Poverty and Hope Appeal:
Dec 2018 update from the Democratic Republic of Congo (DRC)

From a life lived in poverty, to becoming agents of change

Partnered with Christian Aid, supported by Poverty and Hope since 2016.

‘For the first time I can remember, I feel valued. I have become proficient in advocacy techniques thanks to the project – I truly feel that I have the ability to be an agent of change’ Leopold Shako Tshomba, beneficiary of the work done by Christian Aid’s partner EJPC, supported by Poverty and Hope since 2016.

With your help, the voices of those in the Democratic Republic of Congo (DRC) are finally being heard after years of crisis and uncertainty. Thanks to the work of Christian Aid partner, the Episcopal Justice and Peace Committee (EJPC), citizens in the Maniema province are learning how they can affect real change. In this update, two residents reflect on how their communities are changing for the better.

Leopold Shako (left) discusses the safety of Kibombo city

Leaving the past behind Leopold Tsomba Shako is 44 years old and has 14 children. His life has been characterised by poverty, a very low standard of living, and restricted access to the most basic social services such as clean running water. Years of armed conflict and two long wars in the DRC mean people like Leopold and his family have lived under the constant threat of violence. In turn, this has created an atmosphere of fear and instability throughout the nation. Visible corruption at every level of government for so long has left many without hope that things could change. However, since becoming involved in this project run by Christian Aid and EJPC, Leopold can see the real difference it is making – not just in the way that the government is responding to the needs of the people, but also in how the people of the DRC now perceive the government.

Because of this project, Leopold is becoming a real agent of change in his native area of Kibombo.

Thanks to groups like the grassroots organisation that Leopold works for, citizens are becoming aware of participatory governance and are learning important tools in order to ensure their voices are heard.

Leopold Shako (left) discusses the safety of Kibombo city

This is the first time he can remember feeling valued by his government – that his voice, and the voices of his family, really matter. Collaboration at last EJPC has worked tirelessly over the two years to equip people like Leopold with the advocacy techniques they need to lobby local authorities and make sure that the needs of the local people are met. In Kibombo, this training has resulted in strong links between the grassroots group that Leopold is part of, and the local government. It is this collaboration that has effected real change within Kibombo. This includes massively reducing waterborne diseases through the restoration of the area’s water source, accessed by 59,967 residents.
Local residents gather before a meeting.

Another example is the relocation of an illegal market which was causing problems for Kibombo residents, sparing the population from further harmful pollution. The local authority has also begun to allow members of Leopold’s grassroots group to attend security meetings, where politicians agree on what decisions will be put before the ‘For the first time I can remember, I feel valued. I have become proficient in advocacy techniques thanks to the project – I truly feel that I have the ability to be an agent of change’. This means the work of Leopold’s group will continue to be heard beyond the end of the project.

Community Leader Justin Nkusu Kitoko is 58 years old. He dreams of a future where the people of the DRC have an open forum to air their concerns, and it is a normal part of daily life to participate in decision-making processes at every level. With your support, Justin’s vision is becoming a reality for the people of Maniema. In the area of Lubile, where Justin lives, the work of the EPJC has resulted in sincere and constructive dialogue between the people and the government. The local authority has listened to the wishes of their citizens, setting up regular tribunals on different topics to allow them to have their say on the issues that matter most.

Thanks to the training given to facilitators in Lubile by Christian Aid’s partner, people like Justin have learnt all the skills they need to work towards participatory governance. This includes knowing how to look after their communities, monitor public policy changes and write proposals for community projects. People who had little knowledge of any kind of advocacy techniques before the project began are now professional community leaders, lighting the way for their communities. Through the tireless work of people like Justin, the government in Lubile has listened to the safety concerns of the population and acted in the interest of its citizens.

