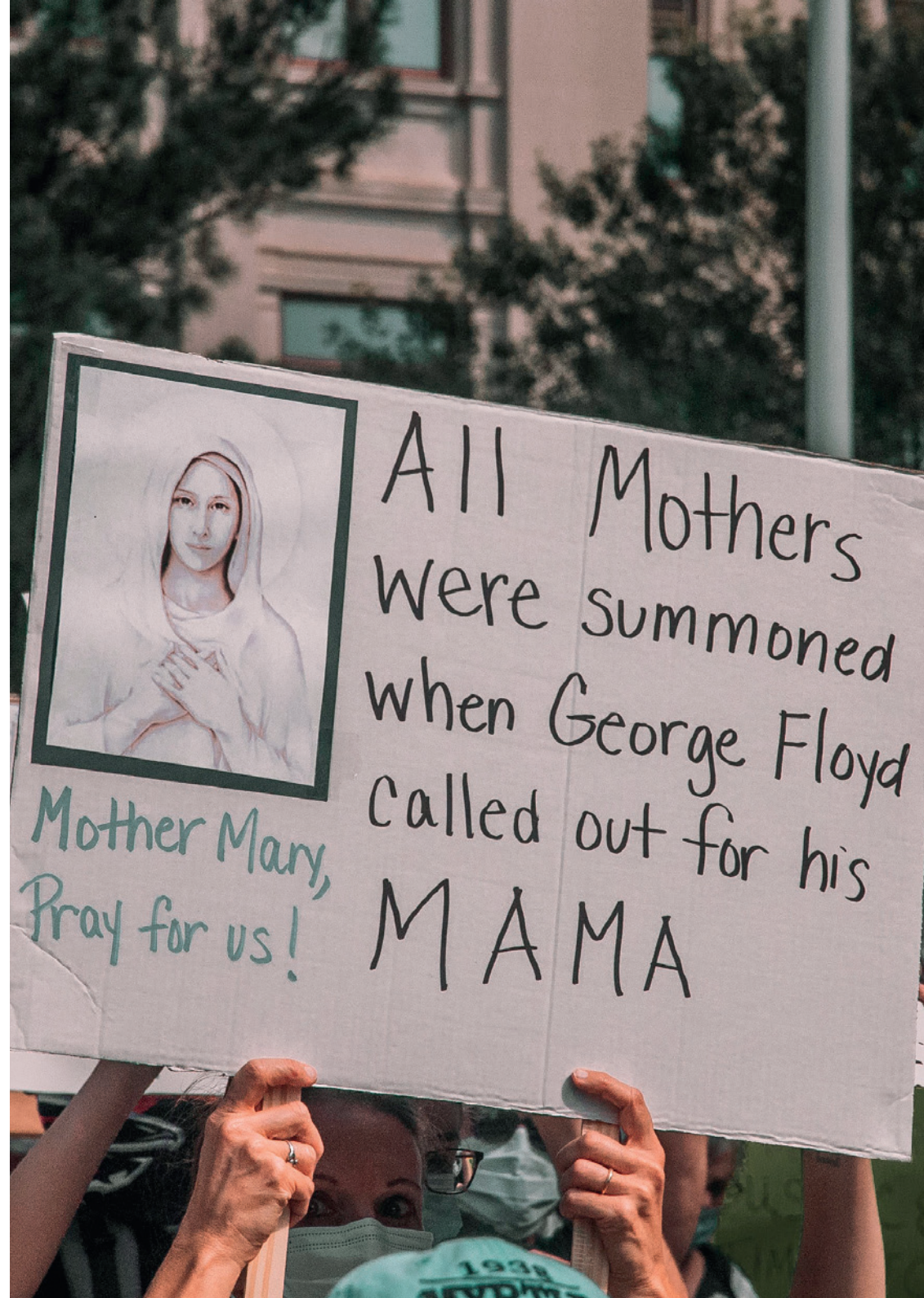
The ‘Black Lives Matter’ protests shout for Justice. The tragic death of George Floyd is a point on a continuum of oppression, signifying something deeper. Yet still some will dismiss these painful cries. Can we listen to angry voices? Racism is real, and cannot be consigned to history. Whilst each of us has a responsibility to critically reflect upon our own prejudices, attitudes and

beliefs, Racism cannot be reduced to individual agency. The Christian is obliged not to deny, excuse or minimise Racism, because every manifestation, conscious or unintended, assaults the dignity of a person. We are all involved and implicated. To address the evil called Racism requires a communal response.

We are aware of the impact of HIV and Aids in Black communities. In the UK, men who have sex with men and heterosexual Black African people are disproportionately affected, comprising 51% and 41% respectively of new diagnoses in 2018. Our peer support ministry has always included PLWH of every ethnicity, sexual orientation, and from any social status. A majority of our members are Black PLWH. We learn from each other. Our diversity is our strength.

Can we say that the public debate signifies a shift in collective consciousness? We will know in the future, when we survey what changes in society and what remains the same. It is encouraging that within national and local government, civil society and grant making bodies, fresh attention is being paid to the question of whether

*Right: BLM protest, photo by  
Leonhard Schönstein*





or not Black people are represented and involved in the governance and management of public institutions and the delivery of public goods.

A Christian response to the disturbing questions and challenges that face us all, might take the advice of the prophet Micah: to Act Justly, Love Tenderly and Walk Humbly. For me this means recognising injustice where it exists, seeking redress, and advocating for those who are marginalised. It means to act differently and radically. Micah speaks of cultivating empathy and compassion as the lens through which we view others, especially those who suffer, rather than rushing to judgment and blame. It is to invite 'the strangers' in and treat them not only as equal but as first amongst us. To listen with humility to those who are marginalised and share our resources with them, including the resource of power which enables us to choose, decide and act.

We must ask why those we say 'matter' to us, the marginalised, the excluded, the powerless, are not in our Board rooms or at the tables around which we gather. In the Church we often say 'All Are Welcome' but often, only on our conditions. Inclusion, participation and diversity in all that we do matters, because people who are not even at the table cannot be understood. Neither

heard nor seen, participation in community is denied them.

We ignore those already marginalised at our cost. There is no salvation without them. The preferential option for the poor is a principle of Catholic social practice not only because of what we think we can do for 'them', but because of what is gifted to us through them. Conversion of the heart is breathed through us unexpectedly. As St. Paul of the Cross, and St. Francis of Assisi understood, in the poor, the stigmatised, marginalised and excluded ones, we meet Christ.

*See also: Focus on the Meaningful Involvement of People living with HIV, pp. 24 -26*



Michael O'Halloran

## On being comfortable with the person God has created

During 2017 my husband, Scott and I began to express our desire to move out of London. This thinking took an unexpected turn following a visit to Minsteracres Retreat Centre, Northumberland in January 2019. With an invitation from Jeroen Hoogland CP, the Rector, we began a process of discernment alongside Lya, who we would live alongside in Community, and with the Minsteracres Trustees. 2019 turned out to be a year filled with stress and challenges but,

also with excitement and hope for the future. We were giving up exceptionally good jobs, which we both loved and selling our home, which we had shared together for over 15 years. Most difficult was the separation from friends and support networks, to move to the other end of the country. This loss has become more evident during the current pandemic, which has affected our ability to discover our new geographical location and to meet people outside of Minsteracres. It has also stopped us, like everyone else, from traveling to visit friends and family.

At the beginning of this year we arrived at Minsteracres and our first



winter in the North East. Although Scott is from the western side of Scotland, he had acclimatised to the warmer southern climate. Thankfully, apart from a few cold snaps and snow falls, the winter proved to be relatively mild. The Summer, however, was more of a shock and far cooler than expected. Minsteracres is situated where the Pennines begin to rise facing North. Occasionally during the Summer, we have been covered in thick cloud for several days. The pay off when the sky is clear, are outstanding views to the Cheviot hills and the Scottish border.

We live with Lya in an exceptionally beautiful Victorian built walled garden. There have been many reasons to be grateful during the pandemic for living in such a beautiful and mostly self-contained space. The long national lockdown was a busy time for us, coinciding with planting, weeding, grass cutting, and the work needed to turn old potting sheds and offices into community spaces. The main community hub came ready-made, the polytunnel where amongst the tomato, cucumber, and courgette plants, we meet twice daily to pray and meditate. In the centre of the polytunnel we have fashioned a wooden cross which is now covered with a fast-growing Passion plant.

We have been welcomed here by the Passionist's, Minsteracres Community, Trustees, and staff as a couple and we continue to be grateful for the hospitality and acceptance we have encountered. While developing our community life and exploring the possibilities for the walled garden, Scott is engaged part-time as the marketing officer for Minsteracres and I work on the retreat team.

