Discussion Paper

Islam, sexual diversity and access to health services
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At the 2010 Asia Pacific Coalition on Male Sexual Health (APCOM) Board meeting, a working group on Faith, Men who have Sex with Men, Transgender People and HIV was formed to look into the impacts of faith and cultural values on the risks and vulnerability of marginalised populations such as Men who have Sex with Men (MSM) and transgender people. At the 10th International Congress on AIDS in Asia and the Pacific (ICAAP), Busan, South Korea held in August 2011, the Working Group brought together faith-based MSM in Asia and the Pacific, with a range of key experts, to discuss faith, sexual diversity, impact on stigma and discrimination, and access to health, and to formulate strategies. In particular, the discussion raised how religious beliefs, values and practices impact on the constructions of sexualities and masculinities and the resulting frameworks of male-to-male sex. It also highlighted how these constructs have impacts on sexual health, such as access to services including care and support for such marginalised and socially excluded populations. To date, there has not been much literature on this.

This discussion paper is a direct outcome of the session, investigating Islam, one of the four key faiths (Buddhism, Christianity, Hinduism and Islam) in the region. The Working Group prioritised Islam due to the number of countries particularly in South and Southeast Asia that male-to-male sex between consenting adults is criminalised (Afghanistan, Bangladesh, Brunei, Malaysia, Maldives, Pakistan1). In India, male-to-male sex is legal in Delhi, and in Indonesia, it depends on the province and districts that enact the Sharia law, which criminalise male-to-male sex2.

Defining MSM and Transgender people

This discussion paper is primarily focusing on South and Southeast Asia concerning men who have sex with men.

Men who have sex with men (MSM) is an inclusive public health term used to define the sexual behaviour of males that have sex with other males, regardless of gender identity, motivation for engaging in sex or identification with any or no particular community. The words ‘man’ and ‘sex’ are interpreted differently in diverse cultures and societies, as well as by the individuals themselves. Therefore, the term MSM covers a wide variety of settings and contexts in which male to male sex takes place.

Transgender is an umbrella term for persons whose gender identity and expression does not conform to norms and expectations traditionally associated with their sexassigned at birth.

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No one taught me to like a guy. God made it like that. It is a blessing from God, because it is very natural for me since childhood.

(Bangladesh)
Islam, in essence, does not condemn anyone due to sexual orientation, and the Quran does not prescribe punishments for homosexuality. However, secondary religious sources such as Hadith, Ijma and patriarchal interpretations of such sources have shaped the attitudes of the global Muslim community regarding MSM and transgender people. As a result, the residing Muslim culture, values and practices have impacted on the lives of MSM, their access to health services and the transmission of HIV. Muslim-identified MSM often find that their private and public lives are significantly influenced and regulated by Islamic thought and cultural practices. In Islam, sexual intercourse is a private matter legitimised through marriage. Any other form of sexual expression is considered a sin and usually treated as a punishable offence. Hence, to avoid stigmatisation, rejection and persecution, most MSM living with HIV do not disclose their HIV status or seek medical treatment.

In the Asian region, Afghanistan, Bangladesh, Pakistan, Maldives, Malaysia and Indonesia have a majority Muslim population. Although Islam is in a minority in India, the influence it has on MSM and transgender people is similar to that of MSM and transgender people in majority Muslim countries. This is indicative of the fact that Orthodox Islam comes with a particular power that has an overwhelming influence on Muslims, irrespective of population size and geography.

This discussion paper examines why Islam matters in preventing HIV, what Islam and Muslim scholars say about MSM and transgender people, as well as how this impacts on the lives of MSM and transgender people and their access to health services. Muslim MSM were interviewed to provide some anecdotes for the discussion paper, and desk-based research was undertaken. It provides a number of recommendations aimed at human rights organisations, human rights defenders, gender activists, policy makers, Islamic scholars and Islamic organisations.

