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AGYW Adolescent Girls and Young Women

AIDS Acquired Immunodeficiency Syndrome

**ANERELA+** African Network of Religious Leaders Living with or Personally Affected by HIV and

**AIDS** 

**ASRHR** Adolescent Sexual and Reproductive Health Rights

**ARV** Antiretroviral (drug)

**AYP** Adolescents and Young People

**CCAP** Church of Central Africa Presbyterian

**CDC** Center for Disease Control

CRHE Coalition for Responsible Home Education
CHAM Christian Health Association of Malawi

**Cos** Church of Sweden

CSE Comprehensive Sexuality Education

DAPP Development Aid from People to People

**DOVVSU** Divisional Head of Domestic Violence Victim Special Unit (within Ghana Police)

**EAA** Ecumenical Advocacy Alliance

ELDS Evangelical Lutheran Development Services

**EUP** Early Unwanted Pregnancy

**FAWEZA** Forum for African Women Educationalists of Zambia

FORB Faith and Community Initiative
FORB Freedom of Religion and Beliefs

GBV Gender-Based Violence

HCT HIV Counselling and Testing

HIV Human Immunodeficiency Virus

**HTS** HIV Testing Services

**IEC** Information, Education and Communication

**INERELA+** International Network of Religious Leaders Living with or Personally Affected by HIV

and AIDS

**KENERELA+** Kenya Network of Religious Leaders Living with or Personally Affected by HIV and

AIDS

**LGBTIQ+** Lesbian, Gay, Bisexual, Transgender, Intersex, Queer

**LWF** Lutheran World Federation

MANERELA+ Malawi Network of Religious Leaders Living with or Personally Affected by HIV and

AIDS

**MDF** Malawi Defence Force

MIAA Malawi Interfaith AIDS Association

MNCRD Media Network on Child Rights and Development

MRM Moral Regeneration Movement

NAC National AIDS Commission (in Malawi)

NINERELA+ Nigeria Network of Religious Leaders Living with or Personally Affected by HIV and

AIDS

**NZP+** Network of Zambian People Living with HIV

**OMASAVE** INERELA+ Madagascar

**PPAZ** Planned Parenthood Association of Zambia

PLHIV People Living with Human Immunodeficiency Virus
PEPFAR President's Emergency Plan for AIDS Relief (USA)

**REPSSI** Regional Psychosocial Support Initiative

**RLs** Religious Leaders

**SAFAIDS** Southern Africa HIV and AIDS Information Dissemination Service

SANERELA+ South African Network of Religious Leaders Living with or Personally Affected by HIV

and AIDS

**SAVE** Safer Practices, Access to Treatment, Voluntary Counselling and Testing,

Empowerment

**SCREVAW** Strengthening the Capacity of Religious Leaders to End Violence against Women and

Girls

SDGs Sustainable Development Goals
SGBV Sexual and Gender-Based Violence

**SLaDA** Sierra Leone Marketing and Development Agency

**SSDDIM** Stigma, Shame, Discrimination, Denial, Inaction and Missaction

SRHR Sexual and Reproductive Health and Rights

TALC Treatment Advocacy and Literacy Campaign

UNAIDS United Nations Programme on HIV and AIDS

**UNERELA+** Uganda Network of Religious Leaders Living with or Personally Affected by HIV and

AIDS

UNWTF United Nations Population Fund
UNWTF United Nations Women Trust Fund
VCT Voluntary Counselling and Testing

**WAD** World AIDS Day

**WCC** World Council of Churches

WMHD World Menstrual Hygiene Day
Wildaf Women in Law and Development in Africa
YWCA Young Women's Christian Association
ZANEC Zambia National Education Coalition

**ZANERELA+** Zambia Network of Religious Leaders Living with or Personally Affected by HIV and

AIDS

**ZMN** Zambian Men's Network

# **Acting Executive Director's Report**

A YEAR OF CHALLENGES
AND DIFFICULTIES,
BUT ALSO, FOR
OPPORTUNITIES

he year 2021 was again another year of COVID which sadly claimed the life of INERELA+ Executive Director Rev Phumzile Mabizela.

The pandemic has been a humanitarian crisis which saw many families being robbed of their loved ones, colleagues, friends and livelihoods. Businesses, public services and social life were affected by the lockdowns and other restrictions.

COVID also brought exceptional challenges to the delivery of services especially to key populations. It has also disrupted global supply and transport chains due to border closures, drastic reductions in air traffic, restrictive measures on imports and exports, and soaring costs. Mental health and wellbeing are at low levels. The pandemic has intensified fatigue and anguish.

We sympathise with those who lost their loved ones while wishing those affected a quick recovery. Despite the dreariness and harshness of our times, we have also seen innovation, resilience, and the power of the human spirit, appreciating more than ever what it means to be human and what we lost. The opportunity to work with our Country Networks, partners and civil society organisations has been a privilege and I wish to thank all those whom we worked with in 2021 as we responded to the pandemic.

We had to re-programme some of our activities to respond to the impact of COVID-19. Our re-programming exercise was quite effective and efficient. We had hoped to physically host our Triennial Conference by mid-2021 but this was not possible because of lockdown and travel restrictions. Our General Assembly Meeting had to be conducted on June 17 in an exclusively online forum for the first time. Seven new board members were elected at the General Assembly to join two old board members who were co-opted



Munya Mandipaza, INERELA+ Acting Executive Director

from the old board. Our highly successful learning forum was forced to happen virtually in October 2021. The indefatigable and energetic Secretariat team did a sterling job of diligently liaising with Country Networks through a challenging period by providing clarity on initiatives that had to be implemented within communities which ensured optimum continuity of our work. Technical support to Country Networks was able to transition to an on-line format as well.

INERELA+ adapted and scaled up its operations to respond to the COVID- 19 pandemic while ensuring the continuity of vital interventions through a covid mitigation grant that gave Country Networks the opportunity to mitigate the impact of COVID on inadequately served populations. The grant was raised in December 2021 through Robert CARR. It is through the same grant that a pipeline of Religious Leaders has been trained and equipped by fifteen of our Country Networks with a focus on COVID-19 Protocols, HIV, SRHR, GBV, Counselling and Mental Health Issues so they can build resilient communities with hope. Country Network teams have been able to better protect themselves from the virus through support to purchase personal protective equipment and hygiene items.

The emergence of COVID-19 saw a widespread of fake news, misinformation, and disinformation. Through the same COVID mitigation grant IEC materials indicating COVID requirements and safe

practices were developed and distributed to fifteen of our Country Networks to navigate the COVID maze as well as fight disinformation, promote access to accurate and reliable information. Our Country Networks were able to strengthen protection systems to prevent and respond to all forms of violence against women and girls. Online activities to fight Gender Based Violence which were utilised included use of community media, radio stations, webinars, WhatsApp, helplines, face book and twitter platforms.

The same covid mitigation grant has yielded a partnership with Phambano Technology. The partnership has just seen the implementation of the first phase at INERELA+ Secretariat which has addressed a number of digital challenges. The package of this partnership includes support to INERELA+ country networks and plans are in place to roll out this initiative so as to improve data capturing, reporting, sharing of lessons learnt and challenges between the INERELA+ Secretariat, its Country Networks, and partners.

Additionally, the Covid mitigation grant is being utilised to review and update the second edition of the INERELA+ SAVE toolkit against the Fast Track Strategy and integrate it with other existing tools such as Framework for Dialogue, whilst retaining its own integrity. Also, the review will significantly focus on the inclusion of the recently developed political declaration and the new UNAIDS strategy taking into consideration the newly allocated targets. INERELA+ will incorporate additional materials with a mental health and COVID lens in the reviewed SAVE toolkit since we are now operating in the new normal era. This process will better position the SAVE toolkit to include current trends in HIV prevention technologies and HIV treatment.

The impact of lost education for children especially girls due to school closures, is likely to have permanent effects for many. Most countries registered notable spikes in teen pregnancies and early marriages because of lengthened school closures. According to a report by the United Nations Educational, Scientific and Cultural Organization (UNESCO), around one million girls across sub-Saharan Africa who fell pregnant during Covid-19 school closures will not be returning to school. A UNAIDS grant raised by INERELA+ has gone a long way in addressing socio-cultural, family/ community and system barriers for girls' education as well as improving SRHR repercussions of GBV and harmful social cultural practices by using an interfaith lens.