The welcome has not been universal. Living authentically, in the truth of who we are so close to the church, has been difficult for both of us. Our presence here challenges some, and this has given me opportunity to reflect on my life as a catholic, which has often been separated from the rest of my life. Church was something I did, not Scott. When engaged in 'church' work, although CAPS and the Community of the Passion have been exceptions, for the most part I never mentioned or discussed my private life. At Minsteracres, there is no-where to hide and I have a more holistic approach to my life, I do not have the opportunity to compartmentalise, as I have in the past.

I have faith that I am created in the image of God. I am gay and therefore

*Previous page: Michael, Scott and Lya and dog Freddy -New Story Eco Community  
Right: Minsteracres Retreat Centre*

God is also gay. So, who has got God wrong; me or the church? This may not be the correct question. My experience of the church (I am referring to the institutional church, in the acceptance that all the baptised are the Church) is commonly one of preaching the gospel but not living it. I hear fine words preached, while often failing to see actions that match. I also hear phrases that I don't challenge such as 'they're discrete'. I go along with these and many other comments because, I have not always believed I deserve my place at the centre of the church. At times being a gay catholic can feel like being in a coercive relationship, where your self-esteem is often squashed, and you

feel grateful for the smallest acknowledgement of your existence.

The usual question then is, why do I stay? I've no real idea. I want to write, 'I have no-where else to go' consciously aware that this may be the voice of a coerced person. My faith in God is a constant, deepening, relationship of love and acceptance. Through prayer and the guidance of lay people, sisters, and priests, I am comfortable with the person God has created and continues creating me to be. I was baptised as a baby, have always gone to church and thankfully, there I heard about a God who is Love. However, much of my experience of the love of God I have





encountered outside of the church. I want to believe that I have a right to be who I am, to live my life as a gay man, as God created and continue to be catholic.

In reflecting on the above, I am acutely aware that the Passionists are affirming Scott and I and many others, recognising our dignity as children of God. The community in which we live with Lya can only exist with the support of the Passionists, who in my experience practice as they preach.

Our community will be known as 'The New Story Eco Community'. We try to live a sustainable life in harmony with God's creation, raising awareness of the suffering earth and providing a place of rest and support to those in need. 'The New Story' is one of the defining works of Thomas Berry, a Passionist priest who was an early voice awakening the world to the emerging environmental crisis. We wish to make his work better known, while also listening to God and beginning to tell new stories about the Gospel and community living that are neither destructive nor dysfunctional.

Writing this article will be one of my last acts as a Trustee of CAPS, a position I have held for over 10 years. It has been a privilege to serve people living

with and affected by HIV (PLWH) in this capacity. During this time CAPS has transformed from a small group of committed people facilitating peer support groups, enabling retreats in catholic settings for PLWH and engaging in education. Today CAPS continue to engage in these activities and finds that many of the people who need our services are some of the poorest in society. CAPS has developed a ground breaking online faith resource for PLWH: 'Positive Faith'. CAPS organises support groups meeting in England, provides social work support to a growing number of vulnerable people, distributed hardship grants to people who found themselves in greater need due to the Covid pandemic, and many more services. As you will have read in this newsletter, CAPS is at an exciting phase of transition which will enable it to continue to serve the needs of PLWH in the name of Jesus on behalf of the church. New trustees with the skills to guide the charity are needed now more than ever. For me I will continue to support CAPS and Positive Catholics in the provision of regular retreats and assisting the team with pastoral support.



Vincent Manning

## Pastoral Support & Outreach during COVID-19

**God's special presence and summons?  
A reflection on two viruses.**

*Some names below changed to respect confidentiality. Some mentioned are also members of the Community of the Passion.*

A tiny virus, has certainly upset society, again. Covid-19 is the latest symptom of a deeper crisis. In addition to the climate change emergency, the evils of racism have re-emerged in public consciousness. The turmoil of Brexit continues, and another little virus, HIV, which has never gone away, remains a crisis of global proportions.

Covid-19 is not so new. Structural injustices, the foundations and consequences of the present world-order, have been brought to attention before. What is new, is that the negative effects of this crisis are being felt more commonly. This virus arrived smack-bang in the midst of our society, disrupted everyone's lives, leaving no person untouched by it, in some way.

I am reminded of Enda McDonagh's insight from 1994 that HIV & AIDS

marks "the time of God's special presence and summons". McDonagh drew upon the Greek concept of 'Kairos time' as used in scripture, when the truth of 'God-with-us' is revealed in new, surprising, and often upsetting ways. Kairos is also a moment of opportunity, from which greater good may come. Paradoxically God's special presence and summons to respond is often revealed in crisis.

However, discerning God's special presence, let alone our responses, is not easy. Especially in the midst of crisis, our fears and insecurities, the impulse to fly from sites of danger, tiredness and the magnitude of converging problems can leave us feeling not just vulnerable, but powerless and hopeless. To adapt an old saying, if you've not been tempted to hopelessness, you've neither understood the challenges nor undergone the suffering. Whatever else can be said of Covid-19, that it is a sign of greater disruption to come is surely undisputable except by the most naïve.

During another pandemic, the 14th century mystic Julian of Norwich wrote that we only know that evil exists because of the suffering it causes. Never in my lifetime have so many distinct yet related signs of suffering appeared all at once to such effect. How to respond? Where to begin?



## In imitation of Simon of Cyrene?

This crisis heightens awareness of those who live continually at sites of suffering. As always, the worst effects are manifested within marginalised communities. Covid-19 is not so new for them but adds weight to pre-existing burdens. As we wait upon a fuller revelation of the Divine Word, where else can we begin but here, in solidarity with them? In imitation of Simon of Cyrene, how can we share in the cross that others bear continuously?

Many people with HIV (PLWH) live with additional health conditions or are elderly and have stayed isolated. For many, isolation triggers that deep wound of exile experienced by migrants who have been separated from their families. For others, the threat of covid-19 is a reminder of previous encounters with mortality and the trauma of so many deaths from AIDS. Too many have yet to recover from the violence of racism, homophobia and patriarchy that made them vulnerable to HIV in the first place. So many endure the long grinding down of poverty and the structural erosion of dignity. Too many remain under the power of exclusion, judgment, rejection and blame, that has afflicted them ever since the day of their HIV diagnosis.

## Works of mercy

During this most recent crisis, CAPS' 'Positive Catholics' community have continued to share the burden of the cross of HIV in various ways.

Mr Shah, has lived in his car since his family ostracised him after his release from prison. Since Covid-19 his delivery work has ceased. He is not entitled to any state support and is suspicious of receiving help from most agencies for fear that the Home Office will use his destitution to deny his application to remain in the UK. CAPS' volunteers check in with him regularly by phone, Lazarus and Abigail visit him at the car park, and bring him halal food.

Ahmed, a recently arrived 16 year old Somali, spent three years in a refugee camp. Bullet wounds testify to his trauma. He exists in 'supported accommodation', which means he lives alone. He received a late-HIV diagnosis in January. Ahmed displays 'challenging' behaviours and his mental health deteriorated severely. The social worker had not found an HIV agency able to cope with Ahmed's complex needs and turned to CAPS for advice. Ahmed is convinced that HIV is a judgment from God. Attempts to find an Imam were fruitless. We advised the social worker on how to engage Ahmed on the issue of HIV as divine retribution. We



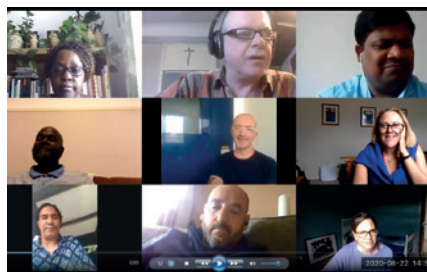


signposted our 'Positive Faith' Films as useful tools to facilitate conversation. We replaced Ahmed's broken phone, sent with love from PLWH. Perhaps this gesture and listening to PLWH via 'Positive Faith' will give him hope that he is not alone. We remain available to support Ahmed in the future.

The community nurse called. She explained she was restricted from making house-calls, but concerned for 'Mary' who had been uncontactable for weeks. Worry intensified since Mary failed to collect medications for HIV, diabetes and mental health, without which her health would deteriorate dangerously. Mary had spoken of attending our retreats. Was there anything we could do? Abigail and Lazarus rang but got no reply. They arranged to pick up Mary's medication and went to her home. They banged at the door persistently. We agreed that if Mary didn't respond, the police must be called. Eventually, tentatively, she replied "who's there?" We received an appreciative letter from the nurse who has since spoken with Mary. Deeply moved, Mary's isolation was relieved, perhaps her life was saved.

Thomas volunteered to shop for Bob who is fearful of venturing out. Tyrone supports a man with cancer undergoing palliative care.