Transgenderism

In the Islamic world, transgender is often conflated with intersex and homosexuality. Hence, transgender people suffer from stigmatisation, with varying, but marginal degrees of difference. Homosexual people, according to many Muslims, make the choice to act so, while transgender people are sometimes excused as an act of nature. Despite this, in most Muslim contexts transgender people are not accepted and are forced to adhere to social constructions of masculinity and femininity. In some contexts such as Egypt and Iran, reassignment therapy is encouraged and made legal within Islamic jurisprudence as a way of forcing gender prescriptions, while in other contexts such as India and Pakistan there is a level of religious tolerance towards the transgender community (Hijras) and stories about them are often found in Hindu mythology and Indo-Pak culture, yet most Hijras still suffer discrimination and victimization.
Contemporary orthodox Islam in Asia is influenced by the patriarchal culture of 7th century Arabia, the birthplace of Islam. When Islam arrived in the Indo-Pak region and other parts of Asia between the 7th and 8th century, it legitimised the perpetuation of the existing patriarchal culture. In most Muslim communities, sexualities and masculinities are constructed through this patriarchal lens, leaving other sexualities marginalised.

Mosques are fully managed by men belonging to religious bodies that oversee Muslim affairs and control what is being preached from the pulpit. Most mosques and religious institutions in Asia are either funded by reformist Wahhabism or have religious leaders trained in their schools of thought. Most other influential religious leaders belong to the reformist heterodox Tablighi Jamaat and Deobandi movements. Due to conservative teachings of such movements, and the social prejudice against males who act outside of the heterosexist and conformist constructions of maleness, MSM living with HIV often do not reveal their status and are hesitant to access health services for fear of stigmatisation. In most cases, MSM either do not access health services at all or only when it is too late.

Section 377 of the penal code that still exists in several former British colonies, such as Bangladesh, Malaysia and Pakistan, exacerbates this by stating that,

\[\text{Whoever voluntarily has carnal intercourse against the order of nature with any man, woman or animal, shall be punished with imprisonment for life, or with imprisonment of either description for term which may extend to ten years, and shall also be liable to fine.}\]

The term ‘order of nature’ used in the code is often interpreted to mean any unconventional sexual interaction not between a male and a female within marriage. Hence, it is not only MSM who are affected by this code, but also transgender individuals, sex workers and all those who do not conform to hetero-normative standards of morality pertaining to sexual conduct.

Section 377 of the Bangladesh Penal Code makes same-sex intercourse a crime punishable by imprisonment for life. Consequently, few are open about their sexual orientation, while most are forced to live a life of secrecy and lies.
The story of Sodom and Gomorrah (the people of Prophet Lot) in the Abrahamic faiths is used to condemn homosexuality and, in some cases, any sexual expression that does not constitute a consensual and contractual agreement between a male and a female. There is a lack of research, from an Islamic perspective, on the various atrocities committed by the people of Sodom and Gomorrah, and an almost complete reliance on consensus (Ijma’) by early Islamic scholars from between the 7th and 9th century concluding that the destruction of Sodom and Gomorrah was as a result of homosexuality.

Contemporary progressive scholars from the Abrahamic faiths conclude that the inmates of Sodom and Gomorrah were not destroyed for homosexuality, but for a multiplicity of atrocities which included xenophobia, economic exploitation, as well as sexual coercion where men became victims of anal penetration and women victims of temple prostitution. Casual male-to-male sex was related to idolatrous practices of collecting semen as an offering to the gods for keeping their lands fertile. Progressive scholars agree that the story of Sodom and Gomorrah has no direct relation to sexual orientation or sexual identity, but rather that the sexual atrocities were a direct result of the interplay between power, sex, wealth and the prestige of the patriarchs.

The Quran is written in a poetic form, leaving it open to evolving and varied interpretations. Muslim scholars agree that Quranic verses cannot be quoted in isolation without considering contexts and reasons for revelation (Asbabun Nuzul). There are 76 verses in the Quran that directly relate to Sodom and Gomorrah (the people of Prophet Lot). These verses are spread over 9 different chapters (references 7:80–84, 11:77–83, 15:57–79; 21:74, 22:42–43, 26:160–175, 27:54–58, 29:28–34, 54:33-40). To accurately interpret and convey the story, one must piece these verses together and compare it with scientific and historical facts. Yet, Orthodox Muslim scholars neglect the scientific and historical context of Sodom and Gomorrah, instead quoting verses in isolation that portray the story as God’s condemnation of homosexuality. They are unwilling, or perhaps unable, to separate sexual orientation and identity from the sexual atrocities committed by the inmates of Sodom and Gomorrah. This lack of research prevents religious leaders from making informed judgments around homosexuality.
Most scholars argue homosexuality from an *ijma'* perspective without consideration of recent scientific and sociological developments in the area of gender and sexuality. In addition, religious leaders take instructions from a *Hadith* which cautions Muslims against introducing any new matters to the religion, since innovations are seen as a deviation from the straight path and this leads to the hell fire. Instead, religious leaders should be empowered with the most updated research on gender and sexuality to enable them to make accurate scriptural interpretations based on scientific and historical facts.

