



**A Powerful Framework for Women:
Introducing the Standard Days Method® to
Muslim Couples in Kinshasa**

Institute for Reproductive Health
Georgetown University



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The Institute for Reproductive Health (IRH) is part of the Georgetown University Medical Center, an internationally recognized academic medical center with a three-part mission of research, teaching and patient care. IRH is a leading technical resource and learning center committed to developing and increasing the availability of effective, easy-to-use, fertility awareness-based methods (FAM) of family planning.

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ACRONYMS

COMICO	Islamic Committee in DRC
DRC	Democratic Republic of Congo
FBO	Faith-Based Organization
FP	Family Planning
IRH	Georgetown University's Institute for Reproductive Health
RIPD	Network for Islam, Population & Development
SDM	Standard Days Method®
UNFPA	United Nations Population Fund

A POWERFUL FRAMEWORK FOR WOMEN: Introducing the Standard Days Method[®] to Muslim Couples in Kinshasa

Maman An'Sar is a faith-based organization (FBO) in the Democratic Republic of the Congo (DRC), founded in 1998 to promote and protect the rights of Muslim women and girls while teaching them the principles of Islam. Like many of its peer FBOs, Maman An'Sar looks to the Communauté Islamique en RDC or COMICO for guidance on selecting appropriate activities. Among COMICO's priorities for improving the well being of Muslim Congolese is women's and girls' health, including the promotion of reproductive health, the prevention and care of HIV and AIDS, and an end to all forms of violence against women.

COMICO nowhere mentions birth spacing or family planning (FP) as an element of women's health, and indeed FP was not openly discussed or used among the populations that Maman An'Sar served. Still, the FBO learned of Georgetown University's Institute for Reproductive Health (IRH) and its promotion of natural methods—including Standard Days Method[®] (SDM)—and thought that SDM could be an acceptable entry point for introducing FP to the Muslim community in Kinshasa. Maman An'Sar embarked on several years of negotiations that culminated in training, advocacy with and by imams, and awareness-raising and distribution of CycleBeads[®] in communities. Importantly, participating imams and Maman An'Sar leaders agree: this promotion of FP is truly something new among Muslims in the DRC and, to the best of their knowledge, in the Islamic world.

IRH has worked in the DRC since 2003 to introduce, expand and institutionalize SDM within the range of FP options available to women and couples. The related CycleBeads are a tool that women use to track their monthly cycle and pinpoint the days when they are most likely to conceive. Used correctly by eligible women, SDM and CycleBeads are 95 percent effective.

SDM has proved a popular method in the DRC for many reasons, and foremost among these is its acceptance by religious structures.¹ Catholic churches especially (Protestant churches to a lesser degree) and their network of FBOs are major providers of health services in the DRC. Some estimates put their share of service provision as high as 50 percent,² and this may have been higher during the 1990s and early 2000s when the nation was embroiled in political crises and warfare. IRH has had great success in its collaborations with Christian service providers in the DRC.

¹ The 2007 Demographic Health Survey asked respondents to identify their religion: 28.3% of women stated they were Catholic, 28.7% Protestant; 35.4% other Christians; and 1.2% Muslim. Per the U.S. Embassy in the DRC, the population is 80% Christian (Roman Catholic, Protestant, other) and 10% Muslim (www.kinshasa.usembassy.gov/int-religious-freedom-report-2010.html).

² Hafner, Craig. 2009. Strengthening the Role of Faith-Based Organizations in Human Resources for Health Initiatives. Chapel Hill, NC, USA. The Capacity Project for USAID.



BUT WHAT OF MUSLIMS AND ISLAMIC FBOS?

IRH's collaboration with Maman An'Sar was the first instance in which IRH provided technical and financial assistance to a Congolese Muslim group to improve women's and families' health by promoting FP.

The Maman An'Sar project was, itself, a simple one: it consisted of forming alliances with imams, raising awareness via mosques, and training volunteer women to provide CycleBeads to interested couples.³ More interesting, however, are how Maman An'Sar situated and presented the concept of FP within Islamic mores and structures, and what Maman An'Sar and IRH learned from the experience.

