



FCI Podcast

Messages of Hope and Religious Leaders

English

Song Izapita - Bob Muli, Victor Kasong, Sebastian Mutale - Zambia

Brian: Hello everyone and welcome to the Messages of Hope Podcast of the Faith and Community Initiative where faith leaders will share how they are disseminating messages of hope on HIV and COVID-19 in their faith communities. My name is Brian Otieno. I work for the Alfajira network and I am also involved with the PEPFAR Faith and Community Initiative.

In 2018, PEPFAR launched the Faith and Community initiative to address key gaps towards achieving HIV epidemic control and ensure justice for children, mainly to address sexual violence against children, leveraging the unique capacity and composition of faith-based organizations and communities.

The faith and Community initiatives seek to engage communities of faith to reach men and children with testing services, understand the epidemic and raise community awareness through faith community structures, and ensuring additional faith-based organization partnerships.

Then #2, it strengthens justice for children. How does it do that? It does this through community leadership, faith and traditional organizations/structures and the justice sector, and those who are involved in the justice sector.

To maintain the HIV prevention and control, Global faith leaders developed messages of hope for COVID-19 too. While these messages were developed with the aim of serving populations affected by HIV, they are generic and can be adapted for use in other settings as well. You can borrow this from us.

Today we're here, we're here to listen to some of the faith leaders who have been involved in developing and then disseminating communication prototypes such as WhatsApp messages, videos, calendars for religious leaders, flyers, prayer songs and so much more containing simple and evidence-based information on HIV and COVID-19.

It is my delighted pleasure to welcome you all at the message of hope podcast and I'm very excited to lead this discussion among this fantastic and dynamic group.

I will have some questions with me. Please feel free to be guided by your own personal experience and share how you have been engaging with people in the com-





munity and your community where you come from. Before hearing from our guests, I would like to invite everyone, whoever is listening wherever you're listening from, to visit our website of the faith and community initiative. The website is www.faithandcommunityinitiative.org. The website has all the communication prototypes that we have developed with the input of religious leaders from 10 sub-Saharan countries and to address key gaps towards achieving HIV epidemic control, ensuring justice for children and to mitigate the impact of COVID in our community. So kindly visit that website and you'll get so much more from it.

Jumping straight to the questions: I'll start by asking can you kindly share about the HIV and COVID-19 situation in your country, and in particular how has COVID-19 impacted access to HIV services to people in the community that you're coming from?

1: Can you share about the HIV and COVID-19 situation in your country and in particular how COVID-19 is impacting access to HIV services of people in your faith community?

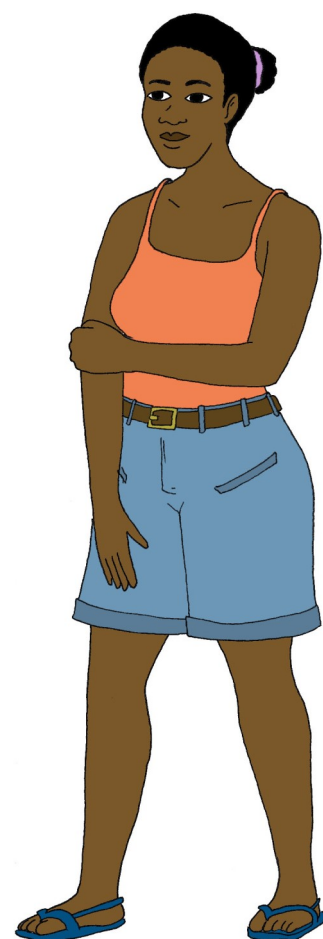
Father Rick Bauer : Well, good day all, my name is Father Rick Bauer. I'm a priest with the Maryknoll Fathers and brothers and for the last 25 years of my life have been involved with the care and treatment and support of persons living with HIV and AIDS in East and Southern Africa. But I've actually been involved with this mission, this ministry, this work for the last 37 years.

Gibstar Makangila : I'm so thankful, Brian, for the opportunity to have this discussion, where I'll talk about my working with the Faith and Community initiative. My name is Gibstar Makangila. I'm from Zambia. I am the executive director for Circle of Hope. We have been engaged in the fight against HIV for over 25 years. Our work includes the community post model that has taken care of some of the barriers of access to treatment where HIV is concerned. These barriers unfortunately had also spilled over into COVID-19 mitigation and preventive activities, and so it's an honor for me to share our experiences in the many years that we've worked with HIV and now COVID-19.

