

# **ISLAMIC PERSPECTIVES ON REPRODUCTIVE HEALTH AND CHILDBIRTH SPACING IN NIGERIA**



*Compiled by  
Renowned Islamic Scholars, ULAMA' and  
Medical Professionals*

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<b>Table of Contents</b>	<b>Page</b>
Table of Content .....	i
List of Acronyms .....	iii
Foreword.....	v
Acknowledgement .....	viii
Introduction .....	1
The Reproductive Health Situation in Nigeria .....	6
National Reproductive Policy Goal and Key Priority Areas .....	18
Framework for the presentation of the Islamic Perspectives.....	20
Components of Reproductive Health and Islamic Perspectives:...	25
1. Safe Motherhood .....	25
2. Family Planning and Fertility Management .....	33
3. Management of Non-infectious Diseases, Obstetric Fistula Prevention and Control .....	41
a. Management of Non Infectious Diseases .....	41
b. Obstetric Fistula Prevention and Control .....	42
4. Sexually Transmitted Infections and HIV/AIDS .....	46
5. Adolescent Sexuality and Reproductive Health .....	51
6. Management of Infertility and Sexual Dysfunction .....	55



## Islamic Perspectives on Reproductive Health and Childbirth Spacing in Nigeria

7.	Abortion and Post Abortion Care Services .....	60
8.	Prevention and Management of Cancers of the Reproductive System .....	64
9.	Age of Marriage, Pregnancy and Childbearing .....	65
10.	Elimination of Harmful Practices and Reproductive Right Violations .....	67
11.	Reproductive Health Issues of Selected Population Groups .....	79
12.	Other Special Issues .....	89

### Annexure:

Appendix I: Sermon Note on Childbirth Spacing .....	95
Appendix II: List of participants who reviewed and updated the Islamic Perspectives on Childbirth Spacing and other Reproductive Health Issues in Nigeria .....	102
Appendix III: List of participants who drafted the original handbook on Reproductive Health Issues in Nigeria: The Islamic Perspectives (June 2004) .....	105

## LIST OF ACRONYMS

ARH	-	Adolescent Reproductive Health
ART	-	Anti-Retroviral Therapy/Treatment
BCC	-	Behaviour Change Communication
ELSS	-	Emergency Life Saving Skills (Physicians)
HIV/AIDS	-	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
ICPD	-	International Conference on Population and Development
IEC	-	Information, Education and Communication
LSS	-	Life Saving Skills (Midwives)
MCH	-	Maternal and Child Health
PBUH	-	Peace Be Upon Him
PHC	-	Primary Health Care
PMTCT	-	Prevention of Mother-To-Child Transmission
RA	-	Radhiyallahuanhu
RH	-	Reproductive Health
SAW	-	SallallahuAlaihiWasa!lam
STI	-	Sexually Transmitted Infections
MLSS	-	Modified Life Saving Skills (CHEWs)

## Islamic Perspectives on Reproductive Health and Childbirth Spacing in Nigeria

SWT	-	Subhanahu WaTa'ala
TBAs	-	Traditional Birth Attendants
UBE	-	Universal Basic Education
NARHS	-	National HIV/AIDS and Reproductive Health Survey
SRH	-	Sexual and Reproductive Health
PWDs	-	Persons with Disabilities
PAC	-	Post Abortion Care
TFR	-	Total Fertility Rate
CPR	-	Contraceptive Prevalence Rate
VVF	-	Vesico Vaginal Fistula
RVF	-	Recto Vaginal Fistula
NDHS	-	Nigeria Demographic and Health Survey
MPPI	-	Minimum Preventive Package of Intervention
FLHE	-	Family Life Health and HIV Education
SDM	-	Standard Days Method
IUD	-	Inter-Uterine Device
PAC	-	Post Abortion Care
PoA	-	Plan of Action
CHEWs	-	Community Health Extension Workers

## Foreword

All praises belong to Almighty Allah. May His peace and blessings be upon our Prophet Muhammad (PBUH). It is with great pleasure that I write the foreword to this rather important handbook regarding the Islamic Perspectives on Reproductive Health and Childbirth Spacing in Nigeria.

We are indeed living in a world that has increasingly become a global village. Nigeria, as a country has also been committedly contributing to the general improvement of the living standards of humanity. We similarly have leadership responsibilities and spiritual obligations to contribute towards the enhancement of health accessibilities to our communities towards qualitative reproductive health care services. That, in turn, means raising and upholding the dignities of the people in all ramifications. So, all meaningful efforts for the healthy growth and progress of women, as mothers, who ultimately nurture the future of the society, should be anchored.

It is a cardinal obligation for all and sundry to strive and promote family health, particularly with a view to championing the reduction of the hardship suffered which may result in maternal and infant mortality. Of equal importance also is the need to check maternal morbidities, malnutrition, as well as preventing the spread of HIV and other infections. While other communities, most especially in the developed countries, have achieved monumental success on family and reproductive health issues, we are still battling with excessive sufferings and unwanted death resultant of poor knowledge and health seeking behavior. The unfortunate happenings are, more often than not,

traceable to dogmatism and harmful reliance on traditional or cultural practices in addition to the dearth of qualitative health services.

Many misconceptions abound, pertaining to Islamic edicts regarding medication and the need for sympathetic and adequate cares for our women, children and the generality of the society. The collaborative efforts of our concerned clerics with the contemporary health professionals under the auspices of the Nigerian Urban Reproductive Health Initiative (NURHI 2) Project, for the review of the handbook “Reproductive Health in Nigeria: the Islamic Perspectives” is a welcome development. That is in view of the fact that the first edition of the book was published, nearly one and a half decades ago, in 2004 at the instance of the Pathfinder International Nigeria and the defunct POLICY Project. So, in effect, the review is certainly an important stride towards improving the quality of human lives given emerging health issues. Saving lives and preventing their exposures to sufferings are therefore highly meritorious acts in Islam.

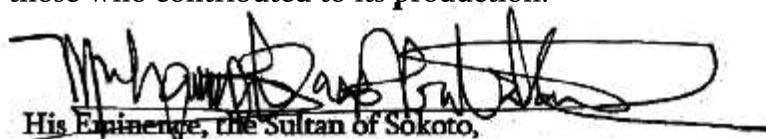
The Noble Prophet (PBUH) said: *“Allah will rescue, from hell fire in the hereafter, any believer who, so ever, relieves another of a distress or sufferings in this world.”* Similarly, a Qur’anic injunction said, *“...whoever saves any soul from destruction, will be rewarded for that as if he had saved the entire human generations from perishing. And our messengers had certainly come to them with clear proofs ...”* (Q5.32).

It is therefore, unpardonable for us to ignore our women and children, exposing them to obvious ill health and mortality in

circumstances related to complications in pregnancy or childbirth, at this age of scientific and technological advancement. We similarly have no excuse, whatsoever for abandoning the society at the mercies of curable ailments and deaths due to HIV or other sexually transmitted infections (STIs).

The commendable attempt, as made in this handbook by the Nigerian Urban Reproductive Health Initiative (NURHI 2) Project, the Ulama' and the Technical Resource Persons to enlighten the Muslim community and others about the correct Islamic stance on matters related to Reproductive Health as envisaged in the National Policy on Reproductive Health, could not have been made at a better time.

I wish to, singularly, commend the Muslim scholars and medical experts for sparing their valuable time to contribute towards updating and subsequent production of this handbook. I hasten to recommend it to anybody who wants to know more about the perspectives of Islamic Law (Shari'a) on the various issues affecting Family Planning and Reproductive Health. Finally, I pray to Allah Almighty to bless and reward us along with all those who contributed to its production.



His Eminence, the Sultan of Sokoto,

Alhaji (Dr.) Muhammad Sa'ad Abubakar, CFR, mni

President-General, Nigerian Supreme Council for Islamic Affairs (NSCIA), and

President-General, Jama'atu Nasril Islam (JNI).

27 Sha'aban 1438/24<sup>th</sup> May, 2017.

## Acknowledgements

The wisdom, commitment and efforts of many renowned Islamic scholars and medical professionals brought about the update of this handbook, titled, Islamic Perspectives on Reproductive Health and Childbirth Spacing in Nigeria. Their immensely valuable contributions, expertise and experience resulted in the ease as well as the successful accomplishment of the compilation of the handbook.

They earnestly and patiently proved that the challenges of achieving Sustainable Development Goals (SDGs) and making our society a healthy one needed commitments and synergy. That resulted in the attainment of the much desired update of the handbook. In that respect, we remain grateful to the Pathfinder International Nigeria and the defunct POLICY project who initiated the publication in 2004. We are also thankful to the Federal Ministry of Health, through the Reproductive Health (RH) Division of the Department of Family Health, for providing the policy leadership and support for RH issues.

Similar thanks go to the following individuals who contributed, in no small measures, in the exercise through research and active personal discourse. They included: Imam Muhammad Sani Isah, Imam (Dr.) Muhammad Nurayn Ashafa, Dr. Mardhiyyah Abbas Mashhi, and Dr. (Mrs.) Ashiru Ajoke Sariyu. The others are Sheikh Goni Muhammad Sa'ad Ngamdu, Sheikh Ibrahim Khalil, Malam Muhammad Kabir Kasim and Mrs. Amina B. Omoti. Equal appreciations go to Shaikh Muhammad Busairi, Dr. Abdulkadir Isma'il, Malam Muhammad Inuwa Aminu, Dr. Haroun O. Ajah, Professors Ibrahim Na'iya Sada and Salisu Shehu. We are no less

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It is our ardent hope that the handbook would be useful in establishing a faith-based approach to healthier society, and improving the needed health indices for Nigeria and the world at large.



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**Nigerian Urban Reproductive Health Initiative 2 (NURHI 2) Project**  
**The Challenge Initiative (TCI)**  
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## INTRODUCTION

Islam as a religion has established guiding principles and teachings mandating total submission by all its adherents to the Wills of Allah. In effect, it recognizes the harmonious existence of people, irrespective of their races, gender, ages or things that affect their well being and survival as individuals, families, communities or nations. The qualities of their livelihood invariably affect the overall existence of a nation like Nigeria. It is therefore of great importance that, in issues related to decision making and interventions, the uniqueness and needs of all citizens are recognized and upheld. The same obtains in the various socio-cultural values and beliefs that sustain them. The valuable teachings of Islam, as they affect the health status and quality of lives of the Muslim communities in Nigeria, should be promoted and disseminated nationwide. That is paramount particularly, in the areas having high rates of reproductive health challenges.

Muslim communities, like the other contemporary communities, are also faced with the challenges of poverty, destitution and significant Reproductive Health (RH) problems, such as maternal deaths, infant mortality, unwanted or unplanned pregnancies and Human Immuno-Deficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS), which adversely affect sustainable development.

Communities and nations, worldwide, including Nigeria, have resolved to curb the problems with adequate policies, programmes, and actions that also have impacts, even on the Muslims. For example, in response to obvious RH problems and

in consonance with the international standards, the Federal Republic of Nigeria in 2001 developed and adopted a nationwide policy on Reproductive Health (RH) based on the African Regional Strategy and the global program of action of the International Conference on Population and Development (ICPD) 1994.

Some aspects of the well-intended National Reproductive Health Policy (2001), were observed to be out of tune with certain Islamic principles and agreed approaches. Such omissions, often lead to rejection of programmes of tremendous benefits, for the populace, especially Muslim communities. It, therefore, became necessary to initiate dialogues with the Muslim communities, in order to establish understanding for addressing the issues.

Islam is a practical religion with a complete code of conduct capable of providing solutions to all problems. In addition, it enjoins its followers to judge everything on its merit. Once it is anticipated to be beneficial and in conformity with Islamic injunctions, it is accepted wholeheartedly. It was, therefore on that basis that the advocacy handbook, **REPRODUCTIVE HEALTH ISSUES IN NIGERIA: THE ISLAMIC PERSPECTIVES**, was produced in 2004, by the Pathfinder International and The POLICY Project, in partnership with some Islamic opinion leaders and clerics. It was assented to by the Nigerian Supreme Council for Islamic Affairs to, among others, achieve the following objectives:

- To appraise the RH issues in communities and provide basic information towards understanding them.

- To reduce the misconceptions of what the RH issues were and provide resource materials for addressing them.
- To provide the policy makers and those involved in administering them, the requisite Islamic perspectives on the National RH Policy, and
- To provide a document that will guide the practice and implementation of RH programmes within the Muslim communities.

In reality, the first handbook was the outcome of collaborative initiatives, which provided an overview of the Reproductive Health situation in Nigeria. It was also a brief look at the National Reproductive Health Policy and the Strategic Framework (2001). Secondly, it critically reviewed each of the nine major components of RH as contained in the National Policy and Strategic Framework, including concepts, services and strategies or approaches related to the component but expressed in simplified non-technical language. The Islamic perspectives provided the basis and supportive references from the Holy Qur'an and the Sunnah of the Prophet Muhammad (PBUH). Over twenty thousand (20,000) copies of the handbook had been distributed to support dialogues, advocacy and enlightenments on reproductive health issues and programmes in Nigeria. Emphasis was particularly made on childbirth spacing, to provide clarity and establish its theological basis. Despite the review of the National Reproductive Health Policy (2001) in 2010, by the Federal Ministry of Health, the old handbook continued to be circulated to solicit support related to the needs of the Muslim communities in Nigeria. The need for an update of the handbook became more imperative to stress its continuous relevance for the

effective tackling of emerging issues in the area of reproductive health, especially as the National Reproductive Health Policy was subjected to another review in 2016.

The directive, by the Honourable Minister of Health, Professor Isaac Adewole, for the review of the advocacy handbook at the 4th National Conference on Family Planning held in Abuja from 7 – 9 November 2016 was most appropriate. It coincided with the time when the National Reproductive Health Policy had just been revised to attain alignment with global goals on maternal, newborn and child health, as well as the issues of adolescents' health, aimed at achieving the Sustainable Development Goals (SDGs) and other human developmental indices in Nigeria.

The handbook titled, **ISLAMIC PERSPECTIVES ON REPRODUCTIVE HEALTH AND CHILDBIRTH SPACING IN NIGERIA (2017)**, is also a product of deep and expansive reviews by some Islamic Scholars in Nigeria. It clearly states the Islamic perspectives on the reproductive health issues, specially pertaining to the areas of concern, including the RH needs in humanitarian settings and other emerging issues. The 2016 copy of the revised National Reproductive Health Policy was used for guidance. It is hoped that it will be a handy source of reference for the health care providers, managers of Reproductive Health programmes and Islamic Clerics. The handbook aims to promote greater appreciation of Islamic injunctions on aspects of health delivery and health seeking for the benefit of the Muslim Community and the entire citizens of Nigeria.

It is also envisaged that the handbook will serve as a useful advocacy tool to gain the support of clerics in clarifying knotty

issues of concern for their followers, especially as it relates to critical reproductive health issues and the care of vulnerable members of the society.