Maman An'Sar is an FBO, founded in 1998, that counts about 2,000 members in Kinshasa and 1,500 more in eight of the DRC's 11 provinces. The women take their name from the citizens of Medina who provided assistance and hospitality to Mohammed and his followers upon their arrival in that city. (*An'Sar's* meaning is 'helpers.')

The FBO's overarching goal is to provide a framework within which the Congolese Muslim woman can express herself and find strength. To this end, its objectives are to:

- (1) teach Muslim women and girls the principles of Islam;
- (2) promote and protect the rights of Muslim women;
- (3) provide care for vulnerable people, including widows and orphans;
- (4) Train young women in trades, including sewing, weaving and food processing; and
- (5) Raise awareness of rights and health issues, including reproductive health, HIV and AIDS, and sexual/gender-based violence.

³ A year-long second phase includes greater numbers of clients and mosques, the addition of clinic-based services, and provision of condoms and oral contraceptives alongside fertility-awareness methods.

REPRODUCTIVE HEALTH IN DRC

Maman An'Sar's fifth objective deals with *raising awareness of rights and health issues, including reproductive health, HIV and AIDS, and sexual/gender-based violence*. Reliable and timely data are scant, yet it is clear that women in the DRC are among the least favored on the planet. Maternal mortality has been calculated at a staggering 1,289 deaths per 100,000 live births,⁴ and the total fertility rate at 6.3 children per woman.⁵ A cultural tolerance of violence against women⁶ has metastasized to campaigns of systematic rape in the still-war torn northeast of the country. Quite naturally, Maman An'Sar looked to reproductive health and especially family planning when seeking ways to improve the health and well being of Congolese women.

...The state of women's and children's health in DRC in general, and in the Muslim community in particular, remains precarious. It is aggravated by poverty and economic difficulty. To this, add people's financial inability to access health services and above all their lack of knowledge of family planning methods. This has, as its consequence, extremely high maternal and infant mortality, and pregnancies that are too frequent and too closely spaced.

*Rapport Final d'Activités, 2009,
Maman An'Sar*

THE SEEDS OF COLLABORATION

Maman An'Sar's journey from *considering* to *implementing* a FP activity was enabled by three connections. First, UNFPA as a key partner in the RIPD offered FBOs some preliminary training in reproductive health, including FP and HIV/AIDS, in the mid 2000s. This training, according to Maman An'Sar members who participated, was fairly broad: it provided concepts and information but did not lead them to form a clear picture of what, concretely; they could do to improve women's health, nor how they could begin. Still, it exposed them to new information and sparked new ideas. Second, it happened that Amina Yuma, Maman An'Sar vice president, was employed by the Ministry of Health's communication department, where she had contact with all major actors in the nation's revitalizing reproductive health arena. Through her job, she learned of IRH and its successful work with other FBOs—notably, the Catholic *Conduite de la Fécondité*⁷—in DRC to promote fertility awareness methods, including SDM. She investigated how those FBOs integrated concepts of FP with their religious teachings, and she brought this information back to her colleagues at Maman An'Sar.

Intrigued, Maman An'Sar sought further information. Members attended an information session that IRH presented on CycleBeads, and then approached IRH staff directly. Over two years of discussion among themselves and with IRH, Maman An'Sar developed a project that, with technical

⁴ International Monetary Fund, 2006, DRC Poverty Reduction and Growth Strategy Paper.

⁵ Ministère du Plan and Macro International. 2008. Enquête Démographique et de Santé, République Démocratique du Congo 2007. Calverton, Maryland, U.S.A.

⁶ IMF 2006.

⁷ *Conduite de la Fécondité*, sponsored by the Catholic Church, has long promoted natural methods among adherents, and plays a strong role in Catholic-run health services' provision of maternity and newborn care. With IRH support, it has become a leader in *training of trainers* for provision of SDM and other natural methods.

