



**Campaign to Reduce HIV and AIDS
Stigma and Discrimination
in Manya Krobo, Dangme West and Ga West
Ghana**

Case study presentation at Ecumenical Advocacy Alliance Partners Consultation
March 2011 Chiang Mai, Thailand

Partners in this project:

The Christian Council of Ghana founded in 1929 unites numerous denominations including some belonging to the World Council of Churches and others that do not. The CCG began working on HIV and AIDS in 1996

The World Association for Christian Communication is an ecumenical organization with members in 129 countries that promotes communication for social change and as a basic human right. It works with faith based and secular partners in many countries .

One of WACC's six central areas of concern is HIV and AIDS stigma and discrimination. It has worked with many partners mainly in Africa, and also in Asia and Latin America on this problem, focusing largely on work by and within faith based communities. T This three year project partnership between WACC and the CCG began in July 2008 with support from the UK Department for International Development through their Civil Society Challenge Fund.



Stigmatisation and discrimination towards people living with HIV and AIDS increases the difficulties they experience, fuels the spread of HIV and increases the harm it causes.

WACC supports gender sensitive communication strategies to change stigmatising and discriminatory behaviour that contributes to the spread of HIV and the harm it causes.

WACC's Objectives

Train church and community leaders, youth leaders, women's groups and human rights activists in communication skills and strategies to reduce stigma, discrimination and denial.

Equip persons living with or affected by HIV and AIDS with communication skills and train them to develop strategies and tools to address stigma and discrimination, including self-stigmatisation.



REGINA'S STORY

Regina Gyeniah is currently the Vice President and Treasurer of the Nyemisuomi association of people living with HIV in Dangme West in Ghana. Abused, shunned, isolated, disgraced, evicted and many other adjectives qualifying HIV - AIDS stigma and discrimination are some of the struggles that not quite long ago she had to endure.

Regina was once happily married when her husband got ill. She took him to several hospitals to no avail. The situation only deteriorated. Her in-laws suggested that she takes him to see a traditionalist. This she complied with but the situation only got worse. She was again told to send him to a spiritualist because the family could not understand how all forms of treatment had not worked. She complied to this against her better judgment. However, this required that she stayed with the husband at the camp of this spiritualist and perform all sorts of duties. Perturbed by this, she left the place and this made her in-laws believe that she had something to do with her husband's illness.

The husband was later brought back to the house as the spiritualist claimed there was nothing he could do for him because of the wife's refusal to be by her husband. She later took the husband to yet another hospital and this time a laboratory test confirmed that he was HIV positive. She brought the husband home and informed the in-laws about this. Without any proof or enquiry, she was accused of having infected the husband with the virus.

The hospital suggested she take the HIV test to know her status but she refused. The husband's situation worsened and soon their land lord got to know of her husband's HIV status. They were threatened with eviction; her in-laws rejected both of them and friends also started to isolate them. Later, after having deliberated on the advice from the hospital, she finally decided to go and get tested for HIV. She was disappointed to find out that she was also HIV positive.

Soon after, she lost her husband and was evicted from their home. Rumours were circulated around by her in-laws that she was unfaithful to her husband and she had infected the husband. Friends and family disowned her. Soon she started losing weight not because of the HIV virus but mostly because of stress and the sense of isolation, disgrace and shame.

She went back to the hospital where she received counselling on how to live positively with the HIV virus. She was then put on medication. Gradually, she started getting better and has since lived a positive life with the virus. She now owns a business. She also reaches out to other people living with HIV-AIDS positively with care, counselling and any other way she can support them. She has contributed greatly to the Nyamisiom support group in Dangme West. She helped them acquire their current meeting place which was formerly the community clinic at Old Ningo and has been advocating on behalf of the group and their needs. The group is supported by WACC.

She is a happy person because she received counselling and support to deal with the landlord and she won.



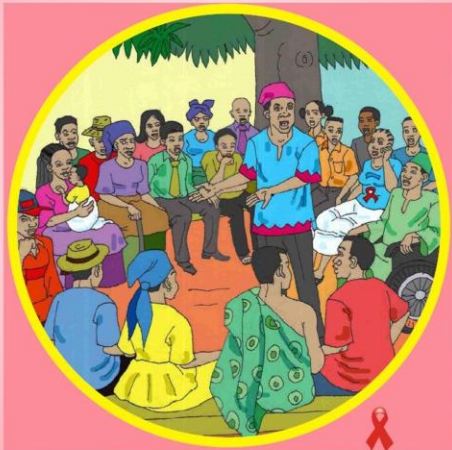
Project purpose: Reduce HIV and AIDS stigma and discrimination by building the capacity of people with HIV and AIDS, religious leaders, traditional leaders, women and youth group leaders, teachers, health workers and media professionals to challenge stigma and discrimination in 3 districts in Ghana.