## THE REPRODUCTIVE HEALTH SITUATION IN NIGERIA

Under the National Health Policy and Programme, Reproductive Health (RH) has been defined as:

*“A state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity, in all matters related to the reproductive system and to its functions and processes”.*

Reproductive Health, as defined in the ICPD PoA, encompasses the following: *family planning counseling, enlightenment, education, communication and services; education and services for pre-natal care, safe delivery and post-natal care, including breastfeeding; prevention and appropriate treatment of infertility. It also includes prevention of abortion and the management of the consequences of abortion; treatment of reproductive tract infections, especially sexually transmitted diseases, including HIV, infections and Acquired Immunodeficiency Syndrome (AIDS); promotion of healthy sexual maturation as from pre-adolescence, responsible and safe sex throughout the lifetime and insurance of gender equality; elimination of harmful practices, such as female genital mutilation (FGM), child marriage, otherwise referred to as early marriage. It similarly relates to forced marriage, domestic and sexual violence against women; management of non-infectious conditions of the reproductive system, such as genital fistula, cervical cancer, complications of*

*female genital mutilation and reproductive health problems associated with menopause and andropause.*

Indeed, the following section is a concise summary of the prevailing situation in Nigeria with regard to the stipulated reproductive health components of the National Reproductive Health Policy, 2016.

### **Safe Motherhood**

The health and well-being of the mother and the newborn child have strong linkage and constitute the main focus of safe motherhood programmes. Current statistics have shown that maternal and neonatal health status in Nigeria is among the worst, the world over. Maternal death tolls in Nigeria were estimated, by the World Health Organisation (WHO, 2015) to be fifty-eight thousand (58,000) deaths annually, which constituted about 19 per cent of the global estimate of 303,000 maternal deaths. According to the 2013 NDHS, the country's maternal mortality ratio was given as, five hundred and seventy-six lives per every one hundred thousand (576 per 100,000) live births. Most of the maternal deaths were due to bleeding after delivery (haemorrhage), post-delivery infections (sepsis), prolonged obstructed labour, eclampsia (hypertensive diseases of pregnancy), and unsafe abortions. Malaria also contributed more than one-tenth of the maternal deaths in Nigeria at the given period. The good thing about the enumerated diseases and conditions, in general, is that they are preventable or readily treatable.

A quarter of the death tolls within the under-five age group in Nigeria are newborns. That has conservatively been given as totaling two hundred and forty-one thousand babies per annum (241,000 babies). Nigeria's neonatal death rate, meaning the death of babies within the first one month (28 days of life), as calculated by the NDHS, from 2008 to 2013 was 37 per every one thousand (37 per 1,000) live births within the period.

The leading causes of neonatal death have been identified as intrapartum-related or 'birth asphyxia' (28 percent), complications of preterm birth (30 percent) and severe infections (22 percent). Generally speaking, most of the neonatal deaths are preventable through proper immunization and good health seeking behaviours.

### **Family Planning and Fertility Management**

The fertility level in Nigeria is very high. According to the 2013 Nigeria Demographic and Health Survey (NDHS), the total fertility rate in the country (TFR) is 5.5. The current TFR implies that every Nigerian woman could bear up to six children in her lifetime, provided she meets up with the observed current age-specific fertility rates throughout her reproductive years, calculated to fall within the range of 15 to 49 years.

Low level of family planning use is a major factor in the fertility pattern, maternal health and population growth rate. Similarly, according to the 2013 NDHS, the contraceptive prevalence rates (CPRs) among women of reproductive age of 15 – 49 years was 15.1 per cent for any method, and is about 10 per cent for



modern methods. Factors associated with the low contraceptive prevalence rate include a culture that is highly supportive of large family size, myths and misconceptions about modern family planning methods, as well as the preference for male child. In addition to that, despite recent efforts aimed at repositioning of family planning in the country, the challenges still include inadequate access to family planning services, poor quality of the existing services and inadequate demand creation efforts.

### **Obstetric Fistula Prevention and Control**

Vesico-vaginal fistula, VVF, which is a breakdown of the tissue between the vaginal wall and the bladder; recto-vaginal fistula, RVF, meaning the breakdown in the tissue between the vaginal wall and the rectum, resulting in urinary or faecal incontinence are some of the most debilitating gynaecological disabilities in women. They are usually caused by prolonged obstructed labour. Majority of the victims usually do not report for treatments due to the stigma attached to the condition, ignorance of availability of adequate treatments and low socio-economic status of the patients.

### **Prevention and Control of HIV and other Sexually Transmitted Infections**

HIV is a leading health development challenge in Nigeria. The 2013 National HIV/AIDS and Reproductive Health Survey (NARHS) reported a national HIV prevalence rate of 3.4 percent

amongst the general population. It was estimated that over three million (3,229,757) people live with HIV in Nigeria. It was conservatively observed that over two hundred and twenty thousand (220,393) new HIV infections occurred and were recorded in 2013 NDHS. Nearly two hundred and eleven thousand (210,031) died from AIDS-related cases. HIV prevalence was highest in the 35-39 years age group, amounting to almost 4.4 percent. Also, the lowest HIV prevalence was among the 15-19 years age group. That amounted to 2.9 percent. Poor perception of HIV risks, poverty, ineffective sexually transmitted infections (STI) programming, poor integration of HIV/AIDS and sexual reproductive health services coupled with gender inequality constitute the leading factors in the HIV epidemic in Nigeria. The National HIV Prevention Strategy currently utilizes the Minimum Prevention Package Intervention (MPPI) Approach to deliver a combination of biomedical, behavioral and structural prevention activities at multiple levels, including Prevention of Mother-To-Child Transmission (PMTCT).

### **Adolescent Sexuality and Reproductive Health**

Available statistics show high prevalence of unsafe sexual behaviours, and the consequent poor sexual and reproductive outcomes such as teenage pregnancy, unsafe abortions, and sexually transmitted infections among adolescents. According to

the 2012 National HIV/AIDS and Reproductive Health Survey (NARHS), about a fifth of males (20 percent) and two-fifths of females (37 percent) aged 15-19 years are sexually experienced. The survey also showed that among the general population of adolescents age 15-19 years, 2.9 percent of each of the male and female population are HIV positive.

Figures from the 2013 NDHS indicated that approximately a quarter (23 percent) of females age 15-19 years had begun childbearing; 17 percent have had a child and 5 percent were pregnant with their first child. Adolescent girls are disproportionately affected by poor pregnancy outcomes, including maternal deaths, maternal morbidities, and neonatal deaths. A major contribution to the poor adolescent health status is the lack of accurate knowledge of sexual and reproductive health issues. Specific interventions addressing the sexual and reproductive health challenges of adolescents include Family Life Health and HIV Education (FLHE) and provision of adolescent and youth-friendly services.

### **Management of Infertility and Sexual Dysfunction**

Infertility is the inability to conceive or produce offspring despite having regular unprotected sex. Infertility is a condition with severe implications for health and well-being, particularly in a pro-fertility culture as obtains in Nigeria. The 2008 and 2013 NDHS results suggested that primary infertility remains low with three percent of all women unable to have children.

However, recent data revealed that infertility is a growing problem in Nigeria affecting nearly 25 percent of couples.

## **Post-Abortion Care Services**

Unsafe abortion is a major public health problem in Nigeria as it contributes significantly to maternal morbidity and mortality. Abortion on demand is not legally permissible in the country. Recent data showed that in 2012, an estimated one million two hundred and fifty (1.25 million) induced abortions occurred in Nigeria. Invariably that is equivalent to a rate of thirty-three (33) abortions per one thousand (1,000) women within the age range of 15–49 years. Almost two hundred and twelve thousand (212,000) women were treated for complications of unsafe abortion. That represented a treatment rate of nearly six percent per one thousand (1,000) women of reproductive age. Additional two hundred and eighty-five thousand (285,000) suffered from serious health consequences without receiving needed treatment. Over fifty-four percent of the women received post-abortion care in public health facilities. Reports from hospitals-based studies implied that the youths constituted the majority of females who suffered from abortion-related complications and deaths.

## **Prevention and Management of Reproductive System Cancers**

Cancers of the reproductive systems are increasingly assuming alarming proportions in Nigeria's health profile. Breast and cervical cancers are the leading causes of cancer-related deaths amongst women. As regards men, the cancer of the prostate gland is the major cause of cancer-related deaths. There is generally poor level of enlightenment on its causes. Unlike the breast

cancer for which 52-55 per cent of women and men, respectively are aware of, only 17-20 percent of females and males respectively are enlightened about cancers of the male reproductive organs. Less than a quarter of the women and men of reproductive age (15-49 years) were similarly aware of cancer of the cervix. The knowledge and utilization of cancer screening services, by the general public, are also correspondingly low.

### **Elimination of Harmful Practices and Reproductive Rights Violations**

A variety of harmful practices that have negative implications on the reproductive health and rights exist in Nigeria. One of them relates to early childbearing. According to the 2013 NDHS report, a little over seventeen percent of youths, aged between twenty to twenty-four years of age got married at the age of fifteen. Nearly forty-three percent were married by the age of eighteen years. Early childbearing was associated with the increased risk of poor maternal and neonatal outcomes.

Female Genital Mutilation (FGM) is another prevalent harmful practice. According to the 2013 NDHS, twenty-five percent of Nigerian females of reproductive age (15-49) years had been exposed to it. FGM is associated with several complications such as excessive bleeding (haemorrhage), infections, chronic reproductive health problems as well as maternal morbidities.

Gender-based violence, including intimate partner violence such as domestic violence and wife battering, sexual coercion and rape are major forms of reproductive rights violation. These various

vices compromise the reproductive health of victims. While data is generally scanty about gender-based violence in Nigeria, due to poor reporting, anecdotal evidence suggests that there may be increasing episodes of rape cases due to escalating inter-communal clashes and insurgency. Rapes affecting Internally Displaced Persons (IDPs) and armed robbery incidents abound. Domestic violence is arguably the most common form of gender-based aggression in the country. Other harmful practices with implications for reproductive health include: widowhood rites and rulings affecting practices such as wife's inheritance; male-child preference which may increase the risk for maternal mortality and morbidity; and trafficking of females for sex work and transactional sex, which carry increased risk for infections such as HIV/AIDS and other STIs. Protection of reproductive rights is being addressed by the health system, concerned groups, advocates and legislature.

## **Reproductive Health Issues of Selected Population Groups and Special Reproductive Health Concerns**

### ***Older Population***

Andropause and menopause are major reproductive health challenges of older people, men and women respectively. The conditions, which relate to declining sex hormone levels, may produce a range of physical and psychological symptoms. Unfortunately, they have not been receiving adequate attention in the reproductive health field in Nigeria. Available evidence indicates that most Nigerians lack appropriate enlightenment or knowledge about the symptoms of

andropause in men and its effects, unlike menopause in women. The two, as well as reproductive cancers are observed among the older persons. With increasing proportion of the Nigerian population living to old age, SRH challenges of older populations will likely assume greater importance, and reproductive health services need to respond to them more effectively.

### ***People with Special Physical and Mental Needs***

Available data from the National Baseline Survey on Persons with Disabilities (PWDs) in Nigeria showed that the national prevalence rate of persons with disabilities (PWDs) is a little over three percent. The finding, as at 2011, revealed that nearly five (4.8) million Nigerians were living as PWDs. Among the group of Nigerians with special physical or mental needs are those having deafness or hearing disabilities. They constitute twenty-four percent of persons with disabilities. Twelve percent of the people with disabilities have visual disability or blindness. Twenty-seven percent of them have physical handicap. Thirteen percent of them, have some form of mental illness. Seven percent have intellectual disability. Another six percent of them have speech defect, cerebral palsy (4 percent) and 6 percent have other forms of impairments.

Persons with special needs have sexual and reproductive health needs just like any other human beings. However, they have limited access to mainstream health services as many of the existing services are not designed to meet their needs.

### ***Reproductive Health Needs in Humanitarian Settings***

Nigeria has recently experienced increased episodes of humanitarian emergencies arising from conflicts; inter-communal clashes, civil disturbances and religious crises, natural disasters; floods, mud sliding, erosion, earth tremors and insurgency. The lots of the calamities often result in the destruction of, among others, social lives and health systems. Consequently, they all have serious implications on the reproductive health status of the internally displaced persons. That is more manifest, particularly in the family planning and reproductive health needs of women and girls. Climatic changes also contribute to an increase in natural disasters, thereby compounding the pathetic situation and size of the population in humanitarian settings. Internally Displaced Persons (IDPs), for example, may not have access to essential reproductive health supplies and services, like emergency obstetric and neonatal cares. Young people, comprising teenage girls and adolescents are often disproportionately affected by conflicts; they also face additional barriers from lack of sufficient health care, protection, recreational activities, friendship and family support. Similarly, the weakening of traditional safety nets, socio-cultural and economic constraints make them more vulnerable to sexual rights violations such as coercion, rape, and other risky sexual vices.



*Male Participation and Involvement in Reproductive Health*

Men have their own sexual and reproductive health needs and worries which are not always met. Additionally, men's health status and worries affect women's SRH status and overall health. So, involving men in reproductive health issues has the potentials of increasing their awareness of SRH issues, improving their attitude towards health as well as the acceptance and support to the realities of their partners' needs, choices and rights. Therefore, improving male involvement and participation is paramount to the achievement of the much needed reproductive health outcomes in Nigeria. Until recently, the male involvement remained one of the weakest areas of programmatic efforts in Nigeria's RH environment.

## THE NATIONAL REPRODUCTIVE HEALTH POLICY GOAL AND KEY PRIORITY AREAS

**The Policy Goal:** To provide the framework of actions and guidance required for the attainment of complete sexual and reproductive health and wellbeing for all Nigerians throughout their life cycle.

### Priority Areas

Based on the epidemiological burdens of reproductive health status and conditions in Nigeria, the priority areas of the policy and programmes lean towards:

- (a) Healthy pregnancy and childbearing through improved antenatal, delivery, perinatal, postpartum, newborn and postnatal care;
- (b) Healthy sexual development and sexuality through promotion of adequate sexual health; provision of appropriate sexual and reproductive health information; and friendly services to children, adolescents or youngsters.
- (c) Infection-free sex and reproduction through combating reproductive tract infections including HIV and other sexually transmitted infections (STIs), and high-quality management of post-abortion complications;
- (d) Achievement of desired and intended fertility, including prevention of mistimed and unwanted pregnancies through provisions of high-quality services for family planning, including infertility services;

- (e) Attainment of healthy and cancer-free reproductive life through provisions of preventive services and high-quality management of gynaecological morbidities, including menopausal and andropausal conditions; obstetric fistula and reproductive system cancers of both the males and females;
- (f) Getting gender equality and elimination of all forms of discriminations through delivery of appropriate sexual and reproductive health information and enabling environments for combating sexual coercion, harmful practices and violations of reproductive rights;
- (g) Providing reproductive health needs of persons in humanitarian settings and crisis situations through promotion of sexual health; provision of appropriate sexual and reproductive health information and friendly services specifically designed to meet the needs of internally displaced persons; and
- (h) Realizing integrated reproductive health services along the continuum of care through promotion and provision of comprehensive sexual and reproductive health services in integrated manners throughout the life cycle.

