



July 7-9, 2015 | Washington, DC

RELIGION & SUSTAINABLE DEVELOPMENT

Building Partnerships to End Extreme Poverty

Conference Proceedings



JOINT LEARNING INITIATIVE on FAITH & LOCAL COMMUNITIES



McKinsey & Company

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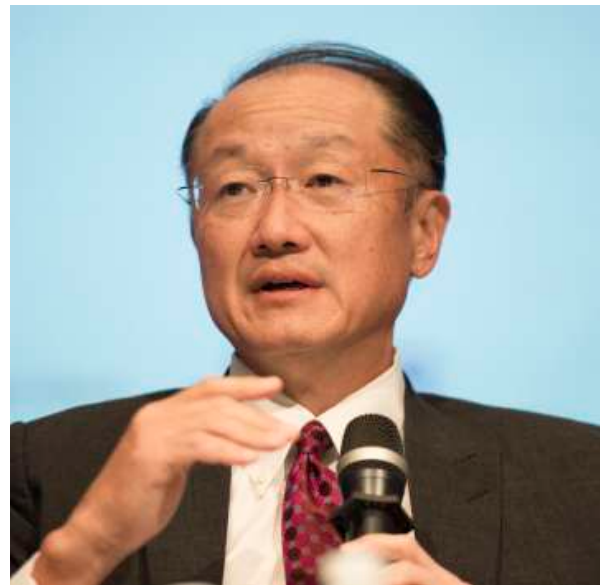
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“Faith-based organizations and religious communities are often doing the essential work on the frontlines of combatting extreme poverty, protecting the vulnerable, delivering essential services and alleviating suffering. We are looking to expand the World Bank Group’s partnerships with faith inspired organizations toward reaching our shared goal to end extreme poverty within a generation.”

JIM YONG KIM
President, World Bank Group



“Faith-based groups are oriented to the people, and development requires a people-centered approach.”

“We cannot change things with money alone. If this was the case, it would be easy to find solutions for the global challenges. Sustainability needs a transformation of politics and mind-sets.”

THOMAS SILBERHORN
Parliamentary State Secretary, Federal Minister for Economic Cooperation and Development, BMZ

The Sustainable Development Goals “call for a stepping up of what we do, how we partner with each other and our work to understand what is actually making a difference. It’s the goals and institutions and leaders on the ground that will ultimately make the difference. One of the things that we know is faith groups around the world are the providers, often the inspiration, the organization, indeed the capitalization of that which is necessary to accomplish these goals.”

ALEX THIER
Assistant to the Administrator, Bureau for Policy, Planning and Learning, USAID



EXECUTIVE SUMMARY

KEY FINDINGS

1. The question is no longer whether religion matters for development. There is compelling evidence that faith-based and religious organizations contribute added value in the field of development—especially in health, education, and disaster relief. The question now is: how to systematically include the potentials of religious organizations for development, and according to what principles and criteria?
2. As a basis for effective partnership for development, religious literacy for development actors and development literacy for faith-based actors should be increased. It is the responsibility of each donor to identify strategies for raising religious literacy, and to start with implementing measures according to their specific contexts. Faith-based and religious organizations wishing to partner in development activities have the responsibility to understand and contribute to development priorities, and to meet to common standards of accountability, transparency and impact monitoring.
3. To facilitate the full and sustainable engagement of the potentials of religion in development, institutional coordinating mechanisms amongst like-minded bilateral and multilateral donors, and among religious actors are required. Preliminary evidence for effective cross-sector collaboration is available, and mechanisms and methodologies can be adapted to scale up partnership between public sector and religious and faith-based organizations. Ongoing work to expand and disseminate the evidence base for religion in development is essential.
4. There is consensus that a “Do-no-harm-approach” regarding religion is not sufficient. The wisdom of religion has to be considered to ensure that sustainable development is broadly based on shared universal values that contribute to equality, peace and freedom. The discourse on religion and development can play an important role in developing a more value-oriented development policy, a culture of cooperation and a more equitable way of living for all.

On July 7-9, 2015, 140 international development policy makers, academics, and leaders of religious and faith-based organizations assembled in Washington, D.C. for the conference, Religion & Sustainable Development: Building Partnerships to End Extreme Poverty. Conference participants came together to discuss the latest evidence on effective partnerships between public sector and religious and faith-based organizations and to develop actionable recommendations to strengthen collaboration.

After welcoming remarks from conference co-hosts, the conference opened with the launch of the landmark **LANCET SERIES ON FAITH-BASED HEALTH-CARE**, the first Series by this medical journal documenting the contributions of faith to healthcare. Presentations by lead authors in the *Lancet* Series spoke to the available evidence for faith contributions, the controversies in faith and healthcare, and the opportunities and need for greater collaboration with the public sector and faith groups.

The second day of the conference began with a call to action from high-level **PUBLIC SECTOR LEADERSHIP** to develop more effective, evidence-based partnerships between the public and faith sectors. Public sector panelists underscored the necessity of engaging with religious communities in order to end extreme poverty and achieve the upcoming Sustainable Development Goals.

Honing in on concrete policy challenges and opportunities, the report **BUILDING MORE EFFECTIVE PARTNERSHIPS BETWEEN THE PUBLIC SECTOR AND FAITH GROUPS**, produced by McKinsey & Company and commissioned by the Joint Learning Initiative on Faith & Local Communities, presented a practical, four-part framework for strengthening collaboration. The report, based on the results of 40 interviews with policy makers and leaders of faith-based organizations, guided the design of the conference and helped frame discussions on recommendations for strengthening partnerships.

In response to the policy perspectives of the morning, the **RELIGIOUS AND FAITH-BASED COMMUNITIES PERSPECTIVES** session focused on the moral imperative to reduce human suffering and the distinctive assets of religious communities to development. Religion's unique power to transform mindsets and behavior, build relationships, and ensure accountability were brought to center stage. The panelists also highlighted potential areas of growth: development of a faith-inspired approach to evidence, increasing engagement with faith communities at the local level, and strengthening operational capacity of faith-based organizations.

The eleven representatives of the **MULTILATERAL AND BILATERAL PERSPECTIVES** panel showcased pioneering examples of partnerships, addressed challenges encountered in collaboration, and commented on changes desired within their agencies. Obstacles cited to systematic public sector engagement with religious groups included structural and functional mismatches, dissimilar approaches to data, evidence and measurement, ignorance and prejudice against religious assets, and lack of representation of religious perspectives in program and policy design.

Working sessions on **HEALTH SYSTEMS STRENGTHENING, EBOLA & HIV, SEXUAL &**

GENDER-BASED VIOLENCE, HUMANITARIAN ASSISTANCE & DISASTER RELIEF, and LARGE SCALE ENGAGEMENT OF RELIGIOUS & FAITH-BASED GROUPS FOR DEVELOPMENT presented broad overviews of evidence, specific case studies of partnerships, and framings, challenges, and summaries by policy makers. At the heart of each session were small group discussions aimed at producing session-specific actionable recommendations.

The panel on **RELIGION & POLITICS** explored the legal and political tensions of engaging with religious groups, including combating violent extremism, promotion of religious freedom, prevention of harmful practices among differing viewpoints and values, consequences of unbalanced engagement with diverse religious actors, and cautions against instrumentalization.

The conference concluded with a working session that generated cross-cutting actionable recommendations across four broad categories: **1)** Understanding the distinctive contributions of religious actors to development, **2)** Building upon a foundation of mutual learning and respect, **3)** Strengthening structural mechanisms for intra-faith and cross-sector partnerships, and **4)** Strengthening the evidence base.



Religion & Sustainable Development Conference Participants

PREFACE

The Conference on Religion & Sustainable Development: Building Partnerships to End Extreme Poverty was convened on July 7–9, 2015 in Washington, DC. The conference was co-hosted by the World Bank Group, the German Federal Ministry for Economic Cooperation and Development (implemented by Deutsche Gesellschaft für Internationale Zusammenarbeit), the United States Agency for International Development, the United Kingdom Department for International Development, GHR Foundation, World Vision, and the Joint Learning Initiative on Faith & Local Communities.

The conference was co-sponsored by the Catholic Medical Mission Board, Catholic Relief Services, Islamic Relief USA, Tearfund, and American Jewish World Service. IMA World Health and McKinsey & Company provided substantial in-kind services to the conference.

The conference was organized and managed by the [Joint Learning Initiative on Faith & Local Communities \(JLIF&LC\)](#)¹ in close collaboration with the World Bank Group's Faith Initiative, and with guidance from a Conference Planning Committee. The JLIF&LC Steering Committee and Learning Hub Co-Chairs provided the expertise for the evidence base for the conference, as well as the leadership for each of the working sessions. McKinsey & Company assisted with the design of the conference.

The conference brought together [140 international development policy makers, leaders of religious and faith-based organizations, and scholars](#)² to discuss ways to increase collaboration between public sector and religious and faith-based organizations, and to frame actionable recommendations for strengthening partnerships. The conference aimed to expand the conversation from *'whether'* public sector and religious and faith-based groups can effectively collaborate to *'how'*.

THE GOALS OF THE CONFERENCE WERE TO:

- Connect frontline policy makers to knowledge, experience, research methods, and expert relationships
- Develop specific recommendations for action

to strengthen effective partnerships between religious and faith-based groups and the public sector

- Obtain leadership commitments to follow-on activities and discuss specific next steps

ONLINE INFORMATION PLATFORM

All speakers at the conference were asked to submit resources and collateral material to the [Online Information Platform](#)³ in support of their very brief presentations. These additional, in-depth resources available online expand upon the summary remarks presented at the conference. This report of the Conference Proceedings contains links to the [Online Information Platform](#)³. Conference materials including the [program](#)⁴, [participant directory](#)⁵, [media, photos and videos](#)⁶ can be found on the online site.

PRE-CONFERENCE SURVEY

Ahead of the conference, a survey on [Building more effective partnerships between the public sector and faith groups](#)⁷ was commissioned by the Joint Learning Initiative on Faith & Local Communities and produced by McKinsey & Company in order to understand the opportunities and challenges in building partnerships between the public and faith sectors.

Drawing on the insights from 40 interviews with senior development policy makers and leaders of faith-based organizations, the report recommended a four-part framework to building effective partnerships: (1) framing the case, (2) building on a common foundation, (3) overcoming complexity, and (4) strengthening the evidence base.

The framework was presented at the start of the conference in order to help structure ideas around actionable recommendations.

BIOGRAPHIES

Biographies of all conference attendees are available [online](#)⁵.

BUILDING MORE EFFECTIVE PARTNERSHIPS BETWEEN THE PUBLIC SECTOR AND FAITH GROUPS FRAMEWORK

FRAMING THE CASE

In order to form effective partnerships with faith-based organizations (FBOs), it is necessary to determine when it is most effective to partner. When there is a need to deliver services through local networks and/or a behavioral change is required, partnerships with FBOs are indispensable. The report includes a decision tree to help identify when a faith-based partnership will be most valuable. The report emphasizes the need to develop a common framework and methodology to determine when to form partnerships.

BUILDING UPON A COMMON FOUNDATION

An important element in establishing sustainable partnerships and effective cooperation is building on a common foundation of beliefs and values. Learning more about each other's unique systems of beliefs and values will allow FBOs and the public sector to develop mutual understanding and respect for one another. Even when there is no apparent overlap, "clear articulation of values will enable FBOs, faith groups, and other development organizations to identify a common ground, or at least some mutual benefit, which can then form the basis for developing partnerships." By understanding the morals that drive the operations of each respective organization, there is room for more effective dialogue in future partnership ventures. While FBOs should become aware of the procedures of development organizations, the public sector should also become more faith literate. This provides opportunities for the exchange and adoption of the most effective methods in development work.

OVERCOMING COMPLEXITY

To effectively partner with FBOs, several challenges need to be addressed. Due to the fragmented landscape of many FBOs, forging sustainable partnerships is often a challenge. Although this fragmented structure allows a unique reach into the most vulnerable of populations, it can be a major obstacle to forming effective partnerships. To overcome these complexities, the report suggests mapping the existing networks of FBOs and forming interfaith councils to help communicate with the public sector.

STRENGTHENING THE EVIDENCE BASE

The final element to creating effective partnerships is to gather evidence on both the successes and failures of existing partnerships between FBOs and the public sector. The report concluded that we need to monitor the impact of these partnerships, and in order to do so, we need to develop high quality, standardized and specific measurements and improve the dissemination of this evidence.

Adapted from the "Building More Effective Partnerships between the Public Sector and Faith Groups" report.
Full report available online [here](#)⁷.

RECOMMENDATIONS FOR ACTION:

Strengthening partnerships between public sector and religious and faith-based groups

DEVELOPMENT OF RECOMMENDATIONS

Conference participants were tasked with generating session-specific recommendations in five thematic working sessions: Health Systems Strengthening, Ebola & HIV, Sexual & Gender-based Violence, Humanitarian Assistance & Disaster Relief, and Large Scale Engagement of Religious & Faith-based Groups for Development. Each working session followed a similar process designed to stimulate the generation of actionable recommendations: opening and closing framings by policy makers, overview of evidence, case study presentations with brief commentary from pre-selected experts, and facilitated small working group discussions followed by report out of recommendations.

Conference participants were pre-arranged into groups of 10 during each of the thematic working sessions. Each group contained a mix of policy makers, public sector leaders, and academics. The aim was to have diverse groups of participants of different religions, genders, and nationalities. During each of the working sessions, participants were allotted discussion time to formulate one to two recommendations for building effective partnerships in each specific thematic area. Volunteer facilitators led the group discussion and captured the recommendations using note-taking templates. At the end of the session, each small group reported out their principle recommendations to the broader group. All small group recommendations resulting from the working sessions were collected at the end of the session.

In the Closing Session of the conference, conference participants were asked to reflect in small groups on the previous sessions and aforementioned recommendations. Following a moderated discussion among all participants, small groups then produced general recommendations for building more effective partnerships between public sector and religious and faith-based groups.

ANALYSIS OF RECOMMENDATIONS

After the conference, all conference sessions and recommendations from working sessions were analyzed to produce session-specific recommendations and general, cross-cutting recommendations.

To produce the Session-specific Recommendations, all recommendations produced from the session's small groups were analyzing for repeated themes. Session leaders were also asked to review the recommendations produced from their sessions. The resulting Session-specific Recommendations are located at the end of each working session section in the Conference Proceedings. A full list of small group recommendations resulting from the working sessions is available online.

Cross-cutting recommendations were produced from the recommendations generated from the Closing Session reflection. These closing recommendations were further built upon by reviewing each working session's recommendations and analyzing for repeated themes across working sessions. Finally, repeated themes and recommendations were extracted from the conference panel sessions: Public Sector Leadership, Religious & Faith Communities Perspectives, Multilateral & Bilateral Perspectives, and Religion & Politics.

SUMMARY OF RECOMMENDATIONS

Below we summarize recommendations, and quote several verbatim, which cut across thematic areas. The resulting Session-specific Recommendations are located at the end of each working session section in the Conference Proceedings.

I. FRAME THE CASE: UNDERSTAND AND COMMUNICATE THE DISTINCTIVE CONTRIBUTIONS OF FBOS IN DEVELOPMENT

- Public sector should be informed about and recognize the added value and distinctive assets of the religious community.
- Public sector should not seek to secularize religious communities or instrumentalize religious communities for their own objectives.
- Religious communities should clearly articulate and proactively communicate their distinctive assets and added value to public development organizations. Religious organizations can help secular agencies to comprehend their mission by being explicit about their beliefs, values, and work.
- Both public and religious sectors should understand the history of religious communities' contributions to the MDGs, and build off the lessons learned to communicate how religious communities can most fully contribute to the achievement of the SDGs.
 - “At the Religion & Sustainable Development Conference, we have received a synopsis of how faith-based organizations contributed to the MDGs. The synopsis should answer the how, the what, and the why in order to present the case for their continuing contribution to the SDGs.”
- Religious groups should actively seek out opportunities to engage in activities that they are uniquely suited, and public sector entities should support the religious communities' partnership in those areas.
 - Religious communities are uniquely suited to advocate against corruption in the public sector.
 - Religious communities should hold their governments to account for the provision of health and other social services.
 - Public sector should recognize the powerful role religious communities can play in providing psychosocial services for mental and social health, and expand the religious communities' capacity to provide these resources.

II. BUILD ON A FOUNDATION OF MUTUAL LEARNING AND RESPECT

- Effective partnership must be grounded in mutuality and reciprocity. Leaders of faith groups and public officials should approach partnership as equals, aware of the assets and contributions on both sides.
- We must challenge prejudices about others' beliefs and values, especially those that may be perceived as obstacles to partnership.
- Secular and religious groups should be open and explicit about their own values in order to identify common ground for partnership. Even when there is no apparent overlap, taking account of faith context can be beneficial, providing partners will explicitly agree how they will act.
- Encourage “faith literacy” among public sector groups. FBOs should increase “development literacy,” understanding the needs, constraints, operations and perspectives of public sector entities.
 - “We could set up an international academy for faith leaders and faith actors on interreligious ethics for sustainable development, and we could open up part of the academic period for non-religious developmental actors to partake.”

- Conduct context analysis of the religious landscape—traditions, actors, institutions—that can provide basic knowledge for who to approach and how to form questions for working with communities and existing networks, and how to best deliver messages in development work (e.g., a directory of faith organizations/resources at the local level).

III. STRENGTHEN STRUCTURAL MECHANISMS FOR INTRA-FAITH AND CROSS SECTOR PARTNERSHIPS

INTRA-FAITH:

- As a foundation for effective partnership with public sector leadership, it is recommended that interfaith/inter-religious councils be strengthened to improve coordination, build relationships and increase local advocacy. Strong representative councils should include non-aligned or networked religious groups (such as indigenous and traditional ones e.g. African Instituted Churches) and representatives of all key local religious groups, and should counter Christian bias.
- Faith-based organizations can be more proactive in presenting to government entities their capacities and interest in collaboration, and in seeking adequate representation in national planning processes.
- Ahead of the SDGs, convene to advise national development networks of private, public, and civil society actors on how to best map, approach, and engage with faith-based actors at the national level.
- Faith-based organizations should build their own capacity to partner with public sector entities.
- Faith groups can better leverage their privately raised financial resources as a basis for effective partnership.

CROSS-SECTOR:

- Create regional or in-country cross-sector platforms of government, FBOs, and other local players for coordination of data-driven dialogue. Topics could include health financing, impact measurement, principles for effective activity, research on existing models of interfaith group engagement. The platform should agree upon a coordinated set of priorities.
- Faith communities should be involved from the beginning of program and policy creation and implementation. Umbrella associations or networks may help in facilitating coordination between public sector and religious leaders.
- Faith organizations should approach partnerships with public sector bodies as co-investors.
- Replicate and adapt dialogue at a country level and link to the realization of the SDGs to encourage deeper buy-in from country governments who will be crucial for successful implementation of SDGs.
- Multilaterals and bilaterals should commit to finding ways to engage more systematically with FBOs at both the local and global level, and not only when it is easy or convenient.
- Multilaterals and bilaterals should help to promote capacity of local FBOs to work with the public sector (negotiating contracts, navigating procurement policies, financial management).
- Public sector should develop contracting standards suitable for local faith communities.

IV. STRENGTHEN THE EVIDENCE BASE

- Compile for each stakeholder a guide as to why, how, and what evidence needs to be developed, and summarizing what exists already. “We need a clear stakeholder analysis of the different evidence needs of different partners.”
- Develop and propose a theoretical framework with clear definitions of religious activity and contributions in public health, and build capacity to assemble and disseminate evidence about that.
- Gather, analyze and disseminate different kinds of evidence and human stories from all faith organizations that is also acceptable to bilateral and multilateral funders, to systematically showcase qualitative impact and build evidence base; develop a library of high quality standardized case studies.
- Develop faith-inspired measurement and metrics, and a faith-inspired understanding of evidence. Develop indicators for transformation or hope generation, and measure them in numerical terms. These should be configured in a way to tease out the distinctive contribution of faith-based groups.
- Ensure a comprehensive directory of faith resources exists in each community and is kept updated in case of crisis. Directories should be developed in consultation with the faith community, and include faith based health and other service delivery, congregational networks and their religious leaders, and faith based NGOs
- Document faith-based financing for development.
- Document and learn from prior crises and events - e.g., HIV/AIDS.
- Develop tools to measure effectiveness and success of cross-sector partnerships.
- Learn more about impact of inter-religious collaboration on development challenges to serve as model for bilateral agencies to use.



Jill Olivier, University of Cape Town

DAY 1

July 7th, 2015

- OPENING SESSION & CO-HOST REMARKS
- *THE LANCET* SERIES LAUNCH
- PAPER PRESENTATIONS
- CLOSING REMARKS

OPENING SESSION & CO-HOST REMARKS

THE CO-HOST PANEL INCLUDED:

- **Matthew Frost**, Chief Executive Office, Tearfund and Co-Chair, JLIF&LC
- **J. Mark Brinkmoeller**, Director, Center on Faith-Based and Community Initiatives, USAID
- **Charles Owubah**, Partnership Leader, World Vision International
- **Azza Karam**, Senior Advisor, UNFPA
- **Andreas Hipple**, Senior Program Advisor, GHR Foundation
- **Philip Stevens**, Adviser to the UK Executive Director, World Bank Group and DFID
- **Martin Mauthe-Kaeter**, Deputy Head of Policy Division, German Federal Ministry for Economic Cooperation and Development
- **Adam Taylor**, Lead, Faith-Based Initiatives, World Bank Group

The conference opened up with a panel from the co-hosts of the event, followed by a session with The Lancet Series authors.

ADAM TAYLOR began by highlighting the World Bank's commitment to forming effective partnerships with faith-based organizations.

“We have a commitment to increase dialogue and operational collaboration and to strengthen the evidence base around the role of FBOs in producing development outcomes.” This conference gives us a reason to fulfill [all these three goals at once](#)⁸.

“The pendulum has shifted significantly across

institutions, and it's becoming the norm rather than the exception to want to engage with faith-based institutions,” he said. “We're in the process of developing a resource guide with case studies to help the Bank develop more faith-sensitive lens in working in development. We have to keep our sights on shared values and the shared commitment of ending extreme poverty by 2030.”

“The timing of this conference is very fortuitous in part because of the *Lancet* Series that is about to be launched” but also because of the discussions surrounding the SDGs. “The success of the SDGs hinges in part on how we find more innovative and creative partnerships across sectors.”

MARTIN MAUTHE-KAETER echoed Taylor's remarks saying that unless we make religious leaders and the faith community part of a global partnership, the new SDG agenda will not be successful.

“These goals can't be achieved by governments alone, so we need these actors who have an influence on people's values, minds, and behaviors. It has to be religious leaders and the faith community.”

“In Germany, we're interested in how we can incorporate this into development strategies. Wherever we can achieve more, we should cooperate. And wherever religion is part of the problem, it also has to be part of the solution. We're not only sending a signal that religion matters, but here we should also ask *how* does religion matter, and how does it matter effectively. We must find concrete approaches for how we can incorporate religion and development.”



Sally Smith, UNAIDS and Chris Beyrer, Johns Hopkins University, The International AIDS Society

PHILIP STEVENS drew attention to his organization’s [Faith Partnership Principles Paper](#)⁹, which set out the principles that guide DFID’s relationship with faith groups. “DFID recognizes the critical role faith groups play in ending extreme poverty.” He continued by stating that these groups bring different values and beliefs to the table, have a greater level of trust and legitimacy in the eyes of many citizens, and they can reach marginalized people that are often untouched by secular institutions. He closed in saying that he was looking forward to “gritty and actionable recommendations.”

ANDREAS HIPPLE said GHR Foundation is looking forward to connecting with new partners to find creative solutions for greater impact. “The case for the role of religion in sustainable development has largely been made; now we are looking for new ways to scale up, bring action-oriented approaches and make connections between the development, security and peacebuilding sectors.”

AZZA KARAM highlighted the fact that the work of development has always been done by religious communities. “The idea of partnership between religious and secular is one of oldest in world, and there are incredible leaders out there, male and female, from secular and religious institutions, who have been addressing these issues for a long time, especially women in their respective organizations.” She also recognized the need to bear in mind the role that non-Western actors have to contribute in the formation

of these partnerships. She concluded her remarks by stating tackling gender issues is necessary in this work because it is the litmus test by which a genuine commitment to change dominant developmental paradigms – by both secular and faith-based actors – will be demonstrated.

CHARLES OWUBAH of World Vision gave an example of Imams working collaboratively with development agencies in a family planning program. He stated there is a significant value in including faith leaders in development programming. The challenge is that we need to use proper methodologies to capture the success stories from working with faith leaders. “If it is true that 95% of people living in the world’s poorest countries claim faith is important in their lives, then there is no question that faith should be part of development.”

J. MARK BRINKMOELLER highlighted USAID’s newly [minted mission statement](#)¹⁰:

“We partner to end extreme poverty and promote resilient, democratic societies while advancing our security and prosperity.”

He noted that the conference was, at its core, about partnering, and that partnering with faith communities is crucial in eradicating poverty. “The government can be hyper-transactional, and the religious community can be hyper-relational. I hope [together we can build new partnerships](#)¹¹ to bring conflicts and challenges to successful conclusions.”



