EKWENDENI HOSPITAL HIV/AIDS PROGRAMME

HTC YOUTH RESOURCE CENTRE – IMPRESSIONS FROM AN OUTSIDER

I arrived in Ekwendeni with no real preconceptions, other than it was a place where special things were happening in the field of HIV/AIDS prevention and treatment. Having travelled from my home in Scotland through a connection from my Church (Langside Parish in Glasgow) my aim was to learn, try to understand the work of the HIV/AIDS Programme, and to help out as a volunteer.

My first two weeks coincided with a visit by a group from the Church of Scotland Geneva, and they kindly invited me to join their programme of activities. Their focus was on the work of the HIV Testing and Counselling (HTC) Youth Resource Centre that they fund, and I was interested in its approach of using education to arm future generations against the advance of HIV infection. I expected the Centre to just be a building that young people attended, like normal youth centres at home. However, whilst there is a great building in the heart of Ekwendeni, I quickly learned that the reach of the Centre goes far beyond its walls, and there is very little about the place or people who work there that is ‘normal’.

The most immediate and strong impression made on me was by the people I met at the Centre. They work in HIV/AIDS prevention and treatment and so they are, as you would expect, very caring but it was their enthusiasm, dedication, professionalism and energy that bowled me over. The Centre Supervisor Stalin Mughaneira may not be the tallest of men, but he speaks about the Centre’s work with such passion that he delivers his message with the force of a giant. Watching the audience when he spoke, the impact he has was obvious; no matter how big the group or the number of tired children and teenagers it contained, they all sat still and listened intently. You could see them really hearing what he was saying. This passion and dedication is shared by the staff and volunteers working with Stalin as well. These people really care about what they do, and it shows in how effective their work is.

When I visited the outreach education and HTC sessions run by the Centre in outlying villages, the innovative ways they delivered their message – I saw dance, comedy skits, dramas and song – showed imagination and understanding of the communities they work in. The audiences were rapt during the performances, and afterwards the number of people attending the mobile HTC sessions proved that the messages were getting through. I was impressed as well by the courage with which they tackled difficult issues that may not otherwise be openly discussed here, such as women’s rights and social stigma attaching to orphans and HIV positive people.

I only had the chance to visit a handful of villages and although they varied a lot in terms of size and wealth, the arrival of the group from the Centre had a universal effect:
people came running to warmly greet them, not just children seeking entertainment but also the village head men. I had thought these elders might be more wary of the new activities and messages being delivered and I learned that at first that was indeed the case. However, they explained they were won over by the changes they had seen in the behaviour of their young people who attended the Centre, and now fully supported the work of its volunteers.

The professionalism of the staff and volunteers doing the HTC work certainly impressed me. Although many are only in their early twenties and financial constraints limit the training they have, they certainly know their field and were easily able to answer the many questions I asked. The testimonials of their patients speak volumes about how key their role is not only in helping diagnose and secure treatment for HIV sufferers, but also in supporting them through the frightening process of being tested, and dealing with the results.

Back at the Centre the variety of their projects on offer also impressed me. Proactive in addressing the social circumstances that facilitate the spread of HIV, they have made the Centre a source of entertainment and activities to keep young people off the streets and out of the bars. The Centre’s TV, pool table and well stocked library make it an alternative venue for young people seeking entertainment, and its paper recycling and card making project gives them new skills and a creativity outlet, whilst also raising awareness of environmental issues.

One of the most telling questions I heard at one of the activities was “where would these young girls be now if they weren’t here with us?”.

The Centre also capitalises on the resources available to it. For example, Ekwendeni’s Lay Training Centre now requires its carpentry and joinery students to attend an HIV awareness course at the Centre, which extends its reach to a group of largely young men who might otherwise be reluctant to go to HIV/AIDS events. I attended one of the course classes where college students were very candid when questioned about what they had learned. I had thought that given how many decades HIV/AIDS has been a problem here people their age would at least know the basics, but a lot of the students confessed that it was the Centre’s course that first taught them the risks and how to protect themselves from HIV.

The Centre doesn’t just touch the lives of the people that use it; I was also struck by how it has changed the lives of some of the staff and volunteers that work there. They have clearly relished the chance for training and a new direction in their lives and many talked to me about their ambitions for future use and growth of their new skills.

When it came time for the group from Geneva to depart I was invited to their ‘leaving event’, at which the nature of the relationship between the Centre and the Genevan
Church was emphasised: it is a partnership. I’m not convinced the Malawians truly appreciate just how much us ‘mzungu’ gain from knowing and working with them, but my final impression was that this relationship goes beyond the traditional donor-recipient model. And that in itself is an achievement worth celebrating.