

## Faith Groups Turn to Reproductive Health and HIV Issues

*Youth and faith leaders join forces to become community trainers.*

**Njombe, Tanzania** – Miriam Mpenda, 18, dropped out of school when she got pregnant at age 14. “I thought about poisoning myself,” she said during an interview in the Anglican Health Centre in Njombe, a small town in the southern mountains of Tanzania. “I was depressed. I did not know anything about pregnancy or having a child. My brother kept me strong. He kept me going.”

Miriam’s father died when she was young, and her mother passed away recently from problems related to high blood pressure. She does not know if either death was related to HIV infection. But she does know her options are limited. “I am an orphan, so I cannot afford the fees to go back to school.” She and her four-year-old son now live with her grandmother.

Although Miriam currently lacks the opportunity for more formal education, she has found other ways of growing and contributing to her community. Several years ago, she joined a youth performance group, sponsored by the Anglican Health Centre’s HIV/AIDS project. In April 2004, the coordinator of the Health Centre project nominated Miriam to be part of an activity with youth and faith-based organizations, sponsored by YouthNet with funding from the President’s Emergency Plan for AIDS Relief through the U.S. Agency for International Development, Tanzania Mission.

YouthNet conducted an assessment using participatory learning and action (PLA) techniques in the Iringa region, which includes the Njombe district. The assessment used participatory tools to elicit information, knowledge, and practices through community involvement. The Iringa PLA was

designed to raise awareness and generate support among faith leaders and faith-based organizations for youth reproductive health and HIV prevention. YouthNet selected 48 people for the project, about half youth (including Miriam) and half adults, mostly connected with faith-based organizations, including Christian and Muslim.

The PLA tools involve techniques with names like “My Universe,” “Spider,” and “Body Mapping,” where participants share their knowledge, experience, attitudes, and information about youth and their community through drawings, storytelling, cartoons, brainstorming, and other participatory activities. Some of the exercises, such as the body mapping, involve direct conversation about sexuality, including names of body parts, correct information about how babies are made, and other subjects usually taboo to discuss among youth and adults in Tanzania.

Such exercises help participants begin to open up and talk about sensitive topics. This process helps youth to address harder topics, such as awareness of risky sexual activities and approaches to behavior change. In the six-day workshop, held at the Lutheran Center in Njombe, the 48 participants gradually became more comfortable with the subject matter and with using the PLA tools.

“Talking with youth about sexuality is easier. Talking with adult people is a problem,” says Miriam. “I gained a lot of confidence through using the PLA tools in this community setting. I learned about my community and how to approach it. I also learned a lot about my body and how it relates to sexuality, such as when fertilization takes place.”

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She reflected on the PLA workshop during a discussion with two of the adult participants, Waziri Kindamba, a 29-year old Muslim imam, and Willy Hyera, 39, the Health Centre's HIV/AIDS coordinator who helped open this door for Miriam. Both Kindamba and Hyera said they were shy discussing sexuality openly at first, along with most of the adults. "I was not comfortable in the beginning drawing the body with sexual parts and showing the drawing to girls like Miriam," said Hyera. "But through the interaction in the training, I got a lot more confidence. The PLA tools make it easier."

From that training, the 48 participants split into seven groups to work in the seven districts of the Iringa region. For 10 days, they conducted focus group discussions with community leaders, led PLA exercises for community youth and stakeholders, and conducted individual interviews. They had forms for recording data from these activities and kept fieldwork diaries. The teams returned for a four-day workshop to compile the data and make recommendations for follow-up activities among the faith-based organizations (for more details on the PLA process, see *Participatory Learning and Action: A Powerful Approach with Youth: YouthNet Brief No. 4*).

As a result of the PLA activity, faith-based organizations in the region decided to initiate or expand their work with youth.

YouthNet has provided technical assistance to 12 faith-based organizations to help them develop HIV prevention projects for youth and will continue to provide financial, technical, and programmatic support.

Miriam hopes to work with one of these follow-up faith-based projects, as well as other youth projects. Her ambition is to work with youth in any way she can to help them avoid the kind of mistake she made when she was 14. Already, she has been selected as a member of the YouthNet Youth Executive Committee, which advises the YouthNet project on programming. "Now we need to prepare more events," says Miriam. "Youth can be involved and come."

Before leaving the interview, Miriam had one more thing to say. Her favorite PLA tool is the "Spider," she said, a brainstorming technique where the facilitator puts the ideas that participants share on lines from a center circle, so the picture eventually looks like a spider. For Miriam, the spider offered leads to answering hard questions. "I want to explore the sources, the primary cause of each problem."

— William Finger

William Finger coordinates publications and information dissemination for YouthNet.

**YouthNet/Tanzania Briefs** is an activity of YouthNet/Tanzania, supported by the President's Emergency Plan for AIDS Relief and the U.S. Agency for International Development, to prevent HIV/AIDS and improve reproductive health among young people. The YouthNet team in Tanzania is led by Family Health International.

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