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↪ Religions *for* Peace

The Role of Religious Actors in Population Dynamics

Insights from the African Dialogues on Faith and Demography

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Federal Foreign Office



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The Role of Religious Actors in Population Dynamics

Insights from the African Dialogues on Faith and Demography

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FOREWORD

A country's 'demographic dividend' – the economic benefits that it can reap from its age structure – often accrues when an increase in the proportion of a country's working-age population relative to its dependent population (typically arising from declining fertility) is accompanied by effective investments in health, women's empowerment, education and employment.

The population on the African continent continues to grow rapidly: today 1.5 billion people live on the continent, and the figure is expected to reach 2.5 billion by 2050. As African countries are advancing through the demographic transition, immediate multisectoral human rights-based investments are needed in order to reap the potential of a demographic dividend, as addressed by the African Union's Roadmap on Harnessing the Demographic Dividend through Investments in Youth.

Clearly, demographic dynamics can be a great challenge for societies which have to deal with them without the necessary infrastructure, societal investments and political effort regarding education, health care and economy. So, to be able to reap the demographic dividend, long-term investments are needed that require considerable political effort and will. And one major incentive for politics is societal awareness of a certain topic. Demographic dynamics of a certain country are not only of paramount importance for its own society but may impact other countries or a whole region and therefore may also affect political stability and have implications for foreign policy.

Governments in the region that seek to harness demographic dividends for their countries focus largely on investments in health (including family planning), education, and employment of young people. Where governments encounter barriers in managing socio-demographic changes, inter-religious faith-based organisations are well-positioned to help given that they are often already engaged in sectors relevant to population issues, such as health, education, psycho-social well-being, and humanitarian assistance. Yet, to date, governments rarely systematically engage faith actors in efforts to harness the demographic dividend.

This was one of the starting points for the African Dialogues on Faith and Demography series, which was funded by the German Federal Foreign Office. The series was jointly organised by *Religions for Peace*, the Berlin Institute for Population and Development, the German Federal Foreign Office, and the United Nations Population Fund (UNFPA). This series was conceptualised to create a space for open dialogue and exchange between faith actors and relevant experts working on demographic issues. Building on specific experiences of the #The4DSeries – Demographic Diversity & Dividends Dialogues, which focused on government and civil society actors, the organisers of this new dialogue series decided to focus on religious organisations and to collaborate with *Religions for Peace's* Inter-Religious Councils as important players in the field of demography.

The first virtual dialogue explored the concept of the demographic dividend and the potential role of faith actors as partners of governments and international organisations in addressing demographic challenges and opening the window of demographic

opportunities. The four dialogues that followed presented examples of projects and interventions by and with faith actors in diverse African countries promoting gender equality, sexual and reproductive health, girls' education and youth engagement. The closing dialogue highlighted the "how" of success by sharing faith actors' successful strategies that have the potential to be replicated across countries.

By convening key African faith actors, sharing insights on successful case studies, and reflecting on scalable strategies, we hope that these dialogues contributed to increasing awareness on the key potential of multi-religious engagement around demographic change, as well as to fostering cross-sectoral engagement between governments, interreligious bodies, religious leaders and civil society actors.

Berlin, Nairobi and New York,
December 2024

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EXECUTIVE SUMMARY

While populations in many regions of the world are rapidly ageing, stagnating or even shrinking, the population in most African countries is still overwhelmingly young and rapidly growing. Today, the African continent is home to roughly 1.5 billion people. By 2050, Africa's population is expected to reach 2.5 billion. With nearly 60 percent of its population younger than 25 years old, Africa will experience major demographic changes throughout this century that require targeted and adaptive policy responses in every one of the continent's 54 countries.

In Africa – as elsewhere around the globe – both governmental and non-governmental actors and institutions are already implementing policies and programmes to manage and influence demographic changes, some with the explicit goal of harnessing a demographic dividend. The task at hand is not one that governments can tackle alone. It requires the participation of civil society actors, development cooperation and multilateral institutions, as well as the engagement of faith actors and multi-religious organisations. The latter is particularly relevant in Africa, where 95 percent of people identify with a religion and where religious leaders are often respected figures who enjoy greater trust than the state. That governments rarely systematically engage faith actors or organisations in efforts to address demographic change is a missed opportunity.

