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Editor:



Peter Labouchere
Health & Wellness Training
Consultant
Address: Box 131, Victoria
Falls, Zimbabwe
Tel/Fax: +263 13 43254
Cell: +263 11 209922
E-mail: peterl@mweb.co.zw

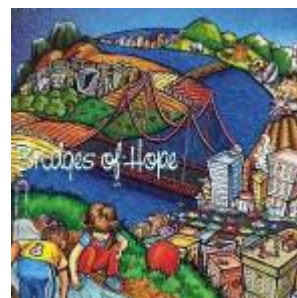
Website:

www.bridgesofhope.info



Editorial

Focusing on Prevention of Parent to Child Transmission of HIV



Happy New Year!

Welcome to this, the third *Bridges of Hope Newsletter* exclusively for **Standard Bank and Stanbic Bank Wellness Champions**, to share experiences and update you on new developments and additional *Bridges of Hope* training materials.

As well as including a variety of feedback from different countries, this issue focuses on an area that has up to now been addressed only lightly in the *Bridges of Hope* package: that of mother-to-child transmission (MTCT) of HIV and how to prevent it. I prefer to call it PPTCT (Prevention of Parent to Child Transmission), to emphasize that the husband / partner / father of the child can play a vital role in helping to minimize the risk of HIV transmission to his child. Appendix 2, Key Information 3 in your *Bridges of Hope Users Guide* includes some brief notes on Preventing Parent to Child Transmission.

It still amazes me that the

majority of babies born to women who are living with HIV prove to be free of HIV themselves, even without any treatment. And the risk of HIV transmission to your baby can be further dramatically reduced by appropriate treatment and preventative measures.

Having children and seeing them grow up strong and healthy features for most of us on our "Future Islands." It certainly does for my wife and I, with our 18 month old daughter (below) and hopefully one or two more to come!



If you are living with HIV, having a healthy child (or more children)

can definitely remain part of your Future Island, though there are a variety of issues you should first consider seriously.

Attached as a separate document are two new *Bridges of Hope Activities* designed to address these issues, and to clarify how to minimize the risk of HIV transmission to your baby.

Please try them out at the next appropriate opportunity and let me have some feedback on how they work, the reactions you get and any suggestions for how they can be improved.

If you did not receive this directly and would like to [subscribe](#) to receive future *Bridges of Hope Newsletters*, send an e-mail to peterl@mweb.co.zw with "subscribe BoH Newsletter" in the subject line.

To unsubscribe, e-mail peterl@mweb.co.zw with "unsubscribe BoH Newsletter."

Case Study: *Bridges of Hope* activities get pregnant women to test

Editors Note:

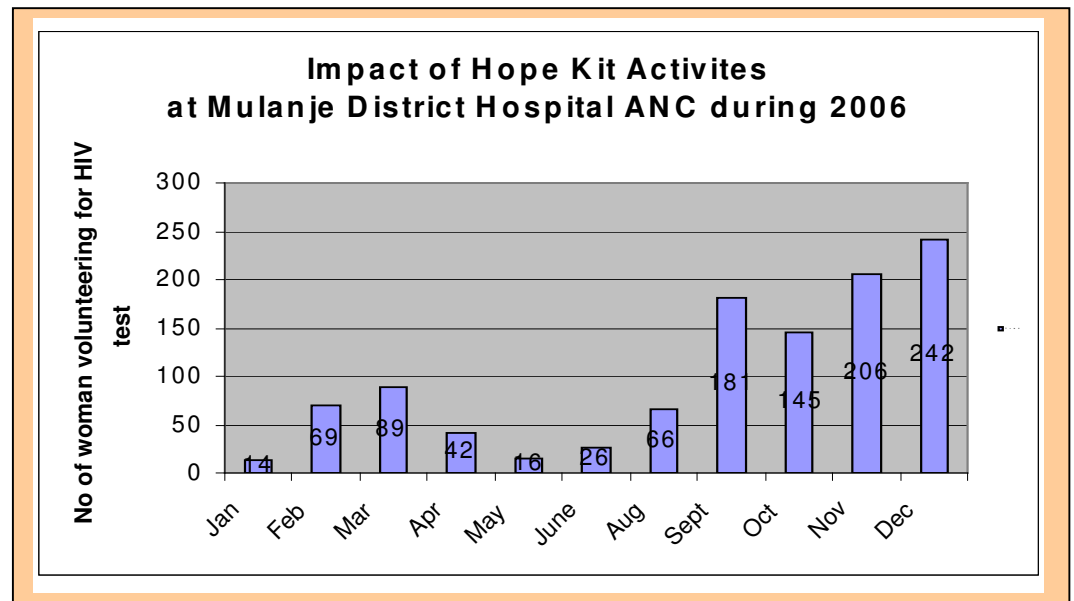
I have had lots of valuable feedback from Wellness Champions (many examples in this and previous Newsletters) describing the *Bridges of Hope* sessions you have facilitated and feedback you have had. This has provided mainly descriptive or qualitative evidence of the impact you are having.

