

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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BACKGROUND

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.

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.

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.