## FRAMEWORK FOR THE PRESENTATION OF THE ISLAMIC PERSPECTIVES: THE NECESSITY FOR FRAMEWORKS AND GENERAL PRINCIPLES.

In line with a Prophetic saying:

*"Wisdom is like the lost sheep of a believer, he grabs it, wherever he sees it"*

That clearly connotes not only the permissibility but also the necessity of the usage of modern health care facilities and expertise.

### A. Normative Framework

#### *The Concept of Ibadah and its Bearing on Marriage, Family Maintenance, and Parenthood.*

In Islam, the word Ibadah, which means acts of worship, is the essential purpose of the existence of human beings. Allah says categorically in the Qur'an, Chapter 51 verse 56, that; *"...He created the jinns and mankind for the purpose of their worshipping Him"*. That has very broad meanings and implications, as it has, more or less bearings and effects on the totality of a Muslim's lifestyles and affairs. So, in effect, whatever one does privately or publicly; in the masjids or elsewhere are governed by the injunctions of his Creator. Allah has ordained that He be worshipped alone without ascribing partners unto Him.

Pertaining to that, Allah says in the Qur'an, chapter 47, verses 162 and 163:

***"Say: Surely my prayer, my acts of sacrifices, and my lifestyle and my death are all for Allah, the Lord of the Universe. He has no associates. So have I been commanded, and I am the foremost of those who submit themselves to Allah".***

Against the background of the meaning of worship in Islam as presented in the above verses, marriage and all deeds associated with it are parts and parcel of the acts of worship to Allah. Hence, the marital relations, reproductive rights, duties, as well as considerations for meeting health issues are within the act of worship attracting rewards from Allah. Conversely, living together as married couples but oppressing one another, cheating, harming or ignoring one another's obligations, as the case may be, is a condemnable violation that invites the wrath of Allah in both the worldly life and in the hereafter.

Therefore, it is appropriate to liken the totality of the reproductive health issue within the framework of Islamic responsibilities to enable us to deduce the following conclusions:

To a Muslim married woman, bearing pregnancy and childbearing ordeals are acts of worship. Hence, all the sufferings and pains are not in vain. They attract Allah's rewards. On the part of the husband too, the maintenance and taking care of his pregnant wife are also acts of worship.

## B. Theological and Jurisprudential Framework

### *The Relationship between Reproductive Health and the Objectives of Islamic Laws*

It is a known fact that, Islam considers mankind as a respectful creature, and its laws ensure the welfare and protection of all people. From there, it could be seen that Islam revolves around five goals:

- a) Protection of belief,
- b) Protection of life,
- c) Protection of Intellect,
- d) Protection of progeny, and
- e) Protection of belongings.

The five goals are prioritized relative to their importance. Islamic scholars have unanimously agreed that reproductive health is connected to two of the five goals: that is, protection of life and that of progeny. A woman's health from pregnancy to delivery includes taking good care of her, the child and its lactation. Similarly, protection of her rights and that of the baby during nursing are inclusive in Islamic teachings.

*Allah says: "...the mothers shall give suck to their children for two whole years, (that is) for those (parents) who desire to complete the term of suckling, but the father of the child should bear the cost of the Mother's feeding and clothing on a reasonable basis. No person shall have a burden laid on him greater than he can bear. No mother shall be treated unfairly on account of her child and no father on account of his child. And on the (father's) heir is*

*incumbent the like of that (which was incumbent on the father). If they both decide on weaning by mutual consent, and after due consultation, there is no sin on them. And if you decide on a foster suckling mother for your children there is no sin on you provided you pay the mother what you (agreed to give her on reasonable basis) And Fear Allah and know that Allah is all seer of what you do” (Q2:233).*

So, it should be noted that the verse is explicit about woman’s right as conveyed in the injunctions related to divorce. It categorically spelt that neither the divorced woman nor her child should be exposed to maltreatments. Doubtlessly, that is part of the beauty of Islamic injunctions and fairness in all respects.

Keeping our bodies healthy is one of the requisite rights of the body as explained by the Prophet (PBUH) where he said to Abud-Dardaa’i and Salman: “*. Verily your bodies have rights over you. So, place what belongs to a particular situation in its rightful place*” (Reported by Bukhari Vol. 7).

It is part of the rights of the body to be fed when hungry, allow it to rest when exhausted. You should similarly clean it when it is dirty. It should be medically cared for in case of illnesses. Another way by which Islam attaches importance to woman’s health relates to the prohibition of copulation during menstrual or in her post partum period (42 days post delivery, within the days of bleeding). That is in view of the fact that its occurrence could be injurious to her health and that of her husband as well.

Islam accords greatest considerations to family life, so it should be upheld. In that respect it enjoined marriage and prohibited adultery and fornication. Islam has also forbidden character

assassination of innocent and chaste women. Moreover, it has categorized the types of women to marry or not. To safeguard mix ups in genealogy, the religion gives necessary legislation pertaining to nursing and similar circumstances. As such, Muslims should be up and doing in upholding Islamic injunctions.



## COMPONENTS OF REPRODUCTIVE HEALTH AND ISLAMIC PERSPECTIVES

The following section provides Islamic perspectives to each of the 12 key components considered by the Ulama' regarding reproductive health issues and other emerging and special areas of concerns requiring clarification for the Muslim community.

### 1. SAFE MOTHERHOOD

Safe Motherhood refers to a situation whereby no woman going through the physiological processes of pregnancy and childbirth suffers injuries, loses her life or that of the baby. Safe motherhood is an essential strategy for achieving maternal health.

Components and Services include:

- Prenatal care including referral of high-risk pregnancies.
- Safe delivery under skilled care
- Essential obstetrics care including emergency care of complications of pregnancy, labour and puerperium, referring to the first six (6) weeks after delivery.
- Perinatal care
- Neonatal, meaning taking care of a baby within the first few weeks of its birth.
- Postnatal care
- Breastfeeding, especially exclusive breastfeeding in which a newborn is given only breast milk for the first six (6) months.
- Immunization
- Growth monitoring
- Infection prevention

### **Islamic Perspectives:**

In Islam, both the lives of a mother and her child are sacred as mentioned by Allah in Surah Ahqaf:

*“And indeed we have honored the children of Adam, and we have carried them on land and sea.....”* (Qur'an 17: 70).

*“And we have enjoined on man, to be dutiful and good to his parents. His mother bore him in weakness and hardship, whereas his weaning is in two years; give thanks to Me and to your parents. To Me is the final destination”* Luqman (Qur'an 31:14).

Therefore, ALL pregnant women must be adequately taken care of, to enable them deliver healthy babies and live to take care of them. The Islamic view on the strategies of providing the stipulated services is as contained in the National Reproductive Health Policy. It inter alia says: - Community Ownership, male involvement and implementation of safe motherhood initiatives, including breastfeeding, are in consonance with Islamic principles.

Many verses from the Qur'an confirm that. Chapter 5 verse 2 is case in point:

*“... Help you one another in righteousness and piety but help you not one another in sin and rancor: fear Allah: for Allah is strict in punishment”* (Qur'an5:2).

The mothers shall give suck to their children, breastfeed them for two whole years. The provision is for parents wishing to complete the term of suckling. Nevertheless, the father of the

child shall, reasonably, bear the cost of mother's feeding and clothing. Nobody is to be over burdened with responsibilities beyond capability. Neither a mother nor a father should be treated unfairly on account of her or his child. Similar injunction obtains on any other person who stands to give guidance to any child on the father's stead. If, however, the parents reach a consensus pertaining to suckling mode and weaning period mutually, there is no sin on either of them. If you, on the hand decide to engage a foster, suckling-mother for the child there is no sin on you, provided you accord the mother, deserved compensation reasonably. And fear Allah and know that Allah is All seer of what you do (Q2: 233 )

The following traditions of the Prophet (PBUH) also support the view:

*"The best among you in the sight of Allah is he who is the most benevolent and most caring to his family"* (Narrated by Tirmidhi 3895 on the authority of Aisha R.A.)

In the last sermon he delivered before the largest gathering of his life, the Prophet Muhammad (PBUH) had this to say: *"Be kind to your women, for they are trust on you from Allah"* Narrated by Bukhari (4787 and Muslim 2671).

He also said that: *"The best amongst the believers is he who has the soundest moral character. And the best of you are those who treat their families courteously with the highest reverence"* The hadith had been authenticated by Albani in his book ' Silsila' as Sihah 284

**Effective antenatal care for all pregnancies and skilled care during childbirth:**

Divorce is the worst lawful act. Allah hates it but could be applied when circumstances warrant it. If by the time of the divorce the woman is pregnant, Allah's injunction as in verse 67 of Surat Al-Talaq should be meted:

*"Let the women live (in 'iddah) in the same style as ye live according to your means: annoy them not so as to restrict them. And if they carry (life in their wombs) then spend (your substance) on them until they deliver their burden: and if they suckle your (offspring) give them their recompense: and take mutual counsel together according to what is just and reasonable. And if ye find yourselves in difficulties let another woman suckle (the child) on the (father's) behalf".*

*"Let the man of means spend according to his means: and the one whose resources are restricted let him spend according to what Allah has given him. Allah puts no unjust burden on any person beyond what He has given him. After any difficulty Allah will soon grant relief soones". (65:7).*

**Skilled birth attendance:** Islam encourages every pregnant woman to seek competent medical care from qualified health workers. However, the issue of a male doctor examining or attending to a female patient is prohibited except on unavoidable special circumstances. That includes absence of a qualified female doctor or a situation whereby delays could endanger the life of the mother, baby or both.

An Islamic jurisdiction says that, *necessities could warrant the commission of unlawful acts*. However, *the cause should genuinely be ascertained, as flimsy excuses will not be condoned*. This is the most common jurisprudential principle, agreed upon by all the Islamic scholars, irrespective of denominational differences, based on some Quaranic verses and prophetic traditions. The prominent is Qur'an Chapter 2, Verse 173.

Emergency Treatment of complications during pregnancy, labour and puerperium and activation of maternity waiting homes and clinics are also acceptable. In that respect, Islam has even made it a right for pregnant women to be properly offered befitting services. The strategy will significantly benefit from enlightenment derive for husbands to patronize hospitals, clinics and maternity homes.

**Post Abortion Services** - Which relates to the management of cases of abortion or miscarriages is halal, permissible to safeguard the mother's life. That has been upheld by Q22:7:

*"... He, the Almighty Allah, has chosen you Muslims, to convey the message of Islam to mankind and has not entrenched any hardship on you in the religion ..."*

However, the Qur'an does not explicitly refer to abortion, which means the termination of pregnancy before the due date of delivery. Nevertheless, there has been general Islamic accord that abortion is only acceptable in serious circumstances like saving a mother's life. Even at that, some scholars insist that such abortion is only permissible if a soul has not been breathed into the fetus. "Life is believed to be breathed" within the first 40, 80 or 120 days. A minority sector of Islamic clerics opposed abortion at any

stage of development, arguing that the embryo is on the verge of having a soul from the moment of conception.

Emergency Obstetric Care Services-

The following strategies were also accepted:

- Training community midwives to bridge gaps in rural areas.
- Training more Muslim, (CHEWs), midwives and physicians for the provision of basic and emergency obstetric services (MLSS, LSS, ELSS)
- Training sufficient midwives to provide coverage for all population groups; emphasis should be made on training Muslim girls to be employed on such jobs. Deliberate efforts should be exerted to expand the facilities to cover the dire needs.
- Strengthening public and private sectors' collaboration.
- Provision of needed equipment and supplies.
- Establishment of an effective referral system including all providers of maternity care, private practitioners, etc;
- Updating skills of community health extension workers in child spacing counseling and services;
- Sustained supervision and monitoring and evaluation.
- It is accepted that all relevant materials for training and sensitization be translated into local languages and distributed. The Ulama'u, the clerics should also be involved in enlightenment, sensitization efforts, as they command respects in the general public, particularly their communities despite their limited exposures.

## Healthy Children

**Exclusive breast-feeding:** Islam allows and encourages exclusive breastfeeding even though there is no compulsion in it. So health service providers should neither intimidate nor punish parents for not adopting the method.

The Qur'an (Q2:233) was emphatic about the nutritional value of breast milk. *" Mothers may nurse their infants for two whole years, for those who desire to complete the nursing period. It is the duty of the father to provide for them and clothe them in a proper manner. No soul shall be burdened beyond its capacity. No mother shall be harmed on account of her child, and no father shall be harmed on account of his child. The same duty rests upon the heir. If the couple desire weaning, by mutual consent and consultation, they commit no error by doing so. You commit no error by hiring nursing mothers, as long as you pay them fairly. And be wary of Allah, and that He, Allah is seeing whatever you do."*

Hence, if this could be said of milk from an animal as affirmed by Allah (SWT) what's more of the human milk? Of course, it could be deduced to be much purer and nutritious.

## Immunization

Preventive health care, including measures to control and prevent communicable diseases, are allowed and even provided for in Islam. All the same, research should be carried out by

medical experts for ways to minimize damaging side effects and ensuring the general safety of the vaccines.

Shaykh ‘Abd al-‘Aziz ibn Baaz of blessed memory, may Allah have mercy on him, was asked about Islamic implications in administering preventive treatment before occurrence of a disease? He reported positively saying *"nothing is wrong with that, more so in the anticipation of the occurrence of the disease or for it is aimed at forestalling the spread of an epidemic or other factors which may cause disease"*. To buttress his stance, he referred to an authentic hadith saying that the Prophet (PBUH) said, 'Whoever eats seven Madeenah dates in the morning will not be harmed by witchcraft or poison.' That, in itself, is a kind of warding off a problem before it happens. So if there is the fear of sickness and a person is vaccinated against an impending infection, as is the present practice in Nigeria or elsewhere where inoculations are administered. ( Fatawa al-Shaykh Ibn Baz, 6/21).

With regard to the misgivings by some of the people vaccinated, in terms of a short-lived fever or other side-effects, the drawbacks may be overlooked. The decision is informed sequel to comparison between the side effects and the weeding off of a disease that may kill or cause great harm to a person's health.

The foregone comparison is similar to what obtains in the case of circumcising boys by cutting off a piece of skin and the intense pain caused by that to the infant. The subsequent pains are outweighed by the great benefits that are served by this action in serving the religious interest of purity and numerous worldly benefits.



The general Islamic principle with regard to such matters could be likened to the case of opting to committing a lesser of two evils which cannot be avoided. The lesser evil should be performed to do away with the greater one. (Al-Ashbahwa an-Naza'ir by al-Subki, 1/45.)