Secondary Islamic sources, such as *Hadith*, are open to question for the following reasons.

- It refers to the atrocities of Lot’s people (Sodom and Gomorrah), including same-sex rape, molestation, sexual coercion and same-sex indecent public sexual behaviour related to idolatry. It does not include sexual orientation as a vice.

- The *Hadith* is often classified as either acceptable (*Hasan*), weak (*Da‘ef*), fabricated (*Mawdu‘*) or questionable by earlier scholars of *Hadith* Methodology, as the chain of narrators are either incomplete or one of the narrators in the chain is of questionable character, making the narration unreliable.

- The *Hadith* is influenced by the narrator’s opinion (*ra‘i*).

Despite this, such *Hadith* are still used by orthodox scholars to fuel the argument against homosexuality.

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**Consequences of negotiating gender, sexuality and religion**

Marriage is strongly advocated as a prophetic example within Muslim culture. Social pressure forces MSM to marry, resulting in extra marital relationships and exposure to HIV and STIs and the risk of infecting their spouses. This is often accompanied with feelings of guilt, betrayal and unfaithfulness.

Where same-sex unions are a cultural taboo or religiously forbidden, MSM negotiate their need for love, intimacy and acceptance either through one night stands, short lived relationships or sex work. Often MSM meet up with strangers for sex and have multiple sex partners in short spaces of time.

Socially constructed masculinities force MSM to play roles contrary to their own nature. These hold characterological, psychological and sociological implications for MSM.
Quranic guidance was revealed over a 23 year period as the Prophet Muhammad (pbuh) required divine counsel on particular social issues. Although homosexuality was prevalent in Arabian culture at the time the Quran was brought to light, the Quran makes no reference to it. Yet, in Chapter 24 verse 31, it does acknowledge that there are men who have no attraction towards women. Most scholars wrongly conclude that these men were castrated eunuchs, overlooking that the Mukhannathun mentioned in this chapter included natural eunuchs (men who naturally lacked sexual interest in women) and effeminate men.

According to Rowson (1991) the Mukhannathun were a mixture of effeminate men, castrated men, natural eunuchs, bisexuals and transvestite men who participated in the entertaining arts and music. The Prophet Muhammad’s (pbuh) treatment of them varied and was based on merit; sometimes banning them from society due to misbehaviour and sometimes leaving them alone as he recognised them as people who pray. There is no evidence that the Prophet Muhammad (pbuh) condemned a Mukhannath based on sexual orientation or gender identity, or that he had to formally address sex between men and the Mukhannatun. In addition, a plethora of poetry emanating from between 7th and 9th century Arabia praises same-sex love and love for the beardless boy, indicative of social tolerance towards homosexuality.

This discussion paper recommends further research to bridge the gaps between the atrocities of Sodom and Gomorrah and early Islamic rulings around homosexuality, bringing out the distinction between the Mukhannathun of the Prophet Muhammad’s (pbuh) time and the lived realities of MSM today.

MSM who are socially recognised as effeminate suffer rejection, emotional and physical abuse. Discrimination is often felt by those seeking health services.

Inability to negotiate between religion, gender and sexuality leads to anxiety, depression, bouts of guilt, dysfunctional relationships and suicide.

Most MSM at some time in their life have used alcohol, drugs and casual sex as a way to numb the pain of rejection. As a coping mechanism, some MSM appease themselves with the belief that they are the ‘third gender’ and blessed with both masculine and feminine qualities and hence favoured by God. This belief is more prevalent amongst the Hijras of India and Pakistan and most likely influenced by the Hindu belief that the Lord Ram blessed Hijras for their devotion.
Progressive Muslim scholars and Muslim feminists assert that the Quran needs to be reinterpreted and made relevant to modern times. Progressive interpretations of the Quran, such as that of Laleh Bakhtiar, are all-inclusive and gender sensitive. Progressive Muslim scholars assert that the Quran makes numerous references to diversity and difference, and some scholars, such as Dr Amina Wadud, Siti Musda Mulia and Dr Faried Esack, add that this diversity includes gender and sexual diversity.

