“Culture is a good weapon in the fight against HIV/AIDS”

Report on a one-day event on Harnessing Cultural Resources in the Fight against HIV/AIDS, Kampala, 29th September 2009

The Cross-Cultural Foundation of Uganda

1. Background

The Cross-cultural Foundation of Uganda (CCFU) organised a one day event in Kampala on 29th September 2009 aimed at building on the outcomes of research and documentation work that explored different ways in which positive aspects of culture have been used by civil society organisations and other institutions to address development challenges posed by HIV/AIDS in Uganda.

Given the positive response to this research, it was felt useful to ensure that relevant civil society organisations and other actors have access to this documentation and an opportunity to reflect on its implications for their practice. The event was therefore meant:

⇒ To generate debate amongst development practitioners within and outside Uganda on the significance of culture in relation to HIV/AIDS challenges.
⇒ To stimulate civil society organisations and other actors engaged in the fight against HIV/AIDS to reflect on their practice, taking cultural resources into account
⇒ To contribute to reviewing existing or new policies of the institutions and organisations present to incorporate culture in their practice.

The meeting was well attended with a total of 44 people from civil society, government and multi-lateral institutions. A number of presentations were made and discussed in the course of the day. Organisations represented included the Ministry of Health, TASO, ACORD, WHO, DCA, Uganda Red Cross, NGEN+, Plan Uganda, TPO and representatives from the media, to mention a few.
Vision TERUDO, PROMETRA and RACA and others were also present to give an overview of their cultural approach in their locations. The meeting was moderated by Arthur Larok, from the National NGO Forum.

2. HIV/AIDS and the positive aspects of culture: current situation

The day opened with film clips presenting 6 case studies that focused on culture, HIV/AIDS and sustainable development in Uganda. These were:

1. Returning to the fireplace through music and drama (Addressing HIV/AIDS: the experience of the Nebbi Cultural Troupe)
2. The solution is close to us! (Working with ‘Ssengas’ and ‘Kojjas’ to fight HIV/AIDS in Rakai (RACA’s experience)
3. Changing perceptions and cultural practices that contribute to the spread of HIV/AIDS (Kumi Local Government working with clan leaders)
4. Using a cultural approach to protect children and widows’ property rights in Teso (Vision TERUDO’s experience)
5. Our traditional foods: helping to confront the HIV/AIDS crisis (The experience of Plants and Health Project, Apac)
6. Peer learning for traditional health practitioners to combat HIV/AIDS (The experience of PROMETRA-Uganda)

Thereafter, Major R. Ruranga, from the National Guidance and Empowerment Network of people living with HIV/AIDS, made a keynote presentation that highlighted how cultural resources (in this case a strong and dedicated family environment) was determinant in helping him to live in togetherness with an HIV positive status for more than a quarter century (See appendix for all presentations). He defined culture as being about knowledge and looking for solutions collectively, and decried the ineffectiveness of current non-cultural approaches to the HIV crisis (e.g. bill-boards messages, recourse to inexperienced counsellors, other media campaigns.) The family, he argued, should also be strengthened to support one another in times of need. He suggested that future endeavours should include a revival of the ‘ubuntu’ (community) concept, a return to local languages and meanings and better usage of educational opportunities and institutions, as well as clan structures and village community centres as cultural avenues of communication.

This was followed by a presentation by John De Coninck from CCFU, who outlined the outcomes and some of the analysis of the case studies presented earlier:

⇒ In Uganda, culture has for long been considered as music, dance and drama or as a past that is of limited relevance to our current concerns. Frequently adopted Western norms of ‘modernisation’ rarely take into account indigenous knowledge and worldviews.
⇒ Culture is especially considered part of the problem (rather than part of the solution) in relation to HIV/AIDS. There have thus been numerous development interventions in the area of HIV/AIDS but rarely do these adopt a ‘culturally aware attitude’ or harness culture as a means to make these initiatives sustainable.
⇒ To the contrary, the six cases highlighted how local organisations had used cultural resources: the Nebbi Cultural Troupe and its recourse to long standing positive local cultural values in its communications work; the Rakai Counsellors’ Association and its expanded ‘use’ of ssengas and kojas, a widespread cultural resource in many parts of the country, as are clan leaders illustrated by the Vision Terudo experience; the systematic complementary cultural approach adopted by PROMETRA in its training cycle; and the ‘re-invention’ of the practice of widow-inheritance by the Kumi local government to avoid its harmful effects but keep its positive aspects.
⇒ The emerging lessons from the research work included the following:

1. Culture offers a range of opportunities, rather than solely a constraint, in the fight against HIV/AIDS in Uganda.
2. Cultural resources can be used to good effect in aspects of HIV/AIDS management and prevention, as they emphasize values and frames of reference that resonate with the population and are therefore accessible and sustainable.

3. A cultural approach to HIV/AIDS requires questioning of current approaches and a deliberate attempt to relate to the cultural context through research and learning.