However, if it has medically been proven that a specific vaccine causes harm to the body or has harmful effects that outweigh its usefulness then it is not permissible to administer it. This is in accordance with the verdict of the Prophet (PBUH) where he said; *"There should neither be harm nor reciprocating it."*

## **2. FAMILY PLANNING AND FERTILITY MANAGEMENT**

It is a means by which individuals or couples regulate or space childbirth to achieve a desired number or spacing of children. It is done for various reasons by many people. The reasons for that include safeguarding the mother's health or that of her child. Socioeconomic factors, family or community and national welfare as well as marital adjustments come to play.

### **Family Planning Methods:**

The methods of spacing childbirth are divided into traditional and modern ways.

The Traditional Methods: They include the traditional practices, beliefs or customs that have been used for birth management over the years and got passed as a legacy from one generation to

another. The few remaining traditional methods in use are as follows:

- *Abstinence*: Avoidance of sexual intercourse by personal choice, culture or religious enforcement.
- *Douching*: Application of hot water with or without concentrated solutions of salt, alum, vinegar, lemon, etc. into the vagina immediately after sex to prevent conception. Nevertheless, in the case of the latter, apart from being grossly ineffective, it is dangerous and could augment chances of reproductive tract infections by disrupting the natural vaginal condition.
- *Withdrawal (Coitus interruptus)*: That means ejaculation outside the vagina for avoidance of conception.
- *Safe period*: This is a natural method of birth management which centers on the couple abstaining from sexual intercourse during a woman's fertile period. Sometimes, its proponents refer to it as a modern method of family planning.

Under this method, three techniques are commonly used:

1. *Calendar method*: Educated couples use the calendar to determine the fertile period and abstain from sexual activity at that period. Similar practice obtains in another method referred to as the Cycle Bead Method.
2. *Temperature method*: This involves determination of the ovulation period; usage of the body temperature chart to determine the probable time of ovulation.

3. *Cervical Mucus*: This also involves determining the ovulation time via observations of changes that occur in the cervical mucus during ovulation.

### **Modern Family Planning Methods**

The modern methods of spacing childbirth include:

1. *Barrier Methods*: These are mechanical barriers that are placed to prevent the sperm from entering the cervix. They include the usage of condoms, applicable to both male and female, and diaphragms.
2. *Spermicides*: This is a chemical substance deposited into the vaginal cavity before sexual intercourse for the blockage of the cervix and to kill the sperm. Examples include the foaming tablets, the creams and jellies.
3. *The Cycle Beads method*: also referred to as Standard Days Method (SDM) - a woman can tell when her menstrual cycle starts and ends, and therefore can predict her fertile period. This method requires the mutual cooperation of both the husband and the wife.
4. *Intrauterine Device (IUD)*: A plastic or stainless steel object inserted into the uterus by a trained health worker for pregnancy prevention. The common types include the Lippes' Loop (coil) and the Copper T.
5. *Hormonal Methods*: These involve, administering either oestrogen or progesterone hormones or both into the woman, to temporarily prevent ovulation in various ways. They include:

- Oral Pills: One tablet is taken daily by a woman throughout the month to prevent pregnancy within the particular month.
  - Injectables: Long-acting hormones injected to prevent pregnancy over a period of one, to three month(s) depending on the type administered.
  - Implant: A deposit of a very long acting preparation of progesterone in the form of an elastic capsule implanted in the upper arm of a woman to prevent pregnancy for a long duration. Norplant, as an example, could prevent pregnancy for a period of up to 5 year
6. *Surgical Methods (Sterilization)*: In this case, a surgery is performed on either a woman or man to permanently prevent pregnancy. They include Tubal Ligation for a woman and Vasectomy for a man.

### Islamic Perspectives on Childbirth Spacing (CBS)

One of the purposes of marriage in Islam is to have children and increase the population of the Ummahh. Abu Dawood (2050) narrated that Ma'qil ibn Yasaar, may Allah be pleased with him said: The Messenger of Allah (PBUH) said: *"Marry the loving and fertile ones to reproduce so that I will be proud of your great numbers before the generations on the Day of Resurrection."* This Hadith has been classified as sound (Saheeh) by Abu Dawood, 1805.

Moreover, practicing, 'Azl', which means withdrawal of man from a woman before ejaculation is permissible, in Islam.

However that is subject to having the consent of the wife because she has rights to having full enjoyment, in addition to having children. Both may be affected as a result of Azl.

It was narrated that Jaabir ibn Abd-Allah said: We used to practice, azl at the time of the Messenger of Allah (PBUH) when the Qur'aan was being revealed. Narrated by al-Bukhari, 4911; Muslim, 1440. In the narration of the same hadith by Muslim Sufyaan was quoted to have said: *"If there had been anything wrong with it ( azl), the Qur'an would have forbidden it."*

According to Shaykh al-Islam Ibn Taymiyah, some of the scholars regarded it as haram, but the four imams, Shafi'i, Ahmad, Ibn Hambal and Malik opined that it is permissible with the wife's permission. And Allah knows best (Majmoo al-Fataawa, 32/110).

Child birth spacing (CBS), is permissible for a couple to agree and carry it out, as long as it is temporary and not permanent, subject to the condition that the means used is harmless to the woman.

Shaykh Ibn Uthaymeen, may Allah have mercy on him, said:

*"With regard to using temporary means of preventing pregnancy, such as when a woman gets pregnant easily, and where the pregnancy is exhausting her, and she wants to space her pregnancies for about two years apart and so on, it is permissible. All the same, that has to be with the acceptance of her husband and as long as it is harmless to her"* (Risaalat al-Dimaa, al-Tabee'iiyyah li-Nisa).

In the International Islamic Fiqh Council in Kuwait 1988, the following were determined:

- It is not permissible to promulgate laws restricting the freedom of couples to have children
- It is prohibited to completely eradicate the ability of having children in the case of either the man or the woman, by means of sterilization, so long as there is no known Islamic necessity for doing so.
- It is permissible to use temporary methods of childbirth spacing for a specific period, provided there are genuine, Islamic reasons or valid health implications. A couple could implement childbirth spacing on the basis of mutual consultation and consent, so long as it is harmless to the existing pregnancy and does not involve usage of Islamically prohibited materials or methodologies. And Allah knows best.

The decision by couples to determine the number of children they require should be respected. In Islam, one could even pray to have a required number of offspring but the promulgation or pegging the number of children per each married couple, as a policy, is not acceptable. It is against Islam to make a general rule for all citizens; to limit the number of children they could bear. However, individuals with certain problems like women having health hazards or for certain familial illnesses can discuss and resolve to limit the number of their family or space them. This is acceptable but it should not be due to fear of poverty or lack of resources.

*“How many a creature does not carry its provision? Allah provides for them, and for you. He is the Hearer, the Knowledgeable”*(Al-Ankaboot 29:60).

*“Verily, Allah is the All-provider, the One with Power, the Strong”* (Al-Dhariyat 51:58).

Childbirth Spacing is advised to prevent the mother from becoming pregnant immediately after delivery before weaning. That helps to avoid the possibility of developing complications that could affect her or even the sibling. Additionally, other diseases, such as hereditary conditions like mental illness and sickle cell diseases may necessitate birth control or childbirth spacing. There are also other maternal conditions such as multiple caesarean sections; ruptured uterus, or psychosis that could also cause birth control or spacing. At any rate, whenever a woman's life is threatened by unusual risks or by the pregnancy, clerics ruled that the birth could be stopped or controlled. Nonetheless, the methods to be used in child spacing, as per the consensus of the Ulama', are limited.

### Understandings of Ulama' on Methods of Childbirth Spacing (CBS)

The past and present Ulama' had, extensively, discussed the issue of childbirth spacing and had taken a stand. In view of its importance, many Muslims have keenly been awaiting to know the religious verdict on it. Childbirth spacing has varied methods with some known to the past scholars while some are only known to contemporary clerics. In effect, the methods include 'Azl' (coitus interruptus), which is the withdrawal of man from a woman before ejaculation. Family planning includes permanent and temporary methods.

(a) Islamic injunctions on Azl (Withdrawal Method)

Many of the Ulama' have allowed the withdrawal (AZL) method. Some of them had conditionally allowed it to be performed but with the consent of the wife. The four Islamic schools of thoughts in Islam have allowed it, even though they attached some reservations. They attributed condition of health grounds for it to be performed. Other Scholars, allowed it to be based on personal interests of the affected couples.

A hadith narrated by Bukhari and Muslim quoted Jabir RA, saying: "we used to practice the withdrawal method at the time of the prophet (PBUH), while Qur'an was being revealed. A scholar, Sufyan remarked that "if it were something prohibited the Qur'an would have stopped us from practicing it".

(b) Comparisons between Azl and modern contraception

Some of the Ulama' deduced that any form of pregnancy prevention like contraceptive pills and injections or any modern device is like AZL, the withdrawal method.

(c) Permanent or Temporary methods

There is a permanent or temporary method of pregnancy prevention.

(i) As regards the permanent (sterilization) method there were general consensuses about its prohibition amongst the entire Ulama', except on health grounds to save the life of the mother. This is in view of the fact that it's being



permanent is tantamount to preventing one from having offspring. This is a complete derailment from the Islamic law, which has stressed the need for proliferation or growth of qualitative population. Ibn Hajr said: It is haram to use the permanent method of fertility management. That in effect, is the opinion of most of the Ulama. The permanent method is accomplished by ligation or cutting of vas deference or removal of testicles in the case of men or ligating or cutting the uterine tubes or removal of ovaries or uterus in the case of women in order to prevent pregnancy.

(ii) However, as for the temporary approach it is permissible, in case of dire needs. Similarly, another scholar, Mujayramee, speaks of its permissibility to enable proper upbringing of children.

### **3. MANAGEMENT OF NON-INFECTIOUS DISEASES, OBSTETRIC FISTULA PREVENTION AND CONTROL**

#### **a) Islamic Perspectives Management of Non-infectious Diseases:**

In Islam, the management of non-infectious diseases is allowed, based on the principles of jurisprudence "AD-DARARU YUZAAL" meaning "afflictions and harms should be removed or forestalled". Allah (SWT) also says, "*... He (Almighty Allah) has chosen you (the Muslims) to convey this message of Islam to mankind) and has not laid upon you in religion any hardship*" (Qur'an 22:78).

The Prophet (PBUH) also urged believers to seek medicine for all illnesses affecting them. Abu Dawood reported that the Prophet (PBUH) said *“Allah created diseases and their respective cures. So treat yourselves for all ailments, but not with prohibited things”*.

### **b) Obstetric Fistula Prevention and Control:**

An Obstetric fistula is a hole between birth canal, rectum or both and the bladder that is caused by prolonged labour, leaving a woman incontinent of urine, faeces or both. The situation could be caused by:

- i. Prolonged and obstructed labour during childbirth: This can be caused by lack of accessibility to health facilities or social factors, resulting in not allowing the woman to go to the hospital on time. Other inhibitions include economic factors like the lack of transport fares to the hospital.
- ii. Congenital Cause: This includes all forms of natural malfunction or anomalies.

### **The Islamic Perspectives**

The Muslim community as an enlightened entity cannot imagine itself allowing their women to be dying or to be permanently incapacitated during delivery or childbirth. All necessary measures should be taken to ensure effective prevention of unnecessary death or prolonged sickness or

incapacitations of any nature. Poverty, that may be partly responsible for women on labour not getting to hospitals on time should be eliminated or reduced to the barest minimum by relevant authorities and on whom the responsibility lies. There should also be adequate enlightenment to the Ummah on the importance and necessity of prioritizing issues related to women of childbearing age. The Qur'an regards saving lives as one of the meritorious acts incumbent on individuals and communities at large.

Regarding the importance of saving lives, the Qur'an says:

*"...Because of that, we ordained the children of Israel; that whoever kills a person not in retaliation of murder or corruptions on earth, it is as if he killed the whole mankind; and whoever saves it, it is as if he saved the whole mankind. ..."* (Qur'an 5:32).

The Prophetic traditions enumerate the value and sacredness of life and the need for its protection. Some of the significant narrations are as follows:

The Prophet Muhammad (PBUH) said: *"the unjust killing of a believer is greater than the destruction of the entire world"* (Hadith: Tirmidhi Vol. 2, no. 56).

Secondly, the Khalifa Umar (R.A.) classified the values and worth of the life of a believer as greater than the holiness of holies in Islam as follows:

*"...The sacredness of the holy Ka'aba as a unifying symbol of direction and holiness to the Ummah, visited annually by*

*the Muslims worldwide is not worth the value of the life of a believer”* (As reported by Ibn Majah, and Ibn Baiah in shi’abuliman, Vol. 5 page 296 and authenticated by Albani in Silsilasihah, Hadith No. 3420).

Islam has repeatedly emphasized that Muslim women are the cornerstone of the community deserving special care and attention for the preservation of the Ummah. Any abuse or disregard for women is like passing a death sentence on the community. The Prophet (PBUH) says;

*“He who is involved (in the responsibility) of (nurturing) daughters and is generous to them, will have them as a fortification for himself against the hellfire”* (Al-Bukhari& Muslim).

The hadith clearly depicted women as the life vein of the community that deserve special care and attention. Another verse in the Qur’an that portrayed special relationship between men and women, and specifying special care that should be accorded to the women include among others:

***“...And among His sign is that He created for you, your wives from among yourselves that you may find repose in them and He has put between you, affection and mercy. Verily in that are signs for men who reflect”*** (Qur’an 30:21)

The verse reflects the special relationship of mutual assistance and mutual complement that must exist between a husband and his wife. So, whenever she is afflicted with any of the reproductive health challenges such as obstetric fistula, as an

obligation, she should be provided all the attention and care she needs under such as situation.

### **Prophetic Traditions on Care and Attention to Women**

The Prophet (PBUH) said: *“The best among you are the most kind to their wives, and to my wives I am the best amongst you”*.

This Prophetic tradition clearly shows the importance of taking proper care of women and the permissibility of using modern facilities for antenatal care, delivery, postnatal care and any maternal morbidity that may arise.

In conclusion, Islam does not legislate a marriageable age, under whatever circumstances, however, a husband is not allowed to consummate a marriage until the wife is physiologically capable, in such a way that prospective pregnancy will not endanger her health, her life or that of the foetus.

We recommend that governments at all levels and communities adopt the following measures to reduce incidences of obstetric fistula.

1. Provision of feeder road to the rural areas.
2. Provision of functional and qualitative health care facilities in the rural areas.
3. Training of adequate health personnel.

4. Creation of community awareness for support and utilization of health care services.
5. Creating community-based collaborative initiatives to address incidences of fistula.

#### **4. SEXUALLY TRANSMITTED INFECTIONS (STIs) AND HIV/AIDS**

A major challenge in addressing the problem of HIV/AIDS and STIs is preventing their transmission, providing quality treatment to those infected and to reducing the negative impacts of the diseases on those who are either infected or affected.

