



Promising Practices

On the human rights-based approach in German development cooperation. Islam, HIV and AIDS and human rights in Tanzania

Background

The HIV epidemic in Tanzania poses a major threat to the national development. Although HIV prevalence has slightly dropped in recent years, 5.8% of adults aged 15 – 49 are infected with HIV, with higher rates among women (6.8%) than among men (4.7%). Approximately 1.05 million people, including children, are living with HIV and AIDS (figures as of 2009).

The determinants of the epidemic are multiple and include lack of knowledge of HIV transmission, inconsistent condom use and concurrent sexual partnerships. As in many other countries, gender inequalities, harmful traditional practices and violence against women and girls contribute to the spread of the disease. Stigma and discrimination of people living with HIV and AIDS in the family, community and at the work place are still a major challenge.

Between 2003 and 2013, the Tanzanian-German Programme to Support Health (TGPSH) was implemented by former GTZ, DED, CIM and InWEnt (now merged to Deutsche Gesellschaft für Internationale Zusammenarbeit, GIZ) and KfW on behalf of the German Federal Ministry for Economic Cooperation and Development (BMZ).

The programme supported the health sector reform in Tanzania in achieving its goal ‘to improve the health and well-being of all Tanzanians with a focus on those most at risk and to encourage the health system to be more responsive to the needs of the people.’

The TGPSH focused on six complementary areas of support

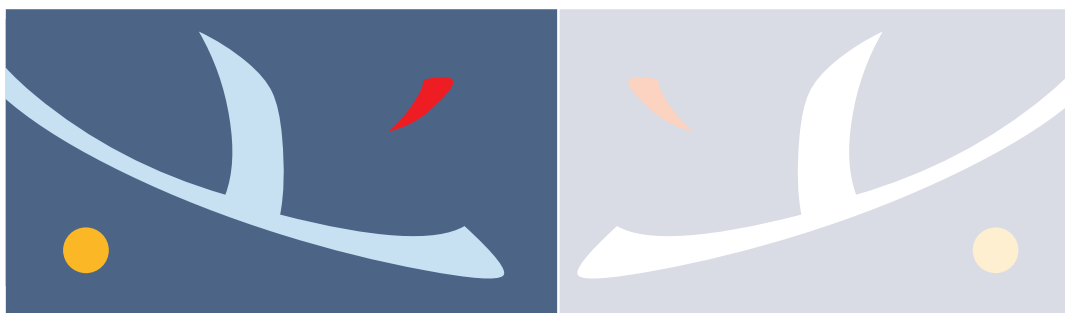
1. district health and quality management,
2. reproductive health,
3. multisectoral AIDS control,
4. health financing,
5. public-private partnership,
6. human resources for health.

Human rights framework

Several human rights are relevant to HIV and AIDS, including the right to non-discrimination and equality before the law, the right to privacy, the right to be protected from violence and harmful practices, the right to information, and the right to the highest attainable standard of physical and mental health.

These rights are enshrined in core human rights treaties, such as the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), and the Convention on the Rights of the Child (CRC). Tanzania has ratified most core human rights treaties, and submits reports to the UN treaty bodies monitoring treaty implementation.

General Comment Nr. 14 from 2000 on the right to health specifies that health services must be culturally appropriate, i.e. respectful of the culture of individuals, minorities, peoples and communities as well as sensitive to gender and life-cycle requirements.



In the field of HIV and AIDS the programme supported governmental and non-governmental organisations at the national, regional, district and community level to develop, plan, implement and monitor comprehensive multi-sectoral HIV and AIDS strategies.

Towards a human rights-based approach

TGPSH support in the area of HIV and AIDS was based on the Tanzanian National Multisectoral Strategic Framework on HIV and AIDS, which established the active involvement of governmental and non-governmental organisations and various other stakeholders, in particular faith-based organisations. Faith-based organisations play an important role in Tanzania, providing guidance to their members on lifestyles, health information and services, as well as support to the poor and the sick. It is estimated that approximately 55% of the 39 million people living in Tanzania are Muslims, 40% are Christians and 5% belong to other communities. With the spread of the epidemic, HIV and AIDS became an issue of concern for the Muslim community and its religious leaders.

In 2003, TGPSH began supporting the training of Muslim religious leaders and religious school (madrasa) teachers at district and regional level, by equipping them with knowledge and skills on HIV and AIDS. During this training, participants stressed the importance of developing guidance and information material in accordance with Islamic values.

