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ROLE OF RELIGION ON WOMEN WITH HIV/AIDS:A QUALITATIVE CASE STUDY METHODOLOGY

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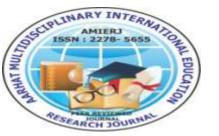
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Abstract

HIV/AIDS is a global, social and developmental health concern. According to the World Health Organization (WHO) Report 2014, globally approximately 35 million people are living with HIV/AIDS in 2013. Despite great effort it is found that around 2.1 million individuals worldwide became newly infected with HIV in 2013. The worst situation is 19 million of the 35 million people living with HIV today do not know that they have the virus (UNAIDS 2014). Ways to address the issue of HIV/AIDS is through Prevention and treatment. HIV/AIDS is not only bio medical concern rather also lined with social development of our country. One way to address the plight of PLWHA is through the support of religion and religions institutions. This study is about the role of religion in the promotion of HIV/AIDS awareness and prevention also focusing on infected people who need treatment, care and social support. The findings of the study show that People living with HIV/AIDS (PLWHA) depend on religious teachings and spirituality to manage their illness. Religion is addressed as a coping mechanics to overcome from their suffering like anxiety, depression.lonliness, greif and suicidal tendencies.

Keywords: HIV/AIDS, Religion, Women, Social Support



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Introduction

Health is one of the major concerns of all individuals. According to the World Health Organization (WHO), Health (1946) is defined as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. It is very clear from the above definition that health not only focuses on physical and mental status of an individual, but it is also a holistic approach which includes the total well being of an individual. This definition coincides exactly with the people living with HIV/AIDS because of the chronic and devastating state of the illness, stigma, and discrimination resulting in loss of lives.

Arles, Nalini (2012) mentioned that HIV and AIDS are taboo words in India. The infection is known with many names like "positive disease", "gay disease", "modern plague", "skinny disease" or "slim disease" (Samraj, David & Suneetha 2011:5). Others tend to categories HIV/AIDS with other incurable diseases such as cancer or diabetes, and refer to it as a "killer disease". Clearly, the name they give to the illness is indicative of their attitude towards it (Samraj, David & Suneetha 2011:5).

The HIV/AIDS pandemic is a global crisis with impacts that will be felt for decades to come. More than 20 million people have died since the first case was reported in 1981. HIV/AIDS is a major global health emergency. HIV infections also stimulate various other opportunistic infections like tuberculosis, a leading cause of death among the infected and affected with HIV. But AIDS is not the same everywhere. Access to effective prevention and treatment, and consequently the fates suffered by individuals infected with HIV, vary widely.

People living with HIV/AIDS face stigma and discrimination in various forms. They are denied medical treatment, available facilities, pushed to poverty, face gender inequality, depression, agony, loneliness etc and in this context it is relevant to understand the role of religion in the prevention, treatment, care and rehabilitation of PLWHA.

Researchers in many studies have asked whether people of low religious practice feel sick and depressed. Hummer et al. 1999 in their study stated that those who attend Church have been found to have increase in life expectancy compared to non-attendees. Pellerin, J.; Edmond,



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M. B. (2013) in their study mentioned that religious patients who were hospitalized had less suicidal thoughts compared to non religious patients.

Hinduism

Religion in India is a way of life in which Hinduism forms an integral part of the Indian tradition. Hinduism is one of the oldest of all religions in the world. It has no beginning and there are many Gods associated with this religion. There is no specific founder, it's a mystical religion leading the devotees to experience the truth personally and reach the place where God and man are one. Hinduism is a synecdoche describing the similar philosophies of Vaishnavism and Shaivism It is basically an Indian phenomenon and portrays the teachings of ancient sages and scriptures. In Hinduism there is no unified way of religious practices and belief systems because we can see the followers worship many Gods and Goddess in various forms. Thus is it not a monolithic religion. Hindus believe in idol worship, reincarnation, karma, dharma and moksha.