The project is a three year coordinated rights-based and gender sensitive communication advocacy initiative. The project implemented an integrated, rights-based participatory communication strategy.

In Ghana, as in most African countries, many in the faith community fail to speak out, which has made the AIDS situation worse. This project changed the understanding of HIV/AIDS and enhanced the communication and advocacy skills of people living with HIV, religious leaders, community and opinion leaders, leaders of women's groups and youth groups, teachers, health workers and media practitioners.

The project used a range of communication strategies and tools: from theatre, music, dance, sport, competitions, community radio and TV to sermons, reflections, storytelling and testimonies. Community members gained commitment, confidence and skills to defend the rights of people living with or affected by HIV/AIDS.

**Facilitator's Guide for Training
on HIV & AIDS Stigma and
Discrimination Reduction**



WACC taking sides 

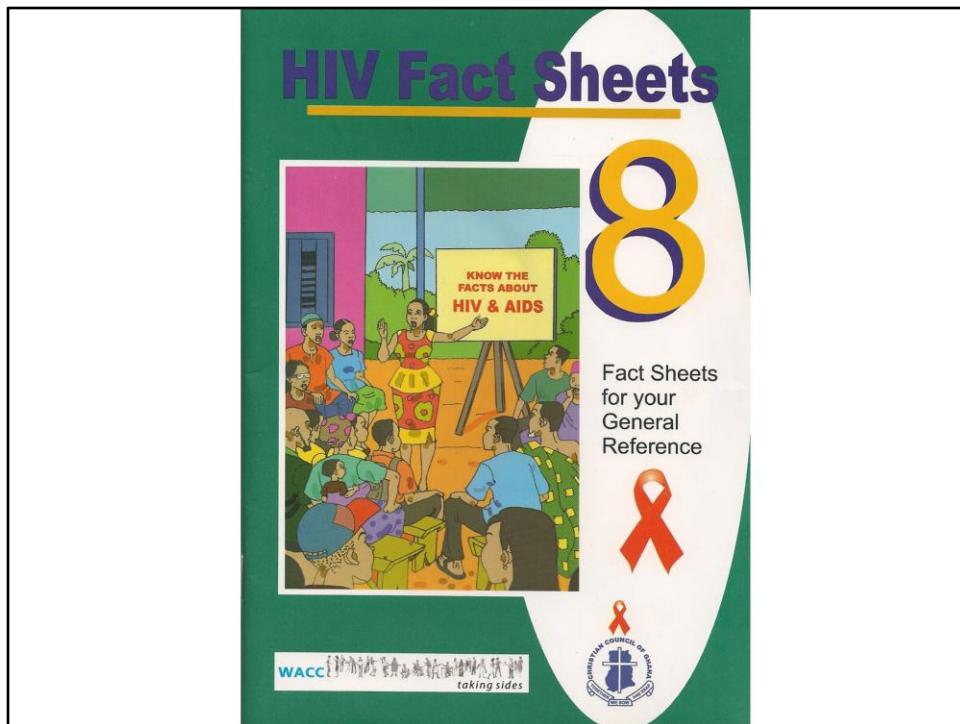
Project Phases:

- Research**
- Recruitment and Training**
- Support Groups**
- Local management committee and network**
- Advocacy planning**
- Advocacy campaign**

The key opinion leaders targeted by the project include religious leaders, traditional leaders, people living with HIV and AIDS, media workers, women, youth, teachers, and health workers.

The project has the following components:

1. Research on local causes and extent of stigma and discrimination; preparation of training materials
2. Recruitment and training of local opinion leaders including faith leaders, traditional leaders, women and youth group leaders, teachers, health workers and media professionals, as well as people living with HIV and AIDS.
3. Establish and/or strengthen support groups for people with HIV and AIDS
4. Formation of locally management committee and campaign network
5. Advocacy campaign planning and preparation of campaign resource materials.
6. Local advocacy campaign in the communities.

