

30 YEARS ON: FAITH IN THE ICPD PROGRAMME OF ACTION

How faith actors advance sexual and reproductive health and rights

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Preface by the Co-Publishers

In 2024, to mark the 30th anniversary of the ICPD Programme of Action, the ACT Alliance Global Gender Justice Programme initiated a research process to evidence how faith actors are advancing Sexual and Reproductive Health and Rights (SRHR). In collaboration with members and partners, including Act Church of Sweden, Norwegian Church Aid and Faith to Action Network, the Joint Learning Initiative on Faith & Local Communities was commissioned to explore the intricate relationship between SRHR and faith actors.

Faith actors and religious institutions are key players in advancing the ICPD Programme of Action, both in their immediate communities and in broader regional and global communities. Faith actors are key providers of a wide range of services, including primary health and educational services, both in development and humanitarian settings. They also convene and play an important role as advocates for marginalised communities. Religion shapes values and attitudes and influences behaviours and faith actors are powerful allies in promoting transformative social norms and countering negative and harmful practices.

Despite considerable global progress, many challenges remain in ensuring that everyone—regardless of their age, gender, or geographical location - can make these choices freely and safely. Our aim is that the findings in this report provoke meaningful dialogue between diverse stakeholders, including policymakers, faith actors, and feminist movements. Our hope is that by doing so, more equitable, respectful, and inclusive approaches will be strengthened and invested in, which unlock the transformative potential of faith actors to advance sexual and reproductive health and rights worldwide.



Introduction

The International Conference on Population and Development (ICPD) Programme of Action (PoA), adopted in Cairo in 1994, marked a paradigm shift in global development, placing individual rights and well-being, particularly women's empowerment and reproductive health, at the heart of sustainable development.¹ Its comprehensive agenda covers a wide range of interconnected issues including poverty, education, gender equality, maternal and child health, migration and environmental sustainability. Over the last 30 years, the ICPD has been a crucial framework for policy, planning, and implementation of development initiatives globally. The Programme of Action has established a globally relevant blueprint for the realisation of sexual and reproductive health (SRH) and reproductive rights (RR). It has consistently affirmed that these rights are not only fundamental to overall health but also essential for human well-being. Governments, in collaboration with a diverse array of stakeholders, including civil society organisations, women's and youth-led groups, the private sector, and grassroots communities, have worked to implement its ambitious goals.

Faith actors have played many important roles relevant to the ICPD PoA implementation. Over the past three decades, with their deep community ties and ability to reach marginalised groups, faith actors have also been vital partners in realising the Programme of Action, particularly in the oftencontested realm of sexual and reproductive health and rights (SRHR). Amid the tensions that can arise at the intersection of religion and SRHR, many faith actors have demonstrated an unwavering commitment to progress outcomes related to the ICPD agenda, and a unique ability to counter backlashes, while navigating complicated contexts and barriers (see Textbox 1). This report explores the multifaceted ways faith actors have engaged with the ICPD Programme of Action, specifically SRHR initiatives, showcasing their best practices, methodologies, partnerships, and

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¹ United Nations. (1994). Report of the International Conference on Population and Development, Cairo, 5-13 September 1994. New York: United Nations.

learnings. It highlights faith actors' possible transformative power in challenging harmful norms, promoting health education, and expanding access to essential social services, even in remote areas, where some states fail to provide services. By illustrating the indispensable role of faith actors in advancing SRHR, as advocates, duty-bearers, service providers, and even legislators, this report underscores their vital contributions to creating a world where the rights and well-being of all individuals are respected and upheld.



To achieve these goals, faith actors are actively engaged in global collaboration. Many partners with diverse stakeholders. including bilateral and multilateral government entities and local authorities, to reach marginalised populations effectively. Furthermore, some faith actors can collaborate with feminist secular networks advance gender justice, and with interfaith organisations to promote mutual understanding and collective action. These partnerships further exemplify the commitment of faith actors to work across boundaries and leverage diverse expertise to create a more just and equitable world.

Textbox 1: Contextual challenges faced by faith-based initiatives

Faith actors and faith-based organisations (FBOs)² operate within a complex, nuanced and everchanging landscape. They are often walking a tightrope, balancing diverse religious perspectives with the need to address critical development issues. Faith actors affirming human rights must navigate resistance, build trust, and advocate for change within an often-contentious environment impacted by both internal and external social, economic and political factors. Understanding this complex context is crucial to appreciating both the obstacles faith actors encounter and the distinctive societal position that enables them to overcome these hurdles.

Resistance and misconceptions: Since its adoption in 1994, resistance to the ICPD agenda has been prevalent among some religious leaders and communities and is often fuelled by fundamentalist discourses.³ Societal polarisation and push backs are particularly strong around issues of gender, sexuality, and reproductive rights. For example, comprehensive sexuality education (CSE) training for pastors in Paraguay, provided by former government officials and representatives of ACT Alliance members Diakonia and Hora de Obrar, faced backlash from local leaders of the "Don't mess with our

² This report uses both "faith actors" and "faith-based organisations (FBOs)" to acknowledge the diverse ways faith influences issues surrounding the ICPD POA. "Faith actors" encompasses a broader range of individuals and groups motivated by faith, including individuals within FBOs, independent religious leaders, and community members driven by their religious beliefs. "Faith-based organisations" refers specifically to institutions with an explicit religious affiliation and mission. This distinction allows for a more nuanced analysis.

