THE STRATEGIC PLAN

FOR

THE HIV/AIDS ACTIVITIES OF

THE ISLAMIC MEDICAL ASSOCIATION OF UGANDA (IMAU)

2014 - 2018

December 2013
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- IMAU Executive committee members

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- Prof. Magid Kagimu - Chairman IMAU
- Dr. Karama Said - Treasurer IMAU
- Dr. Yusuf Walakira - Training Manager IMAU
- Mr. Ayub Twaha - Member, IMAU Executive Committee
- Dr. Abubakar Kalinaki - Former Chairman, IMAU-Students’ Branch.
EXECUTIVE SUMMARY:

IMAU started HIV/AIDS activities in 1989. This was mainly in response to the national multi-sectoral call for all stakeholders including faith-based organizations to participate in the fight against HIV/AIDS. IMAU wanted to contribute to addressing the problem of high HIV prevalence and the high number of new infections continuing to occur each year. IMAU’s clients are the community at large and the Muslim community in particular. These clients need health education and provision of services for prevention, treatment, care and support of those infected and affected by HIV/AIDS.

IMAU plans to improve delivery of these services using the Islamic approach. IMAU seeks to be viewed as a centre of excellence in the delivery of integrated HIV/AIDS services using the Islamic approach.

IMAU is energized by the hope of Allah’s rewards for all those involved in its HIV/AIDS activities. In addition, community appreciation of IMAU’s HIV/AIDS work is a morale booster for IMAU. IMAU’s ethics in the fight against HIV/AIDS are drawn from Islamic principles and teachings.

In the past, IMAU has done well in community mobilization and education to combat HIV/AIDS. IMAU has also done well to involve Muslim and Christian religious leaders as well as Local Council leaders in the fight against AIDS. Another achievement IMAU has made is to generate and disseminate knowledge through research and publications, on the role and value of religiosity (Diini) in HIV prevention and control. IMAU needs to improve resource mobilization for HIV/AIDS, so that its activities can be sustained and scaled up to cover the whole country. Team work, voluntarism and commitment have been major reasons for IMAU’s successes in the past.

IMAU has set itself the following mission:

“To contribute to the national and international response to HIV/AIDS guided by Islamic teachings and scientific knowledge”.

IMAU’s vision is articulated as follows:

“Excellence in fighting for an HIV/AIDS free community using Islamic principles”.

IMAU has set three major goals to assist in achieving its mission and vision:

1. To reduce the incidence of HIV/AIDS using Islamic principles.
2. To reduce the impact of HIV/AIDS on the health and socio-economic status of individuals, families and the community using Islamic principles.

3. To build the capacity of IMAU and the target communities to combat HIV/AIDS using Islamic principles.

In order to achieve these goals IMAU plans to increase knowledge and utilization of preventive, treatment, care and support services for all those infected and affected by HIV/AIDS, with guidance of Islamic principles. IMAU also plans to expand and strengthen the Federation of Islamic Medical Associations (FIMA) HIV/AIDS Resource Centre for Promotion of the Islamic Approach to HIV/AIDS located at Saidina Abubakar Islamic Hospital at Wattuba in Wakiso District. This centre is expected to assist in building the capacity of IMAU, other Islamic Medical Associations and other target communities to combat HIV/AIDS and its driving factors, using Islamic principles. IMAU plans to collaborate with other health facilities in all its branches throughout the country to promote its goals and objectives.
BACKGROUND

Why IMAU started HIV/AIDS activities:

IMAU started HIV/AIDS activities in 1989. The main reasons for IMAU joining the field of combating HIV/AIDS were as follows:

1. To complement government and other key stakeholders in the struggle against HIV/AIDS especially among the Muslim community.
2. To respond as members of the Muslim community to the multi-sectoral national call for all faiths to participate in the fight against HIV/AIDS.
3. To make use of IMAU’s comparative advantage of having both medical knowledge and Islamic knowledge, in the fight against HIV/AIDS using Islamic principles.

Major objectives for IMAU’s involvement in HIV/AIDS

The major objectives of IMAU’s involvement in combating HIV/AIDS were as follows:

1. To increase knowledge and utilization of HIV/AIDS services by the community at large and the Muslim community in particular.
2. To increase the use of the Islamic approach and the faith-based approach to combat HIV/AIDS.

Problems IMAU was addressing:

The main problems IMAU was addressing in combating HIV/AIDS were as follows:

1. High HIV prevalence with high numbers of new infections and deaths continuing to occur.
2. Inadequate treatment, care and support of those infected and affected by HIV/AIDS.
3. Inadequate use of Diini (religiosity) in combating HIV/AIDS

Needs that IMAU was addressing

IMAU was fulfilling the following needs with regards to HIV/AIDS:

1. Health education on HIV/AIDS issues
2. Provision of services for prevention, treatment, care and support
3. Use of the Islamic approach to combat HIV/AIDS.
4. Use of the Faith-based Approach to combat HIV/AIDS which utilizes the combined common strengths of all faiths in the process of responding to the HIV/AIDS epidemic.

IMAU’s clients

IMAU’s clients in the fight against AIDS are the community at large and the Muslim community in particular.

