

# “The community trusts us.”: Faith-based organisations’ role in advancing SRHR globally



## A report from a multisectoral project

Collaborators: Act Church of Sweden, Diakonia, Islamic Relief, Pingstmissionens Utvecklings-samarbete (PMU), Karolinska Institutet (KI)\*, as part of the Swedish Platform for Global SRHR, Social and Religious Norms Working Group

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## Executive Summary

From September 2022-May 2023, the Swedish Platform for Global and Sexual and Reproductive Health and Rights Issues carried out a project to better understand the challenges and facilitators experienced by Swedish and African faith-based organisations (FBOs) in implementing SRHR programs in religious contexts. The project included 11 interviews with organisations across Sweden (n=4) and Sub-Saharan Africa (n=7), as well as a webinar featuring a panel of multisectoral SRHR experts who discussed the interview results.

The project's discussions provided a range of insights regarding how to advance work in this space. Interviews with the African FBOs revealed that, at the community level, there remains a lack of access to sexual and reproductive health and rights (SRHR) care, and some communities' beliefs are at odds with SRHR and manifest in patriarchal faith institutions, strict gender norms and more. At the organisational level, it takes time to sensitise and mobilise a community (including its religious leaders), which impacts a projects' length and required funding. With that said, it can be difficult to access funds when applying for grants in an environment where religion is politicised. There are many strategies the interviewees use to overcome such challenges, however, including respecting social norms and values in navigating how to make program progress, collaborating with actors and leaders across a community's fabric who can ensure information feedback loops, and tailoring communication through religious teachings and scientific facts.

As for the Swedish FBOs, within their organisations, they may face challenges related to SRHR not being prioritised by leadership. Additionally, SRHR is often perceived to be delivered as a "package", and African collaborators may not understand whether Swedish FBOs are able to work on independent SRHR issues in a context-appropriate way. In working with African FBO partners, they must navigate being true to their organisation's SRHR position while collaborating with organisations who hold different beliefs and work with communities where the concept of gender is unknown or not discussed. Yet such challenges can be addressed, among other strategies, by building strong internal and external alliances with religious and other community leaders and utilising acceptable language as an entry point into a community, based on theological and progressive interpretations of religious texts and addressing communities' reality.

Through navigating challenges regarding SRHR in the communities where they work, Swedish and African FBOs are seeing significant impacts including policy changes, improved SRHR indicators, and the gradual changing of cultural, religious, and traditional norms that once hindered people's well-being but now enhance it. The FBOs offered several recommendations for implementing SRHR programs in religious contexts such as conducting thorough context analysis and using multistakeholder approaches to build context-sensitive and collaborative solutions aimed to support the most marginalised in the community. They also recommended strengthening

organisational capacity and policy procedures to ensure the effective delivery of programs and enable change makers from inside partner organisations with concerted effort to raise the awareness of women and their place within decision-making roles.

As presented above, the project findings were echoed by panel participants in the webinar who reinforced the ideas that more opportunities for collaboration between secular and faith-based actors in this space are necessary to foster mutual understanding, and there is a need for further research to unpack SRHR norms in religious contexts. Similarly, some webinar audience members voiced a call for action in the space of SRHR and religious groups. They explained their concern that if SRHR is not intentionally raised as an issue, other organisations with potentially more restrictive agendas will continue to alter the conversation and subsequent programming. The audience's call emphasises the need for this project's discussions to grow, thereby securing more funding and enabling dedicated action.

## Introduction

In 2019, the Swedish Platform for Global Sexual and Reproductive Health and Rights Issues was launched. The goal of the network is to build a more coordinated and effective cross-sectoral Swedish response to improve SRHR globally. The Network represents academic, civil society organisations as well as government agencies such as the Swedish International Development Cooperation Agency (SIDA) and the Public Health Agency.

One of the Network’s working groups includes “SRHR and Religious and Social Norms.” This group strives to elucidate the complexity of norms, gender, SRHR and religion and to develop evidence-based responses to some of the controversies that faith-based organisations (FBOs) may experience while addressing SRHR in religious contexts.

FBOs are diverse with a wide range of underpinning values and scope of work. For example, the SRHR areas of focus for the FBOs apart of the working group vary but fall within the domains as described by the [2018 Guttmacher Lancet Report](#): gender-based violence, maternal and newborn health, HIV/AIDS and other sexually transmitted Infections (STIs), infertility, contraception, abortion, and reproductive cancers (see table 1 for more details).

There is a vast ecosystem of religious actors involved in delivering SRH services as well as influencing social norms and policy through advocacy related to SRHR. In relation to their presence in the SRHR field, however, there is a lack of comprehensive understanding regarding FBOs role in SRHR, highlighting the need for collaboration between research communities and FBOs.

With this question in mind, Act Church of Sweden, Diakonia, Islamic Relief, PMU and academics at KI developed a collaborative project to identify the processes, challenges and successes associated with FBOs’ implementation of SRHR programming in religious contexts.

The four FBOs that belong to the working group also participated in project interviews. Therefore, they are referred to as Swedish FBOs from hereon. While these FBOs carry out work in Sweden, this project focuses mainly on SRHR programming in religious contexts in other countries.

Table 1. Swedish FBOs’ SRHR Areas of Focus

Organisation	SRHR areas of focus
Act Church of Sweden	Act Church of Sweden works according to Guttmacher Lancet comprehensive SRHR definition on issues including normative SRHR dialogue, adolescent SRHR (ASRHR), gender-

	based violence (GBV), comprehensive sexuality education (CSE), maternal health, lesbian, gay, bisexual, transgender, queer, and intersex (LGBTQI+) rights, safe and legal abortion.
Diakonia	Diakonia’s partners work on issues such as ASRHR, SRHR in schools, ending impunity for sexual and gender-based violence (SGBV), addressing norms and taboos around SRHR, LGBTQI+ rights, and access to SRHR including services for ethnic minorities.
Islamic Relief	The areas of SRHR that IR and its partners concentrate on include addressing issues such as early and forced marriages, Female Genital Mutilation (FGM), Sexual and Gender-Based Violence (SGBV), and maternal healthcare.
PMU	Some of the SRHR areas PMU and partners work in are SGBV, FGM, maternal health care, family planning and contraceptives, sexual education.

**Methodology**

To carry out this project, implemented from September 2022- May 2023, a KI researcher conducted interviews with the Swedish FBOs and some of their African FBO partners that represent an array of organisation types working with religious communities including humanitarian organisations and civil society organisations (see Table 2).