³ Fundamentalist discourses in this context refer to rigid and literal interpretations of religious texts that often promote traditional gender roles, restrict sexual expression, and oppose reproductive rights. These discourses can create a hostile environment for sexual and reproductive health and rights (SRHR) advocacy.

kids" movement, which is allied with local political parties. This opposition generated tensions within communities and led to the social rejection of pastors who supported CSE⁴. Resistance to SRHR programming can also be fuelled by myths and misconceptions, such as the belief that miracle healing is possible for HIV/AIDS⁵ or framing family planning as a conspiracy. In some African countries, family planning is reported to be perceived as a Western conspiracy to control the population. This belief stems from fears of neocolonialism, anti-African sentiments, certain religious interpretations, and distrust of foreign aid.⁶ Misconceptions around family planning hinder its adoption, contributing to negative health outcomes for women and girls. Culturally sensitive education, engaging faith leaders and local leadership, and addressing underlying socioeconomic factors are crucial for overcoming these challenges. FBOs counter misinformation with evidence-based information and sound theological interpretations, adopting culturally sensitive dialogue and advocacy.

Social and patriarchal barriers: Deeply ingrained social norms and patriarchal interpretations of religious texts pose significant hurdles for faith actors working in the sexual and reproductive health and rights (SRHR) space. Well-organised and well-funded anti-rights organisations and networks have mobilised religious voices to push back against SRHR progress, influencing public opinion and policy decisions. A new report by the ODI reveals a coordinated, well-funded global attack on gender equality in education, spearheaded by extreme religious groups and political parties. This includes removing sex education from national curricula, banning girls from school, and pushing patriarchal stereotypes. This has led to a loss of SRHR, for example, the replacement of comprehensive sexuality education with abstinence-only programs in some countries, including South Africa, Brazil, and the Philippines. This hostile environment created by anti-rights groups directly attacks the actors promoting SRHR, by limiting access to accurate information, fuelling misinformation, and creating a climate of fear and intimidation. Examples of these anti-rights groups include the World Congress of Families (WCF), an international network promoting a conservative Christian vision of 'the family' that actively opposes access to contraception, safe abortion services, and comprehensive sexuality education. Family Watch International is also a powerful player, who holds consultative status at the United Nations and actively lobbies against SRHR initiatives globally.7 Others include influential USbased organisations, like the Heritage Foundation and the American Center for Law and Justice (ACLJ). These groups present a significant challenge to faith-based organisations (FBOs), and wider civil society, UN agencies and states, who are working to advance SRHR. This requires the active engagement of faith actors affirming human rights to create counter-advocacy, community engagement, and policy advocacy efforts to protect and promote reproductive rights and gender equality.

Limited resources and funding: Challenges related to funding, human resources, and institutional capacity are ever-present for FBOs. Many are flexible, self-reliant, and innovative, seeking creative solutions and partnerships to ensure the sustainability of their projects. Funding for FBOs can be limited⁷ for various reasons. One is their perceived subjectivity, as their motivations and service delivery are often intertwined with religious beliefs and values. However, research has shown that both secular and faith-based organisations can exhibit subjectivity and patriarchal tendencies. Secular organisations exhibit subjectivity due to factors like ideological leanings, funding pressures, and

⁴ Weishein, J. (2024). [Personal communication]. Hora de Obra. https://www.horadeobrar.org.ar/nuevo-curso-deteologia-de-la-sexualidad-y-educacion-sexual-integral/

⁵ Roura, M., Nsigaye, R., Nhandi, B. *et al.* "Driving the devil away": qualitative insights into miraculous cures for AIDS in a rural Tanzanian ward. *BMC Public Health* 10, 427 (2010)

⁶ EngenderHealth. (2016). *Religious Leaders' Perspectives on Family Planning in Africa: Findings from Five Countries.*⁷ Le Roux, E. (2019). Religion, development and GBV: Recommendations for a strategic research agenda for the PaRD Gender Equality and Empowerment work-stream. Joint Learning Initiative on Faith & Local Communities. https://jiliflc.com/wp-content/uploads/2019/04/JLI PaRD-Research-agenda-Finalised 31.05.19.pdf

political considerations. They can experience as many internal differences and pushback as FBOs. Moreover, excluding faith actors and overlooking the influence of religion in development can potentially empower fundamentalist groups and disempower progressive religious voices, hindering collaboration and progress.⁸ Secular bias among donors can further contribute to a lack of understanding of the role of faith in SRHR.⁹ An apparent preference for "safe" interventions hinders funding for initiatives addressing social norms, despite their crucial link to SRHR access. Additionally, FBOs may face competition and eligibility restrictions, especially in areas like family planning, where their track record and evidence base might be less established.¹⁰ To overcome these obstacles, FBOs need to diversify funding sources, improve their capacity in specific SRHR areas, and clearly demonstrate their impact to potential donors.¹¹ Donors, in turn, need to develop clearer policies on partnering with FBOs, increase religious literacy, and create more inclusive funding opportunities, especially for local faith actors rooted in communities.⁹

These challenges underscore the complex context in which FBOs operate. Overcoming them requires ongoing dedication, adaptability, strategic and innovative partnerships with various stakeholders, as well as recognition and support from policymakers.