A Note on Structure: Maman An'Sar is a member of the DRC's *Comité Islamique du Congo* or COMICO, which regulates religious life in the country and to a great extent guides social norms among the nation's Muslim community. Led by the *Imam Représentant* who maintains ties to the global Islamic structure, COMICO encompasses a *theological counsel* that specializes in Islamic jurisprudence, and bodies that promote social welfare and the concerns of specific sub-populations including youth, the handicapped, and women. Following the 2005 conference in Abuja (Nigeria) on Islam and social development in Africa, COMICO established the *Réseau Islam, Population et Développement* or RIPD, a network of Congolese (and international) organizations that provide development assistance to Muslims. The RIPD membership, including Maman An'Sar, addresses modern social challenges such as responsible parenthood, HIV and AIDS, maternal mortality and women's role in family and society, in a manner that meshes with religious mores. When Maman An'Sar conceived of and implemented the activities described here, they did so from this foundation within the Muslim community.

and financial support from IRH, would introduce the healthy timing and spacing of pregnancies to Muslim couples, via the use of CycleBeads. With IRH's encouragement, Maman An'Sar sought the specific endorsement of religious leaders for this bold activity.

Thus the third connection was within COMICO itself. Maman An'Sar, as a COMICO partner, is entrenched in the Islamic life of the DRC, and its members

had no difficulty approaching that body to discuss family planning. In fact, they are quick to dispel the impression, common among non-Muslims, that only men can address religious leaders or influence social change. Rather, they say, men and women are free to discuss *secular* matters together, and women can teach or train men, including imams, in secular topics. (Islam proscribes women from preaching to men or teaching them about religious matters, however.)

The Maman An'Sar board of directors contacted Imam Famba Ali Hemedi, the head of COMICO's Theological Counsel, to broach the topic of FP. This imam and others had also participated in UNFPA-sponsored training on reproductive health, and had already searched the Koran for support of ways to prevent HIV and promote care of those living with AIDS. It was therefore not a great stretch for Imam Famba and his colleagues to apply Islamic jurisprudence to the topic of FP, and to find support for it in the Koran's injunctions on familial and social well being.

MAMAN AN'SAR'S FAMILY PLANNING PROJECT: PHASES I AND II

With IRH financing and technical support, Maman An'Sar's project began in March 2009. Its three major components of Phase I were:

1. **Advocacy Day**

Maman An'Sar extended an invitation to eight imams to attend an IRH-sponsored *Advocacy Day* in March 2009. The purpose was to educate, foster debate, and ultimately develop consensus among imams that Islamic jurisprudence accepted and indeed supported the use of some types of FP under certain broad conditions. To start off the event, IRH presented a technical review of fertility awareness methods, including SDM. Maman An'Sar presented the role that the spacing of pregnancies can play in women's health, couples' emotional lives, and families' welfare. Imam Famba then stood before his peers to discuss his reading of Koranic text vis-à-vis FP, and to invite their views.

Imam Famba later recounted that some of his colleagues initially viewed FP as if it were something new and foreign to their religion. Yet, he said, "We went to the Koran and found that every idea

or principle behind family planning corresponded to texts [in the book].” He presented his research during the Advocacy Day, and later he and a handful of other influential leaders wrote and signed a *Déclaration des Imams* that outlined their interpretation of Islam’s position towards FP.

Selected Verses and Text in Support of Family Planning, from *Déclaration des Imams*⁸

“Islam made the family the basis of society, and made marriage the basis of the family; it established for marriage several noble objectives including: sexual satisfaction, emotional fulfillment, and cooperation in managing life and procreation...There are three important principles related to questions of population and development: removal of difficulty, achievement of well-being, and universal justice. [4.28] *Allah desires that He should make light your burdens, and man is created weak.* And Allah says, [16.90] *surely Allah enjoins the doing of justice and the doing of good (to others)...*

The preservation of life and reproductive health are two among five ends of divine prescriptions in Islam. Allah says, [5.32] *...whoever slays a soul, unless it be for manslaughter or for mischief in the land, it is as though he slew all men; and whoever keeps [a soul] alive, it is as though he kept alive all men...*