Co-Host Panel: (left to right, Martin Mauthe-Kaeter, Philip Stevens, Andreas Hipple, Azza Karam)

THE LANCET SERIES LAUNCH

THE CO-HOST PANEL INCLUDED:

- **William Summerskill**, Senior Executive Editor, The Lancet
- **Chris Beyrer**, Professor of Epidemiology, International Health, and Health, Behavior, and Society, Johns Hopkins University, President, The International AIDS Society
- **Edward Mills**, Founding Partner, Global Evaluative Sciences

On July 7, The *Lancet* published a Series on Faith-based Health-care consisting of papers that examine the potential of faith-based organizations to improve health outcomes. The *Lancet* Series, supported by Capital for Good, combines evidence, insights, and experiences of authors from several countries and denominations, academic institutions, and non-governmental organizations. The three key papers focus on the magnitude of faith-based health care in Africa, controversies associated with faith-based care, and recommended steps to forge stronger partnerships between public sector and faith groups for improved health outcomes. Faith-based organizations deliver a substantial volume of health care and their common visions of stewardship, inclusiveness, and justice make many such organizations ideal partners for delivering the sustainable development goals.

The opening remarks were provided by **WILLIAM**

SUMMERSKILL, CHRIS BEYRER and **EDWARD MILLS**.

“The *Lancet* series has initiated a dialogue about faith-inspired initiatives based on respect that brings scientific analysis to areas of shared passion in order to improve health, which is a key determinant of sustainable development,” **WILLIAM SUMMERSKILL** explained.

EDWARD MILLS said he was stunned by the lack of profile for religious actors in medical journals. “This represents the first series on this topic in a medical journal, and it’s no surprise The *Lancet* be the journal to do so.”

CHRIS BEYRER laid out the articles, stating, “These papers help us open the field, and that’s what you want a scientific series to do: raise methodological, scientific, spiritual, human questions about the future of global health.”



William Summerskill, The Lancet

PAPER PRESENTATIONS

PAPER: “Understanding the roles of faith-based health-care providers in Africa: review of the evidence with a focus on magnitude, reach, cost, and satisfaction”

SUMMARY: At a time when many countries might not achieve the health targets of the Millennium Development Goals and the post-2015 agenda for sustainable development is being negotiated, the contribution of faith-based health-care providers is potentially crucial. For better partnership to be achieved and for health systems to be strengthened by the alignment of faith-based health-providers with national systems and priorities, improved information is needed at all levels. Comparisons of basic factors (such as magnitude, reach to poor people, cost to patients, modes of financing, and satisfaction of patients with the services received) within faith-based health-providers and national systems show some differences. As the first report in the Series on faith-based healthcare, the authors review a broad body of published work and introduce some empirical evidence on the role of faith-based health-care providers, with a focus on Christian faith-based health providers in sub-Saharan Africa (on which the most detailed documentation has been gathered). The restricted and diverse evidence reported supports the idea that faith-based health providers continue to play a part in health provision, especially in fragile health systems. Paper [available here](#)¹².

THE PAPER WAS PRESENTED BY:

- **Jill Olivier**, Senior Lecturer and Research Coordinator, University of Cape Town, Health Policy and Systems Division
- **Katherine Marshall**, Professor of the Practice of Development and Religion, Georgetown University, and Executive Director, World Faiths Development Dialogue

JILL OLIVIER said, “the issue of evidence can be very controversial¹³. What the paper tries to do is draw together a variety of the best evidence that we can get our hands on regarding biomedical faith-based health providers in Africa.”

The paper looked at the market share statistics of faith-based networks including the number of facilities and number of hospital beds, but tried to look beyond those figures and understand other important comparative differences.

The main argument of the paper is to say that while market share is important, it would be more useful to know if they were providing access to quality care for the rural poor. So they examined data on access, utilization, cost and satisfaction of these services for the rural poor.



Caterina Bain, Centro Regional Ecueménico de Asesoría y Servicio – CREAS

The data suggests that:

- Faith-based health providers (FBHPs) have a lower market share than commonly assumed, but higher levels of satisfaction than in public facilities.
- Faith-based health providers play an important part in many countries in Africa, particularly in fragile or weakened health systems.

The paper noted that there were some controversies associated with some FBHPs particularly noting the lack of adaptability to health systems conditions such as financial control and accountability. However, it is key to remember that all broad generalizations about faith-

based organizations or the FBHPs should be avoided.

The paper concludes by stressing that there is a need for evidence on health systems and more detailed policy implementation strategies for improved PPP/engagement with FBHPs.

Following Olivier's presentation, **KATHERINE MARSHALL** led an extensive discussion on the paper. She asked Olivier where she would like to see future research.

“We have very little idea about Central and South America, where we know these systems exist, but don't know much else about them.” She also noted the need for more evidence on Islamic healthcare organizations, as well as traditional healing systems.

PAPER: “Controversies in Faith and Health”

SUMMARY: Differences in religious faith-based controversies on the sanctity of human life, acceptable behavior, health-care technologies and health-care services contribute to the widespread variations in health care worldwide. Faith-linked controversies include family planning, child protection (especially child marriage, female genital mutilation, and immunization), stigma and harm reduction, violence against women, sexual and reproductive health and HIV, gender, end-of-life issues, and faith activities including prayer. Buddhism, Christianity, Hinduism, Islam, Judaism, and traditional beliefs have similarities and differences in their viewpoints. Improved understanding by health-care providers of the heterogeneity of viewpoints, both within and between faiths, and their effect on health care is important for clinical medicine, public-health programs, and health-care policy. Increased appreciation in faith leaders of the effect of their teachings on health care is also crucial. Paper available [here](#)¹⁴.

THE PAPER WAS PRESENTED BY:

- **Andrew Tomkins**, Professor of International Child Health, Institute for Global Health, University College, London, UK
- **Shreelata Rao Seshadri**, Professor, Azim Premji University, India

ANDREW TOMKINS framed the discussion of controversies with [three key questions](#)¹⁵:

1. What is the role of faith in relation to health damaging behavior and provision and use of health care services?

The paper outlines the following for health damaging behaviors: child marriage, female genital mutilation, violence against women, and opposition to immunization. Faith has a role in influencing the provision and use of health care services, including sexual and reproductive health, HIV/AIDS, and end of life issues.

2. What examples of “good practice” by faith-based health care organizations already exist?

The paper discusses case studies in which faith leaders are promoting elimination of health damaging behaviors, including a study on child marriage and the reduction of its prevalence in Yemen. The paper also includes case studies that demonstrate the major role that faith leaders play in the provision of health care including HIV programs in India.

3. How can faith leaders and health leaders work together more effectively with the viewpoint of reaching the hard to reach?

There are many good examples of faith-based health care organizations working effectively with local government departments, but in the higher levels of government, the relationships are not as close. A lot of health policy makers tend to remain in their secular silos.

Tomkins said his vision is to turn controversies into compassionate, professional, faith-sensitive concerted action, especially for the hard to reach. “We tend to live in secular silos,” he said. “The vision for the future



Andrew Tomkins, Institute for Global Health, University College, London, UK

is different. There will be more interaction between faith and health care policy leaders. We would like to see faith leaders becoming more health active, and health leaders becoming more faith active.” They can work collaboratively on national programs. Finally, he calls for research on the effect that faith groups have on policies, programming, and impact.

The paper discussed the following actions to forge effective partnerships:

- Faith leaders can draw on sacred texts to support health promoting behavior and increase provision and uptake of healthcare.
- Governments can incorporate faith-based programs.
- Donors can share their experience with working with faith groups in health care. They can become less nervous about expressing enthusiasm about working with faith groups.

SHREELATA RAO SESHADRI led a discussion on the paper.

1. Which issues were most contentious during the writing of the paper?

“The issues about immunization were rather interesting. The different viewpoints that certain faith groups have about immunization ranged from use of fetal cells, contamination with contraceptives, to the right of a mother to decide whether she is not trusting God by vaccinating. These are very complex issues confounded by political, social, cultural, legal, and unfortunately, extremist ideological viewpoints,” said Tomkins.

“Another difficulty was family planning. Different faith groups have different perceptions as to when life starts; this affects the type of family planning methods that are acceptable.” Some governments and secular groups regard faith-based groups as just nuisances, claiming that they oppose family planning programs. However, there are many studies, such as in Malawi, showing that women of different faiths make a clear decision as to when to have a baby, using a variety of family planning methods.

2. What do faith communities bring to the value base of human equality?

“Faith groups bring a compassion about the state of people who are poor, unreached, unvaccinated, and unprovided for. We see faith groups as being advocates as much as providers. That’s the added value of faith groups. Because of their compassion they have a mechanism to cope with inequity,” said Tomkins.

3. Can you speak more about the controversies associated with the HIV/AIDS epidemic?

When HIV/AIDS first became an epidemic, there was a lot of judgment by faith groups which caused stigma. Nowadays, these same faith groups focus on a different part of their theology. “It’s interesting to see them move to a new position, one of love over judgment,” said Tomkins. We can look at faith groups as groups that have enormous potential. They can move toward new ways of thinking and implementing their work in even better ways in the future, providing healthcare with support from secular organizations and governments.



Shreelata Rao Seshadri, Azim Premji University, India

PAPER: “Towards stronger partnerships between public sector and faith groups for improved health”

SUMMARY: The sharpening focus on global health and the growing recognition of the capacities and scope of faith-based groups for improving community health outcomes suggest an intentional and systematic approach to forging strong, sustained partnerships between public sector agencies and faith-based organizations. Drawing from both development and faith perspectives, this paper examines trends that could ground powerful, more sustainable partnerships and identifies new opportunities for collaboration based on respective strengths and existing models. Paper available [here](#)¹⁶.

THE PAPER WAS PRESENTED BY:

- **Jean Duff**, Coordinator JLIF&LC, and President, Partnership for Faith & Development
- **Warren Buckingham III**, Founder & Principal Buckingham Global Health, LLC

JEAN DUFF stressed that the time is right for stepping up engagement, as there is new emphasis on local leadership for development.

“Public sector bodies are moving from whether to engage with the faith community to how to engage,” she said, citing World Bank President Jim Yong Kim and Pope Francis working together on a preferential option for the poor, and the new German government program “Values, Religion and Development.”

The paper gives [examples](#)¹⁷ of long standing partnerships and successful co-funding projects, specifically on malaria work in Nigeria and Mozambique, immunization efforts in Sierra Leone and breastfeeding and immunization in DRC.

WARREN BUCKINGHAM III outlined the paper’s recommendations:

1. Measure and communicate

- For sustained momentum for true partnership, critical instruments (surveys and assessments) must measure contributions by faith-based providers.

2. Appreciate respective goals, capacities, and differences

- Global standards for effective engagement need to be adapted at the local level. Those standards need to become established norms which all parties follow on a consistent basis.

- “Faith groups and partners must be mindful of both the positive impact and negative influence beliefs could have on women, girls, and other marginalized populations.”
- The faith community needs to engage in the conversation with an unwavering commitment to transparency, not asking to be treated differently than other partners, but also not to be held to different standards.

3. Increase co-funding

- To leverage the massive level of private contributions faith partners already have in play from the public sector.
- Build core competencies in health and faith.
- Each party will be well served by understanding one another.
- “Faith cannot be portrayed as an enemy of health, it is a friend of health,” he said. At the same time, public health goals can be introduced more rapidly and with better staying power when endorsed by faith groups.

4. Refrain from using religious teachings to undermine evidence-informed public health practice, or secularist ideology to undermine faith groups’ effective work in health

- The faith community needs to be challenged not to use religious teachings to undermine health practices, while public officials should not be allowed to have secular ideology serve as an excuse for failing to engage effectively with faith groups and what they can contribute to health.

AZZA KARAM, Senior Advisor, UNFPA, led a discussion on the paper.

What can secular institutions do to better support faith-based partners?

Duff responded that close consultation, and cross-sectoral engagement activities have proven useful, and referred to an example, described in the paper where

the WHO, ministries of health, and a number of Muslim leaders collaborated on a [joint declaration on immunization](#)¹⁸.

DINIS MATSOLO, Director of PIRCOM in Mozambique, asked the presenters how and when recommendations from the paper could be put into practice.

Duff said progress was being made, but capacity building was needed on both sides. “There is an emphasis within development circles on local partnership, and that’s a very encouraging sign. But new skills are required from local partners as well as those who seek to partner with them. The development community needs to challenge itself to discover how to build its own capacity for local partnership.”



Jean Duff, JLIF&LC

CLOSING REMARKS

“This is a fascinating topic and one that I think is really central to those of us whose life mission revolves around the health of civilization, because religion is so intrinsically caught up in that mission, as are so many of those who call themselves global health practitioners and workers,” said **TIMOTHY EVANS**, Senior Director, World Bank Group, wrapping up the first day of the conference. “This intersection is incredibly important.”

Speaking about the first paper in The *Lancet* series, he noted its humility.

- “Often I think one thinks that the faith-based unit has the market for the poor – that they have solved that challenge. This evidence suggests there’s room for improvement, which is extremely positive,” he said.

Discussing the second paper on controversies, he brought up local examples in the United States, noting Victor Fuchs’ book “[Who Shall Live](#)”¹⁸.

- “Health is much more than the provision of healthcare,” Evans said. “Fuchs’ observation is a compelling one, but has it fostered the change you would hope in narrowing gaps in health care?”

- He applauded the paper for recognizing controversies, and said we have a long way to go, especially in the United States, in learning how to close health care gaps.

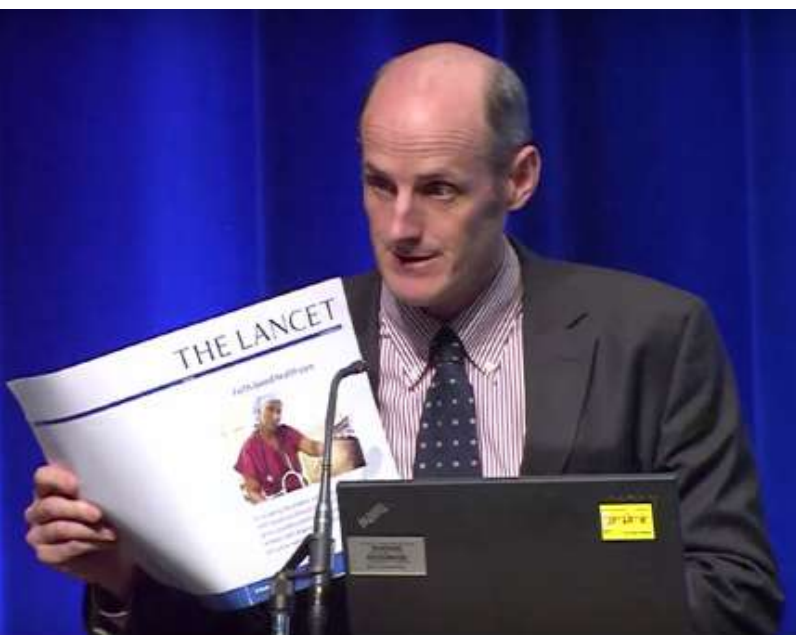
Regarding the third paper, he thought the five recommendations put forward were very reasonable, and appreciated that they recognized the importance of not ignoring, but actually embracing the complexity of institutions.

“I’m struck by [Elinor Ostrom](#)²⁰ and her work on managing public resources in California. It wasn’t the government sector responsible for change, but a constellation of partners. Pluralism is the complex reality of the 21st century. We should embrace that pluralistic reality.”

Evans congratulated the Series, in particular for publishing in the *Lancet* “in breaking new ground, in a new field of inquiry, and in an incredibly respectful and considered way.”

The first day of the conference concluded with the realization of the challenge ahead and a positive note of progress.

“I’m inspired. We have seen an open-mindedness that is critical and a recognition that we may be able to learn through the diversity reflected in this crowd today.”
- Timothy Evans



Timothy Evans, World Bank Group, delivering closing reflections on the Lancet Series of Faith-based Healthcare



Public Sector Leadership Panel

DAY 2

July 8th, 2015

- PERSPECTIVES: PUBLIC SECTOR LEADERSHIP
- PERSPECTIVES: POLICY MAKERS
- PERSPECTIVES: RELIGIOUS AND FAITH-BASED COMMUNITIES
- MULTILATERAL AND BILATERAL PERSPECTIVES
- HEALTH SYSTEMS STRENGTHENING
- EBOLA & HIV

PERSPECTIVES: PUBLIC SECTOR LEADERSHIP

THE PUBLIC SECTOR LEADERSHIP PANEL INCLUDED:

- **MODERATOR:** Ruth Messinger, President, American Jewish World Service
- **Jim Yong Kim**, President, The World Bank Group
- **Alex Thier**, Assistant to the Administrator, Bureau for Policy, Planning and Learning, USAID
- **Thomas Silberhorn**, Parliamentary State Secretary, Federal Minister for Economic Cooperation and Development, BMZ
- **Christopher Simoonga**, Director, Policy and Planning, Government Ministry of Health, Zambia
- **Benoit Kalasa**, Senior Director Technical Division, United Nations Population Fund

RUTH MESSINGER, President, American Jewish World Service, moderated the panel. Each of the panel members discussed how his or her institution is advancing the goal of more effective engagement between public sector and religious and faith groups.

Messinger started by asking **JIM YONG KIM** what inspired the World Bank to co-host and support the conference.

“The foundation of everything I have done has been through this notion of a preferential option for the poor,” Kim said. He cited early work with the Catholic Church to prevent the spread of HIV, and his time with Partners in Health. “At Partners in Health, we looked around the world and asked if there was an approach

that made sense, and nothing gave as much clarity as the notion of a preferential option for the poor, and every religion shared that.”

Kim said the World Bank thought about what it means to be the most marginalized, and looked at who is most often left out in a systematic way. “In the end, this grand institution, the World Bank, embraced the option of preferential treatment of the poor.” he said. As an example, he said the Bank would be more likely to spend money building a road into the poorest areas so farmers can get their produce into markets, rather than build a mine, because the road would have a bigger impact on the poor. He said faith groups share this goal.

“If we share a fundamental moral foundation, then the argument is not about the foundation, but about what the evidence tells us is the best thing to do. We’re the first generation in the history of humankind that says we can end extreme poverty in our lifetime. We have to do something special to get it below 3%, and we need all of you. In the past, the World Bank focused on GDP growth and not on people. Our official position has changed.”

Kim said there were three things that must happen to end extreme poverty:

1. **Economies have to grow.**
 - Due to the large rural populations we must be making strides in agriculture taking into account the impact of climate change.
2. **Invest in people.**
 - Health and education for women and children should be a priority.



Jim Yong Kim, The World Bank Group and Ruth Messinger, American Jewish World Service

3. Provide social protection.

- Preventing people from falling into poverty, specifically in light of climate change and pandemics. Kim cited some studies that have looked at if aid programs take away beneficiaries' motivation to work, and the studies found that it doesn't.

THOMAS SILBERHORN brought a [German perspective](#)²¹ to the panel.

“That faith-based groups contribute to fight poverty is a fact,” he said. “In some societies, they provide more than 50-percent of the health and education sector.”

He said faith-based groups are oriented to the people, and that development requires a people-centered approach. “We cannot change things with money alone. If this was the case, it would be easy to find solutions for the global challenges. Sustainability needs a transformation of politics and mind-sets.”

Silberhorn said the German development policy is motivated by three principles:

1. “The Golden Rule was given by Confucius before Christ. We can only face this challenge if we commit ourselves to this idea that we have to live and work in a way so that everyone else can live and act in the same way. We must base our development policy on common values.”
2. “Our second motivation is our experience over the last years and months that religious ideas are misused for political reasons and by extremists. We have to address this challenge for secular states, and expect from religious leaders that they intervene. We should find instructive dialogue between politics and religious leaders on how to address issue.”
3. “The great advantage of private and faith-based groups is that they are very close to the people. In some countries where we are not able to establish bilateral cooperation at government level, we can still coordinate with faith groups on the ground. We should use the positive power of faith-based groups to reach the hearts of the people and to have a voice for the poor. This is of vital importance for our development cooperation as we look toward structuring a new dialogue.”

In response to the same question about [what inspired USAID](#)²³ to support the conference, **ALEX THIER** cited the approaching Sustainable Development Goals (SDGs).

“The reason that this is so incredibly important is because our mission today [ending extreme poverty] that we share that is soon to be SDG number one, is something that for generations has sounded like a dream from a pulpit, but not something that people could... believe in reality.” he said. Of the extraordinary opening now to end extreme poverty, Thier said, “calls for a stepping up of what we do, how we partner with each other and our work to understand what is actually making a difference. What this has to do with our partnering with faith groups is... it's the goals and institutions and leaders on the ground that will ultimately make the difference. And one of the things that we know is faith groups around the world are the providers, often the inspiration, the organization, indeed the capitalization of that which is necessary to accomplish these goals.” Thier talked of USAID's opening its doors and creating mechanisms to build partnership, highlighting its Center for Faith-Based and Community Initiatives and the White House's National Strategy on Religious Leader and Faith Community Engagement. In critical areas such as humanitarian assistance, human rights and religious freedom and addressing violent conflict, he pointed out that faith groups are established stakeholders and having aid groups and faith groups on opposite sides is “not going to cut it.”



Thomas Silberhorn, BMZ

Thier cited evidence-based success stories of USAID working in partnership with faith groups like Samaritan's Purse on Ebola and with World Vision in Uganda on education. In the first, the partnership "helped us get to the communities, to the individuals who were ultimately going to be the ones to make the difference" in catalyzing behavior change related to long-held beliefs such as burial rights. Similarly, in the second, the partnership provided local access, and "what we found...was communities where there was higher engagement yielded dramatically better long term education outcomes, especially and including keeping their girls in school longer."

VINYA ARIYARATNE General Secretary, Sarvodaya Shramadana Movement, said as a grassroots level practitioner he was excited to hear the policy maker views. But he said he had to acknowledge that there is tension on the ground level, and asked how the policy makers would ensure lasting buy-in from their constituencies to maintain their commitment.

THIER: "You do it by building effective partnerships... making sure you're working with the people, all parts of the community who have a say, and coming to a bipartisan solution [which will hopefully] allow it to endure."

SILBERHORN: "We have to discuss and find solutions to combat extremism. We have to organize an inter-religious dialogue including the issue of how to clarify the relation between the public and religious view. We have to realize this positive power for religions

can really make a difference because the root cause of extremism isn't motivated by religious diversity, but by lack of perspectives for a fast growing young population. We should use people-centered groups to make a difference."

KIM: "It's going to be hard. I'm reminded of the great book *Things Fall Apart* by Chinua Achebe. This will only stay together if we're committed to keeping it together. But as long as we have this fundamental goal of ending extreme poverty we have the glue. If we don't have an honest conversation about results and evidence, if we fall back into comfort zones and our own religions and flags, if everyone in the room doesn't try to get to a place where we agree, this will all fall apart. We must stay focused on the goal. For instance, climate change. If we don't combat that, ending poverty will be nearly impossible. The only thing that will keep this together is human beings. It's the human relationships that will keep it going."

CHRISTOPHER SIMOONGA gave a powerful example from Zambia.

"In Zambia, if you're in a place where you meet a bishop or religious leader, it's either your own bishop, or you're at a funeral," he said. "Why is this the case? Why should we only be meeting a bishop at a funeral when someone has died because of something preventable?"

In Zambia, an MOU is already in place to underline government engagement with faith-based and religious groups. "To ensure the poor and marginalized are reached equitably, we must engage," Simoonga said. He said effective investment in health system strengthening should focus on accelerating programs and strengthening existing partnerships, but most importantly must all based on trust, so there is minimum suspicion.

BENOIT KALASA said the global reality is that faith-based organizations are crucial when [implementing programs](#)²³.

He said that when it comes to combating HIV/AIDS and sexual and gender-based violence, for example, development agencies deal with attitudes and values influenced by culture and religion, and therefore have to engage with religious leaders. "We cannot think about sustainable development and leave out those



John Nduma, ACT Alliance

actors,” he said. The UN currently has an interagency task force to bring in religious leaders, and UNFPA has an interfaith platform focused on the SDG agenda with over 500 faith-based partners at country level. At the country level, the impact of the faith leaders and development organizations can be very significant in terms of attitudinal change as well as service delivery.

The panel continued with religious and faith leader responses.

RACHEL CARNEGIE, Co-Executive Director, Anglican Alliance, said the challenge will be achieving sustained action, implementing faith partnerships at scale.

She offered three insights:

1. Faith actors come in many forms, including faith-based NGOs; faith denominations, many running health, education and other services; faith leaders, with their distinctive influence; and local faith communities with a presence even in the most remote and fragile context. It is important to differentiate how to partner these different types of faith actors, finding common purpose to avoid instrumentalising them.
2. Further research is needed on models of large scale mobilization of religious-based assets across faiths in one or two countries in a couple of sectors, supported by a pooled fund and technical assistance and implemented within a rigorous evaluation framework.
3. Look at how partnerships are structurally organized, and understand the reality of plural delivery of services, including by faith actors. UNAIDS 3-1 policy is an example that allows for multiple actors. It will be necessary to strengthen capacity and scale up service delivery by all actors within an accountable national framework.

JOHN NDUNA, General Secretary, ACT Alliance, began by sharing an anecdote.

In 2009, ACT Alliance was attending the climate change summit in Copenhagen and had an informational booth on ACT Alliance. A group of brilliant young men walked the booth. The men said they hate the church. Recognizing that these men could be future leaders in the public sector, Nduna decided to talk to

them and tell them about the work ACT was doing. The young men asked why they had never heard of the organization before. “I realized maybe we were bad at communicating,” Nduna said. “Maybe there was a reason the public sector wasn’t hearing about us more.”

