

Religion and Development: The Redeemed Gospel Church and the Fight against HIV and AIDS in Kenya

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Abstract: The purpose of the study was to investigate the role of the Redeemed Gospel Church (RGC) in the fight against HIV and AIDS in Kenya. The RGC was relevant in this study due to its strong belief in healing and its active involvement in development projects in Kenya. Qualitative and quantitative research methods were used for data collection. The qualitative data was processed through coding and critical analyses while the quantitative data was analysed through descriptive statistics in which the Statistical Package for Social Sciences (SPSS) was used for data analyses. Data presentation was done by use of frequencies and percentages. The study found that the RGC plays a role in the fight against HIV and AIDS in Kenya. This is evidenced by the programs established by the Church to alleviate suffering brought about by HIV and AIDS among its members and the community in general. The researcher recommends that religious organizations be actively involved in the fight against HIV/Aids because they are better placed to deal with challenges posed by HIV and AIDS among other social maladies. The study aims at forming a basis for a forum to enlighten the public of the risks of keeping quiet about HIV and AIDS. The study provides information which is useful in launching a campaign towards creating awareness of the importance of Church involvement in the fight against AIDS. The findings may be useful to the clergy and other religious leaders in their fight against HIV and AIDS. The study would also directly benefit the church members and church leaders by employing the study's recommendations to come up with programs that facilitate HIV and AIDS awareness and counseling. The study findings can be used by future researchers as reference materials.

Keywords: HIV/Aids, Religion (Church), Development

INTRODUCTION

One of the contemporary issues which have led to increased social and economic instability is the spread and the impact of Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) pandemic. There is limited number of studies on HIV/Aids from a religious perspective because most researches have medical biases. It is against this background that the present study endeavored to investigate the role of the Church in the fight against HIV/Aids in Kenya and focused on Katangi Division of Machakos County as a case study. The results obtained were found to be generalizable across the country and therefore, the study findings qualifies to be applicable in Kenya as a country.

HIV/Aids negatively affect all aspects of life: social, spiritual, psychological and economical life of people. The Church has a divine mandate to continue with the caring and healing ministry of Jesus. The church related HIV/Aids programs have guaranteed success because churches are important points of entry

into the community since in Africa people listen to religious authorities more than any other. Religious leaders are in a unique position of altering the course of the epidemic since when they speak their followers will "religiously" listen and do as directed. According to Shorter [1], the Church is in a unique position to make huge contributions on HIV/Aids pandemic. As such, it should be mainstreamed in all the activities of the church in Kenya. Although Shorter [2] acknowledges the Church's unique position in the fight against HIV/Aids, he has not given specific roles for the Church in the fight against HIV/Aids. In addition, he does not point out how the Church will use its position in the fight against HIV/Aids. This was a core task of the study.

HIV/AIDS AND THE CHURCH

Kilbourn [3] describes HIV/Aids as a poverty seeking missile. He further asserts that HIV/Aids infection not only thrives in impoverished environments, the disease is itself a potent cause of poverty. Households in which family members have

been affected have higher expenditures due to costs of seeking medical care and reduced incomes associated with loss of affected breadwinner's earnings when the breadwinner dies. Instead of seeing reductions in HIV/Aids transmission, the pandemic lead to poverty perpetuated by a vicious cycle of orphan hood, poverty and increased vulnerability.

Dube [4] contends that HIV/Aids is an epidemic among other social epidemics of injustice. HIV/Aids epidemic affects all aspects of human live; cultural, spiritual, economic, political, social and psychological. HIV/Aids is considered as God's punishment for the immoral corruption of humankind, which is a judgmental attitude. At the same time, Dube points out that, HIV/Aids need to be integrated into biblical studies and theological programs in general. On the HIV/Aids impacts, Dube holds that it negates life as a whole, brings suffering, fear and hopelessness.