Table 2. Interview information

Number of interviews	11
Number of interviewees	18
# of interviews with Swedish FBOs	4
# of Muslim FBOs	1
# of Christian FBOs	3

# of interviews with African FBOs	7
# of Muslim FBOs	3 (Kenya, Sudan, South Sudan)
# of Christian FBOs	2 (Zimbabwe, Benin)
# of interreligious FBOs	1 (Regional)
# of non-religious organisations (non-governmental, feminist organisation)	1 (Zimbabwe)

In what follows, given that all but one organisation interviewed identify as an FBO, all interviews are referred to as FBOs. Additionally, the term *FBOs* refers to both Swedish and African FBOs. If one specific type of organisation is referenced, this will be clearly stated.

In using the term *work*, we refer to the types of programmatic work executed by FBOs.

While the project was not designed to focus solely on sub-Saharan Africa, six African FBOs interviewed currently work across five countries in this region, while one network covers the whole continent. Despite the interviewees' lack of geographical diversity, it was decided to move forward with the project design for several reasons including that SRHR is a priority issue in sub-Saharan Africa and diverse religious groups exist in the region.

Please note that due to the slight imbalance of interviews between Christian (n=5) and Muslim FBOs (n=4), in some sections, the text more heavily discusses the church aspect compared to the Muslim point of view. Moving forward, research must address all religious perspectives equally.

All interviewees provided verbal consent to the interviews and the recording process before they occurred. The interviews were recorded on a local device so the interviewer could write summaries of the interviews following their completion. The interviewees then had the chance to review the interview summary and make any necessary changes in regard to deleting sensitive material or adding missing information.

After all interviewees approved the summaries, the interviewer coded the summaries using MAXQDA software. The interviewer coded the interviews using an inductive approach. All codes were collapsed into themes and sub-themes. This analysis was informed and verified by feedback from the working group.

A member check of the material was conducted following data analysis. At this time, all interviewees had the opportunity to voice any questions, concerns, or comments regarding the analysis. All interviewees approved of the analysis.

Lastly, to disseminate the findings of the project, a webinar was held on April 28<sup>th</sup> from 10:30-12:00pm Central European Summer Time on Zoom. 64 participants from numerous countries attended. These participants represented organisations spanning governmental, academic, and non-governmental sectors, including the FBOs interviewed for the project.

The webinar was moderated by a Senior Advisor at Riksförbundet för Sexuell Upplysning (RFSU)/International Planned Parenthood Federation (IPPF) Sweden. Following a presentation of the interview findings, a video featuring an NGO representative was shown and a panel discussion was held between representatives from the Swedish International Development Cooperation Agency, Karolinska Institutet, and Act Church of Sweden. For a summary of the webinar components, please see the Project Conclusion and Way Forward section. For more detailed information regarding the webinar, please see Appendix 1.

## **Findings**

The following findings break down the processes, challenges and successes associated with FBOs' implementation of SRHR programming in religious contexts. Results from interviews with African FBOs are presented first, followed by results from interviews with Swedish FBOs and recommendations from all interviewees regarding how to advance the field moving forward.

The communities that FBOs work with are very diverse. Therefore, these findings are not representative of all FBOs or communities that FBOs work with. And while interviewees have generously discussed challenges they face, in no way do these challenges define them as an organisation, the communities they work with, or take away their capabilities. Please note that not all themes are described in the following section, see Appendix 2 for detailed findings.

### **Types of Programmatic Work Executed by FBOs**

The organisations provide a variety of work depending on their mandates, religious views, expertise, etc. The first category includes service training and provision which encompasses a wide range of services including but not limited to gender-based violence (GBV) case management, mapping and providing referrals, and training health staff on SRHR.

Another category of work includes communicating to the community. Types of messages include things such as rights and information awareness raising and comprehensive sexuality education. The audience and setting for this communication are expansive, covering every level of the community social system. Such communication work also includes working towards normative change by employing social and behavior change communication. This often requires sensitising religious leaders and their communities to SRHR issues. Advocacy can be related to this and takes place at the internal level, building commitment to advancing SRHR within religious institutions or

organisations and at the external level, doing the same with policy makers. Again, this covers different levels of governance from international institutions (United Nations), continental (African Union), regional (regional economic communities), national and sub-national governments. Some other activities include facilitating program development such as for GBV survivors and conducting research.

### 3.1 African FBOs

Table 3. Key findings: African FBO interviews

Community-level challenges faced (in implementing programs and those they aim to change with their programs)	<ul style="list-style-type: none"> <li>• Lack of access to SRHR care</li> <li>• Gender-based violence</li> <li>• Beliefs are at odds with SRHR and manifest in for example, patriarchal faith institutions, strict gender norms, and promotion of mandatory heterosexual behavior.</li> </ul>
Enabling features of work	<ul style="list-style-type: none"> <li>• Garner trust by connecting with community to best understand needs and address issues</li> <li>• Operate under human rights framework and follow internationally recognised accountability and compliance policies</li> <li>• Employ iterative methodologies and diverse collaborations</li> </ul>
Organisational challenges faced	<ul style="list-style-type: none"> <li>• Project length and necessary funding impacted by time it takes to sensitise and mobilise community including leaders in religious/other institutions</li> <li>• Can be difficult to access funds when applying for grants in an environment where religion is politicised</li> <li>• Those opposed to gender justice are well-funded</li> </ul>
Strategies to overcome challenges	<ul style="list-style-type: none"> <li>• Respect social norms and values and operate all business in the open</li> <li>• Collaborate with actors within every part of a community's fabric and leaders who can ensure information feedback loops.</li> <li>• Tailor communication through religious teachings and scientific facts</li> <li>• Implement peer education and identify/engage champions for advocacy campaigns including men and boys</li> </ul>

COVID Impacts	<ul style="list-style-type: none"> <li>• Served as effective entry point for SRHR discussions as many issues were exacerbated by the pandemic</li> </ul>
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### Community-level Challenges Faced

FBOs face an array of challenges both “in the field” and at a broader level, representing those related to implementing programs and those they hope to address with their programs. To begin, some areas where FBOs work are rural and middle- or lower-income, where they might not have access to health clinics, including SRHR care.

For women and girls in these areas specifically, they may face several challenges including child or forced marriage, early pregnancy, rape, perpetrators that are not brought to justice, lack of patient and client confidentiality, and prohibitive costs in accessing clinics. Furthermore, husbands may be violent towards their wives if they find out they are trying to access something like family planning services, which some consider to be a western or ‘white man’s ploy’.

