CHRISTIANS AND MUSLIMS PROMOTING
MATERNAL AND INFANT HEALTH

A Sermon/Khutbah Guide Based on the Holy Bible
and the Holy Qur'an
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PREFACE

Respect for God’s creation and of life begins with protecting the health of mothers and babies. The ACCESS Program is working with the Rwandan Ministry of Health to improve maternal and newborn health through clinical interventions and community and religious leader mobilization. The Rwanda Faith-Based Organizations Network Against HIV (RCLS) is an umbrella organization for both Christian and Muslim organizations which work with community groups and organizations on HIV/AIDS, maternal and infant care, and other health issues.

It is within that context that RCLS deemed it necessary that key beliefs about marriage, family, and children based on religious teachings should be explained and affirmed so that followers understand their responsibility in protecting maternal and newborn health. Two select groups of Christian and Muslim leaders worked under the leadership of RCLS and ACCESS Program staff/consultant to develop a Sermon/Khutbah (a sermon delivered in mosque before the Friday prayer or at other special occasions) Guide which includes safe motherhood messages approved by the Ministry of Health and matched with appropriate verses from the Bible and Qu’ran.
The decision to undertake this effort was made in a meeting organized by RCLS that brought together representatives of Rwandan religious organizations in Kigali in August, 2007. The meeting participants appointed a committee to develop and write this sermon guide. The Guide, which is in two parts, covers Christian and Muslim sermons and was reviewed by the Ministry of Health and other key individuals and organizations.

**Rwanda Faith-Based Organizations Network Against HIV (RCLS)**

RCLS is composed of religious organizations operating in Rwanda that belong to five groups: Catholic Episcopal Conference in Rwanda (CEPR), Province of the Anglican Church in Rwanda (PEER), the Protestant Council of Rwanda (CPR), Evangelical Alliance of Rwanda (AER) and Rwanda Muslim Association (AMUR). RCLS, in collaboration with the Ministry of Health and donors, is determined to improve maternal and newborn health through the religious organizations that comprise the network.

**ACCESS Program**

ACCESS is USAID's global program to improve maternal and newborn health and works to expand coverage, access and use of key maternal and newborn health services across a continuum of care from the household to the hospital.
Safe Birth Africa Initiative
To assist the Rwandan MOH with improving and expanding key maternal and newborn health interventions, ACCESS was asked in 2006 to participate in USAID's Safe Birth Africa Initiative (SBAI) in Rwanda. The program is designed to demonstrate large-scale sustainable results, focuses efforts on care of the mother and baby during labor, birth, and the immediate postpartum period, when the risk of life-threatening complications is highest. By using SBAI as a platform, ACCESS/Rwanda is improving the quality of Emergency Obstetric and Newborn Care (EmONC), including training on essential newborn care, implementing Kangaroo Mother Care (KMC) to improve outcomes for low birth weight babies, involving faith-based organizations in community-based advocacy and to foster behavior change among families.
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<tr>
<td>DHS</td>
<td>Demographic Health Survey</td>
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<tr>
<td>EIDS</td>
<td>Enquête Intermédiaire Demographique et de Santé</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome</td>
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<td>IDHS (2007-2008)</td>
<td>Intermediate Demographic Health Survey</td>
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<td>IMA</td>
<td>IMA World Health</td>
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<td>RCLS</td>
<td>Réseau des Confessions Religieuses pour la Lutte Contre le SIDA (Rwanda Faith-Based Organizations Network Against HIV/AIDS)</td>
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<td>STD</td>
<td>Sexually Transmitted Disease</td>
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FOREWORD

In Rwanda, every 3 hours a woman dies because of the complications linked to the pregnancy and the childbirth. Some of the identified major causes of these deaths include the lack of basic knowledge about maternal child health, the delay to make a decision to undergo pre-natal consultations and assisted labor, the lack of infrastructure, and the lack of skilled personnel at the moment of deliver. Most of these complications can be prevented by sensitization initiatives focused on raising awareness of all stakeholders including individuals, communities, decision-makers, etc.

In Rwanda, 97% of the Rwandan population belongs to different religious organizations both Christian and Islamic. Forty percent of Rwandan Health Facilities are managed by religious organizations as well as 36% of the PMTCT Centres and 37% of the VCT sites.

The book “Christians and Muslims Promoting Maternal and Infant Health” highlights Maternal and Infant Health issues in Rwanda and provides a link between them and the Holy Scriptures that form the basis of our faith: The Holy Bible and the Holy Qur’an. The book aims to provide basic information
and guidance on how we can address some of the major issues of Maternal and Infant Health using our Holy Scriptures.

Hopefully, this publication will promote the understanding of the role of the religious community in saving the millions of mothers who are dying while giving life and children who are not getting the chance to celebrate their fifth birthday.

On behalf of the Rwanda Faith-Based Organizations Network Against HIV (RCLS) I would like to thank the various partners’ organizations for their valuable contributions including financial and technical assistance. Our sincere gratitude to the Rwanda Ministry of Health for the technical assistance, especially in identifying the key messages of Maternal and Child Health that are included in this book. We also thank the valuable financial assistance and technical guidance of the IMA World Heath and the technical support of the ACCESS and JHPIEGO for the publication of this book.

We highly appreciate the work done by writers, reviewers and facilitators who have worked tirelessly days and nights for the production of this document; checking the most relevant verses
and surats of the Bible and the Qur’an linked with the Maternal and Child Health messages.

May the Almighty God bless everyone who will read this book and take action to improve maternal and infant health.

Reverend Gahungu Bunini
Chairman
Rwanda Faith-Based Organizations Network Against HIV
GENERAL INTRODUCTION

Rwanda has one of the highest death rates for mothers and babies in the world. Seventy-five out of every 10,000 pregnant women die during pregnancy, childbirth, or in the period shortly after giving birth. This means that every 3 hours one woman in Rwanda dies from pregnancy and childbirth that should be joyful time. Out of every 1000 infants born, 152 babies die before they reach one month of age. The recognized causes of these deaths are the lack of sufficient knowledge of maternal and infant health, the lack of timely medical care, and the lack of adequate and timely assistance. However, it is possible to prevent these problems and reduce the number of deaths through awareness, education changing some of our behaviors.

On the subject of religion in Rwanda, the Demographic Health Survey (DHS 2005) showed that approximately 97% of Rwandese are followers of an organized religion. Religious groups have played an important role in reducing maternal and infant deaths through the health care services provided at their hospitals and health centers. (40% of health centers are operated by religious organizations). With this Sermon Guide, the religious groups can play and additional role through teaching in mosques, and preaching in churches.
The aim of this guide is neither to teach the faith of any one religion, nor to teach clinical skills on maternal and infant health as that would be done in a medical context. It is rather to use the Bible and Qur’an according to one’s faith, and show what God says about protection and care of mothers and babies. A person using the guides can use the recommended verses found in them, or he/she can use other verses from the holy books.