Sex and Sexuality

According to Hindu philosophy sex and sexuality form an integral part of life. The Hindu culture and their texts discuss the sacred nature of sexuality and focus on the positive aspects of sex. The philosophy of Hinduism lies on four main goals: Dharma, Artha, Kama, Moksha. Dharma insists on righteous and regulated living so that one is able to acquire wealth or success, Artha. With the wealth one can enjoy Kama a sensual pleasure. And finally Moksha, which is the ultimate goal of all Hindus, in order to escape Samsara (the cycle of birth, death, and rebirth) and reach enlightenment and/or Nirvana.

All religions insist on Chastity as a top human value. 'Sex before Marriage' i.e., pre marital chastity is given first importance in the ethical values of Hinduism. Love and sex are the martial duties and play a significant role in married life. Hindu scripture emphasizes on self control and the sublimation of sexual urges before a person reaches the stage of the householder. Sex is considered for procreation and to be practised within the limits of marriage. Hinduism is against the behaviour of pre martial sex and extra marital sex which spread HIV/AIDS infection.

Hindu writings say indulging in any form of wrong practices including sex outside marriage (pre marital or extra marital sex) Marriage is considered Sacrament (samskara) and divine as per the sacred texts of Hinduism.



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The sacred texts of Hinduism depict that Marriage insists on being faithful to spouse, offspring and mutual support for both to stay longer. Keeping this in mind it is safer to avoid indulging in wrong practices before and after marriage. This is one way to prevent a person from getting infected with HIV/AIDS. In Hindu religious point of view there is no specific perspective on HIV/AIDS prevention, control and social support.

Christianity

The sacred book of Christianity is 'The Holy Bible'. It is considered a true source of direction. It is a reliable source which teaches moral values and good qualities in considering the wellbeing of an individual to lead a meaningful life. It is mentioned in the Holy Bible that 'Love, Joy, Peace, Patience, Kindness, Goodness, Fidelity, Gentleness and Self Control' are the harvest of the Holy Spirit. Apart from this 'Faith, Hope and Love' are termed as Theological virtues and there are four cardinal virtues prudence, justice, temperance and fortitude (Peggy Morgan and Clive Lawton 2001). When an individual builds his/her character based on the Christian values, he/she should never have a thought to indulge in wrong doings or practices. 'Fear of the lord is the beginning of wisdom' based on the bible verse. When an individual has fear of God he/she stays apart by not adhering to wrong practices.

Sex and Sexuality

'Sex' is cited as 'God's gift' by Christianity. Sex is holy which is to be used at the right time and enjoyed. Indulging in sexual activity within marriage is considered sacred as per Christian belief. For that reason, sex before marriage and outside marriage is not accepted by the teachings and belief of Christianity.

Christianity is also against the practice of homosexuality, which is clearly quoted in the biblical verse 'You shall not lie with a man as with a woman: that is an abomination' Leviticus 18:22 and if in case a person practises homosexual activities, the penalty mentioned in the Holy bible is 'they shall be put to death' Leviticus 20:13. People get into these kinds of practices due to genetic, social or hormonal concerns which are not socially and morally acceptable.

In 1 Corinthians 6:9-10 Paul has mentioned against those who will not inherit the Kingdom of God (heaven) and mentioned ten different types of people who will not inherit the



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Kingdom of God 'Know ye not that the unrighteous shall not inherit the kingdom of God? Be not deceived: neither fornicators, nor idolaters, nor adulterers, nor effeminate, nor abusers of themselves with mankind, nor thieves, nor covetous, nor drunkards, nor revilers, nor extortionist, shall inherit the kingdom of God'. The sexual acts between the same sexes were considered abnormal or imperfect and not encouraged by the Christian faith, Christians were taught to condemn homosexual practices but not the person who is into it.

Islam

Like Christianity, Islam is one of the monotheistic religions. It stresses the oneness and uniqueness of God. Islam presents a "straight path" of clear-cut duties and commands. Islamic morals are a combination of genuine acts of love and justice on the one hand and legalistic performances on the other.

Human life is highly valued in Islam: it is considered a gift from Allah. In the Islamic view, Muslims are not supposed to think that it is their life with which they can do whatever they want. Instead, Allah has entrusted individuals with life. Muslims are supposed to look after life. A healthy body is a gift from Allah, and each individual is its trustee. Therefore Muslims believe that we have no right to misuse or abuse the body.