Implementing Social Services and Educational Programmes Targeting Youth

Social service provision stands as a cornerstone of FBOs' commitment to SRHR. Faith actors have established a robust network of health systems and infrastructure that plays a vital role in providing healthcare services. Many often operate within government or regulatory frameworks and are trusted partners due to their deep-rooted presence in communities. Faith-based organisations also leverage their existing infrastructure, such as schools, places of worship, and community centres, to deliver essential health services. This infrastructure is particularly valuable in times of crisis, where faith actors are first responders, and a trusted presence within communities.¹²

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⁸ Fiddian-Qasmiyeh, E. (2015). Engendering Understandings of Faith-Based Organizations: Intersections between religion and gender in development and humanitarian interventions

⁹ Le Roux, E. 2021. Religion and gender in donor policies and practice. A reflection on government ministry and intergovernmental agency engagement with religious actors in pursuit of SDG 5. Research report: Joint Learning Initiative on Faith and Local Communities.

¹⁰ Faith to Action Network. (2023). *Advancing sexual and reproductive health and rights through faith-based approaches: A mapping study*. http://f2an.faithtoactionetwork.org/wp-content/uploads/2023/05/Advancing-sexual-and-reproductive-health-and-rights-through-faith-based-approaches-a-mapping-study.pdf

¹¹ Weiderud, E. (2022). Funding the work of religious actors on gender equality—particularly SRHR—within development cooperation. International Conference on Family Planning (ICFP). https://icfp2022.org/funding-the-work-of-religious-actors-on-gender-equality-particularly-srhr-within-development-cooperation/

¹² Hess, S., et al. (2024). Faith as a complex system: engaging with the faith sector for strengthened health emergency preparedness and response. *The Lancet Global Health*, 12(10), 1074-1075

As governments increasingly decentralise, privatise, and deregulate, the burden of providing essential services, including healthcare, often falls on NGOs and FBOs. ¹³ Across the globe, FBOs have established a wide array of healthcare facilities and programmes, ranging from clinics and hospitals to community-based initiatives, aimed at providing comprehensive sexual and reproductive healthcare services. These services encompass a broad spectrum, including family planning counselling and contraceptives, maternal and child health checkups and deliveries, HIV/AIDS prevention education, testing, and treatment, and support services for survivors of gender-based violence. For example, the YWCA Kenya¹⁴ has offered both sexuality education and reproductive health services, as has Muslim Aid¹⁵, which implements programmes focused on maternal and newborn health in various countries, including Afghanistan, Bangladesh, and Pakistan, aiming to reduce maternal and child mortality rates.



FBOs are often deeply involved in education, not only through formal schooling but also through community programmes that address critical issues like SRHR, gender equality, and transforming harmful practices. It is estimated that faith-based schools educate over 60 million children worldwide. demonstrating the significant reach and influence faith actors have in the educational landscape. It is important to also emphasise that faith communities are intergenerational, and the reach is often beyond school-age children. FBOs have developed and implemented a range of comprehensive programmes, workshops, and toolkits designed to empower individuals and communities with knowledge and skills. These

education and training resources address a wide spectrum of topics, from family planning and maternal health to gender-based violence and harmful traditional practices. By equipping people with accurate information and fostering critical thinking, FBOs are helping to challenge harmful norms, promote informed decision-making, and create a more equitable and just society.

Examples from Bhutan, USA, and Argentina

For example, the collaboration between UNFPA and Buddhist organisations in Bhutan has led to the successful integration of life skills-based comprehensive sexuality education programmes into

¹³ While these actors can make significant contributions, they cannot fully replace the state's fundamental role in ensuring the well-being of its citizens. A more robust and participatory debate on democracy, rights, and public management is necessary to address these challenges.

¹⁴ https://www.ywcakenya.org/what-we-do.php?id=5

¹⁵ https://muslimaid-2022.storage.googleapis.com/upload/www.muslimaid.org/about-us/Muslim-aid-2022-Annual-Report.pdf

¹⁶ This estimate is based on data from the Global Catholic Education Report 2020, which indicates over 62 million children enrolled in Catholic schools alone in 2017 (Wodon, 2020). The figure likely represents an approximation, extrapolating to include other faith-based schools globally, as precise, up-to-date global enrollment data for all faith-based schools is challenging to obtain.

monastic institutions since 2014.¹⁷ By partnering with religious leaders, this initiative has empowered them to promote positive health behaviours. It has reached a significant number of young people, raised awareness about sexual and reproductive health and rights (SRHR), challenged taboos, and reduced stigma. As a result, participants have made more informed choices, adopted healthier behaviours, and gained better access to SRHR services. This approach ensures a sustainable impact on future generations. Other examples include Teaching for Change¹⁸, a non-profit organisation based in the USA, which focuses on creating tools and best practices for navigating sensitive conversations around gender, sexuality, and religion. It engages with methods for using the Bible in discussions on gender and sexuality, highlighting the importance of theological education in countering opposition and promoting inclusivity. Additionally, the 'Nos Contamos' project by ACT Alliance Argentina Forum (2021-2022)¹⁹ utilised feminist theologies and diverse communication platforms to challenge fundamentalist discourse and promote gender justice narratives within local churches, further demonstrating the commitment of FBOs to SRHR education.²⁰ The international Christian organisation, World Vision²¹, also conducts comprehensive sexuality education programs for adolescents in multiple countries, empowering young people to make informed decisions about their sexual and reproductive health. These examples underscore how FBOs are reaching marginalised populations with limited access to healthcare.

