

A UNIQUE BRIDGE

THE IMPACT OF CHRISTIAN AID'S SUPPORT OF FAITH-BASED RESPONSES TO HIV

POVERTY

Management response to the independent evaluation



For nearly a decade Christian Aid has been working with faith leaders and faith communities in developing countries as part of efforts to tackle the causes and consequences of HIV. For the past three years, the Department for International Development has given Christian Aid specific funding to help to resource this faith-based response to HIV. An independent external evaluation has now explored the impact of this work, welcoming its distinctive value in raising awareness of HIV and tackling HIV-related stigma. This paper presents Christian Aid's response to the findings.

Overall response

Christian Aid welcomes the independent external evaluation focusing on the impact of our support for faith-based responses to HIV. We are pleased to accept the overall findings and conclusions as a fair reflection of Christian Aid's work in this sector. We are encouraged by the affirmation of the critical role that faith leaders are playing in increasing awareness of HIV and reducing HIV-related stigma, and of the profound impact this role has on people's attitudes towards testing, their ability to seek treatment and care, and the collective support that communities provide.

We are also encouraged by the acknowledgment of the value of our ethos of partnership with faith-based organisations: that it goes beyond a conventional funding agreement. We welcome the recognition that this longer-term perspective has enabled a more sustained and sustainable approach to working with faith communities to develop an effective response to HIV.

The evaluation confirmed our position that faith groups have a distinctive role to play in the HIV response. We are pleased that our role in providing a unique bridge between faith and secular actors, and between different faith actors, was recognised as being particularly valued.

Christian Aid adopted the SAVE approach ('safer practices; available medication; voluntary counselling and testing; empowerment') in 2005. Since that time we have been working hard to promote it as widely as possible through our faith and secular partners. We are pleased to note that the evaluation confirms our own learning, in that SAVE has proved a highly effective tool for engaging with faith leaders and faith communities. However, we also acknowledge that there are still faith leaders who have been exposed to the SAVE methodology but who have not yet developed a deeper understanding of HIV and AIDS.

The report provides important insights that will contribute to the development of our work in this key area. The evaluation has generated some lessons and challenges which, although not all new to us, will help to inform our future strategy and approaches.

We affirm the following:

Christian Aid's work illustrates that faith groups have a particular role to play in responding to HIV and reducing HIV-related stigma, and that this role complements broader secular responses. We understand that for numerous communities faith provides a lens through which many individuals view their world, and that faith-based organisations and leaders are able to communicate HIV messages more directly and effectively. We are encouraged that the evaluation affirms this position and recognises the value that Christian Aid has added to enable faith leaders and organisations to strengthen their knowledge, communicate effective HIV-prevention messages and tackle HIV-related stigma head on. It is equally encouraging that the evaluation recognises that in these areas, our partnerships have helped to reduce stigma as well as to provide people and communities with knowledge and information to protect themselves from HIV.

We are encouraged by the recognition of our role in building trust and respect among both faith and secular development actors. This has resulted in our ability to strengthen the capability of faith responses in ensuring an effective and coordinated response to HIV.

We are pleased by the recognition that the work of Christian Aid's goodwill ambassador on HIV/AIDS Canon Gideon Byamugisha, as a peer educator with religious authority, has been an influential factor in the success of our strategy of engaging with faith leaders. The evaluation finds that all of the faith leaders interviewed felt the training provided by Canon Gideon was transformational, and that it has been important for multiplying the value of this approach as others take on the role of religious peer educators. We affirm the recognition of the significance of Canon Gideon's work based on his personal experience of stigma, and the day-to-day reality of his life as someone living with HIV. This highlights the importance of ensuring that people living with and affected by HIV have a critical role in any effective response to HIV.

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We accept the evaluator’s assessment that the scale and scope of the dissemination of SAVE among faith leaders requires a pool of highly experienced faith leaders who are capable of running workshops, and that this does not exist to the degree that we would want. The expectations placed on faith leaders who are implementing SAVE training programmes remain high and restricts their ability to ensure effective follow-up for all participants. This remains a challenge and will be built into ongoing programme strategies and engagement with partners. However, while acknowledging this ongoing challenge, we were nevertheless encouraged by the assertion that the degree of mobilisation of faith leaders in the response to HIV seems unprecedented.

We are encouraged by the evaluation’s findings that the SAVE message has gained credibility and legitimacy among faith leaders and communities. The evaluation recognises the importance of this message’s faith-based origin and that it has enabled faith leaders and organisations to have a greater degree of trust in the SAVE approach. We are also pleased at the recognition that while SAVE has a faith-based origin, it remains wholly compatible with public health messages, enabling its wider dissemination through secular actors.

Challenges and limitations of the study

We recognise that the findings were limited to our work in South Africa, Zimbabwe and Kenya, and to the work of our international partners – the Ecumenical HIV and AIDS Initiative in Africa (EHAIA) and the International Network of Religious Leaders living with and affected by HIV and AIDS (INERELA+). We acknowledge that this does not necessarily reflect our experience in all of the countries in which we work. Although there was a clear rationale for identifying these countries as the focus of the review, it would have been informative if the scope of the evaluation could have included other countries where our experience has been even more challenging. However, we understand that these limitations related to logistical and financial considerations.

The evaluation quite rightly identifies that there is still much more to be done. There remain too many examples of faith leaders undermining effective responses to HIV through their own lack of information and fear of HIV, and that this continues to condemn people living with HIV.

Much of the data gathered was based on anecdotal evidence and quantitative assessments from previous training programmes. This questions the evaluation’s ability to provide clear qualitative data that can be linked to transformational impact. The numbers of faith leaders receiving training is valuable, but it would have more informative if a stronger link could have been made to changes in attitudes and behaviour resulting from the training.

Issues we are addressing

Christian Aid recognises the need to continue to strengthen the role of religious peer educators and accepts that the current impact is constrained by limited scale. We acknowledge that SAVE is an ambitious approach, but one we believe in, and that it requires highly experienced faith leaders who are able to run effective workshops. Christian Aid will continue to work with Canon Gideon, INERELA+ and our other faith partners to train and inspire more faith leaders to take on this role.

Christian Aid will undertake a broader reflection on the impact of this work in transforming faith leaders’ attitudes and their ability to become change agents. This will form part of a wider review of the SAVE methodology and ways to enhance its dissemination further so that it becomes part of national HIV strategies. We continue to strengthen the development of baseline data and monitoring tools that will enhance our ability to assess impact and strengthen learning, both within our own practices and those of our partners. Since this evaluation was completed, Christian Aid has already invested in strengthening these monitoring systems even further.

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Front cover: Children sing, dance and play at a kids club for families affected by HIV, at Eziama Uli school in southern Nigeria. The weekly club teaches children about HIV, healthcare and moral issues, helping them to cope with their situation.
Christian Aid/Rachel Stevens

