



## STORIES FROM THE FIELD

# Islamic Leaders Become a Force for Change in Indonesia's HIV Response

**Religious leaders encourage new policies and attitudes toward HIV at the community level.**



PHOTO CREDIT: HPI/INDONESIA

*H. Sonhaji Abdussomad and Syafiq Abdul Mughni have led the way in mobilizing other Islamic leaders across East Java.*

**EAST JAVA** | In 2007, H. Sonhaji Abdussomad and Syafiq Abdul Mughni emerged as early and effective leaders speaking out on HIV issues in Muslim communities in East Java. With support from the USAID | Health Policy Initiative, Task Order I, their efforts have spread across the province over the past year and a half. Muslim communities and organizations have become sensitized to HIV issues, are drafting HIV action plans and incorporating HIV into school curricula, and have committed to forming a network of district-level religious leaders to address HIV.

Islamic leaders have tremendous influence in Indonesia, where the majority of citizens are Muslims. As a result, they are well positioned to act as change agents in a country where HIV is perceived as more of a moral and social issue than a medical one, and people living with HIV and the most at-risk populations are highly stigmatized. While the national government and national-level Islamic organizations have issued HIV policies and statements, implementation of the policies at the local level is often lacking or inadequate due to misconceptions, weak leadership, and limited capacity.

To build support for HIV prevention at the community level, the Health Policy Initiative partnered with two prominent Islamic organizations, Muhammadiyah and Nahdlatul Ulama, which together have a following of 90 million people. Focusing on East Java, the project strengthened the HIV advocacy capacity of the organizations' provincial leaders, Syafiq Abdul Mughni and H. Sonhaji Abdussomad, respectively. These leaders have recruited additional HIV champions, forming a team of eight leaders representing district government bodies and different sectors within the Islamic community (including a university and women's group). The team members have become influential advocates for improved HIV responses at the community level. They have published articles on HIV topics and engage in policy dialogue in support of local HIV prevention policies.

In July 2008, the team, in collaboration with the Health Policy Initiative, trained 113 Islamic leaders from 15 high-prevalence districts across East Java. The training was designed to increase HIV awareness and compassion; facilitate the implementation of HIV policy statements within the faith; and share a compilation of *fatwa* (religious guidance) on HIV prevention. At the workshop, the 15 districts divided into four

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*The team of HIV policy champions in East Java and members of the Health Policy Initiative.*

groups to design action plans to address HIV through their community structures, programs, and activities.

In November 2008, the Health Policy Initiative provided follow-up support to finalize the action plan of the group representing the high-prevalence districts/municipalities of Banyuwangi, Jember, Kediri, Malang, and Pasuruan. The workshop involved 78 participants from the selected districts and helped to focus the action plan on activities that would be feasible and sustainable. A key component of the plan is to establish a network of Islamic leaders who will work closely with their respective district AIDS commissions.

The work in East Java has generated interest and media attention at the national level and in other provinces. Majelis Ulama Indonesia (Indonesia Ulama Council) in North Sumatera asked the Health Policy Initiative to replicate the same process in its province. In March 2009, the project organized a workshop in Medan for 120 participants from all districts/municipalities in North Sumatera. Participants included representatives from six Islamic organizations as well as local government authorities, which helped to create linkages between the Ulama and the district AIDS commissions and regional health offices.

In addition, to address a common goal of the action plans in East Java, the Health Policy Initiative organized a workshop in late 2008 with nearly 100 teachers associated with Muhammadiyah and Nahdlatul Ulama on incorporating HIV issues into life skills education offered through Islamic community-based and religious schools. The East Java action plans emphasize the need to reach young people with accurate HIV information, as a prevention strategy and as a means for combating stigma. Teachers, medical professionals, and experts on Islamic teachings from the two organizations are now engaged in finalizing HIV curricula that will be integrated into Islamic educational institutions in East Java. In June 2009, the Health Policy Initiative plans to train 300 teachers on using the materials.

As a result of these efforts, Islamic leaders in East Java and other provinces have begun to embrace their role in preventing the spread of HIV and assisting those who are affected by the epidemic. They have committed to conducting *jihad*—faith-based struggle—against HIV and to fighting the virus itself rather than those affected by it.