FBOs have particularly focused on **youth-directed and youth-led initiatives**, ensuring access to SRHR services and education for young people and integrating SRHR education into existing systems. For example, the World YWCA have utilised diverse communication platforms to reach and appeal to youths, provide education, dispel myths and misconceptions, and promote informed decision-making from a young age. They have encouraged theological education and critical reflection on gender, sexuality, and reproductive health to challenge harmful norms and behaviours.

Examples from Tanzania, Nigeria, South Sudan, Burkina Faso, and Argentina

For example, the Evangelical Lutheran Church of Tanzania's (ELCT) *Vunja Ukimya* project²² aims to improve youth access to SRHR by strengthening links between churches, health clinics, and schools. Through engagement with religious leaders and healthcare providers, ELCT challenges discriminatory norms, reduces stigma, and increases health-seeking behaviour among youth. By equipping youth with SRHR information and education, the project has fostered collaboration between healthcare providers and religious leaders, promoting open dialogue about family planning and gender-based violence. This highlights ELCT's crucial role as both a healthcare

¹⁷ https://www.unfpa.org/news/sexuality-education-among-teachings-monks-bhutan

¹⁸ https://www.teachingforchange.org/

¹⁹ https://actalliance.eu/wp-content/uploads/2024/06/Booklet_Advancing-Gender-Justice-in-Challenging-Times-FINAL-for-web.pdf

²⁰ Stories of Change: Together for Gender Justice, ACT Alliance, 2024

²¹ https://www.wvi.org/health/sexual-and-reproductive-health

²² https://elct.or.tz/index.php/social-services-women-and-children/

provider and a trusted community presence in Tanzania. Another example is the Norwegian Church Aid's CSE toolkit and supported implementation in Nigeria and South Sudan, which led to positive outcomes in 2023. It educated adolescents and fostered trust and understanding within the community by involving parents and teachers. As a result, parent-child communication improved, and there was a significant reduction in teenage pregnancies. This includes ensuring that young people have access to information and services that are tailored to their needs and delivered in a non-judgmental and supportive environment. The initiative is part of the Alliance des Leaders Religieux et Traditionnels d'Afrique



de l'Ouest²³ which promotes family planning, and reproductive health, and combats gender-based violence in 10 countries, advocating for youth-friendly services and comprehensive sexuality education. Another noteworthy example is Hora de Obrar's development of culturally relevant CSE materials in 2017 and 2023²⁰. This initiative involved collaboration with health representatives from Indigenous communities linked to the church's bilingual intercultural school in Misiones, Argentina, further highlighting the commitment of FBOs to tailor their approaches to the specific needs of the communities they serve.

Textbox 2: FBOs' use of new technology in health services and education

Faith-based organisations (FBOs) have increasingly embraced new digital technologies as a powerful tool to expand their reach, enhance healthcare services, and provide comprehensive health education. During and after the COVID-19 pandemic, there was an increased use of digital technologies, enabling faith actors to preach and support their communities remotely. Recognising the potential of digital tools to bridge gaps in healthcare delivery, particularly in underserved and remote areas, FBOs are leveraging various technologies to achieve better health outcomes and empower communities.

Telemedicine and remote consultations have emerged as a transformative approach for FBOs. Catholic Relief Services (CRS)²⁴, for instance, utilises telemedicine to provide remote consultations and training to healthcare workers in less accessible regions. World Vision²⁵ has also implemented telemedicine programmes, enabling doctors and specialists to connect with patients and healthcare providers in underserved areas. These initiatives improve access to specialised care and reduce the burden of travel for patients seeking medical consultations.

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²³ https://www.faapa.info/blog/planification-familiale-naissance-dune-alliance-de-leaders-dafrique-de-louest/

²⁴ https://www.crs.org/media-center/news-release/telehealth-new-way-provide-care

²⁵ https://www.worldvision.org/health/health-innovations

FBOs are actively developing and utilising mobile health apps and platforms to deliver health education and support services. The United Methodist Church's Global Health unit²⁶ has created mobile health apps that provide valuable resources on maternal and child health, HIV/AIDS prevention, and nutrition to communities in developing countries. Similarly, The Salvation Army employs mobile health platforms to offer health education and support services to vulnerable populations, including those experiencing homelessness and substance abuse.

In addition to service delivery, FBOs are harnessing the power of <u>online platforms</u> for education and training purposes. Islamic Relief Worldwide²⁷ utilises online platforms to train healthcare workers and community leaders on diverse health topics, encompassing SRHR, maternal and child health, and disaster preparedness. The Adventist Development and Relief Agency (ADRA) also employs online platforms to deliver health education and training programs worldwide, covering topics like hygiene, nutrition, and disease prevention.

The innovative use of technology by FBOs exemplifies their commitment to improving healthcare access and promoting health education, especially in marginalised communities. By integrating digital tools into their operations, FBOs are contributing to a more equitable and accessible healthcare landscape, empowering individuals and communities to take charge of their well-being.

