



## Center for Faith-Based & Community Initiatives

### Dear Newsletter Recipients,

Evidence continues to mount that using faith and community based groups is one of the most efficient and effective ways to produce measurable and sustainable results for economic development.

Listed below are studies conducted by the World Health Organization and Gallup World Poll respectively, citing the impact faith and community based groups are witnessing in Africa. We have also posted our first of many success stories from faith and community based groups. Hopefully you will be as encouraged as we are upon reading the good work you and your peers have been conducting.

### About the Advisory Committee On Voluntary Foreign Aid (ACVFA):

#### Presidential Directive Helps link the U.S. Government and PVOs

ACVFA's Spring meeting is coming up on Wednesday, May 23 and now is the time to pre-register. The meeting flyer is now available on the Committee's web site. The flyer will be updated as the meeting date draws closer. And the agenda will likely be posted on or around May 21.

The Advisory Committee On Voluntary Foreign Aid (ACVFA) was established by Presidential directive after World War II to serve as a link between the U.S. Government and private voluntary organizations (PVOs) active in humanitarian assistance and development work overseas. Comprised of 24 private citizens with extensive knowledge of international development, ACVFA helps provide the underpinning for cooperation between the public and private sectors in U.S. foreign assistance programs.

ACVFA consults with, provides information to, and advises USAID and other U.S. Government agencies on development issues relating to foreign assistance in which the U.S. Government and PVOs interact. It also provides information and counsel to the PVO community on issues of concern regarding their relations with USAID and other U.S. Government agencies; and fosters public interest in the field of voluntary foreign aid and in PVO activities.

ACVFA meetings are held three times a year and provide opportunities for information exchange and consultation between USAID and other governmental agencies and the nongovernmental community.

For more information, visit the [ACVFA](#) website or contact the ACVFA Executive Director, Jocelyn Rowe at [jrowe@usaid.gov](mailto:jrowe@usaid.gov)

*Disclaimer:*

*Please note that this event is hosted by the [Advisory Committee on Voluntary Foreign Aid] and is free and open to all [who register to attend]. This announcement is made for informational purposes only*

*and does not constitute an official U.S. Government invitation. The U.S. Government (including USAID) cannot provide travel expenses or assistance with travel arrangements, including visas. Persons and organizations who wish to attend are responsible for their own travel expenses and arrangements, and are encouraged to contact the nearest U.S. embassy or consulate for information related to visas and travel to the United States.*

## **A Recent Study from the African Religious Health Assets Program at the World Health Organization states FBOs are vital in combating poverty in Africa**

Below are portions from the “ARHAP” website announcement:

The study, “Appreciating Assets,” documents the contribution made by religion and religious entities to the struggle for health and wellbeing in Zambia and Lesotho, in a context dominated by poverty, stressed public health systems and the HIV/AIDS pandemic. By mapping and understanding these Religious Health Assets (RHAs), the study calls for a greater *appreciation* of the potential they have for the struggle against HIV/AIDS and for universal access and offers recommendations for action by both public health and religious leaders at all levels. Through respectful engagement these assets have the potential to increase in strength and value and become more effective in the long-term sustainability, recovery and resilience of individuals, families and communities.

The year 2006 marks the 25<sup>th</sup> anniversary of the first published description of HIV/AIDS and a pivotal year for the pandemic. Over the past quarter century, an estimated 60 million people worldwide have become infected with the virus, 20-25 million have died and millions more have been affected by the loss, pain and suffering that accompany the disease. Zambia and Lesotho, in southern Africa, the two study sites for this research, are among the countries hardest hit, with estimated adult HIV/AIDS prevalence rates of 17.0% and 23.2% at the end of 2005, respectively.

The World Health Organization (WHO) has called for an unprecedented humanitarian effort to stem the tide of this (HIV/AIDS) pandemic and to alleviate the suffering of millions through universal access to HIV/AIDS treatment, care and prevention services by 2010. Potential key partners in this effort are religious entities, including organizations, initiatives, congregations and individuals that hold a considerable portion of the medical infrastructure in sub-Saharan Africa and an even greater degree of *health-promoting religious assets*

In this context, the African Religious Health Assets Program (ARHAP) undertook research to identify, map and assess religious health assets (RHAs) that can be marshaled in the fight against HIV/AIDS in these two high priority countries and to make this new body of information accessible to a diverse audience. This knowledge is urgently needed to mobilize current capacities, align resources, fill critical gaps, and target interventions. It is also critical to the long-term sustainability, recovery and resilience of individuals, families and communities.

### **Summary of their findings:**

- Religion is ubiquitous in Zambia and Lesotho, yet often hidden from Western view. Given this, an engagement with religiously informed *healthworlds* is vital for the shaping of public health policy in southern Africa.
- Religion, health and wellbeing are locally and contextually driven. For those seeking to engage RHAs, religion cannot be viewed as a single, simple cultural “variable” - no “one size fits all.”
- Religious involvement in health and HIV/AIDS is increasing - particularly since 2000 - and religious entities have expressed a strong local commitment and desire to be more effective in the area of HIV/AIDS. Interfaith engagement and dialogue require further exploration.