IMAU’s core services

The core services that IMAU is capable of providing while combating HIV/AIDS include the following:
A. HIV/AIDS Prevention services.
   i) Family Education for Prevention, Treatment and Care of HIV/AIDS through Imams and other religious leaders
   ii) Elimination of Mother to Child HIV Transmission (EMTCT)
   iii) Behaviour Change Communication
   iv) Islamic Behaviour Change Communication
   v) HIV Counselling and Testing
   vi) Youth and Adolescent friendly HIV/AIDS services
   vii) Sexually Transmitted Infection Management.
   viii) Community mobilization and education for prevention, treatment and care for HIV/AIDS.
   ix) Family support and counseling for prevention, treatment and care of HIV/AIDS
   x) Safe Male Circumcision
   xi) Support and counseling of men to get involved in HIV/AIDS prevention, treatment and care.
   xii) Support and counseling of women to get involved in HIV/AIDS prevention, treatment and care
   xiii) Operational research on religiosity for HIV/AIDS prevention
   xiv) Monitoring and evaluation of HIV/AIDS services.

B. Treatment, Care and Mitigation of the Impact of HIV/AIDS.
   i) Diagnosis and treatment of opportunistic infections
   ii) Antiretroviral Therapy for adults and children
   iii) Palliative care and spiritual counseling
   iv) Home based care
   v) Laboratory services, X-ray and imaging services and endoscopy services.
   vi) Orphan care
   vii) General health facility-based medical services.
   viii) Outreach medical services
   ix) Logistics and stores management.
   x) Monitoring and evaluation of services

IMAU’s strategies for providing HIV/AIDS services.
IMAU has the following strategies to provide HIV/AIDS services:
A. Capacity building through the following:
   i) Infrastructure development
   ii) Skills development
   iii) Materials development
   iv) Community empowerment and participation
   v) Knowledge generation and dissemination through research and publications

B. Resource mobilization for HIV/AIDS activities
C. Strategic planning for HIV/AIDS activities
D. Partnerships and networking with other stakeholders and service providers.

**IMAU's future direction in combating HIV/AIDS**

IMAU is aspiring to achieve the following in the fight against HIV/AIDS:

1. To be the knowledge hub and ‘Makka’ for the Islamic approach to HIV/AIDS.
2. Excellence in provision of HIV/AIDS services
3. HIV/AIDS service delivery throughout the country.
4. Provision of comprehensive HIV/AIDS health care with full community participation, through centres for delivery of integrated HIV/AIDS services throughout the country, using the Faith-based approach to Accelerating Delivery of Comprehensive HIV/AIDS Prevention, Treatment and Care Services model (FABAPTCA package).

**The Islamic Approach to HIV/AIDS:**

The broad definition of Islam is submission to God’s will. This covers all God’s creation because all God’s creation submits to His Will. The Islamic approach to HIV/AIDS as well as the faith-based approach to HIV/AIDS means submitting to God’s Will in all activities and services without discrimination. No one is not cared for using this approach and no one is left behind. This approach is in line with Uganda’s motto “For God and my Country”. Everything done using this approach is done as an agent or servant of God for the good of the country and its communities.

The operational definition of the Islamic approach to HIV/AIDS includes the following 5 pillars which are related to and derived from implementation of the 5 pillars of Islam:

**Pillar 1: Believing in, trusting and obeying Allah and Prophet Muhammad (SAW)**

This is the first pillar of Islam indicating that an individual recognizes that there is an invisible Allah who has power over all creation, who is the Most Gracious and Most Merciful and who has given guidance to mankind on how to live on this earth and in the Hereafter. This guidance includes Islamic teachings that promote HIV prevention, treatment, care and support, stigma reduction, and life skills utilization. Some of the verses in the Holy Qur’an which support this include the following:

**Holy Qur’an 10:3.**

“Certainly your Lord is Allah, who created the heavens and the earth in six days and He established Himself on the throne of authority regulating and governing all things. No intercessor can plead with Him except after His leave has been obtained. This is Allah your Lord; therefore, serve Him. Will you not receive this reminder?”

**Holy Qur’an 3:164**

Allah did confer a great favour on the Believers when He sent among them an Apostle from among themselves, rehearsing to them the signs of Allah, sanctifying them, and instructing them in scripture and wisdom, while before that, they had been in manifest error.

**Holy Qur’an 33:21.**

You have indeed in the Apostle of Allah a beautiful pattern of conduct for anyone whose hope is in Allah and the final day, and who engages much in the Praise of Allah.
Those who reject Allah and hinder (men) from the path of Allah – Their deeds will Allah bring to naught. But those who believe and work deeds of righteousness, and believe in the (revelation) sent down to Muhammad for it is the truth from their Lord, He will remove from them their ills and improve their condition. This is because those who reject Allah follow falsehood. While those who believe follow the truth from their Lord: Thus does Allah set forth for men their lessons by similitudes.