We encourage phone contact between



members, thinking especially of the most vulnerable. ZOOM provides some alternative to group meetings. In Manchester, Joyce and Adela listen to PLWH, some known, others new, and distribute small cash grants to relieve hardship. Similar conversations of care and solidarity happen via John and Tilly in Birmingham, Michael at Minsteracres, in London and Bristol. In these ways too, a Christian presence at the site of suffering of HIV is actualised. Of 195 small grants distributed since June, 50% recipients have no recourse to public funds; 80% is for food; 28% to those with children; 64% to Black African people.

### **'The Name of Jesus is written on their forehead' (St. Paul of the Cross)**

Paradoxically, God's special presence and summons may not be so difficult to understand? As John Sherrington CP put it prophetically: "Christ is present among us, suffering, rejected and often mocked; comes to us weakened. He comes to us as one,

sick and in need, a stranger: as one who suffers! As a Passionist, I have been in ministry, to, with, and for, people who have the Human Immune Virus since the early 1990s, when times were very grim regarding the pandemic. I have had time to journey with them and reflect with them, on the issues. I find myself now understanding that, "the Name of Jesus is written on the forehead of people who are HIV+ ". They bear the wounds of suffering, of stigma and often rejection. In *Positive Catholics, I have seen them to be Simon of Cyrene to one another, and to others. I have seen, by their sickness (their Cross) they, like Christ have broken down in their bodies the walls of divisions; the division between male and female, black and white, well-off and poor, citizen and stranger, Gay and Heterosexual.*" (World AIDS Day, 2011)



*Previous page: CAPS zoom call  
Above : CAPS volunteers in frontline PPE*

## **Rev. Packiaraj Asirvatham ('Packia')** **Introducing CAPS** **Ministry Team Leader:** **Healing for everyone**

*He heals the broken hearted and binds up their wounds. Psalm 147:3*

Whilst completing my undergraduate degree at St. Xavier's college in Tirunelveli between 1999-2002, I got involved in teaching English to the children living in the slums and helped Sri Lankan refugees who were living at the refugee camps. At the same time, I won a national competition to work as a student journalist with Ananda Vikatan, a reputed media organisation with one of the largest magazine circulations in India.

Writing is my passion and being a journalist, I found myself reporting on many social issues. Bringing these various issues to public attention in some ways helps to solve them. One day, I came across information that most people in a small village were affected by various types of cancer. I investigated and witnessed that people were really affected by various tumours and cancers not only in that particular village, but also many other nearby villages. Upon further investigation we

discovered that some of the illegal activities of large rare earth mineral processing companies operating in that area might be the cause. But I was informed by a top civil servant, who advised me to safeguard my life first.

My friends and I tried many things to address this issue at government level. We wanted to help these people. Our many efforts fell on deaf ears. We couldn't achieve anything significant; we were exhausted. But I couldn't leave this as it was. So, in 2003, I started a small NGO named SMILE (Social Mobilization Initiative of Life and Eternity) in Tenkasi, the Southern tip of India, to help these people. It was started to serve the rural poor who were affected by chronic diseases, mainly cancer, HIV, etc.,

Being a 21-year-old man, also working in church as catechist at that time, I was 'stretched'. Listening to so many painful stories of deadly disease, helping people and their families with hospitalisation and small financial help, conducting awareness and medical camps, was challenging. The societal and family pressure on me was tremendous. My mom many times cried to me to leave the affairs of SMILE and just concentrate on church training alone. Her worry was that these deadly diseases might hit back. She was so concerned

that her well educated, committed son should not be affected by any serious disease. As well as her natural mother's worry, she was influenced by societal bias and superstition. Her concern was simple and honest for her child who had chosen an extraordinary path where there was less support, solidarity or recognition, in a world concerned with social status, driven more by fame, money and power. Unfortunately, her fears came true in 2005, two years after I started SMILE, but not quite as anticipated.

My elder brother was a nice, charming person. He ran a local business and was married in May 2005. He was diagnosed with a brain tumour in August the same year. It was devastating news for all of us, especially his newly wedded wife. He underwent emergency surgery and lost his life during a second surgery in 2017. He was just 3 years older than me. He led his life fighting cancer, managing his business, raising his two children and spent his life with prayer and reflection. He often asked me, "why me?". Later, he accepted his condition but found it was very hard to cope, very painful to leave his two young boys, his lovely family and of course this world.

I studied theology, medical ethics and personally encountered many fragile

and sick people in my life and ministry. I closely lived with my most loving brother and gentle human being, who lived his life preparing for his death. My spirituality and faith were challenged by him. I prayed, helped and participated in his healing, which I believe healed his pain and healed my scars of his loss.

Healing ministry is one of the cornerstones of Christianity and God is the source of healing. Being a priest for the last twelve years it is always a moving experience to engage with people and their healing in an empathetic manner. Through the ministry of healing, I experience healing every day. It's an experience of mutual benefit.

As our Healer, God motivates and calls everyone to be a healing agent of His love, peace and joy. But very few listen or respond to these calls of God. I have learned that CAPS peer support ministry developed simply because no one was there to care for the spiritual needs of PLWH within society and churches in the UK. Inspired by our Lord and Saviour Jesus Christ a focus on a spirituality of the Cross and Passion has guided the members. I am learning that they have done as He instructed: to take up their cross and follow Him (Mk. 8:34; Mt. 16:24; Lk. 9:23). In August, I joined CAPS' journey and healing

ministry as Ministry Team Leader to continue the good work started by my predecessor Evie. I hope to serve in the name of our compassionate and loving God with a servant heart. Meantime, I hope many more will join this noble ministry to heal the broken hearted and bind up their wounds.

### Supporting PLWH in the UK Immigration System

We have been involved again this year in composing letters of support for several PLWH who are applying for leave to remain in the UK. These letters function as character references. For each person we also research the situation of the home country of origin in regard to HIV treatment and access to care, as well as social attitudes and stigma within a given country, and include this data to inform the Tribunal that in most cases, the health and wellbeing for most PLWH is often severely compromised if forced to return to their country of origin.

As we go to press, CAPS' sessional support worker Abigail Chakanyuka, has been giving evidence at a tribunal for a woman whom we support. We await the decision of the tribunal in about 3 weeks time.



Vincent Manning

## Focus on the Meaningful Involvement of People living with HIV

The internationally agreed principle of the 'Meaningful involvement of people living with HIV' (MIPA) aims to realize the rights of people living with HIV (PLWH) to self-determination and participation in decision-making processes that affect their lives. MIPA recognises that the active participation of PLWH in policy making and services delivery, is essential if programs and services are to be delivered in ways that are relevant, acceptable and effective. That MIPA is applied is not just a matter of inclusion it is a matter of justice. First agreed at the 1994 Paris AIDS summit, the MIPA principle is in harmony with the principles of solidarity, subsidiarity and the preferential option for the poor, espoused in Catholic Social Teaching.

### What does the Meaningful Involvement of PLWH mean in practice?

'Meaningful involvement' means more than consultation. Tokenistic participation is always unethical

because it commodifies and exploits PLWH.

CAPS is and has always been committed to MIPA. We create opportunities for the fullest possible involvement of PLWH in every aspect of organisational operations.

### MIPA means that:

1. PLWH are fully involved in the design, implementation and review of all services delivered by any organisation to the fullest extent possible. The means of involvement must be adapted to accommodate the situation & circumstances of different individuals.
2. MIPA commits organisational time & resources that actually enable a diversity of PLWH views and voices to be heard
3. MIPA actively resists tokenism and the co-modification of PLWH to meet organisational targets
4. MIPA applies the principle of subsidiarity, contained in Catholic Social Teaching, in practice. This means that real power is shared, and decisions are made by the people closest to and most affected by the issues and concerns of the community.
5. Empowerment of PLWH is an outcome and aim of MIPA. MIPA

includes individuals but cannot be reduced to individuality, rather MIPA commits an organisation to an ethic and culture which works with local communities to support, promote and develop their capacity in decision-making so they can better respond to their own needs.

### How does the meaningful involvement of PLWH inform CAPS' policy and practice?

1. Our organisational priorities are determined through processes of dialogue, listening and workshops which enable PLWH to identify their own needs.
2. We prioritise and direct resources to effect change in those areas of personal and public life prioritised by our members living with HIV.
3. We invest in the personal development of our PLWH members and support them to undertake leadership roles within the governance of CAPS, our pastoral ministry and our campaigning and educational work.

### Recognising racial disparities in the HIV response, how does CAPS ensure that the MIPA includes the meaningful involvement of Black communities?

We apply all of the afore-mentioned

principles and practices with particular consideration for the social, economic and cultural factors that impact many Black PLWH. This includes acknowledging the historic and current structural injustices, based on deep-rooted racism, that are actually operative in our society. Racism negatively effects and diminishes us all. The impact is most powerfully experienced in the lives of Black people. We 'test' whether or not we have meaningfully applied the principles and practices mentioned above in respect of Black PLWH by monitoring their representation and involvement at every level of services delivery and organisational structure. An internal organisational 'audit' of the representation and involvement of Black PLWH will reveal whether or not opportunities for participation and decision making are in fact operative at every level of the organisation. In CAPS the majority of our Trustees Board and a majority of those in senior voluntary and salaried leadership roles are Black people directly affected by HIV.