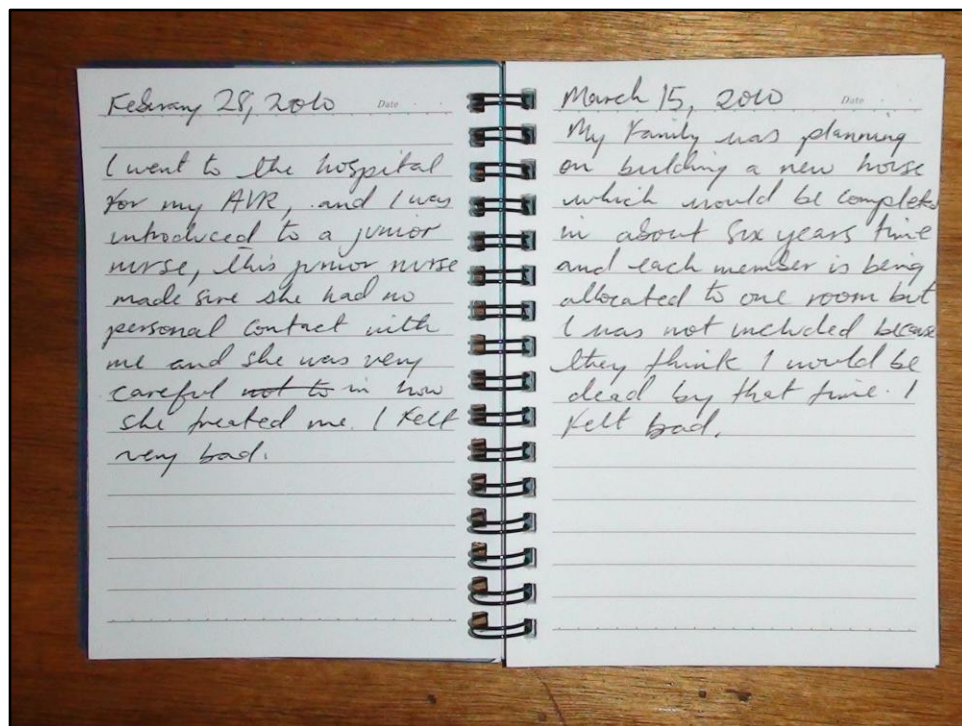


A high level of HIV related stigma and discrimination are critical factors in the HIV and AIDS response because they undermine prevention, treatment and care. A zero level of stigmatization will make everyone feel free to access service to know their status, seek needed healthcare and live without discrimination.

Local research identified some of the key broader social-cultural values in the districts that reinforced stigma and discrimination and looked at gender inequalities in the community and the role they played.

HIV stigma is closely related to cultural and religious beliefs. It is a clear example of how contradictory and mutually exclusive beliefs can be simultaneously held. People with HIV and AIDS are stigmatized because they are thought to be promiscuous and therefore sinners. They are also shunned because people are afraid they can get HIV through casual contact. They believe they can get the disease through casual contact such as sharing a hairbrush. These two contradictory beliefs are widely held in the community.

Materials adapted from other sources were contextualised to help community opinion leaders deepen understanding of stigma and discrimination and help community advocates address misunderstanding of facts. These materials are freely available on CCG and WACC websites.



The project is contributing to efforts to increase knowledge about the rights of people living with HIV and AIDS. It takes a rights-based approach based on existing legislation and international agreements. Creating awareness about such laws is a first step towards providing people living with and affected by HIV and AIDS with the knowledge necessary to make informed decisions about their lives. Such decisions bear directly on their possibilities to access treatment, care, prevention and support.

One of the first tasks was to establish or strengthen support groups for people with HIV and AIDS. The project arranged for lawyers to train support group members about their legal rights and about ways to press for a life free of discrimination.

The support group members kept diaries about stigma and discrimination they experienced. In their weekly meeting, they discuss what to do about it. This helped to identify stigma and discrimination problems to be addressed in the community. The people said that in their experience, stigma was frequently unintended, for instance in health centers : "Why do you keep our files in folders that are a different colour from all the others? Why do you use a separate consulting room at the health centre for PLWHA? Why are we segregated when we wait for treatment?" They have succeeded in getting these practices changed.

The diaries can also be used to measure the project's impact.



NARKIE TETTEH, MANYA KROBO DISTRICT COORDINATOR

A district coordinator was hired in each of the three districts. Narkie Tetteh is the coordinator in Manya Krobo.

They recruited and trained local opinion leaders and sought their commitment for an integrated advocacy campaign. They helped the opinion leaders to form networks and a local management committee that planned and implemented the campaign.