For example, there has been a relocation and rebuilding of the market, giving the population of Lubile greater access to buy and sell. As this is also all properly taxed, revenue is generated and put back into the area. Petitioning from facilitators like Justin has also led to various repairs throughout the nearby village of Kinkungwa, helping to stop the spread of diseases and lessening the risk of snake bites. Residents of Lubile and Kinkungwa also lobbied the local authority to provide compensation to the families of those who drowned in a terrible accident while working on the Ulindi River. The National Department of Humanitarian Affairs agreed to provide financial assistance to those families affected. This is an important achievement as many families lost not only a loved one but also the means to earn.

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Innovative credit scheme lifting farmers out of poverty

Partnered with Christian Aid, supported by Poverty and Hope since 2015.

‘In rural areas, the very poor couldn’t get credit from any institution, preventing them from buying seeds and fertiliser. Our intervention helped them get credit, which in turn assisted with income generating activities.’ - Andre Gountan Head of Christian’s Partner BRACHED, Action Contre La Faim, supported by Poverty and Hope since 2016.

In Burkina Faso, one traditional means of accessing credit is known as warrantage or the inventory credit system. The concept is simple. At the end of the rainy season, a farmer will set aside a portion of their surplus harvest in a warrantage warehouse. In return, the farmer is given a sum of money by a microfinance company equivalent to the market value of the crop that they have set aside. With this credit, they are then free to invest in materials and income-generating activities. With the support of Poverty and Hope, Christian Aid’s partner in Burkina Faso has worked to open this scheme up to vulnerable groups in rural areas.

Teblebsom Saba was one of the first to try out the new system last year in the town of Bagaré, where Christian Aid’s partner ODE had constructed a warehouse for the municipality. Depositing a sack of groundnuts and a sack of beans she was given a loan of approximately £40 in return.

Over the course of the dry season she used the money to make cakes and brew millet beer with this money, making over £90 in profit. Upon paying her debts, she also sold her beans for a profit and used the remaining bag of groundnuts for seed, generously giving some to her daughter-in-law to do the same.

Sadly, Teblebsom’s husband died last year, leaving her with a household of six to take care of by herself. While a great loss for her, the profits she made in the warrantage system meant that the economic impact on her family was thankfully mitigated.

Stability for the future

While this innovation depends on farmers producing surplus to sell, the benefits to profit, farm yields and household management are significant. Through 11 programmes of warrantage BRACHED have created access to finance for 4248 community members, 2209 of which are women.

This season, Teblebsom, whose name means ‘to hold well’, will store four sacks of groundnuts in the warehouse, with the aim of purchasing more groundnuts to process, adding value to the stock and securing her family’s stability even further.

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Challenging the stigma of HIV in Zimbabwe

ARDeZ (Anglican Relief & Development in Zimbabwe) partnered with USPG, supported by Poverty and Hope since 2018.

Nearly 1.2 million adults in Zimbabwe are living with HIV (UNAIDS, 2011), yet few people feel comfortable talking about it. The stigma surrounding HIV means lives are being lost because people are reluctant to ask questions or come forward for testing and treatment.

HIV also creates poverty. As lives are lost, households lose income. Sometimes children are sent out to work to make ends meet, but they miss out on school and the chance of an education and better-paid employment in the future. And so the cycle of poverty continues.

However, in Rochester’s companion Diocese Harare and across Zimbabwe, a new initiative is helping to tackle stigma. USPG (the Anglican Mission Agency) and the Anglican Church in Zimbabwe are working with secular organisations – such as UNAIDS and ZNNP+ (Zimbabwe National Network of People Living with HIV) – to roll out a research programme that is uncovering what life is like for people with HIV so policy-makers are better informed to develop national HIV strategies.

HIV stigma affects all sectors of society

To date, the research has shown that people with HIV face stigma in all sectors of Zimbabwean society, including the church, where only 26 per cent of people with HIV felt comfortable enough to share their HIV status with their church leader. The survey found that thousands of children are being expelled or suspended from school because their parents are HIV-positive. Young people (aged 15 to 19) were found to be particularly sensitive to stigma. Only 3 per cent of those approached were willing to take part in the survey.