### What are some challenges of MIPA?

MIPA requires that any organisation actively prioritises PLWH in every aspect of organisational operations. In Catholic Social Teaching we call this principle the 'preferential option'

for those who are poor, neglected, abused, and stigmatised in society. This 'preferential option' is intended to guide our decision making always, and cannot be enacted without the inclusion and active participation of marginalised people. In society, in the church and in the HIV sector we often fail to actually enact this principle in practice, for many reasons. MIPA is easy to agree with, but it is not easy to actually apply in practice. It is especially challenging to meaningfully involve PLWH who are the most disadvantaged in society. The dynamics and effects of oppression are real and effectively silence and marginalise PLWH and especially those who also belong to other disempowered groups. Oppression has the effect of making marginalised people invisible, within society, the church, and the HIV sector. In order to meaningfully involve PLWH we must begin with an appreciation of the dynamics of oppression. To counteract the power of oppression we must consciously factor in the personal and structural disadvantages that render PLWH and other marginalised groups both unseen and unheard.

#### **How does CAPS ensure MIPA is applied within the structure of the charity?**

We pro-actively seek out, recruit, train

and offer opportunities for involvement, including leadership roles, to PLWH. This commitment is reflected in our recent ***Strategic Plan***, devised by our members living with HIV.

#### **It states:**

***CAPS' VISION** is to be a community of empowered people living with and affected by HIV... **CAPS' MISSION** is to empower and support people living with HIV (PLWH) practically and pastorally so that they live well and contribute positively in church and society, and to educate Faith communities and Health sector partners for HIV prevention.*

These statements enshrine MIPA in our stated charitable aims. We start with the priority of PLWH whom we seek to serve and empower before any other organisational aim including for example, increasing HIV testing or challenging HIV stigma in the faith communities. These objectives may follow, but when these or other projects or campaigns are enacted, they follow because empowered PLWH decided to adopt these objectives. In addition, we monitor representation and diversity. PLWH undertake the vast majority of our leadership roles in both volunteer and paid positions.

## **Supporting CAPS**

If you have felt encouraged in your faith, if you have been inspired by what you've read in this newsletter, please consider donating your time, your talent, or your financial support.



You can donate by contributing online through our secure PayPal connection: scroll down to the lower left side of our website, [www.caps-uk.org](http://www.caps-uk.org). Or call / email us for information on setting up a direct debit.

You can also support us by signing up for 'Give as You Live', an online service that collects donations from over 4,000 retailers – sending a small percentage of your purchase's value to the charity of your choice. Register for free at <http://give.as/charity/catholics-for-aids-prevention-and-support-caps> or via [www.giveasyoulive.com](http://www.giveasyoulive.com); search and select 'Catholics for AIDS Prevention and Support'; and go shopping online with one of their registered retailers. At no cost to you, the website collects a donation from the retailer and sends it to CAPS.

If you have skills that you're willing to share in marketing, research, policy writing, computing, press/media, finance, or fundraising, please contact Vincent at [chair@caps-uk.org](mailto:chair@caps-uk.org) to arrange a conversation.

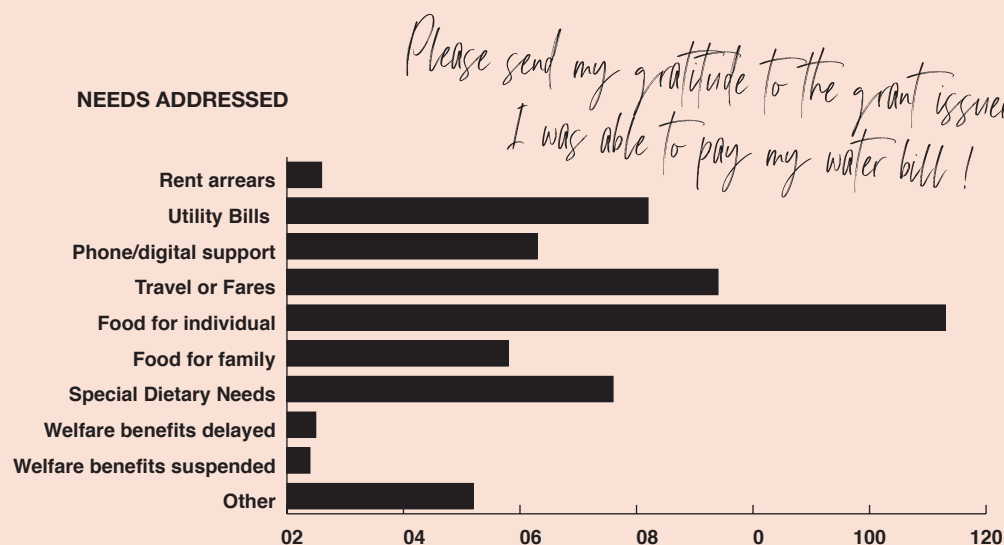
It is your generosity that allows CAPS and Positive Catholics to support and strengthen people who are in need.



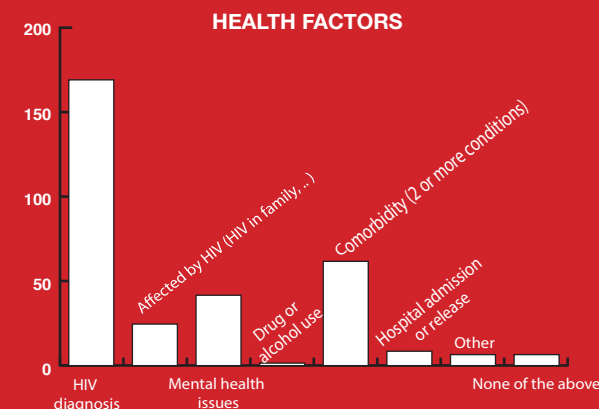


# COVID 19 Hardship grants – A Catholic response for PLWH

In normal circumstances CAPS does not operate a hardship grants program. But COVID 19 put people under tremendous emotional and economic pressure but most especially the weak and the marginalized. From June – September CAPS distributed small hardship grants to PLWH and those affected by HIV and individuals ‘at risk’ of HIV. We partnered with CAPS’ volunteers and trusted partners in the NHS, voluntary sector community groups, churches and the HIV sector to reach those people in most need. Important for our method, each grant given included personal contact and ‘conversations of care and support’.



A total of 195 grants, 68% from £50 - £100, 15% £25, & some larger – approx. 50% to those under and 50% to those over 50yrs - 58% to women and 42% to men - were distributed across the country and to people living in or around Birmingham, Bristol, London, Manchester & Newcastle.



## PARTNER AGENCY'S FEEDBACK

*A client who has significant mental health issues has been supported by our organisation since February 2020. Upon visiting, it was apparent that she had not acquired everything she needed when she was resettled into her current accommodation.*

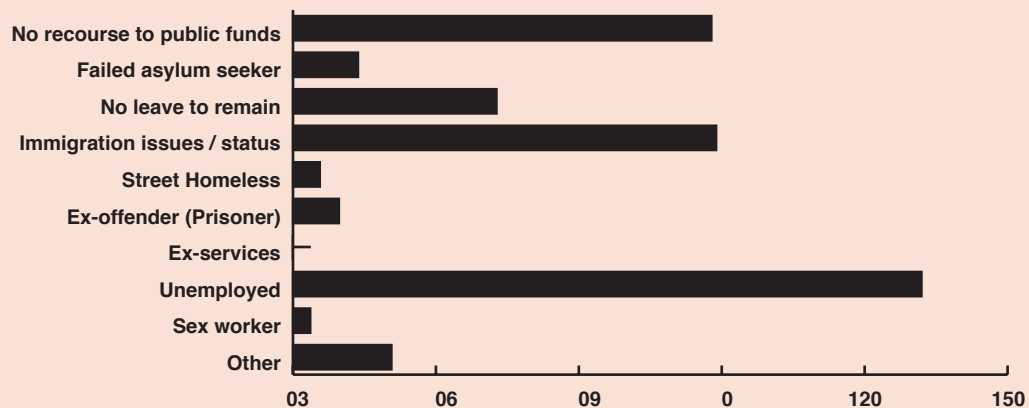
*We noted that she was in need of a sofa, as she was using a dining chair to watch tv, which was her main form of relaxation.*

*The priorities when we initially met were to assist the client transitioning into the benefit system and to support them around their mental health and adherence to anti-retrovirals. They had been in employment until January but had to leave due to their deteriorating mental health. They did not have any savings, as they had recently submitted an application to the Home Office for British Citizenship. Fast forward to March and lockdown. The client caused a pan fire in their kitchen in the early part of lockdown, which ruined their kitchen flooring and cooker. Both items needed replacing. The fridge freezer also stopped working, which we needed to secure funds to replace.*