This first pillar of the Islamic Approach to HIV/AIDS is supported by the new scientific data, obtained by IMAU for the FIMA HIV/AIDS Resource Centre, showing that people with higher levels of the following dimensions of religiosity related to Allah have lower HIV infection rates compared to those with lower levels of these dimensions:
1. Try hard to love Allah with all one’s heart, soul and mind.
2. Feel thankful for Allah’s blessings
3. Feel guided by Allah amidst daily activities
4. Ask for Allah’s help amidst daily activities

Pillar 2: Performing Regular Prayers
Performing prayers is one of the important Islamic teachings. There are other Islamic teachings that indicate the value of prayers in avoiding shameful deeds such as adultery which predisposes to HIV infections.
Examples of these teachings that support performing prayers regularly include:

Holy Qur’an. 29:45 Recite what is sent of the Book by inspiration to you and establish regular prayers, for prayers keep one away from shameful and evil deeds, and remembrance of Allah is the greatest thing in life without doubt and Allah knows the deeds that you do.

Holy Qur’an 48-29: Muhammad is the messenger of Allah; and those who are with him are strong against unbelievers; but compassionate among each other. You will see them bow and prostrate themselves in prayer seeking the Grace from Allah and His good pleasure. On their faces are their marks being the traces of this prostration. This is their similitude in the Taurat (Torah); and their similitude in the Gospel is: like a seed which sends forth its blade; then makes it strong; it then becomes thick and stands on its own stem filling the sowers with wonder and delight. As a result, it fills the unbelievers with rage at them. Allah has promised those among them who believe and do righteous deeds forgiveness and a great reward.

Learning and obeying the Islamic teaching of performing regular prayers should be accompanied by learning and obeying other Islamic teachings that support HIV/AIDS prevention in accordance with Allah’s guidance. These Islamic teachings from the Holy Qur’an are normally recited during prayers in the Islamic tradition.

For example, there is an Islamic teaching in the Holy Qur’an discouraging adultery, which can be a predisposing factor for HIV transmission.
“Do not come near to adultery. For it is a shameful deed and an evil, opening the road to other evils” (Holy Qur’an 17:32).”

This means that people should not indulge in activities that stimulate their sexual desires, which could then lead them to commit adultery. Adultery is a shameful behaviour that may open the road to getting and transmitting HIV infections. Marriage is recommended in Islam to close this road but people must have the means and requirements to marry including testing for HIV infection as indicated below:

Holy Qur’an. 24:32-33:

Marry those among you who are single, or the virtuous ones among yourselves, male or female,. If they are in poverty, Allah will give them means out of His grace, for Allah is ample-giving and He knows all things. Let those who find not the wherewithal (means) for marriage keep themselves chaste, until Allah gives them means out of His grace. And if any of your slaves ask for a deed in writing to enable them to earn their freedom for a certain sum, give them such a deed if you know any good in them. Yes, give them something yourselves out of the means which Allah has given to you. But if anyone compels them, yet, after such compulsion, is Allah, oft-forgiving, Most Merciful to them.

This second pillar of the Islamic approach to HIV/AIDS is supported by scientific data obtained by IMAU for the FIMA HIV/AIDS Resource Centre showing that people who pray frequently several times daily, resulting in getting Sujda, the black mark on the forehead due to prostration of regular prayers, have lower HIV infection rates compared to those who do not.

Pillar 3: Paying Zakat (Charity)

Paying Zakat requires forming partnerships with and making use of religious leaders and their administrative structures. These religious leaders collect the Zakat, distribute it to the community and perform other community activities. The Mosque Imams are the major pillars in this partnership. Islamic guidance in the Holy Qur’an encourages people to form partnerships for promoting good behaviours.

“Let there arise out of you a band of people inviting to all that is good, enjoining what is right and forbidding what is wrong. They are the ones to attain success.”(Holy Qur’an 3:104)

Holy Qur’an: 4:59-64

O you who believe! Obey Allah, and those charged with authority among you. If you differ in anything among yourselves, refer it to Allah and His Messenger, if you do believe in Allah And the Last Day: That is best, and most suitable for final determination. Have you not turned your thought to those who declare that they believe in the revelations that have come to you and to those before you? Their (real) wish is to resort together for judgment (In their disputes) To the Evil (Tagut) Though they were ordered to reject him. But Satan’s wish is to lead them astray far away (from the right). When it is said to them: “Come to what Allah has revealed, And to the Messenger”, You see the Hypocrites avert their faces from you in disgust. How then, when they are seized by misfortune, Because of the
 deeds which their hands have sent forth? Then they come to you, swearing by Allah: “We meant no more than good-will and conciliation!” Those men, Allah knows what is in their heart; So keep clear of them But admonish them, And speak to them a word to reach their very souls. We sent not a Messenger, but to be obeyed, in accordance with the leave of Allah. If they had only, when they were unjust to themselves, come unto you and asked Allah’s forgiveness, And the Messenger had asked forgiveness for them, they would have found Allah indeed oft-returning, Most Merciful.

The believers are advised to obey Allah, the Apostle and those charged with authority. These include religious leaders who teach their communities behaviors that promote HIV/AIDS prevention, treatment, care and support. Their teachings are deep and able to reach people’s souls.

This third pillar of the Islamic Approach to HIV/AIDS is supported by new scientific data obtained by IMAU for the FIMA HIV/AIDS Resource Centre, showing that people who frequently listen to or watch religious programs on radio and TV are more likely to have good behaviours that are expected to reduce new HIV infections compared to those who do not.