From the onset, let me just say a few things about our situation in Zambia. The national prevalence is about 11% of adults between 15 to 59 and 14.6% children were HIV positive. The COVID-19 pandemic also came in, and undoubtedly contributed to the challenges that somebody was facing already in fighting against HIV. As at January this year 2022, we've had accumulated COVID cases just above 300,000 since inception, with about 4000 deaths spread countrywide. Looking at the way our population is scattered in on a very large landmass, it becomes a challenging thing to ensure that citizens are compliant, that necessary mitigation protocols and guidelines are being followed while not disturbing the access to HIV.

Because of the restrictions, the HIV activities have also been affected. This has led to disruptions in service delivery. It has included issues like running out of test kits. In all our work with HIV and COVID-19, we have reengaged a very important partner: the faith community. We have worked with them not only in terms of collaborating at implementation level, but rather we've worked with them from both design of intervention implementation and indeed review and monitoring and feedback.

We've learned and experienced a lot of wonderful lessons from the faith community. In Zambia, for instance, we have over 13,000 points of presence, meaning in every community, every district, every rural village, you will find a church of some kind. The other important ingredient that the faith community brings to the fight against COVID-19 and HIV is the resilience with which the clergy and the faith engaged membership bring to the fight. They bring tenacity, passion, love, empathy into the fight, which you would not nor-





mally find from a traditional response which is non faith based.

I always like to remind ourselves of some of these attributes, other than resilience, that the community at large enjoy from the faith community, especially in Africa. They still have a lot of trust, the faith leaders compared to any other sector, and so we have liberated this trust to disseminate different messages of hope for HIV and COVID-19, and alongside the trust, we have been very impressed with the access that these wonderful faith champions - we call them - and faith engaged community health workers have to households in communities. Because of the trust, they're able to reach a house and, on top of their access to households, they also seem to know what is happening in each local community. We've also liberated that aspect for them to help us map out hotspots. Brian, we have seen an active role and involvement that the faith community has played throughout the pandemic mitigation cascade. So whether it's HIV, whether it's malaria or TB or COVID-19, we have seen them being there at every stage of the response.

2. Can you share your experience with the Faith and Community Initiative?

Brian: Well, the other thing is, can you kindly share your experience with the Faith and Community Initiative. What you've done so far?

Father Rick Bauer : I found the Faith and Community initiative to be an absolutely essential and critically important intervention at this time in our history. I go back to the early years where, literally, the diagnosis of HIV was a death sentence. We improved the treatment of opportunistic infections and then the miracle of triple drug therapy in 1996 that eventually came to Africa. And even though this sense of hope was there, now that people could live with this virus, unfortunately, our public health messaging kept being based in fear. AIDS kills, you know. And I think that led to a lot of unintentional, but still very real stigma and discrimination.

And so what the messaging around the Faith and Community initiative did for us, providing clinical care for people with HIV, as well as a religious leader, a priest and the other religious leaders and pastors and imams that we worked with, it provided a sense of hope; it provided a positive way to look at the continuing how do we end this epidemic?, using positive messages of hope that there is life after HIV. There is families. There is giving birth to healthy HIV negative children with the new biomedical interventions. And so I think this came at a critical time. As we work, you know towards the UNAIDS goals of 95-95-95, that we can eliminate AIDS as a public health threat by 2030 with these messages of hope.

3. How have you been using and disseminating the communication prototypes? What is the most useful/appreciated communication prototype in your community?

Brian: Wow, that's amazing. Hearing from you, how have you been using and disseminating the communication prototypes? And what is the most useful and probably appreciated communication prototype in your community? Which is the most preferred product we've used in your community?

Gibstar Makangila : We are delighted to share some of the strategies and communication prototypes that we have used, including the messages of hope in dealing with these pandemics while working with the community. What has stood out in terms of the communication protocols has been the one-to-one conversational approach, where answers and doubts are given there and then. Because of the trust issue, I talked about, which this community of faith champions and faith en-





gaged community health workers and counselors living in those particular communities and working in those communities enjoy, they have been able to sensitize hundreds of thousands on a one-to-one on both HIV and COVID-19. They've been able to dispel lots of misinformation, misconceptions, and half-truths. The second prototype that we have used very effectively is the use of social media on such platforms as WhatsApp, where all positive messages are promoting life, caring, brotherhood and community, sense of community. We've disseminated those messages using WhatsApp to individual handsets. We've seen this to be very, very effective in both HIV and COVID-19. Then we've gone further to share in small community meetings some of the videos and posters and flyers and leaflets that the faith community has developed over the years and these messages of hope for both COVID-19 and HIV have been developed with the involvement of the faith community themselves and so they have been very, very powerful and accurate and very culturally sensitive and some of them have been translated in our local languages. This is the third important prototype that has given us such a huge punch to bring as much information as possible to communities. The last approach has been the use of megaphones. So we use megaphones loosely just to bring a general awareness. But in terms of achieving impact on the ground, the three prototypes I've talked about that is a playing of the videos, activity videos that have been developed, use of some of the calendars with particular marked events and then riding on those events in small meetings in churches and mosques has really gone a long way in giving accurate, timely and important information to communities.