REV MICHAEL OWARE : “GIVE US MORE!”

Project coordinator Joyce Larko Steiner says that “From the very first workshop for religious leaders, we realised we had a lot of work to do....it is very difficult to unlearn behaviour patterns built up over many years – particularly in a relatively short timescale.”

Within the religious community, issues around HIV were frequently interpreted in inflexible moral terms. The project was generating a dialogue on issues, raising such questions as how a community can judge a wife infected by a husband, or a new baby born HIV + ?

Rev Oware is the Senior Pastor of Unity Centre Assemblies of God Church in Ga West District of the Greater Accra Region. He says that the CCG’s anti-stigma campaign is the best education he had ever received on HIV and AIDS. “All this while, I picture HIV and AIDS as a way to death and I had never encouraged anybody to marry an HIV positive person, but the training sessions have enabled me to correct this wrong perception.” He is strongly in favour of similar training and awareness programmes for other pastors.

Over one hundred and eighty key opinion leaders in the district have received advocacy training to reduce stigma and discrimination.



APOSTOLIC WOMEN'S FELLOWSHIP : DEMONSTRATING PROTECTION

The CCG worked through local church councils. These councils include the churches that belong to the Christian Council of Churches and also charismatics and pentecostals. In this way they were able to have a very broad reach, making use of these pre-existing relationships.

In Manya Krobo there is a tradition of prayer camps in remote locations that are run by prophets and prophetesses. People who are very ill are often taken there by their family members for “spiritual cleansing” before they die. The ill persons and families are often exploited and made to work for the prophet. The prophets did not refer ill persons to medical treatment.

The campaign visited these prayer camps and convinced the prophets the people who come to them need medical help and as well as spiritual help. Now they are telling people about the need to access treatment and care so that they can live longer, and referring people to health clinics.



Here we see participants in an advocacy training workshop in Dangme West.

The project has recruited and trained almost 600 key opinion leaders in the 3 districts through separate workshops for religious leaders, health workers, teachers, women's group leaders, youth group leaders, and media professionals. They learned to understand stigma and discrimination and the harm it causes. People with HIV were present throughout. The CCG is convinced that they must be included when anything is said about them. The opinion leaders formed a community based management committee to plan their district advocacy campaign.



Here we see the New Ningo campaign team on their way to talk to community members. The campaigns were launched very publicly with marches and caravans.

A similar group in Manya Krobo launched their own Stigma and Discrimination Reduction Advocacy Campaign. In April of 2010, the streets of Manya Krobo witnessed hundreds of men and women from all walks of life gathered at the Palace square near the Presby Church Odumase. They were wearing polo shirts and T shirts of different colours with various inscriptions challenging HIV related stigma and discrimination. Scores of people carried placards and the music from the brass band was loud enough to wake people who were sleeping to join. The Presbytery Chairman, Anglican Archdeacon, Representative of the Traditional Council and some very key local influencers led the march through the principal streets of the district. The float started at 9.00 in the morning and ended at the Presby School Park at 12.30pm. The traditional council Rep officially launched the programme and asked all to support the efforts of the CCG to assist the District deal with HIV related S&D. He said everyone must respond to the sound of the gong in all the communities.

The District has 35 campaign leaders from all the different stakeholder groups that were trained. They met at the beginning of each quarter to draw an action plan for a coordinated campaign.



PERSON TO PERSON, HOUSE TO HOUSE IN THE COMMUNITY

The teachers worked with the school clubs and used different innovative strategies including the trigger sketches and role plays to educate the pupils on the need to avoid stigma and discrimination. It is believed that if the information is carried out right to the younger ones and it is consistent behaviour change is sustained.

The pastors include information on stigma reduction in their sermons once they mount the pulpits on Sundays. Organised activities are lined up for the women groups and youth groups as they go for their regular meetings.

Auntie Koshie who is a trader uses all available means to share with her customers, her sense of humour is a great asset for the campaign and she is able to reach so many people. She is called "Mami Aids" in the community and she enjoys it. She says the project has raised her image as a simple trader to a respected community leader.

Gertrude is all over in the community mobilizing the volunteers and campaign leaders to reach the underserved villages around Manya Krobo. There are so many scattered communities and because of very bad roads or inaccessible road networks they are left out in almost everything but the stigma project has reached them and you can imagine the joy with which they respond to the sound of the gong, so eager to hear the message or participate in the activity.

They relied on person to person communication wherever people are found. They went from house to house.