A training manual for upskilling Religious Leaders to intensify interventions that are proven to lead towards reduction of violence against key populations was developed through the support of AIDS FONDS. Unique in its kind the same manual has been used as an informative and practical resource to capacitate Religious Leaders

to become change agents for creating an enabling environment for key populations. Our Country Networks in Zambia, Zimbabwe, Botswana, South Africa, and Zimbabwe are among beneficiaries of this Project.

World-over where INERELA+ works, the occurrence of natural disasters is on the rise due to climate change with the highest number of these natural disasters being hydrological, climatological, and meteorological related. Droughts and floods, although they affect everyone, the populations in vulnerable situations such as the poor, the elderly, young people, women, girls, and children are disproportionately affected. Climate change had been a theme that INERELA+ is increasingly seeking to address. We are seeking to 'go green' by taking part into the collective responsibility by greening our operations to ensure that our work does not further contribute to deteriorating the environment people live in and rely on for their livelihoods, especially the most vulnerable, who have contributed the least to environmental degradation, deforestation, desertification, and pollution, but are the hardest hit. INERELA+ recognizes Religious Leaders, youth, women, and girls as knowledge-holders (including indigenous knowledge) and innovators and thus firmly believe that these people hold the solutions to sustainable development.

We are increasing our efforts to measure the long-term positive changes for individuals, communities, and society as a whole that result from activities or services provided by INERELA+. Our standard indicators focus on outcome and impact, and they are aligned wherever possible with the Sustainable Development Goals.

2021 was a challenging and difficult year but also one filled with opportunity. We reviewed programming capacity and utilised the skills of our staff in innovative and creative ways. Care and support to staff enabled a stronger team with all staff members working out of their comfort zones and meeting challenges presented to them. 2021 will be a pivotal year in our history forever etched on INERELA+ heart as we suffered the loss of Executive Director Rev Phumzile Mabizela and our Patron Archbishop Desmond Tutu. We miss Phumzile's humour, intellect, and compassion. Desmond Tutu's challenging persona, contributions and memory will live on in INERELA+

As a team we are thankful for the outstanding support of partners, the Board and encouragement of our Country Networks who are the cornerstone of all our interventions. INERELA+ is also deeply grateful and appreciative for the contributions and invaluable services of our Religious Leaders and all who have worked on the frontline. We could not do our work without you.

### Thank You!!!!

Gender inequality and the escalating violence against women and girls has prompted INERELA+ to double its efforts to realise gender equality through capacity building, dialogues, advocacy, and partnerships.

The International Network of Religious Leaders Living with or Affected by HIV and AIDS (INERELA+) is an international, interfaith network of Religious Leaders (RLs) — both lay and ordained, women and men — who are living with or personally affected by HIV and AIDS. RLs are influential within their communities and congregations and play a central role in influencing the decisions and buyin of their followers or communities on issues, ideas, innovations, interventions, and programmes"

INERELA+ empowers its members to use their positions within their faith communities to influence social change and in ways that break silence, challenge stigma, and provide delivery of evidenced-based HIV prevention, care, and treatment services amongst others.

# MENSION STATEMEN



# INERELA+ Saddened by the Passing of Executive Director

The passing on of INERELA+ Executive Director on July 5 2021 due to COVID - complications was a sad day for us and many more others whose lives she touched. Rev Phumzile Mabizela was a natural match for INERELA+ given its mission and values in the non-profit sector. Her insights were highly valued. We salute the memory of an exceptional woman known for her strength and her noble engagements which are far reaching. Her tireless efforts in championing the rights of women and girls earned her the respect of millions across the globe.

In all situations—whether on the public stage or away from the cameras — she always identified with those who are less fortunate no matter where they are from. She translated this into a forceful articulation of the need for faith authorities to do more in upholding human rights. Rev Phumzile's passion for justice, and her deep desire to break barriers within and beyond the faith community shone through. Many people know her as a voice of reason, a magnificent visionary and embodiment of courage in promotion of diversity and inclusion.

A globally recognized champion for human rights and women's empowerment, she was known throughout the development and human rights community not just for her inspirational eloquence, but for her human warmth. Her death left a gaping hole among the ranks of women leaders, but she leaves behind a solid foundation for others to build upon.

It is a tribute to her passionate determination that so many people felt such a deep sense of loss at her passing. For the INERELA+ team it has been a privilege to know and working closely with her and all we can say is we had a great admiration for her unwavering engagement for social justice. For all the years that we worked with her we were struck by both the force of her personality and the quality of her intellect. Her passion shone through in everything she did, from her work on women's equality to her tireless championing of human dignity. Two words sum her up for us are "passion and energy"— these are traits she showed in all she did. The footprints she has left on the globe will bear everlasting witness to posterity that a great lady, a true heroine, walked this earth.

The passing of Rev Phumzile will be an enormous loss to her family, her extended family including the INERELA+ family and to the world she cared so much about. It means we are all deprived; we have lost an extraordinary activist who showed the skills of leadership and great determination. She will be remembered as the very friendly and humble person she was. Her spirit will live on in the daily acts of the tens of thousands of people who are now carrying forward her struggle to create a fairer and just world.

# INERELA+ Lost A Great Champion

INERELA+ honours the life, outstanding achievements, and deep religious faith of Archbishop Desmond Tutu who was its Patron. Archbishop Desmond Tutu a churchman of deep faith passed away on the boxing day of December 2021

The driving force of his whole struggle for human dignity in the face of prejudice, oppression, and suffering, was his faith in a God of peace and justice. Archbishop Tutu was committed to the work of interfaith dialogue and reconciliation between differing faith perspectives. His determined faith especially his elevating of the difficult and controversial concept of forgiveness into the public realm marked him out as one of the giants of interfaith cooperation and peace.

He was a man of enormous courage and powerful voice in the fight against AIDS, combating denial, demanding access to treatment for all, calling out against discrimination of people living with HIV, and championing the human rights of vulnerable people, women, and children. His work on HIV and tuberculosis prevention and treatment changed global paradigms and saved many lives.

The Arch was remarkably a brave man and outspoken in calling for an end to AIDS denialism. He fought for access to lifesaving medicines. Tutu called on pharmaceutical companies to make AIDS medicines accessible. Archbishop Desmond Tutu advocated for prevention of HIV infection in adolescents and young people. He co-chaired the UNAIDS commission on HIV prevention in 2011 that led to setting bold global targets for HIV.



Archbishop Desmond Tutu

prevention. Besides being a man of impeccably strong moral convictions who strived for peace, he extolled on young people to take on the leadership on AIDS

INERELA+ lost a guide, mentor, freedom fighter, a holy man and a great hero who played a huge role in the liberation of many people on the globe. He was a moral compass and leading light who brought global attention to injustice in a way few people could do. He was a champion for the rights of all people living. with and affected by AIDS. Millions are alive and free today because of the path he charted and the hope he brought to this world. As an organisation we are proud to have received the patronage of Archbishop Tutu.

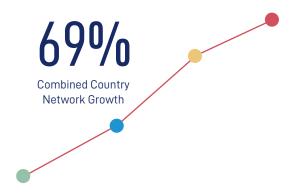


ver the years, the networks have grown; there are now more than 29 714 members across the globe who mobilise their respective faith communities to provide resources and referrals to over 3 million people world-wide, helping curb HIV-related stigma, shame, and discrimination and to reduce new infections through the holistic SAVE (Safer practices, Access to services, Voluntary and regular HIV testing services, and Empowerment toolkit.

INERELA+ has 15 networks in the following African countries: Burundi, Democratic Republic of Congo (DRC), Ghana, Kenya, Malawi, Mozambique, Nigeria, Rwanda, Uganda, Madagascar, Sierra Leone, South Africa, Tanzania, Zambia, and Zimbabwe. Membership numbers per country are as presented in Table 1.