Challenging Harmful Practices, Gender Norms and Countering Backlashes



Ensuring holistic and long-term impact when working on issues related to sexual and reproductive health and rights, requires an engagement with social norms. Challenging and changing social norms is one of the most difficult tasks development programmes faces. Faith actors are indispensable partners, due to their wealth of experience in shaping and changing long-standing traditions. This includes how patriarchal mindsets are manifested, in their own lived experiences as community members, as well as through their diverse roles as spiritual leaders, moral authorities, community members and human rights defenders.

Faith leaders and organisations have actively spoken out against **harmful practices** such as child and forced marriage, female genital mutilation, and gender-based

²⁶ https://www.umcmission.org/what-we-do/global-health

²⁷ https://www.islamic-relief.org/what-we-do/health/

violence. Religious teachings and principles are used to advocate for women's empowerment, health, and equal rights. For example, The #ImamsForShe initiative actively combats harmful practices that affect women and girls within Muslim contexts.²⁸ The initiative challenges harmful practices by providing Imams, Muslim leaders, and scholars with the tools and education to counter radical narratives and promote gender equality. Through community workshops, educational programs, and artistic expressions, #ImamsForShe has fostered advocacy and promoted the equality and reproductive rights of women and girls within their communities.

FBOs have supported **gender equality** and women's leadership and participation at every level, often starting with their own religious institutions, which often requires significant work to transform patriarchal structures and social norms, including, creating contextualised gender justice policies to hold their own organisation accountable. Their work for gender equality often has a ripple effect, extending into the community and influencing national, regional, and global contexts. They seek to support women and girls to become advocates for their rights through education, mentorship, and opportunities for participation in decision-making within communities and religious institutions.²⁹ Faith actors, who are often deeply embedded within local communities, possess invaluable firsthand insights into the systemic oppression prevalent in those contexts as well as within religious institutions themselves. This lived experience allows them to fully comprehend the complexities of the issues at hand, including the need for an intersectional approach, and address barriers like economic injustice, the burden of unpaid care work, inequitable land access, and the change that needs to happen internally within religious institutions. This understanding enables them to effectively tackle the root causes hindering progress in SRHR, and the wider implementation of the ICPD Programme of Action, instead of merely addressing surface-level symptoms. Only once all these multiple and intersecting barriers are addressed, women can fully participate in society and take charge of their own lives.

Examples from MENA and East Africa

The World YWCA's Young Women for Awareness, Agency, Advocacy & Accountability (YW4A) project³⁰ effectively engages faith actors in promoting gender-transformative norms and empowering young women in the Middle East and North Africa (MENA) and Africa. YW4A actively builds partnerships with progressive faith leaders and organisations to challenge harmful gender norms and advocate for policies that protect and promote the rights of women and girls. It equips young women with the skills needed to advocate for their reproductive rights. The program has been piloted in Egypt, Kenya, Palestine, and South Sudan, with encouraging results.³¹ YW4A's Rise Up! Leadership Programme in South Sudan is a prime example of their effective strategies. This programme provides young women with comprehensive leadership training, equipping them with the skills and confidence to advocate for their rights and address pressing issues such as

²⁸ https://www.unwomen.org/en/news/in-focus/in-focus-gender-equality-in-humanitarian-action/imams-for-she

²⁹ Khalaf-Elledge, N. (2021). Scoping Study: Looking Back to Look Forward. The Role of Religious Actors in Gender Equality since the Beijing Declaration. Washington DC; Joint Learning Initiative on Faith and Local Communities (JLI). ³⁰ https://yw4a.org/

³¹ https://yw4a.org/wp-content/uploads/2024/05/YW4A-2023-Annual-Narrative-Report-Activity-no.-4000004377.pdf

gender-based violence and early marriage.³¹ YW4A has demonstrated that engaging faith actors can be a powerful strategy for shifting social norms and creating a more supportive environment for young women to challenge existing power structures and realise their full potential.

Engagement strategies, for example used by the Faith to Action Network's positive masculinity programs include structured community dialogues, role-modelling by male faith leaders, and contextual reinterpretation of sacred texts. These initiatives empower men to reflect critically on societal expectations of masculinity, reject violence, and foster equitable relationships. In Kenya, South Sudan, and Egypt, local religious leaders have led community-based dialogues focused on building emotional awareness and promoting mutual respect in relationships. Conversations on topics like reproductive health are approached through faith-led interventions that connect scriptural teachings to human dignity, health, and rights. Through this culturally grounded approach, faith actors make global gender equality frameworks locally meaningful. As captured in Faith to Action Network's initiative reflections, "Men begin to see that true strength lies in compassion and shared responsibility not in control or dominance".³²



Countering backlashes has become a daily challenge for faith actors working on SRHR, recognising the pushback happening within their own faith communities. The sensitive nature of faith actors' work concerning the ICPD PoA has rendered them targets for attacks against strengthening the societal positions and human rights of women and girls. Faith actors affirming human rights are learning to navigate and strategise to counter the diverse but coordinated backlashes, which span the globe. Faith actors are uniquely positioned to counter backlashes that instrumentalize religion, an area where some secular feminist actors and Member States might face more challenges. For example, faith actors often hold

significant moral authority and have deep-rooted trust within their communities. This trust can enable them to engage in sensitive conversations about SRHR, challenge patriarchal interpretations, and promote positive change even in the face of internal opposition. By drawing upon religious texts and teachings, faith actors can reframe narratives around SRHR, address myths and misconceptions, and emphasise values like compassion, justice, and human dignity. This can foster a more supportive environment for SRHR. Their ability to frame SRHR issues within a moral and ethical framework, for example focusing on 'reproductive justice' resonates with many individuals and communities, making their messages more persuasive and acceptable.