Mucha Mukamuri, Executive Director of ZNNP+, said: ‘Stigma remains a major barrier for people living with HIV in Zimbabwe. We have been able to share with politicians empirical evidence of the stigma, and this is galvanising a political will to tackle the problem.’ The findings are being used as a part of an awareness-raising campaign to try and tackle stigma. This include meetings at Anglican, Methodist and other churches. Mucha said: ‘We want to enable understanding among faith communities. We want churches to create an environment in which people can openly disclose their status.’

It is hoped the research will be used to help break down HIV stigma in the church, helping people to talk more openly about God’s care for people with HIV.

Struggling to overcoming HIV stigma: Maxwell’s story

The Revd Maxwell Kapachawo is one of a number of people and agencies (including UNAIDS) that are working with USPG to tackle HIV-related stigma in Zimbabwe. Maxwell (pictured) is well-qualified to tackle the subject. He put his vocation and livelihood at risk by taking the brave step of declaring publicly that he is HIV-positive. On two occasions, he was asked to leave by the churches he was overseeing.

But he has now found a church that has accepted him, and the congregation has started talking about
what they can do to improve care for people with HIV.

Maxwell explained: ‘I felt I had to speak out. The church must not shy away from HIV. It needs to be a place of healing and care. The church is at the heart of communities and, when we get it right, we can have a massive impact.

He added: ‘Everyone in Zimbabwe has family or friends who are no longer here because of HIV. There are many orphans. So we cannot keep running away from HIV. We must work together and, as a result, I hope people will learn about HIV and lives will be saved.’

**Mary’s Story** (Mary’s name has been changed)

Mary says ‘There are two possibilities on how I contracted the virus. It was either at home sexually or at work when working with an AIDS patient as I was a nurse. I still remember in November 1989 there was an AIDS patient who was in a bath tub and the bath tub was almost full of water. I just deep my hand to open a stopper so that water would drain from the tub. Since I did not have protective clothing and the signs that followed hardly three months later I still suspect that could have had been my source of infection.

In February 1990 I started showing signs and symptoms of seroconversion. So maybe that fluid contact from the AIDS patient or the sexual routine at home could be my infection source.

In my life I had managed to have two children but unfortunately one succumbed to a road accident. So I had to live with my one daughter and my husband. When I went for HIV test and tested positive my husband could not take it. He actually went round to almost all the people we knew informing them. It was very stressful period. My husband later on went for HIV test and tested negative. He also went around showing his negative result. The funny thing about it is that he showed all the other people his result slip but could not show the results to me.

My daughter was however very supportive and did not even show fear and I think it was due to adequate information she had on the virus. One of my friends was very supportive to me and she gave me confidence. She actually asked to choose death or life and I chose life. I had to choose life for the sake of my only daughter as I noted she was not going to have anyone to lean to after so much pressure especially from the loose of her brother.

The stigma reduction project have continued to assist me to maintain my self-esteem. The stigma project have established a gathering site at the Harbern park plot where various groups of people come and interact. I do enjoy sharing on nutrition a lot and the herbal nutrition section at the plot is my favourite section.

We have gone further to form a WhatsApp platform where we always share ideas. It is actually a learning and sharing platform. I am one of the project contact persons and I enjoy sharing and uplifting others very much. I have noted there are a lot of people who want psychosocial support and the time we spent it the project site is memorable.

I do have a vision of establishing a health shop at home to ensure that what had sustained me since 1990 also sustains others. I would like to thank the church for coming up with such an exciting programme”.

**Prayer Points:**

- Give thanks that USPG’s partner The Anglican Church in Zimbabwe are enabling people to find hope after facing rejection due to their HIV-positive status.
- Pray for openness and sensitivity in all churches so that those with HIV might feel welcome and accepted in God’s eyes.
- Pray for Zimbabwe’s public healthcare system, which is under enormous strain due to a lack of resources.
- Pray for political leaders in Zimbabwe, following their recent general election, that they may seek peace, equality and justice.
Poverty and Hope Appeal: December 2018 update from Zimbabwe

‘When I was on the brink of giving up, their teachings changed everything’

Partnered with USPG, newly supported by Poverty and Hope in 2018.