However, many of the communities that FBOs work in are religious and/or conservative, leading to SRHR issues being controversial and taboo due to some of their beliefs being at odds with SRHR. Such beliefs and practices can manifest themselves in patriarchal faith institutions, strict gender norms, the promotion of mandatory heterosexual and monogamous behavior or abstinence before marriage, and women being objectified or sexualised. It is, however, important to note that conservative views in communities are not always religious views. Churches, for example, can be progressive actors in conservative secular contexts. In summary, religion is not the only conservative factor that exists in communities.

In these challenging contexts, there are FBOs that offer tailored support to women and communities, and there are several reasons that make them well positioned to do so.

### Enabling Features of Work

Enabling features of African FBOs’ work can be categorised into characteristics and activities. Firstly, FBOs tend to focus their efforts on supporting the most marginalised in the community, seeking to eliminate power imbalances that breed inequity. Doing so garners trust in those they are working with. Secondly, being grassroots based allows FBOs to connect with communities, and best understand their needs and how to address them. FBOs seek to operate in a human rights framework, following internationally recognised accountability and compliance policies, while adapting their strategies to target group needs. For example, in some contexts, women may be better positioned to carry out some work than men, and vice versa. FBOs also generally have a unique understanding of the time it takes to build acceptability within a community and are committed to sticking to the course.

Regarding activities, building such acceptability requires them to use iterative methodologies in their work. For instance, in the caravan approach, diverse trainers (like medical practitioners, theologians, and demographers) travel through communities speaking to SRHR topics. This example highlights the array of collaborations that FBOs nurture. With such collaborations in place, they can create safe spaces for community members to discuss and seek SRHR care. However, this does not mean that FBOs do not face challenges of their own in carrying out their work.

### **Organisational Challenges Faced**

The focus areas of such SRHR programming are culturally sensitive and require special consideration when shared and discussed within the community. For one of the Muslim FBOs interviewed, addressing early marriage serves as a prominent example of this. Therefore, building acceptability to SRHR programming within a community takes time as FBOs must first sensitise and mobilise the community, including its leaders in religious and other institutions. This can be an issue when it comes to funding because grants are often for short periods of time (i.e., two years). When it takes six months to a year to get community members on board with a project idea, that leaves FBOs with a limited amount of time to implement a project.

For the community, this means that projects are often scaled down or closed completely, leaving many people who were benefitting at a loss of services or support. This can have extreme ramifications in many cases such as when FBOs are providing gender-based violence case management. For the organisation, this means staff are constantly applying for funding and have less time and resources to implement their actual work.

The challenge of FBO funding is a catch-22 given that they cannot operate without funding, but such resources can be tough to acquire. This is in part due to the fact that they are applying to grants in an environment where religion is politicised, and secular donors might be hesitant to support religious constituencies. Furthermore, some of the SRHR issues in religious communities are well-known, and therefore development expectations are set regarding improving these conditions. However, FBOs cannot act effectively to enact change and ultimately reach these expectations without the appropriate funding. Inherent in this funding challenge is the need for decolonising aid discussions to take place - discussing who is deciding the priorities, where and why.

Seeing as the opposition is well funded, i.e., those that perpetuate stigma and misinformation around SRHR, the funding of FBOs is an urgent issue. With this said, FBOs must remain diligent in finding strategies to effectively counter the opposition. These can include having multisectoral dialogues around how to combat misinformation. This requires a large and proactive investment in

strategic communication with an effort to show the plurality of religion and the constructive voices from this sector that are doing impactful work.

### **Strategies to Overcome Challenges**

In all their diversity, FBOs employ a wide range of strategies to navigate the challenges previously mentioned. These strategies are both foundational and programmatic.

**Foundational factors:** Before anything else, FBOs highlighted that they must respect social norms and values, including conducting all their business in the open. At the heart of their strategies are collaborations that take many forms including working with religious groups, governments, and engaging in secular spaces like international conferences on SRHR. A key to this collaborative work is understanding who to connect with and how, or identifying a point person within a religious community that will open the doors to reaching the rest of the people. Ensuring this person creates information feedback loops is vital in program delivery and sustainability. Tailoring their communication by considering religious, cultural, and social norms is also integral. With this said, using a hybrid approach to communicate information through both religious teachings and scientific fact has been useful to FBOs in their work. Additionally, if FBOs are going to strengthen referral pathways, then they need to ensure that systems can keep up with this new demand. For example, if an organisation is going to raise awareness of rape in a community, they need to inform the health centres and government of this and ensure these institutions will be able to keep up with the new demand in survivor services.

**Programming factors:** Such referral pathways may be created at multistakeholder meetings, a strategy FBOs often employ to engage different leaders and sectors in a community. Another strategy includes working with religious and community leaders which has many advantages including that they can identify those most vulnerable in the community, and both bring forward and influence community perspectives on SRHR. Such leaders can rally more allies than FBOs could alone. Religious leaders specifically have an unmatched ability to ground information in religious doctrine, making it relevant, understandable, and trustworthy to the community members. For example, when speaking about the negative outcomes related to the stigmatisation of sex workers, some Christian religious leaders have referred to the Bible's positive passage on Jesus's relationship with Mary Magdalene (Luke 7,36). Next, FBOs also discuss the importance of peer education and identifying, training, and deploying men to be gender champions. As mentioned previously, FBOs often work in communities where patriarchal norms are persistent, so to change these norms, all genders must be involved in the work.

## COVID Impacts

Like any type of community organisation, FBOs were faced with immediate hurdles that harmed community well-being when COVID hit. For some of the partners interviewed, COVID served as their first encounter with SRHR issues seeing as domestic violence cases, child marriage, and adolescent pregnancy rose to a level unseen before. Addressing this reality became an effective entry point for discussion amongst leaders themselves and in the communities.