I have included this case study because it also offers quantitative data which clearly shows in numerical terms the actual impact on behaviour that you can have using *Bridges of Hope*.

This case study also shows how you can adapt the *Future Island* activity for specific situations, and how you might use it conjunction with the two new activities provided with this newsletter, to introduce issues of preventing parent to child transmission of HIV.

A range of *Bridges of Hope* Activities were adapted and incorporated into a package called the “Hope Kit” for a programme with Malawi BRIDGE Project (part of Johns Hopkins Bloomberg School of Public Health Center for Communication Programs). Thirty Master Trainers were trained to use and train others to make most effective use of this package.

In early February 2006, one of the people trained by the Master Trainers to use the activities was Ufulu Zuze, a young counselor working at Mulanje District Hospital antenatal clinic (ANC) in Malawi. When Ufulu started using Hope Kit activities at the ANC, the number of pregnant women getting tested for HIV increased tremendously from 14 in January to 89 in March, as shown by this graph.



When Ufulu was posted in April to another clinic in an outlying district, no Hope Kit activities were done, and the numbers dropped again. In August 2006, three other counselors working at the Mulanje District Hospital ANC were trained to use the Hope Kit activities. With the re-introduction of Hope Kit activities, the number getting tested for HIV increased to 181 in September 2006, and after a slight dip in October thereafter continued an upward trend to consistently over 200 each month.

In follow up review discussions with Ufulu and others at the hospital, we asked them what specifically made such a difference.

They consistently reported that the key activity was *Future Islands*, adapted for the situation of pregnant women. Instead of just telling the women that they ought to have a HIV test, they started by using (in your *Bridges of Hope Users Guide*) Activity 3: *Future Islands*, with Step 3 modified as follows:

Instruct participants to:

Imagine a point in the future when your next (or your first) baby is about 1 year old and healthy and happy.

Imagine picking your baby up and holding your baby in your arms.

How do you feel? Stand up and imagine that you get are holding your healthy 1-year old baby. Get into pairs. Show the other person your baby and explain to the other person how you feel being the proud parent of (another) baby.

Having vividly imagined and described the ‘future island’ they wanted with a healthy baby, when the issue of testing for HIV was introduced as an important step towards realizing this vision, all participants agreed readily to get tested.

Experiences with *Bridges of Hope*: Feedback from Champions

Wellness Champions from all countries have provided a mass of valuable feedback comments, observations and descriptions of experiences using *Bridges of Hope*, including both successes and challenges. Some extracts from feedback received during the last 4 months is included below.

KAWA CHIRWA CHIRAMBO, Zambia:

My most successful session was with my colleagues at Operations Centre (OPC) in Industrial area. We (Bwalya Nkweto and I) held a total of three sessions with this group. The turnout was good and the enthusiasm was high. From my experience people come to the BOH sessions expecting to be presented the same information they have heard over and over again. By the time they leave however, they are yearning for more. The way the information is presented (fun and games) has a greater impact and is what tends to make people have an open mind. This photo shows us facilitating the Activity *My Supporters*.