**Pillar 4: Fasting.**

Fasting involves self-control and making use of the concept of Jihad Nafs (struggle of the soul against temptations such as sexual desires) by each individual to combat HIV/AIDS. In this context, the Jihad on HIV/AIDS is about each person’s individual struggle to control their own personal behaviour for the welfare of themselves and their families, as well as each community’s struggle to address the broader context of preventing HIV transmission and to provide treatment, care and support to those coping with HIV infection. All Muslims were advised to participate in this Jihad Nafs by Prophet Muhammad (Peace be upon Him). He called it the biggest Jihad because it is not easy for anyone to control the tempting desires of his or her soul. Implementation of the pillars of the Islamic approach to HIV/AIDS is likely to have a limited impact at the community level until a significant proportion of individuals participate in this Jihad. People living with HIV/AIDS should be at the forefront of this Jihad by participating in all prevention, treatment, care and support efforts using this concept of self-control.

**Hadith:**

*Some troops came back from an expedition and went to see the Messenger of Allah Sallallahu alayhi wa-salaam. He said: “You have come for the best, from the smaller Jihad (al-jihad al-asghar) to the greater Jihad (al-jihad al-akbar)”. Someone said, “What is the greater Jihad?” “The servant’s struggle against his lust” (Mujahadat al-abdi hawah). Al-Bayhaqi narrated it in al-Zuhd al-Kabir (Haydar ed. p. 165 #373 & p. 198 #374)*

The enemy in the Jihad on HIV/AIDS is shaitan (satan) and Allah provides guidance on how to handle this enemy.

**Holy Qur’an. 7:200-206:**

*If a suggestion from Satan Assail your (mind), seek refuge with Allah: For He hears and knows (All things). Those who fear Allah, When a thought of evil from Satan assaults them, bring Allah to remembrance, when lo! They see (aright)! But their brethren (the evil ones) Plunge them deeper into error, and never relax (their efforts). If you bring them not a revelation, they say: “Why have you not got it together”? Say: “I but follow what is revealed to me from my Lord: This is (nothing but) Lights from your Lord, and guidance, and Mercy,*
for any who have faith.” When the Qur’an is read, Listen to it with attention, and hold your peace: That you may receive Mercy. And do you (O reader!) Bring your Lord to remembrance in your (very) soul, with humility and reverence without loudness in words, in the mornings and evenings; and be not you of those who are unheedful. Those who are near to your Lord disdain not to worship Him: They glorify Him and prostrate before Him.

Say I seek refuge with the Lord and Cherisher of mankind. The King or Ruler of mankind. The God or Judge of mankind. From the mischief of the whisperer of evil, who withdraws after his whisper. Who whispers into the hearts of mankind among Jinns and among men.

This fourth pillar of the Islamic Approach to HIV/AIDS is supported by new scientific data obtained by IMAU for the FIMA HIV/AIDS Resource Centre showing that people who fast the one month of Ramadhan or more as one of the means of self-control, in accordance with their Islamic faith teachings, have lower HIV infection rates compared to those who do not.

Pillar 5: Performing Pilgrimage (Haj)

Pilgrimage involves reading, learning, acquiring scientific knowledge and reflecting on Allah’s world including its disease conditions such as HIV/AIDS. For example eliminating or reducing risk of HIV infection requires learning about and understanding the scientific facts about HIV prevention and risk avoidance, and about treatment, care and support of people living with HIV/AIDS (PLWHA). Allah’s guidance to believers is to read and learn in order to acquire knowledge and education.

Holy Qur’an, chapter 96, verses 1-5:
Read! In the Name of your Lord who has created all that exists. He has created man from a clot. Read! And your Lord is the most generous who has taught by the pen. He has taught man that which he knew not.

Holy Qur’an. 20:114-117.
High above all is Allah, the King, the Truth. Be not in haste with the Qur’an before its revelation to you is completed, but say, “O my Lord, advance me in knowledge.

We had already before hand, taken the covenant of Adam but he forgot and we found on his part no firm resolve. When we said to the angels “Prostrate yourselves to Adam” they prostrated themselves but not Iblis: he refused. Then we said: “O Adam! Verily this is an enemy to you and your wife: so let him not get you both out of the Garden, so that you are landed in misery.

These verses indicate that knowledge is highly placed in Allah’s world and even angels prostrate before those given knowledge by Allah except Satan. All Adam’s grand children should continue to seek knowledge from Allah including scientific knowledge related to HIV/AIDS. This should be taken as part of their religious duty in worshiping Allah and increasing their religiosity.

Hadith:
Anas Ibn Malik relates from the Prophet when he addressed the issue of knowledge in the hadith where he said, “Seeking knowledge is compulsory upon every Muslim and Muslimah,” (Ibn Majah #240, the hadith is Sahih)

Hadith:

Anas reported from the Prophet (SAW) “Whoever treads on a path in search of Islamic knowledge, Allah will ease the way to paradise for him; the angels will lower their wings, pleased with this seeker of knowledge, and everyone in the heavens and on earth will ask forgiveness for the knowledgeable person, even the fish in the deepest of waters will ask for his forgiveness. The superiority of the knowledgeable man over the worshipper in Islam, is like the superiority of the full moon over the rest of the planets. And the scholars are the inheritors of the Prophets, but the Prophets did not leave behind wealth but they left behind knowledge. And whoever takes firm hold of this is a very fortunate man”. (Abu Dawud, Ibn Majah, Tirmidhi #2835 – Sahih hadith.)