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³² Faith to Action Network 2023 Report

Examples from Latin America and the Caribbean

For example, in 2022 and 2023, Hora de Obrar, in partnership with the Ecumenical Network of Theological Education (REET)²⁰, offered a theological course to equip religious leaders in Latin America and the Caribbean with knowledge and understanding of sexuality and comprehensive sexuality education. Another example is the Program on Gender and Religion at the Evangelical Theological Faculty (PGR-EST) in Brazil, which since 2015 has focused on reflection and action on gender and religious issues.³³ Both initiatives promote understanding, inclusivity, and concrete advocacy, empowering faith actors to challenge gender-discriminatory and reactionary narratives and create a more supportive environment for sexual and reproductive health and rights (SRHR).

Influencing Policy and Legislation

Faith actors are advocates in the public arena, often with significant influence, and have successfully changed policies and legislation related to the goals of the ICPD PoA at global, regional, and national levels.

Globally, there are several examples of faith actors driving policy change related to the goals of the ICPD POA. For example, the World Council of Churches (WCC), in its 1994 statement to the UN, advocated for a paradigm shift in the population and development discourse. It urged moving away from a narrow focus on economic growth and instead prioritising enhancement of quality of life for all. The WCC highlighted the disproportionate impact of power imbalances on marginalised groups like low-income populations, migrants, people of colour, and women, emphasising the need for social justice reforms that ensure equitable resource distribution and inclusive



decision-making. While the WCC reaffirmed its opposition to abortion as a family planning method, it acknowledged the complex realities faced by women, stating that a growing number of member churches recognize "the moral necessity" of safe and voluntary abortion in certain cases due to systemic injustices and exploitation.³⁴ Another example is the "Not in My Name" call to action by religious actors during the 2014 United Nations General Assembly. UNFPA and UNAIDS brought together over 40 leaders from various faiths, including Baha'i, Buddhist, Christian, Hindu, Jewish,

³³ Pires, J. A. (2023). Gender justice and religion: Lutheran women in Brazil. Revista de Estudos de Cultura Contemporânea, 44(1), 45-54.

³⁴ https://www.unfpa.org/sites/default/files/resource-pdf/94-09-08_Statement_of_World_Council_of_Churches.pdf

and Muslim. They urged governments to actively promote sexual and reproductive health and rights to achieve the Sustainable Development Goals. The declaration highlighted the need to address stigma, discrimination, and violence and condemned abuses that violate human rights, often justified by religion or tradition³⁵.

Regionally, faith actors sometimes find opportunities to mobilize and collaborate with intergovernmental organizations to influence policies related to the implementation of the ICPD PoA, including sexual and reproductive health and rights (SRHR). One of the strengths of faith actors in this context is their capacity to establish a presence at various levels and to build connections that span national, regional, and global frameworks. For example, faith actors played a complex role in the journey of the East Africa Community Sexual and Reproductive Health (EAC SRHR) Bill³⁶. The EAC SRHR Bill was proposed to the East Africa Legislative Assembly, seeking to enhance the well-being of East Africans by establishing a comprehensive legal framework for sexual and reproductive health and rights. It emphasised a faith-sensitive approach, recognizing the region's cultural diversity and the important role of faith communities. The bill aimed to provide age-appropriate information and services, combat harmful practices, ensure safe abortion access, promote gender equality, and protect vulnerable groups. It strived to strike a balance between meeting healthcare needs and respecting diverse cultural and religious perspectives within the East African Community.

The Act Church of Sweden's partners, the Evangelical Lutheran Church of Tanzania (ELCT), in collaboration with the Faith to Action Network, actively advocated for the EAC SRHR Bill from 2015 to 2018.³⁷ Their involvement went beyond general advocacy; they actively engaged faith communities in shaping the bill's language and provisions, contributing specific recommendations during national consultations. They also worked closely with the East African Legislative Assembly (EALA) to mediate discussions and address contentious issues within the bill¹⁶. While some faith actors supported the bill, others raised concerns about provisions related to abortion and comprehensive sexuality education. This opposition, coupled with historical mistrust between religious and secular bodies, and differing philosophical perspectives, ultimately contributed to the bill's withdrawal. Nevertheless, the active involvement of faith actors in the process fostered dialogue and highlighted the necessity of considering diverse viewpoints and engaging faith communities early on when addressing sensitive health issues like SRHR. Currently, a new EAC SRHR Bill is under consideration, aiming to address the gaps and concerns identified in the previous version. The lessons learned from the earlier process, particularly the importance of early and meaningful engagement with faith actors, are crucial for ensuring the success of this new bill.

Locally, faith-based initiatives have advocated for the decriminalisation of abortion, access to contraceptives, and the protection of women's reproductive rights. For example, in Honduras,

https://www.unfpa.org/resources/call-action-faith-sexual-and-reproductive-health-and-reproductive-rights-post-2015
 https://www.eala.org/documents/view/the-east-african-community-sexual-and-reproductive-health-bill-2021

³⁷ Munene, P., & Mukhebi, V. (2021). Faith leadership in civil society collaboration towards adoption of the EAC SRHR Bill. State of African Women Campaign. KIT Royal Tropical Institute.

