



## **CIKOD/COMPAS POLICY BRIEF**

### **THE ROLE OF INDIGENOUS INSTITUTIONS IN HIV/AIDS PREVENTION, STIGMA AND CARE IN GHANA**

**APRIL 2011**

## 1.0 INTRODUCTION

### 1.1 Background

Public health efforts aimed at improving awareness on HIV/AIDS and transforming societal attitudes and sexual behaviour need to be based on a better understanding of the interaction between culture and HIV/AIDS. Cultural norms and practices shape attitudes and health-seeking behaviour of individuals and communities, influencing attitudes towards sexuality and relationships. Recent research has shown a rising complacency towards ABC strategies and mass communication HIV/AIDS campaigns (Uganda, p.6). In Uganda, only 30% of behaviour change is attributed to these high-funded campaigns, whereas 70% of changes are dependent on one-on-one interactions. The Ghana Aids Commission (GAC) themselves have highlighted this situation *'In the general population, though awareness of HIV is almost universal (98%), this has not translated into comprehensive knowledge and safe sexual behaviour. During this reporting period, there has been little change in the overall comprehensive knowledge of HIV.'*(Ghana's Progress Report On The United Nations General Assembly Special Session (Ungass) Declaration Of Commitment On HIV and AIDS; March 2010; page 11). Given that sexual behaviors and sexuality are both deeply embedded within social accepted behavior, preventative initiatives must be designed in terms of local culture, using the community's cultural references as a framework for the design and implementation of policies and programs.

Endogenous Development is a community development approach that empowers and builds on the existing indigenous institutions and resource base of communities including their natural, social and spiritual resources. We propose that Ghana GAC (Ghana Aids Commission) and the future National Strategic Framework on HIV/AIDS seek a vision of HIV/AIDS prevention, one rooted in Endogenous Development philosophy, which could serve as a foundation for ongoing and future programs in Ghana. These programs should have less emphasis on western science more on local resources including cultural resources. Disease prevention should happen through participatory traditional strategies, using local knowledge systems and teachings, ultimately incorporating spiritual, social and material perspectives. By building capacity of traditional community networks and cultural resources, Ghana HIV/AIDS policy would seek to improve the health and well-being of marginalized populations, particularly those people living with HIV/AIDS. Furthermore, an Endogenous Development approach built on existing traditional community networks, would foster community ownership over programs and in turn, result in greater efficacy and sustainability.

## 1.2 Summary

- Based on experience to date, Information campaigns are expensive to run and on their own do not ensure long term attitudinal change to PLWHIV. Information sharing at community level through traditional institutions is essential if strategies for prevention, care and stigma are to be developed within communities.
- Use of traditional platforms and cultural practices for dissemination of information and development of prevention strategies has proved to be effective in intergenerational learning and targeting not only all members of the community but also visitors from other villages and urban areas. Treatment, care and support are the largest revenue outputs so development and use of innovative and tested approach to prevention, such as outlined in this document, is paramount.
- Interventions engaging communities through traditional institutions demand techniques and approaches that are empowering and defined by traditional formalities and local knowledge if they are to be effective. CIKOD with support from COMPAS have developed a proven and tested methodology for such interventions in HIV/AIDS that have demonstrated to be powerful in addressing prevention, care and stigma. For HIV/AIDS policies to be effective, communities need to have ownership of the processes in order to participate fully and genuinely and such processes are implicit within the endogenous development approach to community development.
- Investing in the engagement of traditional institutions and TAs in HIV/AIDS through the COD Endogenous Development approach ensures sustainability beyond the initial training and financial input. This approach is cost effective as community ownership is embedded, local resources identified and used to address issues and capacity is strengthened to access external reserves.

## 2.0 POLICY GAPS AND ISSUES

The key policies that govern the response to HIV/AIDS in Ghana are:

- National HIV and AIDS Strategic Framework 2006-2010 (NSF II)
- Ghana's National HIV/AIDS/STI Policy

Information campaigns are the mainstay of the majority of policies in prevention awareness and have been inherent in policy implementation in Ghana since the first National Strategic Framework in 2001. However the Ghana National Strategic Framework 11 progress report makes reference to two reviews undertaken to determine the progress towards 2010 indicators and inform programmatic decisions. These reports highlight that *'Four indicators are lagging behind and are not on track to being achieved at the level of implementation. These were indicators on the comprehensive knowledge of HIV and AIDS, PMTCT, ART treatment for adult and children and HIV prevalence among 15 – 24 age groups. (Ghana's Progress Report On The United Nations General Assembly*