This guide is composed of two parts. The first part consists of a guide based on the Bible while the other is based on the Qur’an. All parts converge on ten themes that complement one another in protecting maternal and infant health. The themes include:

1. The value of a person’s health
2. Responsibility of husband for maternal and infant health
3. Family planning
4. Proper ante natal and post natal care
5. Child health
6. Good nutrition for the mother and child
7. Personal hygiene and environmental protection
8. Preventing and fighting malaria
9. Preventing HIV/AIDS and other sexually transmitted diseases (STD)
10. Mutual Health Insurance
11. Avoiding alcoholic drinks, drugs and smoking

May God help everybody who reads this guide have the courage to use it in order to sensitize others to protect maternal and infant health.
CHRISTIAN SERMON
GUIDE TO PROMOTE
MATERNAL & INFANT
HEALTH

This part of the guide addresses what the Bible has to say concerning maternal and infant health. Christians who are familiar with scripture will understand that the importance of protecting maternal and infant health and the role of health professionals and state programs are alluded to in the Bible. Anyone who believes in the Bible should make maternal and infant health a priority and become involved and encourage others to support healthy practices. Not only is it important to the nation and the world, it is also God’s Word. Anyone who respects God’s Word, will receive His blessings while he is still on Earth and will inherit eternal life in heaven.
INTRODUCTION

Life is a Gift from God. The Bible tells us how God gave life to man: “Then the Lord God formed man of dust from the ground, and breathed into his nostrils the breath of life; and man became a living being.” (Genesis 2:7)

God is the origin of life. He takes care of a creature from its birth until the end of its life. God created man and woman, and having created them male and female, He gave them the power to procreate and have dominion over every living thing on the Earth. (Genesis 1:27-28)

Some of the causes of maternal mortality that were highlighted in the 2005 Demographic Health Survey (DHS 2005) produced by the Rwanda Institute of Statistics in collaboration with the Ministry of Health are: lack of medical consultation, scarcity of prenatal consultations, not giving birth to a child at a hospital, arriving late to the hospital, and delay in reaching a medical doctor. A similar survey that was conducted at the end of 2007 and in the beginning of 2008 (DHS 2008) indicated that out of 1000 births, 62 babies die before they reach their first birthday. The situation had improved compared to the survey in 2005, which indicated that out of 1000 births, 86 babies die before
they reach their first birthday. The major causes of those newborn deaths identified by the survey were diseases of the respiratory tract, malaria, and dehydration due to diarrhea.

Newborn and maternal mortality hurts families, communities, religious organizations, and the entire nation. Among those negative effects is the fact that children become orphans and the family suffers from lost family members and increased poverty.

This manual is a guide based on the teachings in the Bible. Its objective is to help Bishops, priests, pastors, preachers, school teachers, and members of a religious organization, to educate the congregation on maternal and newborn health. It consists of ten sermons addressing various topics relating to maternal and newborn health.

The Scripture verses used were mostly taken from “Bibiliya Ijambo ry’Imana.” In English it is called the Bible, God’s Word (2004), except a small part written with the help of Bibles in Kinyarwanda, like the “Bibiliya Ntagatifu” (1993) and the “Bibiliya Yera” (1993). The acronyms of the books of the Bible and the biblical references are those used in the “Bibiliya Ijambo ry’Imana.” Using the “Bibiliya Ijambo ry’Imana” in particular
was requested by the representatives of the Christian organizations who first edited this manual. They pointed out that it is the Bible that is newly translated in Kinyarwanda, and it uses the current Kinyarwanda that is well understood by many, and it is the Interchurch Bible for all Christian churches in Rwanda.

Biblical verses appearing in the sermons are not the only ones that can be of help. The facilitator of the sermon is free to use them or look for others. The facilitator may also develop his or her own explanation of the Bible verses. He or she should use the teaching method most suitable to his or her congregation.

“*May babies don’t die.*” (Translation of a Rwandan Song)

“*Your mother is irreplaceable; don’t let her die while giving birth.*” (Translation of Rwandan Proverb)
“Before I formed you in the womb I knew you; before you were born I set you apart; I appointed you as a prophet to the nations.” (Jeremiah 1:5)

Rick Warren quoted Abraham Lincoln’s idea on the value of a person’s life, saying, “God could not make a creature as important as a person by making it just to live a single day! No, it is not possible; a person was created for eternal life.”

Though a person’s life may be a surprise, and some may consider it an accident, it does not surprise God. In the preface of his book, Rick Warren asserts that God chooses the parents of a person with much thought. It is God who chooses a person’s skin color, hair type, and the color of his or her eyes. It is He who also gives the gifts which give a person character and a particular shape. There is no doubt that God creates a person with a plan and a purpose. Parents and the nation must provide for children so that God’s plan for every one of us can be fulfilled.
A person’s life is not an accident, it was planned by God. The Lord told the prophet Jeremiah, “Before I formed you in the womb I knew you, before you were born I set you apart; I appointed you as a prophet to the nations.” (Jeremiah 1:5) It is necessary to provide for a child while he is still in his mother’s womb by preparing where and how the mother will give birth; determining how the mother will get to the hospital; finding a suitable blood donor in case emergency blood is needed; planning clothes and materials for the baby; deciding who will accompany the mother to give birth to the child; and reducing strenuous chores during pregnancy; as well as other preparations to protect the health of the mother and baby. God knows an individual who is still in his mother’s womb, and chooses him to serve Him. We must care for the child as soon as possible, so that he can fulfill the role God has for him.

It is necessary to provide for an individual from the time of conception through birth and infancy. God’s Word shows us how God considers him a complete human being at the time he is conceived in the womb of his mother: “Your eyes saw my unformed body. All the days ordained for me were
written in your book before one of them came to be.”
(Psalms 139:16)

After a baby is born, we must provide the proper nutrition and healthcare so he or she will have the best start in life. A child must be breastfed for at least six months beginning as soon as possible after birth. The baby should receive no other kind of nutrition during the first six months of life. A child must be protected and vaccinated against diseases. Protecting babies from infection and other dangers is critical because the rate of infant mortality is high due to diarrhea, lack of hygiene, pneumonia, bad nutrition, dehydration, lack of blood, and late medical care.