Services provided under this component include:

- HIV/AIDS diagnosis, including laboratory testings.
- Voluntary testing and compulsory pre-marital testing for HIV.
- Syndromic diagnosis and management of STIs.
- Condom promotion and distribution.
- Contact tracing, which is the tracking of those who had sexual contact with the patient with the aim of diagnosing and treating them too.
- Risk assessments.
- Home-based care and referral for people living with HIV/AIDS (PLWAs).
- Anti-retroviral drug therapy for HIV/AIDS infected people.

- Prevention of Mother-to-Child Transmission of HIV/AIDS (PMTCT) including pre-pregnancy and ante-natal screenings, labor and postpartum antiretroviral therapies (ART) and infant feeding and PMTCT.
- Referral.
- Information, Education and Communication (IEC) and community enlightenment activities.
- Counseling on:
  - Condom use and negotiating skills.
  - Client or couple risks assessments.
  - Behavioral changes.
  - STD/HIV prevention including safer sex practices.
  - Pre and post HIV testing.

## **Islamic Perspectives**

Based on current scientific knowledge, it is believed that a large percentage of HIV/AIDS transmission is through sexual intercourse. Islam has the best answer to the prevention of Sexually Transmitted Infections including HIV/AIDS. It has taken steps against sexual immoralities, which include homosexuality, lesbianism and sex outside marriage. Islam also took a practical step of directing its adherents to lower their gazes at the opposite sexes and fear Allah as contained in the QUR'AN 24:30-31.

In spite of the fact that HIV can be contacted under legitimate matrimony through sources other than sexual intercourse; including blood transfusion, parent to child transmission, use of sharp objects, or contact with body fluids of infected accident

victims and fresh corpses during ritual bath rites by the Ulama' or other professionals and aid group members or volunteers, et cetera; it is understood that majority of causes are still outside matrimony. Hence, there are the needs for drawing the attention of the people to the following verses and Prophetic traditions:

*"...Say to the believing men that they should lower their gazes and guard their modesties; that will make for greater purity for them; and Allah is well acquainted with all that they do".*

Islam unequivocally condemns adultery, homosexuality and speaks about them in the strongest terms, explaining that they endanger people not only through diseases but the destruction of the entire humanity. (Glorious Qur'an: 61:51, 17:32, 33:32, 24:30-31, 29:28, 17:16, 16:112, et cetera).

The following intervention strategies have also been accepted:

- Sustaining community awareness and education on STIs and HIV/AIDS;
- Promoting IEC and behavioral change communication (BCC) for STI's/HIV/AIDS prevention and control. The term "safer sex" was objected to as it could be misconstrued. Sexual relationship should only be within the scope of marriage. IEC materials and BCC approaches should respect Islamic teachings.
- Establishment of voluntary counseling and confidential testing in all RH service centres, for all client categories, especially pregnant women.
- Promoting syphilis and gonorrhea testing for all antenatal clients. Integrating IEC and BCC and Clinical services for



STIs, HIV/AIDS in adolescent reproductive health (ARH).

- Use of condom by both males and females for dual protection. However, this should be at the discretion of the couples. Public promotions of condom usage are not acceptable. It poses a detriment to abstinence as a major Islamic way of preventing STI/HIV/AIDS.
- Integrating RH services into care and support of persons infected with HIV/AIDS.

The issue of premarital screenings of would-be couples on HIV and other STIs, the Muslim scholars unanimously accepted it expressing the view that, Islam has not only encouraged but insisted on carrying out background checks and investigations related to either of the partners and their families before going into marriage. The following verses are cases in point:

- a) Allah says: *“...And do not kill yourselves (nor kill one another). Surely, Allah is Most Merciful to you.”* (Q4:29).
- b) Allah says: *“Do not throw yourselves into destruction by your own hands”* (Q2:195).

Some diseases are sexually transmitted and since a medical examination can prevent their spread to prospective spouses, it becomes necessary to conduct medical screenings and investigations.

- c) Allah says: *“Then Zachariah prayed unto his Lord and said: My Lord! Bestow upon me Your bounty and grant me goodly offspring. You are the Hearer of Prayer”* (Q3:38).

Safeguarding the lineage is one of the six primary objectives 'maqasid' of Islamic Law. Taking steps to ensure that future generations are free from genetic defects is fully in consonance with this objective.

d) The Prophet (PBUH) said:

*“Do not expose the healthy to the sick.”* [ Sahîh al-Bukhârî]

The hadith, has more or less, commanded the avoidance of people beset with contagious or hereditary diseases. The Prophet (PBUHM) also said:

*“Flee from a leper as you would flee from a lion.”*

[ *Sahîh al-Bukhârî* ]

Compulsory medical examinations are not a violation of individual freedom. They provide benefits, firstly, to the individual and secondly to society at large. Although the policy may occasionally not be convenient to an individual, the juristic principles outlined by Islamic Law instructing us to opt for the lesser of two evils should be upheld. It is also in conformity with the Islamic legal axiom, to prevent the occurrence of something harmful than allowing it to happen, and look for remedies later.

f) Premarital medical examinations not only promote the well-being of future offspring but the welfare of the family and society, at large. That safeguards the society from socio-economic problems. They are the goals commanded by Islamic Law to be actualized.

## 5. ADOLESCENT SEXUALITY AND REPRODUCTIVE HEALTH

According to the 2012 National HIV/AIDS and Reproductive Health Survey (NARHS), about a fifth of males, twenty percent (20%) and two-fifths of females constituting thirty-seven percent (37 %) aged between fifteen to nineteen (15-19) years are sexually experienced.

A major contribution to the poor adolescent health status is lack of accurate knowledge of sexual and reproductive health issues. Specific interventions addressing the sexual and reproductive health challenges of adolescents include Family Life Health and HIV Education (FLHE) as well as provision of adolescent and youth-friendly services; these are contributing to improving their sexual and reproductive health status.

### **Islamic Perspectives:**

Islam views adolescents with serious concern and holds their position in the society with high premium. In the light of that, it also considers their reproductive health issues in particular, as very critical to the survival of the society in general.

The importance of adolescence in Islam is reflected in several traditions of Prophet ((PBUH):

In a Hadith narrated by Mu'adh bin Jabal and Abdullah ibn Mas'ud the Prophet (PBUH) said that, *“every person will be asked four questions on the day of Judgment, one of those questions is*

*on one's youthful age (adolescence); how did he/she spend it?"*  
(reported by Bazzar, Baihaqi and Tabarani).

Finally, the importance of adolescents and their health in Islam are much more projected in the Hadith of Prophet (PBUH) where he says:

Benefit from five things before five things:

- 1) Your life before death,
- 2) Your wellbeing before sickness,
- 3) Your free time before engagement
- 4) Your youthful age before old age
- 5) Your affluence before poverty.

- The Hadith was reported by Imamu Ahmad,  
Baihaqi

Also in the light of the importance that Islam attaches to adolescent life and health as projected, it is clear, that it accommodates the idea of fighting the spread of HIV/AIDS and unwanted pregnancy, by strongly advocating abstinence before marriage and faithfulness between married partners. In addition to that, early marriage is a rather good means of preventing promiscuity.

The relevant verses and Hadith that support the above assertion include:

1. "And come not near to unlawful sex. Verily, it is a Faahishah" 'immoral sin' (Q 17: 32)

2. “And come not near 'Al-Fawahish', immoral sins, whether committed openly or secretly” (Q6:151)
3. On the authority of Abdullah ibn Mas’ud; he said the Messenger of Allah said: *“O young men, those among you who can support a wife should marry, for it restrains eyes from casting (literally meaning evil glances), and preserves one from immorality; but those who cannot, should devote themselves to fasting, for it is a means of controlling sexual desires”* (Reported by Bukhari and Muslim).

At puberty, and within the context of Islam, a girl could physiologically be ready to have children. Therefore, she could be married. However, formal intercourse should not be performed until the girl is psychologically capable. (NailuIAwtaar-sharhu, muntaqalakhbar (KitaabunNikah) and Fat-hulBaari)).

Allah (SWT) also says:

*"Make trial of orphans until they reach the age of marriage; then if then you find them mature in intellect, release their property to them; but consume it not wastefully nor in haste against their growing up. If the guardian is well-off let him claim no remuneration but if he is poor let him have for himself what is just and reasonable. When ye release their property to them, take witnesses in their presence: but all-sufficient is Allah in taking account "*(Qur'an 4:6).

Commenting on the above verse, renowned Islamic scholars, like Imam al Baghawy (Ma'alim al Tanzeel) and Imam Ash Shaukany (Fat-hulQadir) opined that the age of discretion is when it is felt that a girl is matured enough to get married, which in most cases is after puberty.

Consequently, it is very important that young girls should receive adequate antenatal and postnatal care in pregnancy or after delivery.

In view of the quick rates at which young girls mature, parents could be advised to enroll them in schools early enough to enable them to finish their studies before marriage and subsequent family life. If however, a girl is married prior to completion of her studies, suitable arrangements should be made for her to continue with her education. That was the case with A'isha (R.A) who acquired her education in her matrimonial home and became a teacher to many of the Prophet's companions and had hundreds of students amongst the followers of the companions (Tabi'un).

In that respect, the Holy Prophet (PBUH) instructed Shifa'ubint Abdullah to teach Hafsah the acts of nursing and as she was previously taught the skills of writing.

In another Hadith narrated By Abu Said Al-Khudri, "some women requested the Prophet to reserve a day for them, as his men companions had been monopolizing his time. As such he set a day for them".

The Concept of "Safe Sex" (According to the National RH Policy): In Islam, sex is only permissible within the confinement

of marriage. So, safe sex should only be under matrimony. In this regard, the term 'safe sex' even if its usage is accepted would need to be defined broadly to cover both spiritual and moral safety on one hand, and physical safety on the other. Sex, outside the wedlock, even with the so-called 'single faithful partner' is unsafe, abominable and prohibited.

## **6. MANAGEMENT OF INFERTILITY AND SEXUAL DYSFUNCTION**

Infertility is inability to conceive or produce offspring, despite having regular unprotected sex. It occurs when a poor reproductive system impairs the ability of the body to perform necessary functions of reproduction. Infertility is a condition with severe implications for health and well-being, particularly in a pro-fertility culture as obtains in Nigeria. Individuals and couples that are affected are confronted with significant psychological and social challenges, among others. The 2008 and 2013 NDHS results showed that primary infertility remained low with three per cent (3%) of all women unable to have children. Recent data revealed that infertility is a growing problem in Nigeria affecting nearly twenty-five percent (25%) of couples; hospital-based data showed that infertility was the commonest reason with (40-45%) seeking gynecological consultations in major health institutions in the country.

Contrary to the gender bias with which infertility is generally viewed in many Nigerian communities with females as having the problems, the male factor has been implicated in a thirty to forty percent (30-40%) ratio in a number of cases among infertile

couples. The leading risk factors associated with infertility among women include reproductive tract infections, complications of abortions and unhygienic deliveries. STIs are also associated with infertility among males. Highly sophisticated medical care in the form of assisted reproductive techniques (ART) that may be required for the treatment of infertility (in male and female) is increasingly available in Nigeria; however, majority of the infertile couples are unable to avail themselves of the care as a result of unawareness and high costs of the treatment. Increasing number of infertile couples resort to child fostering or adoption following counseling.

## **Islamic Perspectives**

### **a) Islamic View on Infertility and Sexual Dysfunction and their Causes:**

In Islam, fertility and infertility are primarily attributed to the Will of Allah. Being fertile and able to bear children or produce offspring is dependent on Allah's grace or His benevolence. On the other hand, being infertile and unable to bear children may be a form of test or trial from Allah.

Allah says: in the Qur'an:

*"To Allah belongs the dominion of the heavens and the earth. To Allah belongs the kingdom of the heavens and the earth. He creates what He wills. He bestows female offspring upon whom He wills, and bestows males upon whom He wills. He also bestows both males and females to whom He wills, as He renders*



*whom He wills barren. Verily, He is the All-Knower and is Able (to do all things)” (Qur’an: 42:50).*

In spite of the above verse however, Islam also recognizes and affirms material or physical causes of infertility as established and explained in modern medicine. These too are, however, secondary and also dependent upon the will of Allah.

#### **b) Management of Infertility and Sexual Dysfunction in Islam:**

The management of infertility and sexual dysfunction in Islam naturally and essentially could be expounded in several dimensions as follows:

First dimension: Seeking divine interventions; through prayer and supplications, based on the belief that Allah has absolute powers to render anybody or a couple infertile, the first and foremost step in managing infertility is to seek Allah's divine intervention through prayers and supplication, as exemplified in the prayers of Zakariyya'u (A.S). Allah revealed the story of Zakariyya'u (A.S) in some verses of the Qur'an as he fervently prays unto Allah to grant him an offspring. He says in Q3:38,

*“At that time Zakariyya invoked his Lord, saying: "O my Lord! Grant me from You, a good offspring. You are indeed the All-Hearer of invocation” (Q3:38).*

And in Q21:89-90:

*“And remember when Zakariyya, supplicated his Lord, saying: "O My Lord! Do not leave me barren, childless, though You are the Best of the survivors. Thus, We*

*answered his prayer, and We bestowed upon him Yahya, and cured his wife for him” (Q21:89-90)*

Second dimension: Seeking conventional medical intervention or treatment. Based on the general Islamic teachings about the facts of belief in destiny, it does not and should not prevent a Muslim from pursuance of mundane life and general material means of livelihood, immunity or cure of diseases in particular. The second dimension of managing infertility and sexual dysfunction is therefore, the injunction to seek medical treatment or intervention. The Prophet (PBUH) was reported to have said:

*“O servants of Allah, seek medication, for Allah never sent down a disease without its accompanying cure”* (reported by Abu Dawood, Tirmiziy and Ibn Majah)

In the same vein, Jabir ibn Abdullah al Ansary, narrated that the Prophet (PBUH) said: *“For every disease there is a cure. If the appropriate medication is applied to any disease, the patient gets cured by Allah's grace”* (Reported by Imam Muslim).

In modern medicine there are two approaches to managing infertility and sexual dysfunction. They are:

- i. Primary approach: This involves subjecting the client to normal procedures of diagnoses and treatments. That has generally been approved by Islam as demonstrated in the Prophet's (PBUH) remarks, quoted earlier.

- ii. Assisted Reproductive Techniques (ART). This refers to the usage of sophisticated means of managing infertility involving several techniques, such as artificial insemination, test tube babies and surrogate motherhood and so forth.

### **C) Islamic views on the Assisted Reproductive Techniques (ART)**

In Islam, there is no blanket ruling on the permissibility or otherwise of Assisted Reproductive Techniques. However, its stance varies, depending on the moral and physical safety of the procedure or techniques employed. In this regard, the rulings of Islam are situated within the general principles of protection of purity of progeny (nasl) and the protection of life and safeguarding health. Protection of lineage in Islam is an act that has implications. That includes the fatherhood legitimacy of the child and his eligibility for being worthy of inheritance and the like.

Against that background therefore, the rulings of Islam on these techniques are presented as follows:

Islam allows artificial insemination, as long as the process involves the sperm and ovum of legally married couples. Under no circumstances should the sperm and ovum of unmarried couples be used.