- Religious entities are perceived as contributing to health, wellbeing and the struggle against HIV/AIDS through tangible and intangible means. It is this combination that distinguishes them and gives them strength. Leading tangible factors comprise compassionate care, material support and health provision; leading intangibles are spiritual encouragement, knowledge giving and moral formation.
- Certain religious entities are acknowledged as “Exemplars” in the community and these demonstrate exceptional programmatic, operational and associative characteristics.
- An Assets-Based Approach to research and implementation of religion and health initiatives and HIV/AIDS scale up offers the potential for more rapid, sustainable and effective capacity-building and action.

To read the entire study and the recommendations in response visit:

[http://www.arhap.uct.ac.za/research\\_who.php](http://www.arhap.uct.ac.za/research_who.php)

### **Rand Study Finds Religiosity Can be an Important Tool in Preventing the Spread of HIV/AIDS**

HIV-positive people who say religion is an important part of their lives are likely to have fewer sexual partners and engage in high-risk sexual behavior less frequently than other people with the virus that causes AIDS, according to a study issued today by the RAND Corporation.

As a result, people with HIV who have stronger religious ties are less likely to spread the virus, according to the study by the nonprofit research organization.

“Moral beliefs may indicate an underlying altruism and a desire to make sure no one else is infected with HIV,” Kanouse said. “Promoting these feelings could then be used as a component of HIV prevention programs.”

“This study suggests that there's a role for religious institutions to play in the fight against the spread of HIV,” Galvan said. “They have these core belief systems that do have a positive impact on the lives of people who are HIV-positive and who are sexually active. Religiosity is an untapped resource in the whole struggle against HIV and AIDS, and should be looked at more thoroughly.”

Catholics were less likely than other mainline Christians, non-Christians and non-religious people to report unprotected sex. Catholics also were less likely to report high-risk sex than other mainline Christians and reported fewer partners than non-Christians.

There was no statistical difference between Evangelicals and Catholics in reported sexual activity. Evangelicals were as likely as Catholics to have fewer sexual partners, and equally likely to engage less frequently in unprotected and high-risk sex.

To read the entire summary of the study visit:

<http://rand.org/news/press.07/04.03.html>

### **Gallup announces that across the African continent, the #1 ranked social or political institution locals had the most confidence in were the religious organizations**

Bob Tortora, Chief Methodologist from Gallup, explains that a 2006 Gallup World Poll asked sub-Saharan Africans in 19 countries about their confidence in eight social and political institutions. Across the African continent, religious organizations were the #1 ranked social or political institutions trusted by locals. Overall, the Gallup officials themselves stated that “As a general principle, channeling foreign aid through local religious organizations may be more

likely to maximize optimism among African populations than if they perceive it to be directed through their governments, which could introduce an element of cynicism." In order for any aid mechanism to work, it must be supported as well as trusted by locals; confidence is a key indicator of each of these principles.

To read the entire summary of the polls visit:

<http://www.gallupworldpoll.com/content/?ci=26176>

## **USAID Center for Faith-Based and Community Initiatives helps groups combat HIV/AIDS in Zambia**

LUSAKA, Zambia -- Too many Americans, foreign aid is primarily a handout they see in televised images of disaster response or food distribution to refugees. What they see is a benevolent -- but often one-dimensional -- view of how the U.S. responds to international needs.

But in Zambia, one of the largest American investments in the fight against HIV/AIDS is carried out primarily by Zambian volunteers who are trained and equipped by money from USAID (the U.S. Agency for International Development) and resources from groups like Africare, Catholic Relief Services, CARE, the Salvation Army and World Vision.

So far, more than 12,000 Zambians have been trained to do home-based health care, a critical intervention in a country where the fragile health care system cannot begin to meet the needs of the million people infected with the disease. Nearly 90 percent of Zambians live on less than \$2 a day.

To the Zambian volunteers, the goal of their work is clear: helping the poorest and most fragile in their communities survive. In a country where the HIV infection rate is as high as 25 percent in urban areas, that often means children orphaned by AIDS, widows left to care for grandchildren, and people living with HIV/AIDS or the other diseases that attack fragile immune systems.

The group calls itself "God Our Help" and gathers at the Living Word Church in a community called Kalikiliki. The volunteers are both Christian and Muslim, talking often in similar terms about how God inspires their work. Grace Mutonga says "I am inspired by the words of the Bible in Hebrews 13 to take other people's problems as my own. I try to remember what I would want if it was me who was sick."

Joachim Musonda emphasizes that not all in the group are Christian and that Muslims, too, "get knowledge from God and are inspired by faith." Others nod their heads, including the leader of the group, Mrs. Lister Chinangu, a nurse and wife of the pastor of the Living Word Church. "We work together as Christians and Muslims because we all care about the needs of our people," Mrs. Chinangu says. "We help anyone who is suffering."