Nduna continued by addressing three key challenges.

1. Faith-based organizations have been in the business of poverty reduction for a long time, but haven’t achieved their goals because multiple actors are needed to make a real impact.
2. “For public sector actors it is critically important to ensure dialogue actually leads into constructive discussions on the issue of poverty eradication,” he said.
3. He said it is important to dispel some of the myths around faith-based organizations, like that they want to evangelize, are not accountable, or are not organized. He noted that among humanitarian actors in world, four of the largest organizations that work with principles of accountability and partnership are faith-based—Caritas Internationales, ACT Alliance, World Vision International, and Lutheran World Federation.

His concluding recommendation was: “Capacity building is not a one-way thing. Public and private have a lot to learn from each other,” he said.

SCOTT APPLEBY, University of Notre Dame, asked what policy partners can learn from faith-based communities.

JOHN NDUNA, ACT Alliance: “Faith-based organizations’ approach to transformative development and to programs to eradicate poverty is very holistic and compassionate. The public sector can learn that coming in with your ideas and programs without talking to communities is a waste of time.”

RACHEL CARNEGIE, Anglican Alliance: “Trust, because we don’t work on a five-year cycle, but are always there. Faith groups often *are* the poor, so we work together.”

PERSPECTIVES: POLICY MAKERS

JOHN DREW, Partner, McKinsey & Company, presented the report on [Building More Effective Partnerships between the Public Sector and Faith Groups](#)²⁴. The report, produced by McKinsey & Company and commissioned by JLIF&LC, found that faith-based organizations are widely recognized as a positive force in development and humanitarian relief, yet international development organizations do not always know how to engage with these organizations in an effective or consistent manner.

He said the conversation on whether to work with faith-based organizations has moved not from whether to do it, but to how. He said there are [four interconnected actions](#)²⁵ that could be taken to realize the existing opportunity:

- 1. Apply a practical framework**
 - Decide when it is most effective to partner with faith-based organizations.
- 2. Find common ground**
 - Identify shared values and encourage dialogue and understanding.
- 3. Address structural challenges**
 - Reduce complexity and transaction costs in forming partnerships.

1 A practical framework for deciding when it is most effective to partner with faith groups ✔ Consider partnership ✘ Partnership potentially not appropriate



Figure 1: McKinsey & Company Decision Tree

- 4. Monitor the impact**
 - Create a stronger evidence base using numerical data or stories of behavior change.

McKinsey & Company created a decision tree to help decide when to partner with faith-based organizations. This chart, which addresses shared values, building understanding, how to grow a partnership, structural challenges, and the importance of evidence could become common language for when and how partnerships should take place.



John Drew, McKinsey & Company

PERSPECTIVES: RELIGIOUS & FAITH-BASED COMMUNITIES

THE RELIGIOUS AND FAITH-BASED COMMUNITIES PANEL INCLUDED:

- **MODERATOR:** Agnes Abuom, Moderator of WCC Central Committee, World Council of Churches
- **Dean Pallant**, Director, International Social Justice Commission, Salvation Army
- **Swami Chidanand Saraswati**, Co-Founder and Co-Chairman, Global Interfaith WASH Alliance
- **Michele Broemmelsiek**, Vice President, Overseas Operations, Catholic Relief Services
- **Matthew Frost**, Chief Executive Officer, Tearfund and Co-Chair, JLIF&LC
- **Mohamed Abu-El-Magd**, Founder and Board Member, Islamic Relief Canada

SUMMARY: In response to the policy perspectives of the morning, the **RELIGIOUS AND FAITH-BASED COMMUNITIES PERSPECTIVES** session focused on the moral imperative to reduce human suffering and the distinctive assets of religious communities to development. Religion's unique power to transform mindsets and behavior, build relationships, and ensure accountability were brought to center stage. The panelists also highlighted potential areas of growth: development of a faith-inspired approach to evidence, increasing engagement with faith communities at the local level, and strengthening operational capacity of faith-based organizations.

MATTHEW FROST, Chief Executive Officer, Tearfund and Co-Chair, JLIF&LC, began the opening remarks by highlighting a critical difference of thinking and perspective between macro and micro level actors.

For sustainable whole life development at a community level, macro level actors often focus on top-down programmatic interventions, focusing for example on healthcare and education. However, micro, grassroots level actors focus on changing the mindsets and behaviors of the poor. "That's what's captivated us at Tearfund for the past ten years." He said that the **dynamic of faith is incredibly powerful in changing mindsets**²⁶, both for better and for worse.

Although the public sector and faith-based organizations desire to end extreme poverty, working together has been a challenge, said Frost. He believes the inability to collaborate ultimately stems from the inability to understand one another.

Frost presented six ideas for moving toward a greater understanding between public sector and faith groups:

1. Shift from generic high-level dialogue to a space focused on practical, specific frontline orientated continuous learning.

- "When we bring practitioners, policy makers, and academics together around specific thematic areas and specific geographies, practical ideas are shared and common values are found, ongoing learning flows, and relationships are built."



Matthew Frost, Tearfund

2. Broaden the focus of the public sector to not only embrace faith-based NGOs or visible senior faith leaders, but to also engage local congregations.

- “Ninety-nine-percent of faith-based assets are local at the grass-roots levels, not in institutions and visible infrastructure. We need to find way to help the public sector to engage with local capacities,” he said.

3. Find a common language and framework that bridges worldviews and perspectives.

- “Together we must focus on the insights and approaches of social anthropology, behavioral economics, and neuroscience, and we need to develop new tools and methodologies around this.”

4. Reimagine a collective approach to building and communicating the evidence.

- “We need a more rigorous understanding of why it has been so hard to gather this evidence”, Frost said. “Just saying we need evidence is not enough. We need more of a dialogue. Who are we seeking to influence with the evidence? What is good evidence? What is robust? When are more intangible indicators appropriate?”

5. Name and confront both fears and prejudices.

- “We need to really wrestle with our fears and prejudices and get to the bottom of what fuels obstacles,” he said. As examples, he said the public sector fears weak accountability, and the faith sector fears exporting of western cultural norms.

6. Explore new ways to make it easier for governments to organize with faith-based organizations.

- This should not just be about FBOs organizing themselves to engage with the public sector. “We need to require and inspire the public sector to work in new and creative ways to come alongside the complexity and rich diversity of the faith sector.”

“The vast majority of people living in poverty are people of faith, and I think they demand greater collaboration between sectors. The opportunities are huge, we mustn’t let them down,” Frost concluded.

MOHAMED ABU-EL-MAGD, Founder and Board Member, Islamic Relief Canada, began his opening remarks with a story.

“In Egypt, for the last twenty years the government, multilateral donors, and international NGOs have been trying to improve the environment, and they’ve had lots of failures. After trying to find evidence for why, they realized the communities with water pollution and other issues were difficult to influence by introducing laws. They realized that in these communities in smaller areas, it was the religious leaders who could really influence behavior. When they spoke to one farmer he said, ‘we never cared about breaking the law of the land, but we cannot break the law of Allah.’ ”

The moral, El-Magd said, is that culture and religion are intertwined, and governments and secular organizations need to [work within that culture](#)²⁷. “In some Muslim communities, we see practices and say that is part of their religion, but practices are not always coming out of religious beliefs, but out of culture,” he said.

He said secular actors think there is a conflict between secular law and shariah law, but that’s often



Agnes Abuom, World Council of Churches



Swami Chidanand Saraswati, Global Interfaith WASH Alliance

a misconception, usually because these groups are working with indigenous leaders instead of formal court systems. “We need to have a dialogue with religious leaders on different levels,” he said. “Local leaders might not understand the context or have the knowledge to relate issues to shariah principles, while more senior leadership may have that. We want to engage all levels, so we can bring change to religious leaders first, and they can convey it to their communities.”

AGNES ABUOM moderated the panel, and called on **MICHELE BROEMMELSIK** to begin.

Broemmelsiek brought an operational focus to the panel. Her goal was to translate the intersection between the Catholic identity and the way her organization carries out its mission of serving the poor. “How do we translate this idea that we want to work together for a common goal of ending extreme poverty?” she asked.

“For me, it comes down to the *how* and the *what*. *How* are we going to do this, and *what* are we going to do?”

She said in today’s world poverty is a [scandal](#)²⁸, and focused on how and what to do to change it. She said evidence is important, but finding the right evidence is a challenge. Often, evidence is based on project information, but bigger, broader evidence is needed that looks at the question of how to design programs to end extreme poverty that are supportive and allow faith institutions to flourish.

“*On the what*, we need to understand where faith institutions are exceptionally good at transforming lives,” she said. “What are the things they do well?” She said the answer to that question should be the focus that evidence is built around.

On how, Broemmelsiek had two points.

1. “We don’t need to start from scratch, but we can think about how we support organizational structures that allow us to get at extreme poverty and allow faith institutions to flourish.”
2. “We must think about how we collaborate. What are most vibrant collaboratives that lead to good and substantive change?”

SWAMI CHIDANAND SARASWATI followed and said this is the [most significant moment humanity has yet witnessed](#)²⁹.

Saraswati said this is an opportunity to unite and bring incredible change, but the opportunity must be embraced.

“We are suffering not so much from global land, food, and water shortages as from a global consciousness shortage,” he said. He said everyone, including faith leaders, policy leaders, political leaders, and the public need to choose a sustainable and conscious way of living so the rest of the planet can survive. “Mahatma Gandhi said there is always enough for everyone’s need, but there is never enough for even one man’s greed,” he reminded. “Sustainable and conscious living



Dean Pallant, The Salvation Army

means we emphasize filling our self instead of filling our shelf; sadly today our shelves are full but our inner selves are empty.”

He said an end to poverty will only come when humanity is united in peace. “The world faiths are here at the World Bank, so let us become ‘United Faiths’ with the United Nations to serve as one without discrimination or hesitation,” he said. “Let there be fewer sermons and more service. We have worshipped the creator for so long, let us take care of the creation. Let our work and service be our worship.”

He said great agendas like the SDGs can be realized with cooperation. “The public sector is the faith sector and the faith sector is the public sector. Our sectors are already one. Working together hand in hand, heart in heart, we can bring the change the world needs.”

“From the Salvation Army point of view, we realize we need to strengthen our capacity,” **DEAN PALLANT** started. “It’s hard to fuse theology and social sciences, but we must, because sustainable development needs people to have resilient relationships in all dimensions of life.”

Pallant offered **two insights**³⁰ that will be vital in building partnerships for sustainable development:

1. **Motivation:** People of faith have a moral and spiritual imperative to address extreme poverty. This motivation extends well beyond Christianity as exemplified in the declaration by global faith

leaders launched at the 2015 Spring Meetings of the IMF and World Bank. Fighting poverty and injustice is not merely a personal preference for people of faith – it is a divine demand.

2. **Theological Anthropology:** Who did God create us to be? Christianity places great value on the human person – the belief that people are made in the image of God. This appreciation of the human person and the value placed on relationships are key in the fight to end extreme poverty and increase shared prosperity.

To encourage these partnerships, he noted three tools the Salvation Army uses:

1. **Faith Based Facilitation**³¹ – a way of working that encourages reflective practice and intentionally includes the resources of the Scriptures, faith tradition and the Spirit.
2. **Mission Accountability Framework**³² – a six dimension framework with common questions to be answered by all people engaged in Salvation Army programs that encourage faithfulness, transparency and accountability.
3. **Unified Framework for Measurement** – an attempt to develop a tool for impact measurement which includes relational measures as well as contextual outcomes. This is still in the early stage of development.



Religious and Faith-Based Communities Panel

Abuom opened the discussion for questions, and **IDA KAASTRA-MUTOIGO**, Executive Director, World Renew, asked about accountability.

“How do we ensure that we’re not displacing accountabilities that need to be there, that outside donors aren’t interfering, and that we in North America are holding ourselves accountable for consumerism behaviors that affect global poverty?”

DEAN PALLANT: “Through people-centered accountability. People see it as helping them to do their work, so it’s about self-accountability, not imposed external accountability.”

MICHELE BROEMMELSIEK: “The question of accountability is part of larger canvas that relates to data. People working on projects count things to report to the donor, but these things have no real use to them. I don’t believe we’ll overcome the question of joint accountability until we understand what we are accountable for.”

MATTHEW FROST: “There has been a huge shift in the development sector to embrace the concept of beneficiary accountability, but we need to do more to make it work. Our primary accountability should be to those we serve, then to donors. We need to remember the etymology of the word accountability. It is not an instrument of power or judging, but all about strengthening trust and relationships and transparency. We must rediscover what the word means and understand how it has been distorted.”

ABUOM recapped the discussion stating, “it’s not whether we’re going to partner, but how. Challenges have been raised.” She elaborated on the following



Michele Broemmelsiek, Catholic Relief Services

challenges:

1. “Mistrust and prejudices against one another.”
2. “We should not look at religious communities as assets, but as forces of life that enable communities to redeem dignity and restore humanity.
3. “How do we overcome the danger of making faith communities allied to governments and therefore lose identity and credibility within the communities they serve?”
4. “There is the issue of evidence. There is a plea that we look at broader frameworks.”

MULTILATERAL & BILATERAL PERSPECTIVES

THE MULTILATERAL & BILATERAL PERSPECTIVES PANEL INCLUDED:

- **MODERATOR: Azza Karam**, Senior Advisor, UNFPA
- **Sally Smith**, Community Mobilization Advisor, Joint United Nations Programme on HIV/AIDS
- **Ulrich Nitschke**, Head of Programme Values, Religion and Development, Deutsche Gesellschaft für Internationale Zusammenarbeit
- **Katie Taylor**, Deputy Assistant Administrator, Bureau for Global Health, USAID
- **Joanne Ronalds**, First Secretary for Governance, Department of Foreign Affairs, Australia
- **Anuradha Gupta**, Deputy Chief Executive Officer, Gavi, The Vaccine Alliance
- **Christoph Benn**, Director of External Relations, The Global Fund to Fight AIDS, Tuberculosis and Malaria
- **Svein Baera**, Director, NORAD
- **Shelly Pitterman**, Regional Representative, UNHCR The Refugee Agency
- **David Ponet**, Partnerships Specialist, UNICEF
- **Arif Khan**, Partnership Coordinator, United Nations World Humanitarian Summit, UN Office of Coordination of Humanitarian Affairs
- **David Beer**, Deputy Head of DFID Ghana, DFID

SUMMARY: The eleven representatives of the **MULTILATERAL AND BILATERAL PERSPECTIVES** panel showcased pioneering examples of partnerships, addressed challenges encountered in collaboration, and commented on changes desired within their agencies. Obstacles cited to systematic public sector engagement with religious groups included structural and functional mismatches, dissimilar approaches to data, evidence, and measurement, ignorance and prejudice against religious assets, and lack of representation of religious perspectives in program and policy design.

Moderator **AZZA KARAM** first noted the commonalities between both bi- and multi-lateral actors, indicating that each had experience of engaging with faith-based partners around diverse developmental aspects. The objective of this panel therefore, was to highlight what was being pioneered, so to speak, and to compare and contrast experiences with a view to enhancing the discussion and moving from ‘why’, to ‘how’ to engage better.

ANURADHA GUPTA, Gavi, The Vaccine Alliance

Gupta said that Gavi realizes the tremendous role that [faith actors can play in the immunization landscape](#)³³, and gave an example of her experience in India’s polio epidemic. To reach children at highest

risk and counter resistance to polio immunization, building strategic partnerships with religious actors were systematically developed. It was difficult for the government to build those trusting relationships and Rotary International served as a neutral third-party in successfully mobilizing religious leaders to combat vaccine hesitancy and promote vaccine uptake. Gupta also highlighted other examples of engagement with FBOs, including Gavi’s work with Catholic Relief Services, which helps to set up 23 platforms in countries where Gavi works. Additionally, Gupta noted that there is focal person for faith on Gavi’s Civil Society Steering Committee.

CHRISTOPH BENN, The Global Fund to Fight AIDS, Tuberculosis and Malaria

Benn echoed the earlier presentation by John Drew, McKinsey and Company, and said a functional mismatch makes it difficult for large international donors to provide resources to the many smaller faith-based organizations doing work on the ground. Benn provided two examples from [the Global Fund](#)³⁴ that were successful in overcoming this mismatch. Benn cited the Christian Health Association of Zambia (CHAZ) as a successful example of a partnership among a FBO, government, and international donor. CHAZ serves as an umbrella organization that channels



Azza Karam, UNFPA, speaking on the Multilateral and Bilateral Panel.

resources from donors to smaller Christian and non-Christian organizations, which Benn says the Global Fund would not be able to do without having an intermediary such as a Christian Health Association.

Benn also highlighted the Imagine No Malaria Campaign with the United Methodist Church as a successful example of success in both financing and awareness raising with an FBO partner. The United Methodist Church’s Imagine No Malaria campaign has mobilized the general body of the congregation, generating great enthusiasm and support.

KATIE TAYLOR, Bureau for Global Health, USAID

“The US government is one of the largest global health funders in the world, but we don’t engage the faith sector systematically.” Taylor listed several situations conducive to working with a FBO: (1) “When there’s an established, proven clinical actor, and we’re trying to reach deep into a particular country with a specific public health objective” (2) “When there’s a non-controversial issue, like malaria” (3) “When there’s a large, established development organization, which happens to be faith-inspired.”

“The difficulty is how to translate some of the really engaging examples of what we’ve done that’s a bit more innovative into a more systematic approach.” She gave the example of Indonesia, where USAID

engaged the largest Muslim NGO and three Christian organizations in an MOU on maternal and newborn health. Overall, USAID has made partnerships a priority in progressing on maternal health issues³⁵.

SHELLY PITTERMAN, UNHCR

“UNHCR works with many faith-based organizations,” Pitterman said³⁶. “That’s because of our values.” The UN High Commissioner for Refugees convened a dialogue in 2012 about the values that bind all religions to welcome refugees. The dialogue was based around the fact that there is a well-established basis in religious scripture and tradition to welcome the Stranger. Pitterman quoted the Quran, which says, “those who give asylum and aid are in very truth the believers, for them is the forgiveness of sins.” In the Torah, a similar verse says, “the stranger who resides with you will be with you one of your citizens.” Multiple references across sacred texts deal with guests and strangers. “The pioneering effort of the High Commissioner was to bring a common vocabulary, which is very often lacking, to the dialogue with faith-based organizations globally.”

ULRICH NITSCHKE, GIZ

Nitschke brought up the example of a [BMZ-funded](#)³⁷

interfaith intervention combating youth involvement in gangs in South Africa. Once a month in Port Elizabeth, an interfaith round table was convened with local authorities, business communities, and the religious community discussing three areas of cooperation: (1) Job creation (2) Creation of space for young people to organize in religiously inspired institutions, and (3) Integrity, which Nitschke said “was the most stunning to him.” In order to promote integrity, all of the round table participants voluntarily opened up their books to each other for auditing. The organizations agreed that “without integrity and transparency in auditing, we will not bring trust in the community or gain something that is really sustainable.”

SVEIN BAERA, NORAD:

Baera said education is a primary focus for Norad, and the organization will increase funding to faith-based organizations that have the best ideas, results, and networks to make sure kids in conflict-ridden countries receive an education. He said Norad is also looking at ways that poor countries with natural resources can increase national revenue. “From a Norwegian point of view, governments in poor countries should increase revenues to provide education and health in a better way, and not leave it to the faith-based or other organizations,” he said. He said as a public donor working with government officials, it is important to help improve their capacity when it comes to negotiating contracts. At the same time, faith-based organizations could serve as a watchdog, keeping multinational companies accountable.

SALLY SMITH, UNAIDS:

Sally Smith highlighted the importance of global health in achieving an end to extreme poverty. “The world will not achieve the goal of ending extreme poverty unless we simultaneously address the issues critical to ending AIDS, human rights, marginalization, inequity criminalization.” Smith gave an example of [UNAIDS in partnership](#)³⁸ with the Ecumenical Advocacy Alliance, INERELA+ and GNP+, hosting three dialogues with faith-based partners on human rights, religious faith, and human dignity. Dialogue participants searched for common ground between human rights, justice, and dignity in the theological space. These dialogues led to the

creation of a resource book that could be used by countries to host those dialogues at a national level. The book contains both the technical information on human rights, the theological information around justice and dignity, and where they come together. She said that although UNAIDS is not a donor, they are able to use their leadership and convening power and work with other partners and challenged participants to grapple with some of the hard issues that need to be tackled to end extreme poverty together.

DAVID BEER, DFID:

Beer said that DFID has a long history of working with faith groups and channels a large amount of money through them. DFID has key partnership agreements with many UK faith-based NGOs. However, “DFID has sometimes struggled to work out what the distinctive role that faith-based organizations can play really is, and to be comfortable with different starting points we may have in order to achieve the same development goals.” To help the organization work better with faith-based organizations, DFID created the [Faith Partnership Principles](#)³⁹ in 2012, which recognizes this challenge and attempts to build a common understanding of the role of faith with DFID. “We also have a DFID Faith Working Group, both as a source of information, and as a sounding board and way to engage,” he said. “Out of that, there is a determination to find out more and learn more.”

JOANNE RONALDS, DFAT, Australia:

Ronalds acknowledged that the Australian government can still make its engagement with FBOs more systematic. She gave the example of the [Church Partnership Program](#)⁴⁰ in Papua New Guinea, where seven mainland churches and their respective Australian faith-based partners work with churches in remote locations on education and health efforts. The key to the program’s success in providing health and education services, she said, was the faith-based organizations, which approached the Australian government with the idea of starting this partnership. She said this has resulted not only in stronger health and education programs, but also in progress on issues like [violence against women](#)⁴¹.

DAVID PONET, UNICEF:

Ponet described UNICEF's work in Pakistan with religious leaders and institutions on polio campaigns. Not only did working with religious leaders assist in combatting resistance to immunization, but it helped in reaching hard-to-access populations. "FBOs often have the distribution channels and the reach that an organization like UNICEF often does not have." Highlighting next a humanitarian example, Ponet said that UNICEF often cannot access conflict areas, but religious groups can, and are willing to assume the risk of going into those areas if UNICEF can provide them with life-saving supplies. "This is a great example of a partnership that can lead to a discreet and [life-changing transformation for children](#).⁴²" He gave a final example in the water, sanitation, and hygiene sector. UNICEF worked with religious leaders in Indonesia to establish "Open Defecation Free Zones." The successful establishment of the zones was due in part to religious leaders' efforts to transmit the messaging about their benefits in language that resonated with the population.

ARIF KHAN, UN Office of Coordination of Humanitarian Affairs

Khan spoke frankly, saying his organization was "behind the curve." He said the United Nations works with faith-based organizations in the field, but treats them like any other operational organization. "But I want to leave with hope," he said. "There is an opportunity for this to change, which is why I'm here." The World Humanitarian Summit will take place in Istanbul in May 2016, and Khan said Ban Ki Moon will put forward an initiative to transform how humanitarian needs are undertaken. "We need new ways of thinking, of working. Deployment of new technologies, and new partnerships," he said. "We need to acknowledge that first responders are often on the ground—churches, mosques—in disasters and conflicts. They are the ones that are operational, and we need a better way to work with them."

Karam highlighted that in fact UNOCHA was among the oldest in the UN system to engage with faith-based actors at the field level, and to seek representation from FBOs on the Advisory Standing Committee on Humanitarian Affairs. She then moved the conversation from what participants' organizations were doing, to

how existing partnerships could be improved. "How many of you would say the partnerships are there but they're not systematic?" she asked to the panel. Nearly all the panelists raised their hands. She then asked, "Why are they not systematic?"

ANURADHA GUPTA, Gavi, The Vaccine Alliance:

"The challenge is how to create a framework for strategic, sustained, and systematic partnerships." She said the global level is a good starting point, but we should be cognizant of the fact that partnerships ultimately must take effect locally. Gupta said that if they were to assign a focal faith representative to their Inter-Agency Coordinating Mechanism at the country level, they run into the issue of "who actually is best positioned to represent 'all faiths'." She cited two additional challenges:

1. Faith-based organizations are seen as providers of services, but they are needed to convert advocates as well. "We need to create tools to deliver our expectations."
2. Faith-based organizations have potential to provide accountability and "social audits" to the system, but they require support.

CHRISTOPH BENN, The Global Fund:

"One of the challenges is that we don't have this kind of dialogue that we are having in this conference here today," Benn said. "This dialogue needs to filter down both in the international organizations and in the faith communities. It's our responsibility to make sure that happens." He said that many organizations, including the Global Fund, are not fully faith literate, and not every staff member understands the contribution the faith community can make. He said *The Lancet Series* is an important tool to increase faith literacy, because it speaks a language development organizations understand. "We need capacity building on both sides," he said of both international organizations and faith communities. "I would like to challenge my colleagues from the bilateral agencies because an intensified partnership between bilaterals, multilaterals and the FBO community has a lot of potential for better collaboration achieving significant impact. Organizations like the Global Fund that don't have a presence at the country level have limited ability to build capacity on the ground,

IMAGINE NO MALARIA CAMPAIGN

The Global Fund partnered with the United Methodist Church on the Imagine No Malaria initiative. A gift of US\$9.6 million from the church was contributed to the Global Fund. With these financial resources and the ability to mobilize support, the Imagine No Malaria campaign was able to create a program combining bed nets, health clinics, a communication strategy, and education in a mission to beat malaria for good.