Ecuménicas por el Derecho a Decidir (EDD) among others engaged religious leaders in dialogue and advocacy efforts, contributing to the recent decriminalisation of emergency contraceptives in 2023³⁸. FBOs also work with local governments to effectively implement SRHR policies and programmes, ensuring that services reach marginalised and underserved populations. They use their existing infrastructure, personnel, community trust, and cultural understanding to provide healthcare and act as referral systems, particularly in remote areas. The international family planning network FP2030 has also collaborated with local governments to mobilize faith leaders through workshops and training to become advocates for family planning and reproductive health, contributing to policy dialogues in various regions and promoting more inclusive approaches to reproductive rights.

In some countries, religious leaders and institutions have also been actively involved in attempts to restrict the implementation of the ICPD PoA, for example, restricting access to sexual and reproductive health and rights (SRHR), often citing religious beliefs as justification for these policies. For example, in Uganda, some religious leaders supported the 2021 Anti-Homosexuality Act, which criminalises same-sex sexual acts.³⁹ In The Gambia, religious leaders were involved in the 2021 amendment of the criminal code, which also criminalises same-sex sexual acts.⁴⁰

Multilateral and Interfaith Collaboration

Faith actors and FBOs play a crucial role in addressing societal challenges, offering a unique blend of religious values, community engagement, and service delivery. When they collaborate on a multisector level, their impact on achieving the ICPD POA agenda is significantly amplified, leading to innovative solutions and sustainable change.

Over the past three decades, FBOs have also formed alliances and partnerships on a **multilateral level**. This collective action empowers them to reach more people in need, foster social cohesion, unify and amplify their policy demands, and tackle systemic challenges to



address the root causes of poverty, inequality, and injustice. The future of global FBO collaboration holds immense promise. As challenges become more complex and widespread, the need for innovative and inclusive partnerships grows.

³⁸ https://somosmuchas.hn/wp-content/uploads/2020/10/Ecumenicas.pdf

³⁹ https://www.hrw.org/world-report/2021/country-chapters/uganda

⁴⁰ https://www.amnesty.org/en/location/africa/west-and-central-africa/gambia/

For example, the Joint Learning Initiative on Faith & Local Communities (JLI-FLC) brings together faith-based organisations (FBOs) with other stakeholders to address current issues in development. By combining resources, expertise, and networks, they aim to increase the impact and efficiency of their efforts. Moreover, the collaborative platform fosters the exchange of knowledge and best practices between the various participants, contributing to a more informed and effective approach to development challenges.

The International Partnership on Religion and Sustainable Development (PaRD) serves as a bridge between FBOs, governments, and development agencies to work towards achieving sustainable development goals. By harnessing the unique strengths and resources of faith communities, PaRD encourages and supports innovative solutions in various sectors, such as health, education, and environmental protection. The organisation's projects demonstrate the significant positive impact that faith-inspired initiatives can have on a global scale.

Another example is the <u>UN's Multi-faith Advisory Council (MFAC)</u> which is the advisory council to the United Nations Interagency Task Force on Religion and Sustainable Development, which fosters collaboration between UN agencies and FBOs on achieving the Sustainable Development Goals.⁴¹ It provides guidance and expertise on engaging with faith-based organisations to advance shared goals in sustainable development, human rights, and peace. Composed of diverse religious leaders and FBO representatives, the MFAC aims to deepen the UN's understanding of religion's role in these areas, foster collaboration, and promote policy that leverages the positive influence of faith communities. By focusing on key themes like the environment, migration, gender justice, and health, the MFAC helps bridge the gap between the UN and faith actors, recognizing the vital contribution of FBOs in achieving a more just and sustainable world.

Recognizing the significant role faith-based organisations (FBOs) play in communities worldwide, other <u>multilateral agencies</u> have also established dedicated initiatives for faith engagement. For example, the UNAIDS Working Group on Religion actively collaborates with FBOs on HIV prevention and support, as demonstrated by their publication "Faith and HIV: A Guide for Religious Leaders and Communities".⁴² WHO recognises the importance of faith-based health providers in delivering healthcare services. Furthermore, UNFPA provides comprehensive guidelines for engaging FBOs as agents of change, acknowledging their potential to promote sexual and reproductive health and rights.⁴³

⁴¹ United Nations. *United Nations Interagency Task Force on Religion and Sustainable Development*.

⁴² UNAIDS. (2020). *Faith and HIV: A Guide for Religious Leaders and Communities*. https://www.unaids.org/en/resources/presscentre/featurestories/2020/august/20200811_faith-and-hiv

⁴³ UNFPA. (2015). *Guidelines for Engaging Faith-Based Organizations (FBOs) as Agents of Change*. https://www.unfpa.org/resources/guidelines-engaging-faith-based-organisations-fbo-agents-change

These initiatives demonstrate a growing understanding of the importance of partnering with FBOs to address critical global challenges.

FBOs have also engaged in **interfaith dialogue** at the regional, national, and international levels with groups outside of their faith to find common ground on SRHR issues, promote shared values and achieve larger support for initiatives related to the ICPD PoA. This has led to increased cooperation and a stronger collective voice for change.

The Interfaith Partnership for Maternal and Newborn Health in Ethiopia brings together Christian and Muslim FBOs in Ethiopia to address maternal and newborn health challenges. They collaborate on community education programs, promote skilled birth attendance, and advocate for improved access to healthcare services, contributing to reduced maternal and newborn mortality rates.

