



SADDLEBACK CHURCH WESTERN RWANDA

# HIV/AIDS HEALTHCARE INITIATIVE



PARTNERING  
WITH YOU  
TO BRING  
HOPE



P. E. A. C. E.



**Western Rwanda  
HIV / AIDS  
Healthcare Initiative**

# The Big Idea



“This unparalleled program represents an innovative approach to decentralizing healthcare and increasing its access for the poor by using local churches in an unprecedented partnership with the Rwandan government’s Ministry of Health, three Rwandan hospitals, the University of Maryland, Saddleback Church in California, and the global network of Purpose Driven churches.”

Dr. Rick Warren,  
author of the global bestseller,  
The Purpose Driven Life

*Imagine* if you had been invited to be a part of the discovery of penicillin which has saved millions of lives. Or envision if you were on the team that created the Salk vaccine to eradicate polio. **What if you were one of the visionaries that helped invent an entirely new way of making healthcare accessible to billions of people?**

The good news is, you actually DO have the opportunity to be a part of this third breakthrough. **You can be a pioneer.** You can be in on the ground floor of the Western Rwanda HIV/AIDS Healthcare Initiative that will potentially affect the lives of 600,000 Rwandans in the Karongi District of the Western Province.

With the widest distribution and the largest volunteer base, the network of millions of **local churches around the world is best positioned to revolutionize healthcare, making it both accessible and affordable to those who have never enjoyed it.** We dream of the day when local churches, linked with community health systems and hospital care systems, will provide basic healthcare to those in need around the world!

With hope for a better life for billions of people,

*Rick and Kay Warren*

Pastor Rick and Kay Warren,  
Saddleback Church, Lake Forest, California



“What we are modeling in this Initiative is a truly transformational healthcare model by reinventing when, where, why, how, and by whom healthcare is provided”

Robert Redfield MD:  
 Director of Clinical Care and Research,  
 Institute for Human Virology,  
 The University of Maryland



# A Need For Hope

“Although the Karongi District has more than 650,000 citizens, healthcare has been limited to three small hospitals, which are located about two days walk from most residents. By partnering with the 726 local churches spread throughout the district, access to healthcare will take a giant leap forward”

Kay Warren,  
 Executive Director of Saddleback Church HIV/AIDS Initiative  
 author of Dangerous Surrender

“There’s a moral mandate. The inequities in healthcare are on the mind of every person who has seen the beautiful faces and held the weary hands. This is not just some “nice to do” project. This is an initiative God is using to bring help and healing to the world. The local church is the hero and God is glorified.”

Elizabeth Styffe RN, MN,  
Director of the HIV/AIDS, Orphan Care, and  
Western Rwanda HIV/AIDS Healthcare Initiatives



## Rwanda’s Healthcare Challenges

**Despite enormous gains in every sector of development, Rwanda experiences serious healthcare challenges.**

Access to healthcare is virtually non-existent for most Rwandans, and the standard of care is below what Rwandans want and need. In the Karongi District of the Western Province, healthcare is limited to 3 small hospitals which are located about two days’ walk from most residents.

During the 1994 genocide, a disproportionate number of educated and accomplished citizens were killed, including doctors, nurses and other health workers, leaving only one physician for every 500,000 people and one nurse for every 3,300 people.

- Population in Need: Population 10.1 million; 25% of the total population is between 15 and 24 years of age
- Life expectancy: 43 years
- Scarcity of Medical professionals: There are roughly 200 practicing physicians and 3,000 nurses

### Healthcare Challenges:

**HIV/AIDS:** There are about 190,000 people living with HIV/AIDS and treatment is only available to 25% of those who need it.

**Malaria:** Malaria is one of the main causes of disease and death in Rwanda. Only 15% of households own at least one insecticide-treated mosquito net, a very effective tool in preventing the disease. Only 13% of children under the age of five sleep under a net.

**Tuberculosis:** 89% of those with TB also are HIV positive, causing TB to be the leading cause of death for HIV.

**Orphans and vulnerable children:** There are over 1,000,000 orphans and vulnerable children in Rwanda. One tenth of the population are orphans! Approximately 210,000 children have been orphaned due to HIV/AIDS.

The healthcare challenges call for a strategy that will revolutionize healthcare on the African continent and around the world. A new hospital expansion will begin soon near the grounds of the infamous Kibuye soccer stadium to serve as a teaching and training center for 726 churches in the district. During the 1994 genocide more than 8,000 men, women, and children were brutally slaughtered in the stadium.

“Yet, out of these ashes of evil will spring hope and healing to replace hurt as a new and different kind of hospital will be erected here. A place of betrayal will become a place of blessing; a place of pain will become a place of promise; suffering will be replaced by service to the community; and what was once a place of death will become a place of life!”