Fifty-percent of the financial resources went through the United Methodist Church network, while the other half went through the Global Fund. “This is a great example because it was not only the importance of financing, but of raising awareness and mobilizing the base,” Benn said. “It’s important that church networks look at what they can do and see what they can achieve in global health.”

even where we see it would be beneficial for the programs.” He suggested partnerships with bilateral agencies who could assist with capacity building of FBOs in areas such as financial management, procurement policies and risk management that are not the particular comparative advantage of FBOs. “If we established successful partnerships for capacity building and awareness raising, we could make these models so much more successful.”

KATIE TAYLOR, USAID:

Taylor said the fundamental challenge deals with “how we think about three things: dollars, data, and development.”

- **Dollars** – “Our funding dollars are vertical, but the nature of faith communities is horizontal.”
- **Data** – Among bilateral donors, a high standard of evidence is needed before funding a program, which can present a burden for FBOs. In the private sector, less emphasis is placed on proving the theory before action can be taken. “Bilaterals are accountable to taxpayers, so we have to prove things. But when is there enough evidence to just do it?”
- **Development** – “There is a political correctness in the development world around ‘just because something worked somewhere, doesn’t mean you can do it everywhere.’ There are best practices about how to more systematically replicate at scale on what has been done.”

ULRICH NITSCHKE, GIZ:

Nitschke said although GIZ provides its employees around the world with technical support, much more could be done to provide support for its employees around values, such as transparency or accountability. Nitschke also said we assume the marriage of parastatals and religious groups bring added value; however, he recommended a more cautious approach and that we first ask “What is the criteria for engagement?” and then come to an understanding of what would a “marriage” of public sector and religious groups look like.



Ulrich Nitschke, GIZ

DAVE BEER, DFID:

“There are policy differences between donor and faith communities, and we often shy away from those,” he said. “By not having the conversation, we’ve created a distance, a kind of institutional nervousness about what faith-based organizations are for and what they want to achieve.” He said he hoped through increased dialogue and funding research, this is being overcome.

SVEIN BAERA, NORAD:

“My job is to provide funding to the best civil society organizations, and often we find faith-based organizations are among best,” said Baera. “When it comes to social services like health and education on a global and local level, they’re doing it with good results and a high value for money.” He said the discussion gets more challenging when it comes to how religious leaders work as advocates in certain countries. “In Tanzania, we asked people who would be the best leaders in the fight against corruption, and people believed most in the religious leaders,” he said. “But we couldn’t see that many examples of religious leaders or faith-based organizations taking advantage of their high place in society.” He said more religious leaders need to step up and fight for economic justice and gender equality. “If there’s one group that could really make a difference in gender equality, it is men who are religious leaders,” he said.

JOANNE RONALDS, DFAT, Australia:

Ronalds echoed Dave Beer and said there is a tendency to shy away from engagement, and there’s still a lot to learn. “There is a nervousness about how to engage with faith-based organizations,” she said. “We’ve tried to bring in other churches and faith-based organizations outside of the seven mainland churches in our program in Papua New Guinea, and we really struggled to do that. We have quite a bit to learn about taking the partnership forward.”

SALLY SMITH, UNAIDS:

Smith spoke of the challenge of prejudice and polarization. “People have caricatured each other into a corner, but the large majority of religious actors are seeking the same goals as development partners. We need to learn how to de-caricaturize and work together more effectively.” The key is

finding areas where the health and development and the faith communities can advocate and act together for change. Instrumentalizing the faith community to achieve development objectives is not the same as partnership. Smith illustrated this point with the example of the Ebola outbreak, in particular how traditional burial practices contributed to the spread of the virus. Once a conversation was established between the religious leaders and the health professionals a revised ‘safe and dignified burial protocol’ was developed and shared. Religious leaders commented that this was a turning point in the epidemic. “Partnership is not about telling people what to do, but listening to one another so we can be more effective together.”

ARIF KHAN, UN Office of Coordination of Humanitarian Affairs:

Drawing from his own experience organizing the upcoming World Humanitarian Summit, Khan said within some public sector institutions remains skepticism of the value of engagement with FBOs. Within the humanitarian world, there are particular concerns of impartiality, neutrality, and inclusivity. “How do we ensure religious communities are impartial in their delivery of aid?” Khan also brought up another unaddressed challenge: “In some faiths, justice trumps neutrality. How do we reconcile that?” He said the challenge would be for some faith-based organizations to remain neutral while having their own view of justice, which calls for some to act in the face of injustice and not remain impartial.

SHELLY PITTERMAN, UNHCR:

In response to the panel’s listed challenges, Pitterman said he was optimistic. He began with examples of religious leadership advocating for justice. As an example, he pointed to the Pope’s visit to Lampedusa, which harnessed and galvanized a remarkable level of advocacy attention to the refugee issue. “At UNHCR we rely on that and love it and collaborate as much as we can.” Pitterman described UNHCR’s work to engage with FBOs as more opportunistic than systematic. He said UNHCR looks for specific opportunities in which working with FBOs would be helpful to achieving the shared mission. He highlighted work religious organizations have done on resettlement of refugees in the United States as an example of excellent religious advocacy around



Christoph Benn, The Global Fund to Fight to Fight AIDS, Tuberculosis, and Malaria

an issue. He said they are successful not just because “the business model is suitable, but because in every state, they have an “ecumenical approach of reception, support, and welcome. It is an example worth replicating elsewhere,” he said.

To complete the discussion, Karam asked what each participant would most like to see changed about their organization going forward. “In spite of concerns, there is a clear will to undertake these partnerships more. But we’re still grappling with the fact that we don’t have mainstream learning within our organizations about the good things that are possible, and tend to therefore be hesitant about the not so good things. If you’re going to do this work, what’s one thing you want to see differently or see done better in your own organization going forward?”

DAVE BEER, DFID:

“DFID is quite a thinking organization, as well as a funder, and we’re very good at producing reports. I would like to see us take that thinking and marry it to our operations.”

JOANNE RONALDS, DFAT, Australia:

“We need to understand the role of churches more: the work they do, where their strengths lie, how we can work with the grain as opposed to trying to change.”

DAVID PONET, UNICEF:

Ponet highlighted the need for greater localization and contextualization. “We need to do a better job of understanding the terrain where we operate. We need to know who the actors are, who’s doing what, and how we can come together around specific challenges affecting children.” It would then be possible to articulate a value proposition about why partnering with a certain organization makes sense for children. He said there is a need to take stock of both sides’ comparative advantages and disadvantages in order to assess why complementarity is advantageous for that particular instance.

SALLY SMITH, UNAIDS:

Smith said she would like to see the global health and development community “overcome some of the secular prejudice that is not willing to invest in gathering accurate data, does not want to listen to the data, and does not want to publish the data. I would love to see the global health and development community be more proactive, to work with faith communities to document their service delivery, to document their advocacy, and to document their work on stigma and discrimination, so that we can actually see some of those positive results.”

ARIF KHAN, UN Office of Coordination of Humanitarian Affairs:

“Hope and dignity. I still haven’t seen a log frame or metrics measuring this, and I think this is part of the issue. Humanitarians are great at delivering goods and services, but often at the expense of local culture, hope, and dignity. I think we are doing a disservice by not valuing those things more.” Khan said he would like the World Humanitarian Summit to engage with these issues more. He said that when his organization asked people, ‘What do you need most in the time of disaster?’ They expected to hear food and water. “Often we heard, we need hope. Churches, mosques, synagogues, and temples offer that.”

KATIE TAYLOR, USAID:

“I would love us to be able to take the lessons learned and best practices from an area like malaria and be able to apply it systematically to other areas.” Taylor said malaria simplified the issues, took an interfaith approach, and created practical examples of how that

could work at the local level. She highlighted the importance of toolkits that could be easily replicated at scale. “How can we take that and package that in a way that is practical and easy to adapt to other areas.”

SHELLY PITTERMAN, UNHCR:

“We need to do everything we can to support the strengthening of national faith-based organizations. Not just the UN and bilaterals, but also larger faith-based organizations with an international reach should collaborate to do this better. One way to facilitate that is to simplify reporting requirements at the country level. We do have to get audited, but if bilaterals and donors would find a better way to do results-based reporting without having to fill out complex forms that a local church or mosque don’t care to do, that would be helpful.”

CHRISTOPH BENN, The Global Fund:

“Reduce ideological barriers in our own organization that prevent us from engaging in more deeper and meaningful ways with faith-based organizations, and recognize the common values and the common purpose when working with faith-based organizations.”

SVEIN BAERA, NORAD:

“I would like to see more faith-based organizations willing and able to gather leaders from different religions around the table in interfaith councils. These groups could be powerful advocates for better governance in many countries.”

Baera added as well the challenge of documenting not only numerical results but also results that are involve different ways of telling stories. He this is a major challenge for all of NORAD’s funding: they would like to fund results, but there is difficulty in measuring results if it is not numeric. “I would like to hear more about how we can document in other ways, in an evidence-based way, that can lead to more flexibility that would allow FBOs to document results.”

ANURADHA GUPTA, Gavi, The Vaccine Alliance:

“We have to give faith the priority it deserves. We have to gear up to galvanize all of our alliance partners to first recognize and then harness the potential that exists.”

ULRICH NITSCHKE, GIZ:

“We should start in program design. We just drafted a paper to identify entry points where this idea of engagement could work in designing programs. The challenge is that the partners we are talking about are not present in binational government negotiations. This is our biggest challenge ahead of us. How can we organize bilateral government negotiations with the presentation of those who will then implement the programs? We might talk about reciprocity, but we are not implementing in designing, negotiating, and implementing the programs.” When asked what GIZ would do differently, Nitschke said continued discussion of those entry points may allow the design of strategies that can be elaborated together and lead to a different approach.

AZZA KARAM summarized the discussion:

Many commitments were heard from the panel, but also many challenges. Though it might not be the right approach from the multilateral and bilateral point of view, still there is a need to simplify, categorize, and understand the world of religion and faith. There’s no quick fix, but opportunities exist to learn and hear from each other and to work together through structures and mechanisms. Most importantly, both sides—faith and public sectors—must realize that responsibility for accountability and diligence lies on both sides, and there are asks each is making of the other.

From the multilateral and bilateral perspective, “We ask [religious and faith actors] for more clarity, more consistency, more working together, less approach as disparate entities, and more togetherness. We ask for some agreement around the metrics—and yes, this might be difficult and not necessarily in exactly the same language—but the work of development ultimately does need some common language.”

Karam reflected on the shift in the intersecting worlds of religion and development. “This is a moment where we are no longer discussing why we need to do work together. It has been 25 years of asking why and trying to make a case. Now we are talking very concretely about the how. Now we have commitment on both sides, and enthusiasm—that is a huge step forward.”

HEALTH SYSTEM STRENGTHENING

MODERATOR & OVERVIEW OF EVIDENCE:

- **Jill Olivier**, Senior Lecturer and Research Coordinator, University of Cape Town, Health Policy and Systems Division, and JLIF&LC Steering Committee Member

POLICY FRAMING:

- **Timothy Evans**, Senior Director, World Bank Group

CASE STUDIES:

- **Christopher Simoonga**, Director, Policy and Planning, Government Ministry of Health, Zambia
- **Freddie Ssengooba**, Associate Professor, Makerere University School of Public Health
- **Samuel Orach**, Executive Secretary, Uganda Catholic Medical Bureau
- **William Clemmer**, Country Director and Technical Advisor, IMA World Health

EXPERT COMMENTARY:

- **Khama Rogo**, Lead Health Specialist, Health in Africa Initiative, World Bank Group
- **Bruce Wilkinson**, President & CEO, Catholic Medical Mission Board

SUMMARY: The **HEALTH SYSTEMS STRENGTHENING** session presented cases of deliberate engagement in health systems strengthening with non-state religious health providing institutions and networks – in particular those in sub-Saharan Africa. The discussions focused on issues relating to public private partnership and implementation practice in fragile systems contexts. The session demonstrated the availability of evidence of faith-based contributions to health systems strengthening, but highlighted the issue of translating evidence into best practices, especially given the complexity of each local health system.

To open Health Systems Strengthening, the first working session of the conference, **JILL OLIVIER**, University of Cape Town, Health Policy and Systems Division, and JLIF&LC Steering Committee member presented an **overview of the evidence**⁴³.

“The message that there is no evidence is not entirely true,” she said. “There has been more and more, recently. Now, the real problem is translating that evidence into practice.” She explained that evidence varies depending on the disciplinary area, as different backgrounds have different ways of engaging on topics. For instance, the evidence is focused on different kinds

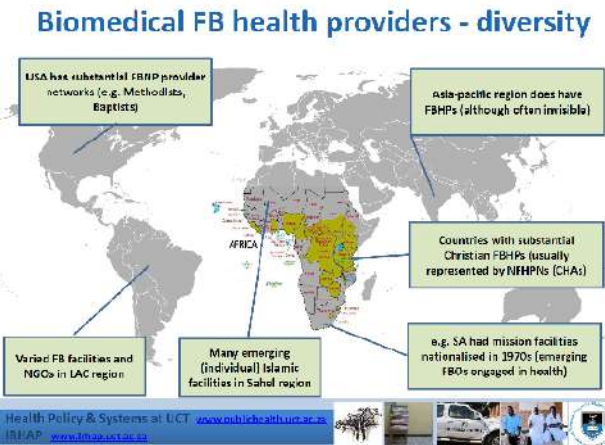


Figure 2: Diversity of Biomedical FBHPs

of religious entities: NGOs, hospitals, schools, and universities. Additionally, there is often a religious and secular divide in the evidence. As a result, there is a lot of *cross-over and complexity* that makes the gathering of systematic evidence very difficult, especially having to examine different databases.

With respect to the geographical distribution of the evidence, Olivier acknowledged that the bulk of evidence focuses on African faith-based health

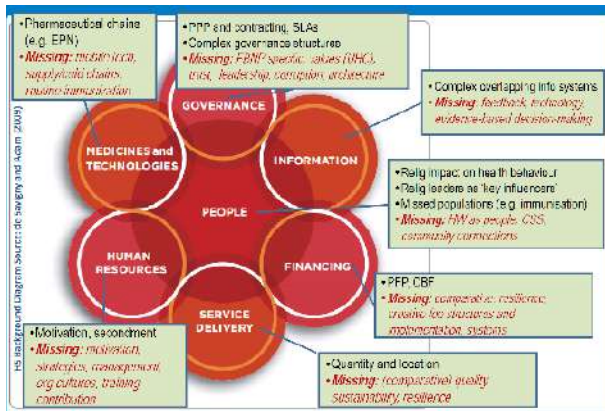


Figure 3: The “Missing Link”

providers (FBHPs), but she is encouraged to see that in various other regions the evidence is growing.

She reminded the audience that it is important to bear in mind that “even when looking at just biomedical faith-based health providers, there is still a range of kinds of things that we are talking about.” There are multimillion-dollar hospitals that are run by FBHPs and there are small community clinics. “It’s a reminder that we are addressing all these kinds of things when talking about evidence.”

Although there is evidence on each of the different building blocks of health systems; Olivier explicated there are still several elements missing.

OLIVIER notes that there have been calls for evidence on basic mapping of the various types of FBHPs including

traditional, non-mainstream, and non-networked entities. Furthermore, she stated there is a need to understand the unique health systems’ architecture and interactions especially before FBHPs fully integrate into the public system. There is especially a need to comprehend how FBHPs can help achieve universal health coverage and to understand the resilience that FBHPs may provide in fragile systems.

From a policy perspective, **TIMOTHY EVANS**, Senior Director, World Bank Group, said this work provided the opportunity to think systematically about faith-based health care and how it works in a health care framework.

“These things don’t work in a silo, but are interconnected,” he said. Thus, he said we need to look at FBHPs in the context of a broader health system framework. Additionally, he said within the health systems framework there is a need to develop standards to determine what good performance is. “We need to determine what constitutes good performance within the management of the workforce, the management of supply chains, and the financing of the system.” We need the standards to measure this performance in such a way that it feeds back into the daily information systems and allows for improvements.

CHRISTOPHER SIMOONGA, Policy and Planning, Government Ministry of Health, Zambia presented a case study on [Key Lessons on PPP between Chaz and MoH](#)⁴⁴.



Group Discussion Table

The faith players have had a historic role in the country, going back to pre-colonial years. Simoonga said faith-based organizations were the sole providers of medical services during the pre-colonial era, in management of leprosy cases, maternal health, medication access, and nutrition. “Then, in 1964, Zambia gained independence and a new government of President Dr. Kenneth D. Kaunda came into force and immediately ensured there was further infrastructure development in order to improve access to medical services. “This accelerated health infrastructure development was meant to bridge gaps and improve geographical access to health services,” Simoonga said.

Albeit the government through the Ministry of Health (MoH) operated its own hospitals and training centers for health workers, it took steps to realize the importance of faith-based work in health. With this recognition, the government facilitated:

- Expansion of the mandate of the religious organizations in health
- Increased activities by missionary medical teams
- Expanded services, including community health promotion

In the 1970s, Churches Medical Association of Zambia (CMAZ) was created as body corporate with a core mandate of coordinating church owned hospitals and medical missions in the country. “Over the years, the mandate has expanded significantly leading to the transformation of CMAZ into Churches Health Association Zambia (CHAZ),” said Simoonga. “It now covers medical services, training of health workers, and health promotion.”

In 1991, the new government of President Dr. Fredrick J.T. Chiluba, embarked on radical public health service reforms premised on the need to strengthen leadership and partnerships and improve accountability. The mission of the health reforms in Zambia was to provide equity of access to cost-effective quality health services as close to the family as possible. Over the years of reforms, the emphasis has been on joint programming of health services delivery, governed through a sector-wide approach (SWAp) Memorandum of Understanding (MoU) that espouses mutual accountability and strong partnerships. CHAZ

as a key signatory to this MoU, represents the non state actors including faith-based institutions to the health sector development agenda.

“The partnership between the CHAZ and Ministry of Health has grown from strength to strength,” said Simoonga. Today CHAZ is a second round Principal Recipient (PR) of the Global Funds to Fight HIV/AIDS, TB and Malaria (GFATM), with a significant part of this funding being directed towards non state actors including religious health institutions and facilities across the country. CHAZ and the MoH have continued working closely together on policy dialogue and service delivery to oversee hospitals, health centers, and training institutions, strengthen health information systems to provide better reporting and results, and strengthen storage and distribution of essential medicines. “This is complementary support,” said Simoonga. “There is no such thing as CHAZ health facility. Wherever there are gaps and shortfalls, there is always a prompt horizontal response through sharing of essential medicines and other medical supplies for better patient care.”

At least 75-percent of CHAZ funding comes from the government, and health workers including Doctors and Nurses are on the Government Payroll but seconded to medical facilities under CHAZ. “This partnership between CHAZ and the government is anchored on a robust, sector-wide programming framework. It has grown on a culture of mutual accountability, recognizing the policies of each partner,” said Simoonga. “The PPPs present major opportunities for scaling up efforts in health service delivery to achieve the desired outcomes through the leveraging of financial, technical, material and logistical support.”

Moving to Uganda, **FREDDIE SSENGOOBA**, Associate Professor, Makerere University School of Public Health, and **SAMUEL ORACH**, Executive Secretary, Uganda Catholic Medical Bureau, presented ‘The case of private-not-for-profit health sub-sector in Uganda’⁴⁵.

Samuel Orach began with key messages:

- Public-Private Partnership in health in Uganda is not new, but started in the early 1950s.
- Private-not-for-profits (PNFP) are a



Samuel Orach, Uganda Catholic Medical Bureau

significant feature of the Uganda health sector: 43% of all hospitals are PNFP, and 75% of PNFP coordinated by religious Medical Bureaus.

- Building and sustaining a strong local foundation is a prerequisite for success of programs and strategies.
- All successful programs take advantage of better systems in PNFPs and PPPs.

Orach said PNFPs have made important contributions to Uganda's health systems, and this success is attributed to the work of umbrella organizations, known as medical bureaus. Through coordinated efforts, these bureaus have worked on systems strengthening and building partnerships. He demonstrates the efficiency of these bureaus by giving an example in Uganda. When the Catholic Medical Bureau took over a HIV/AIDS Care and Treatment project from AIDS Relief (a consortium led by Catholic Relief Services) the number of Catholic health facilities benefiting from the project increased from 12 to 19, beneficiaries on antiretroviral therapy increased from 26,000 to 45,000 in just two years with slightly less money.

"Now, this achievement is threatened by donor agencies that mostly support the government and not faith-based organizations," said Orach. He said there has been a move toward reducing support from the national government to the PNFP, and more

dependence on fee-for-service by PNFPs to sustain services. He said sustainable development in health requires building on, strengthening, and sustaining existing indigenous faith-based structures. He reiterates that it is important to support different elements of these systems, such as governance and management (including central coordination by the bureaus), human resources, information technology and data / information management, service delivery, rather than destroying the system. Lastly, he states that integration and systems strengthening will occur over a period of time. It requires longer term engagement and resource availability, all the more reason it is better to support or work through local umbrella organizations who will be available over a longer period of time to continue the systems strengthening work.

FREDDIE SSENGOOBA presented a Uganda Catholic Medical Bureau (UCMB) case study on 'Financing lower level PNFP providers in Uganda.' As Orach explained the UCMB, which manages the entire Catholic health network, has partnered with government, communities, and development agencies.

After 2003, government support flattened out, donor funds reduced, and user fees from the communities widened, paying for the majority of care. Currently, only 16.5 percent of government's health budget allocation goes to PHC non-wage NGOs.

In response to the government subsidies, PNFPs tried to adopt and integrate government systems and protocols to work with the government on a number of ventures. Furthermore, the PNFPs have tried to reduce user-fees with standard flat fee structures. PNFPs also began to assert their autonomy to ensure governments do not micromanage and have considered results-based financing mechanisms to prove their accountability to the government.

Ssengooba said there have been backward linkages to support performance of PNFP network members, including the following:

- Accreditation system to hospitals and centers
- Quality of service surveillance and reporting
- Training of hospital managers
- Professionalization of hospital management

- Hospital charters, workforce policies
- ICT capacity building for member organizations
- Recruitment, training and supervision diocesan officers for decentralized monitoring
- Training of Governing Boards for hospitals

“Overall, there has been a lot of hands-on support on how to help the sector grow,” said Ssengooba. “But there’s a lot of competition for the workforce. We’re losing the workforce to the government.” He said going forward, Uganda could try to imitate Zambia and have both sectors funded by the government.

In response to the Zambia and Uganda case studies, **KHAMA ROGO**, Lead Health Specialist, Health in Africa Initiative, World Bank Group, provided expert commentary.

“From what we’ve seen of Zambia and Uganda, it gives us a flavor of what’s happening to faith-based services in Africa. Traditionally, in terms of health systems, they been strong in three areas.” The first is in human resource development. Their role has however been progressively after independence and has not kept up with population growth and complexities of workforce skills. “We are disproportionately relying on the government institutions to train health workers but the production is highly deficient adding further to the African HRH crisis.” Secondly, they have been strong in service delivery however, similarly to the demand

for human resources, the expansion of services has not measured up to the demand and may have shrunk in several countries due to financial constraints. With respect to financing, Rogo stated, “Faith-based health facilities are now, like the commercial private sector, almost entirely reliant on out of pocket expenditure and/or whatever little support the governments can give. The philanthropic base we used to rely on from outside is diminishing, and rightly so.”

He said the two case studies have several things in common, especially the MOUs with government that represent the ‘contracts’ with SBOs but are rarely honored. “But the World Bank Group has done work on the partnerships between public and private providers in Africa,” he said. “The publication *Healthy Partnerships* covers 52 countries, and it shows on a scale of one through ten that most countries are at two to four in various parameters of these relationship, and that we need to move from MOUs towards clear and unambiguous legally binding, contractual arrangements.”

Rogo outlined five recommendations.

1. *An update on the business models of FBOs in health.* “The business model has not changed over the last century. Faith-based institutions are still relying on individual donors, and people of faith to manage them, but we need a new model,” he said. “If we continue with the old business model, relying on the same pool of philanthropists, we are unlikely to grow at a time when the poorest in Africa are not receiving health services...not from the government nor FBOs. We must urgently address this by revising the business model.”
2. To make progress, he said *all private sector parties must work together*, not as sub-groups, but as one solid non-state actor group. In East Africa, he gave a successful example of federations/alliances (KHF, UHF, RHF and APHTA) where all non-state actors in the country come together and have federated to give them a stronger voice and bargaining position to negotiate with the government and participate effectively in presidential economic fora. “Let’s stop fragmenting the non-state actors in FP and NFP, they face similar problems and can advance their cause more rapidly by sticking together.”



Khama Rogo, World Bank Group

3. *Regulations need to be revised and updated.* “In Africa, some regulations pre-date independence. Some are so old and ridiculous they should not be in the books anymore. Some do not allow training by non-state actors nor allow governments to sponsor students to train in private institutions.”
4. *Create a template to be adapted for each country* outlining dialogue process and identifying policy and regulatory impediments that make it impossible to reach the last mile, as well as potential investment areas. “Let us move together toward the realization of demand side financing, and create a new business model based on realities on the ground, not on people who will bring you money by air, because sometimes, air travel is not possible.”
5. *Reach out to wealthy Africans for assistance.* “Are you too proud to reach out to rich Africans to help you?” he asked. “A new business model must run on sustainability. We should know where the money is coming from, convince those we’re working with that the money is needed, and work together across sectors.”

Moving to post-conflict areas, **WILLIAM CLEMMER**, Country Director and Technical Advisor, IMA World Health, presented a [case study on South Sudan and the Democratic Republic of Congo](#)⁴⁶.