In Chapter 49 verse 13 as well as Chapter 30 verse 22, it acknowledges human diversity in using the words ‘nations’, ‘tribes’, ‘colours’ and ‘tongues’. Sociological and anthropological studies have shown how diverse humanity can be beyond the margins of colour, race, language and ethnicity.

Additionally, the Quran acknowledges in Chapter 17 verse 84 that everyone acts according to their own natural inclinations, and that God is the better judge of those actions. This implies that judgment cannot be passed on someone based on their predisposition or innateness of being. The Quran also acknowledges in Chapter 3 verse 6 that God creates and shapes in the womb whatever God pleases.

Hence, if it is scientifically proven that humanity is diverse in sexuality and gender, and that sexual orientation is inextricably influenced by genetics and determined in the foetal stage, then the interpretation of these Quranic verses should include this reality for the Quran to be considered accurate.

Often orthodox Muslim scholars argue that same sex couples cannot procreate and hence do not benefit humanity. In Chapter 30 verse 21, the Quran promotes the idea that partners are created to cohabit and to engender love and intimacy between them as the primary reason for their relationship. Thus, procreation is not the primary objective of human relationships, but a consequence of a male to female sexual intimation. This does not imply that the Quran favours intimation that produces offspring or denies the possibility of intimacy between same sex couples. Had the primary reason for cohabitation and sexual intimation been for procreation only, then the Quran would have not done justice to couples who are intimate yet barren.
Islam allows for difference of opinion, and religious leaders disagree on many social issues. While most orthodox Muslim scholars are vehemently opposed to homosexuality, there are many progressive Muslim scholars with varied positive opinions about gender and sexual orientation. Human rights organisations and policy makers should create a database of progressive religious leaders and lobby for their support. The quotations and extracts from Muslim religious leaders below show the diversity of views around MSM and HIV.

“HIV is a punishment from God, because it comes from our actions. It’s a problem when men get married with men; there won’t be new babies and women won’t have men to marry. The solution for MSM is to control their feelings.” Interview with Imam Muda Hassan – Malaysia

Sheikh Yasir Qadhi, Dean of Academic affairs Al-Maghrib Institute said on The Deen Show that those who have homosexual tendencies should either marry the opposite sex or do the prayer of Istigharah (Asking for guidance). He equates homosexual urges with kleptomania.

‘Contemporary ulama and scholars such as imam Feisal Abdul Rauf and the Indonesian kiyai Husein Muhammad assert that prominent commentaries even from Islam’s classical era have acknowledged and probably tolerated sexual and gender diversity.’ www.thenutgraph.com/malaysias-gay-threat/

Dr Moulana Farid Esack, says that Islamic law deals with the act of gay sex, but not with sexual orientation, and it is silent on the idea of expressing one’s sexual orientation. http://aliciapatterson.org/stories/south-africa’s-gay-imam-and-his-disciples

Mohamed El-Moctar El-Shinqiti, a contemporary Mauritanian scholar, has argued that ‘[even though] homosexuality is a grievous sin... (a) no legal punishment is stated in the Qur’an for homosexuality... (b) it is not reported that Prophet Muhammad has punished somebody for committing homosexuality... (c) there is no authentic Hadith reported from the Prophet prescribing a punishment for the homosexuals...’ Hadith scholars such as Al-Bukhari, Yahya ibn Ma’in, An-Nasa’i, Ibn Hazm, Al-Tirmidhi, and others have impugned these statements. www.onislam.net/english/ask-the-scholar/crimes-and-penalties/disciplinary-penalties-tazir/176732.html

I feel that there is no acceptance for me because of my sexuality and that there is no place for me. MSM should not be considered to be unnatural because it is natural for me. (Pakistan)
Earlier scholars such as Abu Bakr Al-Jassas (d. 981 AD/370 AH) argued that the Hadiths on killing homosexuals ‘are not reliable by any means, and no legal punishment can be prescribed based on them.’ Threats to Behead Homosexuals: Shari’ah or Politics? by Mohamed El-Moctar El-Shinqiti, IslamOnline.net

The role of religious / cultural stigmatization in access to health

The following has been deduced from the 15 interviews with Muslim MSM from Bangladesh, India, Indonesia, Malaysia and Pakistan:

Rejection of MSM in Muslim societies is real and sometimes translates into violence. Many MSM constantly deal with the pain of rejection and avoid situations in which they may feel rejected. Sex can provide short term relief from rejection.