*With your assistance, the client will be able to access their local second-hand furniture shop, which will ensure continued comfort in their home.*

*This is believed to be significant in the process of recovery from mental health difficulties. Promoting self-care is a long-standing issue for the client, who has low self-esteem and struggles with their diagnosis on a daily basis.*

## SOCIAL FACTORS / CONDITIONS

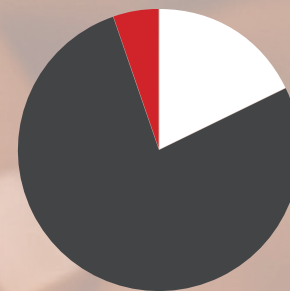


*Male client, aged 48 who has been refused UC (couple claim) on the grounds he does not have the right to reside. He is Polish & been in the UK for approximately 10 years and his understanding of English is limited. Due to both COVID and poor health he is unable to work. He is on a methadone reduction programme and stopped taking his HIV medication because he felt so ill. He has erratic engagement with the HIV clinic who referred him to Brigstowe.*

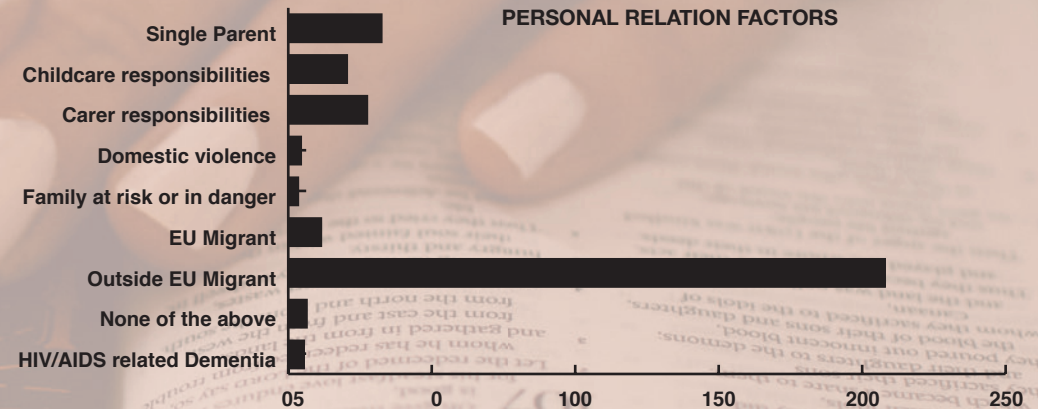
*Georgia, 45, from Zimbabwe failed asylum seeker with no recourse to public funds. She was living with her husband but they separated. She lives with friends, no income, has many health issues including food intolerance, she does not digest several groups of foods which are donated to her by charities*

*Laura, 31, from Guinea Bissau, was married to an EU citizen residing in the UK. He tried to bring her over but this was not possible for a long time, then her husband fell sick and this time when she applied to join her husband she was given a visitor's visa. Unfortunately, her husband did not recover and he passed on before the process of regularizing her spouse visa was completed. Her application was rejected, she appealed with no success. Her passport was lost by the home office. No income, has no recourse to public funds.*

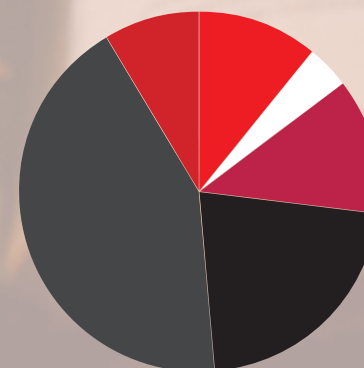
*Alice 26, has two children a 7yr and 9 month old baby. She is on spouse visa. She was working as a cleaner at a gym but it is now closed due to Covid. She can't apply for benefits because she has no recourse to public funds, her husband who was working is currently 'locked down' in Africa where he had gone in March.*



## SEXUAL ORIENTATION



## PERSONAL RELATION FACTORS



## FAITH RELIGIOUS TRADITION





Vincent Manning

## CAPS provides evidence to the National HIV Commission

The HIV Commission is an independent process supported by Terrence Higgins Trust, National AIDS Trust (NAT) and the Elton John AIDS Foundation, to find ambitious and achievable ways to end new HIV transmissions and HIV-attributed deaths in England by 2030.

In November 2019, the HIV Commission launched a call for evidence to inform recommendations. It received 58 submissions from individuals and organisations from across the HIV

sector, healthcare and beyond.

Dr Vincent Manning contributed on behalf CAPS. CAPS' submission was the only evidence presented specifically addressing issues at the intersection of HIV and faith, although a few references to faith and religion as culturally significant factors are made in a small number of other reports.

The Commission website states that "written evidence has informed the HIV Commission throughout other evidence gathering and continues

to inform the development of the final report and recommendations. Each submission was analysed thematically, and all suggested recommendations have been considered by Commissioners."

After describing CAPS, our report outlined the demographics, personal impact, and the social and theological factors at the intersection of HIV and Christian faith. The report asserts that the religious faith of PLWH must be treated seriously and taken into account. It points out that within the population of PLWH Christians are significantly over-represented and are more 'religious' when compared to the general population.

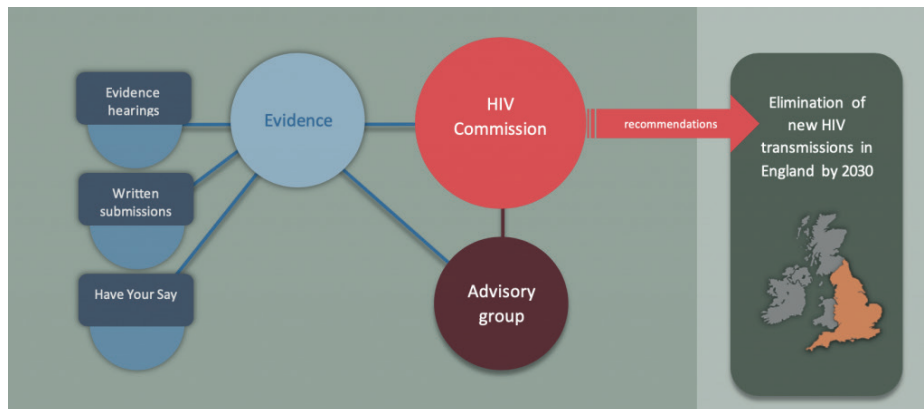
To achieve the elimination of HIV by 2030 and beyond, requires that we

find ways to provide faith-sensitive support for Christian PLWH alongside continuing HIV educational activities including the access to HIV testing.

This assertion directed to the Commission might be more properly addressed to the Christian churches in the UK.

*A copy of CAPS submission and evidence to the Commission is available on request from CAPS.*

*Please email [chair@caps-uk.org](mailto:chair@caps-uk.org) Details of the HIV Commission and publicly available reports can be accessed at: [www.hivcommission.org.uk](http://www.hivcommission.org.uk)*



Our Ref: Ref: /Covid-19/CAPS/2020

28th Oct 2020

Vincent Manning  
Catholics for AIDS Prevention and Support (CAPS)  
PO BOX 24632  
LONDON  
E9 6XF

Dear Vincent,

### **Re:CAPS Covid-19 Emergency Financial Support**

I am writing on behalf of AAF trustees, staff and beneficiaries to express our utmost gratitude to CAPS for the financial support you have provided to our services users who are living with HIV and their families during these difficult times.

The 18 AAF individuals and families who were in receipt of the CAPS Hardship funds of between £50 and £150 during Covid-19 lockdown were in dire need of food and essential items. Majority were vulnerable with some being undocumented migrants, single parents, unemployed, disabled or elderly without much support.

The collaborative spirit and kind gesture exhibited by the CAPS team in extending this support is a fine example of how we should look out for each other and support those in need within our communities.

AAF Chief Executive, Agnes Baziwe had this to say " *Vincent has a big heart and has shown that we can make a difference with even little money. That is really very kind of CAPS*"

One of the recipients who used the money to buy her daughter school shoes and uniform said, " *Please pass my sincere thanks to CAPS. I lost my job and could not spare money for anything other than food. This has really helped*"

Thank you Vincent and CAPS. We value our relationship with you and look forward working together even more.

Yours sincerely,



Denis Onyango  
Programmes Director

## **Positive Faith**

Positive Faith provides video resources addressing HIV and Christian Faith. There are three distinct series to encourage any PLWH and support Christians to make a positive difference.