The use, by a couple in perfect understanding and without constraint, of a legal and sure method to delay a pregnancy or to precipitate a pregnancy, bearing in mind their medical, social and economic standing and within the frameworks of their responsibilities to their children and to themselves, and of their own legal marriage.¹ Allah declares, [2.233] *...no soul shall have imposed upon it a duty but to the extent of its capacity; neither shall a mother be made to suffer harm on account of her child, nor a father on account of his child...*”

2. Awareness-Raising: Mosques Present FP Information

In April 2009, Maman An’Sar held awareness-raising sessions at six mosques in Kinshasa, covering FP in general, and SDM in particular. A total of 625 people attended these sessions. Trained imams at three of the six mosques subsequently preached on FP during Friday prayers, reaching 1,669 more adherents—547 women and 1,122 men. People were intensely interested, and flocked to the mosques to hear the imams. Awareness-raising and sermons at mosques led to the distribution of 187 CycleBeads.⁹

3. Training Women to Distribute CycleBeads

The next step was to select and train women to reach out to couples and help them successfully use CycleBeads. Maman An’Sar sought volunteers: criteria were literacy, interest, time, and the permission of their husbands. These women had not previously worked as health volunteers in any capacity.

⁸ *Déclaration des Sheikhs et Imams aux Journées de Reflexions sur le problème de la planification familiale et l’offre du collier du cycle dans la communauté*; dated 10 March 2009 and cited in a Mamans An’Sar report. English version of Koran text is drawn from <http://quod.lib.umich.edu/k/koran/>. The Holy Qur’an, translated by M.H. Shakir and published by Tahrike Tarsile Qur’an, Inc., in 1983.

⁹ Source for these and other numbers: *Rapport final d’activités de sensibilisation et de distribution du collier du cycle* (Final activity report on awareness-raising and CycleBeads distribution), Maman An’Sar, Kinshasa 2009.



In March 2009, closely following Advocacy Day, a two-day training session brought together 42 volunteer distributors and eight imams. Maman An'Sar and the imams introduced the social and religious context of fertility awareness methods. Two trainers—one from IRH, and one from *Conduite de la Fécondité*—taught participants the technical aspects of the methods, and how to counsel (and follow up with) couples in their use.

From April 2009 onward, the 42 trained volunteers have worked in their neighborhoods to distribute CycleBeads, to train couples in their use, and to resolve any problems they may be having. Although Phase I of Maman An'Sar's project ended in October 2009, the volunteers have continued to visit users and to provide information to other interested parties. They have distributed 520 CycleBeads.

4. A Second Phase

In November 2010, Maman An'Sar embarked on Phase II of activities, with technical and financial support from IRH, *Conduite de la Fécondité* and the Ministry of Health's National Program for Reproductive Health. Over 12 months, the FBO will:

- (1) raise awareness and acceptance of healthy timing and spacing of pregnancies among Muslims;
- (2) increase men's involvement in supporting and promoting FP; and
- (3) Expand the range of methods available to couples via the participation of six clinics that serve the Muslim population in Kinshasa; in addition to SDM and the Lactational Amenorrhea Method, the project will promote oral contraceptives and condoms.

The table below shows Phase I achievements and Phase II targets.

Maman An'Sar Work by the Numbers	Phase I: Achievements	Phase II: Target
# CycleBeads distributed to couples	707	1,652
# Mosques involved	6	10
# Imams trained	8	20
# Community health workers trained	42	42
# People reached at mosques: awareness-raising	625	
# of people reached at mosques: sermons	1,669	5,000
# of clinics offering FP	0	6
# of clinicians trained in FP	0	12

A FIRST FOR IRH IN THE DRC

Before this collaboration with Maman An'Sar, IRH had not partnered with any Muslim groups in the DRC. Perhaps the largest adjustment for IRH was working with an organization that, unlike other FBO partners, had no project management experience. IRH staff spent a great deal more time than usual in training, follow-up and on-the-ground support.

The more pleasant surprise for IRH was that the cultural adjustments it needed to make were minor. Having already worked with Christian FBOs, staff knew that certain topics were best dealt with from a theological rather than a technical viewpoint. For example, IRH left it to the imams and Maman An'Sar to define and advise couples on acceptable ways to deal with the fertile period represented by the CycleBeads' white beads.¹⁰ (See "Those Twelve Days," below.)