No.	Country	Male	Female	Total
1	Botswana	0	0	0
2	Burundi	131	89	220
3	Congo	38	66	104
4	Ghana	22	18	40
5	Kenya	1856	2156	4012
6	Madagascar	70	47	117
7	Malawi	9304	11160	20464
8	Mozambique	9	40	49
9	Nigeria	571	592	1163
10	Rwanda	82	114	196
11	Sierra Leone	80	25	105
12	South Africa	260	590	850
13	Tanzania	212	98	310
14	Zambia	482	539	1021
15	Zimbabwe	594	469	1063
	TOTAL	13711	16003	29714

Table 1: 2021 Membership Figures



The programme has over the years grown through the work and dedication of 15 country networks recording at least 69% for years between 2020 and 2021



INERELA+ Secretariat hosted a virtual learning forum which was attended by the 15 Country Networks



60

INERELA+ Kenya trained 60
Religious Leaders to improve
access to HIV testing
services counsellors in the
Sub counties of Kenya



23

INERELA+ MALAWI in collaboration with other civil society organisations, traditional leaders and religious leaders in Denza District rescued at least 23 girls from forced marriages



INERELA+ (Kenya, Ghana and Nigeria), celebrated the 2021 world Menstrual day under the theme It's time for action", encouraging the world to step up and invest in menstrual health and hygiene. At least 5000 women and girls were reached through these activities on the social media.



25

INERELA+ Secretariat
hosted training for religious
Leaders about the Hands-Off
Programme. The Hands-Off
Programme, coordinated
by Aidsfonds, focuses on
the reduction of violence
against sex workers in
Southern Africa. The Training
was attended. 25 Religious
Leaders from 5 different
countries (Botswana,
Mozambique, South Africa,
Zambia and Zimbabwe)



22

INERELA+ Tanzania conducted a dialogue meeting with national religious leaders from four main religious denominations in Tanzania as well as with people living to end HIV Stigma. The dialogue was graced by 22 participants from Tanzania mainland 9 females and 13 males.







12

INERELA+ Madagascar hosted a one day SAVE training workshop on "Transformative Masculinity" The workshop was cantered around deep-rooted discussions that reflected on gender-based violence. In were 12 religious Leaders attended the workshop.



50

INERELA+ Sierra Leone Empowers Women, Girls & Peer Educators With Comprehensive Information On SRHR, GBV, SGBV, and HIV/AIDS & Covid-19. This Activity Reached 50 Women and Girls.



165

SAVE Toolkit training
was conducted in six
countries (Sierra-Leon;
Zimbabwe; Kenya; DR Congo;
Mozambique; Burundi).
The training which was
conducted by Champions
aimed at equipping Religious
Leaders as change agents



At least 63 faith leaders were trained on HIV prevention treatment and care, sexuality and gender, and gender-based violence using the SAVE Toolkit. Over 2000+community members both in Kagadi and Hoima District, Uganda, were reached with messages on HIV prevention, SGBV and SRHR



16

At least 16 faith leaders were introduced to the S.A.V.E methodology. The training aimed at offering a network of support for Religious Leaders of all faiths to deal with the stigma and discrimination around HIV and AIDS.



### **2021 Learning Forum**

As part of INERELA+ mandate to promote knowledge sharing and dialogues between country networks, the secretariat convened a learning forum. This brought together country teams and staff. The 2021 leaning forum took place from 4-6 October 2021. The learning forum was meant to build the capacity for fifteen country networks among other objectives. It brought facilitators with varied expertise to present on relevant topics such as Governance, Monitoring and Evaluation, Financial Management, Budgeting and Digital transformation for civil society. The meeting was graced by the newly elected board chair Sergio Rodrigo Bueno Montealegre who addressed the country networks for the first time. In attendance at the meeting were also representatives from some of the INERELA+ funders. Their attendance was primarily to observe the proceedings of the learning forum and to learn more about the projects being implemented by INERELA+ Country Networks and how implementation takes place in the different countries for the year 2020.

# INERELA+ Hosts Training for Its Ambassadors

INERELA+ has ambassadors in different countries. These people promote the work of INERELA+ and assist in creating and building visibility of INERELA+ in countries where they are based. They ensure that INERELA+'s work is known and recognized all over the world, while also assisting in sourcing funding in their respective countries. To ensure that their work is done with ease and that they know the values and mission of the organisation, training is hosted by the INERELA+ secretariat annually. In attendance at the training

workshop were ambassadors from several countries that include Zimbabwe, South Africa, Sierra Leone and Botswana, Ghana, Kenya, Zambia, among others. This training provided an opportunity for ambassadors to also network share ideas and identify good practices, principles, or strategies which they can adapt and use in their respective countries. The training was facilitated by Revd Jide Macaulay chairperson of INERELA+ Europe.

# Training Of Trainer's Workshop on Life And Relationship Skills Hosted By INERELA+

INERELA+ hosted a training of



Hands Off participants South Africa

trainer's workshop on Life and Relationship skills for six country networks that are implementing sexual reproductive health and rights (SRHR) project namely (Sierra Leonne, Nigeria, Kenya, Malawi, Zambia and Zimbabwe). The three-day workshop started on the 26th and ended on the 28th of October 2021. The training was conducted virtually due to COVID-19 restrictions that prohibit people from traveling and gathering in large numbers in one place. The training was mainly focused on instilling knowledge and building capacity for adolescent boys and girls 1-24 years old from the six country networks

This facilitator covered several topics that included

understanding life skills, basic Gender, knowing myself communication, linking sexuality and gender and prevention, relationships, my body and me, living with HIV, child safeguarding, decision making, coping with emotions, advocacy and substance use among others.

The training was attended by groups of enthusiastic adolescents who after the training were more eager to go back and impart the knowledge and skills they acquired at the training.

# INERELA+ Hosted A Training for Religious Leaders About the Hands-Off Programme

The Hands-Off programme recognizes the centrality of sex

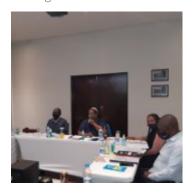


Hands Off training participants Zimbabwe

workers in responses to HIV and AIDS in Southern Africa. One of the major driving factors to the continued persistence of HIV and AIDS in the region is the existence of widespread "sex networks" that are created by the multiple sexual partners and in which sex workers feature prominently.

For appropriate and adequate responses, there is a need to address the working environment of sex workers, their safety and security to reduce their risk of exposure which will also reduce the dangers posed to the entire community.

To capacitate change agents, a training manual was developed to build the capacity of religious leaders in the outreach ministry among sex workers. In collaboration with INERELA+ (from the 10-13 May 2021, 25 Religious Leaders from 5



Hands Off participants South Africa

different countries (Botswana, Mozambique, South Africa, Zambia, and Zimbabwe) were engaged through a virtual training aimed at empowering them as change agents for the Hand Off programme and beyond.

The champions who were trained on how to use the Manual for Upskilling Religious Leaders for the Accompaniment of Sex Workers are expected to cascade lessons learned through the training of other religious leaders.



Hands Off training participants Zambia

They are also expected to implement the project to create positive attitudes towards marginalized persons which in this case are the sex workers and to influence change through their teachings. This will significantly influence the perceptions of the community towards sex workers,



Hands Off training participants Botswana

accept them as people whose dignity must be upheld and as members of the faith community.

# INERELA+ Annual Planning Meeting

INERELA+ Secretariat annual planning meeting was held from 21st – 23rd of February 2022 at Birchwood hotel. As part of INERELA+ strategy, the

and revitalize the momentum in preparation of the year.

The annual planning meeting came at the right time as it coincided with the Acting Executive Director's theme for the organization which she shared at the beginning of the year during the first staff meeting, "2022 Year of Restoration: Job 19 v 25". Drawing from INERELA+ theme of the year, the Acting Executive Director opened the meeting by devoting the word of prayer from Mathew 19 v 26 -29. One of the key highlights from the meeting was that the execution plans required documentation of priorities focusing on year 2022 targets. The annual planning meeting ended by developing a 2022 Action Plan which captured tasks and responsibilities for every portfolio at the Secretariat to oversee and implement through the year with a possibility of the organization having an



INERELA+ Secretariat Staff Members Attending the Annual Planning Meeting 21 – 23 February 2022

organization plan for the year and put programmes finance, and projects implementation by country networks into an Operational Plan. The meeting utilized a hybrid approach where seven staff members physically attended the meeting from the conference centre and virtually connected to the Acting Executive Director (chairperson) who was working from another location. The physical meeting gave a chance to the team to reenergize

MTR to review and assess the implementation, success, and challenges of the Action Plan.