Against this backdrop, four institutions – Religions for Peace, the United Nations Population Fund (UNFPA), the Federal Foreign Office of Germany and the Berlin

Institute for Population and Development – partnered to convene a series of virtual dialogue events on the role of faith actors in shaping Africa's demographic future: the African Dialogues on Faith and Demography.

The organisers of this dialogue series recognised that many faith actors, including religious leaders, faith-based organisations and inter-religious councils, already work on and influence population issues. African faith actors are active in their communities in areas such as education, health, humanitarian assistance, and psycho-social well-being. Whether directly or indirectly, intentionally or unintentionally, faith actors contribute to creating the social foundations for demographic change. They deliver life-saving health care, help shift social norms and educate young people. This means that faith actors should be considered key partners in efforts to address demographic challenges.

Between April 2022 and December 2023, the organisers of the African Dialogues on Faith and Demography convened six virtual dialogues that brought together African faith actors as well as stakeholders from governments, international organisations and civil society to explore the ways in which multi-religious engagement can contribute to demographic change and sustainable development. The first dialogue served as an introduction to the demographic issues at stake and the sixth highlighted faith actors' strategies for success. The other four dialogues focused on specific topics that were identified as key entry points for faith actors on demographic issues: gender equality, sexual and reproductive health, girls' education, and youth empowerment. Key insights from the dialogue series include:

Religious Leaders (Can) Advance Gender Equality

Many religious leaders and organisations are already promoting gender equality in various ways, including by opposing harmful practices such as female genital mutilation (FGM), gender-based violence (GBV), and child marriage in their communities. Faith actors do this by working to shift social norms and perspectives, and delinking harmful cultural practices from religion. They can also bring men to the table and engage them in conversations about gender equality issues in their families and communities. This can take the shape of questioning traditional concepts of masculinity, developing positive alternatives, and transforming gender roles for both men and women.

Faith Actors (Can) Improve Sexual and Reproductive Health

Many faith actors are using religious teachings to correct misconceptions about family planning and sexual and reproductive health (SRH). For example, religious leaders are providing and disseminating a faith-based rationale for family planning and birth spacing that is grounded in close readings and interpretations of religious texts such as the Bible or Qur'an. They may also argue that maternal and child health must be the top priority for parents, and that further pregnancies should not jeopardise mothers' or their children's health. In addition, as social service and health care providers, faith-based organisations can provide SRH education and services in humanitarian settings and instruct women and girls about menstrual hygiene.

Faith-based Organisations (Can) Promote Girls' Education

Religious organisations are often engaged as service providers in areas critical to advancing the demographic transition, including education. Thus, they have a natural role to play in these settings to promote girls' education by adopting gender-sensitive measures to ensure girls can safely participate and succeed in primary and secondary school. For example, faith actors operating schools can ensure students have access to clean water, adequate sanitation facilities and menstrual products, so girls don't have to miss class when they have their period. Religious leaders can also play a key role by using their influence to advocate for girls' education as a moral good to achieve gender equality – and a necessity to create healthy and resilient families and communities.

Religious Organisations (Can) Empower Young People

Youth wings of churches and mosques are important spaces to work with and empower youth to be the driving force in Africa's socio-economic transformation. Faith leaders can also amplify the voices and needs of young people by inviting them to assume leadership positions in religious organisations. To make a material difference in young people's lives, religious institutions that generate employment opportunities – such as schools or hospitals – can also make a commitment to train and hire youth, including young people with disabilities.

RECOMMENDATIONS

Secular Organisations, Governments and Development Cooperation Agencies Should...

- Identify and support religious organisations and actors that are already advocating for family planning, gender equality, and girls' education.
- Recognise the potential of religious organisations as partners in developing and implementing health and education strategies and programmes.
- Adapt or identify appropriate language for respectfully engaging with faith actors on a long-term basis.
- Seek partnerships with faith-based organisations in diverse settings, including in humanitarian emergencies.
- Avoid making assumptions about religious actors' views on issues such as SRH, FGM or GBV, and engage them in dialogue instead.
- Resource and inform grassroots communities of faith on key socio-demographic issues.
- Connect faith actors with resources developed by other faith-based organisations, such as existing Islamic sexuality education curricula or church declarations in support of family planning.

