

Lessons Learned for Effective Community-Based Stigma Reduction Programming in Tanzania

The experience of
Kimara Peer Educators
& Health Promoters
Trust: Pfiriael Kiwia



Acknowledgments

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- MAC AIDS Global Funds



Kimara Peer Educators (KPE)

- **Community-based organization**
- **Founded in 1992**
- **Functioning in a high HIV prevalent peri-urban community of Dar es Salaam, Tanzania**
 - **National HIV prevalence 7%**
 - **Dar-es-Salaam 10.9%**

(Source: Tanzania HIV Indicator Survey, 2003-2004)



KPE Activity Areas

- HIV prevention, information dissemination, care and support to people living with HIV
- Capacity building of local emerging NGOs and CBOs on HIV and AIDS Programming
- Participation in stigma research and linking it to communities for effective HIV response
- Networking and collaborating

Program Background

- KPE was one of 50 stakeholders involved in the development of a research-based stigma-reduction tool, the *Understanding and Challenging Stigma: A Toolkit for Action*
- KPE received a REACH program grant (USAID funded through PACT) to begin stigma-reduction activities in Kinondoni Municipality from 2003-2005

Kimara's approach to stigma and discrimination (S&D)

- Level 1:

Focus on staff & volunteers within the organization and key community leaders (Balozi) through a training using a Kiswahili version of the *Toolkit for Action*

- Level 2:

Build community mobilization and sensitization through outreach programs dealing with S&D and promoting non-tolerance

Level 1: Participatory Training

- **Trained 56 KPE staff and volunteers, 24 PLHAs, and 10 Balozi leaders as S&D trainers**
- **Training results**
 - Increased understanding of S&D
 - Provided space for self-reflection
 - Built skills on how to use *Toolkit for Action*
 - Developed action plans to incorporate S&D into ongoing activities

Level 2: Building Community Support

- **Trainers build community awareness**
 - **Community based outreach sessions for information dissemination**
 - **Home based care visits evolved into home based group meetings**
 - **Balozis held meetings with residents in their neighborhood & with peer Balози**
 - **Distribution of simple brochures**
 - **Special focus on PLHAs and counseling group convened at Kimara Office**

Lessons learned

- Increased awareness of HIV-related stigma can occur in a relatively short amount of time using exercises in the *Toolkit for Action*
 - However, time and space are needed for self-reflection and discussions



Lessons Learned

- **Social change requires building on the change of individual community leaders (e.g. Balози and faith leaders)**
 - **Slowly builds a focused network of anti-stigma advocates**



Challenges

- **Changing stigma takes times**
 - S&D are deeply rooted
 - HIV causes fear
- **Sustained change requires committed resources**
 - Essential to scale-up stigma reduction work

Recommendations

- **Start at home**

- **Front-line workers and people living with HIV need to be trained**

It was difficult to recognize stigma without the training (KPE staff)

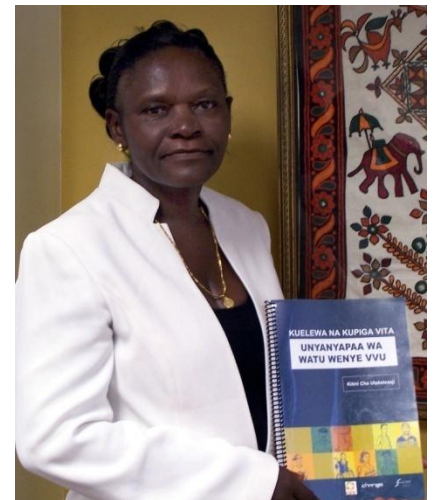
- **Work with key people in the community**

- **Champions for stigma-reduction & reach a wider community**

Educating others on S&D is no longer a problem for me. This is because of the training that I received on S&D. (Balozi)

Recommendations

- Use the *Toolkit for Action*
 - Simple, flexible participatory tools & exercises
 - Easy to use and adaptable with multiple groups (e.g. FBOs, Health care workers, Home based care providers, children, young people, NGOs, etc)



Stigma is Actionable!

**Communities are ready and open
to change!**