"The annual planning meeting ended by developing a 2022 Action Plan which captured tasks and responsibilities for every"

# Regional Advocacy for Comprehensive Sexual Education

Comprehensive Sexual Education (CSE) is a process of educating young girls and boys about all aspects of their sexuality. Its aims to equip them with knowledge and skills and values that empowers them to realize their health, wellbeing, and dignity also to help them develop respectful social and sexual relationships it appoints them opportunity to learn how their choices affect their wellbeing and that of others while understanding the protection of their rights throughout their lives.

To build partnerships INERELA+ collaborated with other Civil Society Organisations (CSOs) to advocate for CSE, which has been under threat in many African countries. Many against CSE argue that it encourages boys and girls to engage in sexual activities at an early age and that it accounts for why there is an increase in teenage pregnancies. Conversely, evidence exist and presents that CSE has provided comprehensive and accurate information for boys and girls and empowers them to take up well informed decisions about sex, sexual development, and sexuality. CSE enables adolescents to explore their values and attitudes and build skills and knowledge thereby reducing their risk of contracting HIV, STIs, avoiding child marriages, unintended pregnancies, gender-based violence, and sexual abuse. CSE is crucial in the empowerment of boys and girls in African countries at large. To this end, INERELA+ collaborated with other CSOs led by SRHR Africa Trust (SAT) to document and present a video that responds to the consistent call to scrap CSE from the learning curriculum at schools.

# Canon Gideon Byamugisha Nominated as Member of UNAIDS Multistakeholder Taskforce on HIV



Canon Gideon Byamugisha

After a call for nominations from UNAIDS for people living with HIV, key populations and other affected communities to join the multistakeholder task force for an upcoming high-level meeting on HIV, Prof. Canon Gideon Byamugisha Co-founder of INERELA+ was among the successful nominated 16 representatives from civil society and private sector.

The representatives are expected to advise UNAIDS on the format, theme and programme of the multistakeholder hearing and will assist with the identification of speakers for high-level plenary meetings and panel discussions. INERELA+ worldwide is proud to have one of our own who is not only a thought leader in the fight against HIV&AIDS but a consistent advocate for the INERELA+SAVE methodology and fighter against HIV related Stigma, Shame, Denial, Discrimination, Inaction, Mis-action (SSDDIM). We wish him many more opportunities for recognition and greater achievements.

# INERELA+ Attends Webinar About Young Women and Girls Migrants Hosted by Save The Children

INERELA+ implements project activities which focus on women and girls and routinely attends forums where global, regional or country engagements take place. Forums as these provide opportunities for linkages and networking with partners, donors/funders, knowledge sharing and identification of good practice principles or strategies which can be adopted or adapted.



Munya Mandipaza

INERELA + Deputy Director, Munya Mandipaza on 14 April 2021 attended a webinar hosted by Save the Children (SC) Sweden. The webinar was held to launch a research report about "Girls on the Move". The discussions focused on precarious situations, challenges and risks experienced by girls and young women between the age of 10 to 23 in Southern Africa (Zambia, Zimbabwe, South Africa, and Mozambique). The Girls on the Move Initiative is a global series of action research conducted across different regions within existing Save the Children programmes. Each regional study generates targeted evidence to address knowledge gaps in current

literature and programme approaches and engages Save the Children teams to immediately strengthen ongoing interventions for girls in different stages of migration, notably during transit and arrival.

# CONERELA+ Strengthens Capacity of Religious Leaders In HIV Prevention

Capacity building for religious leaders is and remains central for an effective response to HIV and AIDS, most specifically against the stigma, discrimination and inaction that surrounds HIV.

INERELA+ Congo, with technical and financial support from the INERELA+, Secretariat organized a training on the SAVE methodology and approaches from April 27 – 29, 2021 in Brazzaville. The training sought to strengthen and equip religious leaders to be agents of change in their communities of faith and within their immediate environment.

Prior to the training, there was inadequate knowledge among religious leaders on effective ways of addressing HIV/AIDS related issues. Most religious leaders were not willing to engage in discussions about sex and condom use with their congregation but after the training religious leaders in attendance made a commitment to actively engage in such discussions with members of their congregation and community.

The training was a success as it changed the mind-set of religious leaders about issues relating to HIV/AIDS. The religious leaders requested to organize a dialogue with the sexual minorities to discuss challenges they often face and how to overcome them.

The National Program for the Fight against HIV in Congo will be complemented with the selected activities to be implemented by religious leaders informed by the SAVE methodology. At the end of the training, copies of the SAVE toolkit were handed over to the representatives from the National Program for the fight against HIV in Congo.

# Introduction to the S.A.V.E. Methodology by INERELA+ EUROPE

In November 2021, INERELA+ EUROPE conducted training for the Religious Leaders an introduction to the S.A.V. E methodology. The training workshop was attended by 16 Religious Leaders from different Christian denominations. The training aimed at equipping Religious Leaders to help all people understand their rights and responsibilities in a way which empowers them to be positive agents of their own and their family 's/society's health and acceptance. The training which was spread over three days and conducted by revered facilitators from rich knowledge backgrounds (Revd Jape Mokgethi-Heath, Revd Paul Mokgethi-Heath, Husseinah Hamza, Revd Jide Macaulay). The facilitators took chances to conduct sessions in a participatory workshop format. Certificates of attendance will be issued to all who attend a minimum of 80% of the sessions.

# INERELA+ Secretariat Attends a Webinar About Women and Girls Rights Initiative: Global Gag Rule Hosted by SAFAIDS

INERELA+ promotes sexual and reproductive health and Rights (SRHR) with a right supported by knowledge, skills, and the ability

to make responsible, positive, informed and safe sexual choices. Faith communities supported by INERELA+ networks implement Comprehensive Sexuality Education and Information (CSE&I) at congregational and community levels. The program is targeted at children of 5 – 18 years age group and focuses on teenage pregnancies including contraceptives and forced sterilization of women and girls living with HIV and AIDS.

As a way of upholding this mandate of issues around sexual reproductive health and rights (SRHR) the INERELA+ Executive Director Rev. Phumzile Mabizela represented INERELA+ at the Women's & Girl's Rights Initiative: Global Gag Rule Webinar Series under the theme #HerSafetyOurResponsibility, hosted by SAFAIDS.



Rev, Phumzile Mabizela

Her part was to give a religious perspective on the issues discussed and to advice how religious leaders can play a role in ending the gag rule. Her Safety, Our Responsibility Initiative" on Women's and Girl's Rights was launched alongside International Women's Day 2021 to increase narratives around the critical intersect between women and girls W&Gs rights, SRHR and other development issues which contribute to the Sustainable Development Goals (SDGs).

Speaking during the webinar Rev. Phumzile stated that three out of four illegal abortions in

Africa lead to maternal deaths. Also, 45% of women globally die due to complications of unsafe abortions. She said that because this rule is put in place by political leaders in the United States U.S. who are mostly men gives evidence that men still have the power in making decisions about women's bodies. She also mentioned that the level of awareness about the gag rule is very low especially among the faithbased organisations. Religious leaders are there to make the gag rule known throughout the interfaith organisations and how it has been used by politicians to continue enforcing principles that oppress women and girls. She alluded that access to safe termination of pregnancies protect the rights and health of women and girls.

In her presentation she revealed that in interfaith organisations human dignity is very important as it has been freely given to all by God and should not be withheld from people. She said interfaith organisations need to find a strategy that talks about and protects women's rights and women's autonomy. "If we continue to teach the girls that they do not have control over their bodies, that their bodies belong to men as the religion and tradition has taught them, they will continue to die due to harmful practices that include unsafe termination of pregnancies" she said.