### 3.2 Swedish FBOs

Table 4. Key findings: Swedish FBO interviews

Challenges within organisations	<ul style="list-style-type: none"> <li>• SRHR may not be an organisation’s priority</li> <li>• Membership in a larger religious network spanning diverse contexts and beliefs can make balancing priorities challenging.</li> <li>• Perceived “package” of SRHR issues and their inability to be worked on separately</li> </ul>
Facilitators within organisations	<ul style="list-style-type: none"> <li>• Improve organisation’s religious literacy</li> <li>• Build strong internal alliances with religious leaders and external collaborations</li> <li>• Have an official SRHR position</li> </ul>
Challenges working with African FBO partners	<ul style="list-style-type: none"> <li>• Navigate being true to the organisation’s position and being perceived as too secular by partners</li> <li>• Find ways to improve sensitive collaborations</li> <li>• Ensure security and safety of partners</li> <li>• Concept of gender unknown or not discussed in community</li> <li>• Communities’ fear of invading western agenda</li> </ul>
Facilitators working with African FBO partners:	<ul style="list-style-type: none"> <li>• Understand community and use acceptable language as a discussion entry point, including theological and progressive interpretations of religious texts and addressing communities’ reality</li> <li>• Work gradually and with community leaders to establish trust</li> <li>• Learn lessons over time regarding how to communicate best with partners and set realistic objectives/timelines</li> <li>• Seek external support through connecting with other local organisations</li> </ul>

### **Challenges Within Organisations**

First, SRHR may not be a priority in their organisation, and speaking out about this can cause conflict. Being a member of a larger religious network that spans diverse contexts with many beliefs, some more conservative than others, also creates some challenges. Sometimes the Swedish FBOs rely on relationships with these more conservative people or organisations for resources, which can make balancing priorities in the religious network more challenging. On a similar note, some of the Swedish FBOs struggle with the perception or action of SRHR issues being grouped together in a “package.” This means that all SRHR issues are treated as one unit. For example, partner organisations voiced the concern that some communities are not willing to discuss LGBTQIA+ or abortion rights. In such cases, the SRHR package is challenging because instead of being willing to focus on some issues that could be acceptable to work on within a community such as gender-based violence, they instead refuse to work on any SRHR issue, thinking in an all or nothing way.

### **Facilitators Within Organisations**

To limit such challenges within a Swedish FBO, first, they can improve upon their religious literacy, so they understand the motivations behind the pushback to SRHR and how to tailor their advocacy. Learning how other FBOs do this can be helpful. Secondly, they can work on building strong internal alliances with religious leaders to make it easier to keep conversations around SRHR on the agenda. In terms of institutional foundations, having an official position on SRHR is useful and this can be developed by both adopting a definition of SRHR such as the Guttmacher Lancet definition and writing a position paper founded on evidence and theology. This foundation also helps to integrate SRHR into other development issues that the Swedish FBOs work on which is key to seeing SRHR progress at scale. As similarly discussed with the partners, when it comes to programming support, external and internal collaborations are critical.

### **Challenges Working with African FBO Partners**

In working with their African FBO partners, Swedish FBOs encounter different types of challenges. For example, sometimes Swedish FBOs must navigate being true to their own position and being perceived as too secular by their partners. Relatedly, they can only support programs that follow their SRHR position statement. This can lead to difficult conversations with partners or changing course on programs. Swedish FBOs, however, recognise that cutting ties with partners who do not fully share their positions bears the risk of partners turning to more conservative religious, often foreign, allies and funding (e.g., conservative religious funding from the U.S. or Saudi Arabia). Therefore, they must find ways to improve sensitive collaborations.

Importantly, Swedish FBOs have to consider that as a funder of many partners, their conversations may never be fully horizontal. And, they have to mind the responsibility they have

for putting partners at risk. To this point, some logistical challenges include ensuring the security of partners' local employees- in particular those who work in conflict zones.

And, from the Swedish FBO perspective, on a community level, they face the challenge of the concept of gender not being known or discussed in the area they work. For their partner staff, it can be difficult to work on issues that they once thought or still think are at odds with their beliefs. The Swedish FBOs also detail that the fear some communities have about an invading western agenda can hinder their ability to find an entry point into the community.

### **Facilitators Working with African FBO Partners**

Amidst the challenges, there are many strategies Swedish FBOs use to help facilitate effective SRHR programs in collaboration with their partners. Just as their partners described, understanding the context of the community in which they are working is incredibly important, which translates to using acceptable language as an entry point into the community. This entails using a mix of both 1) theology and progressive interpretations of religious texts to convey messages regarding SRHR to communities and 2) addressing the communities' reality. For example, to reach a Muslim community, it could be useful for religious leaders to speak to their adherents about what the Qur'an says about the effects of early and forced marriage. And addressing reality, for example, can mean facing head on the suffering of adolescents from female genital mutilation.

Understanding community context also means working gradually. It is sometimes helpful for Swedish FBOs and their partners to enter communities speaking about broader concepts such as gender and then, as the community gains more trust with them and the content, they start relating it more and more to SRHR. The Swedish FBOs discuss how it is better to make slow progress, than for people to be turned away from discussing SRHR at all if the organisation does not meet the community where they are at the start of the partnership. This leads to discussing the importance of establishing trust. The Swedish FBOs can do so first because they are sometimes of the same faith as the communities they are working with and secondly through religious or community leaders. Working with such leaders can help access the community and women, build courage against resistance, and enable sustainable programs. And just as the partners look to find a point person, Swedish FBOs talked about finding the right person in perhaps the more progressive parts of the religious institutions who will be willing to engage at first and then disseminate the information once they are on board.

When it comes to implementing programming, there are several foundational factors that Swedish FBOs describe as facilitators. The first includes learning how to work on SRHR over time, just as the partners describe the need for patience in programming, as they better understand amongst other things, how to communicate best with partners and set realistic objectives and timelines. To

strengthen programming, Swedish FBOs also see the importance in seeking external support through connecting with other local organisations to understand their work and strengthening bonds with religious institutions in the global south that align with their viewpoints.

### 3.3 Swedish and African FBOs' Impact and Recommendations

Table 5. Recommendations for implementing SRHR programs in religious contexts.

<ul style="list-style-type: none"> <li>• Swedish FBOs' Recommendations:</li> <li>• Preconditions to action             <ul style="list-style-type: none"> <li>▪ Characterised by conducting thorough analyses of the context with specific focus on religion and SRHR factors which can help to understand 1) who to work with and how to communicate and build a safe space with them and 2) what challenges are best to face first to build trust in the community</li> </ul> </li> <li>• Implementation considerations             <ul style="list-style-type: none"> <li>▪ Address the need to build context-sensitive solutions collaboratively with partners</li> <li>▪ Enable changemakers from inside partner organisations</li> <li>▪ Advocate for women to be in decision-making roles within communities</li> </ul> </li> </ul>
<p>African FBOs' Recommendations:</p> <ul style="list-style-type: none"> <li>• Organisational             <ul style="list-style-type: none"> <li>▪ Conduct context analyses which will help inform 1) how the organisation works transparently and with respect and understanding of different community perspectives and 2) who are the most strategic people and institutions that will support the SRHR work</li> <li>▪ To engage the community, use multistakeholder approaches, working with community interpreters that not only translate language but religious, cultural, or other views and leaders that can most efficiently distribute information</li> <li>▪ (Working internally) Strengthen organisational capacity and policy procedures to help ensure that ongoing projects are consistent in what they deliver, priorities are made to be accurate, and funds are used appropriately</li> </ul> </li> <li>• Project-related             <ul style="list-style-type: none"> <li>▪ Work with those who are most marginalised in the community</li> <li>▪ Focus broadly on raising the awareness of women</li> <li>▪ Generate more long-term projects</li> </ul> </li> </ul>

## **Impact of Work**

Through navigating challenges regarding SRHR in the communities where they work, Swedish and African FBOs are seeing significant impacts.