Performing the pilgrimage as an act of worship is intended to increase one’s religiosity. This fifth pillar of the Islamic Approach to HIV/AIDS is supported by new scientific data obtained by IMAU for the FIMA HIV/AIDS Resource Centre showing that people with higher levels of religiosity have lower HIV infection rates when compared to those with lower levels of religiosity.

The Faith-based Approach to Accelerating Delivery of Comprehensive HIV/AIDS Prevention, Treatment and Care services (FABAPTCA Package).

Integration of HIV/AIDS Services:

It has been noted at both national and international levels that it is important to integrate HIV/AIDS services for the benefit of the clients and the community. This means that there should be linkages and referrals between the health facilities and the communities where the clients live. IMAU has developed a model for integration of HIV/AIDS services so that comprehensive HIV/AIDS prevention, treatment and care services are delivered. This model is entitled “The Faith-based Approach to Accelerating Delivery of Comprehensive HIV/AIDS Prevention, Treatment and Care Services (FABAPTICA Package). It has the following components:

I. Health facility:

At the healthy facility service providers are encouraged to deliver HIV/AIDS services for prevention, treatment, care and support using their scientific knowledge supplemented by Islamic teachings. For example, the standard operating procedures for a Muslim service provider to incorporate Islamic faith into his or her work include the following:

1. Believe in Allah. This means give health services as a servant of Allah who taught you health sciences.
2. Pray as you start your work to seek Allah’s help to make your work easy.
3. Pray as you start any procedure on patients.

When the service provider meets a client or patient he or she should do the following:

2. Explain the condition you have found to the client. Inform the client that Allah is in charge of making him or her better.

3. Pray with the patient asking Allah to improve his or her condition.

Non-Muslim service providers are also encouraged to use similar principles that apply to their faith. The Muslim service providers are encouraged to use similar principles that are relevant when they provide services to non-Muslim patients and clients.

II. Community:
Imams and their assistants are trained on how to educate their communities on issues of HIV/AIDS prevention, treatment, care and support. The training is done using a curriculum which has both scientific information as well as Islamic teachings. The Imam and his team who are called “community educators” educate their communities through sermons during Juma prayers, home visits, group talks and mini-lectures. In addition, they refer patients and clients to health facilities. Other religious leaders use a similar approach relevant to their faith traditions.

III. Linkages between community and health facility:

a) From community to health facility:
The Imam and his team refer clients to health facilities using referral cards, letters or phone calls. Sometimes they escort the clients to the health facility. The clients themselves take the referral cards and letters to the hospital. Other religious leaders use a similar approach.

b) From health facility to communities:
Service providers refer clients back to the community educators through “thank you cards”, letters and phone calls sometimes. The service providers also provide home based HIV/AIDS services such as HIV counseling and testing and services for prevention of Mother to Child HIV Transmission. In these circumstances service providers visit homes guided by the Imams and their assistants. The Imams and their assistants provide ongoing care and support to clients and their families after the visit of the service providers. Other religious leaders also do the same.

A diagram indicating IMAU’s FABAPTCA package that is being implemented at the FIMA HIV/AIDS Resource Centre is shown in figure 1 below:
Figure 1: IMAU’s Faith-based approach to Accelerating Delivery of Comprehensive HIV/AIDS Prevention, Treatment and Care Services (FABAPTCA package)
IMAU’s image in combating HIV/AIDS

IMAU seeks to be viewed by others as follows:
1. A role model with best practices in fighting HIV/AIDS
2. A key pillar and partner in the fight against HIV/AIDS
3. A centre of excellence for delivery of integrated HIV/AIDS services using the Islamic approach.
4. A centre of excellence in research on HIV/AIDS issues, especially religiosity (Diini) for HIV/AIDS prevention and control

Mission:
In view of the foregoing, IMAU has set its mission in the fight against HIV/AIDS to be as follows:
“To contribute to the national and international response to HIV/AIDS guided by Islamic teachings and scientific knowledge”.

Vision
IMAU vision in combating HIV/AIDS is as follows:
“Excellence in fighting for an HIV/AIDS free community using the Islamic approach”

IMAU PRINCIPLES AND ORGANIZATIONAL ASSESSMENT ON HIV/AIDS.

Principles, life and meaning:
IMAU gets life and meaning in the fight against HIV/AIDS from the following:
1. Islamic approach as a model for HIV/AIDS prevention and control
2. Commitment by IMAU members
3. Ability to create partnership with religious leaders and other stakeholders
4. Spirit of voluntarism
5. External support from partners

Energizing forces:
The factors that energize IMAU in the fight against HIV/AIDS include the following:
1. Allah’s rewards for all those involved in IMAU’s work done as an act of worship (Ibadah)
2. Donor support
3. Networking with others locally and internationally
4. Community appreciation and awards for IMAU’s work
5. Good leadership in IMAU
6. Conducive political environment
7. Demand for IMAU’s services
8. Past successes and achievements
9. The discovery of new scientific data by IMAU on the role of Religiosity (Diini) for HIV prevention.
IMAU ethics in combating HIV/AIDS
IMAU ethics in the fight against HIV/AIDS are drawn from the following:
1. Islamic principles and teachings
2. Medical ethics
3. National guidelines, standards and policies
4. Community expectations of IMAU
5. International protocols
6. IMAU’s constitution
7. Some good cultures and traditions.