*Special Session (Ungass) Declaration Of Commitment On HIV and AIDS; March 2010; page 31 ).*

Research has proven that whereas clear, correct information is vital, changing of attitudes is very difficult but yet fundamental for addressing prevention, care issues and combating stigma and discrimination. There is a strong acknowledgement by the GAC and evidenced in the NSF II that involvement of communities in the design and implementation of programmes is essential for effective HIV/AIDS control and care. But this has not translated into long lasting attitudinal changes within communities which is imperative for effective policy implementation. As expressed by Prof. S.S. Amoah, Director-General, Ghana Aids Commission in 2006, *'...HIV/AIDS related stigmatisation and discrimination make prevention difficult as it forces the infected persons to go underground.....there is a need for collaborative actions and sound policies to guide our national response in the fight against the pandemic'* Quoting a UNAIDS study, the Director-General pointed out that the stigmatisation and discrimination against people living with HIV/AIDS is the most critical barrier to their involvement in prevention, care and treatment actions.

CIKOD wants to outline a number of issues for consideration in order to support addressing these policy gaps and challenges. At a CIKOD workshop on the role of traditional authorities in development, participants highlighted that Traditional Authorities are closest to the majority of Ghanaians; are available 24 hours to local communities; are more efficient in the use of resources to address community issues; have a better understanding of what goes on in their communities and are able to take rapid action to address community problems, and are better at mobilizing local people for action.

In Ghana, despite the existence of a modern political organizational system, the majority of the people, specifically in the rural areas, are still organized around their indigenous institutions for carrying out the activities that are important for their development and well being. Civil society at the rural level is visible in the form of indigenous organizations such as *Nnobo* groups, *asafo* groups, *susu* groups, clan networks, hometown association structures through which poor rural families organize their social, economic and political lives.

The influence of traditional institutions applies to a rural population who are living and working in urban areas as well as the rural population. People constantly return to their village for a range of occasions such as funerals, chief inaugurations and festivals. Using these occasions as opportunities for information sharing and developing strategies to address HIV/AIDS prevention, stigma and care issues reaches an audience far beyond the boundaries of the village.

An approach and strategy that includes genuinely engaging traditional healers, queens, women's leaders and chiefs is tantamount to ensuring dissemination of information and changing attitudes to HIV/AIDS prevention and care

programmes. Use of traditional resource persons (clan leaders, elders, traditional authorities, Traditional Birth Attendants(TBAs) herbalists) is essential, as they have the advantage of being accessible and with support and training, have the potential to help in the formulation of a strong referral mechanism to other service providers, and have the potential to be allies in all interventions for mass mobilization and education. As an example, it is known that women between the ages of 25-45 continue to be the most vulnerable of the epidemic and therefore it is vital to involve queens and women community leaders specifically in any campaign or intervention developed targeting this group. CIKOD want to propose that as evidenced by field work in 36 communities in 3 regions that the use of a methodology underpinned by an endogenous development approach has proven effective in addressing HIV/AIDS prevention, care and stigma and as such requires serious consideration by GAC, Ministry of Health and relevant stakeholders.

### **3.0 PRACTICE FINDINGS FROM THE FIELD IN GHANA-‘Traditional Authorities & Positive People Preventing HIV/AIDS Programme’.**

From June 2008 to December 2010, CIKOD partnered with CARE GOG and the Network of Persons living with HIV/AIDS (NAP+) to implement a HIV/AIDS project in 6 districts, comprising 36 communities, in Brong Ahafo, Ashanti and Westerns regions. The objectives intended to develop an environment with reduced level of stigma towards people with HIV/AIDS so that communities, especially traditional institutions, in partnership with other stakeholders who have experiences in HIV/AIDS could engage in activities addressing issues of care, prevention and stigma.

CIKOD’s Community Organizational Development (COD) methodology informed by an Endogenous Development approach was used to implement the intervention. This is a culturally sensitive approach that works through Traditional Authorities as an initial starting point and entry to working with communities and their traditional institutions. The COD Endogenous Development approach comprises a systematic set of tools that starts from an initial engagement with the traditional authority and then takes local traditional institutions through a process to train and support them to map community institutions and resources; develop a vision and action plan based on this information; identify and support capacity building of local institutions, use traditional platforms for community dialogue with power bearers and share/exchange learning with other communities.