As explained by the partner organisations, in the policy realm, the FBOs note that they have heightened the interreligious voice around SRHR through consultations and hearings with decision makers which has resulted in hundreds of policy changes in different places. Regarding their development impact, just the few FBOs interviewed cite improvements in almost every SRHR factor. It is important to note that quantitative measures of FBOs impact do exist elsewhere, but due to the narrative basis of this project—that is outside of our scope. With that said, FBOs discussed improvement in adherence to HIV treatment, GBV survivor support, access to antenatal services and more. On the other hand, the FBOs talk about a marked reduction in maternal and child mortality rates, GBV, HIV incidence and child marriage. Through all their work in sensitising community structures to SRHR, FBOs and their partners slowly witness the changing of cultural, religious, and traditional norms that once hindered people’s well-being but now enhance it.

## **Recommendations for Implementing SRHR Programs in Religious Contexts**

Please see FBOs recommendations for implementing SRHR programs in religious contexts in Table 5. One paraphrased quote which encapsulates the sentiments of the interviewees and their determination to advance SRHR in religious contexts is as follows: “we should not be afraid to work on SRHR in religious contexts. I have realised that some of these groups are counting on us to tackle these issues– even if they don’t speak about it, women in the church have critical SRHR needs. So, let us not withhold information that can benefit them in any setting.”

## **Project Conclusion and Way Forward**

Developed and implemented by the SRHR and Religious and Social Norms working group within the Swedish Platform for Global Sexual and Reproductive Health and Rights Issues, this project amplifies the voices of Swedish and African FBOs to better understand how SRHR programs are implemented in religious contexts. Through interviews with these actors, we can now better understand the challenges and facilitators faced at the community and organisational level that may hinder or enable such programs’ effectiveness. As confirmed by SRHR experts through the project’s webinar (see Tables 6, 7, and Appendix 1) , there are several multisectoral actions to be taken that may better support FBOs in engaging with SRHR in religious contexts and enable donors and secular partners to understand SRHR norms and the requirements of context-specific interventions.

Relatedly, some webinar audience members voiced a call for action in the space of SRHR and religious groups. They explained their concern that if SRHR is not intentionally raised as an issue, other organisations with potentially more restrictive agendas will continue to alter the conversation and subsequent programming. The audience’s call emphasises the need for this project’s discussions to grow, thereby securing more funding and enabling dedicated action.

To advance SRHR globally, we recommend that actors across sectors work collaboratively to implement the project and webinar’s recommendations from the local to international level.

Table 6. *Key points: Talent Jumo’s (Founder of Katswe Sistahood) webinar video*

- Engaging with faith actors is integral to advancing SRHR in religious communities.
- Faith leaders reach large communities and can engage audiences by inviting experts and collaborating with mainstream organisations.
- SRHR community must properly invest in equipping faith leaders with information, skills, and capacities necessary to support their congregations.
- FBOs must be able to access long-term, consistent, and sometimes unrestricted funding.
- Spaces must be created/expanded that enable collective reflection of how to collaborate with FBOs in SRHR.

Table 7. *Key points: Panel discussion*

- The religious landscape is complex, contextual, and constantly evolving.
- Transparency regarding FBOs’ definitions of SRHR is crucial in building collaborations.
- Actors are utilising diverse strategies tailored to communities they engage with to create significant work within the “moveable middle.”
- Faith actors exist within various community structures and take on many roles.
- Faith actors and religious leaders should not be assumed to be inherently uninterested in engaging with SRHR, they play a large role in maintaining community well-being.
- Localisation is important to the SRHR agenda; one example being the joint United Nations program to eliminate female genital mutilation led by United Nations Population Fund.
- More opportunities for collaboration between secular and faith-based actors in this space are necessary to foster mutual understanding of needs.
- There is a need for further research to unpack norms and understanding regarding SRHR in religious contexts.

## Appendix 1: Webinar Details

### Summary of Talent Jumo's (Founder of Katswe Sistahood) Webinar Video

Engaging with SRHR is crucial within religious communities because believers are sexual beings. FBOs have been flagged as opposition to SRHR in many instances, with some faith communities preventing women from giving birth in health facilities and instances of violence perceived to be solved by prayer. However, faith actors have and will continue to be integral in advancing SRHR efforts. Amongst other reasons, the faith-based community should champion the non-discrimination agenda, as they have the duty to care for individuals in their diversity.

Progress can be made by engaging with faith leaders and providing them with additional tools, such as psychosocial support and information on victim-friendly units and the justice system. Therefore, assumptions made in the development sector about FBOs and their disinterest or inability to engage in advancing SRHR need to be challenged. Relatedly, FBOs need to become more proactive in seeking information and supporting their congregations.

Faith leaders can reach their communities in religious spaces and large gatherings. When speaking to their congregants, they have an engaged audience with whom they can discuss the SRHR issues most impacting their community. These issues should include certain vulnerabilities experienced by the youth, such as sexual exploitation due to poverty. At such community gatherings, faith leaders can invite experts in advancing SRHR such as human rights defenders, women's rights groups, and organisations that provide legal support to survivors to share their knowledge with the community. With that said, bringing together faith communities and mainstream organisations can foster synergies and collaborations, leveraging the former's ability to open community doors and the latter's subject matter expertise.

The SRHR community must invest properly in equipping faith leaders with the necessary information, skills, and capacities to support their congregations fully. In the same vein, long-term, consistent, and sometimes unrestricted funding is needed for FBOs to grow and expand their programming in a way that improves SRHR indicators. If enough spaces are created to enable collective reflection on how to collaboratively and most effectively advance SRHR in religious contexts and faith leaders have the proper resources, the tools and guidance developed will go a long way in challenging stigma and stereotypes that heighten vulnerabilities.