SEGUYA ERIC, Uganda:

At my session with a group of mainly housewives in a suburb in Kampala, while using the activity walking the bridges, they were so excited. And when I introduced the activity 'Can you tell who is living with HIV?' they were very alarmed when I told them that all the people shown in the photographs were living with HIV. They all understood the reason why it was important to go and have their blood tested. They even wanted me to have their blood tested as they thought I had testing kits.



NASSOZI FARIDAH, Uganda:

Bridges of Hope helped me address my siblings, who are at a very risky stage in their life, but I had always found it hard talking to them about issues concerning HIV/AIDS and they never used to take me seriously whenever I tried. After talking to other people I asked myself why it was so hard talking to my own and I managed to have a very successful session with them. They also opened up more and asked me questions they had been afraid to ask before.

KIBIRIGE SYLVIA, Uganda:

The most successful session was with my family members as we started it as fun trying to walk the bridges then later learnt the reality of the bridges – it was almost impossible to complete without applying the helper bridge (the condom.)

KAY MBWAMBO, Tanzania:

On Sunday 14/10/2007 I received a visitor who was one of the participants from the group we presented to on 9/10/2007 and she thanked us for conducting the session. Her 5 year old and the 3 year old died last year, within a week and the husband also died within the same month. Now she is left with her 9-year-old son only. She said that her neighbor's attitudes had changed since attending our *Bridges of Hope* session - they were not shying away as they used to do before the session, and they now allowed their kids to play with her son. She is now determined to live and take care of her son (who is not infected), she has promised to find a job, and stop staying home and brooding. I am very happy to have made a change in someone's life! I thank God for giving me that opportunity!

Feedback from Champions: Challenges and Responses

DENIS OTIM, Uganda:

After the training workshop in Kampala, the first challenge was experienced with my immediate colleagues at my work place (Stanbic Bank Lira). My colleagues first refused to attend, saying that they are too committed while others said they have already heard enough about HIV/AIDS. Others went ahead and told me to walk my bridges alone!!!!

I must admit that despite all this, I was ready and determined to deliver a message to my first audience. I sent a message inviting all staff to attend a workshop reading:

BRIDGES OF HOPE WORKSHOP FOR ALL STAFF

Good day members

This notice serves to remind all members that the long awaited *Bridges of Hope* workshop is alive this evening at 6:00pm. Be ready to have fun and participate in the various activities that will change your life completely.

Remember we have two types of people, “those living with HIV/AIDS and those who have parents, brothers, sisters and friends living with HIV/AIDS.” Where do you belong? Come and make a difference in your life and those you love today.

Yours truly, Wellness Champion

Denis

The carefully selected words used in the invitation and practical application of **YES I CAN** helped me overcome this challenge as every body was already seated in a well organized circular seating arrangement at exactly 6:05pm that evening.

The second challenge I experience again was to fix an appointment with another group of colleagues in a competing banking institution, DFCU BANK. The fact that Stanbic Bank and DFCU Bank are two different and competing Banks in Uganda today almost made it seem impossible to make DFCU staff part of my wellness cause. Thanks to Bridges of hope activities such as the *Identity Statement* – Who am I? and *My Future Island* that made me overcome this challenge.

Identity statement – who am I? Gave me self confidence to approach the manager DFCU Bank as I identified my self not only as a Stanbic Bank staff

but also as a “*Determined and Focused Bridges of Hope Wellness Champion with a Vision to help people make positive life choices*”.

My future Island of being able to reach out and sensitize all members of the community in the next 3 – 5 years irrespective of their sex, race or industry was enough to earn me an appointment on Friday 5th October 2007 6:30pm with DFCU Bank staff.

