



A COVENANT WITH OURSELVES: CHOOSING LIFE, REJECTING DEATH

Los Angeles Sentinel, 12-07-17, p.A6

DR. MAULANA KARENGA

ALTHOUGH NATIONAL BLACK HIV/AIDS Awareness Day is February 7th, it is important to pause in remembrance and respect for those who have died from this devastating disease, to recommit ourselves to assist and support those who currently live with the disease, and reaffirm our continuing commitment to work and struggle in various ways to end this scourge in the world. Others may have brought the disease under control in their group, but among us, as this earlier article points out, ours is still a major struggle. And we can in no ways be negligent, too tired to go on, or too callous or self-focused to be actively concerned. For it is about a community choosing life over death, thru transparency, accountability and partnership in love, life and struggle.

As we gather together to mark and make meaningful this year's World AIDS Day, 12/1, in solidarity with other peoples of the world, we, as an African people do so with a special and heightened sense of sorrow and seriousness and an enhanced sense of urgency and challenge. For we recognize and respond with profound sensitivity and sober reflection to the fact that no people in the world has been as devastated as African people by HIV/AIDS which is clearly one of the most deadly and catastrophic diseases humanity has ever known and confronted.

Africa, our ancestral home and the home of humanity and human civilization in its most varied and expansive form, has been ravaged by this devastating disease to an extent no other continent has suffered. The statistics are staggering: the World Health Organization reports that of the 34 (now 36.7) million persons living with AIDS in the world, 24.5 (now 25.6) million are in Africa; and UNAIDS reports that in the latest figures, Continental Africans are 67% of the cases, 71% of the deaths, and 70% of the new infections with the majority of these among children.

Even in this country, African American people have the highest percentage of persons living with HIV/AIDS (50%) (now 48%), the

highest percentage of those dying from its deadly effects (52%), and the highest of all new infections (52%) with African American women accounting for 61% of diagnoses among women overall. And in spite of these horrific statistics, our community is still given less focus, less funding and less general support by government and private funding sources than any others.

Indeed, the National HIV/AIDS Strategy which was put forth by the Obama Administration does not express any community or culturally focused concern for us in conception or implementation of the strategy. And this occurs although he and his advisors knew the human costs and casualties as well as we do. But we all know that the well-being, health and wholeness of a people lie in their own hands, in the work they do and the struggle they wage to heal and repair themselves in the process and practice of healing and repairing society and the world.

Our struggle is always a dual one, formulated and fought on two fronts simultaneously. It is first and foremost, as Amilcar Cabral taught us, a struggle to overcome our own contradictions, "to turn our weaknesses into strengths" and to become as we say in Kawaiida, a self-conscious social force dedicated to bringing good in the world. Thus, as we strengthen ourselves in this ongoing internal struggle, we must at the same time wage the struggle for social justice, well-being, and new and better ways of being human in the world.

In this age of HIV/AIDS, we are faced with the ongoing crisis of living with death every day. By this is meant not only living with the devastating disease itself, but with the high risk and death-dealing behavior that makes us more vulnerable to it. And here we must choose a way of life or a way of death. Indeed, the question of choice and choosing life becomes even more urgent in the midst of this deadly crisis which threatens not only our health, well-being and wholeness, but also our existence itself as a community and people.

**A COVENANT WITH OURSELVES:
CHOOSING LIFE, REJECTING DEATH**

Los Angeles Sentinel, 12-07-17, p.A6

DR. MAULANA KARENGA

In the historical narrative of his return to Kemet to end *isfet*, political anarchy and injustice, and to re-establish *Maat*, a just and rightful order, the Nubian Pharaoh Piankhi speaks of this choice of life or death. Surrounding the walled cities, he offered them peace and life or war and death, giving them a message that has meaning for us today, as we confront this life and death crisis of AIDS.

He said to the inhabitants of the cities seeking security behind their high and thick walls: "O' you who are living with death. Do not lock the gates of your life so that you are brought to the slaughtering block this day. Do not desire death and detest life. And I will make a *covenant with you for life* before the whole land." Moreover, he says, "Consider this: two ways are before you. You may choose as you wish. Open up and you will live. Close down and you will die."

Like those people portrayed, living with death and seeking security behind high and thick walls, we have in too many cases, hidden ourselves behind high and thick walls of secrecy and silence, and are living with death every day. Behind these walls of secrecy and silence, death stalks us all regardless of sex or sexuality, class or shades of the color Black, or our age, ability, politics, pay scale, religion or other references to differences and diversities in our shared identity as Black people.

Behind these walls, risky and irresponsible behavior lead to premature, painful and preventable deaths; youthful assumptions of invincibility assert themselves in self-destructive ways; and beginning agreement for safe sex too often ends up into coerced compliance to the opposite. Moreover, men who have sex with other men in

and outside prisons and who hide this from their wives or female partners are putting them at risk and increasing the rates of infection and illness among them. Here "testin' and tellin' " is clearly the moral and most manly thing to do. For to open up is to live and to close down is to die. Thus, we say "*get the test; tell the truth and take the medicine*".

To choose life, then, is to challenge and check those who recklessly risk their own lives and endanger the lives of others; those who preach that sickness is a sin instead of a call for treatment, cure and care; those who stigmatize, discriminate and do violence against the vulnerable and the person and dignity of anyone; and those who are immersed in and wedded to unawareness, apathy and evasion.

To choose life is also to struggle against oppressive social conditions that make us more vulnerable including: poverty and inadequate education, information and healthcare; lack of health insurance, unemployment, racial discrimination and blocked opportunities and access available to the racially dominant group. And to choose life is to struggle for the healthy and good life we all deserve, and to refuse to die the terrible deaths that racial and religious haters and howlers wish for us as persons and a people.

LET US MAKE A COVENANT OF LIFE WITH ourselves then: to value life; to respect and care for the living; to be morally sensitive to suffering and assert ourselves to end it; to practice ways of life and living that affirm, protect and promote life; and to be self-consciously engaged in the work and struggle for social justice, health as a human right, and good in the world shared by all.

Dr. Maulana Karenga, Professor and Chair of Africana Studies, California State University-Long Beach; Executive Director, African American Cultural Center (Us); Creator of Kwanzaa; and author of *Kwanzaa: A Celebration of Family, Community and Culture* and *Essays on Struggle: Position and Analysis*, www.AfricanAmericanCulturalCenter-LA.org; www.OfficialKwanzaaWebsite.org; www.MaulanaKarenga.org.