- i. Test-tube babies: the same ruling as in (a) above applies here.
- ii. Surrogate motherhood. This is absolutely prohibited, 'Haram'.

## 7. ABORTION AND POST ABORTION CARE SERVICES

Abortion is the termination of pregnancy before the fetus is viable. The viability is reached within three to four months (23-24 weeks) of conception. There are 2 types of abortions:

- a. Spontaneous abortion which occurs unexpectedly otherwise known as miscarriage.
- b. Induced abortion which is caused purposively, which can be medical or criminal in nature.

Spontaneous abortion can happen due to different causes including infection, hormonal problems, uterine abnormalities, weakness of the cervix, and so on. As for the medical abortion, if there are medical indications necessitating that, such as when the foetus being physically deformed, intra uterine foetal death, or in efforts to save the mother's life, then that is permissible with clear medical guidance and support.

Strategies for encouraging Post-abortion Care (PAC)

- Sex education within Islamic permissibility should be encouraged.
- Quality counseling services, especially among youths, to increase awareness on dangers of criminal abortion.
- Show empathy and support to the victims.
- Health care facilities should be well equipped to offer PAC services.

### **Islamic Perspectives.**

It is pertinent to note that, life begins from conception, and therefore the embryo deserves respect and protection at all stages of the pregnancy. Islam does not allow deliberate interruption of pregnancy or criminal abortion, as it deliberately ends the life of a human being.

An extreme position of the Maliki school of thought says: it is not allowed to terminate pregnancy even before 40 days. However, other Maliki Jurists described it as 'makrooh' meaning undesirable if it is terminated before 40 days. Pertaining to abortion, after the life or soul, has been breathed into the embryo, then it is totally prohibited.

However, in some situations, the termination of pregnancy may be desirable in the interest of the mother or the unborn baby. For instance:-

- I. When it is confirmed that continuation of the pregnancy will amount to the death of the woman. The pregnancy should therefore be terminated. This is in accordance with the principles of Shari'a, regarding the option of committing the lesser of two evils.
- II. When it is confirmed that a foetus suffers from untreatable defects and that will cause great sufferings to the child or would deprive him of a normal life, the pregnancy in this situation can be terminated within the first 120 days. However, even beyond 120 days where there is a gross deformity which may not be compatible with life, the pregnancy could be terminated at gestation.

Nevertheless, some scholars advocated for consultation with at least two medical specialists.

The scholars in question derived their stand, reference to a Hadith narrated by Abdullah ibn Mas'ud (RA). He said that Allah's Apostle, who is the trustworthy and truly inspired said: *"as regards your creation, every one of you is collected in the womb of his mother for the first forty days, and then he becomes a clot for another forty days, and then a piece of flesh for another forty days. Then the soul is breathed into his body. Then Allah sends an angel to write four words: his deeds, time of his death, means of his livelihood and whether he will be successful or otherwise."* (Sahih Al-Bukhari Vol. IV, Book VV, No. 549).

This consideration among others, prompted the Islamic Fiqh Committee of Muslim World League, in its 12th conference held in Makkah on 15 Rajab 1410 AH, to issue the statement that *"it is permissible to abort a foetus which is deformed in the manner mentioned, with the consent of the parents, and within the first 120 days from the beginning of pregnancy"*.

- III. In a situation where the pregnancy has been conceived as a result of fornication or adultery, abortion is not permissible in Islam.

With regard to the situation, where the mother was a victim of rape or incest, there are different opinions. The majority of scholars were of the opinion that, the value of life is the same under Shari'a, irrespective of whether

the pregnancy was as result of fornication with a person with whom the mother is related or not; with or without valid marriage.

*"... He, the Almighty Allah, has chosen you, as Muslims, to convey the message of Islam to mankind and He has not laid upon you in religion any hardship ..." (Q 22:78).*

That notwithstanding, a woman victim, with complications of criminal abortion, should be taken care of, with the utmost urgency.

Allah said: *"The believers, men and women are 'Auliya' (literally meaning helpers), supporters or protectors of one another" (Q 7:71).*

The Prophet (PBUH) said: *"The Muslims in their mutual love, kindness and compassion, are like the human body where, if one of its parts is in agony the entire body feels the pain (Bukhari and Muslim).*

### Illegal Abortion

This refers to an illegal termination of pregnancy before the right time of its birth, in order to get rid of a pregnancy. That is the consensus of some Islamic Jurists. They opined that once life has been inspired into the embryo, unless in an unavoidable circumstance, it is illegal to abort it, irrespective of whether the initiator was the husband, wife or both of them. The

circumstances that may warrant approved abortion had been clearly enunciated earlier.

## **8. PREVENTION AND MANAGEMENT OF CANCERS OF THE REPRODUCTIVE SYSTEM**

The word cancer refers to an abnormal, excessive and uncontrollable growth of a particular tissue or organ which is injurious to the body. The cancers of the reproductive systems are those of the breast, cervix and ovary in the female and prostate in the male. The cervix is a tubular organ lying within the vagina, linking it with the womb, whereas the prostate is a small circular organ surrounding the urinary passage within the male pelvis.

In all cases of cancer, delayed diagnosis and treatment lead to the poor outcome of the disease and even death. Although the cancers can be diagnosed early enough, the screening services may not be available to many families. There is general low awareness among individuals, communities and health providers that, the cancers can be diagnosed and are amenable to treatment even at the pre-malignant stage.

### **Islamic Perspectives on Key Strategies:**

The management of cancers, just like the management of all other illnesses and diseases, is encouraged by Islam. Strategies and approaches that need to be implemented to significantly reduce their incidences include:

- Health education and health promotion for early presentation, diagnosis and treatment.



- Capacity building in the area of training health workers and provision of basic materials.
- Research to understand the risk factors of the cancers in Nigeria.
- Integration of cancer screening tests in reproductive health services.
- Lifestyle modification related to having regular physical exercises, healthy balanced diets and regular medical checkups.

## **9. AGE OF MARRIAGE, PREGNANCY AND CHILD BEARING**

### **a) Child Marriage**

In Islam child marriage at any age is not a harmful practice. The general principle in Islam is that marriage can take place at any age. Therefore, the age limit of 18 as proposed by some National Policies is not acceptable to Muslims. However, the focus should be only on delaying consummation. Scholars discussed fully and concluded that there is no age limit for marriage. However, as regards the consummation, the husband is not allowed to do so until the wife is physiologically and psychologically able to bear the act. The verdict is as reported in chapters of marriage in two books, NailulAwtaar and Fathul Bari. They contained the consensus affirmation of all Muslim jurists.

The stances of the scholars hinged on the specific instance of the case of Aisha's marriage to the Prophet [PBUH] and that of his daughter, Fatima to Ali [RA]. In the case of the Prophet [PBUH], he married Aisha at the age of seven [7] years, and she moved into his home at the age of nine, but consummation was delayed until when she became of age. With regard to his daughter Fatima (RA), she got married to Ali [RA] at the age of sixteen to twenty-one years. ( 16-21). There were variations with regard to her exact age at the time of her marriage. (SiyaruA'alam an Nubala). At any rate, whenever a married girl becomes pregnant, she should be properly catered for with adequate medication both during the prenatal and postnatal periods. She should as well be allowed to acquire education.

This is in view of the fact that in Islam, marriage neither terminates nor limits the educational opportunity of the girl-child. Education is a lifelong affair, so it should be pursued as much as desired.

#### **b) Forced Marriage:**

Forced marriage has categorically been prohibited in Islam and the Prophet (PBUH) never practiced nor encouraged it during his time. On the authority of Ibn Abbas (RA), *“A matron has more right to make her choice, whereas a virgin or minor is to be consulted. Her silence, when asked is regarded as her consent; for she is assumed to be shy”*. There are so many Ahadeeth that were reported on that. According to a report, *“HassanahBnt. Khaldan (RA) was forcefully married to somebody by her father. She complained to the Prophet (PBUH) and the Prophet repudiated*

*the marriage*”. Narrated by Ahmad, AbuDaud, Ibn Majah and Daru-l-Khutni. Another Hadeeth says: “*On the authority of Ibn Abbas (RA), a virgin came to the Prophet (PBUH) and told him that her father, forcefully, gave her in marriage and the Prophet (PBUH) disavowed it*”.

## 10. ELIMINATION OF HARMFUL PRACTICES AND REPRODUCTIVE RIGHTS VIOLATIONS

### **Reproductive Rights:**

Contemporary understandings of sexual and reproductive rights include the right to:

- Information on all matters relating to sexual and reproductive health.
- Sexual and reproductive decision makings, including choice of marriage partner, family formation and determination of the number, timing and spacing of children as well as the means to exercise the choices.
- Equality and equity for both women and men to freely partake or be informed in choice making in all spheres of life, without all forms of discriminations.
- Sexual and reproductive security, including freedom from sexual violence, coercions and right to privacy.

Some of the rights are implied. For example, the right to life or survival, is abrogated by maternal mortality, which is otherwise known as maternal death, while denial of access to reproductive

health information and quality services for young people violates the right to non-discrimination on the basis of age.

### **Key Strategies:**

Efforts have already begun to articulate ways of eliminating harmful practices and gender-based morbidity, meaning impacting disease or injury. Officially, the minimum age of marriage is assumed to have been focused on the age of eighteen (18 years) in Nigeria. In many states of the federation, legislation against female genital cutting and other harmful practices have been promulgated, even though enforcements are uncertain.

The concept of Universal Basic Education (UBE) was designed to ensure that the youths, especially girls, acquire basic education thereby keeping them engaged to attain the minimum age of marriage. Key strategies to achieve the desired goal include:

- Sensitization or mobilization of community support for all practices considered harmful by the Islamic laws;
- Advocacy for male participation in eradicating gender violence.
- Review of laws and legislations against gender violence and enforcement of same.
- Gender mainstreaming in all health plans, advocacy or sensitization for all in RH services.
- Strengthening collaboration and coordination within the Ministries of Health, Women Affairs, Education,

Poverty alleviation programmes and other relevant issues, appropriate organizations, the media and other stakeholders.

- Ensuring implementation of sexual and reproductive rights education, as part of Life Planning Education curriculum in schools.

### Islamic Perspectives

Islam promotes gender equity and not equality in its current mundane understandings. It calls for equity and justice between men and women. Both sexes are provided with specific rights, privileges as well as responsibilities. Women could be educated and gainfully employed to acquire and maintain property, as well as being appropriately treated in inheritance issues. To this extent Islam places more burden of responsibility for the care of families on men, as merciful custodians of women. However, equality in Islam is divine, as Allah (SWT) views all humans as equal in rewards and punishments.

In that respect the Prophet (PBUH) attached great importance to educating women to the extent of reserving a specific time for him to personally teach them. Therefore, the promotion of gender equity is nothing new in Islam.

*"For Muslim men and women, for believing men and women, for devout men and women, for true men and women; for men and women who are patiently constant, for men and women who humble themselves; for men and*

*women who give in charity, for men and women who fast; for men and women who guard their chastity, and for men and women who engage much in Allah's praise; for them has Allah prepared forgiveness and great reward" (Qur'an 33:35).*

*The verse explains what Islam is, that is total submission to Allah's Will which includes all the virtues, particularly specified therein. A number of Muslim virtues have been enumerated here, but the key emphasis is laid on the fact that the virtues are equally binding on men and women. Both sexes have spiritual as well as human rights and duties in an equal degree, and the future "reward" in the Hereafter. (Qur'an 33.35)*

#### **The virtues referred to are:**

(1) Faith, hope, and trust in Allah. Others are belief in His benevolent sovereignty in the world; (2) devotion and service in practical life; (3) love and truthful practice, in thought, intention, speeches and deeds; (4) patience and perseverance in hardships and in right endeavors (5) humility, the avoidance of arrogance and having superiority complexes; (6) philanthropy, which involves helping the poor, needy persons or those exposed to calamities; special virtue arising from general duties of service (7) self-control, typically in the eating manners but generally in all appetites; (8) chastity, purity in sex life, motive, thought, utterances and deeds; and (9) scrutiny in being attentive to Allah's messages and inculcating desires to get leaning towards Allah, (Q: 33.35).

***"Oh mankind! Verily we created you from a single soul, Adam, paired with Hauwa and subsequent couples of males and females; and made you into tribes, nations so that you may know each other not despising each other. Verily the most honored of you in the sight of Allah is he who is the most righteous of you. And Allah has full knowledge and is well-acquainted with all things"(Q:49:13).***

The injunctions are for the entire mankind not only the Muslims. Candidly speaking, mankind emanated from a pair of parents. Their tribes, races, and nations are convenient labels or characteristic differences. Before Allah, the human beings are equal, and the most honourable of them in His sight is he who is most righteous.

The Qur'anic phrase, mankind stands for both males and females. As such, the women have equal rights to pursue knowledge for there are only two facets to human's needs centering on material and spiritual. In essence, the two have to be combined.

As per Chapter 38 verse 71 and 72 of the Qur'an, man has physical and the metaphysical bodies. Almighty Allah addressed the Angels saying:- *"I created Mankind from dust and gave unto him spirit"*. That confirms man as being a physical and spiritual being. So the body cannot be developed while the spirit is ignored or vice versa. The Glorious Qur'an has repeatedly and in many places spoken extensively on the great achievements of some women; their general commitment to Islam and service to humanity.

Despite Pharaoh's tyranny, his wife, Asiya, who was well educated, knew how to handle him. In that respect, her goodness

earned her Allah's pleasure and reward with a befitting domain in Aljannah.

**(a) *Elimination of harmful practices:***

Preamble: Islam as a religion eliminates all forms of harmful practices against humanity. A justification to that effect is the description of one of the cardinal roles of the Prophet (PBUH) where the Qur'an says:

*"Those who follow the Apostle-Prophet, the unlettered (who neither reads nor writes), whom they find written down with them in the Taurat and the Injeel, (who) enjoins them good and forbids them evil, and makes lawful to them impure things, and removes from them their burden and the shackles which were upon them..."*. (Q7:157)

Similarly, the Qur'an also speaks further saying *"...And do not kill yourselves..."*. (Q4:29).

Taken together, the foregone verses also instill the general principles of Islamic law, coined in the maxim "Ad-dararyuzalu" meaning all harmful things should be discarded.

**(b) *Female Circumcision or Genital Mutilation***

Female circumcision in Islam is optional; nonetheless, in case of dire needs it should be done by experts. Islam also enjoins that if it were to be done. A Prophetic advice to that effect is to be observed as narrated by Abu Dawood (5271) *"...if the*



*circumcision of the female is to be done at all, it should not be very deep to the extent of hampering the mutual conjugal pleasure expected between her and her husband".* It is a fundamental message of Islam that all harmful practices are categorically forbidden. That is in accordance with the saying of Allah who specified the role of the Messenger (PBUH) describing him as the one who legalizes for them all that is beneficial and prohibits all that is harmful. Similarly, Allah (SWT) says HE wants ease for us not hardship and also warned in the Qur'an 4:29 that *"you should not kill yourselves"*. That is the more reason why a Muslim should not engage in injurious acts that may lead to the termination of life.