“In DRC, I want to underscore how health systems set up by faith-based organizations have become models of support and have been adopted by the government to help sustain services in turbulent times.” He said Protestant and Catholic churches were instrumental in creating the current concept of health zones in DRC. These health zones became models that were adopted by the government. The health zone was an area of intervention where the hospital would do vaccination, for instance. In the 1990s, 50-percent of the 306 health zones in DRC were co-managed by faith-based organizations. “This shows the impact of churches,” Clemmer said.

He emphasized three main points from the case study on DRC:

1. Faith-based organizations played a key role in developing DRCs sustainable and decentralized health system.

2. The country opted for health zones rather than health districts because of church-managed hospitals.
3. Faith-based hospitals and their health zones helped to sustain and rebuild the health system in post-conflict DRC.

“During the conflict and crisis of the 1990s, any institution with fuel, money, drugs, or personnel became a target. Health zones became targets. They were decimated. But because of this health zone system where each zone could manage own health care needs, they were able to carry on independently of whatever happened in the capital,” Clemmer said. “During conflict, the value of faith-based systems and their durability were tested. Health care workers in faith-based zones were the ones who stayed. They saw clinics not just as job, but as a livelihood.”

He said that faith-based health facilities are usually owned by the local community, so rather than flee when rebel soldiers came in, most health care workers stayed. This made hospitals and health care facilities much easier to get started back up post-crisis.

In **South Sudan**, Clemmer said the main takeaway was that faith-based entities do well by investing in people. Again, he had three key points:

1. South Sudan successfully aligned donors to specific geographic areas.
2. South Sudan’s 80 counties were to have health services managed by NGO lead agents under a single fund-manager, under a single donor.
3. IMA as fund-manager of two states under the World Bank financed project contracted 4 of their 24 counties to civil servants rather than NGOs.

Clemmer explained that prior to independence, about 90-percent of health services were rendered by NGOs. But these NGOs were expensive, and the health care system in South Sudan was fragmented and costly. When South Sudan attained independence in 2012, the Minister of Health called in donors and created a new donor health system where he assigned donors to specific areas. There would be one lead agent per state, and that agent would subcontract counties to lead agencies because it was less expensive to subcontract the government than to sub-contract NGOs.

The case study found that not only were government agencies able to manage counties responsibly, but their performance was on par with non-government agencies.

“Faith-based organizations as a matter of principle, value humanity,” said Clemmer. “They endeavor not only to be cost-effective, but sustainable.”

In response to the case studies on DRC and South Sudan, **BRUCE WILKINSON**, President & CEO, CMMB, provided expert commentary.

“If we reflect, the MDGs were, in some respects, relatively easy to achieve, even if we haven’t done as well as we would have liked on some, especially health,” said Wilkinson. “When working on the SDGs, especially the first goal which aims to end poverty, faith actors will be extremely important.” He said this is because the faith community has a presence in many communities in which the government and other actors have limited reach. “Those faith communities stay resident—and if you build capacity, you build resilience,” he said. “They are taking care of people’s health, their children, and their future.”

He said resident and resilient capacity is key, and is complementary to government and faith institutions. He gave several examples from his own work:

- In **Goma**, in a refugee camp in 1994, there were 250,000 people in need of help. When wanted to get to the neediest, we went to the faith community and they identified who needed the most help, and 12,000 people showed up.

- In **Sierra Leone** and **Liberia** in the 1990s, we used faith communities to identify those that didn’t receive the help they needed to go on with life.
- In **Mauritania, Chad**, and **Nigeria** during the drought, we sent 250,000 tons of food each month, and used faith communities for mechanism and reach. We had an amazing response.
- In **Zambia** working on HIV, we trained 25,000 community health workers with a 97-percent retention rate over five years because they wanted to contribute back to their community and their community’s health. At end of the program, 25-percent of those recruited were HIV positive because they had gotten medication and wanted to contribute back.”

Wilkinson said without the faith community and without mobilizing and training at the community level, participants could not expect to achieve the reach needed to eradicate extreme poverty.

After the presentations, conference participants split into small groups to discuss their experiences working with different faith groups. They were asked to answer the questions: “*What are the best practice experiences for health systems strengthening in fragile or post-conflict settings? Is there a specific role for faith-based provider?*”



Group Discussion Table

HEALTH SYSTEMS STRENGTHENING KEY RECOMMENDATIONS:

1. Create robust policy frameworks, including contracting mechanisms and improved MOUs, to professionalize relationships and improve accountability.
2. Engage in data-driven dialogue with local governments, FBOs and other community organizations to agree on a coordinated set of priorities.
3. Broadly engage faith leaders to proactively shape health behaviors and attitudes (i.e., to focus on prevention).
4. Invest in developing the skills of locals, including public sector employees, to ensure sustainability, improve quality and provide community insurance
5. Adopt innovative financing mechanisms to improve service quality and retain local ownership
6. Appreciate the distinctive assets of FBOs, including speed and reach, and be adaptable and creative in policies to expand their funding, when appropriate
7. Encourage religious leaders to be more open and proactive in identifying and tackling corruption in faith-based facilities
8. Include non-traditional health quality outcomes (e.g. hope and dignity) in evaluation of FBHPs services

In closing, **TIMOTHY EVANS**, World Bank, said participants raised an abundance of good ideas for moving forward. He summarized recommendations by emphasizing a series of Ss.

- **Scale** - “Not losing sight of the big picture. If in the context of the SDGs we’re really going to achieve what we hope to, we all have a tremendous amount of work ahead of us. Not only are daily efforts important, but efforts that aren’t currently there need to be mobilized.”

- **Speed** - “I am impressed by the relative comparative advantage of the faith-based community where if there is a need, there is a response. Speed is something to be proud of and put into a case profile as something that defines the system’s comparative advantage.”
- **Selectivity** - “In the context of systems, faith-based organizations need to determine where best they fit in or what specific roles to play. The poor, marginalized, stateless, and homeless have a huge resonance in this community. If we do have greater competencies as a global community on how to be inclusive of the most marginalized, that’s a huge asset we can build on.”
- **Synergy & Symbiosis** - “There are ways in which the faith-based communities can work as a complement to other providers (government, private-for-profit, secular/private sector, NGOs), but there are also ways to work symbiotically where there is a co-relationship and co-dependence.”
- **Sustainability** - “We have heard this theme that there is always physical presence of faith-based organizations, which has a sustainability dimension. But I also heard the need for new business models to ensure that you will not try to sustain your enterprises in an outdated context. Thus, we need to sustain what we are doing but adapt.”
- **Service** - “FBOs are committed to people in difficult circumstances and exemplify the value of compassion in their service.”

EBOLA & HIV

MODERATOR & POLICY FRAMING:

- **Sally Smith**, Community Mobilization Advisor, UNAIDS, and JLIF&LC Steering Committee member

OVERVIEW OF EVIDENCE:

- **Susan Parry**, Programme Executive, World Council of Churches

CASE STUDY:

- **Abu Bakarr-Conteh**, President, Inter-Religious Council Sierra Leone (IRCSL)

EXPERT COMMENTARY:

- **Robert J. Vitillo**, Head of the Caritas Internationalis Delegation to the UN in Geneva, Special Advisor on Health and HIV, Caritas Internationalis
- **Christo Greyling**, Director Faith Partnerships for Development, World Vision International
- **Nicta Lubaale Makiika**, General Secretary, Organization of African Instituted Churches
- **Frank Dimmock**, World Mission Catalyst, Addressing the Root Causes of Global Poverty, Presbyterian Church
- **Christopher Benn**, Director of External Relations, The Global Fund to Fight AIDS, Tuberculosis and Malaria

SUMMARY: The **EBOLA & HIV** session included case studies and expert commentary on the response to the HIV and Ebola epidemics. The discussion focused on the importance of drawing on lessons learnt from the recent Ebola crisis and on the thirty years of experience in combatting HIV. The session aimed to provide a framework of lessons learnt to help inform future responses to public health crises. In both HIV and the Ebola response, faith-based organizations played an important role at all stages of treatment and care. Thus, the session emphasized the need to overcome prejudice and seek common understanding to build effective partnerships with faith-based organizations.

SALLY SMITH, UNAIDS, and JLIF&LC Steering Committee member, opened the Thematic Focus: Ebola & HIV session, highlighting the linkages between the two diseases, and implications for ending extreme poverty.

“This morning we said that ending extreme poverty and ending AIDS are inextricably interlinked. The world will not achieve the goal of ending extreme poverty

unless we simultaneously address the issues critical to ending AIDS, Human Rights, marginalization, inequity and criminalization. We have thirty years of experience to draw on, from the HIV response. I hope that in this session we can draw on this work, and recent collaboration around Ebola, to learn lessons that will inform future responses to public health crises post 2015.

“In both HIV and the Ebola response, faith-based organizations provided much of the care and were often the first to provide local support. FBO service providers provide a significant proportion of healthcare with retention rates, equal to or better than nationally reported rates: for example Aids Relief and their implementing partners in 10 different countries over 9 years reached over 700,000 people with HIV care and put over 400,000 people on ART, with combined viral suppression rates of 88.2% and 83% retention rates—“those are huge – let us hear the contributions of some of these partners here today.” We see similar things in the Ebola response as nearly a quarter of a million religious and traditional leaders have been



Susan Parry, World Council of Churches, speaking on the Ebola & HIV Panel

trained and deployed in the Ebola response according to UNMEER & UNICEF database.

“These organizations, however were not always included in policy and planning when larger organizations came on the scene. “It’s important to learn from the HIV response and Ebola, consider what as a health community we failed to do, and how we can learn from these examples and take the lessons forward in strengthening health and community systems to achieve universal health coverage post 2015.”

SUSAN PARRY, Programme Executive, World Council of Churches, in her [presentation](#)⁴⁷ elaborated those linkages. She focuses firstly on the responses of the religious leaders and interfaith collaboration and secondly on the responses of the church health institutions to the Ebola crisis.

Whilst presenting data from multiple sources, she made particular reference to [a study commissioned by CAFOD, Christian Aid, Islamic Relief, and Tearfund](#)⁴⁸, which demonstrated the essential role that faith leaders played, from the initial stages of the epidemic, in social mobilization, reducing stigma, physical assistance to the quarantined and the survivors and in psychological support. The study found that the interfaith collaboration was unprecedented and that religious leaders of all faiths used existing platforms (inter-religious councils, interfaith health task forces, Malaria and immunization networks, HIV networks,

Church pulpits, Mosques etc.) to raise awareness about Ebola and address stigma. They used every opportunity to promote positive messages. More than 2,112 religious leaders and traditional leaders were involved in promoting the safe burials, as well as supporting sick persons and reintegration of Ebola survivors.

“Faith-based organizations and religious leaders have a historic presence through war and peace. There is no exit strategy. They accompany people throughout their lives,” she said. Thus, in Sierra Leone and Liberia during the height of the Ebola outbreak, faith leaders played an essential role in social mobilization and behavior change through using accepted Biblical and Quranic verses, widespread access to communities and long-standing trust. Reports indicate that 70% of referrals to community care facilities were made by the religious leaders and social mobilizers.

“As far as scale, the numbers are massive,” Parry said. In Guinea, as of June 2015, the General Secretariat for Religious Affairs coordinated the training and sensitization of 4,324 religious leaders with the support of UNICEF, including 1,625 in the five communes of Conakry, 1,104 in the prefectures of Coyah, Dubreka, Boffa and Forecariah, and 1,595 in other prefectures. In Liberia, UNICEF reported that 202,820 religious and traditional leaders were reached through community discussions, in comparison to 7,370 front-line mobilizers trained by the Ministry of Health with support from partners, and 565,697 households

reached through door-to-door visits by UNICEF and its implementing partners. Whilst in Sierra Leone, 18,792 religious and traditional leaders were orientated to support community engagement around Ebola.

The Church Health Institutions in Africa, she noted, are non-partisan in their service delivery and are essentially the bedrock of rural health care, contributing to a substantial proportion of national health care, particularly in the hard-to-reach and underserved areas. “When Ebola struck, these institutions chose not to deal with Ebola cases for which they didn’t have skills, training or facilities,” Parry said. They decided to take a two pronged approach to address this epidemic.

- Despite orders from the governments to close, “they kept their facilities open to assure other essential medical services were still provided.” These institutions provided triage, protective equipment and essential drugs, where the government was not providing, as well as health worker training.
- “On the community side, they realised they couldn’t wait for patients to come to the hospitals, so they went out and found the patients themselves,” said Parry. “They trained people who then trained general community health volunteers to locate the dead, assist with safe burial processes, immediately isolate those who were ill in advance of referral, and helped communities to understand what they were dealing with.” In Sierra Leone, for example, a consortium of 1,425 volunteers visited 160,000 households and followed up on suspected homes for 21-90 days.

The faith communities of World Council of Churches (WCC), Caritas Internationalis, World Vision (WVI) and Islamic Relief collaborated with WHO, UNAIDS and IRCRC to change the burial procedures from ‘dead body management’ to ‘safe and dignified burial practices’ and to widely promote them through the faith networks. WVI, Catholic Relief Services and Catholic Agency for International Development then formed a consortium and assumed responsibility for over half the burial teams in Sierra Leone to ensure cemetery care and respectful safe and dignified burials. This resulted in dignified burials of over 16,000 people and considerably more acceptance amongst the people.

She said that one of the biggest challenges the UN and other agencies face is prejudices and pre-conceptions that associate faith-based humanitarian service with proselytization. “But faith-based organizations complement government services. There is an under-appreciation, within the UN system, of the extent of the faith based presence, capacities, local knowledge, socio-cultural understanding and community linkages.”

In future epidemics, Parry said early engagement of faith-based organizations is critical. “They need to be recognised in policy planning, implementation and budget planning,” she said. “If the bottom line is the dollar, it is cost-effective to engage in the faith-based community.”

Focusing more on Sierra Leone, **ABU BAKARR-CONTEH**, President, Inter-Religious Council Sierra Leone (IRCSL), answered the following question from moderator, Sally Smith:

Can you tell us what the faith community did in Sierra Leone to respond to the epidemic? How did your response build on previous work and partnerships both during the war and in responding to HIV, or supporting national immunization programs?

Abu Bakarr-Conteh [outlined the IRCSL’s Ebola response as follows](#)⁴⁹:

The IRCSL came into existence to broker and consolidate the peace process during the civil war. The IRCSL played a pivotal role in bridging the gap between the rebels and the then Sierra Leone People’s Party-led Government. The Council also contributed to major Child Health ventures such as the Universal Child Immunization and polio free Sierra Leone.

1. Political Engagement

The organization first engaged the Presidency and implemented three days of national prayer and fasting, as well as advocated for the Declaration of Public Health Emergency, especially in regions hit by the epidemic, known as “epi-regions.”

2. Partnership Creation

IRCSL created partnerships with civil society organizations and UN agencies for social and resource mobilization and capacity building.

3. Community Level Implementation

The IRCSL in collaboration with FOCUS 1000 (CHRISTAG AND ISLAG) and the Religious Leaders Task Force created interreligious Ebola Viral Disease (EVD) prevention messages and engaged churches and mosques, modified and sanctioned some religious rituals such as on hand shakes, temporarily closed praying in some epicenter communities, trained religious community mobilizers, contextualized and implemented the WHO Safe & Dignified Burial guidelines, and provided sanitizers in every mosque and church.

Moving from Ebola to HIV, Abu-Bakarr-Conteh discussed the Sierra Leone Inter Religious AIDS Network, or SLIRAN, an off shoot of ICRSL created primarily to support the national response to HIV. With support from UNAIDS, SLIRAN organized Religious Leaders to target one of the most affected communities in Port Loko District, Northern Sierra Leone. SLIRAN specifically:

- Conducted awareness-raising and mobilized communities for EVD Services
- Documented EVD experiences for community preparedness targeting community stakeholders (Religious Leaders, Traditional Healers & Chiefs, and EVD Survivors)
- Created linkages and partnership for experience sharing between EVD survivors and the network of PLHIV
- Documented psychosocial and Livelihood Needs Assessment of about 100 EVD survivors in the target community

On both HIV and Ebola, Abu-Bakarr-Conteh noted similar challenges. Though the epidemics are fading, he said the challenges still remain “such as poverty and limited funding to sustain efforts.”

The [expert commentary](#)⁵⁰ followed.

Smith asked **ROBERT J. VITILLO**, Caritas Internationalis, what the faith community brings the emergency response and what more could be expected?

Vitillo reiterated the case studies’ points that faith-based organizations are in communities before a crisis begins, and after foreign governments and NGOs leave. “But

we haven’t talked enough about community clinics,” he said. He told a story about his first trip to Liberia, where he went to see the Minister of Health. The Minister explained that more people were dying of appendicitis and motor vehicle accidents due to the absence of these clinics. Understanding the important role these clinics play in the health of the population, the Catholic Church in Liberia worked to keep 16 of its 17 community clinics open in Liberia.

He also noted that faith-based organizations are often the only provider in the area they are serving. Thus, he stated that there is a dire need of access to funding and resources “in accord with the burden of care we shoulder.”

He emphasized the values that faith organizations bring to all the work they do. He emphasized that faith-based organizations also serve *all* without discrimination. He said, during the Ebola crisis, a patient was never asked by faith-based care providers about his or her gender identity or sexual orientation before she or he was provided with care. He notes that, “our vocation comes from a higher call; it is important to remember we have other values and principles that motivate and guide us.” Furthermore, he states that faith organizations bring a more holistic approach to care treating “the whole person and the whole family; there is no question of silo approaches,” he said. Additionally there is a spiritual element to the care they provide.

He also called for the re-imagining of “person centered healthcare” together with other sectors “and for not simply being told how we need to change what we have done for hundreds of years as it is no longer sustainable.”

In his concluding remarks, Vitillo said, so far, participants hadn’t heard from those who receive services. “We need to remember the stories of those who need our services, and work in accordance with their needs, not in accordance to what we think is right to do,” said Vitillo. He wanted to bring that voice, so he read a letter from an orphan from Sierra Leone whose parents died because of Ebola:

“Dear Father Peter, I hope you remember the girl you met in the center with her younger brother. I told you there were eight of us and we lost both of our parents. I was sick with my younger brother but the two of us survived, thank God. Father, things are very hard with us. Our

auntie lives with her three children and no husband. We try to help her sell soap, but three times they have tried to rape our sister while she was out selling. My brother is not doing well in school because his eyes still hurt. I don't know where my parents are buried and I can't speak with them about what is happening to us. Auntie is looking like she's tired with us. The other day I caught her crying in her room and it made me very sad."

Smith asked **CHRISTO GREYLING**, Director Faith Partnerships for Development, World Vision International from his experience with faith based organizations in HIV and Ebola *what needs to be done in future public health emergencies?*

"We need to look at work that has been done, the realities of HIV and Ebola, through a new lens. At the good, bad, ugly. There were fantastic things, but we must also acknowledge there is room for improvement for all of us. "If I look back at HIV itself and Ebola, I recognize that there was harmful messaging, messaging not sufficiently vetted, and messaging not really speaking to local customs and practices," he said. For example, messaging for HIV was "HIV Kills," and it was initially the same for Ebola.

He pointed out that on HIV, local faith communities were excellent in responding to care and support, but had a hard time speaking about tough issues on holistic prevention messaging. "Often, messaging from faith communities started off with judgment and pointing fingers and stigma," he said. This was also the initial case on Ebola. "We hear things like Ebola was a divine punishment for acts of homosexuality and corruption," Greyling said. "Churches utilized scriptures, and said if people prayed, then God would heal them. This messaging is not conducive."

Going forward, he said, there should be targeted, faith-specific programming for faith leaders and communities⁵¹. "It needs to speak from scriptures, and to include full and comprehensive information which bridges the scientific, biomedical and technical gap with the faith communities' dimensions." This is necessary to foster behavioral change and combat resistance. He said providing a safe space for faith leaders was also important. "Faith leaders need a safe space to struggle with issues to look at their scriptures and to talk to one another where they can discover, frame, and embrace their responses," he said.

Most important, Greyling said, is trust. "At the bottom of it all, if there's no trust, there will be no results. The initial Ebola response sent in strangers and young people, which led to mistrust, denial, and inaction. When faith leaders became involved, then the messages were embraced," he said

"In the future, we must put people first, ensure the message is coherent and delivered by trusted messengers, and ensure faith communities are part of preparedness and recovery."

In his [commentary](#)⁵², **NICTA LUBAALE MAKIKA**, Organization of African Instituted Churches, stressed the importance of working on the community level.

"Even in faith communities, there is sometimes a struggle to fit in," he said. "Even when working in a community, government agencies and other organizations that respond to emergencies think the response from faith communities has to flow from the headquarters of faith communities."

Instead, Lubaale said agencies should look at the role of imams, pastors, and priests in local communities, because they're at the front lines. "Many times we arrive with prescriptions for patients to tell them what to do" without recognizing that "even if there are no systems, someone has been playing that role," he said. We need to identify the people playing this role and learn about the informal institutions. "A study that was carried out in Korogocho, an informal settlement near Nairobi, revealed that sixty-percent of mothers give



Christo Greyling, World Vision International

birth with a traditional birth attendant. Why? They say they care for them better, they never go on strike, they never close their doors, and they treat them with respect,” Lubaale said as an example. The values of the traditional birth attendant are needed in the training of the midwife.

He pointed out there are other health crises which are ignored, because they never become health emergencies. “Every day, pastors are burying people and we say, ‘God, bring back the servant you have called home,’ but really it is a mother who has died giving birth and God is not calling African mother to heaven earlier than the mothers in Europe” he said. “These preventable crises have never become emergencies. They are the things we have to deal with.”

Lubaale said the biggest challenge going forward would be to find what gaps the informal health care systems are filling, and to look at these gaps before a crisis hits. He also reminded that what is informal to larger agencies is what is formal to communities, because that is what is accessible and known. “We who arrive at time of crisis are what’s informal to them,” he said. “In working at community levels we are understanding the health care systems are beyond what we understand.”

Smith asked the following question to **FRANK DIMMOCK**, Presbyterian Church:

What do the faith inspired health care networks bring to health and community systems responses? And how can they be strengthened to be more effective as essential and complementary partners in the national response to the state provided health system?

DIMMOCK said Christian health care providers had added value in responding to the Ebola outbreak⁵³. They are: “part of the community, they have access to volunteers, they reach remote areas, they’re engaged in formal training and community level training, and they’ve pioneered many prevention and treatment methods.”

He took Liberia as an example to demonstrate the value of Christian health networks. The Christian Health Association of Liberia has 58 health facilities, 5 hospitals, other health centers. About 24-percent of the health workforce in Liberia is made up of trained Christian health workers. Those providers responded

most quickly to the Ebola outbreak. They provided financial assistance to survivors, distribution of medical equipment, risk allowance to some of the health workers and strengthened health facilities by installing hand washing stations.

However, there are several challenges that these associations face. For instance, building the capacity at secretariat level, formalizing the Memoranda of Understanding (MOUs) between the associations and their respective governments, experimenting with service level agreements (contracts), and participating in national and district health policy and planning.

The Christian Health Associations are networked continentally under **ACHAP**⁵⁴. This platform enhances the value of Christian Health Associations at a continental and international level through exchanging ideas and lessons, and through technical working groups on areas such as health financing and human resource training. Dimmock suggested this could serve as an example of how faith-inspired health networks can complement national partners to collectively impact health challenges.

Overall, Dimmock said building partnerships requires trust, and agencies must balance the science of health with the worldview and context of local providers.

Smith invited **CHRISTOPH BENN**, The Global Fund to Fight AIDS, Tuberculosis and Malaria, to elaborate on the following questions:

What have been the strengths and challenges of the Faith community as implementing partners of Global Fund Grants? What can be done to strengthen partnerships with FBOs in future public health initiatives?

“The international community has been rightly criticized for responding slowly and inefficiently to Ebola,” he said, “but I don’t think we can say that about communities.” He noted that the community response was much faster than the initial response to HIV, likely because communities were building on lessons learned from the HIV response.

Speaking on the Global Fund’s work on Ebola, Benn said because the organization already had a number of faith-based partners in Sierra Leone and Guinea, they could allow flexibility of resources. “We said, use the resources you have from us for malaria or TB on Ebola,” he said. Those resources were then immediately used

for gloves, masks, robes, and training of community health workers. The Global Fund also partnered with the United Methodist Church's malaria program to produce information on Ebola in 20 local languages.

"The heroic work has been done at the community level," Benn said. "International organizations in Geneva played an important role but it was the communities who made the biggest difference." Benn said in order to prevent similar crises agencies should invest now in communities. "As communities are the front line, they will also be the frontline in any future epidemic or disaster. It is important for international organizations to recognize this and consider it for their current work on building resilient systems for health."

At this point, conference participants again split into working groups to discuss recommendations going forward.

In conclusion, **SMITH** said many of the issues raised by HIV and Ebola were similar. "Community responses are not the same as community mobilization. The community responds to a crisis—drawing on community resilience and systems. Community and religious leaders can help shape messages and mobilize their communities in an emergency. We must draw on existing community structures, including networks of women, youth, faith and older people. The epidemics of HIV and Ebola have taught us that engaging the community has been too piecemeal in the past, and we need to look carefully at how to engage communities fully in disease responses. Careful matching of skills, people and disciplines are needed to make a difference not only for HIV or Ebola, but in other crises? We've got to be much more intentional about documenting the different elements of community responses and strengthening the community systems which build resilience for future shocks."