Dr. Rick Warren,  
Pastor, Saddleback Church

# Western Rwanda HIV/AIDS Healthcare Initiative Summary

The aim of the initiative is to dramatically increase access to quality healthcare in Western Rwanda

This will be accomplished by:

Church-initiated community development partnerships with public and private sectors

Training local churches in primary health care

Improving hospital and clinic infrastructure

Increasing the numbers and capacity of existing health care providers

Expanding HIV services in the church, hospital and clinic settings

Linking the community health and hospital health care systems together

Maximizing health care delivery by using church members

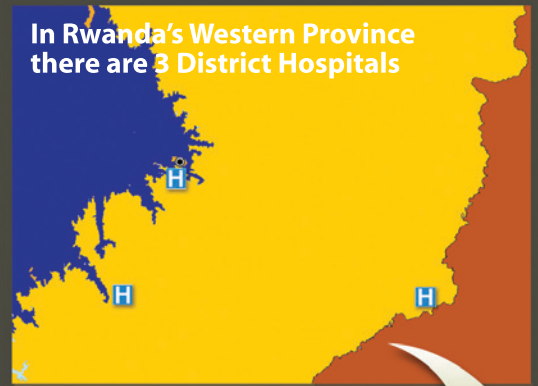
Empowering and equipping pastors so that churches launch community healthcare volunteers

“Our goals for this Initiative are to train every church in basic healthcare; upgrade and improve the three hospitals; link the hospitals and churches to partner together; and develop sustainable solutions by using local churches.”

Dr. Rick Warren,  
Pastor, Saddleback Church

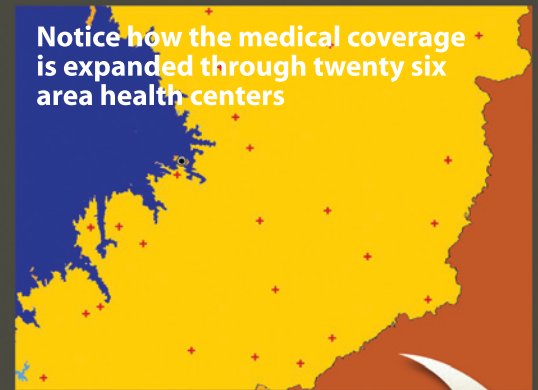
## Western Province of Rwanda

In Rwanda's Western Province there are 3 District Hospitals



Many have a 2 day walk to the 3 area hospitals.

Notice how the medical coverage is expanded through twenty six area health centers



26 clinics serve 650,000 people.

How can more people access care?



There are 726 churches. The church is the greatest distribution channel in the world.

Church members can be trained in basic healthcare. Church initiated clinics can be started and linked to existing health systems. The greatest hope for improvements in healthcare will occur when the church is fully utilized.



“We never do for others what they can be trained to do for themselves. It’s easy to go into a country and just do things for others, but we are interested in far more than that. The answer to every problem is training – helping others help themselves. We are not worried about how long it takes or how fast it goes. We’re building a network to last.”

Dr. Rick Warren,  
Pastor, Saddleback Church



## What’s Different about this Initiative

**Local Church Mobilization:** Ordinary people in churches are launched into action. As an untapped source, people living with HIV are also emphasized as peer leaders and teachers.

**Local Leadership:** Rwandan pastors, government leaders, business leaders and healthcare workers lead this initiative. Partners outside Rwanda serve the vision of this local church-initiated model. Essential to this new approach are both professionals and non-professionals in healthcare delivery.

**Extensive Partnerships:** A solid foundation has been established for future interaction and collaboration between pastors, church members, government, hospitals, clinics, the community, existing agencies, and people living with AIDS.

**Proven Track-Record:** World-renowned leaders in every related field guide the Initiative. Experience in Malawi, Zambia, and 14 other countries contribute to the strength of the Initiative.

**Proven Methods:** The Initiative incorporates proven methods including Community Development Training, the C.H.U.R.C.H. strategy, and the principles for Purpose Driven churches. All three methods have proven successful in developing countries and are easily implemented by nonprofessionals.

**Scalable and Reproducible Models:** The Initiative is fully integrated with the overall national Rwandan health program, which includes the mandate for replication. The ability to transfer this model to other regions and countries is a key measurement of success.

**Reporting on Outcomes:** Monitoring, evaluating and reporting outcomes are key. The Partners will continually monitor and evaluate real and measureable targets.