Pastors delivered sermons about stigma and discrimination. Youth groups organised social and sporting events against discrimination. Community radio stations started a weekly Saturday morning call in radio show about stigma and discrimination with local HIV positive persons as resource people. They used gatherings such as local festivals to spread the message.



GETTING THE MESSAGE ACROSS

Joseph Tawiah is on a personal mission to reduce HIV/AIDS stigma and discrimination. He is working with Christian Council of Ghana to restore confidence and hope to Persons Living With HIV/AIDS in his community.

26 year old Joseph Tawiah, a Ward Assistant at the Atua Government Hospital in the Eastern Region, is combining his medical and social skills to lead the fight against stigmatisation and discrimination of Persons Living With HIV/ AIDS. Joseph's various supportive roles as a leader of the Krobo Vision Drama Troupe and the Sports and Entertainment Organiser of the Zimama Presbyterian Church at Krobo Odumase has provided unique opportunity for him to educate the youth in his community about the dangers of discrimination and stigmatisation of Persons Living With HIV/AIDS.

During the morning devotion session at the Hospital, Joseph encourages Persons Living With HIV/ AIDS to desist from self stigmatisation and also educate other patients not to discriminate against them but to reach out and show that they care. "I use the devotion platform to advice everybody present including Persons Living With HIV/AIDS and those who are not to love one another, because this is what God wants us to do, - to love one another as we love ourselves" Joseph who strongly believes that the use of drama would go a long way to influence community members' perception and attitudes towards Persons Living With HIV/ AIDS also commended the Christian Council's approach and determination to reduce stigma and discrimination by employing drama as one of the advocacy strategies. He explained that, "from experience drama is more effective than public talks and people can easily relate to drama than public speech". He continued that, "people naturally like entertainment and I will continue to use the drama to educate people in my community on the dangers of stigmatization, because if we don't encourage and show love, they will not open up to disclose their status". This according to Joseph is more dangerous since they can silently spread it because people may not be aware. Joseph who strongly admitted that he had benefited immensely from the various skills training workshop under the project, also pledged to use the newly acquired skills from the just ended advocacy training workshop to enhance his communication and interpersonal skills during his engagements at the hospital and in the community at large. "I will use these skills to support my hospital talks, educate keep fit club members and also use it to dramatise the realities of stigma and discrimination to my community members",



The collaboration between the District Health Service and the project is significant to the extent that campaign leaders and volunteers are present at community service delivery with drama and group discussions. During the Nmayem Festival the campaign was on hand. The festival is celebrated on the outskirts of the district up a very big mountain. The campaign started with placing posters along the road where the people journeyed towards the mountain. Members posting the posters were dressed provocatively and that generated some discussions which were used to address stereotypes. Festival grounds activities included drama, demonstration with the journey of hope and voluntary counselling and testing.

Commercial vehicles have the stickers splashed on their vehicles and since it is in their local language people identify with it and call the volunteers for further explanation. The media is not left out in this campaign. Media persons who attended the workshop from Obonu FM started a 30 minutes programme on Saturday morning featuring a resource person and a person living with HIV addressing issues related to stigma and discrimination. The call in component of the programme allows community members to interact with the persons in the studio.



JOYCE LARKO STEINER, CCG PROJECT COORDINATOR

Project coordinator Joyce Larko Steiner (Senior Programme Manager with the Christian Council of Ghana) is waiting to see forthcoming National AIDS Committee data on the uptake of treatment in the districts to see whether it has increased. She thinks this will be evidence of the project's impact, in addition to other indicators that show a reduction in stigma and discrimination in the communities. CCG strongly advocates that no person living with HIV/AIDS should die because of stigmatization. Treatment is available for all.

The project has established strong, community based co-ordinated networks committed to challenging stigma and discrimination.

The CCG has been engaged by UNAIDS to provide training in Ghana on stigma and discrimination.

CCG is currently contributing to the National Strategic Framework on HIV and AIDS of the Ghana Aids Commission, the umbrella body for regulating AIDS service organizations in Ghana, on how the problem of stigma can be tackled nationally. They hope replicate the project in other districts.

More info:

www.waccglobal.org

www.christiancouncilofghana.org/wacc.html

**WACC Photo Competition:
Zero Tolerance for HIV and AIDS Stigma and Discrimination**

Inspirational photos illustrating people and communities
working for zero tolerance of HIV and AIDS stigma and
discrimination

Deadline 1 May 2011

www.waccglobal.org