EBOLA & HIV KEY RECOMMENDATIONS:

1. Document and draw on the lessons learned, tools expertise and existing mechanisms for partnership with FBOs from HIV and other diseases in preparing and planning for future epidemics/crises (e.g. the involvement of PLHIV/Ebola Survivors and addressing fear stigma and discrimination early on).
2. Improve response time at the onset of crises by quickly engaging FBOs already involved in development activities that are often long term, trusted service providers and embedded in the community.
3. Put in place a preparedness plan for emergencies/crises, including engagement of communities and faith leaders with strong linkages between national, district, and community networks.
4. Ensure FBOs are represented in government processes at national and district level to plan, implement, monitor and evaluate epidemic/crises responses.
5. Conduct collaborative, multi-sector (including religious sector) needs and capacity assessments in advance of crises.
6. Establish robust and effective relationships with traditional leaders/healers who may not be part of organized religious structures in order to work with them in future crises.
7. Develop best practice tools (e.g., sermon guidelines on Ebola) and approaches to ensure that FBOs are prepared for outbreaks of infectious diseases/crises.
8. Include religious and community participants in developing, shaping and delivering culturally sensitive messages to communities in times of epidemic or crisis.
9. Build the capacity of faith leaders and health response staff to partner more effectively in health and crisis situations.



Co-host Closing Panel

DAY 3

July 9th, 2015

- RELIGION AND POLITICS: DEVELOPMENT IMPLICATIONS
- CONCURRENT SESSION: SEXUAL AND GENDER-BASED VIOLENCE
- CONCURRENT SESSION: HUMANITARIAN ASSISTANCE AND DISASTER RELIEF
- LARGE SCALE ENGAGEMENT OF RELIGIOUS AND FAITH-BASED GROUPS FOR DEVELOPMENT
- FINAL SESSION: ACTION PLANNING

RELIGION & POLITICS: DEVELOPMENT IMPLICATIONS

THE RELIGION & POLITICS PANEL INCLUDED:

- **MODERATOR:** Katherine Marshall, Professor of the Practice of Development and Religion, Georgetown University, and Executive Director, World Faiths Development Dialogue
- David Saperstein, Ambassador-at-Large for International Religious Freedom, U.S. State Department
- Susan Hayward, Director, U.S. Institute for Peace
- R. Scott Appleby, Marilyn Keough Dean, Keough School of Global Affairs, University of Notre Dame
- Siddharth Chatterjee, Representative to Kenya, UNFPA
- Ruth Messinger, President, American Jewish World Service

SUMMARY: KATHERINE MARSHALL, Georgetown University and World Faiths Development Dialogue, opened the third day with a panel discussion on the interplay of religion and politics. This session explored both positive and negative examples of intersections of legal frameworks and development practice, looking to concrete ways to appreciate and respect the sensitivities around state–religion relationships while helping to maximize positive engagement.

She framed the discussion by stressing diversity: each country defines relationships between secular

authorities and religious institutions and leaders differently. Only by probing country situations can progress be made towards the broader alliances and quality development that we all seek. Norms and specific approaches are defined in constitutions and laws but also in daily practice and tacit assumptions, for example conferring privileges or restrictions for various groups, provisions for education managed by religious bodies, or the circumstances in which practicing faith or proselytizing can (or cannot) occur. Four themes have particular importance: (a) the urgent search for better answers to the crucial but complex question of religious roles in conflict and in situations of extreme poverty and failing governance. Discussions at this conference and in work on religion, development, and peacebuilding, for better or for worse, are part of this broader discussion. (b) Tensions around understandings of human rights color approaches to religious roles in development. Issues around religious freedom and gender roles, including reproductive health, have special significance across the world in reflections on religious roles. (c) Behind the inspirational call for a preferential option for the poor are fundamental questions about how that translates into practice? Do we agree or disagree on what it takes to exercise the option, and to end poverty? And (d) Perceived divides between “secular” and “religious” call for more probing and systematic exploration. The term “secular” can have negative connotations, or can convey a central, positive value. Similar oppositions and emotional reactions apply when the terms religious or faith are invoked.



Siddharth Chatterjee, UNFPA

DAVID SAPERSTEIN, US State Department, began bluntly: “To leave the religious community—representing 80% of the population—out of the work of development is a disaster for the achievement of Sustainable Development Goals.” He emphasized the important impact of World Bank engagement with religious leaders since 1998 and hoped that this would take an institutional and thus sustainable form.

Saperstein highlighted the importance of religious freedom for reaching the goals of development. Religious freedom enhances religious communities’ abilities “to express values, to shape attitudes, to influence policies that are most conducive to the furthering of the implementation of the SDGs.” Conversely, limitations on religious freedom diminish the potential of religious groups to exercise influence towards the vision embodied in SDGs. Limits on religious freedom constrain what religious communities can achieve, including delivery of social services, as well as what religious groups are able to receive.

Saperstein pointed to complications in regard to religious freedom; for example, certain religious viewpoints may violate international law or go against the general consensus. He cited some religious attitudes towards women and reproductive rights, and just war theory. A central challenge today is exploring the role in development work of groups that “may do things that are deeply problematic in some regards but deeply helpful in others.”

Notwithstanding these challenges, Saperstein reminded the group that working through these issues is necessary because religious communities, working in an environment of religious freedom, have crucial roles in combatting corruption, reducing violence, and

achieving sustainable development.

SUSAN HAYWARD, US Institute of Peace, brought up [the consequences of our current trends](#)⁵⁵ in religious engagement: specifically, *who we engage* and *how we engage*.

“There tends to be a phenomenon of engaging the same religious actors again and again,” Hayward said. The religious actors engaged by Western institutions in peace and development work are historically Christian and older men (though Hayward acknowledged this pattern is changing with more engagement of groups such as Islamic Relief and the Sarvodaya Shramadana Movement). Women are marginalized from peace and development work as a result. Hayward cautioned against unintentionally increasing gender disparities in partnership work as a result of efforts to engage the religious sector, citing the growing evidence underlining the linkages between gender inequality and violent conflict.

She cautioned that imbalanced engagement with Christian groups in development and peace work, at least historically, has had negative consequences, especially in post-colonial societies that experienced a significant missionary presence. As an example, Hayward noted that Buddhist monks working on peace and development work in Sri Lanka are sometimes referred to pejoratively as “Christian monks” because this work has historically been so associated with Western agendas and organizations that work more closely with and through Christian organizations. This affiliation has undermined the legitimacy of these monks, the very thing that makes them such important conduits for peace. Moreover, such misconceptions add to the sensitivities about proselytization. In sum,

US INSTITUTE OF PEACE: WOMEN’S RIGHTS IN ISLAMIC CONSTITUTIONALISM

In USIP’s “Women’s Rights in Islamic Constitutionalism” project, legal advocates, political activists, and religious scholars are brought together in countries where the constitution is being drafted or reformed within Islamic frames. The goal is to ensure that women’s rights are protected and advanced. The three groups work together to proceed through the right legal avenues, mobilize political pressure and communities, and to find religious argument and law in support of these rights.

“It is this kind of work—initiatives that are bringing the religious sector into productive engagement with sectors with whom they might not otherwise engage, and that is conscious of pushing beyond simplistic or easy forms of religious engagement, that I think is most exciting right now.” – Susan Hayward, US Institute of Peace

Hayward encouraged donor organizations, especially those from the West, to go beyond “easy” and “visible” targets in the religious sector, including those who “talk and operate like us” in order to ensure inclusive engagement across gender and religion so as to not unintentionally feed historical and broader conflict dynamics and social injustices.

Hayward spoke also of the consequences of how we engage. “Not all religious engagement is good religious engagement. As the international community has begun to dip its toes into religious engagement, it has sometimes taken shortcuts that backfire.” Echoing other speakers at the conference, Hayward warned against instrumentalization of religious actors, seeing them as simply a “resource” for meeting our interests rather than a partner from whom to learn about development needs and processes. She also recognized the value of interfaith dialogue, a common tool for religious engagement; however, in order for dialogue to be effective, it needed to connect to structural issues, such as political and economic injustices, broken governance structures, and legal and other institutional forms of discrimination. Otherwise it can leave participants, especially those from minority or disempowered communities, pessimistic and frustrated with interfaith dialogue that does little to transform current unjust situations.

The important challenge now, Hayward said, is to find ways so that religious actors and their work on development and peace can be better integrated with other related sectors engaged in peace and development to ensure more meaningful transformation—not just on social norms but also the political and legal aspects and institutions conducive to human flourishing.

SCOTT APPLEBY addressed [extremism and the risks of partnership](#)⁵⁶ a topic only briefly alluded to by other panel speakers and the broader conference.

“The dynamic of religious extremism is a real threat to the partnerships,” Appleby stated. Appleby identified “a psychology of grievance, and a logic of reaction” as a driving force among extremist religious actors. The reactivity is primarily against the perceived marginalization of religion at the hands of Western colonial and neo-colonial imperialism; he also attributed the “theology of grievance” to the perceived removal of God “from the legal and moral center of society”.

The extremist groups’ logic of resistance follows that “the most threatening enemy is the fellow believer who has betrayed the true faith and gone over to the other side.” In the context of the conference, included among these ‘betrayers’ are those who are open to partnerships with entities such as the World Bank and other Western donors.

Appleby brought these insights directly back to the conference, asking: “How do we integrate this less than rosy reality of proliferating religious extremism into our otherwise encouraging and constructive conversation about building deeper partnerships with faith-based actors?”

He advanced three suggestions:

1. *Consider the risk that many faith-based partners face for cooperating with the ‘non-believers’, and ensure that security implications are integrated into the discussion of faith-based secular partnerships.*
2. *Let “the religious be religious.” Extremists groups “win hearts and minds (if and when they do) by providing social services under the banner of and in the style of religion”. Failure to “let the religious be religious” could intensify belief in the extremist groups’ claims that they are providing “doctrinally pure” relief, and that ‘betrayers’ have “abandoned the religious precept in favor of the cash infusion, and the prestige of inclusion.”*
3. *Understand that the logic of grievance is due not merely to economic factors, but also that “ideology, and the educational and formational institutions and networks that inculcate it, attract even the well-fed recruit”.*

In order to provide the necessary security and support for faith actors in war zones or at the edge of violent conflict, Appleby argued that we must understand and oppose the logic of religious extremism. “It is these essential and central faith-based partners in development who must always, always hold up the banner of the authentic and deep religious tradition—not the extremists.”

SIDDHARTH CHATTERJEE, UNFPA: Chatterjee took the discussion to a country level, focusing on an eye-opening [interfaith discussion hosted by UNFPA](#)⁵⁷ in Kenya. The discussion centered on Kenya’s high maternal mortality rate and the scourge of traditional

harmful practices like FGM and child marriage.

Chatterjee said that after assembling the religious leaders together from varying denominations, he realized that “education doesn’t necessarily emancipate us from deeply entrenched intergenerational views.”

Chatterjee described one case in which a Christian leader said he did not agree with women’s rights as meaning being pro-choice. In another discussion, two Muslim scholars argued over what constitutes a girl child. One said it was wrong for the constitution of Kenya to identify girls under 18-years-old as children. The scholar added that the prophet got married to a girl who was 6 years old and he consummated his marriage when she was 9; as far as he was concerned, his guideline was the Qur’an and not the Kenyan constitution. The other Muslim scholar differed with his interpretation.

Kenya has strong legislation in place outlawing FGM that is independent of religion, yet Chatterjee said some religious leaders did not agree with the law, arguing that FGM was about keeping the purity of the girl.

Chatterjee said, “it was a revelation for everyone, including a senior adviser to the President of Kenya, who was at the event.” He recognized that religious organizations have the power to transform maternal health in Kenya, but it is necessary now to consider

how to create “a harmonized education system” for those religious leaders and scholars. Most religions treat women unequally, he said, and as long as that fifty percent of the population is kept out of the development agenda, kept out of being empowered and in a state of inequality, the world will never progress.

“I see religious leaders as powerful change agents,” Chatterjee said. “At the community level they are actually the most direct interface between the rule of law, between faith, communities and everything else. And I think these organizations have the power to transform the entire maternal and child in Kenya and end the scourge of harmful traditional practices.”

RUTH MESSINGER, American Jewish World Service, focused her remarks on the tensions that necessarily arise when promoting a preferential option for the poor and religious freedom for all.

“A preferential option for the poor means somebody else gets less preferred,” she said. “When we talk about religious freedom we must be sure it’s central, not an afterthought—not only for ourselves and our groups, but for everyone with whom we work.”

Messinger noted that though we may claim to promote religious freedom for all, the world is not a free place for many people whom our organizations claim to care about. She brought up the LGBTQ community, observing that it is a group that had yet to be mentioned



David Saperstein, U.S. State Department, speaking on the Religion and Politics Panel

at the conference. Religious leaders, even those whose own religion does not accept homosexuality, should broadly celebrate the recent victory of LGBT rights in the US as a recognition of people's freedom and inherent right to be themselves.

Messinger said that in working to create partnerships, we must insist on treating "each person with whom we engage, regardless of his or her nationality or faith or gender or sexual orientation as another one of us, as another person with whom we must find common ground and common cause." Furthermore, we must embrace the inevitable tensions that will arise when engaging with others not entirely like ourselves. Sometimes, Messinger said, the work is "going to be unsettling to us, because of our religious training or because of our national framework or because of our personal orientation. But if we are serious about making a difference in the world and advancing the multiple causes of freedom, then I think we need to be guided by the fact that if no one where we work appears to disagree with us in any regard, then we are probably not doing enough to make a difference."

To conclude the session, **MARSHALL** summarized the controversies put forward. She pointed to lack of coordination, issues around governance and especially corruption, development overlapping with proselytizing, and gender equality as the most



Katherine Marshall, Georgetown University, World Faiths Development Dialogue

significant and common issues facing development and faith-based organizations when they seek stronger partnership. "Gender equality is a litmus test that must be addressed." She concluded, "What does equality mean in the modern context? If we don't address that, it's hard to imagine the partnerships we're dreaming of."

CONCURRENT SESSION: SEXUAL & GENDER-BASED VIOLENCE

MODERATOR:

- **Veena O’Sullivan**, Head of HIV and Sexual Violence Unit, Tearfund UK, and JLIF&LC SGBV Learning Hub Co-Chair

POLICY FRAMING:

- **Zainab Hawa Bangura**, United Nations Under-Secretary-General and Special Representative of the Secretary General on Sexual Violence in Conflict
- **Diana Jimena Arango**, Senior Gender-Based Violence and Development Specialist, World Bank Group

OVERVIEW OF EVIDENCE:

- **Elisabet Le Roux**, Research Director, Stellenbosch University

CASE STUDY

- **Bernard Ntahoturi**, Archbishop, Anglican Church of Burundi

EXPERT COMMENTARY

- **Ayesha Chaudhry**, Rita E. Hauser Fellow, Radcliffe Institute for Advanced Study, Harvard University and the University of British Columbia
- **Idit Lev**, Director of Social and Economic Justice Programs, Rabbis for Human Rights
- **Rachel Carnegie**, Co-Executive Director, Anglican Alliance
- **Mousumi Sarangi**, Program Manager, ICCO
- **Mamadou Lamine Sakho**, Country Director for Democratic Republic of Congo, UNAIDS

SUMMARY: The **SEXUAL & GENDER BASED VIOLENCE** (SGBV) session showcased the potential and demand for places of worship to become places of refuge for survivors of SGBV. Faith communities can play a key role in transforming harmful gender norms and unequal power dynamics, thereby changing the root causes that lead to SGBV. Meaningful involvement of men and boys, demystifying the role of harmful religion and culture, the crucial role of listening to survivors and ensuring opportunities for greater collaboration between policy and practice were key themes.

The Sexual & Gender-Based Violence session began with a video message from **ZAINAB HAWA**

BANGURA, United Nations Under-Secretary-General and Special Representative of the Secretary General on Sexual Violence in Conflict.

In her video message, Bangura urged religious leaders, as the spiritual compass of a society, to fight against sexual violence in conflict. She highlighted the key role that religious leaders, often on the frontlines of their communities, play in protecting women and children, in supporting survivors of conflict – whatever their denominations – thereby guiding their communities to take action.

The Special Representative, who had recently returned from a Middle East trip that included visits to Iraq and

Syria, described an emerging trend of sexual violence increasingly being used as a tactic of terror to target religious and ethnic minorities. She said that these crimes are being committed in the name of religion is an affront to women, the world, and to Islam.

Given the use of sexual violence by terror groups, the potential role of religious leaders in restoring communal bonds is greater than ever. This is a necessity given that, too often, a victim of sexual violence is stigmatized rather than the perpetrator. She spoke about meeting the supreme spiritual leader of the Yazidi community, who urged his community to embrace women and girls released by ISIL with open arms. Countering violent ideology will mean accepting these women and girls – and any children they may have – in a spirit of tolerance, dignity and respect, she said.

The Special Representative also underscored the importance of religious women in a community. Although not always in formal positions of religious authority, they play critical roles in women’s faith networks and organizations, in providing direct services, and are uniquely positioned to help welcome survivors back into communities.

Following Bangura’s opening, **DIANA JIMENA ARANGO**, Senior Gender-Based Violence and Development Specialist, World Bank Group, provided a broad framing of SGBV and [presented evidence](#)⁵⁸ on the prevention of violence against women and girls. Violence against women, Arango said, “is a persistent barrier to the health and development of victims

and communities. It is a profound symbol of gender inequality and social injustice.”

Arango presented a [2014 study](#)⁵⁹ that reviewed 3,000 articles in an effort to understand effective interventions against women and girls; the study found only 27 successful interventions. The commonalities of the primary prevention interventions were: inclusive of both women and men and engaged the entire community, combined multiple approaches as part of a single intervention (group training, livelihoods, social communication), and lasted six months or longer in order to combat entrenched gender norms and attitudes.

Arango pointed out that these commonalities are areas that religious groups can be successful; faith groups engage the whole community and are committed for the long-term to the community. “Faith-based organizations don’t have 3 to 5 year program cycles they have to adhere to; we need community based organizations that can commit to long-term programs,” Arango said.

ELISABET LE ROUX, Stellenbosch University, addressed the topic of evidence for the [role of faith communities](#)⁶⁰ on the prevention and response to SGBV.

She presented the draft findings of a [DFID funded scoping study](#)⁶¹ that is in the process of being finalized. The study, conducted in close collaboration with the JLIF&LC SGBV Learning Hub Co-Chair Veena O’Sullivan and its more than 70 expert members, consisted of literature review, key informant interviews,



Sexual and Gender-based Violence Panel

and a survey. Le Roux said that in spite of casting a wide net for resources and accepting not just academic peer-reviewed journal articles, but also white papers, organizational reports, and other non-academic work, there was a scarcity of empirical evidence. The evidence available was largely American, Christian, and focused on domestic and intimate partner violence.

From the resources, interviews, and survey results, Le Roux drew the following insights:

- Spirituality and religion as a mechanism for coping and healing from SGBV was a common theme, even among secular reports. Survivors seemed to want to turn to faith communities, but would sometimes be dissatisfied with what they encountered.
- Faith-based interventions were largely prevention focused.
- Le Roux noted “big silences” in the literature, particularly in regard to marginalized communities. “We’re not finding interventions that are being done on the SGBV experience of marginalized communities—so LGBTI communities, sexual violence against men.” She also said there is very little evidence for faith groups engaging with perpetrators of violence.

Le Roux attributed these gaps in the literature to a lack of funding and prioritization, the relatively recent focus on SGBV for organizations in the last three years, and the challenge of FBOs to conduct research and especially disseminate findings. She also said that FBOs do not talk about failure: “This was a question in both the survey and the key informant interviews—and not one specific example [of failure] was shared.”

Le Roux recommended that funders should consider investing in the evidence base as a long-term goal, and presented three recommendations for building this evidence base:

1. Create a culture of learning and sharing among FBOs—particularly relating to interventions that are not effective
2. Partner with academic institutions
3. Build research capacity within faith based organizations

4. Le Roux concluded by highlighting the challenge that persists with the search for what is considered research and evidence. Imposing Westernized models of monitoring and evaluation, Le Roux said, may be not realistic or even impossible in many situations on the ground. She suggested “we should start thinking in terms of not pushing all the rigorous research, but even just documenting what groups are doing.”

Moving to a report from a specific country, Anglican Archbishop **BERNARD NTAHOTURI**, from Burundi, presented a [case study from Burundi](#)⁶² titled *The Church Is Silent No More*.”

Ntahoturi said talking about sexual violence has only recently become part of the development discourse, as in the past it was considered a private, family issue. The Anglican Church of Burundi became interested in sexual violence issues after seeing women and children were the main survivors of cycles of wars. The Church then called upon other churches and the government to work on gender violence issues.

Ntahoturi said the study found violence against women does not only cost the women, but also their children and society. “In addressing violence against women we have to work together to translate rights into law, and by law we can offer some form of protection to those at risk of violence, and also penalize the perpetrators,” he said. He said there should be a focus on the legal and justice system, including police training. “Sexual violence against women is not just a human rights issue—it is also a justice issue. The Church, therefore, is silent no more.”

In Burundi, the church’s efforts to fight violence against women started in 2013 with 12 churches engaged and mobilized with a small grant of 30,000 pounds from ERD and Tearfund.

The program trained 24 men and 24 women as community facilitators. Eight pastors were also trained in psychology and counseling. 173 women and 90 girls were engaged in discussions. Ntahoturi said that survivors were supported with food and non-food items, and two houses were built, “but above all, solidarity was being built within the local community by the church.” Through the church, survivors were provided with psychosocial support, income-generating activities, and training in literacy

and economic skills that offered survivors dignity in their communities.

Ntshoturi spoke not only of the success of the program but also the challenges. He presented the following challenges for seeing and improving collaboration and evidence:

- Lack of understanding of faith structures and influence
- Recognition and respect for the holistic nature of faith-based involvement
- Diverse donor demands
- Lack of long-term investment in capacity and implementation
- Lack of consensus and shared understanding of change

Ntshoturi ended with a reiteration of the Anglican Church of Burundi's commitment to caring for survivors: "We have to create together a community of caring and the church wants to be that community, a safe space for those survivors of sexual violence."

Moderator **VEENA O'SULLIVAN**, Tearfund UK, and Co-Chair of the JLIF&LC SGBV Learning Hub called on **AYESHA CHAUDHRY**, Harvard University and the University of British Columbia, to provide commentary following the case studies.

Chaudhry gave two points to consider when thinking about religion and development in relation to Islam.

1. Religious multiplicity should be embraced. "For Islam, there is no one Islam, no one Islamic perspective on any issue. Everything is contested...we have to take into account the political perspectives and its relation to the clerical class." Because of the diverse theologies in Islam, this leads quite often, to a limited clerical influence of Muslims. She cited how FGM was addressed very differently in the Gambia and Egypt. The positive influence of religious leaders was strong in Gambia but limited in Egypt.

Chaudhry pointed out that often, the clerical class in Muslim countries ends up perpetuating racial and gender bias. Men end up speaking for women, and Arab men usually speak for Muslims.

2. Building upon her first point, Chaudhry went on to state, "we need to engage voices aside from the clerical class." She said the clerical class often represents the status quo and can hinder development. It is important, Chaudhry said, to distinguish between religion and the religious establishment. "One of the main challenges we face is not replicating structures of inequality when we mean to be promoting equality."

In her final recommendation, she pointed that Islamic feminists are natural allies for development and health partners, and said we must "support and engage Muslim feminists when working for development."

IDIT LEV, Rabbis for Human Rights, echoed Chaudhry's insights from her own context.

"Promoting feminist Judaism inside religion is a very important thing." Like Chaudhry, she argued for a distinction between culture and religion. She said that "religious leaders need to speak out loudly and say what is religious and what is not," she said. "Otherwise people who are not religious leaders will say they do something because of their religion....using religion as an excuse just takes us backward."

RACHEL CARNEGIE, Anglican Alliance, spoke on behalf of the faith coalition working to end sexual violence "We Will Speak Out", which aims to develop and share best practices and research. She outlined the main themes of the coalition as:



Veena O'Sullivan, Tearfund

1. Engage faith leaders, supporting them to speak out
2. Give a central role to survivor voices in shaping policy and practice supporting empowerment
3. Promote the church as a safe space, a culture of zero tolerance for violence connecting to services
4. Transform masculinities and gender relationships

Carnegie promoted the need for a holistic response that looks at the role of religion in SGBV. She said that perceived barriers must be flipped to opportunities, and cited the conversion of the Church's past silence on HIV and AIDS to an active voice as an example to reflect and learn from.

MOUSUMI SARANGI, ICCO, stressed the importance of engaging the entire community, including men. "How can we make a difference on a micro-level?" she asked. "We need to be more engaging of the community at large, because the church doesn't transform in a vacuum. It is part of society and society is a part of us."

She said male-dominated institutions are an issue, and that women's voices need to be heard in conferences, meetings, and in votes. Most importantly, she emphasized the need to engage with men in a positive way to combat violence against women.

"In our work it has become clear that as faith



Mousumi Sarangi, ICCO

communities we have neglected to critically review their male-dominated institutions, thus perpetuating the suffering of the large group of women and children victims/survivors within our walls. Violence against women is the most prevalent and the most hidden injustice in our world today. The first step to addressing this crisis is acknowledging it exists, even within our faith walls."