Considering the fact that female circumcision is optional under the Shari'a and in the absence of a reliable report that our noble Prophet (PBUH) practiced it coupled with the contemporary findings of medical experts that it is more detrimental than beneficial, majority of Islamic scholars strongly ruled against girls' circumcision. Hence, the issue of female genital mutilation is uncalled for.

***(c) Domestic and Sexual Violence Against Women or Gender Based Violence:***

In Islam, all acts that may result in physical or psychological injuries to the wife are "haram" or prohibited. Moreover, there is no rape in any permissible sexual act. Nonetheless, the jurists opined that a court could penalize a husband who exerts force inflicting injuries in matrimonial affairs (Under Ta'azir).

The husband is enjoined to be considerate of his wife's emotional and physical conditions, empathize with her and be tolerant of her inadequacies. The wife too should have similar considerations to her husband's plights.

**Islamic acceptable supportive strategies include:**

- Sensitization and mobilization of community support for abolishing harmful practices. considered by the Islamic law. Advocacy for male participation in eradicating gender-based violence should be intensified.
- Review of laws, legislations and their enforcements against gender violence.
- Encouragement of gender mainstreaming in all health plans, advocacy and sensitization for reproductive health services.
- Strengthening of collaborations and coordination between the Ministries of Health, Women Affairs, Education and in poverty alleviation program, and other relevant issues. Appropriate bodies including, media outfit and other stakeholders, should similarly be involved. The inclusion of Islamic family lifestyles in the education curriculum in schools is paramount.

**(d) *Male Children Preference:***

Islam has clearly ruled out the attitude of preferring male to female children. ALLAH (SWT) has categorically confirmed that He has the prerogative of bestowing both the male and female children. The Qur'an says: *"To Allah belong the kingdoms of heavens and the earth. He creates what He wills. He bestows female offspring to whom He wills, and bestows the males to whom He desires. He similarly bestows both males and females or renders others barren, as He so wishes. Verily, He is All-Knower and is able to do all things".* (Q42:49-50).

**(e) *Same-sex marriage and reproductive rights:***

With regard to the issue of selection or choice of marriage partner, Islam has unequivocally ruled that marriage partner should be from opposing sexes. So same-sex marriage under any guise is prohibited, condemned and its perpetrators should be severely punished under 'Shari'a' – the Islamic Law.

It is pertinent to emphasize that the only family formation allowed in Islam, is that of marriage authentically resolved between a man and a woman after fulfilling stipulated lawful conditions. Freedom of choice, governed by the principles of Shari'a , between would-be married couples is a prerequisite. That is an injunction from Allah as conveyed by the Prophet Muhammad (PBUH). A faithful Muslim man or woman should have no alternative but to abide by anything ordained by Allah or

decided by the Prophet (PBUH). A case in point in that respect is a Qur'anic affirmation:- *"...But nay, by your Lord, they can have no faith, until they make you, O Muhammad judge in all disputes between them, and find in themselves no resistance against your decisions, and accept them with full submissions"(Q4:65).*

In Islam sexual violence or coercions are not condoned. In line with the directives of our Prophet (PBUH), a husband is not even expected, to meet his wife for conjugal satisfaction until she is fully awake and in a conducive mood.

The Qur'an stressed that *"...It is not for a believer, man or woman when ALLAH and His Messenger have decreed on any matter, for them to have any option in their decisions. And whoever disobeys Allah and His Messenger (PBUH), he has indeed strayed into a plain error"(Q33:36).*

*(f) Incest:*

This is a form of sexual relations between close relatives, whereas they are too closely related to be legally married. Such affair, is in Islam a taboo and outright crime in many jurisdictions. In Islam, flirtations leading to adultery in whatever forms are absolute taboos, to talk less of committing it with a blood relation, who is a 'Muharram' and also one of the persons with who in intermarriages is forbidden. The Prophet (PBUH) has condemned it in strong terms describing it as one of the most heinous crimes, 'Kabaair'. The Qur'anic injunction to that effect says:

*'Do not marry from women whom your fathers had married, except what is already past. That in itself is improper, indecent and a bad custom' (Q4:22).*

Another verse says:

*"Forbidden for you are your mothers, daughters, sisters, your paternal aunts; your maternal aunts, brother's daughters, sister's daughters, and foster mothers who nursed you; sisters through nursing, your wives' mothers or your stepdaughters in your guardianship- born of wives you have gone into.*

*If, however you have not gone into them, there is no blame. That also obtains in the wives of your genetic sons, also forbidden is the care of marrying two sisters simultaneously, except what is past, Allah is Oft-Forgiving, Most Merciful" (Q4:23).*

Still on the prohibition of incest, another verse decreed that: *"all married women, except those (slaves) you rightfully possess. This is Allah's decree, binding upon you. Permitted for you are those who lie outside the limits, provided you seek them in legal marriage, with gifts from your property, seeking wedlock, not prostitution. If you wish to enjoy them, then give them their dowry - a legal obligation. Thereby, you commit no error by agreeing to any change to the dowry. Allah is all knowing, Most Wise". (Qur'an 4:24)*

(g) Free distribution of condoms, contraceptives and its usage by unmarried teenagers:

From the Islamic perspectives, free distribution of condoms and contraceptives to unmarried teenagers for subsequent usage is unlawful. According to Islamic jurists, that has been categorized under harmful practices. This is in view of the fact that it encourages them to engage in illicit sexual act. As such, it is strongly condemned. *The Qur'an warns: "And come not near unlawful sex. Verily, it is a 'Faahishah' meaning something that transgresses its limits: Thus, it is a great sin, and an evil way that leads one to hell fire, unless Allah forgives him"* (Q17:32).

**(h) Rape:**

Pertaining to rape, Islam has unequivocally condemned it, and its perpetrators will be punished most severely. If, an illegal sex between consenting adults is not tolerated and will not go unpunished, what is more of rape? As quoted earlier, Qur'an warns: *"And come not near unlawful sex. Verily, it is a 'Faahishah,' something that transgresses its limits: Thus, it is a great sin and an evil way that leads one to the hell fire unless Allah forgives him".* ( Q17:32). *The Qur'an further states: "...nor commit illegal sexual intercourse - and whoever does this shall receive the punishment"* (Q25:68).

## 11. REPRODUCTIVE HEALTH ISSUES OF SELECTED POPULATION GROUPS

### A) Islamic Teachings on Compassion and Special Care for Old People

Islam generally teaches its adherents to be compassionate and kind to all creatures, including animals. The Prophet (PBUH) was reported by Abu Dawood on the Authority of Abdullahi ibn ‘Amr to have said:

*“Allah the Most Compassionate in heaven will have mercy upon those who show compassion on one another.”*

In practical terms, the Prophet (PBUH) taught the Muslims, particularly Imams, to be moderate while leading congregational prayers, and pay special attention to the possible needs of the aged, children, weak and sick people. However, if the Imam is praying alone, he could elongate the prayer as he so desires (reported by Abu Hurairah (R.A)).

The Prophet (PBUH) has emphatically enjoined Muslims to respect and cater for the special needs of people in difficulties and the elderly. In the case of care for and assistance to older people, the Prophet (PBUH) says: *"Verily, respect and assistance to an old person is part and parcel of respect for Allah".*

Care for old people in Islam is two-dimensional as follows:

#### ***I. Care of Old Parents and Close Relations:***

It is obligatory upon a Muslim to take care of aged parents and close relations as far as possible from and within

means. The care enjoined, is an all-inclusive one comprising both physical and psychological. The injunction has been revealed in several verses of the Qur'an. *For instance in verses (Q17:23-24) that alluded the psychological, physical and material care for aged parents. Allah says:*

*"...And your Lord has decreed that you worship none but Him, and that you should be dutiful to your parents. If one of them or both attain old age, you should rather address them respectfully and in honourable terms. Moreover, you should lower unto them the wings of submission and humility through mercy, and invoke Allah, saying: "My Lord! Bestow on them Your mercy as they brought me up while I was young" (Q31:14-15 Surah Luqman).*

In another verse (Q46:15-16) Allah emphasizes:

The need for one to be dutiful to parents Allah (SWT) - *"And, We have enjoined on man to be dutiful and kind to his parents. His mother bears him with hardship. And she delivers him in hardship. And the period of his gestation to weaning are thirty months, till he attains full strength and reaches forty years. He says: "My Lord! Grant me the power and ability that I may be grateful for Your favours, which You have bestowed upon me and my parents, and that I may do righteous deeds, such as please You and make my offspring good. Truly, I have turned to You in*



*repentance, and truly, I am one of the Muslims."* (Qur'an 46:15-16)

Allah also says in (Q31:14-15): *"And We have enjoined on man to be dutiful and good to his parents. His mother bore him in weakness and hardship upon weakness and hardship, and his weaning is in two years -- give thanks to Me and to your parents. Unto Me is the final destination. But if they strive to make you join in worship with Me others that of which you have no knowledge, then obey them not; but behave with them in the world kindly..."* (Q 31: 14-15).

## *II. Care to Non-Related Elderly Persons.*

The Prophet (PBUH) teaches us to show care generally to all elderly persons, not just one's parents or those closely related to him. He enjoins us to show respect and care to the old as indicated in the following Hadith:

On the authority of Abu Musa al-Ash'ary, the Prophet (PBUH) said: *"Indeed, honoring a grey-haired old man is part of honouring Allah".* (Muslim).

In another Hadith with similar general import, the Prophet (PBUH) says: *"He is not amongst us he who is not compassionate to the young and does not respect or care for the elderly".*

It was reported that Caliph Umar (R.A) used to go round Madina city in the nights searching for people needing

help, assistance or special care of all kinds. One day, one of the companions, Talhatu ibn Ubaidullah, spotted him entering many houses. Later he, Talhah observed that in nearly all the houses Umar visited there were people in need of one form of assistance or the other. In one of the houses visited by Umar (RA), Talhah found an elderly cripple and blind woman. He was impressed by the fact that Umar rendered necessary assistance to her.

### *III) Care for the people with special needs*

The point has already been made that Islam generally teaches compassion, mercy and love to all creatures, not just human beings. Islam caters for people with special needs in a number of ways. One of them is integration. They should be integrated into the society in terms of eating together and enabling them to partake in other social activities and functions. Allah says, in (Q24:61) that:

*“There is neither blame on the blind, lame, sick, and nor on yourselves, that you eat in your own houses, fathers’ houses, mothers’ houses, brothers’ houses, those of your sisters, mothers’ sisters, and the houses, whose keys you possess, as well as the houses of friends. There is no blame if you eat together or separately....”*

The verse clearly indicated that people with special needs should be carried along within the society, which means that they should on no account be discriminated against, in all social, developmental activities, and services.

Beyond integration, Islam teaches that people with special needs, be accorded special attention in terms of care and assistance. In a Hadith narrated by Muslim, on the authority of Abu Musa al Ash'ary, the Prophet (PBUH) teaches that rendering assistance to a person in a condition of special need (ZhulHajah al Malhuf) is an act of charity. The Prophet (PBUH) said further:

"Every Muslim has to give out in charity." The people asked, "Allah's Prophet! If someone has nothing to give, what will he do?" He said, "He should work with his hands and benefit himself and also give in charity, from what he earns." The people further asked, "What of If he cannot do even that?" He replied, "He should help the needy who appeals for help..." Then the people asked, "What of if he cannot even do that?" He replied, "Then he should perform all that is good 'Al-Ma'ruf'; all that Islam has ordained and keep away from evils. All will be treated as charitable deeds" (Reported by Muslim).

Hence it could be asserted, that the Islamic perspectives on reproductive health for people with special need can be situated within the general teachings, injunctions on care and assistance to all creatures, most especially those with critical needs.

Instructively, it should be made clear that offering reproductive health care and assistance to people with special needs is an act that would attract double rewards from Allah, as long as the caregiver consciously intended

it to be divinely rewarded for the reproductive health care; and compassion for the physically challenged.

## **B) REPRODUCTIVE HEALTH ISSUES OF THE PEOPLE IN HUMANITARIAN SETTINGS.**

The issue could be viewed from three perspectives:

- I. Reproductive health care to Internally Displaced Persons (IDP): The teachings of Islam about reproductive health care apply here. However, it is important to note that for the Muslim communities and Islamic organizations, it is a matter of urgency to provide necessary machineries and institutions for rendering reproductive health care services to the IDP camps.
- II. Protecting the Internally Displaced Persons (IDPs) particularly, the girls and women from sexual exploitation and abuse. Also in this vein, rendering assistance and protection to the children involved in all assaults, hunger, malnutrition, and other conditions.
- III. Psychosocial Care to women and protecting them from discriminations or stigmatizations both at the IDP Camps and within the communities.

This subject involves a number of issues. Thus, there is no outright ruling for it. As such, the issues need identification and independent handlings.

### C) FEMALE VICTIMS OF VIOLENT SEXUAL ASSAULT AND SLAVERY OR CAPTIVITY.

The Islamic position on this category of women is for them not to be blamed as they have committed no sins to warrant their being burdened with psychological, social or economic liabilities regarding their pregnancies or any other reproductive health challenges. Therefore, the government and the society should as a matter of obligation effectively intervene. This is in view of the fact that Islam neither holds anybody responsible nor liable for any unworthy act enforced on him or her.

The following Qur'anic verse and the Prophetic Hadith uphold that:

*"...he, who disbelieves in Allah or commits any sinful acts, will face the wrath of Allah, except in the situation of being compelled..."* (Q16:106)

In a hadith narrated by Abu Dharr Al-Ghifary, the Messenger of Allah (PBUH) said: *"Allah has waived from my Ummah their sins committed mistakenly, due to forgetfulness or being forced to commit them".* (Reported by Ibn Majah, on the authority of Abu Dhar al Ghifary.)

In view of the forgone, the girls or ladies abducted and forcefully subjected to sex, or enforced into sexual slavery should, as a matter of obligation, be integrated, accommodated, accepted and rehabilitated in the society. They should be counseled and made

to feel at home devoid of all elements of stigmatizations or discriminations.

In fact, even in the case of those who willingly commit illicit sexual intercourse 'Zina', but repent and remain remorseful, Islam frowns at their stigmatization. A case in point was the famous story of Al-Ghamidiyya, a woman who during the time of the Prophet Muhammad (PBUH) presented herself for penalty.

On the authority of Abu Musa al Ash'ary: *"...a woman from Ghamid came to the Prophet of Allah (PBUH) and confessed having pregnancy through adultery. Said: " Oh Allah's Messenger, I have done something which has been abrogated and with a promulgated penalty. Allah's messenger (PBUH) called for her master and directed him to cater for her until after delivery. At the end, when the master brought her back, then the Prophet (PBUH) pronounced judgment upon her and had her clothes tied. ... There and then, some of his disciples reported saying:- O! Messenger of Allah, you offer prayer for her, after committing adultery? He replied, If the quantities of her rewards acquired sequel to her repentance were to be distributed, it would be sufficient for seventy (70) people from Madina. He enquired whether there could be a better repentance than her sacrificing her life for Allah's sake. (reported by Muslim).*

i) Humanitarian assistance, aids and donations of relief materials to widows, orphans and old people at the IDP camps.