The value of a human being is demonstrated by the fact that God created him with great care and created him in His image. The Bible tells us, “Let us make man in our image, in our likeness, and let them rule over all the earth.” (Genesis 1:26) In the book of Job it is illustrated that in creating the human being, God took time to carefully make every organ composing the body. It is written: “Did you not clothe me
“with skin and flesh and knit me together with bones and sinews?” (Job 10:11-12)

Conclusion of Sermon 1

A person is an extraordinary creature into which God breathed His spirit (Genesis 2:7) and who is made in God’s image. (Genesis 1:27) Even when a child is still in his mother’s womb, he is a full creature, and God has a plan and purpose for him. As a nation, we must provide for him, from the time he is conceived through birth, childhood, and old age. Whether the person is a child or an adult, a man or a woman, the health of that person has a great value to God over any other creatures, visible or invisible. The health of a person must be protected and treasured.
SERMON 2 · THE HUSBAND’S RESPONSIBILITY FOR THE HEALTH OF THE MOTHER AND BABY

The Bible shows us that man and woman were united by the will of God through His love, because He saw it was not good for the man to be alone: “The Lord God said, ‘It is not good for the man to be alone. I will make a helper suitable for him.’” (Genesis 2:18)

Marriage is designed not only to deliver man from loneliness, but it is also God’s way of giving him responsibility. The husband must look after his wife and children. A Christian has a strong obligation to provide for his family and household. Not providing for them is compared with not having faith in God and not believing in Him: “If anyone does not provide for his relatives, and especially for his immediate family, he has denied the faith and is worse than an unbeliever.” (1 Timothy 5:8)

It is very important that the husband provide for his wife while she is pregnant by accompanying her to the hospital and closely
following her health and that of the baby she carries. The role of the husband in protecting the health of the mother and baby is crucial to various national strategies concerning maternal and infant health. Only 13% of pregnant women follow the instructions of the Government advising that a pregnant woman have at least four prenatal consultations (DHS 2005). (At least one visit every two months.) This means 87% of pregnant women are not following those instructions and more women must be encouraged to have regular prenatal consultations.

Many women who do not seek prenatal care avoid it for reasons such as: infirmity, abolition or fears of uncleanliness, or weakness caused by anemia. Some women choose to give birth at home because they are ashamed of being seen by a doctor if they have not followed his instructions. Failure to seek prenatal care can result in very severe consequences, including death. In 2005, six percent of women did not have even one prenatal visit (DHS 2005), which can make them vulnerable to many complications. However, in 2007 and 2008, 96% of women sought prenatal consultation at least one time (IDHS 2008). Therefore, there was a 2% increase in the number of women seeking prenatal care from 2005 to 2007.
If the husbands of those women understood the value of a woman going to the hospital for prenatal consultation as soon as she knows she is pregnant, and encouraged and accompanied their wives to those visits, maternal and infant mortality would decrease. By supporting his wife this way, a husband shows his love for her, and is supported by God’s Word in the Bible: “He who loves his wife loves himself. After all, no one ever hated his own body, but he feeds and cares for it, just as Christ does the church (...). However, each one of you also must love his wife as he loves himself.” (Ephesians 5:22-33)

Children are a blessing from God which parents must receive with both hands. “Sons are a heritage from the Lord, children a reward from him.” (Psalms 127: 3)

Many Christians make matters like the Spirit and eternal life in Heaven their first priority. It is good to make this a priority, but it is important to remember that the way to heaven is how we live during our time on Earth. As long as we are on Earth we must take care of our health and our families, especially by seeking help from physicians, because God appointed them for
us and He advises us to go to them when necessary: “My son, when you are sick do not be negligent, but pray to the Lord, and He will heal you (...). There is a time success lies in the hands of physicians (...). They too will pray to the Lord that He should grant them success in diagnosis and in healing, for the sake of preserving life (...).” (The Son of Sirach 38:1-15)ii

The Apostle Paul understood that an adult must not behave like a child, that he must adopt a man’s conduct. “When I was a child, I spoke like a child, I thought like a child, I reasoned like a child; when I became a man, I gave up childish ways.” (1 Corinthians 13:11) When a person becomes an adult, he must adopt ways which are different from childish ones by taking care of his family, especially his children and his wife.

Conclusion of Sermon 2
The Bible clearly shows us the role of a husband in his family and compares it to how Christ loves His church and ministers to it. He is head of the church which He subdues as His body. We
also find this theme in the letter from Paul to the Ephesians, which reads: "For the husband is the head of the wife as Christ is the head of the church, His body, of which He is the Savior." (Ephesians 5:22-25) No Christian man must become "careless" with his family. He must love his wife like a kindly man by providing for her when she is pregnant, when she gives birth to a child, when she breastfeeds the child, when she is sick and any time she is in need. He must also provide for his children. God’s Word describes a Christian husband unable to fulfill this responsibility as one who has denied the faith and is worse than an unbeliever. (1 Timothy 5:8)
What Is Family Planning?
The World Health Organization explains that family planning is a way for people to choose the number of children they wish to have and when they would like to give birth to a child. It is a way to think and live that is supported by research, information, and a set of beliefs that allow a country to promote its population’s health and welfare.

Family planning helps a family avoid unplanned pregnancy, give birth to a child who is wished for, and determine a given number of children that are desired and to have them at the right time. For example, it is recommended that women avoid conceiving before age 20 and after age 35, and to reduce the number of pregnancies between those years.

Rwanda is mainly concerned with population growth that does not correspond with land and economic growth within the nation. According to the general census for 2002, the population of Rwanda was 8,128,553. In 2008, the population of Rwanda was 9,300,000. The density per capita is 321 residents/km².

Furthermore, if there is not any change in the rate of population
growth, the number of Rwandans will double to more than 16 million within 20 years. The estimated number of children a woman would have if she was able to have children during her reproductive years (between 15-49 years old), also known as the synthetic index of fecundity, is 6.1 children per woman.\textsuperscript{vii}

The general census of 2002, mentioned above, showed that 60% of Rwandans live below the poverty line, and 42% are extremely poor. It is especially important for these families to adopt a family planning strategy. Research conducted in 2007 and 2008 (EIDS 2008)\textsuperscript{viii} has shown that 27% of women use modern family planning methods, while 36% use natural and unnatural methods. The use of some form of family planning has increased by 17% compared with the year 2005. Although the number of women using family planning methods has increased, there is still much progress to be made.

In light of the important role religious organizations can play in influencing the use of family planning, the Rwanda Faith-Based Organizations Network Against HIV (RCLS-Rwanda) held a meeting with the Ministry of Health to study the role of religious organizations in implementing the national family planning program. RCLS and the Ministry of Health agreed
upon actions that are in accordance with the creed of every religious organization, such as:

- Sensitize Rwandans on the gravity of the issue and play a role in solving the issue.
- Foster all opportunities for religious organizations and the State to promote the economy and empower the Rwandan community within the framework of Vision 2020.
- Promote natural family planning methods and modern methods supplied by medical doctors that respect the creed of every religious organization, life and the value of a human being.
- Promote proper education, beginning in the family, in schools, and in all religious organizations.
- Advocate teaching reproductive health.
- Protect a child’s health beginning at conception.
- Educate the population on reproductive health in order to avoid unplanned pregnancy.
- Encourage families to limit the number of children they have to those they are able to raise.