Access to SRHR services should not be hindered by religious barriers but should be enabled by organised faith communities acting as connectors. Further deliberations and investments in this sector are encouraged to shed light on other areas of importance.

## Summary of Panel Discussion

The religious landscape is complex and contextual, constantly evolving rather than static. As used by some actors, the definition of SRHR provided by the [Guttmacher Lancet report](#) encompasses various entry points for programming. Transparency is crucial in conveying FBOs' definitions of SRHR when entering into agreements with partner organisations. While FBOs are not expected to address every issue under the SRHR umbrella, it is important that their partners are not at odds with the SRHR definition followed.

While a minority of progressive actors are aligned with SRHR, the majority of actors lie in the movable middle where significant work is taking place. The strategies employed by these actors depend on their specific entry points and the particular individuals or groups they engage with. Religious actors are a diverse group with varying levels of influence and power. They can be found working in health systems, theological institutions, loose networks, and may take on roles as human rights defenders, feminists, or informal leaders. These actors operate within civil society, driving change from within and serving as moral or legal duty bearers. However, the financial landscape for religious actors is often unequal, with oppositional actors having access to significant resources that can impact FBO operations.

Faith actors should not be assumed to be inherently traditional and uninterested in engagement with SRHR, as many do want to get involved. The COVID-19 pandemic has highlighted the role of faith actors in promoting public health and motivated leaders to engage with SRHR, something that is often driven by the donors who bring these issues onto the agenda. Religious leaders play a large role in their communities as psychosocial caregivers and linkers to services and should be supported in increasing this work.

Localisation is an important agenda, including providing direct contracts to local decision-makers and program implementers. The joint UN program to eliminate female genital mutilation (FGM) led by UNFPA but implemented by local organisations is an example of this being carried out on the ground. Religious leaders have significant involvement in local efforts to eradicate FGM. However, obtaining field data, such as the accurate prevalence of FGM, can be challenging; exploring new methods such as mobile technology for data collection is necessary.

Collaboration with progressive actors, human rights defenders, and queer theologians is crucial for bridging gaps and strengthening isolated feminist movements. The approach and methodology of dialogue are just as significant as the content discussed, and mediation skills and technical communication capacity are necessary. With that said, bridge builders who can speak both theological and technical language play a valuable role in fostering understanding. Additionally, funding for theological education is important for developing theological interpretations regarding SRHR issues. Safety and security in advocacy are also important considerations.

Opportunities for collaboration between secular and faith-based actors should be increased to break silos and enhance cooperation. Strengthening the capacities of religious actors and involving them early in processes are essential steps. Therefore, engagement and collaboration among different actors and sectors, facilitated through networks and forums, are vital. Yet, forums alone cannot be the starting and ending point of conversations. Linking SRHR work to global and regional strategies, such as the EU Global Strategy on Health, presents opportunities for progress. The upcoming ICPD 30 national and regional meetings should focus on ensuring everyone's engagement and promoting SRHR.

Moving forward, it would be useful to generate more evidence regarding *what* SRHR interventions work in religious contexts and *how* they work. Knowledge gleaned from this research, in addition to impact evaluations that test such interventions, could help inform funding and implementing organisations. Specifically, there is also a need for more research related to unpacking norms and understanding faith-based health systems. In conducting such research, researchers must be aware that Swedish FBOs do face challenges in balancing different viewpoints and norms within their organisations. Therefore, researchers must avoid assuming organisational unity regarding SRHR programming.

In conclusion, contextualisation and localisation are important in SRHR efforts, and trust, sustained collaboration, and long-term support are key enabling factors. Concrete examples are needed to facilitate mutual understanding of needs. Exploring new platforms for engagement between secular and faith-based leaders and organisations is necessary to foster dialogue and cooperation.

## Appendix 2: Project Results

### AFRICAN FBOs: Themes discussed in report

#### TYPES OF WORK

Service training and provision	Primary/SRHR health care services (GBV case management, youth clinics, post abortion care, prevention/treatment of HIV and STIs, family planning services including contraception), mapping and providing referrals, training health staff on SRHR, distributing health goods/equipment, GBV/FGM prevention, providing unconditional cash to SGBV survivors, home visits to new mothers (prevent malnutrition, GBV...), providing GBV survivors with lawyers for litigation, punishment and compensation and counselors before they enter court, running safe houses for women escaping abuse
Communication	<p>Type of message: rights/information awareness raising, comprehensive sexuality education, advocacy to men and boys regarding freedom for women/girls, personal hygiene, importance of preventive care</p> <p>Audience (Where): houses, health facilities, community centres, schools, places of worship, congregational groups</p>

	Audience (Who): community members, local committees (community elders/stockholders), students, parents, religious leaders, local authorities, local police, adolescents and youth
	Potential Medium: Media campaigns
	Enabling normative change: employing social and behavior change communication (includes sensitising religious leaders to SRHR issues and facilitating lines of communication between rights holders and duty bearers)
Program development	GBV survivor services, LGBTQ rights, abortion rights, sex workers
Capacity building	Improving social/physical aspects of health facilities, promoting south to south learning, implementing demonstration/research projects, offering sub-grants
Advocacy	Internal: building commitment to SRHR (programming) within organisations
	External: building commitment to SRHR (programming) with political decision makers, advocacy for better SRHR policies and more SRHR budgets at all governance levels local to international
Research	

#### AFRICAN FBOS: CHALLENGES FACED

Community level	SRHR issues	Sexual health, child and forced marriage, maternal mortality, HIV/STIs, child pregnancy, school dropouts, gender-based violence, divorce and separation
	Conservative communities	SRHR and related topics are taboo: Hesitation to use family planning, shy away from services because of stigma and myths, SRHR issues are controversial to discuss, youth don't feel they have right to talk about these issues, religious leaders are hesitant to bring them up, viewing SRHR as "package" that includes more controversial topics like LGBTQ rights, people feel talking about issues is implanting ideas
		Religious doctrine/traditional culture/norms are at odds with SRHR for all: Perpetuates poor SRHR, faith institutions can be patriarchal, women are sexualised/objectified, promotion of heterosexual and monogamous behavior, strict gender roles
	Experiences of community members	No partners willing to guide through religious community improvement journey, lack of trust in western organisations, people feel shy to receive family planning services, fear of going to health centre (GBV, stigma, myth, bias of health professionals), transportation and clinic cost too high, people left behind when services are shut down, lack of ability to maintain hygiene during menstruation, might not return to clinic after poor first experience