She highlighted the need for high-ranking religious leaders like heads of churches whose voice is always heard and respected to come together as a cohort of religious leaders to be educated on the implications of unsafe termination of pregnancy. These will inculcate change by advocating for an end in unsafe terminations of pregnancies from a faith perspective through changing the attitudes of most religious leaders. The religious leaders can then encourage

and teach women and girls the importance of safe and legal terminations of pregnancies and ways of protecting their bodies.

The global gag rule (also known as the Mexico City policy) is a dangerous anti-abortion policy that risks the health and lives of women and girls around the world. It prohibits foreign organizations receiving United States global health assistance from providing information, referrals, or services for legal abortion or advocating for access to abortion services in their country even with their own money. The global gag rule forces health care providers to choose between U.S. global health assistance and the ability to counsel and provide clients with an accurate and full range of safe and legal reproductive health options. As a result, the global gag rule blocks access to health care, stifles local advocacy efforts, and undermines reproductive rights worldwide.

# New UNAIDS Grant To Combat Gender Based Violence, Child Marriages, Harmful Practices and Teenage Pregnancies

Gender Based Violence (GBV) and harmful practices are rooted in power imbalances between the sexes and are fuelled by multiple factors, including social and cultural norms, social acceptance of harmful practices, and insufficient legal protection. Harmful practices and GBV disproportionately impact girls and women the world over.

GBV manifests in several ways and is sometimes justified as a traditional practice and culturally grounded. Harmful cultural practices, such as female genital mutilation/cutting (FGM/C) and child, early, and forced marriage,

are discriminatory practices committed regularly over such long periods of time that communities and societies begin to consider them acceptable.

The consequences of GBV and harmful practices are vast, including physical injury, depression, chronic pain, sexually transmitted infections, unintended pregnancy, and increased risk of HIV infection. They also impede the participation of girls and women in society and perpetuate inequality. According to available data, younger women (15-24 yrs.) in Africa are more likely to experience physical or sexual violence than older women are, generally from an intimate partner. More than two thirds of newly infected 15- to 19-year-olds in Sub Sahara Africa are female. A UNFPA report of 10 March 2021 has flagged high levels of genderbased violence by an intimate partner.

In an effort to amplify the campaign against GBV, INERELA+ signed an agreement in September 2021 for a project which intends to address existing challenges, SRHR, GBV and harmful social cultural practices through an interfaith lens. The Project will be implemented in Malawi and Kenya as well as at the regional level. By positioning religious leaders and the faith community as champions of ending GBV and harmful social cultural practices the project will contribute to the improvement of SRHR outcomes amongst young people particularly adolescent girls and young women within communities. The project will enhance the capacity of Religious Leaders through a threepronged approach that focuses on three key areas namely CSE, Strengthening Community Structures and Advocacy.

# **UNERELA+ Strengthens**

# Capacity of Religious Leaders SGBV and HIV Prevention

In Uganda 63 faith leaders were trained on HIV prevention treatment and care, sexuality and gender, and gender-based violence using the SAVE Toolkit. Over 2000 community members both in Kagadi and Hoima District were reached with messages on HIV prevention, SGBV and SRHR. During an External Evaluation in the concerned districts from a population of 2000 community members was recorded through:

# Knowledge on Sexual and Reproductive Health

At least 67% of the respondents were able to identify 3 or more physical body changes that occur in boys while 71% of the respondents were able to identify 3 or more physical body changes that occur in girls. This implies that adolescents are aware of their body changes however sexual education in schools is

encouraged to reach a wider group of adolescents.

Majority of the target population was able to highlight that they were responsible for their sexual health. It should be noted that 71 respondents mentioned parents/ caregivers as being responsible for their sexual health implying that parents /caregivers should be targeted with messages on SRHR to properly educate the young people at family level.

"Parents need to be sensitized on how young people can access SRHR services" says one respondent during a focus group discussion

# Increased knowledge on safe sex, abstinence in preventing HIV and STD

At least 74% of the respondents were able to identify 2 or more ways in which HIV is transmitted and only 26% mentioned 1 or weren't sure on the ways in which HIV is transmitted. In relation majority of the respondents

89% were able to mention more than 2 ways in which HIV can be prevented. At least 69% of the respondents were able to mention 3 or more symptoms of STIs and only 31% mentioned 2 or less symptoms of STIs implying that majority of the respondents are knowledgeable on safe sex.

# Community sensitive about risks of SGBV

At least 97% of the respondents were aware of SGBV and how it starts in a family or community while 2% were not aware of the term SGBV while 1% didn't have a response. This indicates that most of the respondents are now knowledgeable about SGBV with 95% respondents able to mention at least 3 of the different forms of GBV. It should be noted that physical violence was the most prevalent form of sexual gender-based violence highlighted by respondents in Kagadi (108) and Hoima (180) districts respectively.



# INERELA+ Ghana Holds Training on Violence Against Women and Girls

Gender based violence is seen as any harmful act perpetuated to a person against their will. This violence comes in many ways that include emotional, phycological, finance and physical abuse women and girls are mostly affected by GBV. In west African countries GBV still is at its pick it is and triggered mostly the patriarchal social structures that still exist in these countries, the financial suppression and alcoholism. Though GBV has been acknowledged as a major public concern that threatens the achievement of gender equalities and empowerment of women by many countries it is however still very much evident in many African countries including Ghana.

Commission on Human Rights and Administrative Justice (CHRAJ) exposed journalists to professional and acceptable ways of writing and documenting well conceptualized news stories or articles about abuse and violence of women and girls.

In an interview with the Deputy Director of Administrative Justice at CHRAJ Ghana, Mrs. Esther Annor, she urged the society to stop stigmatizing domestic violence survivors. She confirmed that many survivors of domestic violence refuse to speak up and seek help from designated institutions as a result of the fear of being stigmatized and discriminated against which they experience from others. Mrs Annor further stated that the UNWomen estimates that worldwide, 1 out of 3 women experience violence and this has to be addressed at all levels. She encouraged survivors of domestic implemented for a project which aimed to create awareness on the need to end and reduce domestic violence stigma and discrimination against women and girls. The project is currently being implemented in three communities in Accra Ghana namely Chorkor, James Town and Nima

# INERELA+ Malawi Engages in Outreach on Treatment Adherence and Faith Healing

The treatment, adherence and faith healing seek to challenge the false separation that places treatment and faith healing at opposite ends of the spectrum. The intent is to mobilise religious leaders to regards treatment therapy as an integral part of God's healing strategy. It also encourages religious leaders to play a critical role in promoting HIV testing, treatment uptake and adherence in the context of HIV and AIDS.

To achieve this INERELA+ Malawi engaged in an outreach in Blantyre, TA Kapeni-it was facilitated by Apostle Tamale. The outreach commenced with talks with the congregation (women and men) about HIV&AIDS prevention and treatment and faith. This was followed by a door-to-door outreach to families in the community who were reached with messages and information that encouraged community members to go test for HIV, be willing to accept the outcome of the test, commence treatment if possible and not discriminate against those who are positive. Messages shared encouraged members that whilst they have faith, they must also ensure that they do not default in their treatment as faith alone would not be sufficient for the required treatment, they were encouraged not to separate the two so that they can live a better healthy life.



INERELA+ GHANA holds training on violence against women & girls

As part of the series of activities to advocate for issues related to Violence Against Women and Girls (VAWG), INERELA+ Ghana, held a media training on violence against women and girls. The training aimed to build the capacity of journalists in ethical ways of reporting issues about the rights of women and girls and stories about survivors of any form of violence. A resource person, Ambrose Cori, who is a Senior Investigator at the

violence to report any experience they have so that perpetrators can face the law- this she said can also serve as a warning to others. A legal officer at CHRAJ, Mr. Cephas Essiful- Ansah, verified Mrs Annor's submission by confirming that 31.9% of women in Ghana have experienced one form of domestic violence.