Garland [5] argues that in the 1980s HIV/Aids first appeared as a real danger to the health, development and survival of millions of individuals, families and communities throughout the world. Since then, more and more people all over the world have contracted the virus. In addition Garland [6] holds that the Christian Church in Africa is uniquely positioned to address most of the aspects of the HIV/Aids pandemic. The Church has a massive yet often untapped, potential to successfully reverse the course of the pandemic. Garland [5] acknowledges the Church's key position to address most of the aspects of the HIV/Aids but has not shown the role of the church as far as HIV/Aids is concerned.

Hopponen [7] points out that in Africa HIV/Aids are transmitted mainly through sexual intercourse (87%) parent to child (10%) blood product (2%) and skin piercing instruments (1%). By the end of 2005 there were 40.3 million people living with HIV/Aids in the world [8]. There were 4.9 million new HIV/Aids infections and 3.1 million deaths due to HIV/Aids. Sub-Saharan Africa has 10% of the world's population but is home to more than 60% of all people living with HIV/Aids. In Kenya, the scenario is not any different. HIV and AIDS has its toll on the Kenyan population since it was first diagnosed in 1984.

According to Sina Newsletter [9], HIV/Aids is an urgent housing and human settlement issue, especially among women and children living in poverty and suffering from poor housing conditions in urban slums. Inadequate shelter increases the vulnerability of the urban poor to HIV/Aids. The immense human settlement challenges in urban slums, overcrowding, severe insecurity, inadequate water sanitation and basic services are intensified by the impact of HIV/Aids.

UNICEF [10] reports that at the school and community levels, the predominant aspect of stigma and shame further alienates vulnerable children from the educational systems. According to the NASCOP [11] report, HIV/Aids has major economic and social impact on individual, communities and society as a whole. In Kenya HIV/Aids threatens personal and national wellbeing by negatively affecting health lifespan and productive capacity of the individual and severely constraining the accumulation of human capital and its transference between generations.

Gunyali [12] contends that HIV/Aids infected people are viewed as immoral or promiscuous; which make them feel rejected. Although churches are promoting awareness at the grassroots level there is need to address discrimination in the structure of Kenya's social and economic institutions. Aawrd [13] observes that Kenyan women are more susceptible to HIV/Aids than their male counterparts due to prevailing male dominance and female subordination, especially in sexual encounters. As such, the Church has a role to empower both men and women to transgress the socio-cultural boundaries on gender and emphasize gender mutuality and complementary so as to alleviate the suffering of HIV/Aids infected women. A lot has been written on HIV/Aids, its causes, its impacts, ways of prevention and management but there are very few studies of what the Church has done in the fight against the scourge, hence the need for this study.

THE THEORY, THE CHURCH AND THE HIV/AIDS

The study was guided by three complementally theories. These are Maslow's hierarchy of needs, Rogers person centered theory and Skinner's reinforcement theory [14]. Maslow's hierarchy of needs theory was instrumental in explaining the causes and transmission of HIV/Aids while Rogers and Skinner theories guided in ways of prevention and management of HIV/Aids. These theories give a psychological view of religion, emphasizing its usefulness in meeting needs of human kind.

Maslow's theory of hierarchy of needs holds that each individual is born with instinctive needs that make them grow, develop and fulfill their potentialities [14]. The hierarchy of needs is the arrangement of the innate needs from strongest to the weakest that activates and directs behavior. According to Maslow [15] the behavior individuals satisfy their needs and aware and therefore are subject to variation from one person to another. This relates well with the mission of Jesus Christ, which is about meeting the needs of the people.

Humanity in the attempt to satisfy the physiological needs such as sex, some unfortunately end up contracting HIV/Aids. Maslow's hierarchy of needs theory used in this study was instrumental in

explaining the causes and transmission of HIV/Aids, but failed to highlight how HIV/Aids can be prevented and managed. This created the need for another theory to complement it.