MSM may avoid accessing health services for fear of further rejection and victimisation.

Some religious leaders are uninformed about HIV and preach that it is a punishment from God for homosexuality. This can make HIV services inaccessible to MSM who hide because of fear. Burial rights may be denied to those who died as homosexuals or with HIV. This further discourages MSM from revealing their HIV status. Families may hide the ‘shame’ by stating that the death was due to tuberculosis or cancer.

Religious stigmatisation adds to low levels of self-esteem amongst MSM which further exacerbate the lack of self-care and protection against HIV.

Culturally females are viewed as inferior to males and often effeminate men as viewed a degree lesser than females. MSM feel that they do not fit the construction of masculinity or femininity and may struggle to understand their own identity or their place within Muslim culture.

“Although most people are not practicing Muslims, when they speak, they do so from an Islamic point of view.” (Indonesia)
Based on the 15 interviews conducted with Muslim MSM in Bangladesh, India, Indonesia, Malaysia and Pakistan, it was apparent that they have limited knowledge of their own religion and have faith in that which they are told by religious leaders and peers in the community. All Muslim MSM in the interviews acknowledged that they were told homosexuality is a sin and that HIV is a punishment from God. Hence, Muslim MSM living with HIV experience constant guilt and shame. As a result of this, they fear rejection and victimisation from families and their communities, thus announcing their HIV status and sexual orientation is not possible.

Often, health professionals in countries with a Muslim context are Muslims who are prejudiced against MSM and those living with HIV. This leaves MSM and Muslims living with HIV feeling judged and as a result, Muslim MSM do not, or rarely, access health services for fear of stigmatisation.

Some Muslim MSM said in the interviews that they believe using condoms to be prohibited in Islam, but are not able to substantiate this belief. Many MSM admitted to not practicing safe sex all the time and some acknowledged that they are not aware of all the centres that offer information around safe sex. Most Muslim MSM are still 'in the closet', so it is difficult for health service providers to access them, or for researchers to adequately estimate the size of the MSM population.

Marriage is strongly advocated in Muslim communities. In cases of arranged or forced marriages, MSM do not reveal their HIV status or their sexual identity to their spouses for fear of shaming the family or the in-laws. This may put their future wives and children at risk of contracting HIV. Many MSM do eventually marry women but do not test for HIV prior to marriage for fear of unwanted interrogation and suspicions. Many MSM believe that their homosexuality is habitual and that they will eventually be able to free themselves from the practice. This belief has had negative impact on sexual behaviour in some Muslim MSM, such as the increased risk of contracting HIV through multiple sexual partners. Many Muslim MSM also believe that sex outside of marriage is a sin. Those who have done so, and have consequently contracted HIV, are left feeling guilty and ashamed. Therefore, MSM often do not speak about their sexual experiences with health professionals.

"Being gay is a very natural thing for me whereas religion is what people make it to be. I do not feel restricted in any way." 
(India)
In working with MSM and transgender people in Muslim communities, it is necessary to consider how to approach the issue. The following diagram illustrates current approaches, and highlights those which seem to work best if operating from the Islamic credence that every human has the right to freedom of belief and lifestyle.

This brief concludes that the best approach to use in working with MSM and transgender Muslim issues is a combination of progressive Islamic and alternative approaches.
The Quran is silent about sexual orientation. Although it makes mention of men who have no attraction to women, it does not condemn them. The sexual act of homosexuality is often regarded as adultery by some scholars and as a public act of indecency (faahishah) by others. However, the public sexual act has to be proven by reliable witnesses.

Additionally, there are no references to homosexuality in the Hadith collections of Bukhari and Muslim (two major sources of prophetic tradition), and no Hadith at all reporting an actual occasion in which the Prophet responded to it in any way.