Father Rick Bauer : I think what was most appreciated by my clinics, the Eastern Deanery AIDS Relief program, with almost 30,000 people in the eastern slums of Nairobi on care and treatment, were that many of these messages were particularly important for men. Getting men involved as instruments of hope. Again, previously some, not all, but some of our public health interventions, our public health information, almost blamed men for their promiscuity, blamed men for not getting treatment, blamed men for passing the virus on. This new messaging saw men as leaders in their community and as important agents of change. Men can get tested. Men can test other men through HIV self-testing, men can encourage each other to get tested to get on treatment to protect the community and protect their families, protect their religious communities. All of this, I think came at this critical time of ending HIV as a public health threat.

4. What kind of materials on HIV and COVID-19 do you need to support the people in your community?

Brian: Well, I see we are all adapting these prototypes quite well. What kind of materials on HIV and COVID-19 do you need to support other people in your community?

Father Rick Bauer : For me also many of these messages came at a time when the COVID-19 pandemic began to increase and rise, and so we could use these same techniques of messages of hope, messages of protection. You know, to try to keep COVID at minimal levels and get people again into treatment, explain the importance of hand hygiene, of mask wearing, physical distancing as much as possible. But all based on messages of hope, messages of leadership rather than messages of fear. We used some of the lessons learned from the early HIV years with COVID. These were expressed so well in the Faith and Community initiative. One of the lessons that we learned is that knowledge alone does not change behavior, that we have to look at greater sources of motivation. And for me, that's the emotional, that's the social, that's often the spiritual. What motivates people to change behavior? We're seeing that around the world with, you know, being people being tired now of the restrictions from COVID, the anti VAX movement that it's more than just knowledge but it's looking at what motivates us to do good behaviors that protect my health, protect my family, protect my church, my congregation and protect my communi-





ty. The messaging really looked at all of these motivations as well as good public health information. It's not that the knowledge is unimportant, but it's not enough to change behaviors.

Unfortunately, with COVID, with some of the restrictions, with the lockdowns, with the impact in Kenya certainly on our economic systems and tourism, it definitely impacted people's ability and their socioeconomic status and that often-left people with a deep sense of frustration. We saw a rise in violence. And so these messages of hope also provided ways to counteract and that and people are frustrated and angry, and especially with men that we have ways of supporting each other through this frustration and hopefully as people of faith, as faith communities supporting each other, on through these frustrations of locked down economic insecurity that we will get through this pandemic and again that's based on messages of hope rather than messages of fear or messages that you're a bad person if you do it this way.

Gibstar Makangila : I would also like to talk about some of the important materials that FCI can continue to provide to community influencers that includes the Faith Community champions, the clergy and members of congregations and members of our own community post. IEC materials must continue, which includes flyers, posters, billboards and stickers, and also something to consider could be the ready availability of rapid test kits. What has happened for most countries including Zambia, rapid test kits are normally a priority of the local government. In some cases, they run out because of the demand. If in going forward some of our programming should include provision of rapid test kits for HIV and for COVID, and then of course we would like to see some mobility enhanced at community levels such as bicycles, protective gear for rain, such adverse seasons as the rain season such as boots, gumboots, raincoats and in some cases, even PPE would be appreciated and also very important the provision of data bundles, airtime or top time so that these community foot soldiers are able to communicate timely and also in some cases share with their clients some of the bundles that they have received.

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5. What are the challenges you have faced while disseminating them?

Brian: OK, it was nice. It's nice hearing from you and what you're doing that so you've mentioned about what you're doing. Kindly just tell us briefly what are some of the challenges you have faced while disseminating them, the prototypes in your community?