In a second step, TGPSH supported the production of a training guide on HIV and AIDS for madrasa teachers, to be used in education sessions with children, youth, men and women.

In a third step, and at the request of the National Muslim Council of Tanzania (BAKWATA), the programme facilitated the development of a policy guide on Islam and AIDS. A number of consultation meetings and workshops at different levels were held, involving members of the Muslim communities, religious teachers, religious leaders as well as public health experts. The policy was finalised and endorsed in a national consensus-building workshop, chaired by the Mufti of Tanzania, and launched by the Vice-President of Tanzania during the national festivity at the end of the fasting month in 2007.

Both, the training guide for madrasa teachers and the Islam and AIDS policy guide were informed by the recognition that religious values and cultural traditions should be interpreted and lived in a way that allows for the prevention of HIV and respects the human rights of people living with HIV and AIDS.

While they did not question the religious legitimacy of child marriage or polygamy, they discouraged the practice of having many wives and sexual partners, the inheritance of widows and early marriages of girls to elderly men as misleading and harmful practices, which contributed to the spread of HIV.

BAKWATA – Islam and AIDS – AIDS Policy Guide

BAKWATA understands its mission as to contribute to the National Response to HIV and AIDS through enabling all people to live life in its fullness, through prevention and protection, provision of care and support and respecting the rights of people living with HIV. BAKWATA commits itself to accelerate the response to HIV and AIDS while being guided by the Holy Qur'an, Sunnah and other new laws in Islam (art. 2.5.)

BAKWATA specifically commits itself to:

- respecting the fact that HIV testing is voluntary and remains at everyone's discretion, to keeping confidentiality concerning testing results, while encouraging people to disclose their HIV sero-status on a voluntary basis (art. 3.1.2);
- respecting and promoting human rights and legal aid to advocate for the rights of all who are affected by HIV and AIDS, to giving people living with HIV and AIDS the opportunity to participate in all Muslim faith activities, to providing care and support to people living with HIV and AIDS without discrimination (art 3.2 and 3.4);
- providing reproductive health education and appropriate life skills to Muslim members (art. 3.1.1);
- giving priority to, and spearhead, initiatives that promote equitable gender relations and human dignity in health development according to Islamic principles and discourage socio-cultural practices or lifestyles that expose people to HIV and AIDS (art. 3.1.5).

Impact

From 2003 to 2008, about 500 Muslim religious leaders were trained. 400 madrasa teachers attended seminars on HIV/AIDS that introduced the training guide. In all 25 regions in Tanzania, including Zanzibar, a total number of 8,000 guides were distributed to different stakeholders, mosques and religious schools.

Since its endorsement in 2007, 30, 000 AIDS policy guides were distributed by BAKWATA through its structures at national, regional and community level. Feedback on the use of the guides and their relevance for practical work by religious leaders and teachers was very positive.

Through this participatory process a dialogue on harmonising religious and cultural values with human rights was initiated. Key human rights, such as the right to privacy and the right to be free from discrimination, were integrated in the BAKWATA AIDS Policy.

The legitimacy of human rights and religious values has been officially endorsed by the highest Muslim authority in the

country. Both, the policy and the training guide furthermore gave room for a flexible interpretation of Islamic norms and thus helped to engage the Muslim community in a discussion on the respect for human rights and the need to overcome harmful cultural practices.

Challenges

As in other countries, Islam in Tanzania has many aspects. BAKWATA as the National Muslim Council has to unite conservative and liberal positions under one umbrella. For example, BAKWATA did not commit itself to promoting the use of condoms as a way of preventing HIV, as only very few liberal religious leaders follow a pragmatic approach and advocate for the use of condoms to prevent harm in society.

Clients' feedback, if collected more systematically, could support monitoring and help identifying shortfalls in health care provision.



Women discussing health matters.



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Men discussing health matters

Lessons learned

Promoting human rights in a culturally sensitive way to address the HIV/AIDS epidemic is a challenging but promising approach. A participatory dialogue on the balance between religious values and human rights, involving a wide range of stakeholders, including highest religious authorities, is a key success factor.

However, enough time needs to be allowed to build the necessary continued commitment at all levels in society and deepen the understanding of universal human rights across religious and cultural boundaries.

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