**“Partnering with churches is difficult, and it takes longer than doing it by yourself. One difference in the PEACE Plan is that I trust pastors and churches to know their community better than we ever will. In the long-run, relationships are the key.”**

**Dr. Rick Warren**

## End Results

In the next three years:

- 650,000 of the poorest, most remote people will receive access to healthcare
- 1000 new community health volunteers recruited and trained
- 50 Churches linked with hospitals, and clinics
- 500 Pastors trained in Purpose Driven Principles
- 30,000 church-initiated home and community visits
- Increased access to Malaria and TB prevention and treatment
- Number of patients on HIV medication (ARVs) increased by 50%
- Hospitals, clinics and laboratories built and strengthened
- Increase capacity of healthcare providers
- HIV prevalence decreases and HIV testing increased by 30%
- Pediatric treatment increased by 50%
- 30 Congregations champion the C.H.U.R.C.H model and operate as satellite care centers to make appropriate health referrals

“Positive change and transformation occurs in a society when stakeholders work in a spirit of unity, mutual respect and complementing each other. The Western Rwanda HIV/AIDS Healthcare Initiative is providing an example whereby the Rwanda Churches represented by the National Steering Committee, the Government of Rwanda represented by the Ministry of Health, Saddleback Church and The University of Maryland Foundation are joining efforts for better healthcare for the people of the Western District of Karongi.”

Archbishop Emmanuel Kolini,  
Chairman,  
Rwanda National Steering Committee

“This is a unique pioneering program – it has never been done anywhere else in the world”

Agnes Binagwaho M.D.,  
Executive Secretary  
Rwanda National AIDS Control Commission



“Any church can implement the C.H.U.R.C.H. strategy – rich, poor, large, small, urban or rural. It doesn’t cost money to care for sick people, encourage HIV testing, mobilize volunteers, remove stigma, promote healthy sexual behavior, or remind people to take their medication.”

Kay Warren,  
Executive Director,  
Saddleback Church HIV/AIDS Initiative,



## The C.H.U.R.C.H. strategy

While there is no cure, there are at least six ways that every church can make a significant and positive impact on those infected and affected by HIV and AIDS:

### **CARE FOR AND SUPPORT THE SICK**

Churches are commanded to care. It is their calling. Love leaves no choice! Local congregations are the only caring organization found in almost every community around the world. Members can offer physical and emotional care in homes.

### **HANDLE HIV TESTING AND COUNSELING**

Churches are the most trusted organizations in communities so people may be more willing to be tested and counseled there. Just being tested has proven to promote healthier behavior. Members can be trained to give medical, emotional, and family counsel to those receiving results from their testing.

### **UNLEASH A FORCE OF VOLUNTEERS**

Churches have the largest volunteer labor force on the planet – over 2 billion members. There aren’t enough professionals in the world to teach prevention, administer treatment, and offer care to those who need it. There is an enormous pool of untapped talent and energy sitting unused in churches waiting to be mobilized.

### **REMOVE THE STIGMA**

Churches must embrace those infected. They can replace rejection with mercy. The church must remove abuse and alienation. They offer faith, hope, love, forgiveness, grace, and spiritual support which neither business nor government can offer.

### **CHAMPION HEALTHY BEHAVIOR**

HIV/AIDS is complex, yet preventable. Churches have the moral obligation to promote healthy behavior, and offer moral directives for the family. They teach the moral motivation for abstinence and faithfulness. Resisting peer pressure and relapse requires a supportive faith community.

### **HELP WITH HIV MEDICATIONS (ARVS)**

The church has the largest distribution network on the planet. It’s already in place worldwide! Millions of villages have a church, but nothing else. For treatment to become universal, we must develop church supported treatment models. Members can be trained to distribute and support HIV/AIDS medications and support essential nutrition. The church can offer pre-treatment preparation, treatment education, adherence support, direct observation therapy (DOT) and treatment coaching to the entire family.



**A foundational tenet of the Western Rwanda HIV/AIDS Healthcare Initiative is the focus on a church-initiated healthcare delivery system which partners with business, government and the health sector to provide wholistic and comprehensive healthcare.**



## Why the Church

A foundational tenet of the Western Rwanda HIV/AIDS Healthcare Initiative is the focus on a church-initiated healthcare delivery system which partners with business, government and the health sector to provide wholistic and comprehensive healthcare. Government, business and relief agencies have not been able to keep pace with the rapid growth of the HIV/AIDS pandemic. **Local churches are essential and offer several advantages:**

**1. THE CHURCH HAS THE LARGEST PARTICIPATION** – With over 2.1 billion members the church has the largest volunteer labor force. There will never be enough professional doctors, nurses, teachers, and lawyers. There is an enormous pool of untapped talent, brains, energy, and relationships sitting unused in churches that could be mobilized.

**2. THE CHURCH HAS THE WIDEST DISTRIBUTION** – In every village around the world, there may not be a post office, hospital, or school but there is a church. In many places the only social structure is a church. The church is the only truly global organization. If you have an idea, a product, or medication that needs to get to local people, the most efficient way is through the church. The local church is an existing, largely underutilized, distribution channel.