Gibstar Makangila : Some of the challenges includes the need to actually have a budget for translation costs. Some of these very important messages of hope that are placed on flyers, posters, and indeed billboards. Translation, in most of our settings in Africa where we have different languages, becomes a challenge. The second thing I'd like to highlight is we had some cases where there's a bit of duplication from other partners, especially the non-faith-based colleagues who may feel that the faith based is doing much more than them. They sometimes go to an area where you are or vice versa. We want to see how going forward we can enhance collaboration not only within the faith community settings, but also with nontraditional settings. We were extending our collaboration to be deeper. The third very important barrier or challenge we've had is, of course, the issue of misinformation and misapplied doctrines. Within the faith communities, we've had a lot of strange doctrines coming up that are sort of countering the correct infor-





mation that we all know. We are hoping that the Faith and Community Initiative working with our partners across the globe in various settings of PEPFAR, the UN system and the New Hope Foundation could come together and formulate a new messages of hope targeted at dispelling and correcting all misinformation, misconception, half-truths and misapplied religious doctrines. I would like some new sets of messages of hope that will handle this new barrier of misinformation, misapplied doctrines, and of course, because of this misinformation, it has also risen to stigma again in COVID-19. We had dealt with stigma a lot from the beginning of COVID-19 fight.

The other barrier Brian, is the budget limitations - Could we have a little bit more funding allocated to activities happening in within the faith community? Because most of Africa is highly religious and Asia as well, and so we'd like to see a bit more money intentionally, consciously and deliberately, apportioned to the faith community. The faith community must not be seen as an appendix or an afterthought of funding by all our cooperating partners, we have similar results and the Circle of Hope data does demonstrate the capacity of the faith community.

Father Rick Bauer : Even though the messages of the Faith and Community initiative were there, they were really great, the challenge is always how do we disseminate these? How do we get these great messages into local communities? The first thing that at least I, especially as a local faith leader, and clinic person - we're so grateful, is there was no cost, there was no cost to me. I understand that there was cost developing these messages and I'm grateful for the donors that provided those resources. But there was no cost for us to begin to download some of these. We found, and initially we really wanted to print these things off and be able to hand out, but that for us in the slums almost became prohibitive, especially if we wanted color copy. We use the technology you know of this century. Even in some of the poorer areas people have phones. Most people had access to WhatsApp messaging and so for us to get these messages out there on a regular basis both to our clients to our faith leaders and then from the faith leaders to their faith communities we often used existing systems of the electronic media, particularly WhatsApp, and I hope, and I think I don't have the data, that this sometimes counteracted some of the anti VAX and the anti COVID and the disinformation that often surrounds public health. We were able to use existing WhatsApp groups ,existing small Christian communities were gathering, especially when churches were more restricted, they were gathering online for Bible studies for faith support that these messages could become a part of that. The biggest lesson learned is always with public health - Follow up. Follow up. Follow up. Just putting the messages out there is never enough, it's following up; it's following up with faith leaders. How did this go? How did your people react to it? Do you, as a faith leader, have any questions? Because oftentimes what would go on is people in the local congregations, they'd have questions about COVID about the vaccine. They'd have questions about U equals U, does prevention of Mother to child transmission, and the prenatal care does that really work? They would have questions and so we wanted to be a resource as EDARP to these local pastors that if they had any questions about public health, about human sexuality that we were there to answer their questions and be that resource for them. One of the biggest lessons learned is that it's not only the dissemination of the information; it's the dissemination of the motivation for behavior change and then follow up, follow up, follow up. Follow up with our faith leaders, follow up with our clinicians who then can follow up with patients and congregants.

6. Any lesson-learned?

Brian: Would you mind sharing any additional lesson learned from all these when disseminating?

Gibstar Makangila : Brian, let me just highlight four crucial lessons that we have learned. Number one, trust is an essential element in getting compliance when fighting most pandemics. Because the faith community enjoys the most trust currently, even more than the central government, we will want to encourage all partners and donors to focus and bring the faith community on board without apology if you want quick results. Secondly, we've also learned that it's important to care for the carers and key players enhancing response. In the last couple of years, we were on about asking the community health workers, the health care providers do not get tired, but then we need to have mechanisms and strategies that will also help them breathe, revive themselves and feel



cared for, feel loved for. We also learned that it's important to come up with strategies. We have done a lot of things like giving them compassionate leave outside their normal leave, giving them awards, giving them vouchers for shopping, anything that will convey a true sense of appreciation for the extra work that they are doing and what we have seen by caring for the carers seemed a lot of ownership of the pandemic response. The drive has gone up. The 3rd lesson, community stakeholder engagement and involvement for interventions from design to implementation to feedback reviews are essential for continuous success and so we want to involve the faith community throughout the pandemic cascade. 4th lesson - continuous capacity building. As new information keeps emerging, new myths keeps emerging. As a result, we also need to do continuous capacity building for community influencers that include the Champions, the Clergy, Church officers and all faith engaged community lay workers.