Rogers [16] person-centered theory was also instrumental in this study. This theory views individuals as having the ability to change and improve their personality, present feelings and emotions. For the fight against HIV/Aids to be won, there is need for advocacy for behavior change. Rogers believes that humans are rational beings ruled by conscious perception of themselves and experiential world. Rogers, thus; holds that behavior change is possible and can be advocated as a major strategy to prevent the spread of HIV/Aids in the society.

Rogers further discusses unconditional positive regards. This is an approval granted regardless of a person’s behavior, for instance, when people living with HIV/Aids are rewarded by the community with affection, approval and love. When they are cheerful they generate positive self regard hence begin to achieve self-reward. Rogers’ person centred theory is silent on behavior control in relation to HIV/Aids infection hence creates need for the application of B.F Skinner’s theory to supplement it.

Another theory, which is integrated in this study, is Skinner’s theory of reinforcement. For Skinner [17] all behavior can be controlled by its consequences. The basic tenet of Skinner’s approach is that behavior is controlled and modified by variables, extended to the organisms [18]. A desirable behavior can only be realized through the individual’s ability to exert control over the variables that determine their behavior. Therefore behavior change which is a weapon in the fight against HIV/Aids can be realized by individuals simply removing themselves from an external variable that urges them to engage in a risk situation as far as

HIV/Aids is concerned. The three theories integrated in this study greatly assisted in understanding and analysing the causes, transmission, prevention and management of HIV/Aids.

METHODOLOGY

The study employed mixed methodology; qualitative and quantitative methods. The two methods were necessary to ensure that both the voice of the church leaders and the members were heard. 200 questionnaires were distributed to informants out of which 150 questionnaires were given to the Church members and 50 to the Church leaders. The study also conducted a total of 10 interviews with RGC leaders in the study area. The data from the two methods was integrated in the analyses and discussion. The data was analysed using discussion, critical analysis and descriptive tools of analysis. Frequencies and percentages were used and the presentations were done using graphs as a summary. The computer program, the Statistical Package for Social Sciences (SPSS) version 16 for windows was used to assist in data analysis. Analysis of data was important in explaining the variables of the study. The data from the interview schedules for the church leaders was also analysed using discussion and data from the questionnaires analysed through descriptive statistics. On the basis of these findings the researcher was able to make conclusion, suggestions and recommendations for future action and research.

RESULTS AND DISCUSSION

This section discusses the findings with reference to the role of the RGC in the fight against HIV/Aids. The purpose of the study was to examine the role of the Redeemed Gospel Church in the fight against HIV/Aids in *Katangi* Division of Machakos County. The study established that, the Church has set up program to create awareness and sensitization on HIV/Aids in the Church and the community in general.