<u>The Interfaith Network on HIV/AIDS in Kenya</u> unites various faith communities in Kenya to combat HIV/AIDS. They work together on prevention programs, provide support to people living with HIV, and advocate for access to treatment and care, fostering a more compassionate and inclusive response to the epidemic.

The Joint Initiative on Gender, Faith, and Traditional Practices in Senegal engages religious leaders and communities in Senegal to address harmful traditional practices, including female genital mutilation and child and forced marriage. Through interfaith dialogue and community mobilisation, they promote positive social change and seek to protect the rights of women and girls more broadly.

The Faith and Family Planning Alliance in Nigeria brings together Christian and Muslim FBOs in Nigeria to promote family planning and reproductive health. They work on community education, provide counselling services, and advocate for increased access to contraceptives, empowering individuals and couples to make informed choices about their reproductive health.

<u>The Multi-Faith Action Coalition on SRHR in India:</u> This coalition comprises various faith-based organisations in India working to advance SRHR. They collaborate on policy advocacy, community mobilisation, and service provision, addressing issues like maternal health, family planning, and HIV/AIDS prevention.

The ACT Ecumenical Forum of América del Sur (FESUR): This vital platform for interfaith dialogue and collaboration unites churches and religious organisations in pursuit of justice and community well-being. Though primarily rooted in the Christian tradition, FESUR actively engages with various social sectors to counter fundamentalism and advocate for the rights of marginalised groups. By fostering understanding and cooperation across different faiths and beliefs, FESUR exemplifies the transformative power of interfaith dialogue in promoting social justice and inclusive communities.

These examples illustrate the effectiveness of interfaith collaboration in addressing sexual and reproductive health and rights (SRHR) challenges, in line with the goals outlined in the ICPD Programme of Action. By transcending religious boundaries, FBOs leverage their collective influence and resources to address taboo subjects and social norms, as well as increase access to health services and advocate for policy change. Interfaith initiatives can encounter challenges due to diverse religious beliefs and practices, especially concerning reproductive health. Some faith communities may express reservations about contraceptives or certain maternal health practices. Furthermore, varying perspectives on abortion, sexuality education, and LGBTQI+rights exist within different faith traditions. Addressing subjects such as HIV/AIDS can also be challenging as it necessitates discussions on sexuality and sexual health, which can be contextually sensitive topics within some religious contexts. Faith actors carefully navigate interfaith coalitions ensuring inclusivity and respect for the diverse beliefs of their members. These interfaith collaborations offer a promising model for engaging with sensitive issues related to the ICPD PoA. By fostering understanding, respect, and cooperation across religious divides, FBOs contribute to more inclusive development processes.

Learnings and Recommendations

- This report has illuminated the critical role faith actors play in advancing the goals of the ICPD Programme of Action over the past three decades, especially in the often-contested area of sexual and reproductive health and rights (SRHR). Building on previous reports that highlight the crucial role of faith actors, this research further emphasises their unique contributions and the importance of their inclusion in development processes. Despite navigating a complex landscape marked by resistance, limited resources, and deeply ingrained social norms, faith actors have demonstrated an unwavering commitment to promoting the rights and well-being of all individuals.
- 2. It is crucial to acknowledge that this commitment to progress is not universal within faith communities. Resistance to the ICPD agenda, fuelled by fundamentalist interpretations and conservative ideologies, persists. However, many faith actors are actively countering these forces by leveraging their unique societal positions, moral authority and community trust to challenge harmful norms and advocate for gender equality. Isolating or excluding faith actors from development processes would only empower these oppositional voices, foster dogmatism and fundamentalism, and hinder progress towards the ICPD's goals.

- Through their deep community ties, many faith actors have emerged as trusted partners in providing essential SRHR services, particularly in underserved communities. Their contributions extend beyond service delivery to encompass comprehensive sexuality education, challenging harmful practices, and advocating for policy change at local, regional, and global levels. This report has showcased their ability to reframe narratives around SRHR, emphasising shared values of compassion, justice, and human dignity to foster a more supportive environment for progress.
- Furthermore, this report has highlighted the strategic importance of collaboration. Faith actors have increasingly engaged in multi-sector partnerships, including interfaith initiatives, to amplify their impact and address systemic challenges. By working together with governments, NGOs, and other stakeholders, they have driven meaningful progress in areas such as maternal health, family planning, and gender-based violence prevention.
- However, challenges persist. Limited resources, funding biases, and opposition from conservative groups continue to hinder the full potential of faith actors who are defending human rights and providing critical sexual and reproductive health services. To overcome these obstacles, it is imperative to recognise and support faith actors as equal partners in development. This includes providing adequate funding, strengthening their capacity, and fostering inclusive policy environments that value their unique contributions.
- Moving forward, the continued engagement, collaboration, and innovation of faith actors who champion SRHR remain essential to achieve universal access to sexual and reproductive health and rights, and gender equality. Faith actors must be supported as equal partners in development and adequate funding must reflect the significant impact, they have in advancing SRHR and empowering women. By prioritising collaboration with FBOs who demonstrate leadership in SRHR, development policymakers can ensure more effective and sustainable progress towards a world where the rights and well-being of all individuals are upheld and the promise of the ICPD PoA is fulfilled.

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