Muslim communities have never responded to the HIV/AIDS pandemic in a homogenous way. There have always been differences of opinion and approaches to dealing with HIV/AIDS. The following analyses Muslim attitudes towards fellow Muslims living with HIV/AIDS by comparing the approaches of two Muslim AIDS prevention and support groups in South Africa.

Muslim responses to HIV/AIDS in South Africa have ranged from non-judgmental and compassionate support to violent threats being made against Muslims who publicly disclosed their HIV status. Faghmeda Miller, an HIV-positive AIDS activist, is one such individual who was threatened. Miller, who is one of the founding members of Positive Muslims, an awareness-raising and support group for people living with HIV/AIDS, states in a television interview:

‘My problem was with the head of the Muslim community, which we call the Muslim Judicial Council (MIC), and other bodies. They didn’t feel happy that I disclosed because according to them I am a woman and women are supposed to keep quiet. And secondly…they said…you know…some of them, I won’t say who, some of them said I should be stoned to death because they believed, they still believe, some of them, that it’s a curse from God, and because of that I should have been stoned to death. But I didn’t stop there. I carried on telling people about my HIV status.’

Miller is one of a few brave individuals who have publicly declared their HIV status. She, together with other members of the Muslim community, has challenged the orthodox Muslim approach to HIV/AIDS and has provided an alternative voice to mainstream Muslim religious leadership. While orthodox religious institutions continue to preach uncompassionate morality, progressive Muslim organizations such as Positive Muslims have provided HIV-positive people with the support and counselling they require.

MAC’s attitude towards Muslims living with HIV/AIDS, such as Faghmeda Mohammed, have been determined, first, by their aversion to Western culture, morals, and ethics and, second, by a need to replace the Western model of AIDS prevention with something more Islamic. In essence, Muslim responses to HIV/AIDS are reactionary and defensive. They are reactionary because they believe Western culture to be in direct conflict with Islamic culture – their reaction is therefore to instinctively reject anything Western believing that whatever is Western must be un-Islamic. For example, promoting the use of condoms, associated with a Western model of AIDS prevention, a void is created. Thus, since there is no thought-out Muslim response to AIDS prevention, Muslims respond by arguing that the Qur’an and hadith are sufficient guides to developing an AIDS prevention model. Their responses ultimately amount to sophisticated versions of what religious leaders have been preaching for centuries.

The responses are also defensive because they realize that by rejecting the Western model of AIDS prevention, a void is created. Thus, since there is no thought-out Muslim response to AIDS prevention, Muslims respond by arguing that the Qur’an and hadith are sufficient guides to developing an AIDS prevention model. Their responses ultimately amount to sophisticated versions of what religious leaders have been preaching for centuries.

MAC’s response to the AIDS pandemic is based on conservative interpretations of Islamic texts and is therefore out of sync with the social realities faced by Muslims living with HIV/AIDS. Unfortunately, the AIDS prevention model advocated by MAC is also reflective of the general Muslim response towards people living with HIV/AIDS.

Positive Muslims

The formation, in July 2000, of Positive Muslims, an awareness-raising and support group for Muslims living with HIV/AIDS was an important step in the development of a comprehensive AIDS prevention model. The group’s founding members decided on its formation despite the existence of MAC, because they wanted to move away from the Malik Badri approach to AIDS prevention and also wanted to place more emphasis on dealing with people who had already been infected with HIV/AIDS.

Positive Muslims developed a ‘theology of compassion’: a way of reading the Qur’an and understanding the hadith in a manner that focuses on Allah as a compassionate being. Their mission statement includes the following objectives:

- We believe that a non-judgmental approach should be adopted when dealing with people who are HIV positive. Our concerns are not related to how one became infected; instead we believe that those who are HIV positive must be accepted as they are.
Our primary focus is to provide support for those who have already been affected and to educate our communities so as to prevent the spread of HIV/AIDS. Our approach to prevention includes, but is not limited to, abstinence from sex outside marriage, faithfulness during a relationship, and the use of condoms in appropriate circumstances.

The approach to AIDS prevention adopted by this organization is similar to the Ugandan 'A-B-C' approach, and includes abstinence, being faithful, and the use of condoms. There is furthermore no discrimination with regard to how one contracted the virus or on the basis of one's sexual orientation.

Positive Muslims has primarily focused on empowering women in their awareness campaigns and has conducted several workshops on Muslim women and HIV/AIDS. Based on their research, the organization believes that women are the most vulnerable group in the Muslim community in terms of contracting HIV. This is not only because women are biologically more susceptible to HIV infection than men, but also because of patriarchal religious and cultural practices that prevent women from effectively negotiating their sexuality.

The primary difference between Positive Muslims and MAC is that the former organization bases its approach on the 'theology of compassion' model, whereas the latter uses Badri's Islamic model. The AIDS prevention model adopted by Positive Muslims is far more comprehensive in terms of the range of services that it provides and adopts a more open-minded and progressive approach to AIDS education. It also focuses on empowering women by strongly discouraging Islamic practices that make women more vulnerable to contracting HIV. This model is also a reflection of progressive Muslim attitudes often found on the fringes of Muslim society. In many ways, MAC still reflects the mainstream Muslim response to the AIDS pandemic.

It has been suggested that faith-based communities exert a powerful influence on the priorities of society and the policies of national leadership. Unfortunately, orthodox Muslim responses to HIV/AIDS have negatively influenced the social priorities of this community by concluding, amongst others, that AIDS is a curse from God. However, by developing the notion of a 'theology of compassion', progressive Muslims have been able to provide non-judgmental and compassionate support to people living with HIV/AIDS. It is submitted that these prevention models are intrinsically connected to the way in which Muslims approach religious texts and in many ways mirror Muslim responses towards people living with HIV/AIDS. Ultimately, the AIDS pandemic must be confronted, and open-mindedness is essential to properly dealing with the various issues that arise with respect to the virus in the Muslim community. Finding a Muslim response to HIV/AIDS based on compassion does not by any means equate to bowing down to a Western model. On the contrary, it signifies a responsible and realistic approach to the fact that those who are HIV positive are of us and we are of them.

Notes
2. The pamphlet is entitled Muslim Aids Awareness Programme: A Joint Project of the Jamiatul Ulama (Transvaal), Islamic Medical Association of South Africa & Islamic Careline (n.d.).
4. Summary of an interview conducted with Farida Mohammed (Johannesburg, South Africa).
5. www.positivemuslims.org.za

Abdul Kayum Ahmed is one of the founding members of Positive Muslims – an awareness-raising and support group for people living with HIV/AIDS (www.positivemuslims.org.za).
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