The Demographic Health Survey (DHS 2005) showed that for families that have more than one child:
• In 23% of the cases, the time between the birth of one child and the next is less than two years.

• In 41% of the cases, the time between the birth of one child and the next is between two and three years.

• In 36% of the cases, the time between the birth of one child and the next is greater than three years.

It would be preferable if a family waits until their child is three years old before the next child is born. This safer birth interval can reduce the number of women and children who die each year in Rwanda.

The prophet Jeremiah says that the steady love the Lord shows His church is like the love between a husband and his wife. The prophet encourages people to plan for their children before they give birth to them. “Build houses and settle down; plant gardens and eat what they produce. Marry and have sons and daughters; find wives for your sons and give your daughters in marriage, so that they too have sons and daughters. Increase in number there; do not decrease.” (Jeremiah 29:5-6)
As the Bible illustrates in these verses, before we give birth to children, and “fill the earth,” (Genesis 1:28) God orders us to prepare for those children including where they will live and what they will eat. He tells us to plant crops for them before they are born, to plan for their education, their medical care, their clothing, and their proper nutrition, so that they can grow up and have a family. Unfortunately there are many families that do not plan for the children they will have to raise.

Many Christian households inaccurately imitate a verse in Genesis that says: “God blessed them and said to them, ‘Be fruitful and increase in number; fill the Earth and subdue it.’” (Genesis 1:28). They consider this role of filling the earth that God gave to mankind as being given to only one person. God was not commanding each of us to populate the Earth with many children of our own. Even if God planned to make Abraham the “father of children as many as the stars in the sky,” (Genesis 15:5) and his wife Sarah was expected to give birth to these children, they would have been able to provide for them. Abraham would have had enough food to feed many children, for the Bible says that he was a wealthy man who had 200 servants at home. In the end God gave them a
single son, Isaac, and through him they had many descendants over the years.

The verse that tells people to fill the Earth, ends with God’s command that people should “subdue it.” This term “to subdue the Earth” means to have power, either intellectual power, economic power, or physical power. How could a child who did not go to school obtain the knowledge needed to subdue the Earth? How could a child who did not eat, did not get medical care, was not clothed, and did not have the basic necessities attempt to subdue? How could any child hindered economically and socially attempt to subdue the Earth? Furthermore, how could any parent unable to provide for his own child have the power to subdue the Earth and accomplish the role of a Christian parent?

**Conclusion of Sermon 3**

To have children and to raise them well is an important decision that must not be taken lightly. The role of parent requires both spouses to think about what it means to conceive a child and if they will be able to provide the child with a good life and spiritual and physical growth. Parents should turn to God and decide with His guidance if they are prepared to conceive and
provide for a child. Before a person decides to bear a child, it is necessary to plan for that child, so that he will have what he needs, be loved, and will not be treated as an accident. The entire family, including the extended family, will be happier if a child is wanted and expected.

A Christian family must differ from the ungodly ones, in which there are children conceived by the parents unwillingly. Some of these unwanted children are killed when they are still in the wombs of their mothers. Such cases are piteous because this scorns a human being and constitutes the sin of killing a person.

Giving birth to children that will be productive members of society means to have the power of providing them with all they need to be sound people who will be able to provide for themselves and be useful to others. Parents should have the power to provide children with enough food, clothes, medical care, schooling, and other requirements enabling them to feel well. However, even all of this is not enough, since children need to be loved by their fathers and mothers, and to be educated on proper behavior. When a child is born to parents who have no commitment to raise the child, the community, and the entire nation suffers. There is no Christian family who
should have a child who must live on the streets and support himself.
Good Health during Pregnancy, Childbirth, and Post-Natal Care

A woman expecting a baby can be compared to a bird which has its nest at the edge of the path and wonders whether it will survive, thinking, “I do not know if I will die or live.” A pregnant woman is between life and death. This is why, as soon as she learns that she has conceived, she should start to prepare for childbirth at a hospital. Here are steps she should take in preparation:

- Have at least four antenatal consultations.
- Make sure she has the Mutual Heath Insurance for herself and her child.
- Choose a health center where she will deliver the child.
- Plan how she will get to the health center.
- Prepare all the necessary items she and the newborn will need for childbirth and postpartum.
- Make sure that she has a blood donor in case it becomes necessary.
- Arrange to deliver the baby with the assistance of a skilled attendant.
- Seek healthcare within two days after birth to make sure that there are no harmful postnatal consequences and that she and the baby are healthy.

Although it is clear that pregnant women do try to go to maternity centers for prenatal consultation, it is recorded that only 13% of women who have prenatal care have the recommended four consultations. This shows that a great number of pregnant mothers do not comply with the recommended program of four consultations, which results in problems many women face during pregnancy, childbirth, and the postpartum period.

The number of women who were assisted by professional midwives increased to 52% in 2007 and 2008 from 39% in 2005 (IDHS 2008). Forty-five percent of women gave birth in a hospital. It is necessary for every woman to give birth at a hospital with the assistance of a qualified medical doctor who will comply with all requirements.
Childbirth in a hospital with skilled attendants is not only for modern times. Skilled attendants were used in Biblical times. According to the Bible, “There were two Hebrew midwives whose names were Shiphrah and Puah. The king of Egypt said to them, ‘When you help the Hebrew women in childbirth and observe them on their delivery stool, if it is a boy, kill him; but if it is a girl, let her live.’ The midwives, however, feared God and did not do what the king had told them to do.” (Exodus 1:15-16) Becoming a midwife takes special training and skill and is not for everyone. Among several thousand Israelites, there were only these two women who were qualified as midwives. God praises the value of people with medical training and also advises us to see a physician, as we read in the Son of Sirach (38:1-15).

**Newborn Care**

We must take care of a child beginning at the time he is conceived and continuing throughout his time in the womb and after he is born. After birth a child must suckle immediately and should not receive any other food besides breastmilk for at least six months. The baby must be vaccinated against diseases. A
child must be protected, because many children die due to diarrhea, poor nutrition, dehydration, lack of blood and delay in providing them with medical care.