4. This cultural context should be considered as both source of knowledge and holistic tool, beyond a mere communication vehicle as is often the case with global discourses and scientific models that inform development programmes.

These presentations led to a number of reactions, including the need to see culture as dynamic (rather than fossilised in the past), and the need to incorporate a cultural dimension in our programmes as most organisations represented felt they were not doing so (or not sufficiently so). This was recognised to be much more than MDD, which is too often heavily commercialised. It was also acknowledged that most studies focus on the negative aspects of culture – there is a need for balance. The PROMETRA experience attracted questions on referrals, human sacrifices (where traditional healers were defined as an ‘escape route’); the fact that PROMETRA trainees are taught to encourage testing and the use of ART. A similar study to those presented by CCFU was suggested in relation to the urban environment.

3. Taking the agenda forward: presentations

These discussions were followed by eight presentations on the current use of cultural assets in the fight against HIV/AIDS:

1. CIPA (Community Initiative for Poverty Action) in Rakai outlined how they had incorporated culture in their work (age and gender groups; cultural leaders as mobilisers and role models to increase community ownership of interventions; ssengas as educators).

2. SAN (Stop Aids Now) presented the workplace project, which is to build organisational responses to HIV and AIDS through the formulation and implementation of HIV and AIDS workplace policies and which involves 68 NGOs. Four years into implementing this project, it is observed that one of the most significant determinants of the level and nature of response is the organization's norms, values, and practices (its ‘culture’). The presenter contrasted two types of organisations, one with an open, ‘warm’ culture, the other more hierarchical and closed. In the former, practices included ‘in house ssengas; family VCT events; HIV learning events. The ‘opening up’ of organisational culture was therefore concluded to be necessary to tackle HIV/AIDS.

3. RACA, the Rakai Aids Counsellors’ Association, presented on the use of resourceful cultural resource persons in the community on their HIV/AIDS related interventions. This includes Ssengas and Kojjas among others (TBAs, traditional healers, herbalists, etc), who are trained by the organisation. They present the advantages of being volunteers, being accessible; their services are
demand driven and confidential and represent aspects of indigenous knowledge that echo in the
local environment. However, the numbers of trained Kojjas and Ssengas are limited compared to
the need and their services are challenged by some youth and ‘educated’ people. They also receive
limited facilitation from the project to move to schools and self-mobilized groups. RACA
therefore plans to train more ssengas and kojjas and to help them formulate a strong referral
mechanism towards other service providers.

4. Dr Akol, in charge of the HIV programme at the Ministry of Health, observed that the current
response appears no longer effective, with complacency setting in despite the ABC strategy and the
mass communication campaigns. Research had shown these campaigns only account for 30% 
behaviour change, with the remaining 70% largely depending on a one-on-one interaction. She
argued that there is therefore a need to re-think the response. This should be adapted to different
age groups, emphasise Western science less, and more local resources, including cultural resources.
Culture is therefore the fall-back approach; understanding why people do the things they do is the
first step to solving the problem. She suggested adopting the 6D approach and creating a ‘culture
desk’ at the Ministry.

5. TASO highlighted their activities: helping orphans of HIV/AIDS, counselling and testing. They
claimed that they have been using the cultural approach without saying so, particularly with sengas
and kojjas.

6. From Tanzania, a presentation was made by the Kagera Zone AIDS Control Programme. A
cultural aspect of their work concerned community mobilisation to build houses for child-headed
families.

7. RACOBIO, the Rakai community based AIDS Organisation introduced their current research
work, which centres not only on dealing with the cultural challenges they experience in their
programme in pastoralist communities in Lyantonde district, but also in looking at the possible
cultural resources that could be harnessed to fight the HIV incidence and its consequences, such as
using traditional Kinyankole story telling and poetry to the “Ekitaramo” and “Ekigaaniro” where
elders meet to discuss issues that affect their clans or community.

4. Taking the agenda forward: reflections and action points

In addition to comments and questions on the presentations, participants were asked to reflect on the
cultural resources that exist in their operating environment and how they could make use (or better
use) of them. This generated a wide range of different ideas that might inspire the readers. A few
examples:

A. A new perception of culture and of a ‘cultural approach’

Many participants felt that the debates had triggered “a new way to look at culture”, as a positive resource
and as “a good weapon in the fight against HIV/AIDS”, one reason being that culture is a key component
in HIV/AIDS prevention since it is part of “the fibre that weaves society together”. It was therefore
suggested that there was a need to emphasise the positive aspects of our culture in our work on HIV-
related issues – much more than the negative ones.

Many participants therefore felt that partners who have not yet harnessed cultural aspects in their
programming need to review their approach and get a way forward. A “cultural approach” has many
advantages, it was pointed out: it is cheap as well as effective, and sustainable – whether there is donor
funding or not. Such a cultural approach, further, should not be ad hoc but, as pointed out by TASO,
incorporated consciously, including in the strategic plan at national level. It was also suggested that
Parliament should be involved in moving this agenda forward.