The challenge is how do we keep building buy in and keep enlisting stakeholder support and involvement to ensure we address the issue of fatigue from both the providers of care, the donor community and the clergy themselves. We need to have inbuilt activities or strategies that you'll be rebooting all of us. We now want to emphasize the issue of the recipe; that by raising and internalizing recipe we will always move in compassion and drive and that will revive the passion to ensure that every pandemic is dealt with. I am also excited, Brian, to highlight one very important lesson we've learned that in actual fact, the faith community remains the number one first responder. In the faith community, we have this inherent ability - we want to care, we want to laugh, we want to feed, we want to protect and we want to heal. This inherent attribute in the faith community across religions is what makes us really become the first responders and so the argument is, if we have this inherent capacity to respond first, how come the faith community is the last to be considered as worthy partners in any pandemic response?

7. Can you give some concrete examples on the impact of these tools in your community?

Brian: Wow, quite impressive lessons there. Yeah, it's really picked a lot. Would you mind giving some concrete examples on the impact of these tools in your community, how they worked and who they worked on?

Father Rick Bauer : For us, at EDARP, the impact was huge and I think this impact was particularly huge with the voice, you know for the voices of our older adolescents and young adults because they're the ones who really got social media. And so, I know about, you know 1500 of our adolescents and young adults got these messages. Frustrating as kind of a, you know, a statistician is then how far did they distribute these messages? And I don't think I'd be exaggerating by saying then it got to thousands more through Kenya. I know there were other faith leaders that deeply appreciated these because they were messages of hope. They were easy to preach on. They were easy to work into sermons because they stressed the hope.

8. What is your message of hope for us?

Brian: Definitely, definitely yeah, I see. So what is your message of hope for us like from all these? What is your one message of hope for us and those who are listening?

Gibstar Makangila : I wanted to just say that our key message for today, a message of hope for all of us is to say that the faith community remains the inherent first responders. This is because, our DNA, the make-up of the faith community is such that it's a natural thing for us to intervene to provide, to protect, to support any vulnerable members of our communities. This defines who we are and therefore my message of hope to the FCI, to PEPFAR, to the World Health Organization, to the UN system is that, please, don't grow weary in what you have been doing. This is a noble cause this is what we define us as humanity caring for one another, caring for our neighbor and putting the wellbeing of our neighbor first before our wellbeing. The faith community brings to the fight against HIV and the fight against COVID-19, the aspect of dealing and providing for the whole person. This is illustrated by the Circle of Hope data and Circle of Hope COVID vaccine data that we have seen.

With those few words, I would like to encourage all listeners to this podcast that we are determined to ensure that we succeed where we've come from is far, the finish line is not far, and so we are determined, together, as we collaborate, increase our passion, increase our empathy, increase our compassion, increase our responsibility to own these pandemics as our pandemic. Together we will achieve the success that we all desire. For HIV would like it to end by 2030, for COVID-19 would like to end it this year by God's grace.

Father Rick Bauer : As a faith leader, as a priest, as a Catholic Christian, my message of hope is that sometimes, in the midst of these pandemics, in the midst of the overwhelming suffering that can come from HIV, then combined with COVID, there is always hope. We are a people as Christians that don't get stuck on Good Friday. We have to go through Good Friday but we know there is always resurrection. There is always hope. Hope even in the darkest of times, and we're beginning to see that. We saw that in EDARP that when we had the lockdowns, yes, we did lose a few of our patients. It became the follow up care was a little bit difficult, but we used these messages of hope to motivate our own staff and we found new ways of supporting clients. And doing loss to follow up patient tracking and going into communities using our faith leaders' network to get these people back to treatment that now, two years into COVID, but some of those patients, most of those patients that we lost to just the disorganization, the fear of coming to clinics during COVID are back and so that had a huge impact on people's lives. And I would say literally saved people's lives. These messages of hope from the Faith and Community initiative helped get us through the worst of these pandemics and are now helping us look to the future as a people of hope that we will continue.

Brian: Very nice, uh, that's very interesting. It was amazing having you and learning from you and getting to hear from what you are doing in the various communities. Amazing work we are doing as faith leaders, and now I'd like to thank everyone for the rich conversation. We hope that other faith leaders will follow your examples just as you have mentioned.

Gibstar Makangila : So May God bless all the practitioners from the faith community and all important players at the global level. Thank you very much.

Father Rick Bauer : I'd especially, Brian, like to thank you for this conversation and to be able to talk about what has worked at EDARP: some of our struggles and how we will continue as a people of hope, Amen.

Brian: To know more about the faith and Community initiative, please visit www.faithandcommunityinitiative.org.

Thank you.

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