One thing that I learnt especially during this time is that as Wellness Champions, we should be there for the entire community because HIV/AIDS has no boundary.

Editor’s Comment: Denis Otim’s report (above) offers great examples of:

- How to advertise a *Bridges of Hope* session
- How applying activities like Future Island and Identity Statements *to your own life* can actually help you achieve more with *Bridges of Hope* (and in your life in general.)

MWABA KAUNDA, Zambia:

In my choice of activities, I seemed to focus on very few which I repeatedly used, meaning I have become very good at specific ones. I have to spread my focus and aim at trying to use more of them.

Editor’s Comment: Thanks for acknowledging that Mwaba. I would encourage all to expand the range of activities you use, incorporating the two new ones attached with this newsletter as well as others you have not used much yet.

EVA KARUHANGA, Tanzania:

Forum theatre raised many concerns. Women were concerned at how their husbands react to the idea of Testing for HIV/STDs Some even confessed that they fear for family breaking. They end up exposing themselves to risk. I encouraged men around to talk about it in defence and we came up with the conclusion that the way it comes out (breaking the news) matters a lot.

Editor’s Comment: Forum Theatre is a great choice of technique to get your participants to think through, try out and practice different ways to “break the news”, so they develop skills and strategies that will work for them.

Feedback and Photos from Champions

KAY MBWAMBO, Tanzania:

When we were presenting and giving the demonstration on the use of condoms, there were so many challenges as some people believe that if they use a condom their partners will think that they are not faithful and it can break the relationship, some said that it reduces the pleasure, others said their faith/religion does not allow them to use condoms. We used the condom wall/ abstinence wall/ faithfulness wall activity to defend our points, but it was really challenging and we had a tough time to convince them on the need of using a condom when having sex with a partner who has not tested.

Editor's comment: A very appropriate use of the Condom Wall Activity. However, when you use this activity, make sure that you take on the objections to condom use voiced by your participants (e.g. my faith/religion does not allow condom use / nyama ku nyama is more pleasurable) so that, instead of you defending your points, you get your participants to think through and come up themselves with convincing arguments in favour of condom use, which address their own objections. (The facilitation notes in your *Bridges of Hope Users Guide* explain how to do this.)



Pamela Opoka Stanbic Uganda Wellness Champion) demonstrates correct condom use to employees of SAFI (the cleaning company that the bank employs at Head Office) and SCS (another cleaning company employed on the same building) and Blue Hackle (some of the Security Guards)



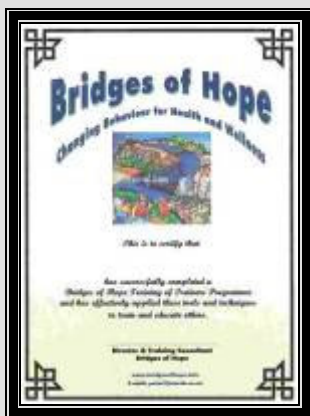
Tanzania Wellness Champions Janet Kheri and Kay Mbwambo facilitating a session with Main Branch staff



Standard Bank South Africa Wellness Champions using *Bridges of Hope* during a Wellness Day at Head Office.

CONGRATULATIONS

to all *Bridges of Hope* certified Wellness Champions listed here, in particular **those (indicated in red) who have achieved Certification during the last three months (since the last Newsletter.)** If you have not already received your certificate, it will be sent to your HR department next week, for presentation to you at a suitable occasion. Your names will also shortly appear on the *Bridges of Hope* website page: www.bridgesofhope.info/CertifiedBridgesofHopeUsers.htm



CONGRATULATIONS to both MOZAMBIQUE and TANZANIA, where over 90% of trained Wellness Champions are now certified *Bridges of Hope* users.