This discussion paper finds that punishments for homosexuals are based on juristic opinion and weak Hadith. Juristic views stating that homosexuals ought to be killed, burnt, or thrown from a high place have no legal basis in the Quran. Beheading or stoning has no basis in the Quran or the authentic tradition of the Prophet Muhammad (pbuh). The maximum punishment for any public sexual offense is 100 lashes, with options of imprisonment or of pardoning the offender based on merit and at the judge’s discretion. In any case, the Quran and the Prophetic example seem to favour pardon over punishment.

Recommendations include that human rights organisations, human rights defenders, gender activists and policy makers should:

1. Support the Passivist / Reformist views which are approachable, non-violent and can help address the issue from a theological perspective.
2. Support the Humanist and Arbitrator approaches to address the MSM issue from a human rights perspective.
3. Develop an understanding that it is necessary, when working on MSM and transgender issues in countries where there is a Muslim context, to incorporate a theological approach in their work.
4. Use positive religious text in media (TV, radio, blogs, publications) to oppose harsh orthodox approaches that are not respectful of human rights and choice of lifestyle.
5. Develop training modules and advocacy strategies that combine human rights and theological perspectives.
6. Document testimonies from MSM and transgender people on discrimination by health service providers.
7. Provide training to relevant stakeholders, including health service providers, on how to best work with MSM and transgender people within a Muslim context.
Conclusions and recommendations
(continued)

8 Increase consciousness raising and dialogue amongst religious leaders around religion and sexuality, specifically amongst Absolutists, Remedialists and Radicalists.

9 Develop a database of progressive Muslim religious scholars for lobbying and keeping MSM informed about who their progressive leaders are in their respective regions.

10 Develop programmes for Muslim religious leaders on HIV and MSM to influence and encourage positive messaging during Friday congregational prayers.

11 Develop strategies to reach those who are not openly MSM so that they can be empowered with research and Islamic information on sexual orientation and gender through training and educational programmes.

Other recommendations include:

12 Progressive Islamic scholars and progressive Islamic organisations should research the penal codes based on weak Hadith, and make their findings available to human rights organisation who work in Muslim contexts.

13 Progressive Islamic scholars should increase scholastic work to bring out the distinctions between the atrocities of the inmates of Sodom and Gomorrah, the Mukhannatun and sexual orientation in order to assist religious scholars in making shifts in thinking and approaches.

"I once married a girl and I wanted to follow the religious people and do what they want but these feeling you can’t push away."
(Malaysia)
I am not really comfortable to be publicly MSM. I can’t be myself, I am afraid to be really who I am. I can’t talk the way I want or do the things I want to do because of the fear of the community and what would be said about me. I live a fake life. (Malaysia)
12. Laleh Bakhtiar (b. 1938, in New York City, USA) is an Iranian-American Muslim author, translator and clinical psychologist who has had a second attempt at interpreting the Quran. She has translated and written a combination of 25 books about Islam, many dealing with Sufism. Her translation of the Quran called The Sublime Quran, was first published in 2007. She attempts to interpret the Quran being sensitive to gender issues.

13. Dr Amina Wadud is a Muslim feminist, a female Imam and author of the book, Inside the Gender Jihad: Woman’s Reform in Islam.

14. Siti Musda Mulia is a Research Professor of the Indonesian Institute of Sciences (LIPI). She is also a lecturer on Islamic Political Thought in the School of Graduate Studies of Syarif Hidayatullah State Islamic University, Jakarta, Indonesia.

15. Dr Faried Esack is the founder of Positive Muslims. He is also a Muslim Liberation theologian and head of the Department of Religion Studies at the University of Johannesburg.

REFERENCE


... because you are Muslim they say this [living with HIV] happened to you because of sin and because you do things you are not supposed to. ”

(Malaysia)
This publication was produced by APCOM in partnership with IDS Knowledge Services and was written by Muhsin Hendricks.

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The quotes highlighted in this discussion paper are taken from interviews with Muslim MSM from 5 countries in Asia, and were compared with interviews from Muslim MSM in other parts of the world. Insignificant differences were noted, indicating that the Islamic ruling on homosexuality impacts on MSM in similar ways, regardless of culture and geography.
We are united in our courage to advocate issues that affect the lives of men who have sex with men and transgender people, including HIV, rights, health and well being.