The Country Coordinator of INERELA+, Ghana Mercy Acquah- Hayford said the training workshop was part of activities

# INERELA+ Sierra Leone Empowers Women, Girls & Peer Educators with Comprehensive Information on SRHR, GBV, SGBV, HIV/AIDS & COVID-19

The sessions were facilitated by the INERELA+ Coordinator-Rev. Albert Freeman. He took participants through in-depth learning sessions about SRHR, GBV, HIV/AIDS and COVID-19.

Prior to this it had been a challenge to discuss some issues such as sex and sexuality. Participants were of the



Capacity building and training activities are very critical they enable organisations to provide and develop competencies and skills that can be more effective and sustainable as a result increasing potential for others to enrich their lives and solve any form of problems and challenges they may encounter. INERELA+ therefore believes in providing capacity building trainings to societies and communities they work with especially the most vulnerable communities. To push this mandate forward INERELA+ Sierra Leone conducted capacity building activities for 50 women at the Door Church and Redeem Church. Ten peer educators were also trained to carry out house to house community awareness raising on Sexual Reproductive Health Rights (SRHR), Gender Based Violence (GBV) and HIV/ AIDS and COVID 19 prevention.

impression that religion and culture despise these issues and as such should be avoided by all means. This training changed their mindsets and deception about these issues. They were thrilled to see a faith leader facilitate such conversations which were seen as a taboo by many. Many adolescents in Sierra Leone lack the information and resources to make informed decisions about their sexual and reproductive health rights. This is due to the cultural nature they grow up in where such issues are not talked about. The peers' educators after the training embarked on a door-todoor awareness and engaged several families in discussions relating to different issues and empowered them with correct information and informing them of the activities implemented by INERELA+ Sierra Leone.

# SANERELA+ Holds Knowledge Sharing Forum For Women About Gender Based Violence (GBV)

The South African statistics show that most of the victims of GBV are women and girls. GBV is deeply entrenched in institutions, cultures, and traditions of South Africa. Patriarchal power structures continue to dominate in most parts of South Africa. Women and girls continue to face challenges of abuse daily within their communities and their homes. Unfortunately, most women are still oblivious of these acts of abuse; tradition and culture have conditioned the minds of many women to see abuse as a norm and that men who are perpetrators cannot be reported or challenged. For many women perpetrators of abuse are mostly their partners. Unfortunately, victims are rarely without information on how or where to report these cases. According to the World Health Organisation, South Africa has one of the highest rates of violence inflicted on women and girls. Though 51% of women in SA say they have experienced GBV, with 76% of men saying they have perpetrated GBV at one stage in their live according to the 2010 Gauteng GBV sample most women are not aware that they can be raped by their husbands or partners. SANERELA held a Gender Based Violence workshop specifically for 21 survivors of GBV from Diepkloof Soweto on the 21st of April 2021. The workshop sought to teach them ways of fighting for their rights and ensuring that they are able to report any incidences of violence. They were given a safe space where they could freely talk about GBV. The survivors who attended

the workshop had never been educated on issues relating to GBV. The workshop further taught survivors and women that consent is always key and that irrespective of who they are with consent must be given before the engage in any sexual activity.

# Transformative Masculinity Workshop in Madagascar

respective communities about GBV to promote gender justice. Religious Leaders also committed to include transformative masculinity in their sermons and in their discussions and outreach activities within faith communities. This they said would be done with the intent of ensuring that the attitude of men and boys change and acknowledge their responsibilities in building a society free from any form of violence. The participants collectively agreed that the

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This was the first meeting of its kind in Tanzania where religious leaders had a direct engagemen with people living with HIV. During the meeting, PLHIV got a chance

leaders had a direct engagement with people living with HIV. During the meeting, PLHIV got a chance to share their testimonies with religious leaders showing the stigma and discrimination they are faced with daily. The dialogue was graced by 22 participants from Tanzania mainland 9 females and 13 males.

TANERELA'+ Coordinator, Mossy Ismail said they are pleased to bring the two parties together and enable religious leaders to learn from the evidence presented about the intensity of stigma experienced by PLHIV, to coordinate further dialogue and collaboration between religious leaders and PLHIV, and to reaffirm trust between PLHIV and religious leaders.

Tanzania Commission for AIDS (TACAIDS) representative presented the stigma index study done in 2013 by the government of Tanzania. He said though many faith-based organizations are involved in eradicating the stigma in their communities more still needs to be done. In his presentation, he acknowledges that stigma is still a huge problem hindering the achievement of the 95-95 -95 goals set by UNAIDS which promotes zero discrimination on PLHIV and also states that 95% of people living with HIV know their HIV status; 95% of people who know their status are on treatment, and 95% of people on treatment with suppressed viral loads. He mentioned that the participation of religious leaders in eliminating the stigma is critical. He noted that the 2013 stigma index study gives evidence of major forms of stigma and discrimination experienced by PLHIV that include being verbally insulted, excluded from social, family as well as religious activities.

Evidence shared by PLHIV and the stigma index study



INERELA+ Madagascar ran a one day SAVE training workshop on "Transformative Masculinity" translated in Malagasy as "Fanovam-piheverana momba ny Lehilahy. This was the second workshop in this series held by INERELA+ Madagascar. The workshop was centered around deep-rooted discussions that reflected on gender-based violence.

At the workshop, 12 religious leaders and 7 lay people, including 2 youth members were represented. Key populations that were present at the training were, 1 representative from the LGBTQI community, 2 from the association of People Living with HIV (PLHIV) those who take drugs, and sex workers. The National Ministry of Health was also invited and brought one representative. All 24 participants at the workshop committed themselves to train women and men in their

induction for transformative masculinity should begin at a young age for boys.

# TANERELA+ Conducts A Dialogue to End HIV Stigma

TANERELA+ conducted a dialogue meeting with national religious leaders from four main religious denominations in Tanzania as well as with people living with HIV from the 26 to 27 of August 2021. The two-day dialogue meeting was meant to raise discussion about the stigma faced by PLHIV in Tanzania and ways of eliminating the stigma. Christian organizations represented at the dialogue meeting included the National Council of People Living with HIV/AIDS (NACOPHA) Christian Council of Tanzania networks, (CCT) Tanzania Episcopal Conference (TEC), and Tanzanian Muslim Council

established the need to urgently engage religious leaders to take more concrete action and eradicate all forms of stigma that exists in their communities and within their congregations.

# INERELA+ Celebrates World Menstrual Hygiene Day

Menstrual Hygiene Day (MHD) is commemorated every year throughout the world on 28th May. This is done to raise awareness on the importance of good menstrual health management and hygiene for women and girls; also to break the stigma and the taboos associated with menstruation. Menstrual Hygiene Day 2021 was celebrated under the theme; "It's time for action", encouraging the world to step up and invest in menstrual health and hygiene. Three countries (Ghana, Kenya, and Nigeria) collaborated with other partner organisations and youth in their respective countries to implement advocacy activities that ranged from encouraging policy makers to remove taxes imposed on sanitary towels, to emphasize the need to provide easy access to water which will enable girls to maintain proper hygiene during their menstrual cycle.

Furthermore, the distribution of sanitary towels to vulnerable women and girls living in informal settlements took place in Ghana. Whilst this may not be seen as sustainable it provided them with enough for a period of time which was appreciated by the recipients. They also conducted workshops and engaged in pre - media campaigns on social media to create awareness on challenges faced by girls/women during menstruation. At least 5000 women and girls were reached through these activities on the social media.

INERELA+ launched a campaign through use of a digital menstruation bracelet and the campaign was recognised by WASH United – the coordinators of Menstrual Hygiene Day in Berlin. In conclusion these activities served as an opportunity to empower women and girls with correct and comprehensive information about menstruation and their menstrual rights.

# MANERELA+ Pushes Back Against Forced Marriages in Malawi

MANERELA+ in collaboration with other civil society organisations, traditional leaders and religious leaders embarked on a project aimed at eliminating early forced marriages in Denza district in Malawi. This project has evidence of rescuing at least 23 girls from forced marriages. This one-year initiative targets the young adolescent girls affected by forced marriages.