The difference between these tools and their conventional counterparts is the fact that they are premised on working with and through the traditional authorities, indigenous institutions and their organizational practices and resources. This enhances ownership and inclusion of the whole community in the development

process ensuring sustainability of the intervention and strengthening of institutions to address issues of HIV/AIDS prevention, care and stigma.

Within this project, training in HIV/AIDS basic facts for community leaders and institutions on a single platform has demonstrated to be a powerful tool in breaking the culture of silence on sex and HIV/AIDS in the community. The strategy has increased and broadened the knowledge base of these institutions and empowered them to reach out to people in their sections. The coordination among community institutions has facilitated the development of a common agenda and equal space for reaching out to people. This approach has also supported dialogue and engagement with duty bearers about issues regarding testing and video education (ISD).

Chiefs and queens in two of the project communities revitalised the use of traditional community by-laws to address issues of stigma and prevention in HIV/AIDS within their communities. One of the by-laws initiated a penalty against people who stigmatised PLWHAs and the other put in place a by-law to counteract unsafe sexual practices by young people within the community.

Through this intervention process the community identified that they have available channels and cultural platforms for organising activities and with the support of training in capacity building and resources, the desired results were achieved. It is therefore important to work within the space and available resources of the community before bringing in external support. The use of indigenous platforms such as festivals, community forums, durbars, puberty rites, naming ceremonies, marriage and wife selection, for HIV/AIDS initiatives has enabled the smooth integration of HIV/AIDS education into community activities.

The COD Endogenous Development approach provides a well tested methodology for these activities to occur effectively.

**Achievements and Successes:**

- 90 chiefs and queens from the three regions have been trained in basic facts on HIV/AIDS.
- 30 Community Institutional and Resource Mapping Teams formed from community members who carried out community mapping exercises to assess the resources available in the community to address the issues of HIV/AIDS prevention, stigma and care.
- Facilitated institutional strengthening and dialogue between district assembly and communities
- 16 PREVENT queens and NAP+ members participated in a learning and sharing visit to Manya Krobo.
- 32 communities carried out 'Know your Status' activity at least once in the year.
- A party for 50 PLWHAS in Hansua community in Brong Ahafo organised by Hansua Queen mother and community attitudes challenged is a positive way as a result.

- Documentation of community activities through video, photographs and examples of best practice.

#### **4.0 RECOMMENDATIONS AND POLICY IMPLICATIONS**

- Ghana Aids Commission and any future National Strategy Framework on HIV/AIDS should incorporate the engagement of traditional institutions through an Endogenous Development approach in implementing policy responses to HIV/AIDS prevention and care strategies. Within this approach, the use of TA institution and platforms as places for raising awareness and developing relevant strategies is critical. COD Endogenous Development approach as an effective strategy in HIV/AIDS prevention is based on successful results highlighted through the ‘Traditional Authorities & positive people preventing HIV/AIDS programme’.
- All actors engaged in addressing HIV/AIDS issues within Ghana need to acknowledge, value, understand community worldviews and local knowledge if communities are to be fully engaged in effective and sustainable HIV/AIDS policies and campaigns. This will entail Traditional Authorities, Ghana AIDS commission and Ghana Health Service developing culturally sensitive approaches to health care delivery within communities.
- Ghana AIDS Commission and National AIDS Control Programme should support the training and education of indigenous healers to develop appropriate and acceptable mechanisms for HIV treatment and management.
- Civil Society Organisations and NGOs should ensure that campaigns to combat stigma and discrimination against persons who are HIV positive are implemented in collaboration with Traditional Authorities.
- Ghana AIDS Commission and National AIDS Control Programme should support Traditional Councils with a common fund to address HIV activities in their respective communities which can be monitored by the District Assemblies or Health Directorate.
- Department of Local Government should ratify and incorporate into the District Assemblies, bye-laws set by Traditional Councils/leaders that protect persons living with HIV/AIDS from stigma and discrimination.
- Ghana AIDS Commission, the National AIDS Control Programme and Ghana education Service should set up culture and language appropriate HIV prevention programme and provide adequate HIV/AIDS information to traditional leaders and councils to facilitate such programmes in communities.