- 1. Living with HIV - pastoral videos directly addressed to people living with HIV**
- 2. HIV and faith matters - videos for understanding and awareness**
- 3. Church, community and HIV - videos that promote ideas for welcome and inclusion**

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Praise for CAPS' 'Positive Faith' online resources from South Africa

**by Aneleh Fourie-Le Roux**  
**CABSA Director – South Africa**

Dear Vincent,

I greet you with warm greetings from the Christian AIDS Bureau for Southern Africa. We are a faith based organisation that exists to support and strengthen faith leaders in their response to HIV and AIDS. I had a look at a few of your videos – and wished I had the time to look at all of them soon – as the messages are so powerful and calm and reassuring of God's love. Thank you for the energy and investment to make these. May God bless you and your team who are speaking love and truth, while calling people closer to God and closer to self-acceptance. [www.cabsa.org.za](http://www.cabsa.org.za)

**For resources, please visit [www.positivefaith.net](http://www.positivefaith.net)**  
**Positive Faith is an open access internet**  
**resource developed by CAPS.**



## CAPS News Items

### Celebrating the ordination of Rev. Jide Macaulay

*"I dedicate my Priesthood to all persons living with HIV"* Fr Jide Macaulay

CAPS Trustees and members of the Positive Catholics HIV Peer support community congratulate Jide Macaulay upon his ordination to priesthood. He trained at the Anglican theological college, Westcott House, Cambridge, and was ordained Deacon in 2013. Fr Jide presided at his first Eucharist following his ordination by the Right Reverend Peter Hill in the Diocese of Chelmsford on Sept. 26th this year. He serves his curacy at

St Margaret's Church, Leytonstone, London.

Jide is a volunteer Chaplain at The Mildmay Hospital, and founder of the LGBT ministry 'House of Rainbow'. From 2015-2016 he worked for CAPS to support our South West London fellowship peer support group. Jide is a member of Positive Catholics, attending group meetings and our Douai Retreat weekend.

Ordination is a significant milestone. The road to priesthood has had many challenges. Jide has been confronted by racism, homophobia, xenophobia and HIV stigmatisation. "I believe in the mercies, grace and forgiveness of God who has brought me this far, I can now focus on my ministry" said



Fr Jide. He is the fourth member of the Positive Catholics community to be ordained or enter vowed-religious life since 2008.

We pray that Jide will be strengthened for ordained priestly ministry. We offer the continued fellowship of Positive Catholics. We thank God for him, and his service to our sisters and brothers living with HIV. Congratulations Jide!

### CAPS first full-time appointment: Ministry Team Leader

In April 2020 with generous support from the Congregation of the Passion and the Sisters of the Holy Cross CAPS has been able to appoint our first ever full-time employee, as part of our 3 year development plan. The pastoral needs of PLWH in this country deserve the attention and time of workers who are properly resourced and supported. After interviews in February 2020 we were delighted to appoint Rev. Dr. Rachele Vernon O'Brien ('Evie') to the role. Unfortunately, due to family circumstances, Evie had to resign after only a few months with us. We thank God for Evie. She made a contribution to our shared ministry and the development of CAPS in many ways. We

*Left: ordination of Rev. Jide Macaulay (centre)*

will not forget Evie and consider her a member and friend of CAPS. We keep Evie and her family regularly in our prayers. As you will read elsewhere, we are fortunate that Rev. Packiaraj Asirvatham was able to assume the role since August 2020.

**Christian voice in the HIV sector:**  
*'Where there is no vision, the people perish' Prov. 29:18*

The 'Vision for HIV in London Community Advisory Group' is part of the Fast Track Cities Initiative. The Mayor of London and representatives from NHS England, Public Health England and London Councils are partners in the initiative. The intention is to bring together the expertise and understanding and real-life experience of the HIV community, clinicians, commissioners, public health professionals, acute and community providers and health transformation professionals. It will collate this expertise into a collectively designed 'blueprint' for the future development and commissioning and delivery of services across the full HIV treatment and support pathway. CAPS members are contributing so that the needs of PLWH with faith and an understanding of issues at the intersection of HIV and Christian faith will be heard and understood.

## **CAPS Transformation plan**

CAPS is the only national Christian agency dedicated to a support and healing ministry among PLWH and affected families in this country. Since 2003 CAPS has operated as a volunteer based non profitable people group. Now by the abundant grace of God and through the encouragement of many of our well-wishers and supporters CAPS is to transform into a charity with full time staff as part of our three-year strategic plan to create a small professional team. We will retain our Peer support ethos and our emphasis on voluntary service. Despite covid-19 CAPS has met our first year target with the appointment of our Ministry Team Leader (f/t) and our Charity Director (p/t). These roles will support and enable the individual and collective ministries of our many committed volunteers who remain at the heart of CAPS' ministry. Our model still depends upon the formation of adult faith and adult discipleship.

### **The 'new-normal': CAPS Virtual Online ministry and Presence**

As with all organisations, CAPS has been compelled to deliver pastoral support online in lieu of actual peer support group meetings. Thanks to grants from the National Lottery

Community Fund and the London Community Response Emergency Fund we have purchased laptops and telephones to enable our volunteers to facilitate pastoral support and group meetings virtually. Some families have been supported with laptops to assist their children's study. Since March we have run 2 virtual Positive Catholics Peers support meetings each month. Our members have reported how much they miss our actual meetings and the human embodied contact that we all need. Pastoral support by phone requires much more time than is required when we deliver support principally through our actual group support meetings and retreats. This has implications for the ways in which we adequately resource and fund the pastoral care of individuals, especially for the most vulnerable and those who lack access to modern technology or cannot afford the costs. Nevertheless, Virtual meetings go some way to mitigate the sense of loss that is felt and reduce isolation. Above all they allow us to continue to share our joys and anxieties prayerfully with each other. Strategically, this has meant that we have been forced to bring forward the aspect of our strategic three-year plan related to communications and the ways in which we use this technology for pastoral support and our educational activities. In our original plan this was due to be addressed in



*CAPS laptops for families & students*

year three! This will significantly add to our workload, but now that we have started to employ these methods, CAPS is committed to developing an online virtual strategy for maximum possible effect and benefit. On the positive side, as we know from our Positive Faith online resources, a Virtual offering makes our message and support available to a potentially global audience. Watch this space!

### **Partner HIV agencies thank CAPS for collaboration in delivery of Hardship grants**

**Miriam Nye, Social Worker -  
Migrant & Asylum Seeker**

On behalf of Brigstowe and our clients, I would like to thank you and your organisation for your financial support during this incredibly difficult time. It has made a significant impact in the lives of our clients, many of whom are destitute or on very low incomes. It has also made a big difference to our staff, who often struggle to find grants to meet the financial needs of our clients. We also really value how hard you've worked to make the application process as straightforward and quick as possible. We have really appreciated this partnership and hope to work closely with you again in the future. Support service - [www.brigstowe.org](http://www.brigstowe.org)



**Christine O'Brien - Blue Sky Trust, Newcastle**  
[www.blueskytrust.org](http://www.blueskytrust.org)

I would like to say what a difference this funding has made to a number of our members and I would like to thank you for thinking of us.

One member had his credit card stolen and debt added on to it, he said *"isn't there someone else who needs this money more than me? I'm so grateful!"*

One member cried when given some money to help her move into a new home after living isolated in bed and breakfast, she said *"I'm so happy now, this will make so much difference"*

Another member was very grateful for the money given to her for her two sons. She said *"they can now be like their friends, I'm so happy"*

One member who had been homeless for quite some time and had been living between friends houses was so touched by the donation he said *"you're giving me money? - Why me? This is so good because now I can buy more things I need for my new home! Thank you!"*

**I couldn't have done it without you! NHS Community Nursing Services thanks CAPS**

This is a letter of appreciation after CAPS supported one of my patients, during a very critical time of Covid – 19. The patient was in social-isolation, due to their vulnerability as they have a chronic immune suppressive health condition.

My patient had run out of essential medication, and did not have a next of kin to support her. She lives alone. Besides she is hard to engage with because of mental health condition. South West London is thin on services that support my client group to meet their day to day needs. The local authority could not help, neither were there voluntary organisations who were open at that crucial time.

I am grateful that CAPS have efficient volunteers who are familiar with the category of patients such as 'S'. Urgent help was provided. (CAPS volunteers) willingly travelled to collect the essential medication from the hospital to deliver to the patient .. I have since received a beautiful feed-back from my patient, thanking CAPS who were kind enough to bridge the gap at such challenging time. I couldn't have done it without you!

**BAME Elders: Food, Friendship and Wellbeing during Covid 19**  
[www.africadvocacy.org](http://www.africadvocacy.org)

*"Supporting and protecting older people living alone in the community during the Covid 19 pandemic is everyone's business"*

- Dr Hans Henri P Kluge

WHO Regional Director for Europe

CAPS partnered with the African Advocacy Foundation (AAF) in South East London to support the delivery of hot-meals at home for 626 vulnerable & isolated elderly Black women and men living with HIV, providing essential culturally friendly hot food and support over a 12 week period. Denis Onyango of AAF said: "The relief eases the impact of the lockdown and leads to better mental and physical health".