The Islamic concern for the widows, orphans and elderly people is unequalled. Of equal importance are the exhortations for taking care of them. A number of Qur'anic verses exhorts or enjoins Muslims to shower cares and compassions to the orphans, elderly people and the weak. The Prophet (PBUH) had at various occasions enjoined his followers to grant assistance to the widows and the orphans. One example of such Prophetic exhortations is as he said:

On the authority of Abu Hurairah the Prophet said, *"The one who looks after a widow or a poor person is like a martyr, 'Mujahid' who died in the cause of Allah. He could also be likened to a devout Muslim who perpetually fasted (Saum) in the day times and remained vigil, offering prayers 'Salah' in the nights"*. (Reported by Bukhari and Muslim.)

In effect and in accordance with the quoted hadiths, there are dire needs for exhortations for caring for the widows, the orphans, the vulnerable children, and people in distress. It can comfortably be asserted that the needs for such benevolence become much more imperative in a humanitarian crisis situation.

**ii) The position of children born following rapes or forceful sexual captivity and what should be done to them.**

The position of Islam on such children can be explained in two ways (legitimacy and responsibility):

- a. Legitimacy: Regardless of the fact that the raped ladies or women violently captured and forcefully subjected to sexual slavery are blameless of either adultery or fornication, the resultant children remain illegitimate. Yet again, that does not give rooms for their being tormented or stigmatized.
- b. Responsibility: In terms of responsibility, the child born out of rape or through violent sexual intercourse is innocent and not in any way guilty or liable for any sins or atrocities. So he or she should not be reprimanded, reproached or penalized. The child should also not, in any way, be discriminated against or denied basic supplements for survival as well as any other basis of life. He or she should be educated like any other child and should as well be given all necessary medical cares, as the case may be (Ahkamwaladazzina).

## 12. OTHER SPECIAL ISSUES

- I. Islamic injunctions on embryo or while in the womb (foetus in utero).
  - a. Selections of the right parenthood
  - b. Protection of the child's integrity through appropriate marriage not adoption
- II. Is blood transfusion allowed in Islam?



### III. Sexual Perversion

- a. Homosexuality or sodomy
- b. Lesbianism

#### *I. Islamic injunctions on embryo or fetus inutero while in womb.*

Ulama' disagreed on when to call the product of conception an embryo or fetus. Some are of the view that once there is evidence of life in it such as presence of heartbeat, then it is regarded as an embryo. Others opined that it is so, right from the time the mother missed her menses until delivery. To the others, it will be referred to as an embryo or fetus at the stage of muscles formation, 'mudhgah.

Al-Imam Muznee was quoted in his book, Mukhtasar, to have said that Imam Shafi'i has described a developing embryo 'Janeen' as the situation where human features such as fingers, eye, ears, and so on have started to develop. That was an authentic explanation from a cleric who is not only a linguist but an expert Jurist.

In Islam, there are many injunctions governing, 'Janeen' fetus among which include;

- a) Selections of the right parenthood.
- b) Protection of his (foetus) integrity that is through appropriate marriage and not adoption.

i) Selections of the Right Parenthood

Islam instructs the production of offspring through legalized marriage so as to protect the child's honour. That was the commandment of Allah (SWT) ordained on humanity and it remains unchangeable.

*“O mankind! Be dutiful to your Lord Who created you from a single person and from him He created his wife and from both, He created many men and women; fear Allah through Whom you demand your mutual rights and do not cut the relations of the wombs. Surely Allah is Ever All-Watcher over you”*(Qur'an 4:1).

*“O mankind! We have created you from male and female and have made you nations and tribes that you may know one another. The noblest of you in the sight of Allah is the best in conduct. Allah is knower and fully Aware”*(Qur'an 49:13).

*“And among His sign is that He created for you, your wives from among yourselves that you may find repose in them and He has put between you, affection and mercy. Verily in that are signs for men who reflect”*(Qur'an 30:21).

From the above verses, we can understand that marriage is the necessity of life with which self-esteem and integrity of a person can be protected. It is, indeed a cornerstone on which interrelationship could be established amongst individuals or

corporate groups. It is also the means of expansion of the extended family. In effect, the origin of any nation goes back to one source of a single father, Adam. The origin of mankind is the soil and his father was, Adam from whom his wife, Hauwa'u originated. From the duo, all the human beings sprang.

The Prophet (PBUH) said, “*You are all from Adam who has been created from the mud*”

ii) Protection of Child's Honour Through Appropriate Marriage and Not Fostering.

Islam has encouraged referring to a person with his father's name, once father is known, otherwise he should be addressed as a brother in Islam. That is part of the rights of a fetus before birth. Furthermore, Islam has abhorred a situation where a husband would unjustifiably disown his wife's pregnancy. Thus, it deserves severe punishment in the mundane life and hereafter, for any husband who does that. Similarly, Islam has warned women to avoid attributing somebody else's child to another.

On the authority of Abu Hurayrah (RA), he heard the Messenger of Allah (PBUH) say “*...any woman who brings to her family one who does not belong to it. For doing that, she should be not granted Allah's mercy nor expect to get access to His Paradise.*”

*Allah, the Exalted, will veil Himself from any man who disowns his child, with whom he very much looks alike. Such a man would be disgraced in the presence of all creatures, on the day of Judgment".*  
(Hadith 2263 narrated by Abu Dawood).

## **II. Is Blood Transfusion Allowed in Islam?**

Recognized Islamic Jurists had opined that blood transfusion is permissible if the survival of a sick or injured person requires blood from another person. That is the verdict even if blood donor is non-Muslim. There is no alternative in a situation where there is no other permissible substitute for the patient's recovery. It is also permissible to transplant an organ by means of prophylaxis to safeguard any part of his body. In a situation where doctors, the physicians ascertained that the transfusion is not necessary for a patient's recovery but will augment it, the clerics, belonging to the Shafi'i school of thoughts allowed it. Similar stance emanated from the Hanafi School of thoughts.

In short, if the recovery of an ailing person or even his survival depends on blood transfusion, so be it as it tallies with the following verses of the Qur'an:-

*"...and do not kill yourselves; surely Allah is merciful to you". (Q4:29); "...And do not cast your own hands to ruin"(Q2:195).*

### III. Sexual Perversion

#### a) Homosexuality/sodomy

Homosexuality is a misdemeanor. It is also perversion that is far away from Allah's ordained natural way of human behavior; that degrades the status of person(s) involved. It also leads one going astray from the normal human etiquette, thereby reducing them to an awkward level worse than animals. Allah SWT the exalted describes them with all vices in the following Qur'anic verse:-

And We had sent Lot when he said to his people, *"Do you commit such immorality that no one has preceded you with it from among the worlds? Indeed, you approach men lustfully instead of women. Rather, you are a transgressing people"*. But the only answer his people uttered was their declaration:- *"Evict them from your city! Indeed, they are men who keep themselves pure. So We saved him and his family, except his wife; she was of those who remained with the evil doers", And We rained upon them a rain of pebbles. Then see how the end of the criminals was"*. (Q7:80-84)

The Prophet (PBUH) said: *If you find anyone doing as Lot's people did, kill both the one who does it and the one to whom it is done.* (Abu Daud and Tirmidhee)

#### b) Lesbianism "AS-SIHAAQ"

Lesbianism is a state whereby a woman embraces another woman, both of them being naked, to derive sexual

pleasure. That in itself, according to the majority of Islamic Jurists, has been prohibited by Allah (SWT); as reported by Imam Ahmad, Muslim, Abu Daud and Tirmidhee that, the Noble Prophet (PBUH) said: *“A man should not look at the private parts of another man, just as a woman should not look at the private parts of another woman. A man should not lie under a single cover with another man without wearing lower garments; also, a woman should not lie under a single cover with another woman without wearing lower garments”*.

That in effect affirms the prohibition of homosexuality or lesbianism in Islam.

## ANNEXURE:

### Appendix 1: Sermon Note on Childbirth Spacing

#### CHILDBIRTH SPACING

##### Introduction

"On daily basis, Nigeria loses almost Two Thousand, Three Hundred (2,300) under five-year-old children. It similarly loses nearly one Hundred and Forty-five (145) women of childbearing age. That makes the country, the second largest contributor to the death of the under-five-year-old children and maternal mortality rate in the world." (UNICEF Nigeria Publication 2017).

It is certain that the Muslim community 'Ummah' has great share in the enumerated figure. It is important to note that wide regional disparities exist in child health indicators, with the North-East and North-West geographical Zones of the country having the worst maternal and child survival figures. It is indeed a pity that should be the case, despite the fact that we have Allah's injunction:-

*". . . if anyone killed a person not in retaliation of murder or checking the spread mischief in the land - it would be as if he had killed all mankind; and if anyone saved a life, it would be as if he had saved the life of all mankind. . . ." (Q5:32).*

In effect, that means whoever kills another person, except as a punishment for murder or mischief in the land, it will be written in his book of deeds, as if he had killed all the human beings on earth. And whoever saves a life shall be regarded as if he has secured and given life to all human beings on earth. In view of

that, the protection of human lives, particularly women and children, is an obvious religious duty in Islam. Hence, it should be upheld by every Muslim. As regards saving the lives of women within the spell of reproductive age and their children, Child Birth Spacing has become a necessity.

### **What is Childbirth Spacing (CBS)?**

It is a means by which couples regulate or space childbirth so as to achieve spacing the children and helping mothers to properly recover in between pregnancies. In accordance with the Islamic teaching, Allah (SWT) has shown us the way to space childbearing where He says in the Glorious Qur'an,

*“The mothers should suckle their children for two whole years. That is for those parents who desire to complete the term of suckling, . . .”* (Q2:233).

This indicates that, Islamically, the period of breastfeeding a child is two years, for those who want to complete it. This is the best for the health of both the mother and her child.

### **The Bases of ChildBirth Spacing in Islam**

Allah says:

*“And We have enjoined on man to be dutiful and kind to his parents. His mother bears him with hardship. And she delivers him with hardship. And (the period of) his gestation and the weaning is thirty months... (Q46:15)”*.



*“And among His signs is that He created for you wives from among yourselves, that you may find repose in them, and He has put between you affection and mercy. Verily, in that are indeed signs for a people who reflect.”(Q30:21).*

*“And We have enjoined on man (to be dutiful and good) to his parents. His mother bore him in weakness and hardship upon weakness and hardship, and his weaning is in two years -- give thanks to Me and to your parents. Unto Me is the final destination.).”(Q31:14).*

Similar injunction from 4:29 says:-

*“And spend in the cause of Allah and do not throw yourselves into destruction, and do good. Truly, Allah loves Al-Muhsinin (those who do good)”(Q2:195).*

In Islam, the concept of Family Planning or Childbirth Spacing does not and should not be meant for economic reasons. At the same time either by omission or commission, individuals should not contribute to his own personal destruction. All should work for the safety of themselves and the communities.

### **Importance of Spacing...**

- It is following the Divine Guidance, (Q2:233).
- It promotes and safeguards the health of the mother, full recovery from the hardship of childbearing, (Q46:15).
- It allows for the proper care of the children if they are more than one.

- It allows the mother to comfortably do her acts of worship (Ibadah) like fasting and Hajj.
- It allows the woman to pursue her education in order to be able to contribute positively to her community and this will result in an ideal Islamic community (Ummah), where a woman will attend to another woman in Hospitals, Schools and other places that their services are needed.

### **Adverse effects of non-spacing...**

- It may affect the health of the mother adversely, through frequent child bearings and the accompanying loss of blood.
- The children may not be healthy too, for lack of adequate attention and care.
- The upbringing (tarbiyyah) of the children will be hampered due to lack of health on the part of the mother or if the mother dies at childbirth.

### **Acceptable Methods**

#### **Withdrawal ('Azl) Method**

A Prophetic Tradition (Hadith) narrated by, "Muslim says: *"We use to perform withdrawal ('azl) during the days of the Messenger of Allah, (PBUH). That reached the Messenger of*

*Allah, (PBUH) and he did not prohibit us from so doing”*  
{Bukhari da Muslim 694}

By analogical deductions 'qiyas', “withdrawal (‘azl)” means that all the barrier methods and any other methods that prevent conception are allowed.

Therefore, the most important thing is for people to return to Allah's injunctions; all should repent and change their lifestyle for good. Allah does not change the condition of a people except they change what is in themselves.

*“Verily, Allah will not change the (good) condition peoples are, in as long as they do not change their state of goodness, themselves (by committing sins and by being ungrateful and disobedient to Allah.”*(Qur'an, 13:11).

By virtue of this noble verse of the Noble Qur'an (Q13:11), one can easily conclude that, while Allah (SWT) is Omnipotent, there is still the need for the human agency to realize one's Divinely ordained earthly mission. That is, "Allah helps those who help themselves," as the popular saying goes. All should endeavor to know and practice the relevant provisions in family health care guide and related dictates of Islam. It was high time the three tiers of governments; local, state and federal governments, through their agencies provided appropriate health care facilities to every community. Suitable attention should be accorded to any reported family health matters, particularly the ones that are relevant to women of reproductive age and their children.

## Conclusion

In conclusion, we refer to the precepts of Chapter three verse 104 of the glorious Qur'an Q3:104,

*“Let emerge from you a group of people inviting to all that is good (Islam); enjoining 'Al-Ma`ruf' all that Islam orders, and forbidding Al-Munkar all that Islam has forbidden. And it is they who are the successful.”*(Q3:104)

The Imams are expected to utilize their vast knowledge for the spread of awareness and sensitizing fellow worshippers on maternal and child health care that can help enhance sound upbringing and wellbeing of every child, that shall always lead unto healthy Muslim youths; the incontrovertible future of the Muslim community (Ummah). Family Planning (FP) or Childbirth Spacing (CBS) is good for the health of the mothers and wellbeing of the family and the Community (Ummah) at large.

Finally, let us all keep abreast with the Noble Prophet Muhammad's (PBUH) admonitions:-

*“Take benefit of five before five: your youth before old age, your health before sickness, your wealth before poverty, your free time before preoccupation, and your life before death.”*

- The Hadith was reported by Imam Al-Hakim, Ahmad, and Baihaqi; Saheehul Jami' 1077.

Allah is the All-Knower.

Alhamdulillahi.

## Islamic Perspectives on Reproductive Health and Childbirth Spacing in Nigeria

### Appendix II

#### Attendance List of Participants

**Workshop to Review and Update of The Handbook on Islamic Perspective on Reproductive Health & Childbirth Spacing, Held at Tahir Guest Palace, February 13<sup>th</sup> - 17<sup>th</sup>, 2017**

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