Faith Actors, Organisations and Leaders Should...

- Develop and promote interpretations of holy scriptures that support gender equality, family planning, and girls' education.
- Educate themselves about key SRH issues affecting their community members.

- Raise awareness within their faith spaces – for example, their institutions or among other religious leaders – about the importance of gender equality, girls' education, and youth empowerment.
- Sensitise parents in their communities about the long-term impacts of decisions they make for their girl children's futures.
- Create child protection policies for their institutions.
- Teach life skills in Sunday school and other religious education settings, emphasising that a person's physical, mental, and spiritual health are interconnected.
- Keep up with the modernisation of society, including in terms of technology, by recruiting and empowering youth leaders to advise their planning and decision-making.
- Promote and actively support youth leadership within their institutions and amplify young people's voices and concerns.
- Create inclusive spaces and practices for young people with disabilities, and advocate for their right to education, training and employment.
- Use their position of influence with policymakers to support human rights-based policies at various levels – sub-national, national, regional, global – and to better meet their communities' needs.
- Reach out to boys and men to challenge traditional gender roles that harm them as well.

LIST OF ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
FBO	Faith-Based Organisation
FGM	Female Genital Mutilation
GBV	Gender-Based Violence
HIV	Human Immunodeficiency Virus
IDP	Internally Displaced Person
IPV	Intimate Partner Violence
MHM	Menstrual Hygiene Management
NEET	Not in Employment, Education or Training
NGO	Nongovernmental Organisation
SGBV	Sexual and Gender-Based Violence
SRH	Sexual and Reproductive Health
STIs	Sexually Transmitted Infections
SWEDD	Sahel Women's Empowerment and Demographic Dividend Project
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

1 | INTRODUCTION: WHY A DIALOGUE SERIES ON FAITH AND DEMOGRAPHY IN AFRICA?

While populations in many regions of the world are rapidly ageing, stagnating or even shrinking, the population in most African countries is still overwhelmingly young and rapidly growing. With nearly 60 percent of its population younger than 25 years old,¹ Africa will experience major demographic changes throughout this century that require targeted and adaptive policy responses in every one of the continent's 54 countries.

Today, the African continent is home to roughly 1.5 billion people. By 2050, Africa's population is expected to reach 2.5 billion. And by 2100, it could reach close to 4 billion people.² Even as the population overall will continue to grow, over the same period, the average number of children per woman in the region is expected to decrease by half: from an average of four children per woman today, down to two by the end of the century.³

This projected population growth alongside a trend towards smaller families presents African countries with both significant opportunities and challenges. An increasing number of people coupled with declining fertility rates presents the opportunity of a growing young workforce that can help bring about a boost in economic productivity – sometimes referred to as a **demographic dividend** (see glossary and Chapter 2). Yet realising this opportunity relies on certain conditions, including, at a minimum, good education and job prospects for all young people.

The economic and social challenges many African countries face are substantial. The continent's rapid population growth alone is making it difficult for many governments to provide their people with adequate schools, hospitals, food, clean water or jobs. These challenges are further complicated by the global climate crisis,⁴ health emergencies such as the COVID-19 pandemic,⁵ and a growing number of armed conflicts, including on the African continent.⁶ Furthermore, the legacy of European exploitation of Africa and its people through the transatlantic slave trade and colonisation continues to have a detrimental impact on many African countries.^{7, 8, 9, 10}