The project is also intended to eliminate Gender-Based Violence and promote Sexual Reproductive Health Rights (SRHR) for adolescent girls. To date, the project has approximately prevented 103 girls from getting into forced and unwanted marriages since the inception of the project. MANERELA + trained a group of mothers who are contributing to the increase of the number of girls being reached by the project. The group of mothers also provide educational activities on social issues that include GBV and SRHR for young women and girls. The group of mothers use several mechanisms to train the adolescent girls, training activities are held through awareness campaigns in places of worship, focus group discussions, and dialogue meetings. Despite this, young women and girls are still faced with a lot of challenges that force them to get into forced early marriages including poverty. The project has managed to encourage behaviour change most especially among the faith communities and stop officiating marriages for girls below the age of 18.

# Religious Leaders Improve Access to HIV Services in Kenya

INERELA+ Kenya started a new project aimed at improving access to HIV services for men and women and children affected by HIV and to participate in the fight against sexual violence against children. This initiative was implemented through religious leaders' champions who were trained to effectively respond to the HIV and SVAC issues. The project has supported approximately 60 religious leaders and had at least 14 HIV Testing Service counsellors in the sub-counties of Kenya; these include Kasarani, Kamukunji, Embakasi East, Embakasi West, Ruaka, Westlands, Starehe, Dagoretti North, and Dagoretti South in Nairobi County. The religious leaders sensitized the community at large on creating HIV awareness and how to use the Self-testing kits.

As a result of the COVID-19 related lockdowns, challenges were experienced with implementation and reaching the targeted audience. INERELA + Kenya, at least 60% of the targeted audience were reached via social media platforms such as, WhatsApp, Facebook, Twitter, and Instagram. All engagements on these platforms were interactive and through these the project was able to reach a wider scope of people across the country. INERELA+ Kenya also supported champions to disseminate and engage with different audiences through

these platforms biweekly-this ensured that there was constant and consistent interaction with people. During the period of project implementation, INERELA+ Kenya was able to reach an estimated number of over 150,000 people with key HIV messages as well as the messages of hope and 6582 people were reached with HIV testing services. Those who tested positive were linked to care and treatment centres and linked to congregational psychosocial support groups for counselling.

# INERELA+ Ghana Dedicated to Advocate for Human Dignity

INERELA+ values people's dignity and ensures that it is defended and respected in all spaces of life. It is committed to upholding human dignity and ensures that everyone is treated with the equal respect that they deserve despite their life challenges. This is achieved through many projects being implemented by INERELA+ country networks. To maintain this and ensure human dignity is sustained INERELA+ Ghana held a capacitybuilding training workshop for 71 women struggling with Gender-Based Violence (GBV) and 19 young pregnant girls. Through the training, they are given psychological counselling by religious leaders and empowered in different ways with the aim of improving their self-esteem.

The participants were empowered with, among others economic skills, and business skills they were empowered with knowledge of making their own money and not depending on their partners to sustain their livelihoods. Young girls were given skills such as plating hair to make money for themselves, making wedding hats, and producing soap to sell. This training was facilitated by 3 religious leaders and INERELA + Ghana country coordinator and other beneficiaries with the necessary skills that include production of soap and hairdressers.

This was a life-changing experience for both women and girls who had attended, their perception about life changed after the training. The participants felt empowered and capable of taking control of their lives while at the same time avoiding falling into the struggle of genderbased violence perpetrated mostly by their partners. With the knowledge gained INERELA + Ghana hopes that the young girls and women will manage to make enough money to sustain their future. Other young girls trained showed that they would like to further their studies after giving birth, saying with the skills obtained, they will be able to save enough money to help them pursue their dream. The young girls did not only attend the capacity-building training but also attended psychological counselling provided by religious leaders. The counselling was meant to uplift their self-esteem and also to let them know that pregnancy does not mean an end of their future, that they can still achieve all that they aspire even after their pregnancy.

# Sex Work is Not a Crime INERELA+ Botswana

INERELA Botswana under the Hands-Off project hosted three dialogues with religious leaders and sex workers in Gaborone and Palapye districts. The dialogues were meant to reduce violence against Sex Workers through prevention, care, and support. In attendance to support this initiative was the AIDS District Coordinator from Gaborone. The dialogues took place on 18 August, 17 September and 23rd of September.

At the dialogue meetings, the sex workers shared their personal experiences, showing the shame and discrimination associated with the work they do both in the communities and places of worship. The participants were counselled and advised to go back to faith institutions and advised on how to protect themselves from contracting HIV and other sexually transmitted diseases. Religious leaders also learned that sex work is not a crime nor a sin and that people who engage in this work need as much support as everyone else. Though some of them still found it difficult to open up and build rapport with religious leaders, the workshops were still a success. Other sex workers mentioned that they would like to build better relationships with religious leaders and asked for more workshops with religious leaders.



# Generation Equality Forum (GEF) Held in Paris, France 30 June - 2 July 2021

The INERELA+ Acting Executive Director participated at the Generation Equality Forum hosted by France from 30 June to 2 July 2021. This forum aimed at bringing together all stakeholders committed to gender equality to review progress and make concrete, specific and ambitious commitments to accelerate progress towards gender equality at a time when the COVID-19 crisis has exacerbated gender inequalities when we are entering the last decade for achievement of the Sustainable Development Goal 5. It presented a vital moment for activists, feminists, youth, and allies to ensure that gender is at the centre of the post-COVID agenda and to achieve transformative change for generations to come. The same forum kickstarted a 5-year journey to accelerate ambitious action and implementation on global gender equality. \$40

billion in financial commitments was generated, as well as multiple policy and program commitments.

# Faith Actors for Justice Network – Strengthening Partnerships For Gender Justice

Justice is at the very heart of faith. It is a fundamental biblical and theological concept. If gender roles are defined to limit and restrict full humanity for women, then this system is not fair and is not based on justice. Gender injustice continues to be a controversial issue in many religious and political spaces, with fundamentalist beliefs creating polarisation at local, regional, and global levels. This has particularly serious effects on the lives of women and girls who, being marginalised, are always at the greatest risk of being 'left behind' by development.

INERELA+ secretariat joined other faith-based organisation in

consultation on Women's Rights in Christian communities to shed light on the structural causes of poverty and gender inequality as well as lobby parties to agree to preserve the call for gender equality as a critical aspect of women's rights. The steering committee group members comprised of Faith to Action Network, ACT UBUMBANO and Act Alliance. Harnessing our decades of experience and building on collaboration with our strategic partners INERELA+ called on faith-based actors to 'get their own house in order' through fighting against religious fundamentalism; promoting comprehensive approaches to gender justice; and pushing for a holistic implementation of all human rights. Consultation sessions were spread over 7 weeks from 30 August 30th to 7 October 2021. The consultations sought to encourage and ensure that faith-based organizations advance women's rights and take concrete action in challenging gender discriminatory norms, customs and practices which have been created, reinforced, and shaped by patriarchal structures within their spaces.

This platform offered an opportunity for the empowerment of progressive inter faith- religious leaders and organisations to combat unjust systems, understand, entrench, institutionalize, and mainstream women's rights. Furthermore, it gave INERELA+ the opportunity to showcase its organisational capability and to network with other interfaith organisations which have the potential to pave way for future collaborations.



Dakar, Senegal Summit

# High Level Regional SummitDakar Senegal – A Renewed Commitment to End AIDS In West and Central Africa – 31 October to 2 November 2021

From October 31 to November 2, 2021, the INERELA+ Acting Executive Director attended a regional summit where the Heads of State of Senegal and the Democratic Republic of Congo, the First Lady of Sierra Leone, Ministers of Health from 15 countries, civil society leaders from the region, and multilateral and bilateral partners in the global response to HIV met in Dakar, Senegal, for a high-level summit on HIV/AIDS. The same summit was co-hosted by UNAIDS and the Civil Society Institute on HIV and Health in West and Central Africa, civil society and the Government of Senegal under the chairmanship of President of Senegal, Mackey Sall. Through this summit INERELA+ had a chance to review new data and progress in the fight against HIV over the past 5 years together

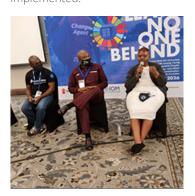
with governments, civil society actors, community organizations and scientists. INERELA+ had an opportunity to share with partners the context, and challenges in West and Central Africa– Regional bottlenecks, opportunities, best practices, and innovations around HIV responses.