If you would like an electronic copy of the Bridges of Hope certification process and form to submit, e-mail peterl@mweb.co.zw stating "Request BoH certification form"

Certified Wellness Champions

BOTSWANA

Masego Pheto, Manetso Kope, Pauline Barungwi, Wame Rakwadi, Edwin Ketsitlile, Keene Rabashima, Bawani Mutshewa, Daisy Poleowetse, Kelobogile Lentswe.

Guest participants:
Kabelo Poloko (**BOFWA**)
Itemeleng Bareng (**CEYOHO**)

LESOTHO

Ntsilane Mhlanga, Mahlape Nkunyape, Moneng Mpela, Mpho Nkhabu, Nteboheleng Debesho, Thotoane Tsosane, Puseletso Thakong

Guest participants (**PSI Lesotho**):
Lebuso Mosuone
Lits'oanelo Motsoahae

MALAWI

Douglas Thom, Edith Banda, Fredwick Liwewe, Linley Chikaluma
Benedictus Mpoto, Christina Nkhumba, Elliot Mankhamba, Eston Chamgwera, Humphreys Chiwaula, Maggie Gundo, Mary Fachi, Martha Mphatso Ngwira, Ivy Kwatiwani, Mercy Mwatero, Patrick Mwalilino, Willard Kachikwati, Freda Mughogho, Edith Banda.

MOZAMBIQUE

Isabel Bretes, Jacinta Nkulunguila, Rael Benzane, Isabel Mavie, Abdul Remtula, Américo M. Júnior, Argentina de Castro, Jorge Gonçalves, Flavio Leonel Lopez, Mario Ah-shú, Nelcio Fijamo, Graciete Rois Alfai, Mauro Gouveia, Silvio Khan, Isabel Mavie, Sandra Semente.

Guest participants:
Balbina Santos (**ECOSIDA**)
Mateus Baptista (**Kufunana**)
Inês Brito (**Co-facilitator / Interpreter**)

NAMIBIA

Adele van Biljon, Estelle Botes, Juliana Claassen, Jackie Hoff, Nicolette Muwonge

SOUTH AFRICA

Lyle Borman, Adrienne Bruwer, Monique Carolissen, Toni Coetzee, Wendy Creed, Esmarelda Dreyer, Prudence Gelderbloem, Meer Hendricks, Miranda Hlatana, Daniel Kotton, Ricky Kleinhaus, Tina Levendal, Dikeledi Malema, Gillian Miller, Mario Pepino, Elizabeth Petersen, Liesel Rumble, Shaheda Solomons, Feriaal Warrin, Penelope Winter, Beauty Zondi

SWAZILAND

Duduzile Khoza, Hlengiwe Gumedze, Khontile Dlamini, Lombuso Matsebula, Nomathemba Magagula, Sibongile Ndlovu, Sikanye Zwane, Zizwe Dlamini, Vamsile Mthembu, Thembi Jabu Mdluli, Zwelile Thwala, Dlamini Nananza, Phindile Weathersson

TANZANIA

Francis Mallo, Albert Owenya, Eva Kombe, Chris Makyao, Rajesh Das, Sylvia Shelukindo, Susan Kamuzelya, Noelina Kivaria, Mariam Simon Kitindi, Kay Mbwambo, Janet Kheri, Gerald Msegeya, Esther Mainoya, Erick Bon Ifunya

UGANDA

Elizabeth Luwugge, Rose Makumbi, Aggrey Muyambi, Aidah Nabagesera, Jessica Nakalige, Zuriyah Namakula, Faridah Nassozi, Stella Akol, Allan Aturinda, Evelyn Bahemuka, Kenndy Bayo, Eva Karuhanga, Immaculate Komuhangi, Carol Luwaga, Gertrude Nyaketcho, Denis Otim, Robert Zoodia, Irene Lugolobi, Aida Mugisha.

ZAMBIA

Mwaba Kaunda, Sharon Mumba, Adell de Boer, Akayombokwa Mutumba, James Gwabila, Kawa Chirambo, Nshila Chilele, Charity Mlongwe, Abigail Mangala.