The holy Prophet Mohammed (peace be upon him) has stressed the importance of health many times. He once said to his companion, 'O Abbas, ask Allah for health in this world and in the next" (An-Nasai). "No supplication is more pleasing to Allah than a request for good health" (Tirmidhi). Muslims should therefore avoid any act which may harm physical or spiritual health.

Sex and Sexuality

Sexual relations are among the major sources of HIV/AIDS transmission. Sex may be appreciated in terms of both heterosexuality and homosexuality. The perception of sex in Islam insists on moral and health consciousness i.e., "Sex is not a thing to be ashamed of, or to be treated lightly or to be indulged in excess. It is as solemn a fact as any in life" [Quran, Sura Baqurah, Ayat - 223, pg. 96, Note: 249]. Islam has portrayed that 'Adultery' is against law. Islam forbids 'Fornication'. Islam condemns activities against sexual pleasure. Homosexual sex is against the teachings of Islam and it is believed to be the key route of HIV/AIDS transmission.



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The Quran permits sexual relations only with lawful sex partner. The teaching of Islam does not allow sexual relations with prostitutes because it accelerates the spreading of deadly disease like HIV/AIDS. Islamic teachings prohibit the use of substances because using of alcohol may force an individual into wrong doings.

Statement of Problem

HIV/AIDS infection among women is increasing day by day. They undergo a rude shock due to their status by their own family members, neighbors, friends, community, in hospitals; in many other places and this in turn develop physical, psychological and social disturbances

The following are the main reason to conduct the study:

Psycho social problems faced by women living with HIV/AIDS.

- Social status of women in family and society
- Psychological stresses experienced when husband and children also infected
- Stigma and discrimination
- Coping strategies adopted with main focus on Religion

Methodology of the study

Qualitative case study methodology is used for the present study. It helps to understand the multifaceted phenomena within the study. When the approach is applied correctly, it becomes a valuable method for health science research to develop theory, evaluate programs, and develop interventions. The study was conducted with the help of an NGO working for the PLWHA in Chennai District. Totally 140 women living with HIV/AIDS in the age group of 18 – 60 years were selected for the study. In line with the nature and scope of the study the researcher adopted "Descriptive Diagnostic Design" and applied "Purposive Sampling Method" to do the study. The researcher designed an in-depth Interview Schedule to conduct the study.

Ethical Considerations

The study was conducted based on informed consent both from the Organization and respondents associated with the organization. The respondents were explained about the purpose



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of the study. Respondents were informed that this study is conducted based on their interest and their identity would be protected. Confidentiality will be

maintained throughout the study.

Sample of the study

Case study - 1

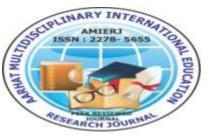
Anitha (name changed) who is a Christian lost her husband due to HIV/AIDS three years ago who infected her with the same. She is a collie wager and lives in a very poor socio economic status. She has two children, one is HIV positive and other is HIV negative. Their relatives are also staying next door but they were the first people to show stigma and discrimination. Due to HIV/AIDS people hesitate to get along with her. She is irregular to work because often she falls sick. Her aim is to educate her children. Financial constrains is the major barrier faced by her additional to psychological stress because of stigma and discrimination.

Support System

After her diagnosis as HIV Positive at Kilpauk Medical Hospital, Chennai she was enrolled in the positive network run by TNSACS. There she got her lead to go to Christian Missions Charitable Trust (CMCT), Chennai. The schedule at CMCT they give her future of hope and dignity by counseling, prayer support, they enable her to experience psychological and spiritual health. They also render assured financial support towards her children's education and monthly provisions are also provided.

Case study -2

Ayesha (name changed) got married at the age of 18. She is from Muslim community. She has 12 siblings and she is fourth in the family. She got married in the year 1999 and it was an arranged marriage. She has two sons one is 15 years old and pursuing his high school education and other son 13 years in class 8. Her elder son was very sick with complaints of frequent fever and she took him to Stanley Medical Hospital, Chennai. The doctor asked her to do the entire test for her son. To her shock she came to know that her son has contracted HIV/AIDS. She was instructed to bring her husband and to do the HIV/AIDS test for both. Results indicated both parents are HIV/AIDS positive. On hearing this, her husband abused her for infidelity and left



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her. Her family also disowned her. Her only refugee was to go and seek help from the authorities of the Mosque. They in turn counseled family members but in vain. She is working as domestic workers and gets a salary of Rs 3000. She also does odd jobs to meet her family expenses. Her desire is to educate her sons but finding ends to meet is difficult for her.