**Conclusion of Sermon 4**
There is, however, a great number (55%) of pregnant women who do not give birth at a hospital. This is a main cause of many deaths of women and their babies who die in childbirth. Childbirth at a hospital is crucial; every Christian must realize the role they have in educating mothers on prenatal and postnatal consultations and on childbirth at a hospital. All Christians are also requested to teach others by being good examples and following healthy practices. Preaching by example is more effective than speaking without actions.
There are some who hear the expression “good nutrition” or “rich nutrition,” and believe it is an idea for modern times. This is not the case. Although those terms are not used in the Bible, when God created the first people he knew that they would need good nutrition to feel well. That is why He gave them a variety to eat: “I give you every seed-bearing plant on the face of the whole earth and every tree that has fruit with seed in it. They will be yours for food.” (Genesis 1:29-30) After the flood God told Noah and his family, “Just as I gave you the green plants, everything that lives and moves will be food for you.” (Genesis 9:3)

In the Biblical verses, the green plants are vegetables, gramineous, and tubercles, and may protect people from disease along with tree-fruits. Other fresh food, including cereals and farinaceous foods, provide energy. At the time of Noah, God added food of animal origin which constitutes the group of body-building food. In order for people, especially children, to
In Rwanda, malnutrition continues to be one of the leading causes of the high rate of maternal and infant mortality. Research conducted by the Ministry of Health included in, "Protecting Maternal and Infant Health,” showed that five out of every 1000 children under five years of age face malnutrition. The investigation conducted in 2007 and in 2008 (IDHS 2008) showed that 48% of children between six and 59 months old suffer from anemia. This figure is lower than the rate of childhood anemia of 56% in 2005. Even though research shows that childhood nutrition has improved, there is still much progress to be made as a rate of 48% is still very high. This malnutrition is responsible for kwashiorkor, developmental delay, body weakness, morbidity and problems attending school. Proper nourishment is necessary for children because it supports good growth, makes them strong, and protects them from infectious disease.x

Twenty-seven percent of women between the ages of 15 and 49 suffer from anemia. This rate is a reduction from the rate of 33% in 2005. Both a pregnant woman and a mother who is
breastfeeding need proper nourishment so that their children can grow up to be healthy. Proper nourishment is comprised of food that helps build muscles and includes protein, foods that provide energy, and foods that prevent disease.

- **Foods containing body-building protein:**
  - Food of vegetable origin, such as beans, groundnuts, peas, etc.
  - Food of animal origin, such as fish, eggs, milk, meat, etc.

- **Foods providing energy:**
  - Corn, sorghum, rice, sweet potatoes, manioc, potatoes etc.

- **Foods to prevent disease:**
  - Fruits, green vegetables, food of animal origin

During the first six months, a child must be breastfed exclusively, which means the child is not fed any other substance besides breastmilk. Breastmilk contains all the nutrition the baby needs. It includes water as well as other nutrients available in food such as rock salt and antibodies to prevent disease.
Proper Weight Control
Among the general population in Rwanda, there is a misperception that a healthy person is heavy and has a large belly. To the contrary, it is not healthy to be too large. Excessive weight gain does not come from eating well; it results from eating too much. Being overweight can result in illness and disease. Consuming a large amount of sugar, salt, meat, oil (especially oil that originates from animals), or beer, is unhealthy and can cause a variety of disease. The Bible also prohibits overindulgence: “It is not good to eat much honey…” (Proverbs 25:27); “Do not eat fat… It shall be a perpetual statute…” (Leviticus 3:17); “Be not among winebibbers… or among gluttonous eaters of meat…” (Proverbs 23:20-21)

These verses address food that is part of daily life. However, God counsels that we eat in moderation. Honey is not bad for us and has medicinal uses, but God cautions that eating too much honey can be harmful. Honey contains a large amount of sugar, which can result in diabetes if too much is consumed. Animal fat is also unhealthy. In Leviticus, God asks for animal offerings and says that fat must be burned. We must recognize today that
animal fat has a negative effect on our nutrition (cholesterol levels), and can cause disease. Although it is good to have some meat in our diet, health professionals realize that eating too much meat can cause disease, such as gout. People should only drink beer in moderation. Excessive drinking can lead to drunkenness and even alcoholism. The Bible says that carousing is among things that will prevent people from coming into the heavenly kingdom: “...drunkenness, carousing and the like...I warn you, as I warned you before, that those who do such things shall not inherit the kingdom of God.” (Gal 5:21)

Steps to Protect Infant and Child Health

Young children can contract disease from unclean food. Anyone feeding or preparing food for a child must wash his or her hands with soap before handling the food. Clean surfaces should be used for feeding and food should be protected from flies. Meat and green vegetables should be cooked very well and served to the child before they become cold. In addition, parents and educators must teach children to wash their hands when they get out of bed, after using the toilet, before and after eating meals, and before they go to sleep.
Conclusion of Sermon 5

Parents must be committed to breastfeeding a baby without giving him any other food or drink for the first six months of life. Breastmilk provides the best nutrition and contains all a baby needs during this six month period. Pregnant women and breastfeeding mothers must eat food that is rich in nutrients and rock salts (such as eggs, milk, meat, green vegetables, beans and fruits). It is also necessary for pregnant women to avoid drugs and alcoholic drinks to protect the health of their children.
Hygiene includes essential instructions that promote good health. Lack of proper hygiene can result in death and disease. Diseases caused by microbes resulting from unclean environments are responsible for approximately 25% of deaths worldwide, making this type of illness the second most common killer. Heart attacks are responsible for 31% of deaths worldwide and cancer is responsible for 13% of deaths worldwide.

Children are especially vulnerable to unhygienic environments. Diseases resulting from microbes and unsanitary conditions are responsible for 63% of the deaths worldwide of children under four years of age. The Ministry of Health in Rwanda confirms that every year seven out of every ten people, especially children, contract a disease originating from unsanitary conditions. Among those diseases are diarrhea and intestinal worms.

These diseases result from improper hygiene, including practices such as not washing hands before eating or sleeping,
and after using the toilet. Other factors include the lack of latrines, overcrowding in residential areas, and the custom of sharing utensils or drinking straws. Moreover, occupational settings or public places are often dirty and without toilets. Litter can also result in the growth of disease-causing microbes.

Before nations worked to educate their citizens on avoiding disease with proper hygiene, the Bible shows us that God instructed people to keep their bodies clean in order to be healthy. "When a man lies with a woman and there is an emission of semen, both must bathe with water."

(Leviticus 15:18) It is necessary to wash before and after sexual relations. Although this verse addresses sexual intercourse, that is only one example of the importance of proper hygiene. Washing is a must for everyone, from a newborn only 42 hours old to the very old. Everybody, either old or young, must wash at least once a day.

Washing clothes is also essential to hygiene, and it protects against lice and diseases resulting from unsanitary conditions. The Bible speaks of the importance of keeping clothes clean:

“The Lord said to the Israelites... ‘Whoever touches the man who has a discharge must wash his clothes
and bathe with water...whoever touches anything she (a woman who has her regular flow of blood) sits on must wash his clothes and bathe with water.”