IMAU principles in combating HIV/AIDS
IMAU believes in the following principles in the fight against HIV/AIDS:
1. Preservation of life
2. Humanity
3. Islamic approach to combating HIV/AIDS
4. Equity in service provision
5. Non-discrimination in service provision
6. Maintaining confidentiality where required
7. Remaining trustworthy
8. Transparency and accountability
9. Justice
10. Exercising the professional code of conduct and ethics in service delivery.

What IMAU has done well
In the fight against HIV/AIDS IMAU has done well in the following areas:
1. Community mobilization and education
2. Involvement of religious leaders and local government leaders
3. Proper accountability of projects to the community and donors.
4. Transparency in HIV/AIDS activities
5. Persistence and sustainability in the fight against HIV/AIDS
6. Working with other partners
7. Research and publications on the role of Religiosity (Diini) for HIV/AIDS prevention and control.
8. Documenting and disseminating information on HIV/AIDS
9. Continuing Medical Education services on HIV/AIDS.

IMAU’s best practices in combating HIV/AIDS
IMAU’s best practices in the fight against HIV/AIDS include:
1. Family AIDS Education and Prevention Through Imams (FAEPTI)
2. International Muslim Leaders Consultations on HIV/AIDS
3. Community mobilization for elimination of Mother to Child HIV Transmission
4. Technical support to other countries on issues of the Islamic approach to HIV/AIDS
5. The Faith-based Approach to Accelerating Delivery of Comprehensive HIV/AIDS Prevention, Treatment and Care services (FABAPTCA Package).
6. Research and publications on religiosity (Diini) in combating HIV/AIDS

What IMAU needs to improve in combating HIV/AIDS

IMAU needs to improve the following areas in the fight against HIV/AIDS:
1. Communication programmes
2. Lobbying for funds from Districts by IMAU branch leaders.
3. Maintaining and enhancing relationships with other partners involved in HIV/AIDS
4. Mobilization of members at IMAU headquarters and the IMAU branches for HIV/AIDS activities
5. Promotion of youth programs
6. Expansion of HIV/AIDS services and scaling up activities to cover the whole country.
7. Resource mobilization for HIV/AIDS
8. Publicity in media
9. Follow up and monitoring and evaluation of activities
10. International community mobilization to promote the Islamic approach to HIV/AIDS
11. Gender balancing in implementation of HIV/AIDS activities
12. Safe Male Circumcision
13. Research and publications on the Faith-based approach to HIV/AIDS issues

Reasons for IMAU's past successes

IMAU has been successful in the fight against HIV/AIDS for the following reasons:
1. Team work
2. Voluntarism and commitment
3. Using the Islamic approach to HIV/AIDS
4. Initiation of ideas by the IMAU leadership
5. Professionalism
6. Documentation and dissemination of IMAU’s HIV/AIDS activities.
7. Successful proposal writing
8. Publicity
9. Decentralization of activities to rural areas
10. Successful resource mobilization for HIV/AIDS
11. Building capacity for monitoring and evaluation
12. Technical capacity in dealing with HIV/AIDS
13. Transparency and accountability
15. Research and publications on Religiosity and HIV/AIDS issues
Threats to IMAU in combating HIV/AIDS
The threats that IMAU is facing or likely to face in future in the fight against HIV/AIDS include:

1. Donors stopping financial support
2. Secularization and globalization of our cultures
3. Laws unfavorable to NGOs and Islam
4. Negative media publicity
5. Leadership conflicts in the Muslim community
7. Insecurity and civil unrest
8. Rigidity of extremists
9. Marginalization of IMAU at district level.
10. Negative cultural practices
11. Political turmoil in the world especially in the Muslim and Arab world.
12. SATAN
13. Internal conflicts in IMAU
14. Conflicting messages on HIV/AIDS from community leaders
15. Increase in the HIV prevalence.

IMAU’s opportunities in combating HIV/AIDS
The opportunities that IMAU has or is likely to have in future include:

1. Allah’s mercy
2. Donor support
3. Technical know how
4. Islamic approach to HIV/AIDS
5. National and international recognition
6. Some IMAU members are placed in strategic positions of responsibility
7. Conducive government policies
8. Increasing number of Muslim health professionals
9. Federation of Islamic Medical Associations (FIMA) Resource Centre for promotion of the Islamic approach to HIV/AIDS
10. Networking and partnership with other stakeholders
GOALS AND OBJECTIVES

IMAU's future direction in combating HIV/AIDS

In order to satisfy its stakeholders in the fight against HIV/AIDS, IMAU plans to do the following:

1. Continue partnerships, networking and collaboration with stakeholders nationally and internationally.
2. Maintain accountability and transparency to donors and the community
3. Expand and decentralize activities to IMAU branches in all districts
4. Build the capacity of IMAU members and the community at large to address HIV/AIDS
5. Continue encouraging community participation and involvement in HIV/AIDS.
6. Continue doing research especially on the role of religiosity (Diini) in HIV/AIDS prevention.