**CAPS as an International Ecumenical voice within the World Council of Churches**

Each year the World Council of Churches and the Ecumenical Advocacy Alliance issue a liturgy – an order of service with prayers, poetry and Scripture – that can be used in churches and other faith settings, to mark World AIDS Day on December 1<sup>st</sup>.

The 2019 service, distributed via the WCC website and circulated internationally, included a major contribution from CAPS. In 'Communities make a difference: practices of solidarity and love' former CAPS Chair, Dr Vincent Manning, provided examples of how CAPS members make a positive difference for PLWH, in society and in the churches. Placed after a Gospel reading in the order of service the article functioned as a short reflective homily.

The WCC World AIDS Day Order of service from 2019 can be downloaded from [tinyurl.com/WAD-order-of-service](http://tinyurl.com/WAD-order-of-service)

**The 2020 CAPS Virtual World AIDS Day service will be live-streamed on Saturday 5<sup>th</sup> December at 5pm.**

**This year, we will be live-streaming our World AIDS Day service for the first time. Please join us as we pray for those who are abandoned, to remember those who have died, and to pray & work for justice. To register to attend this free event via Zoom, please visit [www.caps-uk.org/wad](http://www.caps-uk.org/wad)**



Vincent Manning

**The ministry of ‘Positive Catholics’  
founding member John  
Sherrington, CP 1947 – 2020.**

**The servant priest, helped us to  
remember the Passion of Jesus the  
Christ**

It was a blessing to attend the funeral of our beloved friend, brother and priest, John Sherrington C.P. at Minsteracres, on 19th February this year, before Covid-19 restrictions were in place. John died after several years suffering with Parkinson’s disease. I feel fortunate to have shared a meal and spend an afternoon with him in Newcastle, in November 2019. That is when we bade each other ‘so long’ until we meet again.

John was a member of the Congregation of the Passion, an order of Priests who take a special vow (promise) to ‘keep alive the memory of the Passion of Jesus the Christ’. At the heart of the Passion of Jesus is God’s passionate love for all people and all creation. There are many ways to speak of and witness to this Love and Passion.

John’s way included living in solidarity with ‘ordinary’ women and men at the ‘poorer end of society’. The life of most priests is not very

ordinary, but John lived as closely as he could in the same conditions as those whom he sought to serve. Like Jesus, John enjoyed the company of ordinary folk and wanted to bring Good News to the poor.

When I first met John, he lived in a flat on a council estate in East London. He had a ‘proper’ job like some of his neighbours. In the 80s he had worked as a street cleaner, but in the 90s he was employed as a carer for people with HIV and Aids. At that time, PLWH were still dying of Aids. John supported those who were sick in their home. He provided company and a listening ear. Sometimes went shopping for a person too weak to stand. Sometimes changed drenched sheets, because many PLWH endured terrible ‘night-sweats’. Sometimes, like Veronica, he soothed the sore body of a person with a towel. For John, seeking closeness with Christ in His Passion meant being alongside people who also suffer, especially those who undergo that suffering which Simone Weil named ‘Affliction’.

John was familiar with Weil’s spiritual writing. She writes that not all pain has the lasting effect that more intense suffering causes. For example, a toothache is painful, but once the infection is treated, the suffering ceases. One



can recall the fact of having suffered, but the nature of the suffering has no lasting effect other than as an intellectual memory. The suffering of a toothache does not alter one’s sense of oneself; it does not impact upon the identity of a person. Physical pain alone “leaves no trace in the soul” writes Weil.

By contrast, Affliction powerfully combines spiritual, psychological,

physical and social dimensions of suffering. Affliction is always traumatic and “compels us to recognise as real what we do not think possible”. Affliction can never be forgotten. It is the suffering of Job or Tobit and Sarah. Affliction is what Christ endured in His Passion experience from Gethsemane to crucifixion. Still today, PLWH almost always suffer Affliction, and John felt this at a deep level. As a gay man he knew



the stigma and inappropriate shame associated with one's sexuality. Within the Positive Catholics community John understood that the physical suffering of this illness is made more terrible because of the stigma still attached to HIV; the psychological and spiritual assault that accompanies diagnosis; and the social isolation and judgments that any PLWH must endure. For the refugee or asylum seeker, the gay man, or the person with mental health issues, the stigma of HIV interacts with pre-existing stigmas, intensifying feelings and experiences of discrimination or disadvantage.

John recognised that PLWH inhabit a particular site of suffering. They carry the affliction and passion of living with HIV, which can never be forgotten, in their bodies.

In 2004 I invited John to participate in our Positive Catholics retreat weekends. He soon became our Chaplain, not just during weekends, but also regularly attending peer support group meetings in Manchester and London, available for all the members of our community. Feedback from our members always places John's 'Liturgy of Healing & Strengthening' as the highlight of our Retreats. In 2008 John became a CAPS Trustee. His ministry and

the partnership with the Passionist Congregation which ensued has been a wonderful gift to us. The Congregation has enabled hundreds of PLWH to access the pastoral support of the Church, otherwise denied to us.

Within Positive Catholics, John experienced how powerful non-judgmental listening, personal honest sharing, and communal prayer, on the basis of equality can be, within a diverse group of Christians. He applied and adapted our approach for pastoral ministry to form the Community of the Passion. A significant number of our members are also members of the Community of the Passion today.

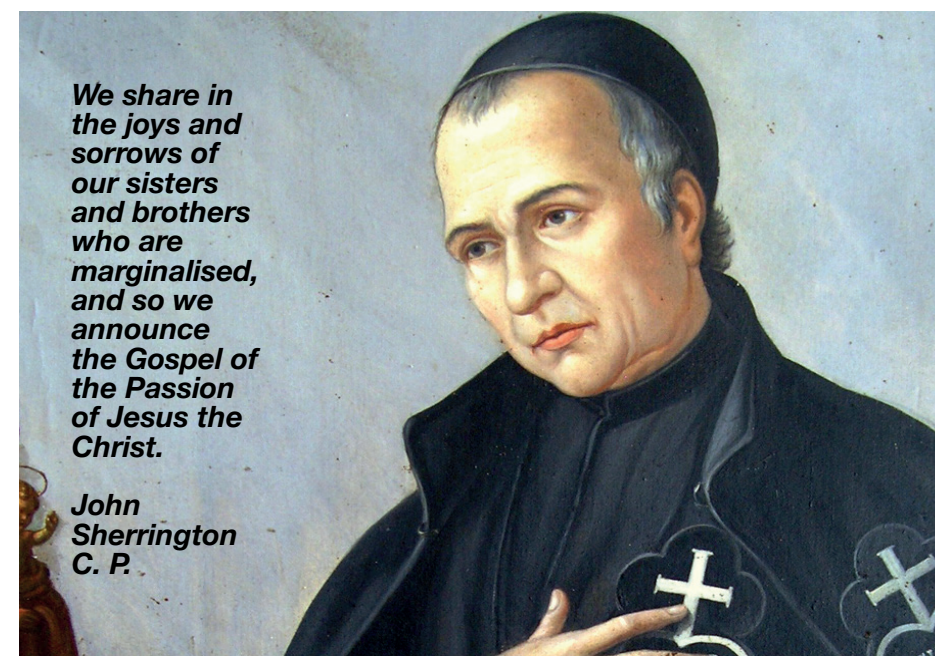
CAPS pastoral approach to ministry has been profoundly shaped by Passionist spirituality, which we have learned from John. Through his teaching, preaching and personal witness, we have been gifted the spiritual guidance that is needed to move beyond Affliction into new life. Through the lens of the Passion of Christ countless PLWH have come to understand their own experience and make faith-sense of it. Contemplation on the Passion reveals God's love for each one of us in our uniqueness, and that is

healing and liberating. Our sisters and brothers living with HIV minister to one another in return. Each person strengthened, as Our Lord was at Gethsemane, takes up their particular cross, because of love, in service of others.

For those of our members with Christian faith, our aim is not to keep people stuck in a place of shame, stigma and powerlessness, much less a place of continual crucifixion. Rather, we want our sisters and brothers to

grow in faith and be empowered to give their own witness to the Gospel in their families and communities. An applied theology of the Passion, by the help of God, has enabled us to achieve more than we thought possible. John Sherrington, C.P., the servant priest, helped us to re-member the Passion of Jesus the Christ.

*For more about The Passionists see [passionists-uk.org](http://passionists-uk.org) & the Community of the Passion see [passionists-uk.org/community-of-the-passion/](http://passionists-uk.org/community-of-the-passion/)*



## HIV INTERFAITH CONFERENCE

Three CAPS delegates participated in The HIV Interfaith Conference, “Resilience & Renewal: faith in the HIV response” organised by UNAIDS. They share their impressions.