(Leviticus 15:1-30) It is important to understand these verses. God did not mean to stigmatize people or encourage others to despise them. His advice is meant to protect us from contracting infectious disease and keep those infected from transmitting them to others, such as healthcare workers, or health professionals.

Proper hygiene is necessary when handling food and drinks. Diarrhea and intestinal worms kill many children in Rwanda. The Ministry of Health (DHS 2005) reports that 21% of children die of worms or diarrhea before the age of five each year because of poor hygiene.

Some of the strategies we can adopt to protect our children against these deadly diseases include the following:

- Everyone must wash their hands before and after eating.
- Teach children to wash with soap every time they use the toilet, and before they eat meals.
- Mothers must wash their hands before breastfeeding children.
Safe drinking water is also necessary. It is not safe to drink stream water that has not been sanitized or boiled. God was the first to give clean drinking water to His people. At the time the Israelites were thirsty in the desert, God did not give them still water in the Oasis. He asked Moses to give them clean water from a rock. The Bible says: “So they quarreled with Moses and said, ‘give us water to drink’... The Lord answered Moses, ‘take in your hand the staff...strike the rock and water will come out of it for the people to drink.’” (Exodus 17:2-5) The problem is there are still many people who retrieve water from streams and still pools and drink it without boiling it, which can cause infectious disease.

We must have proper hygiene in our residential areas and occupational settings. It is unsanitary and dangerous not to use proper toileting practices. There are still many people, including Christians, who ignore advice on hygiene and defecate anywhere they want. If a proper toilet is not available, a latrine that meets requirements should be dug if at all possible. God prevented people from relieving themselves just anywhere in camps. He asked them to dig a hole outside of their residence.
where they could go to relieve themselves and to cover up their excrement: “Designate a place outside of the camp where you can go to relieve yourself. As part of your equipment, have something to dig with, dig a hole and cover up your excrement.” (Deuteronomy 23:13-14)

God does not tell us to dig a hole into which we can relieve ourselves now because we are not in camps in the desert. However, we are advised to dig and relieve ourselves into latrines that meet all requirements. Unfortunately, there are few households with latrines that do meet all requirements. The Ministry of Health reports that the number of households with latrines meeting requirements amounts to 4% in rural areas and to 31% in urban zones (DHS 2005).

Public settings and other environments where many people gather often have large amounts of litter and do not have latrines. There is often no place to throw trash. It is thrown on the ground, and becomes a pathway for microbes that cause disease.
Regarding hygiene in residential areas, God was not speechless. The Bible says: “When you enter the land of Canaan, and I put a spreading mildew in a house in that land, the owner of the house must go and tell the priest… he is to order that the contaminated stones be torn out and thrown into an unclean place outside the town. He must have all the inside walls of the house scraped and the material that is scraped off dumped into an unclean place outside the town. Then they are to take other stones to replace these and take new clay and plaster the house. The priest is to go and examine it and, if the mildew has spread in the house, it is a destructive mildew; the house is unclean. It must be torn down- its stones, timbers and all the plaster- and taken out of the town to an unclean place.” (Leviticus 14:33-45)

All of us must practice good hygiene in our residential areas, or they may become the pathway for diseases, in particular respiratory and other infectious diseases.
Conclusion of Sermon 6

It is necessary to safeguard and promote the health of each Rwandan, in particular that of children and their mothers. It is important for people to change their behavior and improve hygiene practices regarding their bodies, clothes, food, and residential and occupational settings. This will require that parents and communities focus on hygiene and that children be educated on it.

A few examples of actions we can undertake to improve hygiene and protect our health include:

- Wash at least once a day and focus on cleaning genital organs.
- Brush teeth every time we finish eating foods that contain sugar and before we go to sleep.
- Wash clothes with soap, dry them in the sun, and iron them whenever possible.
- Do not share clothes, tooth brushes, underwear, or towels.
- Wash hands on a regular basis.
- Drink boiled water.
Preventing disease is better than curing it and does not cost anything.
SERMON 7 · PREVENTING AND FIGHTING MALARIA

A condition like malaria with symptoms of fever, shivering, perspiration, and weakness\textsuperscript{xiv} was mentioned in the Bible. The Bible does not show us how people protected themselves against this disease or what medicines they may have used. However, the Bible does show us that it was a powerful disease which God cured in a miraculous way. At least twice, Jesus healed people who suffered from it. \textit{“And when Jesus entered Peter’s house, He saw his mother-in-law lying sick with a fever; he touched her hand, and the fever left her, and she rose and served him.”} (Matthew 8:14-15) A letter from John also tells us about malaria: \textit{“So he asked them the hour when he began to mend, and they said to him, ‘yesterday at the seventh hour the fever left him.’”} (John 4:52)

The Bible shows us that Paul also cured a patient of malaria on the island of Malta. \textit{“It happened that the father of Publius lay sick with fever and dysentery; and Paul}
visited him and prayed, and putting his hands on him healed him.” (Acts 28:8)

In Rwanda, malaria is the number one killer, responsible for more deaths than any other disease. Research on the socio-medical conditions of the population (DHS 2005) shows that pregnant women and children are most vulnerable to malaria. At least five children out of ten (5/10) die before their fifth birthday. Pregnant women are also especially vulnerable to malaria, which causes miscarriage, preterm birth, or low birth weight babies. Malaria weakens pregnant women and children and is even more dangerous when combined with malnutrition.

Fortunately, malaria and the many deaths it causes can be avoided or controlled with certain practices. Below are five ways to avoid or control the effects of malaria recommended by the Ministry of Health:

1. Immediately refer a pregnant woman or a child younger than five to a health center if he or she has a fever.
2. Always sleep under an insecticide-treated mosquito net which covers the entire bed. Research shows that only 16% of children younger than five years old and 20% of
pregnant women sleep under an insecticide-treated mosquito net. This percentage is very low.

3. A pregnant woman should go to a health center as soon as she learns she is pregnant for preventive treatment to protect herself and her child against malaria and its consequences.

4. Dry all stagnant pools of water and remove undergrowth around houses to remove the breeding areas of mosquitoes.

5. Remove empty containers outside houses that may collect rainwater and provide breeding areas for mosquitoes.

In addition, citizens should:

1. Urgently inform health centers of outbreaks of fever in a population.

2. Cover the latrine after use.

3. Close windows and doors before sunset.

4. Spray insecticide where possible.

5. Sleep in clothes with long sleeves and long trousers, and cover feet.
Conclusion of Sermon 7

Malaria is a dangerous disease that kills many people in Rwanda, especially pregnant women and children. However, we can avoid it and protect our families by using insecticide-treated mosquito nets, drying up pools of rainwater in our residential areas, and removing low bushes since it is well known that they host mosquitoes that cause malaria. People should turn to health centers for help and avoid traditional healers in fighting malaria. A person with symptoms of malaria (fever, shivering, perspiration, and weakness) should be referred to a healthcare center immediately because it can quickly result in death.
SERMON 8 · PREVENTING HIV/AIDS AND SEXUALLY TRANSMITTED DISEASES

The HIV/AIDS epidemic in Rwanda is of great concern. Three percent of the population is living with HIV/AIDS. Women and girls are more severely affected by HIV/AIDS than men.

