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Engaging Religious Leaders in the Response to HIV and AIDS in Tanzania

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Introduction

Tanzania is a deeply religious country, with the vast majority of people committed to the Christian or Islam faith. In a multi-country survey on faith, 93 percent of Tanzanian respondents said religion is “very important” in their lives, with 80 percent reporting that they attend religious services at least weekly.¹ With moral authority and influence, religious leaders in Tanzania can play a powerful role in the response to HIV. Recognising this, the U.S. Agency for International Development funded the Health Policy Initiative in Tanzania (HPI/Tanzania), to engage faith-based communities in addressing key barriers to scaling up HIV services.

In Tanzania, as in other countries, HIV-related stigma and discrimination pose major obstacles to scale-up. Stigma and discrimination help fuel the spread of HIV by fostering fear and secrecy around testing and disclosure and by deterring care seeking and adherence to treatment. Religious leaders may be especially well suited to address HIV-related stigma and discrimination, which are partly driven by judgments of moral behaviour. As such, one of the key activities of HPI/Tanzania was to strengthen the capacity of religious leaders to encourage people to reduce stigma, access services, and extend compassion toward all those affected by the epidemic. To promote lasting and widespread change, the project also worked with religious institutions to develop and disseminate new HIV policies and guidelines.

Working with Religious Leaders to Break the Silence on HIV

In the past decade, faith-based communities in Tanzania have taken several steps to address HIV. One

of the defining moments came in 2005, when Rev. Amin Sandewa founded the Tanzania Network of Religious Leaders Living with or Personally Affected by HIV/AIDS (TANERELA) and became the first religious leader in Tanzania to publicly disclose his HIV status to the media. This led to seven other (mostly young) religious leaders publicly disclosing their status, helping to break the silence around HIV and challenging stereotypes about people living with HIV.

HPI/Tanzania worked with TANERELA to help it grow and deliver on its mission to empower HIV-positive religious leaders to live openly, overcome shame, and become agents of change in their congregations and communities. Within a few years of its founding, TANERELA opened regional branches and created “post-test clubs” in Dodoma, Tanga, and Kigoma to encourage testing among religious leaders. TANERELA’s membership increased from 70 people in mid-2007 to 120 people a year later. The project also supported TANERELA in conducting a workshop that led to the “Dodoma Declaration,” in which 59 religious leaders agreed to work together to reduce HIV-related stigma, promote voluntary testing and counselling, and encourage disclosure.

Amplifying the Voices of Religious Leaders in HIV-related Stigma and Gender-Based Violence (GBV)

HPI/Tanzania strengthened the capacity of religious leaders to serve as ambassadors for change. Working with the Tanzania Interfaith Partnership (TIP), the project supported a training workshop at which religious leaders prepared stigma and discrimination messages for sermons or *hotubas*. The workshop drew participants from the Christian, Episcopal, Muslim, and Pentecostal Councils of Tanzania. As a result of this activity, more than 160 sermons/hortubas incorporated stigma-reduction messages in the three months after the workshop, reaching approximately 8,500 congregation members.

¹ The Pew Forum on Religion and Public Life, interactive database on findings from a 19-country survey on religious beliefs and practices in sub-Saharan Africa, retrieved May 2013, from <http://features.pewforum.org/africa/country.php?c=216>.

Using the mass media, HPI/Tanzania assisted religious leaders in reaching a national audience. In 2012, the project partnered with a local media house to produce a 30-minute talk show with religious leaders from the Christian, Muslim, and Pentecostal Councils discussing GBV. Soon thereafter, the project supported two prominent and influential leaders, Dr. Valentino Mokiwa, Archbishop of the Anglican Church, and Bishop Charles Salala of the Africa Inland Church, to deliver sermons with anti-stigma messages. Both sermons were recorded and broadcast on Star TV, Channel Ten, and Magic FM radio in 2013.

Dr. Valentino Mokiwa's audience included 50 pastors, 30 journalists, and 60 youth from two choirs. In Bishop Charles Salala's sermon, heard by 650 parishioners, he noted that some Christians see people



Photo courtesy of HPI/Tanzania. National workshop in July 2009, at which 59 religious leaders agreed to work together to reduce HIV-related stigma (Dodoma Declaration).

living or affected by HIV as spiritually unfit, but this was not the word of God and should not be accepted. To specifically reach the Muslim community, HPI/Tanzania engaged prominent cleric Sheikh Abu Mohamed Idd, who runs a popular weekly talk show called "Arrisalah" ("The Message"). He conducted four programmes on HIV-related stigma and discrimination. In addition to airing these programmes nationally on television and radio, HPI/Tanzania disseminated DVDs of the programmes to key stakeholders and posted them to project internet sites, including YouTube.

Strengthening the Capacity of Religious Institutions to Address HIV

In faith-based institutions, which often value adherence to doctrine, new policies can spread quickly and powerfully through an organisation. HPI/Tanzania worked with the Christian Council and the Supreme Muslim Council (BAKWATA) to develop guidelines on HIV as well as stigma and discrimination. This work inspired the Ulamaa Clerical Council—composed of the most senior Islamic clerics in the country—to issue a fatwa (Islamic legal pronouncement) against HIV-related stigma and discrimination. HPI/Tanzania supported the leadership of the Pentecostal Church in establishing an HIV department after the leaders had participated in trainings, helping them develop guidelines for reducing HIV-related stigma, and undertaking sensitisation of bishops and pastors on HIV. Also with support from the project, the Christian Council formulated a workplace policy on HIV.

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