IRH is the first to point out that its cross-cultural ease, born of long international experience, was momentarily interrupted as staff contemplated their first collaboration with a Muslim organization and especially a group of imams. Pélagie Nsaraza, IRH Program Assistant, recalled, "At the beginning of the Advocacy Day, Imam Famba saw that I was very constrained and fearful of causing offense. To put me at ease, he announced to the group, 'We are here to discuss science and health. On this plane, we have no taboos. Speak openly on this matter: it is why we are here.'" That said, she noted that Maman An'Sar guided IRH staff to follow certain protocols: women were to keep their heads covered in the presence of imams, for example, and were never to shake their hands. The training site needed facilities for washing before prayers, and the training schedule had to account for prayer breaks.

AN ISLAMIC CONCEPT

Amina Yuma, Maman An'Sar's vice president, described her earliest discussion with imams on the subject of FP. "Fortunately the imam in question had already attended training in HIV and AIDS, so he knew that the Koran did not forbid certain things, and some of these things applied to birth spacing. He said that he wanted training in reproductive health and FP, but initially hesitated at the idea of a mixed sex training session. I asked him, 'How can we convince people that the Koran is in agreement with FP if you are not there?' That's how it transpired that we have written citations of Koranic verses [the *Déclaration des Imams*] that correspond to FP and reproductive health concerns."

Without the combined authority of the imams, and the knowledge and skills of Maman An'Sar, the successful introduction of CycleBeads could not have happened. People were intensely interested in the topic—they flocked to the awareness-raising sessions and Friday sermons in unexpected numbers—but it was the grounding of the information in their faith that made it acceptable to them.

Imam Famba recalled, "It really was something new, to talk about reproductive health in a mosque. In some people's minds, it was as if we were committing a sacrilege." In addition to contextualizing the information within Koranic texts, Famba and other imams presented it as a

¹⁰ Imams declared that *coitus interruptus* was one acceptable tactic.

matter of family well being within the DRC's difficult social and economic conditions. Tradition might hold that children constitute wealth, they said, but in reality too many children cause social and family stress. Likewise, tradition might hold that men should dictate the frequency of conjugal relations, but in fact placing too much emphasis on men's need for sex causes problems for couples. The imams positioned birth spacing as a foundation for strong families.

"It is always hard at first to get people to understand [a new concept], concluded Famba. "But if other imams did not immediately jump on board, at least they understood that the subject was now on the table."

Aisha Basue, Maman An'Sar's president, believes that the project has lent her FBO considerable stature. "We are now squarely working from the Koran. We are gaining a stellar reputation among Islamic women's organizations. We offered imams the opportunity to dig more deeply into Koranic teachings; we opened the door for them to apply Islamic jurisprudence to the very heart of our community. Our project led them to study historic preaching in light of modern social realities, and they have thanked us for that."

THOSE TWELVE DAYS...

The CycleBeads' 12 white beads represent the days when a woman is most likely to get pregnant. But what do the twelve days mean for couples who use SDM? Maman An'Sar's volunteers have found that they ultimately offer more opportunity than obstacle, but that is not always immediately apparent.

One volunteer relates, "Last Sunday I went to visit a woman who'd accepted CycleBeads. I walked into the compound and found a man sitting there. He took one look at me, and then hollered over his shoulder, 'Hey, that bead lady is here!'"

"I asked, 'Why do you cry out like that? Is there a problem?'"

"He looked at me long and hard, and replied, 'Lady, sit down and I'll tell you. I've got 12 days' worth of problem!'"

"He compared the abstinence period to watching his wife prepare a beautiful pot of *fufu*—his favorite food—but not allowing him a single bite. Still, he did not want to stop using the method, because the '12 days of problem' did not outweigh the benefits of spacing pregnancies."

Another volunteer admits, "I find it difficult to discuss the white beads with men. One said to me, 'I don't want any more of your bright ideas here. You've brought anarchy into my home.' He was accustomed to having sex with his wife whenever he wanted. Yet this man and his wife did accept the method, and are using it successfully."