	Institutional challenges	Lack of referral pathways, lack of policy/legal framework for topics (i.e., child marriage), use of traditional birth attendants because of prohibitive cost of clinics, SRHR services are unavailable in some locations, SGBV perpetrators are not prosecuted, police are not well trained to handle GBV
	Organisational challenges	Takes time to get community/leaders on board, budget constraints, lack of research/documentation, ensuring consistency in linking community to services and availability even without funding, time sharing between grants and actual work, staff must pay attention to cultural sensitivity, lack of skilled personnel, services expire when unused, need to ensure trickle-down effect through organisations/communities, lack of innovation/tailoring programs
Broad level	Funding	Need to make diverse investments, grants need to reflect time normative change takes, opposition better funded, harmful to identify problems but not avail resources, politicised environment, religious constituency vs. Secular donors, need of long-term funding
	Other	Understanding link between SRHR and other social issues, ensure continuous reflective spaces for religious groups, decolonising aid (adequate investment and follow through, open conversations about development agenda/success), must respond to funder guidelines, must consider sustainability in project conceptualisation, can't make progress expected without resources, need more focus on primary healthcare, need more skilled workers and updated knowledge

#### AFRICAN FBOS: ENABLING FEATURES OF WORK

Organisational characteristics	Internal	Grassroots based, faith owned, non-hierarchical and diverse, open network (anyone can join), follow international management standards, focus on marginalised/power imbalances, health system management, promoting human rights through SRHR, approachable/flexible in meeting needs, policy procedures for implementation, experienced/gendered staff where necessary
	External connections	Leaders emerge from religious community, supported by religious institution leadership, resourcing from funding partner, mandated to work on GBV, utilising available existing health structure, coordinate/collaboration (UN cluster, health system)
Organisational work	Working with religious leaders has influence over community, utilise different methodologies, collaborations (lawyers, CSOs, commissions, government, police, UN agents), act as a referral partner, strong health education, create safe spaces	

## AFRICAN FBOS: IMPACT OF COVID-19

Positive impacts	Discovered can build trust in online spaces, leveled playing field (can attend events online), joined consortiums on freedom of religious belief, people felt empowered to use digital communication
Negative impacts	Funding hasn't come fully back from being focused on COVID, hindered well-being and religious institutions are facing the aftermath, exposed low level of preparedness for emergencies, lack of support system due to digital divide, used as an excuse to limit civic space, difficult to achieve transformation online
Negative and positive impacts	First encounter of SRH issues for some religious leaders and now they are working on issues, entry point for some communities to talk about SRHR issues, service delivery had to adapt quickly, exposed how relied upon faith-based facilities come last in priority chain

## AFRICAN FBOS: STRATEGIES TO OVERCOME CHALLENGES

Foundational factors	Collaborations	Focus on providing justice with police/local authorities, encourage innovation through exchange, understand who to convince/how (point person), engage in secular spaces, working grassroots, bottom-up, participatory approach, working with government, working directly with religious groups to bring out of silo, ensure systems can keep up with referral demands, gaining trust through continuing work
	Communication	Tailor advocacy with politicised base in mind, package info based on religious teachings, consider religion, cultural and social norms, decide to break taboo by initiating conversation, maintain dialogue with community, conducting business in open
Programming factors	Tools for success	Embed community monitoring work, utilise the media to deliver programs/messages, combine duplicated resources then distribute, advocacy and awareness campaigns, provision of SRHR supplies/specialised services, resources translated into local languages, hybrid approach to communication (religion and facts)
	Working with religious leaders	Gaining respect, numerous advantages, strategies for building relationships (reach highest authorities first, internal advocacy), religious leader activities (disseminate info at pulpit, relate and talk to communities, perform referrals)
	Working with community	Peer education (small groups, youth groups, parent groups), multistakeholder workshops (encourage linking for referrals, engage religious leaders, balance religious and secular experts), large public meetings, identify, train and deploy men to be gender champions, community interpreters that explain/demonstrate health messages, strengthen community structures, provide space for

		reflection--> action, receive authorisation to exist/work in community
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#### AFRICAN FBOS: RECOMMENDATIONS FOR FBOS

Organisational	Maintain neutrality (if a CBO), do not be afraid to initiate the work because people need the help, strengthening org capacity/policy procedures, perform gender, religion, and context analysis, be respectful of/work to understand different perspectives, be open with work, have community interpreters, leaders disseminate info, utilise multistakeholder approaches, work with strategic people/institutions that support work, ensure appropriate use of funds and accurate priorities, ensure consistency in ongoing projects
Project related	Work with police to create survivor friendly units, use courts to bring perpetrators to justice, target marginalised groups with programs, raise awareness of women- especially in schools and workplaces, capitalise on parents' ability to communicate with their children, create more health programming, have more long-term projects, implement strong referral systems

#### AFRICAN FBOS: Additional Themes

#### AFRICAN FBOS: COMPARATIVE ADVANTAGES OF FBOS

Relationship to community	Trusted by and have relationship with community so they understand needs, carry moral values held by community/have moral authority, entry to community is smooth, can utilise religious texts to advantage, can engage faith leaders, health facilities are often faced based, large following once religious leaders are on board
Structure	Have organisational structure, large volunteer structure
Note: For any type of organisation, it matters how you treat the people who benefit from the work	

#### AFRICAN FBOS: MITIGATING BACKLASH TO SRHR PROGRAMMING

Working with institutions	Work with government, ensure system in place to support women who speak up, support policy makers when targeted by opposition groups, involve religious leaders in awareness raising campaigns, engage health facility management committees
Working with communities	Advocacy and awareness campaigns, focus on issues present in community- shy away from controversy, use community-based approach (change beliefs of own

	people), empowering good practices (skills building), be transparent/consistent with intervention limitations, respect social norms and values
Carving own space in sector	Be proactive (set long term strategy), invest in strategic communication, show plurality of religion and how constructive voices exist

**AFRICAN FBOS: IMPACT OF ORGANISATIONS' WORK**

Policy impact	Heightened interreligious voice around SRHR, use religious authority to influence decisions	
Development impact	Improved...	Greater understanding of importance of healthy timing and spacing of pregnancies, empowered women to accept rights and services, perpetrators changed perception (understand women's rights), GBV survivors receive necessary support, increased awareness through education of health info/rights, increased access to antenatal services and family planning, improved hygiene, children's health and adherence to HIV treatment, parents talk to their children about SRHR
	Reduction in...	Maternal and child mortality rates, GBV (leaders talk about it too), HIV incidence, child marriage
	A sensitised community structure changes can change cultural norms	
	Official support of faith community makes it easier to provide the full method mix	