In view of the foregoing, IMAU has set itself the following goals and objectives in the fight against HIV/AIDS.

**Goal 1:** To reduce the incidence of HIV/AIDS using Islamic principles.

**Objective:** To significantly increase knowledge and improve attitudes, behaviour and practices of the community for prevention and control of HIV/AIDS using Islamic principles, by the year 2018.

**Goal 2:** To reduce the impact of HIV/AIDS on the health and socio-economic status of Individuals, families and the community using Islamic principles.

**Objective:** To significantly increase accessibility and utilization of preventive, treatment, care and support services for those infected and affected by HIV/AIDS, using Islamic principles, by the year 2018.

**Goal 3:** To build the capacity of IMAU and the target communities to combat HIV/AIDS using Islamic principles.

**Objectives:**

1. To strengthen the Federation of Islamic Medical Associations Resource Centre for Promotion of the Islamic Approach to HIV/AIDS in the delivery of integrated HIV/AIDS services by the year 2018.
2. To establish collaborative centers for the promotion of the Islamic approach to HIV/AIDS in the delivery of integrated HIV/AIDS services in at least 17 IMAU branches by 2018.
IMAU ACTION PLAN FOR HIV/AIDS

IMAU plans to undertake various activities in order to achieve the set goals and objectives. These activities are outlined in the table that follows.

**GOAL 1.** To reduce the incidence of HIV/AIDS using Islamic principles.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Time frame</th>
<th>Indicators</th>
<th>Means of verification</th>
<th>Assumptions</th>
<th>Responsible person</th>
<th>Costs (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To significantly increase knowledge and improve attitudes, behaviors and practices of the communities, for prevention and control of HIV/AIDS infection using Islamic principles, by the year 2018.</td>
<td>1. Hire personnel for project management</td>
<td>x x x x x</td>
<td>No. of staff hired</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>810,000</td>
</tr>
<tr>
<td></td>
<td>2. Procure equipment for management of activities (Vehicles, motorcycles, bicycles, computers, office furniture).</td>
<td>x x x x x</td>
<td>No. and type of equipment procured</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>570,000</td>
</tr>
<tr>
<td></td>
<td>3. Develop materials for behaviour change, communication (BCC) with guidance of Islamic principles</td>
<td>x x x x x</td>
<td>No. and type of materials developed</td>
<td>Quarterly reports</td>
<td>Funds available, Technical assistance available</td>
<td>IMAU Executive Committee, AIDS Coordinators</td>
<td>50,000</td>
</tr>
<tr>
<td></td>
<td>4. Produce BCC materials</td>
<td>x x x x x</td>
<td>No. and type of materials produced</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>250,000</td>
</tr>
<tr>
<td></td>
<td>5. Disseminate BCC Materials</td>
<td>x x x x x</td>
<td>No. and type of materials disseminated</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>Branch Executive Committee</td>
<td>30,000</td>
</tr>
<tr>
<td></td>
<td>6. Train Trainers for BCC</td>
<td>x x x x x</td>
<td>No. of trainers trained</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>National / Branch Ex. Committee</td>
<td>700,000</td>
</tr>
<tr>
<td></td>
<td>Activity Description</td>
<td>Period</td>
<td>Key Performance Indicators</td>
<td>Reports</td>
<td>Funds Available</td>
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<td>7</td>
<td>Conduct training workshops for community leaders and community educators</td>
<td></td>
<td>No. of community educators trained</td>
<td>Quarterly reports</td>
<td>Funds available</td>
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<td></td>
<td>IMAU Executive Committee</td>
<td>Training Coordinator</td>
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<td></td>
<td>1,280,000</td>
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<tr>
<td>8</td>
<td>Conduct community education through sermons, group talks, home visits.</td>
<td></td>
<td>No. of people educated</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>No. of education sessions conducted</td>
<td></td>
<td>Branch Executive Committee</td>
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<td></td>
<td>2,100,000</td>
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<td>9</td>
<td>Conduct media activities e.g. Radio, TV, newsletter</td>
<td></td>
<td>No. of media activities done</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td></td>
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<td></td>
<td>IMAU Executive committee.</td>
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<td></td>
<td></td>
<td>150,000</td>
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<tr>
<td>10</td>
<td>Conduct meetings for support supervision and refresher training.</td>
<td></td>
<td>No. of people given support supervision.</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>No. of support supervision activities done</td>
<td></td>
<td>IMAU Executive committee.</td>
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<td></td>
<td>1,160,000</td>
<td></td>
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</tr>
<tr>
<td>11</td>
<td>Conduct monitoring and evaluation of activities.</td>
<td></td>
<td>No. of monitoring and evaluation reports made</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td></td>
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<td></td>
<td>IMAU Executive committee.</td>
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<td></td>
<td></td>
<td>200,000</td>
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</tbody>
</table>
**GOAL 2:** To reduce the impact of HIV/AIDS on the health and socio-economic status of individuals, families and the communities using Islamic principles.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Time frame Years</th>
<th>Indicators</th>
<th>Means of verification</th>
<th>Assumptions</th>
<th>Responsible person</th>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To significantly increase accessibility and utilization of preventive, treatment, care and support services for those infected and affected by HIV/AIDS, using Islamic principles and guidance by 2018.</td>
<td>1. Identify collaborating centers for delivery of integrated HIV/AIDS services including the following: a) PMTCT b) HCT c) STI management d) OI and TB management e) Clinical care and ARVs f) Home based care g) Laboratory services h) Adolescent friendly services i) Orphan care j) Spiritual counseling services k) BCC</td>
<td>1 2 3 4 5</td>
<td>x x x x x</td>
<td>No. of centers identified</td>
<td>Quarterly reports</td>
<td>Centers willing to collaborate</td>
<td>Branch Executive committee</td>
</tr>
<tr>
<td>2. Sign memorandum of understanding with collaborating centers</td>
<td>x x x x x</td>
<td>No. of centers signing MOU</td>
<td>Quarterly reports</td>
<td>Centers willing to sign</td>
<td>Branch Executive Committee</td>
<td>2,500</td>
<td></td>
</tr>
<tr>
<td>3. Build capacity of collaborating centers for improved service delivery through: a) Refresher training b) Meetings c) Motivators d) Procurement of supplies and equipment</td>
<td>x x x x x</td>
<td>• No. of centers with increased capacity • No. of staff in training meetings • No. of motivators provided • No. and type of drugs supplied and equipment distributed.</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>Branch Executive Committee</td>
<td>850,000</td>
<td></td>
</tr>
<tr>
<td>GOAL 3: To build the capacity of IMAU and target communities to combat HIV/AIDS using Islamic principles.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Time frame</th>
<th>Indicators</th>
<th>Means of verification</th>
<th>Assumptions</th>
<th>Responsible person</th>
<th>Costs (US $)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To strengthen the Federation of Islamic Medical Associations (FIMA) Resource Centre for Promotion of the Islamic approach to HIV/AIDS in the delivery of integrated HIV/AIDS services by the year 2018.</td>
<td>1. Construct centre.</td>
<td>x x x x x</td>
<td>No of buildings constructed</td>
<td>Quarterly report</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>700,000</td>
</tr>
<tr>
<td></td>
<td>2. Procure equipment and supplies for the centre.</td>
<td>x x x x</td>
<td>No. of equipment procured</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>200,000</td>
</tr>
<tr>
<td></td>
<td>3. Hire personnel for the centre.</td>
<td>x x x x</td>
<td>No. of personnel hired</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>450,000</td>
</tr>
<tr>
<td></td>
<td>4. Provide integrated HIV/AIDS services</td>
<td>x x x x</td>
<td>No. of clients served</td>
<td>Quarterly reports</td>
<td>Funds available</td>
<td>IMAU Executive Committee</td>
<td>1,350,000</td>
</tr>
</tbody>
</table>
5. Conduct training activities for IMAU members and other national and international organizations in:
- Proposal writing
- Organizational development.
- Financial management
- Monitoring & evaluation
- Information & data management
- Strategic planning
- Islamic approach to HIV/AIDS
- Research and publication