The Demographic Health Survey (DHS 2005) demonstrated that 75% of those infected contracted HIV/AIDS through sexual relations, but 20% of children acquire HIV infection from their mothers during pregnancy, childbirth, or breastfeeding.

God’s Word highlights the best prevention against sexually transmitted diseases, including the AIDS epidemic. To protect against all sexually transmitted diseases, adultery should be avoided. The Bible says: “You shall not commit adultery.” (Exodus 20:14) Sexual relations should be limited to those between married couples. The Bible gives us many examples, including that of the young man, Joseph, who ran away and accepted to be jailed unjustly to avoid being forced to commit adultery with the wife of Potiphar. (Genesis 39:6-23)
Furthermore, the Bible explains that knowledge and education about diseases can help us learn how to avoid them and the lack of knowledge can lead us to death: “My people are destroyed for lack of knowledge.” (Hosea 4:6)

The Ministry of Health provides the following strategies of prevention against HIV/AIDS:

- Prevention of AIDS by Education, Abstinence, marital faithfulness and Condom use, (EABC), the Rwanda Faith-Based Organizations Network Against HIV (RCLS-Rwanda) agreed that the condom can only be used by both the husband and his wife in cases where one or both of them is HIV infected\textsuperscript{\textit{xiv}} and following the counseling of a medical doctor.

- Talk about HIV/AIDS and its consequences in our homes.

- Seek HIV/AIDS testing to know your status so you can take steps to protect your own health and the health of others and seek medical care if needed.

- Avoid stigmatizing people living with HIV/AIDS, including those in our families, in the work place, in church, and elsewhere.
• Refer everyone, especially young people who are most affected by HIV/AIDS, to counseling institutions that test for HIV/AIDS.
• Educate pregnant women on HIV/AIDS testing so that they know their status, and thus they can take strategies to protect their babies from contracting AIDS through childbirth.
• Educate people living with HIV/AIDS infection on visiting health centers to receive antiretrovirals.

To help Rwandans avoid HIV/AIDS and other STDs (sexually transmitted diseases), the Rwanda Faith-Based Organizations Network Against HIV (RCLS-Rwanda) committed to reinforce their efforts in fighting AIDS, and to continue to support strategies enabling girls and women to fight HIV/AIDS and other kinds of sexually transmitted diseases. They support the National Policy on HIV and AIDS through education along with abstinence and fidelity among married couples (EAB). Heads of religious organizations committed to counsel married couples not to infect one another when one or both of them is living with HIV/AIDS infection, and to use condoms where necessary following the counseling by a health professional.
Conclusion of Sermon 8

It has been proven that sexual contact is the most common method of contracting HIV/AIDS infection. The HIV/AIDS infection has no cure or vaccination. Currently, preventing the spread of HIV/AIDS infection is the only way to protect against this disease.
“Anyone with a card for Mutual Health Insurance cannot acutely suffer from any disease at home.” This statement appears on written material for the Mutual Health Insurance program. For the country to reach sustainable development and fight poverty, its citizens must be empowered enough to receive medical care. It was with this concept in mind that the Mutual Health Insurance program was initiated to provide inexpensive healthcare services to as many Rwandans as possible. All Rwandans are required to join the Mutual Health Insurance program or to have medical insurance regardless of economic situation, age, or health status. Accident or disease can occur at any time. A Mutual Health Insurance participant or medical insurance subscriber can be assured that he will have inexpensive medical care if he becomes ill.

Although research (DHS 2005) shows that the number of people involved in the Mutual Health Insurance program is increasing, participation is not high enough. Only 38.7% of people are involved in the Mutual Health Insurance program. This number is still very low. It is possible that people not involved in the
Mutual Health Insurance program are seeking treatment from traditional healers or are suffering from illnesses at home.

What does God’s Word say about the Mutual Health Insurance program? In the book of Ecclesiastes we can see the importance of this program. Working together enables us to achieve results a person cannot obtain alone. “Two are better than one, because they have a good return for their work: If one falls down, his friend can help him up. But pity the man who falls and has no one to help him up!...one may be overpowered, two can defend themselves. A cord of three strands is not quickly broken.” (Ecclesiastes 4:9-12) Although the term “Mutual Health Insurance” as it is currently used does not appear in these verses, God’s Word requests Christians to be united, so that we achieve what we cannot do alone. It applies to the Mutual Health Insurance program and all aspects of life.

God’s Word also gives several examples of partnership among people in every day life. At the time of the Apostles (Act 2:44-45), people shared everything. They sold their property, and shared the return from that property according to individuals’
needs. This encourages us to come together and collaborate with one another to find solutions to all our problems, but especially in providing affordable healthcare to all citizens.

Before Jesus left the Earth, He told us that the supreme law superior to all others is to love God and your neighbor as you love yourself. This is why God’s Word says: “If your brother is naked and has nothing to live on, and afterwards you tell him, ‘Go in peace, warm up and be sated,’ but without giving him anything to eat or wear, what’s the use?” (James 2:15-16) If a person recognizes the pain he feels when he is ill and needs medical care, he should understand that his friend who lacks the funds to pay for medical care also needs treatment when he is sick. Thus, he must demonstrate his faith in God by being involved in the Mutual Health Insurance program, although he may not be sick frequently.

**Conclusion of Sermon 9**

The Bible tells us that “No man can be alone,” and that “a single pillar cannot support a house.” Every Christian should participate and feel involved in the Mutual Health Insurance
program and must educate others about it because it benefits us all.
SERMON 10 · AVOIDING ALCOHOL, DRUGS, AND TOBACCO

We read about the dangers of alcohol in the Bible. However, the Ministry of Health also works to educate pregnant women on the hazards of consuming alcoholic drinks to themselves and, especially, to the children they carry. Alcohol consumption by a pregnant woman during any point in her pregnancy can cause permanent damage to a child. It interferes with the child’s growth, and is especially dangerous during the first and third trimesters when various parts of the fetus are developing that are particularly vulnerable to the effects of alcohol. Signs of the damage to the child caused by alcohol are:

- Low birth weight
- Problems with the heart, kidney and other abdominal organs
- Microcephalus (abnormal smallness of the head)
- Intellectual delay interfering with performance in school
- Weakness in mathematics
- Memory deficits
- Poor judgment
- Poor problem solving skills as an adult
• Immature social behavior; fighting, and poor behavior in society

The Ministry of Health advises women not to consume alcohol from the point of conception through childbirth in order to avoid the negative effects of alcohol, especially the permanent intellectual handicaps the child may suffer.