She closed with three points:

1. Prayer cannot only be offered as a tool of adaptation to violence.
2. The faithfulness of women is exploited to maintain their submission to violent and abusive husbands, fathers, brothers, sons, uncles and acquaintances.
3. Not engaging men enough. Men are not born violent. Some become violent as a result of destructive beliefs and expectations about what it means to be a man. Working with men and boys can offer new models of masculinity and manhood which reject gender violence and build respect for women and girls.

MAMADOU LAMINE SAKHO, UNAIDS, said that gender-based violence often also results in HIV prevalence.

"At UNAIDS, we have opportunities to work with faith-based organizations on training at a grassroots level," he said. Through this work, UNAIDS has tried to find **key messages**:

1. Sakho said things that have worked include training of trainers, talking, and early HIV testing of victims of sexual-based violence.
2. "As evidence of impact, the numbers of people getting HIV are decreasing in countries where we have faith-based organizations," he said. "If you give them counseling, support, and listen to them, it works." The key, Sakho said, is to act now. "We need to fast track efforts and do it now, with the local communities," he said. "There is no vaccine or cure yet. We have to **give the test to all**⁶³ who need to get it, and if all people are tested, we'll see a difference."

Sakho concluded with the example and experience of UNAIDS⁶⁴ in working with faith communities as key allies. He shared the **framework**⁶⁵ for partnership

developed between UNAIDS and faith groups as a positive example to follow.

At this point, conference participants split into working groups to discuss recommendations going forward.

ARANGO added a closing policy framing: “We know that community based interventions work, faith organizations can work to engage the whole community and challenge unequal gender norms that perpetuate power imbalances and maintain acceptability of violence against women and girls. We need faith communities to document and share their work, become part of the conversation activist and academics are having on effective ways to end SGBV so they can learn from others in the field and so we

can learn from the work being done by faith based organizations.”

O’SULLIVAN summarized the session: “There is a desire for evidence about what works and how we can find the best opportunities to prevent and end SGBV. Survivors carry that desire as much as we do. What they are looking for more than anything else is a better quality of life, for local communities to be safer, and for local places of faith to truly become places of refuge? We need to find that. We really want to know what works, and what we can do to end this.”

SEXUAL & GENDER-BASED VIOLENCE KEY RECOMMENDATIONS

1. Create a framework for engagement between faith leaders, government and other key stakeholders similar to the UNAIDS framework for engaging with faith for HIV and AIDS.
2. Support the transfer of SGBV policy and evidence from a national level to local/community levels through the engagement of local faith leaders.
3. Mobilise and enable Faith leaders advocate for appropriate recognition and response to SGBV in laws (e.g., rape not recognized in DRC law)
4. Provide training for religious leaders to:
 - Discuss narratives against inequality & SGBV through theology (i.e., contextual bible stories, “Islamic reason” for gender equality)
 - Distinguish between religion and culture
 - Remove stigmas about sexuality, sexual violence and related issues
 - Provide inter-religious training
5. Support creation and application of clear and appropriate policies against sexual harassment and SGBV within faith communities and institutions.
6. Develop and provide context-specific tools and strategies to raise awareness, train and mobilize communities. Ensure material is tailored to various groups (i.e., youth, women, men, religious leaders) and includes faith/scripture
7. Support the creation of safe spaces within faith communities for sharing experiences, exploring challenges and promoting best practices in building trust, awareness and commitment to the most vulnerable.
8. Promote positive leadership role models on gender justice and invest in such initiatives in schools, communities and faith centers

CONCURRENT SESSION: HUMANITARIAN ASSISTANCE & DISASTER RELIEF

MODERATOR & OVERVIEW OF EVIDENCE:

- **Alastair Ager**, Professor at Queen Margaret University, Edinburgh, & Columbia University, and JLI F&LC Learning Hub on Resilience in Humanitarian and Disaster Situations

POLICY FRAMING:

- **Shelly Pitterman**, Regional Representative, UNHCR
- **Thomas Staal**, Assistant Administrator, Bureau for Democracy, Conflict & Humanitarian Assistance, USAID

CASE STUDY

- **Shatha el Nakib**, Program Officer, Columbia University

EXPERT COMMENTARY

- **Anwar Khan**, CEO, Islamic Relief
- **Rishiwant Singh**, Asia-Pacific Humanitarian Relief Director, United Sikhs
- **Vinya Ariyaratne**, Sarvodaya Shramadana Movement
- **Dietrich Werner**, Bread for the World

SUMMARY: Local faith communities and groups are often key elements of civil society in humanitarian contexts. Can response by the international humanitarian system more effectively engage with such groups? Do national and international faith-based organizations (FBOs) have a particular contribution to make in forging these partnerships? What are the key barriers to effective partnership? How can active partnership with faith groups maximize the value of engagement with religion without threatening humanitarian principles, such as neutrality? This session reviewed evidence with respect to these questions, drawing upon recent academic research and experiences of attempts at partnership with and between faith groups by representatives of a number of organizations active in humanitarian response and disaster relief.

SHELLY PITTERMAN, UNHCR, [noted](#)⁶⁶ that in working with faith groups, proselytism and accountability are key concerns: “As a matter of humanitarian principles, provision of assistance should not be made subject to

conditionality of any sort.” However, he suggested that stakeholder analyses needed to take into greater account the inherent strengths of faith-based partners. To mobilize these capacities there was the need to ‘invest’ in the relationship, in the interest of building capacity that can be tapped for development and humanitarian interventions in the medium and long-term, not just the emergency phase.

Pitterman suggested that developing expectations regarding the nature of partnership would be useful. “This is a term most often used by the UN. But traditionally the UN has cooperated with faith-based organizations in a punctual manner at the time of crisis rather than forging long-term engagements. Dialogue has often been erratic because of changes in staff and priorities, and also more fundamentally because of different vocabularies and mind-sets. Is there room for an alternative to the culture of accounting for expenses and reporting on results, relying more on trust and softer aspects of partnership?”



Humanitarian Assistance and Disaster Relief Panel

He noted that the UN and faith-based organizations were becoming more literate about each other, but without even better understanding achieving shared objectives would be an elusive goal. “UNHCR is committed to a purposeful effort to consult with faith leaders, faith-based organizations, local faith communities and other faith-inspired actors to assess what is ‘good’ practice and reflect on lessons learned from our cooperation.”

From a [bilateral experience](#)⁶⁷, **THOMAS STAAL**, USAID, observed that faith-based organizations offer unique experience, but also some constraints in their role as partners. He emphasized how across the many types of humanitarian disasters, faith-based organizations can make distinct contributions. In natural disasters, working with faith groups is straightforward, as these disasters are generally not rooted in partisan or cultural issues. But in conflict related disasters, there are challenges, including means of ensuring impartiality. In all types of disasters, he said there is a need to build capacity among faith-based organizations. “There is a good, strong institutional long term presence of faith based organizations. But they need more assistance building organizational capacity, to manage programs, which does not currently translate to effective capacity in disasters,” he said. “The strengths that they can build on is the understanding of the local scene: networks, leaders, mosques, and churches that can be a benefit and can assist the humanitarian response.”

The strength of faith-based organizations lies in their emphasis on equality, humanity, and working together. “There are challenges and issues, but there can be solutions and ways forward,” he said.

ALASTAIR AGER, Queen Margaret University, Edinburgh, & Columbia University, and JLIF&LC Learning Hub on Resilience in Humanitarian and Disaster Situations, [summarized key research evidence regarding the themes of the session](#)⁶⁸.

Ager reflected on the manner in which local religious leaders and community leaders had been consulted during a humanitarian assessment with which he was engaged a decade ago. Engagement had been superficial and tokenistic, with legitimate concerns for religious practice protected by Article 14 of the Convention of the Rights of the Child effectively ignored. The prevailing view appeared to be that religion was more part of the problem than part of the solution.

In subsequent years, however, there has been increasing attention played to the role of local religious actors in humanitarian response. Ager summarized [key findings from a major review](#)⁶⁹ of over 300 studies carried out by the JLI FLC Learning Hub to examine the evidence for the contribution of faith groups to community resilience in the context of humanitarian emergencies. Four major themes could be identified from this literature:

The resources and capacities of local faith communities relevant to the response in contexts of humanitarian crisis are considerable. The range of these capacities had been considered with respect to disaster risk reduction and preparedness; emergency response; and in supporting durable solutions. Resources mobilized through faith communities can be seen to include social, physical, human, financial and spiritual ‘capital’.

The risks of engagement with local faith communities

are nonetheless often considered to be significant. In terms of impartiality Ager said that although there is anecdotal evidence of favoritism in the distribution of food, most agencies on the ground strongly assert that they provide services “on the basis of need not creed”. Research suggests that access to services for women and for LGBT communities is neither better nor worse with faith-based as opposed to secular providers.

A religious perspective can reframe humanitarianism. Rather than seeking religious groups as instrumentally serving an established humanitarian agenda, they can be seen to inform humanitarian practice within a system widely acknowledged as dysfunctional and in need of major reform. If, in the words of one submission to the World Humanitarian Summit, there is the need to ‘turn the system on its head’ to empower local actors, then many of these will be informed by a religious perspective.

It is a major challenge to enable real dialogue with diversity locally as well as globally. There have been major developments in the last few years, with the UNHCR Dialogue on Faith and Protection, the German Government establishing religious engagement as a key pillar of its development strategy, and the current meeting. However, the key challenge was to enable discussions in arenas of humanitarian action. As Ager noted: “It is one thing to create a dialogue in Washington, DC, but it is very different on the ground.”

SHATHA EL NAKIB, Columbia University, [presented a case study](#)⁷⁰ on the support of Syrian refugees by religious groups in Irbid, Jordan.

There is an increasing trend for most refugees to be settled outside of camp settings, where there is limited access to education, health, and food. Jordanians are sharing already limited resources, and the massive influx of refugees has created a degree of tension in many communities.

The urban nature of settlement is often protracted. El Nakib suggested that engaging with faith groups – with established roots in the community – can be a key strategy in such circumstances.

“They have no need for an exit strategy,” El Nakib observed. The research showed that faith groups have eased tension, provided a broad range of assistance,

with the image of Prophet Mohammed being given shelter used as an inspiration for hospitality and support.

Yet, there is a mutual reluctance of local faith groups and international agencies to engage with each other. Local faith groups are seen by international agencies to have low compliance; faith groups see international agencies as politically motivated. El Nakib suggested that the only way forward is much greater understanding from each side.

Commenting on the studies, **ANWAR KHAN**, [Islamic Relief](#)⁷¹, spoke of the crucial importance of engaging with religion in humanitarian emergencies to reflect the concerns of affected populations.

“In April 2003 in Darfur, I spoke with elders in a refugee camp who asked about religion,” he said. “They were worried about children knowing about the Qur’an.” Similarly, in [Kenya in 2011](#)⁷², aid workers asked people what they needed, and they said they needed to establish a Quranic school. In areas where international agencies are working to set up schools, Khan said religion must be taken into account. “If we’re trying to increase the number of children receiving education, we must create a faith-based partnership and network between the government and the people, and provide the sort of education they want.”

RISHIWANT SINGH, [United Sikhs](#)⁷³, echoed Khan’s remarks.

He said in response to the 2004 tsunami in Indonesia, when people were asked what they wanted besides food, they asked for prayer rugs, and copies of the Qur’an. “We teach, do unto others that ‘they’ would like done unto them, it’s a change of perspective from what we think is right for ‘them’ to what they want from us...if everybody in humanitarian service starts thinking in these terms I’m sure we will have better understanding in those whom we serve, making the service more effective and appreciated,” [Singh said](#)⁷⁴.

In disasters, Singh suggested there is often just reaction, not thought, due to the pressing nature of the emergency. When there is the opportunity to include thought in humanitarian assistance though, Singh said, the most important thing is to think about what the people on the ground want and need the most.

He said that religion can be impactful in assisting in challenges. Places of religion serve as base camps in

emergency relief. Religion gives hope and guides people to do good and help, no matter what religion they have. Religion is more than faith. “Religion helps us to face any challenge. Each person may be small, but each person who has a religion can rely on its power and that can be impactful.”

VINYA ARIYARATNE, Sarvodaya Shramadana Movement, also spoke about the 2004 tsunami. He said there are [long lasting lessons from the response in Sri Lanka](#)⁷⁵.

“There were one million displaced and many killed,” he said. “You cannot compare the dynamics of war with the tsunami.” The response was huge, with all faith traditions helping targeting their faiths.

“There can be tensions even in relief,” Ariyaratne noted. There could be tensions when working in multi-ethnic and multi-religious communities. He said looking at how different religions cope and how people have a psychological connection to the situation can be lessons for the future. “The cause of disasters are often interpreted in religious terms to represent punishment, which can have repercussions,” he said. “This is why more needs to happen before the disaster to align in a harmonious way with local groups.”

The fundamental principle is to respect local communities and support them. “This must be done before the disaster hits,” he said.

DIETRICH WERNER, Bread for the World, argued that combining emergency relief and conflict resolution was an important strategy.

He added [several points](#)⁷⁶ to the discussion:

- Protection of local humanitarian staff and local FBO partners is central to all stages of the humanitarian intervention. Churches and mosques sometimes have become easy targets of arbitrary fractional military violence by different parties in regional conflicts.
- There is no principal contradiction between the fundamental principles of humanitarian work i.e. impartiality, neutrality and unconditional provision of help with the core values of a Christian organization.
- Emergency relief needs to take seriously the

holistic psychological and spiritual needs of people, the longing of people for hope, for dignity, for security and for coping rituals in post-traumatic situations. The ACT Principles of Community Psychological Support can be an inspiring and helpful orientation framework.

- Strengthening resilience and preparedness of local populations has become a major issue and strategic goal in recent years.
- We should envision an international platform for the reconstruction of Syria bringing together all key partners in spring 2016 in order to envisage a road map for reconstruction of civil society in Syria. We need a clear signal to go out from this conference that some decisive measure need to be taken to counter the spirit of fatalism and passivity around the Syria issue.
- It should be seriously explored whether an initiative for an International Academy for Training Faith Leaders for Sustainable Development, Peace-Building and Disaster Relief should be planned by some major actors who could develop some common interests in this regard.

At this point, conference participants split into working groups to discuss recommendations going forward:



Dietrich Werner, Bread for the World

HUMANITARIAN ASSISTANCE & DISASTER RELIEF KEY RECOMMENDATIONS:

1. Means of strengthening engagement with local faith communities should be established as a major strand of discussion in preparation for – and in the agenda of – the World Humanitarian Summit in Istanbul, May 2016.
2. Faith-based organizations should articulate more clearly the added value of engaging with religious groups and communities in terms of reach and/or quality of programming. The public sector should consider the wisdom of religion in developing a new framework for humanitarian & disaster relief.
3. In early 2016, a global platform, including all major faith communities, INGOs, donors, and key UN-actors, should be brought together to create synergies between humanitarian and development actors and develop a road map for the reconstruction of civil society structures in Syria.
4. Strengthen the resilience and capacity of FBOs responding to disasters, including through training and certification of FBOs in Core Humanitarian Standards (CHS).
5. Post-disaster response must include the holistic needs of a community including psycho-social & spiritual support, which restore normalcy and build trust.
6. A formalized mechanism could be created within public funders operating in disaster-prone areas to allow small, local FBOs to register and be part of a database who can quickly be mobilized after a disaster.
7. Encourage, lobby, and insist the US CDC support and stimulate mapping efforts at WHO to do real global health mapping inclusive of FBOs in situations and communities in health and humanitarian services.

Ager invited **PITTERMAN** and **STAAL** to give closing reflections based on the session's presentations.

PITTERMAN warned of the risk of a dichotomous perspective, in which the UN and faith communities take action separately. Pitterman stressed the importance of collaboration and coherence between faith communities and the UN, but also within the UN itself. When different agencies work in silos, scarce resources are not maximized.

STAAL was cautious about the perception of partiality when working with faith-based groups. He urged religious groups to support other religious groups to model a concern for impartiality in the provision of assistance. He urged all groups to harness their unique capabilities, networks, and structures to work together and build local capacity.



Shelly Pitterman, UNHCR

LARGE SCALE ENGAGEMENT OF RELIGIOUS & FAITH-BASED GROUPS FOR DEVELOPMENT

MODERATOR:

- **Andreas Hipple**, Senior Program Adviser, GHR Foundation

POLICY FRAMING:

- **Sandra Thurman**, Chief Strategy Officer, Office of the Global AIDS Coordinator, U.S. Department of State
- **Ulrich Nitschke**, Head of Programme Values, Religion and Development, GIZ

OVERVIEW OF EVIDENCE:

- **John Blevins**, Associate Research Professor, Emory University, Interfaith Health Program

CASE STUDY

- **David Sutherland**, International Care Ministries
- **Sunday Onuoha**, Executive Director, Nigerian Inter-Faith Action Association
- **Abigail Nelson**, Senior Vice President, Episcopal Relief and Development

EXPERT COMMENTARY

- **Mark Webster**, CEO, Adventist Development and Relief Agency, Australia
- **Renier Koegelenberg**, Executive Director, National Religious Association for Social Development, South Africa
- **Dinis Matsolo**, Director, PIRCOM

SUMMARY: The **LARGE SCALE ENGAGEMENT OF RELIGIOUS & FAITH-BASED GROUPS FOR DEVELOPMENT** session provided evidence of faith contributions to development, and highlighted the need to recognize evidence—whether qualitative or quantitative—for distinctive faith assets, such as restoration of hope and dignity. Social behavior change was seen as key for successful programs, and religious communities were identified as key actors for changing social behavior at scale.

ANDREAS HIPPLE, GHR Foundation, moderated the panel.

“We’ve heard a lot about why faith matters and that it works. Now we want to know how to work at scale,” he said.

SANDRA THURMAN, Office of the Global AIDS Coordinator, U.S. Department of State, began the session with a problem statement: “We’re talking about going to scale at time when the gap between the rich and poor has never been greater.

Thurman said searching for efficiencies is important when approaching the opportunity to scale. “At PEPFAR, we had to take a serious look at resources, and analyze what we have and don’t have, and also find ways to leverage existing resources in ways that are unprecedented for us.” She recommended a “wholesale renovation approach” and examining how to best recycle existing resources.

Thurman also spoke of a necessary balance between staying grounded in history’s lessons and finding new and innovative ways of tackling problems. This requires

new people involved in the conversation. “It’s critical to think about new leadership, new engagement and having new voices at the table.”

ULRICH NITSCHKE, GIZ, gave a policy perspective from Germany.

Nitschke reflected on the history of religion in development. Moving from Agenda 21 to the MDGs and finally to the SDGs, Nitschke highlighted the growing consciousness that achieving development outcomes involves all of us. “If we want to talk about scale of impact in development cooperation, we should have to look at what is new in the SDGs. The big difference to the Agenda 21 and even the MDG understanding of development is that all 17 goals relate to all of us, regardless of the motivation or angle. Agenda 21 didn’t even know about religious groups and actors to be involved in development cooperation. All have their specific group of stakeholders, women, youth, local authorities, but you do not find the meaning of religious leaders or communities mentioned. This framing for the next 15 years should raise our understanding that we all work on a common program. We should not distinguish between stakeholders anymore, but should think about how we can commonly—with our unique approaches and specific selling points—work together on this one goal to achieve the seventeen goals.”

Presenting evidence on scale⁷⁷, **JOHN BLEVINS**, Emory University, Interfaith Health Program, opened saying real limits exist to what is known in relation to the contributions of the faith-based sector. Quantitative data in particular is limited.

Blevins highlighted a [study](#)⁷⁸ commissioned by PEPFAR that aimed to quantify the contributions of FBOs to HIV service delivery in Kenya. The study found that 30% of all HIV service delivery in Kenya is carried out by faith-based organizations, and that number goes up to 60% in Nairobi. Two-thirds of all FBOs are providing some sort of HIV service, and FBOs comprise over 70% of private, not-for-profit sector providing services to the most vulnerable and poor. Blevins said providing that quantitative data is important, but we should also be conscious of what those numbers do not show.

Qualitatively, it is known that faith-based organizations engender trust. However, that trust is not universal. Religious beliefs can also add to stigma that creates barriers to care, especially in cases of sex workers,

drug users, men who have sex with men, and young women. Blevins emphasized these considerations when thinking about scaling up religious engagement.

In addition, when thinking about scale, it is important to seek to understand the many faith-based organizations that are part of robust networks *not* represented or known about in the religion and development community. “We have to ask ourselves who’s not at the table,” Blevins said.

When considering scale up of religious engagement with health, the implications beyond service delivery should also be considered. “If someone in Kenya goes to a traditional healer as part of their regular practice, we tend to think about if that is going to create problems with antiretrovirals. But going to a healer could also be a preventive factor in daily health and wellness, and we don’t know much about that.” This role of religious practice in devotion in wellness, not just disease, is important.

Blevins listed the following moral and ethical questions that need to be answered:

1. What shall we do with existing tensions about differing religious beliefs in relation to contentious issues? What about existing tensions with secular groups?
2. If we put certain programs on the map, particularly innovative programs working against the grain - do we create vulnerability for those programs in their own religious traditions? What does it mean to want to take those innovations to scale, but create vulnerability at same time?
3. Do we speak about partnerships but end up practicing co-option? What motivates faith-based organizations to do work may not be our motivations. When we think about taking things to scale, we assume we share the same agendas and motivations. There may be important foundational differences, and we should be careful that our agendas and priorities do not override others.

DAVID SUTHERLAND, International Care Ministries, gave a business perspective in his [case study on his organization’s work in the Philippines](#)⁷⁹.

Sutherland, who comes from a business background, is backed by a group of investors interested in finding solutions to poverty. They worked specifically with



David Sutherland, International Care Ministries

International Care Ministries, a charity that works exclusively with local churches in the Philippines to address the livelihood of the ultra-poor (those making less than \$0.50 per day).

Sutherland said⁸⁰ those in business look for two requirements when evaluating a venture: (1) A great product, and (2) Scalability of the product. Sutherland and the other investment bankers contributed enormous time and funding to finding solutions combatting poverty that met those two requirements. “After nearly 20 years of experimentation and cycles of Hong Kong investors investing more than \$50 million of their own money, we have concluded we can achieve the highest return on our own investment by using a faith-based distribution system.”

ICM developed a four-month intensive program called “Transform.” In each program, the local pastor and six members of his community invite 30 ultra-poor to once-a-week training in values, health, and livelihood. After four months, the benefits included:

- 31% fewer people live with a serious illness
- 23% more people have access to a toilet
- 95% increase in household income
- 27% reduction in those going to bed hungry at least once a week
- 19% fewer have scrap roofs
- 15% fewer have dirt floors

Sutherland said not only did the program have huge benefits, but it also had a long-term impact. Surveys three months after this program found that most of these benefits continue.

“One of the most important single lesson we’ve taken from these two decades of experience is that *hope is the key* to lifting people from poverty.” “Stress can paralyze action,” said Sutherland. “Underlying causes of poverty are often rooted in fatalism and lack of optimism. The key is hope injecting optimism, and faith communities are uniquely qualified in this area.”

Using a regression analysis, Transform found that *family satisfaction is the single most important factor driving the rest of the positive outcomes*. Transform participants had a 35-percent increase in their family satisfaction. They found the following correlations:

- 1% increase in family satisfaction = 3.5% increased weight for malnourished children
- 1% increase in family satisfaction = 5.5% increased TB testing

“As business people, hope is the product we need to deliver to address ultra-poverty,” Sutherland said. The question was how to bring hope to scale.

Sutherland and his team found there are small churches on almost every Philippine street corner, and most of these churches are run by pastors who are passionate about helping other people. Before ICM even arrives this pastor knows the first name of everyone in their community. They also found that pastors tend to be the most enterprising people in their communities. These pastors were very poor themselves, relying on gifts from their ultra-poor congregation, amounting to \$2–3 dollars per month. These pastors were dedicated and influential within their communities and key to the Transform program’s success.

“It would be virtually impossible to replicate this church-based distribution system with secular means.” Now, ICM wants to scale up to reach 1.7 million people in ultra-poverty. So far it has reached more than a quarter of that number. “This is an astonishing amount of scale,” Sutherland said. “It would not even be remotely possible without partnering with faith communities.”

BENCHMARKING ICM'S SCALE: A COMPARISON WITH BRAC

The most secular poverty reduction method in the world is run by BRAC. In May, a six country randomized control trial report was published that showed the effectiveness of the BRAC program.

BRAC results: The average family that goes through the BRAC program for 2 years earns about \$300 extra income than if they had not participated in the BRAC program. To achieve these results, it costs BRAC between \$1000–3000 per family.

ICM randomized controlled trial results: The average family earns \$361 more per year than if they had not participated in Transform, plus 42% increase in family satisfaction. To achieve Transform's results, it only costs \$50 per family to deliver.

ICM's faith-based program generates nearly 50x return on investment compared to secular graduation programs.

“This is an astonishing disparity in bang for the buck,” Sutherland said. “We think that faith-based distributions systems can create a scalable impact on poverty alleviation in a way that is impossible to replicate using secular means.”

MARK WEBSTER, Adventist Development and Relief Agency, Australia, provided expert commentary on the studies. He drew in part from lessons learned from [the Papua New Guinea Church Partnership Program](#)⁸¹ that ADRA manages on behalf of the Australian government.

