

## FIELD REPORT FROM UGANDA

*Adapted from the broadcast audio segment; use the audio player to listen to the story in its entirety.*

Ugandans wear their faith on their sleeves. Kampala's ubiquitous shared taxis are commonly emblazoned with religious decals reading "Allah Protect," "Jesus Saves," and given the number of traffic fatalities, the words. "Pray for us."

Beyond these cosmetic expressions, faith has a role in the health sector that is difficult to overstate. The oldest and often most trusted health facilities are run by churches or mosques. Outside Zambia hospital, patients nap on long, wooden benches that make up the open air waiting room. This Roman Catholic hospital has been a healthcare fixture in Uganda for over a century. About 15 years ago, the face of their patients began to change.

Dr. Maria Nanyonga-Soke runs the hospital's HIV center which administers life saving anti-retroviral drugs.

"The hospital was full of HIV patients. In the medical wards, we have more than 90% full of HIV patients. We book about 200 patients. Then we have those who drop in – about 300 or 400 patients in a day."

A key component to their work, Dr. Nanyonga-Soke says, is prayer. She admits that more than half of her staff also prays with patients. She says there is a definite therapeutic value in this.

"The council we do is praying and it works. I would recommend prayer."

According to David Toole, Associate Dean at Duke University's Divinity School, half of all the healthcare provided in Uganda is faith based. Toole is studying the connection between faith and health. He says separating the two is really more of a western idea.

"The death and suffering that are part of Ugandans' daily lives is so prevalent that what they are looking for in healthcare is that latter word. They are looking for 'care' as much as cure."

Dr. Sam Orach of the Catholic Medical Bureau sits below a portrait of Pope Benedict in the offices of the Catholic Medical Bureau. The CMB trains nearly half of all of Uganda's health workers.

"Personally, I find it difficult to live in two different identities. I am a Christian. I am a medical doctor. I am a Ugandan. I have to carry all these identities at the same time. As Christians, we do this first and foremost because we want to fulfill these scriptures because Jesus healed."

In the 1980's, religious and non-religious Ugandans were pulled into a health crisis that was killing nearly one in five people. Unlike most of its neighbors, Uganda responded with an aggressive multi-sector HIV prevention strategy that engaged all of society.

Dan Wamanya, Program Management Specialist for USAID in Uganda, describes Uganda's prevention strategy.

"The public sector, individuals, faith based organizations, and all Ugandans had a united effort. The initial response was to raise awareness. They came up with various approaches. One of them was the Zero Grazing campaign. Zero Grazing means if you are married, you would be faithful to your wife. This is a polygamous society so some people had more than one wife. Zero Grazing means you graze within your partners – the existing partners that you have. For those who are not married, abstinence. If they don't practice abstinence, then use a condom. That came to be what is popularly known as the ABC approach."

This pioneering message of ABC: abstinence, be faithful, and use condoms, slashed HIV rates by two-thirds. Pastors, imams and priests were extremely effective at conveying the A and B parts of that message. Condoms, Wamanya says, were always meant to be a last resort.

"We never put condoms. I had both A and B."

The abstinence and faithfulness messages contributed to Uganda's success in combating HIV/AIDS. The challenge, Wamanya says, is ensuring a balance so that the religious community's exuberance for A and B doesn't drown out C.

"We had A, B, and C, so we were struggling to maintain that balance... but they also recognize that as religious leaders, they have a role to save lives. Now it appears that in the process of saving lives, there are complications."

Those complications are something you see across the country. Religious leaders have a phenomenal reach and play an extremely helpful role in AIDS care and prevention. But their message often emphasizes only certain parts of the A, B, C strategy that Uganda pioneered.

Reverend Joseph Serwadda is the Head of Uganda's born-again faith. Serwadda is an entertainer. He cajoles and jokes with 3,000 evangelicals in a converted airplane hanger. Serwadda says that his overflowing church has something to do with his gospel of prosperity and healing.

"ABC – abstain and be faithful to God. Thirdly, C, find Christ. It's a simple ABC message, except where C is – they can say condom – we say Christ. They can both work. As part of this, we preach that Jesus can heal and he does heal. [For] people who have gone to hospitals and tested HIV positive, we've prayed for them. Eventually they have been tested again and they found out they were now negative. I wouldn't want to say that everybody gets a miracle. I am going to say that some people do get miracles. Most of our message is that God can heal HIV. That has brought a lot of people in our system."

Serwadda isn't the only preacher in Uganda who has claimed such miracles, but it's more shocking given his authority. In addition to being the leader of all of Uganda's 2,000 born-again churches, Serwadda also sits on a government board of interfaith leaders working to address HIV and AIDS.

Canon Gideon Byamugisha is an Anglican priest and the first publicly HIV positive clergy member in Africa.

"Religion in Uganda, vis-à-vis HIV and AIDS, has been like a double edged sword. On the one hand, it's the religious institutions and the religious leaders who have done a lot to respond to the suffering, depression, and confusion that surrounds HIV infection. In Uganda, religious leaders and institutions have the reach and they have the infrastructure. On the other hand, we find most of the stigmatizing and most of the discriminatory, intolerant attitudes to be among church leaders. I am sure that the church could do better than it is doing now to break the stigma, shame, denial and discrimination that surrounds HIV."

*– Reported by Matt Ozug for America Abroad*