Although alcoholic drinks are not prohibited by law, they impair a person’s judgment and are discouraged by God. He counsels alcohol addicts by saying, “Woe to those who rise early in the morning that they may run after strong drink, who tarry late into the evening till wine inflames them.” (Isaiah 5:11) The Bible goes on to say, “Wine is a mocker, strong drink a brawler; and whoever is led astray by it is not wise.” (Proverbs 20:1)

Alcoholic drinks have serious consequences to the health of pregnant women, breastfeeding mothers, and infants. Unfortunately too many infants suffer disabilities due to alcohol consumed by their mothers during pregnancy.
God tells us that grief will come upon those who drink in excess. Alcoholics leave their homes, wives and children alone. They do not take care of their families who are left with no education, no medical care, deteriorating property, and not enough food to sustain themselves. Funds which could help them provide for their families are spent on drinks, drugs or tobacco.

In addition, there are people who mix ingredients to brew strong drinks which can have serious consequences on a person’s health. For example, there are those which are known as “kanyanga,” “nyirantare (muriture, kirabiranya),” “igikwangari,” “bareteta,” “yewemuntu,” “baracanye,” “amaso si aya,” etc. Another example is breweries that make “igikwangari” where they boil water with sugar, tea leaves, modern ferment, and lees without proper brewing techniques. In “nyirantare” breweries, the producers are mixing the ingredients mentioned above and boiling them with the juice of poor quality banana beer known as (urwagwa rw’inteme) which includes the reed and tobacco.

All this can destroy not only the life of the drinkers, but also the health of their family members and the children they carry. That
is why God’s Word warns us: “Woe to those who are heroes at drinking wine and valiant men in mixing strong drink.” (Isaiah 5:22)

There are also a variety of dangerous drugs. A few examples that can destroy health, especially the health of a woman and a child include cigarettes, igikamba, ubugoro, rujoka, urumogi, glue, petrol, mayirungi, among others.

**Conclusion of Sermon 10**
Alcoholic drinks and other drugs destroy the lives of their users, especially in the cases of pregnant women, breastfeeding mothers, and children. God’s Word considers it a sin to use them. Alcohol, including beer, consumed by a pregnant woman can cause disability to the child that will last for his entire life.
GENERAL CONCLUSION

This Sermon Guide was written to illustrate the role of religion in solving some of Rwanda’s problems, in particular protecting maternal and infant health. As mentioned in the general introduction, this guide shows what the Bible and the Qur’an say about maternal and infant health. Christians and Muslims who know the holy writings realize that the recommendations of Maternal and Infant Health experts and the government are also found in the Bible and Qur’an. Everyone who believes in these holy books should promote the policy of protecting maternal and infant health, not only because this is the policy of the government and world health experts, but also because it is the Word of God. Those who respect the Word of God are blessed in this world, and are rewarded forever in paradise.

This guide was written by the Rwanda Faith-Based Organizations Network Against HIV (RCLS-Rwanda) in collaboration with the Ministry of Health and assisted by the ACCESS Program. The ACCESS Program is the US Agency for International Development’s global program to improve maternal and newborn health. The ACCESS Program works to expand coverage, access and use of key maternal and newborn health services across a continuum of care from the household
to the hospital – with the aim of making quality health services accessible as close to the home as possible. Jhpiego implements the program in partnership with Save the Children, Constella Futures, the Academy for Educational Development, the American College of Nurse-Midwives and IMA World Health.
HOW TO USE THIS GUIDE

We hope that you find this Sermon/Khutbah Guide useful in your role as a Religious Leader and will use it to inform and educate your community of believers. Below are some suggestions for how to use this document, though we think that you will come up with additional ways of using and disseminating this information as you play your part in improving the health of mothers and children. Therefore, some of the ways this guide can be used include:

- Public dialogues and mass campaigns and through radio, television and the internet
- Pre-Marital Counseling
- Training session for cooperatives of women, men and youth
- Training of Trainers in the Church
- Religious Leader Training
- Marriage Counseling
- Training of members of the Justice and Peace commissions and of the Catholic Church and the basic ecclesial communities in the Church
REFERENCES


4. Urugaga rw’amadini “RCLS-Rwanda”, *Imyanzuro y’Inama ya kane y’abayobozi b’amadini ku ruhare rw’amadini mu gushyira mu bikorwa politiki y’igihugu yo kuboneza urubyaro no gukumira icyorezo cy a SIDA mu Rwanda*, inama yabaye muri Hotel Umubano, tariki ya 12 na 13 Gashyantare 2006, Kigali-Rwanda


ENDNOTES

ii Bibiliya Ntagatifu (traduction de la Bible de Jerusalem), 1993
iii Ministeri y’ubuzima (2008) : Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, Kamena p.131
iv Ministeri y’ubuzima (2008) : Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, Kamena p.142, 143
vi http://www.statistics.gov.rw/
vii Ministeri y’ubuzima (2008) : Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, Kamena p.142, 143
viii http://www.statistics.gov.rw/
ix Urugaga rw’amadini “RCLS-Rwanda”, *Imyanzuro y’Inama ya kane y’abayobozi b’amadini ku ruhare rw’amadini mu gushyira mu bikorwa politiki y’igihugu yo kuboneza urubyaro no gukumira icyorezo cya SIDA mu Rwanda, inama yabaye muri Hotel Umubano, tariki ya 12 na 13 Gashyantare 2006, Kigali-Rwanda
x Minisiteri y’ubuzima (2008) : Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, p. 95-117
xi Minisiteri y’ubuzima (2008) : Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, Kamena p.125-130
xii Minisreri y’Ubuzima, Inyobora Nyigisho y’Amahugurwa y’Abajyanama b’Ubuzima, Kamena 2008, p. 49
xiii http://www.moh.gov.rw/mchh
xiv Minisiteri y’ubuzima (2008): Inyoboranyigisho y’amahugurwa y’abajyanama b’ubuzima, p.29
xv Urugaga rw’amadini “RCLS-Rwanda”, Imyanzuro y’Inama ya kane y’abayobozi b’amadini ku ruhare rw’amadini mu gushyira mu bikorwa politiki y’igihugu yo kuboneza urubyaro no gukumira icyorezo cya SIDA mu Rwanda, inama yabaye muri Hotel Umubano, tariki ya 12 na 13 Gashyantare 2006, Kigali-Rwanda.