The Dakar Call to Reinvent the Response to the HIV Pandemic called for urgent action in four main areas:

- Expansion of communityled infrastructure and organizations to strengthen national systems for health and shift policies to enable sustained funding for community organizations.
- Updating of health policies to align with the latest HIV science and evidence
- Increase in national and international resources for HIV in the region by 33% by 2025 and removal of financial barriers to access health services by people living with HIV.
- The need to put HIV and COVID-19 at the centre of pandemic preparedness and response.

# Third High Level Regional Roundtable Dialogue for Traditional and Faith Leaders on SRHR

Through a Regional Roundtable Consultative Forum organized by IOM and Save The Children International from 24 to 26 November 2021 the INERELA+ Acting Executive Director and Reverend Nokuthula Dhladhla of INERELA+ South Africa were able to engage with partners, Religious Leaders, Traditional Leaders, and policy makers from six Southern African Countries. Sexual and Reproductive Health and Rights remain a priority for INERELA+ work. This forum gave INERELA+ a chance to share gaps, achievements, and recommendations on SRHR issues of young people, migrants, and sex workers. The dialogue was themed "Leaving no one behind" and broadly aimed at finding a common approach in addressing social challenges in the region. The dialogue engaged stakeholders from six countries (Eswatini, Lesotho, Malawi, Mozambique, South Africa, and Zambia) where the SRHR HIV Knows No borders project is implemented.



Rev Nokhuthula of INERELA+ South Africa Emphasizing that Religious Leaders Cannot Continue to Officiate Child marriages

The focus issues of this dialogue were on SRHR, child marriages, teenage pregnancies, genderbased violence, HIV, child labour, access to essential health services and migration. The INERELA+ Acting Executive Director took a stand and established her concerns about harmful practices, lack of political will and lack of information about SRHR issues for young people.



# ICASA 2021 Conference

The 21st ICASA was supposed to be held at the Durban International Convention Centre, South Africa from 6th December to 11th December 2021. However, due to COVID-19, and the emergence of the Omicron variant, the conference went fully virtual. ICASA 2021 was a platform for the international community, and Africans, to commit to achieving an AIDS-free generation and strengthen health systems within the continent and to create more awareness of the growing threats of emerging viral diseases.

### **ICASA 2021 Objectives:**

- To strengthen health systems to integrate high impact interventions on comorbidities, emerging infections and NCDs.
- To build, strengthen and invest in Africa's scientific capacity and manufacturing of vaccines, diagnostics, and therapeutics.
- To Identify in Africa, resource tailored interventions for populations most affected including women, children, adolescents, men, and Key Populations.
- To evaluate the impact of COVID-19 on the HIV/AIDS response and share lessons learned in overcoming barriers in maintaining continuity of care for people living with and at risk for HIV infection.
- To amplify national, regional, continental, and global integration to reach epidemic control in Africa: Contributions from Africans in the Diaspora.

INERELA+ virtually joined the Conference which was themed "Africa's AIDS response: The race to 2030 – Evidence. Scale Up. Accelerate"

Under the FBO Networking Zone the following sessions were featured

- Raising awareness and mobilizing action for African children during COVID-19
- · Mental Wellness
- Young People and Faith Communities partnering to End AIDS

Presentations were done on a number of topics and INERELA+ gained knowledge on the topics helow:

### **HIV Testing Services**

- Point of care modalities such as self-testing kits are very important alternatives during COVID-19 and in future crisis to ensure continuity of HIV testing services and monitoring HIV infection such as CD4 and viral load.
- The need to combine strategies to achieve the 1st 95%: HIV community-based testing, HIV self-testing, index testing services for vulnerable and key populations, acceptable screening tool in general population, adolescent and key populations, Preexposure prophylaxis (PrEP) and HIV combination prevention. Furthermore, HIV self-testing is more cost effective than onsite testing

### **Pre-Exposure Prophylaxis**

- Oral PrEP is a big challenge within Adolescent Girls and Young Women (AGYW).
- There is a limited understanding of PrEP within adolescent boys and young
  mon
- Dapivirine vaginal ring is well tolerated and effective in reducing HIV incidence in women
- There is a need for broader social awareness about PrEP by implementing programmes

- package distinctively to minimize confusion with HAART.
- Women who received their PrEP through NGO are less likely to experience high depression compared to that got their PrEP from public facilities.

### Sexual and Reproductive Health and Rights Interventions

- The period of COVID-19 witnessed an increase in child marriages.
- There is need of social and economic protection for female sex workers during COVID-19
- The period of COVID-19 witnessed an increase in harassment, for young Sex

- Workers, LGBTQ+, abuse as well as more physical and psychological violence.
- The period of COVID-19 witnessed an increase in medicines stock out, closing of health facilities and difficulties in accessing Sexual Reproductive Health and Rights (SRHR) commodities and services.
- There is a need to scale up HIV prevention programme among Adolescent Girls and Young Women (AGYW) interventions

# **Strengthening Community Services**

- Implementation of more robust mental health services and social support is critical for prevention of HIV transmission and violence.
- Maintaining uninterrupted

- access to essential prevention, testing, and treatment services for MSM during the pandemic required using integrated and community-based strategies that minimize potential risk for COVID-19 exposure but improve access to HIV services.
- HIV/AIDS control in massive crisis needs more partnership between nations and health system strengthening.
- It was recommended that religious groups play an important role in the eradication of HIV/AIDS stigma and discrimination in Africa as well as educating communities on the importance of HIV testing, treatment, retention on ART and prevention.
   Social and Environmental Responsibility is today our irreversible commitment.



	INERELA+ COUNTRY NETWORKS															
LIST OF DONORS	Botswana	Burundi	DRC- CONGO	Ghana	Kenya	Madagascar	Malawi	Mozambique	Nigeria	Rwanda	Sierra Leonne	South Africa	Tanzania	Uganda	Zambia	Zimbabwe
AIDS FONDS								•				•			•	•
Bread For the World							•	•			•	•				•
Church Of Sweden	•						•	•	•		•					•
Robert CARR – Core Grant	•	•	•	•	•	•	•	•	•	•	•	•	•		•	•
Robert CARR - EOF		•	•	•	•	•	•	•	•	•	•	•	•		•	•
UN WOMEN		•		•								•				
UNAIDS - ESA					•		•									
UNAIDS - FBI													•			

# AUDITED AND EXPENDITURE

# **INERELA+ NPC**

(Registration number 2004/007199/08)
Annual Financial Statements for the year ended 28 February 2022

# **Detailed Income Statement**

Figures in Rand	Note(s)	2022	2021
Revenue			
Income from grants		10 790 673	10 653 314
Other operating income			
Other Donors Income		31 480	8 746
Other operating gains (losses)		*	
Foreign exchange (losses) gains	7	(115 412)	12 724
Other operating expenses			
Asset insurance & repairs		(30 878)	(33 275)
Auditors remuneration - external auditors		(155 743)	(154 586)
Bank charges		(39 883)	(58 152)
Board meetings and workshops		(206 305)	(62 832)
Capacity Building		(741 453)	(394 575)
Computer expenses		(32 640)	-
Consulting and professional fees		(97 458)	(272 171)
Depreciation		(81 798)	(23 024)
Employee costs		(3 443 222)	(4 174 775)
Fines and penalties		(704)	•
IEC Materials		(221 906)	(38 250)
Lease rentals on operating lease		(237 150)	(228 110)
Medical & Support to members		(78 775)	(17 405)
National chapters and regional offices support		(5 892 701)	(4 409 780)
Office supplies & cleaning expenses		(56 838)	(28 128)
SAVE Toolkit		(783 730)	-
Telephone and fax		(150 942)	(112 680)
Travel - International & National conferences		(12 713)	6 640
Travel - local		(7 202)	(5 975)
		(12 272 041)	(10 007 078)
Operating surplus (loss)		(1 565 300)	667 706
Investment income	8	35 113	52 045
Surplus for the year		(1 530 187)	719 751



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