ZIMBABWE

Richard Mwerahari, Shelter Nyatsanga, Simukai Tyoka, Everymay Zhou, Alois Katsere.

Feedback from Champions on Issues of Continuity

Editor's comment: From your feedback you are clearly achieving a lot and making a substantial difference to the knowledge, attitudes and behaviours of your participants. But how do we maintain and extend this impact? The comments below from various Wellness Champions around Africa reflect on issues of maintaining and further extending this impact. Please let me have your reactions / responses to these comments, and any other suggestions for how to ensure continuity.

JANET KHERI, Tanzania:

Most participants requested that these types of sessions should be ongoing so that people would be reminded why it is so important to stay safe. Most people after these types of sessions tend to be careful, but how soon we forget. We all need a wake up call from time to time.

RICHARD MWERAHARI, Zimbabwe:

It's a new and unique concept which needs more exposure. More refresher training workshops for the practitioners to acquaint them with new developments.

KAY MBWAMBO, Tanzania:

Most people we present to think that we are trained counselors and sometimes it becomes difficult to handle some situations, as I am not a qualified counselor. Can the *Bridges of Hope* introduce some sort of training to assist us? We will appreciate if we can have at least a refresher course once in a year to keep us up to date and not to let the fire burn down.

MWABA KAUNDA, Zambia:

I actually think the course is excellent, and the materials and users guide are very user friendly. However, I think there is a problem when it comes to commitment of being a Champion for *Bridges of Hope*. I think the potential people that would benefit from attending a Bridges of Hope session are possibly not entirely reached, even from the perspective of just Stanbic employees alone. Those who were lucky to have attended one session will probably never see another one. It would be helpful to have a set out schedule as a whole team timetabled and set dates of for the whole year, when and who will be facilitating the sessions and more importantly working together as Champions. For instance maybe having a chairperson for the Champions as a whole who co-ordinates everything.

So essentially I think Bridges of Hope training is fantastic but there should be more done to try and ensure continuity. Whilst we may want to be committed in the heart to the cause to actually see to it that we pursue the aim and goal falls away after a while.

SYLVIA SHELUKINDO, Tanzania:

I believe we need to set a day per month as a team at SB Tanzania to conduct Bridges of Hope for colleagues and the community as well. If we have a set day, it will become more of a measured and tracked commitment that everyone will have on the calendar each month. We can also invite the rest of the bank to ask/ recommend sessions that we can facilitate once every month at the location and to the audience of their choice.

2008 Awards for Wellness Champions

Towards the end of 2008 (provisionally on World AIDS Day) the ongoing achievements of Wellness Champions in applying *Bridges of Hope* will be formally recognised with the following awards:

1) Individual Awards

For Wellness Champions who, as well as achieving *Bridges of Hope* Certification, demonstrate an ongoing commitment and effectiveness in applying *Bridges of Hope* both with work colleagues and in the wider community. This will be assessed based on your reports, which you can submit any time up to 30th September using the same reporting format as for certification.

An award of this nature was won by Prudence Gelderbloem last year, as reported in the October 2007 Issue 2 of the Standard Bank / Stanbic Bank *Bridges of Hope Newsletter*, available via web page: www.bridgesofhope.info/Newsletters-BridgesofHope.html

2) Country based Award

For Standard Bank / Stanbic Bank country programmes which achieve the most based on criteria such as:

- Proportion of trained Champions who have achieved certification
- Proportion of staff for whom Champions have delivered comprehensive *Bridges of Hope* training
- Scope of programmes in the community
- Range and quality of reports provided / evidence of impact
- Demonstration of how Champions have been Inspired. Motivated. Involved. in applying *Bridges of Hope*

There were certainly a lot of inspired, motivated and widely involved Standard Bank / Stanbic Bank Wellness Champions in 2007. I look forward to your feedback and to hearing further great things you have achieved in 2008.

Peter Labouchere, Editor
E-mail: peterl@mweb.co.zw