He said there are four key factors to consider when looking to work at scale with faith communities:

1. Measure and communicate our effectiveness.
 - “We need to come up with innovative ways to measure and communicate effectiveness. We need to push the boundaries all the time.”
 - Measurement also needs to be focused on what is important. This requires dialogue among stakeholders to clarify what is important in terms of effectiveness.
2. Building and maintaining relationships.
 - “There is nothing that will test relationships across faith groups, governments, and private sector more than trying to scale something up. If we don't have a strong foundation of understanding and trust, this becomes

problematic.” He said sharing a common language (which may require investments in building both faith and development literacy) and investing time into building relationships were both important.

3. Faith communities are a starting place, not just a means to an end for scaling up.
 - They often already have health, education, logistics and communication networks that operate at scale.
4. Organizing and structuring efficiently.
 - “You can get away with inefficiency at a smaller scale, but once you go larger, efficiency is key,” he said. There is a need for clear organization structures and leadership to enable timely decision-making and accountability.

SUNDAY ONUOHA, Nigerian Inter-Faith Action Association, presented a [case study on interfaith collaboration](#)⁸².

Onuoha said there are three requirements for interfaith collaboration: (1) Trust, (2) Teamwork and (3) Evidence.

In Nigeria, there almost an equal number of Muslims and Christians, and over 250 languages and tribes. When people of faith realized that malaria was killing 300,000 people every year, they knew they needed to engage people of faith together at the highest level, along with international donors.

World Bank, USAID, and the Global Fund were



Dinis Matsolo, PIRCOM, speaking on the Large Scale Engagement of Religious Communities Panel

willing to donate millions of dollars' worth of mosquito nets. However, Onuoha said in addition to the delivery of mosquito nets, behavior change was necessary, as past experiences had shown that people did not use the mosquito nets. "We developed the language, 'Mosquito is a Muslim and mosquito is a Christian. Mosquito on Friday will go to the mosque, and Mosquito on Sunday will go to the church. And so the mosquito knows interreligious dialogue.' " Onuoha said there was a need for an interfaith strategy to combat malaria.

Started in 2009, NIFAA has now trained over 250,000 pastors and imams. The organization provides local faith leaders with the 'Mosquito Holy Book', a toolkit that provides both Quranic and Biblical references on malaria and mosquitoes role in transmission. "What made the program so successful was the level of engagement," Onuoha said. The highest level of leadership of Christians and Muslims were involved. The federal Ministry of Health was also involved.

In response to the NIFAA study, **RENIER KOEGELBERG**, Executive Director, National Religious Association for Social Development, South Africa, [provided expert commentary](#)⁸³.

He said it was clear that the key of religious cooperation was to work together, despite denominational differences, and suggested four things to keep in mind going forward:

1. A national interfaith network has advantages if common visions and values are shared. Communities should be assured of shared vision and values to assure the community is not co-opted into work it would not like to do.
2. It is necessary to liaise with governments because they are responsible for policy and the point of entry for donors. Koegelenberg cited an example from a Global Fund grant his organization managed. In order to learn how to engage with the Global Fund, his organization encouraged churches to learn from and build off the lessons from the Catholic Church's extensive experience working with PEPFAR. Koegelenberg noted that when working with government, FBOs could also hold the government accountable. But, "once your faith leaders start criticizing corruption in some government decisions and actions, expect trouble. We have lost grants from that. But your credibility is most important. You do not want to be a mere instrument for government, because otherwise you cannot serve your community."
3. National networks should reflect on if they are a "gatekeeper" preventing small communities from receiving funding or a "booster" multiplying and scaling up possible impact. Intermediary networks may have "pet projects," which makes it difficult

for other groups to access resources if they are unfamiliar with the intermediaries' jargon. To combat this, Koegelenberg's organization operates on the principle of also working with groups that are not members for the benefit of the whole community.

4. Working with international donors can carry a risk. Donors can operate through vertical, narrow interventions that do not bolster the community. "If you're shifting from one district to another, how do you explain to an orphan that his district no longer qualifies for support anymore because the rate of infection or poverty in a neighboring area is now higher, and resources must be shifted?" he asked. "It totally destroys trust in the community level and in your own networks." Koegelenberg cautioned against catering too heavily to what donors want. "You always need to look at what is needed on the ground, and do we respond to that."

In the [last case study](#)⁸⁴, **ABAGAIL NELSON**, Senior Vice President, Episcopal Relief and Development, also focused on malaria. Like the previous study, Nets for Life also engages partners of different faiths.

ERD built a coalition around combatting malaria, resulting in the NetsForLife program. NetsForLife has leveraged funding from widespread partners, including private groups such as Standard Charter Bank, the Coca Cola Foundation, the Global Fund, and Exxon Mobile. ERD also worked with Ministries of Health, Rollback Malaria, and others to create a common set of measurement indicators for malaria. Faith-based communities have been an integral component of the program implementation.

Nelson said the main component of the program is social behavior change. "People not only need to receive nets, but also need to sleep under them." In changing social behavior, engaging and listening to all community members to understand the importance of nets and how to use the net is important. Reaching trusted actors, particularly faith leaders, is important for disseminating that message. "In behavior change, we need to go deep into the household and deep into home and really listen to people."

So far, NetsForLife has distributed 22 million long-lasting insecticide treated nets in 17 countries, and



Abigail Nelson, Episcopal Relief and Development

112,235 children under the age of five are alive today due to program.

Nelson warned that as agencies move on from the MDGs they cannot simply declare victory, but have to continue, like faith-based organizations do. "Coalitions come and go, funders come and go, but it is the faith-based organizations that continue to be there listening to the families," Nelson said.

DINIS MATSOLO, PIRCOM, gave the [final commentary](#)⁸⁵.

"It is revolutionary that we are here together reflecting on these issues," Matsolo said. "If we move from intentions to action, there is no doubt that in our time we can see change happening."

PIRCOM, began in 2006, is the first national-scale, multi-faith collaboration against malaria. The goal is to recruit, organize, train, and equip faith leaders to end death from malaria. PIRCOM's national coverage extends over 5 providences, and reaches 29 districts and 151 communities. 254 religious communities and groups are under PIRCOM.

Matsolo stressed the need to work together. "There is an African saying: 'If you want to go fast, go yourself, if you want to go far, go with others.' We need to learn the way of moving together and by doing so we'll see interesting results," he said.

Matsolo echoed Nelson and others, citing the importance of behavior change. He also spoke of the

need to change attitudes. “In Mozambique, having malaria has become normal,” he said. “We need to begin by changing that. It is not normal to have malaria.”

Like others, he said the involvement of religious communities in development is not an option, but a must. “When a religious leader speaks, he speaks to all people. When a politician speaks, he speaks to his followers,” he said. PIRCOM focuses on educating religious leaders to speak the language of malaria so

they can distribute the message to their communities.

In closing, Matsolo said all of the discussions from the conference need to move into action. “We can have wonderful declarations, but if they’re not translated into action nothing will change,” he said. “Needy people need very little, but they need that little so much. Without that little, they die.”

At this point, conference participants split into working groups to discuss recommendations going forward.

SCALE KEY RECOMMENDATIONS:

1. Take a long-term view to funding and programming to build trust in local communities; sustained behavioral change and impact requires long-term, trust-based relationships
2. Work with local and national faith leaders in program design and implementation
3. Design procurement instruments to fund local faith-based organizations/consortia to facilitate scale-up; encourage collaboration rather than fragmentation
4. Review and test malaria platforms to see if these platforms can be leveraged for other issues or solutions
5. When FBOs scale-up programs, the information system used to measure programs towards targets should be adjusted to accommodate the changes
6. Collect and communicate evidence for interventions that have successfully scaled; openly discuss and learn from programs that did not successfully scale up
7. Develop faith-inspired measurement and metrics, and a faith-inspired understanding of evidence. Develop indicators for transformation or hope generation, and measure them in numerical terms. These should be configured in a way to extract the distinctive contribution of faith-based groups.
8. Incorporate measurement into the beginning stages of program design

FINAL SESSION: ACTION PLANNING



Peter Prove, World Council of Churches

MATTHEW FROST, Tearfund and JLIF&LC, and **ADAM TAYLOR**, World Bank Group moderated this final working session of the conference. The session focused on action planning and how to take the agenda of the conference forward. The moderators first directed the small groups to reflect on their key insights and individual actions they would take after the conference. The group facilitators elected a spokesperson to report back to the conference.

GROUP 1: AZIM LAKHANI, AGA KHAN DEVELOPMENT NETWORK, spoke of more genuine and equal partnerships between religious organizations and donors. Faith organizations bring to the table resources such as reach, community action through volunteers, and the infrastructure to deliver.

For a donor agency, those contributions are extremely important; it is now a challenge for faith organization to put a value on those assets. The group recommended that the faith organizations could come in as co-investors as they are investing resources, rather than being the recipient of a grant. This way, the faith-based organizations and secular organizations create more of a partnership than a subservient relationship.

GROUP 2: TED KARPF, BOSTON UNIVERSITY, gave a reflection on the role of history in informing future actions. “These two days have been a remembering of what it is we fundamentally know.”

The group said the rehearsal of history was particularly well-emphasized in the Ebola presentations, which described how the HIV epidemic provided lessons for future epidemics. Looking ahead to the next crisis before it happens is key. “It is easy in the midst of deliverables and documentation to forget history and the story of that is what has kept us alive doing work over and over again.”

GROUP 3: CATERINA BAIN, CENTRO REGIONAL ECUMÉNICO DE ASESORÍA Y SERVICIO (CREAS), highlighted the lack of participation from regions like Latin America, and the strong focus on Anglo-African issues.

Going forward, the challenge would be to draw in other areas and non-Anglo-speaking places. “We need to get voices from other parts of world.”

GROUP 4: ATALLAH FITZGIBBON, ISLAMIC RELIEF WORLDWIDE said his group was most struck by how many participants in the room had been individually grappling with the same issues.

The group noted the opportunity to share and hear how others were addressing these issues was very useful. Going forward, they said a map of faith-based actors is much needed in order to create a collective consciousness of what is known, as well as more opportunities to connect and collaborate.

GROUP 5: SUSAN PARRY, WORLD COUNCIL OF CHURCHES, called for the need “to create an appreciation of faith.”

Parry noted a frustration throughout the conference that despite the widespread recognition of the tremendous and useful contribution of faith-based organizations in terms of reach and networks, she sensed from secular organizations a lack of appreciation, and in some cases existed even a fear, of the *faith* component. “We do what we do because of our faith, it is an expression of our faith, and that’s what makes us different.”

GROUP 6 was impressed in the Scale Session by the sudden “proliferation of evidence demonstrating what we had assumed but perhaps not been confident about in relations with partners. There is plenty of evidence to substantiate the impact and cost effectiveness of

grassroots, faith-based networks in the implementation of development.”

The group suggested that it was the methodology or focus on gathering and presenting evidence in strategic way that was lacking, not necessarily the evidence itself.

GROUP 7 felt affirmed by the bilateral and multilateral discussion on commitment but said those discussions need to be articulated in ways that are actionable.

They recommended that when programs are designed from a multilateral and bilateral perspective, faith actors should be consulted. Secondly, if it was found that the faith actions can uniquely add value, then the procurement mechanisms designed for the program should articulate a preference for faith actors. “We need a preferential option for faith-based groups.”

ADAM TAYLOR, World Bank Group, began by restating the themes from the *Building more effective partnerships between public sector and faith groups*⁸⁶ report that framed the conference.

1. Framing the case
2. Building on a common foundation
3. Overcoming complexities
4. Strengthening the evidence
5. Creating a clear process and space to take this agenda forward

Taylor recognized that there were issues and gaps in existing information, and also that this conference was part of a broader context. “The world is debating what goals will replace the MDGs,” he said. “What can we do together that will have the most impact?” He said the beauty of the conference was that it created a space to have more candid conversations about how to work together.

Going back to the core questions, Taylor filled in his takeaways from the conference and recommendations he had heard.

After Taylor outlined these themes, **MATTHEW FROST**, Tearfund and JLIF&LC, directed the second small group discussion portion of this session. The participants self-selected which theme they would like

to discuss further and organized themselves into seven groups. After the discussion, the spokesperson from each group stated the group’s final recommendations for action:

Framing the case

1. “We received a synopsis of the way faith-based organizations contributed to the MDGs. The synopsis should answer, the how, the what, and the why in order to present the case for their continuing contribution to the SDGs”
2. The group recommended that ahead of the SDGs, we should join together to advise national development networks of private, public, and civil society actors on how to best map, approach, and engage with faith-based actors on the national level.

Building on a common foundation

1. “We have an ambitious dream. We want to influence the UNGA and the World Humanitarian Summit to take faith more seriously. Because of this conference, we can exert more pressure on governments that have been represented at this event to help us do that.”
2. “We could set up an international academy for faith leaders and faith actors on interreligious ethics for sustainable development, and we could open up part of the academic period for non-religious developmental actors to partake.”



Azim Lakhani, Aga Khan Development Network

Overcoming complexity

1. “We could create a joint group with the faith actors [recognizing their plurality], multilaterals, and academics along with governments that would bring different parties into discussion to tease out the principles for effective activity, and also conduct research on existing models of interfaith groups.”
2. “We should develop standards that we can put very clearly to the world and say this is what we’re about. On mapping, we need a more in depth discussion about what’s out there already.”

Strengthening evidence

1. “We should compile a guide as to why, how, and for whom evidence needs to be developed by finding what exists already.”
2. “We need to develop indicators for transformation or hope generation to measure them in numerical terms. These should be configured in a way to

tease out the distinctive contribution of faith-based groups. Coupled with that, we need a clear stakeholder analysis of the different evidence needs of different partners.”

3. “We should develop and propose a theoretical framework, a clear definition of spirituality in public health, and invest in building capacity to assemble and disseminate evidence.”

Creating clear process to take forward

1. “We will take these recommendations to the World Humanitarian Summit and try to shape the agenda.”
2. “It will be critical to replicate and adapt dialogue at a country level and link to the realization of the SDGs. This way, we might also get deeper buy-in from country governments who will be crucial for success. To carry us forward, we should have an annual event to evaluate the progress made at the country level.”



Final Session: Action Planning

FINAL CO-HOST REMARKS



Charles Owubah, World Vision

To conclude the conference, the co-hosts delivered remarks, reflecting on their opening statements and what they had learned, as well as next steps.

MARK BRINKMOELLER, USAID:

Brinkmoeller highlighted three takeaways from the conference: (1) A spirit of collaboration and giving, (2) The need for more diverse voices in the conversation, particularly broader geographic participation and (3) The potential for not only increased “faith literacy” within the public sector, but also heightened “government agency literacy” within the faith community. After he and the other USAID representatives have taken the time to process the results from the conference, Brinkmoeller “committed to commit” and explore new actions at potentially a policy or learning level. He promised to communicate back to the community USAID’s next steps towards strengthening partnerships between the public and faith sectors.

CHARLES OWUBAH, World Vision:

“If you’re like me, you came here to learn, be challenged and inspired, and if you’re like me, you have achieved that.” In speaking about evidence, Owubah said there had been a lot of information consumed over the past two days. He said some would be happy about the amount of highly rigorous

evidence, while others would be fearful of losing anecdotes which are often as important as numerical data. “Randomized control trials, the gold standards, are great, because you cannot ignore the evidence, but we need to do both,” he said.

From a commitment standpoint, he said participants could count on World Vision, especially in area of the transformational development and the development of a research framework.

AZZA KARAM, UNFPA

“It’s never that simple to convene a group of people of faith from different parts of the world, and somehow not be moved by it, especially if you realize faith is central to our lives.” She brought up a conference hosted by UNFPA in 2008 with over 400 faith-based and UN partners from around the world, which was the first of its kind, and noted how much has changed in the developmental conscience, since then. Just to overcome the challenges of communicating across religions, regions, languages, and to ensure we could understand one another and show commitment, was a feat.

“We have moved the pendulum effectively together. ‘We’ meaning secular and faith-based,” she said. Since 2008, there had been a shift in the mental awareness. Karam noted that though things have progressed, participants were still talking about human rights as a secular notion. “For some of my colleagues, the UN Declaration of Human Rights is a sacred text for them and all the religion they need,” she said. There’s still the rest of the world out there that still feels very strongly that the secular paradigm of human rights is all that we need. And it’s fine, we need it, but we need to bridge those dominant paradigms because they’re not fundamentally that different and we need both languages to address sustainable development effectively.”

She said that aside from putting together research, documentation, guidelines, and training over the last few years – around which there have been tremendous efforts and significant development – the fact that this conference was held in the World Bank, and that it was considered ‘normal’, was a

huge achievement. “It will not be that difficult to normalize our partnerships across secular and religious developmental spheres anymore, because what we can say in the UN is if the World Bank can do it, it’s perfectly ‘kosher’, and that’s the power of institutions and opportunities such as this.”

GWEN HINES, DFID:

“This kind of conference is really helpful to get past perceived divides and build bridges and focus on shared understandings.” She said the SDGs provide a useful framework for everyone not just in developing countries but even in the developed world. What was most compelling to her were the recommendations that focused on evidence and showed what works.

“Show me new ways to address challenges we haven’t got past like, working in fragile states, like dealing with some of the toughest challenges of excluded communities, and I’m up for it whoever that comes from.” “I’m an atheist, I’m not a person of faith, but doesn’t matter. I’m passionate about development and am interested in how things work and how we can work together.” DFID currently has a working group on how organizations can work together, and Hines said she would commit to engaging this group even more building on lessons learnt from this conference.

ANDREAS HIPPLE, GHR Foundation:

Hipple stressed GHR Foundation’s agility, pointing out that though it is not the biggest funder, it can act quickly. “We will continue to fund work that pushes the boundaries – bringing strong evidence and engaging religious voices as true partners.”

Hipple noted GHR Foundation’s interest in bridging the gap between secular and faith-based actors, and that his organization could contribute in bringing faith literacy and practical solutions to others.

MARTIN MAUTHE-KAETER, BMZ:

Throughout the conference, Mauthe-Kaeter said there was an obvious signal that religion matters. “Germany, as one of biggest donors, will take this forward.” He said governments have to start to listen to faith-based organizations. “I got the impression that faith leaders are taught by donors how they

should change and adapt, but we should step back as donor and just listen. As donors, we have to change the way we think about development,” he said. “It’s not just financial or technical aspects, it’s about values.”

As far as German support, Mauthe-Kaeter said BMZ would start a program to increase religious literacy within the organization, including training for staff in the field. The organization will also develop a new strategy on development and religion, which will be the first in its history. “It will be a concise strategy, not just a principle paper, and we will implement it,” he said. He said the organization would take on many things discussed at the conference, such as how to change programming, and come up with criteria for funding and new forms of cooperation. We will involve faith leaders in the development of this strategy not just in the implementation. “The goal is to reach the SDGs, so we should all focus our efforts on that because this is our common goal.”

He invited all participants to a follow-up conference in Berlin, February 17-18th, 2016.

JEAN DUFF, JLIF&LC:

Duff committed to sustain work to support effective collaboration between secular and religious organizations. “JLIF&LC will explore ways to best respond to ongoing practitioner and policy maker needs for evidence regarding faith activity and contributions” she said. “We commit to serving this work going forward.” She reminded conference



Bertrand Badré, World Bank Group

participants about the extensive evidence base of information available on the online conference platform.

BERTRAND BADRÉ, Chief Financial Officer, World Bank Group closed the conference with remarks on behalf of the World Bank.

“This conference has been aimed at more effective partnerships between development institutions and faith-based organizations based on shared values and a common commitment to end extreme poverty while honoring each other’s respective roles and strengths. On behalf of the World Bank Group, I want to thank all of you for this constructive dialogue. No conference can solve all issues, but I hope you leave feeling resolute. It is important to commit.

“As President Kim said, the world has made remarkable progress in combatting poverty. Astounding progress has been made over the last 25 years. But it’s not over, and we all must do more. We need more effective partnerships including in the area of finance. The problems the world is facing today are very complex and bigger than ever. Nobody can tackle this problem

alone. We need true partnerships. Partnership is not just a nice word or a politically correct one, it’s a necessity to maximize our impact.

“The conference includes a much greater emphasis on mobilizing project finance. New partnerships are needed to move us forward in harnessing the trillions we will need. The financial well-being of countries cannot be ignored. The World Bank is coordinating efforts to provide services to the hardest to reach areas. As the Pope reminds us, the poor and the planet are crying out.

“To eliminate extreme poverty, we must use all the evidence available to us. We need to build a global movement to galvanize supporters and by collaborating together we can improve common outcomes. Partnering with faith-based organizations will allow us to combine technical approaches with hope. My hope is that this will not be a one-off event, and that it motivates others to listen, learn, and to act. The World Bank Group is committed to being on this journey with you. You’ve offered me something very precious and unique. These types of moments are invaluable.”



On the evening of July 8, 2015, the ‘Building Partnerships to End Extreme Poverty’ Ramadan Iftar was co-hosted by the World Bank Group and Islamic Relief USA. This interfaith gathering offered participants an opportunity to reflect upon their shared commitment to ending extreme poverty.

ANNEX OF ONLINE RESOURCES

<http://jliflc.com/resources/rsd-conference-proceedings/>

INTRODUCTION & PREFACE

- 1 <http://jliflc.com/>
- 2 <http://jliflc.com/conferences/religion-sustainable-development-building-partnerships-to-end-extreme-poverty/attendees/>
- 3 <http://jliflc.com/conferences/religion-sustainable-development-building-partnerships-to-end-extreme-poverty/>
- 4 <http://jliflc.com/resources/religion-sustainable-development-building-partnerships-to-end-extreme-poverty-conference-program/>
- 5 <http://jliflc.com/conferences/religion-sustainable-development-building-partnerships-to-end-extreme-poverty/attendees/>
- 6 <http://jliflc.com/sessions/post-conference-resources/>
- 7 <http://jliflc.com/resources/building-effective-partnerships-between-public-sector-and-faith-groups/>

OPENING SESSION & CO-HOST REMARKS

- 8 <http://jliflc.com/resources/faith-based-flyer-the-world-bank-groups-engagement-with-faith-based-and-religious-organizations/>
- 9 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/67352/faith-partnership-principles.pdf
- 10 <http://www.usaid.gov/who-we-are/mission-vision-values>
- 11 <http://jliflc.com/resources/usaid-policies-strategies-for-working-with-religious-organizations/>

THE LANCET SERIES LAUNCH

- 12 [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)60251-3/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)60251-3/abstract)
- 13 <http://jliflc.com/resources/presentation-understanding-the-roles-of-faith-based-health-care-providers-in-africa/>
- 14 [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)60252-5/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)60252-5/abstract)
- 15 <http://jliflc.com/resources/presentation-controversies-in-faith-and-health-care/>
- 16 [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)60250-1/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)60250-1/abstract)
- 17 <http://jliflc.com/resources/presentation-achieving-shared-goals-stronger-partnerships-between-public-sector-and-faith-based-groups-for-universal-health-care/>
- 18 <http://immunization.jliflc.com/2014/07/dakar-declaration-vaccination/>
- 19 http://www.columbia.edu/itc/hs/pubhealth/rosner/g8965/client_edit/readings/week_2/fuchs.pdf
- 20 http://www.nobelprize.org/nobel_prizes/economic-sciences/laureates/2009/ostrom-facts.html

PERSPECTIVES: PUBLIC SECTOR LEADERSHIP

21 <http://jliflc.com/resources/the-role-of-religion-in-german-development-policy/>

22 <http://jliflc.com/resources/additional-usaid-resources/>

23 <http://www.unfpa.org/sites/default/files/pub-pdf/DONOR-UN-FBO%20May%202014.pdf>

PERSPECTIVES: POLICY MAKERS

24 <http://jliflc.com/resources/building-effective-partnerships-between-public-sector-and-faith-groups/>

25 <http://jliflc.com/resources/presentation-building-more-effective-partnerships-between-the-public-sector-and-faith-groups/>

PERSPECTIVES: RELIGIOUS & FAITH-BASED COMMUNITIES

26 <http://jliflc.com/resources/in-the-thick-of-it-why-the-church-is-an-essential-partner-for-sustainable-development-in-the-worlds-poorest-countries/>

27 <http://jliflc.com/resources/summary-how-to-work-with-religious-scholars-and-leaders-how-to-construct-authentic-relationships-set-dynamics-and-build-constituencies-for-change/>

28 <http://jliflc.com/resources/summary-the-scandal-of-extreme-poverty/>

29 <http://jliflc.com/resources/summary-how-will-history-remember-us-taking-responsibility-taking-action-together/>

30 <http://jliflc.com/resources/summary-building-faith-enriched-partnerships-faith-based-resources-for-sustainable-development/>

31 <http://jliflc.com/resources/website-faith-based-facilitation/>

32 <http://jliflc.com/resources/case-study-strengthening-accountability-and-measurement-in-a-global-faith-based-organisation/>

MULTILATERAL & BILATERAL PERSPECTIVES

33 <http://jliflc.com/resources/approach-to-engagement-with-faith-based-community/>

34 <http://jliflc.com/resources/a-critical-partnership-the-global-fund-faith-based-organizations/>

35 <https://www.usaid.gov/actingonthecall>

36 <http://jliflc.com/resources/remarks-by-mr-shelly-pitterman-unhcr/>

37 <http://jliflc.com/resources/presentation-sector-programme-values-religion-and-development/>

38 <http://jliflc.com/resources/partnership-faith-based-organizations-unaims-strategic-framework/>

39 <http://jliflc.com/resources/faith-partnership-principles-2/>

40 <http://jliflc.com/resources/church-partnership-program-design-document/>

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CONCURRENT SESSION: HUMANITARIAN ASSISTANCE & DISASTER RELIEF

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FINAL SESSION: ACTION PLANNING

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