<table>
<thead>
<tr>
<th>No. of people trained</th>
<th>Quarterly reports</th>
<th>Funds available</th>
<th>IMAU Executive committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>x x x x x</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Conduct and publish findings from monitoring and evaluation of HIV/AIDS activities and the Islamic approach to addressing HIV/AIDS.

<table>
<thead>
<tr>
<th>No. of research reports published</th>
<th>Quarterly reports</th>
<th>Funds available</th>
<th>IMAU Executive committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>x x x x x</td>
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</tr>
</tbody>
</table>

7. Conduct support supervision visits, review meetings, consultations.

<table>
<thead>
<tr>
<th>No. of visits and meetings held</th>
<th>Quarterly reports</th>
<th>Funds available</th>
<th>IMAU Executive committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>x x x x x</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Attend international meetings, consultations and workshops.

<table>
<thead>
<tr>
<th>No. of meetings attended. No. of IMAU members attending meetings.</th>
<th>Quarterly reports</th>
<th>Funds available</th>
<th>IMAU Executive committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>x x x x x</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>No.</th>
<th>Action</th>
<th>KPI</th>
<th>Description</th>
<th>Frequency</th>
<th>Reporting Authority</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify collaborating centres and sign memoranda of understanding</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>No of centres identified</td>
</tr>
<tr>
<td>2</td>
<td>Build capacity of centres e.g. Staff training, equipment and supplies</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>- No. of people trained. - No. of equipment supplied</td>
</tr>
<tr>
<td>3</td>
<td>Provide integrated HIV/AIDS services with guidance of Islamic principles</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>No. of clients served</td>
</tr>
<tr>
<td>4</td>
<td>Conduct research, monitoring and evaluation of activities on Islamic approach to AIDS.</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>No. of reports and publications made</td>
</tr>
</tbody>
</table>

**GRAND TOTAL** 13,095,000