What is most remarkable is that the volunteers themselves are mostly poor and often are caring for their own needs. One volunteer named Lydia tells me that she is taking anti-retroviral drugs to fight AIDS, and uses her own experience to encourage others to get tested so they can get treatment.

Most of the volunteers work other jobs to earn enough to support their families. In this largely agrarian culture, that often means backbreaking work in the field; one woman tells me she works with a small hammer to break large boulders into gravel.

The volunteers have trained for weeks in order to administer basic health care, to recognize the signs of malnutrition, and to understand how best to help those who are suffering. Their

training is paid for by a grant from the U.S. government's fund for fighting global HIV/AIDS and administered by RAPIDS, the consortium of six nonprofit organizations working with dozens of Zambian community groups.

In addition to their training, the volunteers receive a T-shirt that proclaims them a "Home Based Care Provider" and a small box packed with supplies. In the boxes are rubber gloves, a water purification kit, a flashlight, salve, a washcloth, and tools to help them tidy up a house or provide basic care to a person who is ill.

It is, admittedly, a meager offering by medical standards. But when I go on visits with the volunteers, it's clear that the ability to listen to concerns, identify needs and simply tidy the house or wash a fevered face are valued interventions. Some volunteers return with emergency food or transportation to help someone get to a clinic. Those who are alone or ill in a village know that they will receive a regular visit, a simple assurance that offers great comfort.

The caregiver kits are restocked with supplies purchased through the grant, supplied by donations or sent by corporations. Bruce Wilkinson, an American who heads the RAPIDS program, calls it a "true global partnership, and I think most Americans would be proud to see how their aid dollars are more than doubled by the other partners."

Volunteer Nelia Zulu has a slightly different perspective, "The people of Zambia have a strong volunteer ethic. We want to support one another but we just need some help." As she and the other volunteers walk miles down dirt roads, it is clear they are proud of their work and are grateful for whatever help they get. But nothing about the program is a handout. "We are," she said, "working for God."

**Story by Dale Hanson Bourke, a consultant to humanitarian organizations and the author of "The Skeptics Guide to the Global AIDS Crisis" "Copyright 2007 Religion News Service. Used by Permission."**

### **USAID's Youth Alliance Program has witnessed phenomenal results as they partner with churches and faith based groups to fight gang violence**

When surveys were conducted showing that nearly 30 percent of the 2,000 people polled in at-risk areas in Guatemala had been victims of crime during the last year, USAID's Youth Alliance Program staff became convinced that a new approach was needed to help neighborhoods reclaim their streets and their children.

A recent USAID-funded study, the Central America and Mexico Gang Assessment, discovered that youth fleeing gang life were actually hiding out in churches trying to escape the gangs they had become involved with. This finding led to the concept of convincing faith-based partners to serve as intermediaries and service providers to work with these troubled youth.

The Youth Alliance Program recently opened three outreach centers in partnership with three different churches to help at-risk youth survive their childhood and prevent them from joining gangs. The faith-based partnership concept is not new. What is new to Guatemala is the level of community-based volunteerism that is now being experienced. One center is located where the notorious MS-13 gangs control the neighborhood. Another was formerly the favorite dumping site for dismembered bodies, and the third center is in a town 35 kilometers from Guatemala City where two rival gangs demobilized and turned to the church for help.

In less than two-months of operation, the three centers combined have logged over 2,000 hours of volunteer time from more than 85 volunteers. Youth are encouraged to go to the center immediately after school to participate in sports, learn computer skills, complete

homework and enjoy other activities. The older youth use the centers as a refuge or “safe place” to learn new skills for employment. Each center relies on different skills and abilities that volunteers are coming to the center to offer.

Recruiting, training, and working with volunteers is handled by the program staff who also work toward placing ex-gang members in businesses. In just a few months they have been able to place 56 ex-gang members, and that number is growing everyday. Most of the ex-gang members are nominated by local churches, then screened and placed with businesses. About a year ago, most businesses wouldn't even consider hiring an ex gang member – if they found that the applicant had tattoos – a sure sign of gang involvement there – they would reject them on the spot. But after a local TV station did a show about the difference the Youth Alliance Program was making, there was a change in attitude and several companies came forward.

Most of the ex-gang members have done well, getting promotions in a short time. One "ex" who was interviewed on TV about his involvement with this program said that when they first approached him about participating he was wary: he thought that the program staff was trying to collect information on him to have him eliminated. He just couldn't believe there were people who were actually trying to help him. Now he is recruiting gang members into this program himself and sees it as atonement for his involvement with gangs in the past!

The USAID Youth Alliance Program has discovered that everyday citizens are willing to help solve serious social problems that seem intractable to donors and governments. Guatemala's youths are their future and volunteers are making a difference in their lives. There is a growing recognition that NGOs can often move faster and more effectively than government agencies, unburdened as they are by heavy bureaucracy and that churches provide a trustworthy mode for collaboration to allocate resources and oversee local projects.

**If this newsletter was forwarded to you and you would like to sign up to receive regular updates from the USAID Center for Faith-Based and Community Initiatives [click here](#).**