### God is our hope and the church is our help by Packia

*It was an interesting international conference of Faith and HIV. I got a chance to listen from various people on their faith experience of living with HIV in addition to policy and epidemiological views on HIV. Especially, two of the experiences shared by an Ukrainian woman and an African boy informed how their life was touched by faith leader and communities. It was motivating to see how a simple act of inclusion empowers the spirit of broken hearted and to know the most vulnerable people's longingness about faith leader's intervention on their most testing times when living with HIV.*



### My view enriched by Sheillah

*I had the opportunity of attending the three day Interfaith Conference. I was really moved by the extend of involvement of different faith leaders and communities. The love given by communities and faith groups to people living with HIV made all the difference to some difficult situations. My Christian walk was challenged, and I now have a different view of my own life and even in the way I interact with my clients.*



### Felt fortunate! by Tyrone



*I attended a few sessions of the virtual Interfaith Conference held 22-24th September 2020. There were HIV faith groups and organisations from around the world ranging from Christianity, Buddhism, Hinduism, Islam, Judaism and others.*

*I was astonished to see some people who were religious leaders and happened to be HIV positive talking about their experiences of dealing with stigma and health issues. There were also members of some of the organisations who gave experiences and testimonies of their struggles and victories in societies where stigma and poor health care is the order of the day, which made me feel very fortunate to be living in the UK where it isn't as bad.*

*I saw and felt the respect and camaraderie among the different faith groups to have victory with the different challenges associated with HIV. A lot of emphasis was placed on the empowerment of women. Most of the groups present were African based organisations. I didn't see enough from Asia, Latin America or even Europe. In my summarisation of the event. It was great to see different religious groups coming together and facing HIV and women's issues head on however LGBTQA people must not be forgotten.*



## In Memoriam

### Archbishop Peter Smith

21st October 1943 – 6<sup>th</sup> March 2020

**The Emeritus Archbishop of Southwark, Peter Smith, has died aged 76.**

Following a short illness Archbishop Peter died at the Royal Marsden Hospital, Chelsea, on the 6th March 2020.

We will never forget that Archbishop Peter agreed to be a Patron of CAPS in 2011 shortly after he was appointed. He was available for advice and met regularly with our former Chairperson and now Director Vincent Manning. Peter hosted members of the Positive Catholics community who shared their personal experience with him. He listened with great care as they told of the practical, emotional, and spiritual challenges that living with HIV brings. Peter's welcoming of people living with HIV into his home, was an act of solidarity with those who feel marginalised and rejected because



of their HIV status. His kindness was a great encouragement to many others, and an important outward sign, to Christians and those of other faiths and none, that people living with HIV can find acceptance and understanding within the Church. The Archdiocese of Southwark, over which Archbishop Peter presided has the highest number of people receiving treatment for HIV in the country. He will rest in peace in the company of all the saints.

### Helen Taylor-Thompson, OBE.

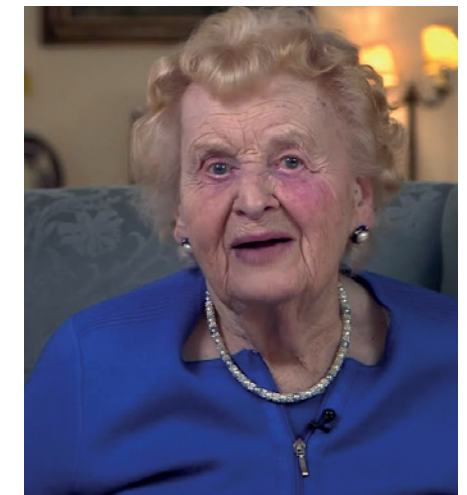
7 August 1924 -6 September 2020

**We thank God for the life of Helen Taylor Thompson, co-founder of Mildmay, Europe's first AIDS hospice.**

Many of the members of CAPS have received care at the Mildmay and several have undergone lengthy rehabilitation as inpatients and outpatients accessing highly specialised care. CAPS founder Martin Pendergast writes: "As an NHS Commissioner of HIV Services at the time, also active in developing Christian responses to the needs of PLWH, because of all that Helen had helped develop at the Mildmay, I was able to argue the case for NHS funding with colleagues as financial pressures became stronger. Along with local clergy, because of all that she promoted in her vision for Mildmay, we were able to challenge the HIV phobia that was so prevalent in the early days of that pandemic. In this time of Covid-19 we should learn from



Helen Taylor-Thompson's prophetic commitment to consistent care and support for the most vulnerable in society. May she rest in peace and rise in glory."



### World AIDS Day Sunday 1<sup>st</sup> December 2020

Remember to include prayers for all those affected by HIV and AIDS in your church on the weekend of Saturday Nov. 28<sup>th</sup> and Sunday Nov. 29<sup>th</sup>. Use the prayers provided on any of CAPS websites, or compose prayers of your own and share them by email with CAPS. People living with HIV are often unseen and unheard. Our public prayers around World AIDS Day give us an opportunity to show our concern; a small step to express solidarity with all those affected.

### World AIDS Day services ALL ARE WELCOME!

#### Farm Street

The LGBT+ Catholics Westminster Pastoral Council is pleased to announce that a World AIDS Day Mass will be celebrated, 18.00, Tuesday, 1 December 2020, at the Church of the Immaculate Conception (Farm Street Jesuit Church).

Canon Alan MClean, Parish Priest, Church of the Most Holy Trinity, Dockhead SE1, will preside and preach. Music will be provided by the 530 Music Group. The celebration will reflect the UNAIDS 2020 Theme, Global Solidarity - Shared Responsibility. Due to Covid-19 restrictions, the Mass will be live-streamed on [www.farmstreet.org.uk/livestream](http://www.farmstreet.org.uk/livestream).

#### CAPS Virtual World AIDS Day Service

On Saturday 5th December at 5pm, CAPS will be live-streaming a World AIDS Day service on Zoom. To register to attend, please visit [www.caps-uk.org/wad](http://www.caps-uk.org/wad) or connect with us on Facebook. Please note, this is a free event.

**CAPS' Trustees express gratitude to The Albert Gubay Trust and the Catholic Bishops Conference of England & Wales for the funding to deliver 195 hardship grants to PLWH nationally. See reports pp. 28-31, 34, 39-41.**

**CAPS is in partnership with 'The Passionists'. Our members and friends are encouraged to visit the website at [www.passionists-uk.org](http://www.passionists-uk.org) The Community of the Passion welcomes all people who wish to explore faith and life and are committed to social justice.**

#### A 'Must' for your Diary

Why not pick a date now and mark your calendar, even if it is 2021, when you will use the *Positive Faith* resource in some way in your local community. Make a start, begin a conversation with others in your church, college or school.

## Making Your Church or Clinic a More Welcoming Place for People Living with HIV

CAPS 'All Are Welcome' Card is an easy way to let people know that they have found a welcoming church. It is an easy way to raise awareness about HIV and faith in your congregation or your local clinic. We have designed this card to be ecumenical, and to offer the best possible points of contact.

We invite you to cut this back page out. Share it with clergy or other church leaders. Have a discussion with your pastor or parish council about what it means to display this card at your church. Stick it on your church bulletin board. Bring it to the clinic or surgery. Let people know.

Below is some basic information about HIV that can help shape the discussion:

- There are more than 35 million people infected with HIV globally.
- Although medicines have become more available, only 32% of children and 41% of adults who are eligible, actually received HIV treatment in 2014. Millions remain in need of essential treatment, care and support, especially in Africa, a continent that cries out for justice.
- 108,000 people are infected with HIV in the UK.
- Approximately 50,000 are living with HIV in London. (Southwark Diocese has the highest resident number of people living with HIV.)
- An estimated 1 in 5 people living with HIV in the UK do not know that they are infected.
- We know that there are significant numbers of Catholics and Christians living with HIV.
- It is very likely that in your Parish there are people living with HIV, or families who have a member living with HIV.
- Catholics for AIDS Prevention and Support (CAPS) is the only national Christian response focussed on the needs of PLWH in the UK.
- The 'Positive Catholics' ministry is the only national Christian pastoral ministry to people living with HIV in the UK.

CAPS resources & Positive Catholics materials are also available for download from our website. A single flyer or poster might be the lifeline that someone needs.







# All are welcome in this place

For faith sensitive HIV support

Email: [info@caps-uk.org](mailto:info@caps-uk.org)

Phone: 07505 608 655

Websites: [www.caps-uk.org](http://www.caps-uk.org)

[www.positivecatholics.com](http://www.positivecatholics.com)

For general HIV advice & support

THT Direct: 0808802 1221

[www.POSITIVEFAITH.net](http://www.POSITIVEFAITH.net)