However questions were also asked. The RACA and PROMETRA case studies were found especially
interesting; points were raised about the possibility of “scaling up” their interventions; about the
combination of knowledge systems and which standards would be used.
While one should not be romantic, but realistic, about the use of cultural resources, it was also recognised that the present generation is often alienated from its culture, partly because of poverty and partly because of western modernisation. Children are especially at risk because they are building their own culture depending on their living conditions, for instance in the slums, in urban areas generally, in the barracks, through the media, and when their families are mobile. Culture was thus seen as dynamic and varied and that it was sometimes difficult to draw the line between “bad” and “good” cultural practices? We therefore need to approach the custodians of culture, while keeping in mind, as argued by PROMETRA, that culture and cultural institutions need to be protected to avoid any adulteration of their positive efforts.

B. Cultural resources are present and diverse
There was a widespread recognition that cultural resources are numerous and can be “tapped” and that, in particular, we should encourage communities to critically identify and promote good cultural practices in their midst. There was a call for the MOH to research and incorporate cultural resources in the next strategic plan on HIV/AIDS.

The most frequently cited resources were cultural resource persons (clan leaders, abaami ba kabaka, religious leaders, ssengas, kojjas, culture leaders) that could be lobbied as allies and involved in our interventions, for mass mobilisation and education, or for effective communication work, for instance (CIPA, TAAPA, UNERELA, TASO, Vision Terudo). CHAIN-Uganda for instance stated that abantogole will be incorporated in their programme so that they convene meetings and introduce new interventions to their communities. In particular, there were several mentions of the need to involve cultural leaders in the fight against HIV/AIDS much more than is currently the case, even to involve cultural institutions to fight poverty as a root cause of AIDS (RACA) and to bring them together to be more effective. The family was also seen as key in this respect. Several examples were given: kojjas and ssengas could help to cause the behaviour change among orphans (RACA); local support groups e.g. burial groups and cultural initiation sites could be used (Vision Terudo). Joint workshops at sub-county level for all cultural resource persons were suggested, including political leaders and family heads.

It was therefore felt that ALL stakeholders, including, for example, traditional healers must be incorporated in HIV work/policies, especially those on whom there has been little focus on so far. Similarly, there was a call for involving the Ministry of Education and teachers, including faith-based teachers, to promote this approach (NGEN+) – in terms of the curriculum and teacher training.

Another frequently mentioned cultural resource was knowledge, both in terms of retention and creation. There were suggestions, for instance, that ‘grannies’, abatongole, herbalists and other cultural resources persons held precious knowledge that should be documented for future generations. It was suggested that the Ministry of Health should re-think the ban on TBAs and include culture as key in preventive measures in the health policy as this needs to be strengthened at all levels of the health delivery system. TASO suggested that it should put more emphasis on MDD and alternative medicine.
Further research was also suggested, on HIV (in general) and its link to culture in particular and on “appropriate knowledge of what actually works, as we look for solutions together” (PROMETRA); and by CCFU in other parts of the country (and in Tanzania).

This knowledge also needs to be transmitted. This could take several forms: thus, herbalists should train their children so that indigenous knowledge survives and PROMETRA could develop a curriculum for traditional healers in handling HIV/AIDS; education institutions and centres of worship could also pass messages about the positive role of culture (CIPAR, TAAPA, UNERELA); IEC materials could be produced on medicinal plants in relation to HIV/AIDS. Resource centres could also be used as custodians and repositories of knowledge (including the NGEN+ one) and a representative from Kyambogo University suggested that a section on culture be established in the university library or the language resource centre. Further use of the case studies presented here to inform our respective organisations more widely was also stressed (RACA).

A third type of cultural resource mentioned were values, – including the right to freedom of belief – and these could also provide useful resources in the fight against HIV/AIDS (CIPAR). ‘Grannies’, it was stated, need to tell their grandchildren about their roots, their ancestors and their values. The Uganda Red Cross participant suggested the use values such as dressing code, norms of good behaviour; use of memory books and tracing of cultural ancestry. A representative from the Buganda Kingdom proposed to turn the PROMETRA training centre and the Mawokota Heritage Centre of Civilisation into a hospital of cultural and traditional medicine.

C. Expanding linkages
Several participants felt that there was a need to develop and act upon an advocacy agenda in relation to HIV and culture. A number of recommendations included a role in this for CCFU and other like-minded organisations (NGEN+, Global Coalition of Women against AIDS in Uganda). It was suggested that CCFU should carry efforts to institutions of higher learning and that it needs to work “inside” the Ministries of Health and Gender. CCFU was also asked to organise longer workshop and develop with participants detailed modalities of a cultural approach with regard to HIV/AIDS projects.

5. Conclusions
In conclusion, participants declared that we should not shun our culture: “we need to de-stigmatise culture, and use it in the fight against HIV”. Cultural resources present an “immense opportunity” a message to which Government and NGOs should listen. This would help to de-commercialise the “HIV industry” and to move culture much higher on the national HIV/AIDS agenda, a responsibility for all of us, not just government or policy makers.