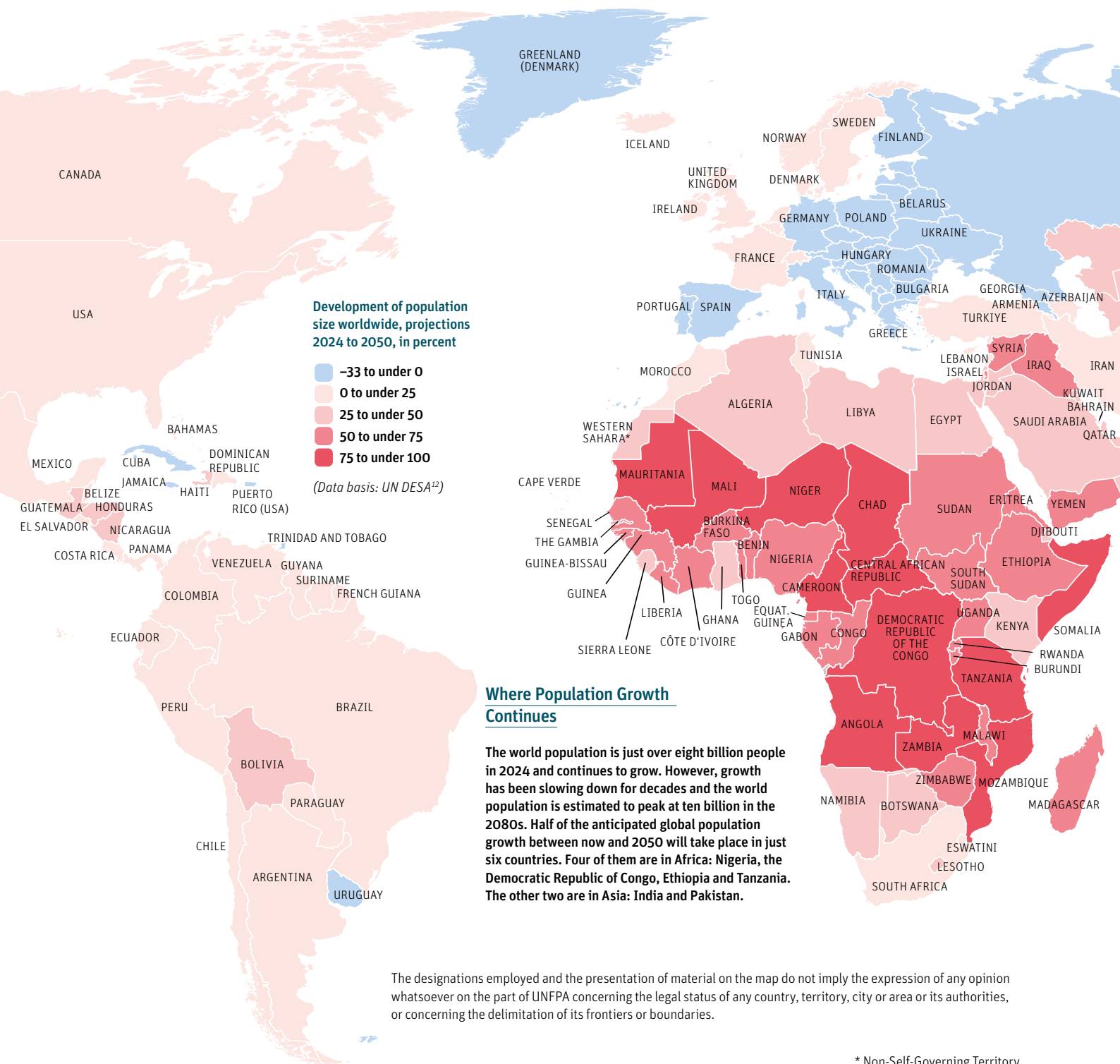
While these challenges present a grim picture, there are well-established policies and interventions that improve people's lives in general – and can also ameliorate the challenges posed by a rapidly growing population. These include efforts to improve health and health care, especially for women and children; increase girls' access to secondary education and employment; and to promote **gender equality** (see glossary) in all areas of private and public life.

In Africa – as elsewhere around the globe – both governmental and non-governmental actors and institutions are already implementing policies and programmes to manage and influence demographic changes, some with the explicit goal of harnessing a demographic dividend.¹¹ Indeed, the task at hand is not one that governments can tackle alone. It requires the participation of civil society actors, development cooperation and multilateral institutions, as well as faith actors and multi-religious organisations.

What is Demography?

Demography is the scientific study of human populations, specifically looking at the size, structure and development of populations.