**AFRICAN FBOS: REASONS FOR UNSUCCESSFUL PROJECTS/LESSONS LEARNED**

Unsustainable incentivisation for program leaders--> still working on finding a better way
Not everyone can be persuaded to see problem
Be proactive to counter opposition --> encourage multisectoral dialogue
If there is refusal of religious engagement, the opposition organises
If focal points do not create information feedback loops, it is difficult to create programs

**AFRICAN FBOS: MISCELLANEOUS INFORMATION**

There is a desire for knowledge sharing to take place across FBO environments
There is an awakening of multilateral agencies/governments to engage with faith actors, but it needs to be accelerated

## AFRICAN FBOS: FUTURE RESEARCH TOPICS

Programmatic	Mobilising religious groups in patriarchal communities	Communicate this in a positive way back to religious communities
	Religion observatory: organisational/ political economy analysis	
	How to bring change in expensive but low impact program	
	How to build on positive aspects of church life	
	Addressing violence against women and girls in religious circles	
Norms/tradition/ doctrine	Perceptions around family planning	
	Continuation of patriarchal tendencies, religious dogma	
	Norms hampering/promoting SRHR	
	Morals of people	
Needs of the people	Establish statistics around practices within church	Prevalence of family planning services/barriers to use
	Follow through on emerging themes (I.e. youth support systems)	
	Causes and solutions to adolescent forced marriage, rape, etc.	

## Swedish FBOs: Themes included in the report

### SWEDISH FBOS: CHALLENGES WORKING WITHIN THE ORGANISATION

Barriers at societal level	Gender/SRHR is “softer” area--> lazy social response
	Changing Swedish feminist foreign policy
Grouping of SRHR into “package”	
Member of larger church network spanning diverse contexts	Some Swedish members don't see global perspective
	Conservative beliefs in large network- “no sex before marriage”
	Rely on long relationships with some conservative churches
	Swedish plans not realistic for other conservative contexts
	Balancing voices within church
SRHR is not a priority	Silence and stigma, lack of awareness of gender/SRHR
	Speaking out for SRHR priorities= conflict within the organisation

	Employees' time spread thin
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#### SWEDISH FBOS: FACILITATORS WORKING WITHIN THE ORGANISATION

Programming support	Collaborating with other FBOs and CSOs	
	Sex, age, disability disaggregated data	
	Collaboration between program managers, thematic and policy advisors	
	Institutional buy-in	
Institutional foundations	Position paper	Evidence based and includes theology
	Faith leaders don't have mandate to influence ongoing SRHR work	
	Faith and rights-based organisation	
	Adopted Guttmacher Lancet SRHR definition --> connect SRHR to other work	
	Integration of SRHR into all development issues	
Staff	Large female staff/leadership	
	Shared physical work space	
	Shared passion for work	
	Shared beliefs about SRHR	
	Belief in social responsibility	

#### SWEDISH FBOS: CHALLENGES WORKING WITH AFRICAN FBO PARTNERS

Challenges that have to be addressed from Swedish FBO side	Accused of being "too influenced" by SIDA	
	Lack of SRHR definition backed by Church	
	Conversations never fully horizontal (as funder)	
	Balancing local employees' insight with other data available	
	Responsible for putting partners at risk	
	Mending broken/sensitive collaborations	

	Finding ways to reach community takes time	
	Can only support best practices	
Community-level challenges	Conservative communities	Lack of common language to discuss SRHR
		Concept of gender unknown/not discussed
		(Few) women employed for work not on the basis of it being a right
		Authorities reluctant to talk about SGBV/collaborate with survivors
		Training male staff to women's needs/priorities
		Finding female staff--> talking to women
		Components left out of programs
		Conservative family/marriage norms--> silence/taboos... can lead to conflicting program/community messaging (for country partners too)
		"No sex before marriage" norm
		African FBO partners' mindset can be engrained in patriarchal systems
		Faith institutions can be patriarchal
		Women absent from decision-making spaces
		Some rights not allowed to be discussed
	Grouping of SRHR into (western) package	
	Fear of invading Western agenda	
Logistical challenges	Trained staff turnover	
	Lack of funding/funding taken away	
	Areas are difficult to reach	
	Local employees' security	

SWEDISH FBOS: FACILITATORS WORKING WITH AFRICAN FBO PARTNERS

Softer skills	Establishing trust	Working with religious leaders	Helping access the community/women
			Courage/strategise against resistance
			Engage with progressive parts of the Church
			Linking with referral pathways
			Trusted source conveying message
			Understanding importance --> sustaining programs
		Working with trusted non-faith sources	Community role models
			Women NGOs
			Ministry of women/children's affairs
			Traditional leaders
			Employing locals
			Medical providers conveying message/input
			Collaborate with/train authorities
			Collaborate with government
		Trust in/knowledge of same religious community	
		Build trust/common ground/safe spaces	
	Understanding context	Working gradually (gender --> specific SRHR components)	Addressing reality
		Utilising acceptable language (entry point)	Using theology/progressive interpretations
			Meeting SRHR expectations of donors
			Tying work to quality and accountability frameworks
			Tying work to rights-based perspective
			Understanding local environments & capabilities
			Are knowledgeable/trustworthy
			Telling own story
			Discussing topics that are legal
			Incorporating SRHR into all projects

		Finding solutions without accusations	
		Engaging community with respect and curiosity	
		Talking to women (sometimes alone) --> they know best	
Planning factors	Seeking external support to strengthen work	Women in community challenging patriarchy	
		Progressing short term partnerships into long-term	
		Strengthen bonds with aligned African churches	
		Connect with local organisations to understand their work	
	Effective programming strategies	Supporting development of leaders in partner organisations	
		Create platforms for women/include in decision-making	
		Training men on SRHR	
		Facilitating awareness raising sessions	
		Avoiding SRHR "package"	
		Creating women-led CBOs/cooperatives	
	Foundational programming factors	Seeking external support to strengthen work	
		Effective programming strategies	
		Foundational programming factors	

## Swedish FBOs: Additional Theme

### SWEDISH FBOs: HOW TO LIMIT CHALLENGES WITHIN THE ORGANISATION

Learn from other FBOs
Improve religious literacy
Build strong internal alliances within church leaders
Highlight SRHR successes
Keep conversations on the agenda



People  
Change  
the World

# Diakonia

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