The USPG is working with Anglican Relief & Development in Zimbabwe (ARDeZ) in Rochester’s companion diocese of Harare and across Zimbabwe to help tackle HIV stigma. They do this through education, training and practical support, using the influence of the church to bring about change in attitudes towards people living with HIV/AIDS. Their HIV Stigma Reduction programme, is saving lives and giving hope. Three beneficiaries of the programme share their stories.

CHERRY’S STORY
I’m 46 years and HIV-positive. I got involved in the HIV Stigma Reduction Programme in 2016 and was trained by the diocese to work with the church and community on HIV stigma. Now I give talks in schools and in the community and raise awareness about the situation. I also lead by example. Before this programme people would gossip about me saying I’m a bad woman and not talk to me. I had suicidal thoughts and my weight fell to only 19kg. Also, my child was abused in school about me. But this has now stopped.

I can see many changes because of the programme. Before it was difficult to stand up in church and speak about living with HIV because a person could be labelled as a prostitute. But now the church doesn’t discriminate; during Holy Communion we share the same cup. Also, I’m no longer alone. Six other people in my church have openly declared their HIV-positive status.

The stigma programme has helped the community to know the facts about HIV and this has challenged stigma and brought acceptance of HIV status.

Previously, my husband had rejected me – he had run away for three years – but then he came back. He went for testing and was found to be HIV-positive. So now we are both on medication and living happily together.

We were stigmatised in our churches and communities, but the diocese has strengthened us to be where we are today.

YEMURAI’S STORY
I live in Mkoba. I’m the mother of seven children – two biological and five orphans from my late sister. I learned I was HIV-positive 12 years ago while I was four months pregnant. When I told my husband he surprised me by saying he was also HIV-positive and was already taking anti-retroviral treatment [which reduces the impact of HIV]. I knew his first wife had died.

My husband told me I should start taking the medication like him – so, to this day, we have both been on medication.

At that time, the clinic gave me a caesarean delivery and I delivered a baby boy, who is now 12 years old. Because I had started the treatment, he was born HIV-negative.

Last year I got involved in the HIV Stigma Reduction programme which runs a Hope for Life support group. I’ve become much more productive and I’m now better able to support my children. Compared with before, I am much less stressed.

In the group we learn income generation activities, such as making washing up brushes and soap and selling clothes. We talk and learn from each other. I wasn’t producing much in my smallholding but through the support group I’ve learned how to improve my farming methods and now I’m producing more crops. I’ve also started cultivating a herbal garden.

The support group also has a savings scheme: we all contribute a small amount and at the end of the year the money is shared out to buy groceries and other essentials.
CHIEDZA’S STORY

I’m 40 years old. I live in the Manyene district. I’m a single mother with four children and I’m HIV-positive.

Five years ago, when I discovered my HIV status, I was labelled a prostitute in my community. Even my fellow church members sidelined me – no-one wanted to share utensils with me.

My children were mocked by their classmates, and even by some members of our community. I thought about taking them out of school and letting them stay at home with me. I felt so much shame and suffering that I even contemplated suicide, which I think I would have done except I was worried about who would look after my children.

Then, in 2017, the wonderful stigma reduction programme came to my church – and I am so grateful. It came when I was on the brink of giving up, but their teachings changed everything – coming down from the clergy to our communities.

I felt accepted. I joined the local support group. This time, rather than being rejected, not only did people start sharing their utensils with me, but now I am helping with catering activities. I was even elected to be a church warden and now I am encouraging others to disclose their status. We also support income generation activities for those who are HIV-positive, such as rearing poultry and gardening.

Pictured: The HIV Stigma Reduction programme supports income generation initiatives, like this chicken farming project in Manicaland, Zimbabwe. Credit: USPG/Fran Mate

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https://issuu.com/uspg/docs/tranmission_2018_winter_issuu/14

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Registered charity number 234518