Support System

After her diagnosis at Stanley Medical Hospital, Chennai she was asked to register in Network running for HIV/AIDS which is functioning under the control of TNSACS. Through that contact she came to know about IAPA India which is a Non-profitable organization working for people living with HIV/AIDS. Irrespective of religion they render support and resource for the welfare. She goes to

Case study -3

Aruntathi (name changed) is a Hindu aged 40 years is afflicted with HIV/AIDS for past twelve years. She has completed her higher secondary and now she is a field worker in a NGO for PLWHA. She is married with two adolescent girls and deserted by her husband because of her HIV status. Fortunately, her mother has accepted her status and supports occasionally.

Support System

She being an ardent Hindu accepts her problems due to her sins of her past lives. She also believes doing pujas, offering prayers and sacrifices in accordance with the instructions given by the Brahmin priest. She does all this. She also believes in her faith in God would help her to carry on in her present birth. She gets immense confidence because of the trust in God. She gets financial assistance and educational support for her children from non-governmental organizations working for HIV/AIDS.

Findings

Analyzing the responses we found that religiosity helped in coping with incidence of depression and suicidal tendencies. Further religious practices improve their psychological well being. It gave them spiritual solace. After the religious counseling sessions the PLWHA found meaning to life. They became motivated to lead their life like any normal person. They set examples to other women of similar sufferings that in turn look upon religion as a source of

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comfort and courage to live. This has led them to social empower where they seek self employment as well as help from other NGOS.

Based on the findings It is understood that religious leaders can play an important role in the prevention of HIV/AIDS. They can address and influence their own community to work together towards this global need.

Recommendations

This study clearly indicates the role of religious leaders as a source of empowerment for PLWHA. Thereby we recommend religious leaders of all faith to take it upon them to shape social values and promote the dignity of all persons and defend the sanctity of life.

Religious leaders can redirect charitable resources for spiritual and social care and raise new funds for prevention and for care and support of PLWHA .

This study is a drop of water in an ocean but more works need to be done on various aspects pertaining to HIV/AIDS.

Conclusion

"AIDS destroys families, decimates communities and, particularly in the poorest areas of the world, threatens to destabilize the social, cultural, and economic fabric of entire nations..." –

(Rabbi David Saperstein, Director of the Religious Action Center of Reform Judaism, 2014)

This study is a drop of water in an ocean but more works needs to be done on spiritual aspects and faith healing study pertaining to HIV/AIDS.

References

Chitando, Ezra., and Chirongoma, Sophia. (ed) 2013. *Justice Not Silence: Churches facing sexual* and gender-based violence. South Africa: African SUN MeDIA



(Bi-Monthly) Peer-Reviewed Journal Vol No IV Issues II FEB-MAR 2015 ISSN 2278-5655

MORGAN, PEGGY AND LAWTON, CLIVE (2007). ETHICAL ISSUES IN SIX RELIGIOUS TRADITIONS.

EDINBURGH: EDINBURGH UNIVERSITY PRESS

Shaheen Lim et al (ed) (2004). *Muslims Responses to HIV and AIDS -Case studies, key issues*and Ways forward. Available at http://www.arf-asia.org/resources/Muslim_Responses_to_HIV___AIDS_case_studies__k

ey_issues___ways_forward.pdf. Accessed on 24 March 2015at 5.08pm.

Manda, Domoka Lucinda. 2009. "Religions and the Responsibility of Men in Relation to HIV and Gender-Based Violence: An Ethical Call." Journal of Constructive Theology 15(2), 23-40.

WHO, Global Health Observatory. Available at http://www.who.int/gho/hiv/en/. Accessed on 23

March 2015 at 11. 50 am

Global Statistics (online) Available at https://www.aids.gov/hiv-aids-basics/hiv-aids-101/global-statistics/. Accessed on 23 March 2015 at 1. 30 pm

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