**3. THE CHURCH HAS THE SIMPLEST ADMINISTRATION** – Local churches are grassroots networks, and networks always move faster than centralized bureaucracies.

**4. THE CHURCH HAS THE FASTEST PROLIFERATION** – To beat a rapidly expanding pandemic you need a distribution network that is growing faster than the problem. The only thing that is growing more rapidly than the pandemic is the church.

**5. THE CHURCH HAS THE LONGEST CONTINUATION** – The church has been around for more than 2,000 years. Empires, governments and corporations come and go, but the church will last into eternity.


**6. THE CHURCH HAS THE STRONGEST AUTHORIZATION** – Jesus Christ created the church and gave it his authority to do good in the world. He authorized his followers to go into the world. In the Great Commission he said “all authority is given to me in heaven and earth...therefore go.”

**7. THE CHURCH HAS THE HIGHEST MOTIVATION** – There’s political motivation and profit motivation, but the highest motivation is our Savior Jesus Christ who commands us to love our neighbor as ourselves.

“The greatest health problem for much of the world is not a lack of medicine, but a lack of access to it. There will never be enough professionals – doctors, nurses, and clinics – to care for all of the health needs in the world. But there is a church in practically every village of the world, and volunteers ready and willing to be trained. The PEACE Plan is an amateur movement. It is led by people who are motivated by love, not money or fame.”

Dr. Rick Warren,  
Pastor, Saddleback Church





“We are proud to see the dream become reality. The church is the last mile in service to the community. No other organization has a greater distribution network and the ability to provide grassroots healthcare”

Dr. Robert Redfield MD,  
Director of Clinical Care and Research,  
Institute for Human Virology,  
The University of Maryland

## Western Rwanda HIV/AIDS Healthcare Initiative Project Partners

**Professionals guiding the Initiative include experts in the area of church mobilization, community based healthcare, HIV/AIDS clinical care, cross-cultural training and support, and healthcare delivery.**

**Rwanda Steering Committee  
(cross-denominational church leaders)**

**Local Churches in Rwanda**

**The Government of Rwanda,  
represented by The Ministry of Health**

**The Kibuye District Hospital**

**The Karongi District, Rwanda Government**

**The University of Maryland Foundation**

**Saddleback Valley Community Church**

“We are encouraged by this pilot project that seeks to demonstrate the strength of enabling the local churches to make a holistic impact in the lives of communities, and are yet to see more happening. A partnership between the church, the government and the private sector can indeed make the difference.”

Archbishop Emmanuel Kolini,  
Chairman, Rwanda National Steering Committee

“Envision the future. If you walk through this community next year, radical transformation will have taken place. Instead of painful suffering or death due to lack of access to medical care, thousands will enjoy better health and longer lives. Children will not be orphaned. Communities will be developed; families and churches will have grown. Those who choose to become partners in this Initiative will experience the joy of significant progress. People will look back and know you cared.”

Elizabeth Styffe RN, MN  
Director HIV/AIDS, Orphan Care, and  
Western Rwanda HIV/AIDS Healthcare Initiatives

# Partner with us to bring hope

"A few years ago I thought preaching was enough, that was my compassion. If we don't do something, who will? If we don't show compassion who will? If you don't show up, who will?"

Pastor Straton Gataha,  
Senior Pastor of the Living Church of Jesus Christ,  
Kigali, Rwanda

## The five things you can do today:

1. Pray for the people of Rwanda
2. Donate by check or credit card at: [RwandaHealthcare.com](http://RwandaHealthcare.com)
3. Learn about the PEACE Plan at: [ThePEACEPlan.com](http://ThePEACEPlan.com)
4. Learn more about HIV at: [HIVandtheChurch.com](http://HIVandtheChurch.com)
5. Learn more about orphans at: [OrphansandtheChurch.com](http://OrphansandtheChurch.com)



"I had to make a conscious decision. Would I retreat to my comfortable life and to my settled plans? Or would I surrender to God's call and let my heart engage with a cause such as AIDS that I was pretty sure would include buckets of pain and sorrow? I felt like I was standing on the edge of a giant precipice; I couldn't go back, and yet the way forward looked like stepping into a void."

Dangerous Surrender,  
Kay Warren, author

"Of all the worthy causes, we have chosen to invest our time, energy, and resources – our very lives – in the Western Rwanda HIV/AIDS Healthcare Initiative. We believe in this partnership and invite you to invest with us. Give generously!"

Rick and Kay Warren

## Donate Today:

Donate online today at: [www.RwandaHealthcare.com](http://www.RwandaHealthcare.com).

Pledge to join us and partner to bring hope.  
You can make healthcare access a reality in Rwanda.

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