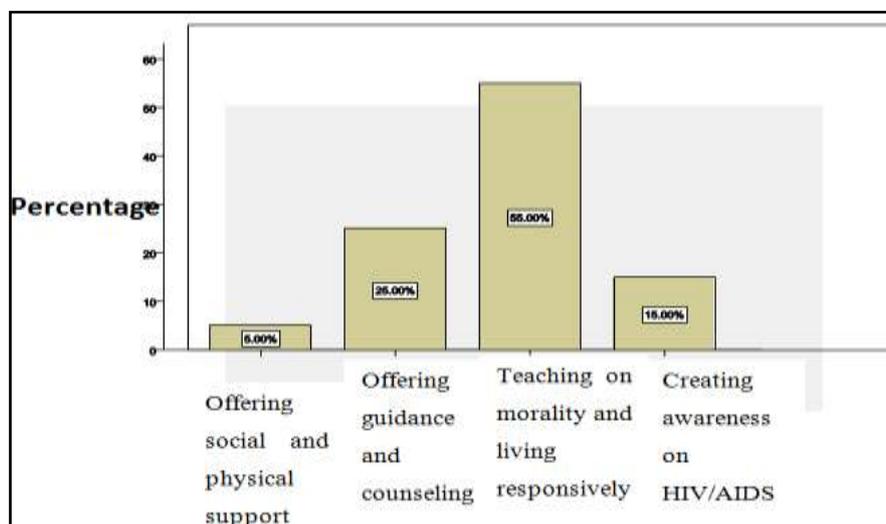


Fig-1: RGC Church activities in fight against HIV/Aids

As shown in the Figure above, 55% of the respondents stated that the Church has been playing a key role in teaching on morality and the need of living a responsible life. On the other hand, 25% of the informants stated that the Church efforts in offering guidance and counseling were important in making people make right choices. 15% of the respondents

reported that the Church is playing an important role in creating awareness on HIV/Aids while 5% of them mentioned that offering moral, social and physical support by the Church has been instrumental in helping people make right choices in life. The study also found out that, the Church had charitable activities aimed at helping those affected and infected by HIV/Aids.

Table-1: Ways in which the church helps those affected by HIV and AIDS

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|--|-----------|---------|---------------|--------------------|
| Valid | Assist in burial process | 14 | 28 | 28 | 28 |
| | Offer moral support | 14 | 28 | 28 | 56 |
| | Offer financial support | 11 | 22 | 22 | 78 |
| | Having time and mourning with the bereaved | 11 | 22 | 22 | 100.0 |
| | Total | 50 | 100.0 | 100.0 | |

The study established as indicated in the above table that 28% of the respondents said the Church assist in burial process, while 28% said that the Church offer emotional and spiritual support to those affected. On the other hand, 22% of the respondents stated that the Church offer financial support to the families of those who die from HIV/Aids while a similar percentage (22%) of the informants said the Church create time and mourns with the bereaved families.

These results indicate that the Church plays a big role in helping those families whose members die from HIV related ailments. The Church assists in various forms such as assisting in burial process, offering financial and moral support and also creating time and mourning with the bereaved families. The respondents argued that compassion is a channel of God's grace and need to be availed to one who is hurting. The study further established that, the RGC Church takes care of the orphans.

Table-2: Ways in which local church cares for orphans

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------------------|-----------|---------|---------------|--------------------|
| Valid | Ensuring good health | 11 | 22 | 22 | 22 |
| | Access to education | 7 | 14 | 14 | 36 |
| | Access to basic Accommodation | 32 | 64 | 64 | 100.0 |
| | Total | 50 | 100.0 | 100.0 | |

According to the above table, the study shows that 22% of the church leaders suggested that the Church should ensure good health of the orphaned children, 14% suggested that the church should ensure the orphans get access to education while (64%) of respondents stated that the Church should at least ensure the orphan get access to basic accomodation.

These results clearly demonstrated that the church leaders believed that the Church should assume the full reponsibility of taking care of the orphans . The study also found out that, the church provides economic empowerment to the guardians of the orphans through projects such as goat and poultry rearing.

CONCLUSION

Based on the set objective, the study concludes that the Church is playing a major role in the fight

against HIV/Aids in the area of study. First the study noted that the Church is actively involved in various activities in regard to HIV/Aids. In dealing with the already affected and infected by HIV/Aids, the Church is instrumental in offering guidance and counseling, providing moral, psychological and physical support. Secondly, the Church is supporting families whose members die from HIV/Aids through the burial process and also supporting them financially. Finally, the findings show that the Church is very instrumental in offering charitable assistance, especially to orphans by ensuring that they get access to basic accomodation, education and good health services. Redeemed Gospel Church in Katangi division has realized some achievements as far as the fight against HIV/Aids is concerned, but practically there are challenges which the church has not been able to overcome. Such challenges include inadequate financial base, lack of

skilled personnel and issues of stigma which are not fully addressed. The study recommends that religious organizations be strengthened, in terms of resources and capacity building, to deal with challenges posed by HIV/Aids and other social maladies because of their positioning in the society.

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