"Women tell us those [white bead] days caused fights at first," a third volunteer agrees. "Sometimes the woman goes to sleep in her children's room; other times, the couple agrees to have relations but use withdrawal. Each couple finds its own way to cope."

"Women do say it was hard at first," says the volunteer with the *fufu*-loving client, "but they also say that using the beads has brought them closer to their husbands—that they have become better friends. That's not only because they track the days together and share the goal of spacing pregnancies, but because during the abstinence days they are more likely to converse since they can't have relations."

A SUITABLE TOOL IN THE DRC



In the course of its project to raise awareness and distribute CycleBeads, Maman An'Sar, members became aware of the value of the beads themselves—not only as a tool for tracking a woman's cycle, but as a potent symbol of knowledge, and one that manages to combine neutrality and authority.

Abubakar Musangu, a Maman An'Sar board member, says, "In the African framework, objects and tools can have power and hold mystic properties. It would be easy for people to see a CycleBeads user—a neighbor, for example—as someone who is manipulating spirits and causing trouble. But the religious framework changes that. In fact, we can encourage people to see the similarity between CycleBeads and Muslim's *tasbir* or prayer beads. They see it immediately; the correspondence is clear."

Dr. Marie José Kikoo, formerly with the Ministry of Health and now affiliated with *Conduite de la Fécondité*, expands on this idea. "[SDM] is very well accepted by the population. Muslims see CycleBeads as similar to their *tasbir*, and Catholics to their rosaries. People have a real fear of using pharmaceutical methods and their possible side effects. The beads are very attractive for this reason."

She points out yet another positive aspect of SDM. "The fact that the method encourages—even demands—couple communication is a real plus. No other method has been presented in this light."

A FRAMEWORK FOR STRENGTH

Maman An'Sar ultimately aims to provide a framework within which the Congolese Muslim woman can express herself and find strength. The FBO believes that its collaboration with IRH has contributed to this goal, and that CycleBeads themselves are a powerful element of that framework.

"Women have mastered the knowledge of how to use the method," says Amina Yuma. "They have the tool [CycleBeads] and they have the volunteers who distribute it, and they have Maman An'Sar standing behind it. Finally, they have the authority of the imams and Koranic verses. All this together is a powerful framework for women."

ONE FAMILY'S STORY

If SDM guides a woman to understand her cycle so she can delay or prevent pregnancy, might it also help a woman who wishes to conceive? This was the idea that came to Fatu Lyna, who first heard of CycleBeads at her mosque.

"I felt desperate to get pregnant," says Fatu, whose only child was 15 years old. "I'd done everything I could think of. I consulted doctors, and I consulted healers. My husband and I were on the brink of splitting up—my in-laws were talking of kicking me out because I was barren. Yet in the end, it was in my own mosque that I heard of CycleBeads."

Aisha Basue, Maman An'Sar's President, takes up the story. "One day we went to a mosque in Macina [neighborhood] to do some awareness-raising. Afterward, a woman approached us and asked if we could speak in private. She said, 'I haven't had a child in 15 years. Instead of abstaining during the 12 days of white beads, can I use the necklace to plan when I *should* have relations?' Of course, my answer was 'yes.'"

"I brought the beads home," says Fatu, "and explained them to my husband. I told him, 'here's a tool that we can try; we've tried everything else.' I explained how it worked, and what the white beads meant."

Fatu's husband, Moussa Kanza, chimes in. "When she brought the beads home, I was willing. We hung the beads on the wall in our room so we could both see them the first thing every morning."

"We tracked the days," says Fatu, "and within weeks I started to feel nausea and other signs of being pregnant." In due time, she gave birth to a healthy girl and named her Aisha in gratitude to the woman who had introduced her to CycleBeads. The beads still hang on the couple's wall, but now they use them to delay their next pregnancy until baby Aisha is two years old.

When asked if IRH could publish her photograph and story, Fatu replies, "In the Christian church, people can 'witness' or tell their experience of things that are special or miraculous. We Muslims don't have that tradition, yet I would be glad to be a witness for CycleBeads."



Moussa Kanza, Fatu Lyna and baby Aisha at home, November 2010.