To understand so-called “population dynamics”, or how populations develop and change, demographers look at three main processes within the population they are studying: The number of births, also referred to as **fertility rates**, the number of deaths, also referred to as **mortality rates**, and **migration** (see glossary).



The designations employed and the presentation of material on the map do not imply the expression of any opinion whatsoever on the part of UNFPA concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

* Non-Self-Governing Territory



The African Dialogues on Faith and Demography

Against this backdrop, four institutions – Religions for Peace, the United Nations Population Fund (UNFPA), the Federal Foreign Office of Germany and the Berlin Institute for Population and Development – partnered to convene a series of virtual dialogue events on the role of faith actors in shaping Africa’s demographic future: the African Dialogues on Faith and Demography.

The organisers of this dialogue series recognised that many faith actors, including religious leaders, faith-based organisations and inter-religious councils, already work on and influence population issues. African faith actors are active in their communities in areas such as education, health, humanitarian assistance and psycho-social well-being. Whether directly or indirectly, intentionally or unintentionally, faith actors contribute to creating the social foundations for demographic change. They deliver life-saving health care, help shift social norms and empower young people. This means that faith actors can be considered key partners in efforts to address demographic challenges.

Where governments encounter barriers in managing socio-demographic change, religious communities and their leaders are often well-positioned to lead change for sustainable development because religious actors and organisations are respected by and work closely with their communities.

Catherina Hinz, Director, Berlin Institute for Population and Development (Dialogue 2)

The goal of the dialogues was to bring together faith actors as well as stakeholders from governments, international organisations and civil society to explore the ways in which multi-religious engagement can contribute to demographic change and sustainable development. In addition, the dialogues aimed to deepen the understanding of the specific roles inter-religious councils and other faith actors can play in these processes by inviting case study presentations of how they can engage on critical population issues. Finally, the events intended to foster networking and cooperation with and between governments, inter-religious bodies, religious leaders and civil society actors.

Between April 2022 and December 2023, the organisers convened a series of six virtual dialogues on the role of faith actors in shaping Africa's demographic future. Roundtable discussions during the inaugural dialogue about key entry points for faith actors on demographic issues* helped guide the organisers' decision-making on future dialogue topics.

* In this report, demographic issues are understood as areas yielding influence on the demography of a population. This can be, for example, the provision of (sexual and reproductive) health services, which have a direct impact on fertility and mortality rates.

Dialogue 1:
The Role of Faith in Harnessing
the Demographic Dividend
(28 April 2022)

1

Dialogue 2:
Advancing Gender Equality
to Realise the Demographic
Dividend
(7 July 2022)

2

Dialogue 3:
Improving Sexual and
Reproductive Health (SRH) to
Accelerate the Demographic
Transition
(7 December 2022)

3

Dialogue 4:
Girls' Education: The Key to
Demographic Transition
(10 May 2023)

4

Dialogue 5:
Young People's Needs
and Opportunities
(13 July 2023)

5

Dialogue 6:
Faith Actors as Agents of
Change: Strategies for Success
(19 December 2023)

6

Dialogue participants were invited from as many countries as possible across Africa, and reflected a broad diversity of age, gender and religion. Individual dialogues brought together between 60 and 100 faith actors and other key stakeholders from countries across the African continent. Over a two-hour period, each event featured an input from an African expert on the main dialogue topic, case study presentations from religious leaders and faith-based organisations, as well as roundtable discussions in which all participants were invited to share their insights and exchange ideas and experiences with each other.

This report brings together key insights, case studies, best practices and recommendations coming out of the six dialogues. The second and third chapters of this report summarise the inputs and discussions from the first dialogue in the series. Specifically, the second chapter offers a brief introduction to the concepts of the demographic transition and demographic dividend. The third chapter then explores faith actors' role as agents of change in the context of socio-demographic development. Chapter four dives into the thematic dialogues (Dialogues 2 to 5) and presents learnings from these. Chapter five concludes with recommendations for both faith-based and secular stakeholders who wish to strengthen multi-religious engagement on population issues. Insights and contributions from the sixth dialogue on faith actors' strategies for success are integrated throughout this report.

2 | DEMOGRAPHIC CHANGE AND THE DEMOGRAPHIC DIVIDEND

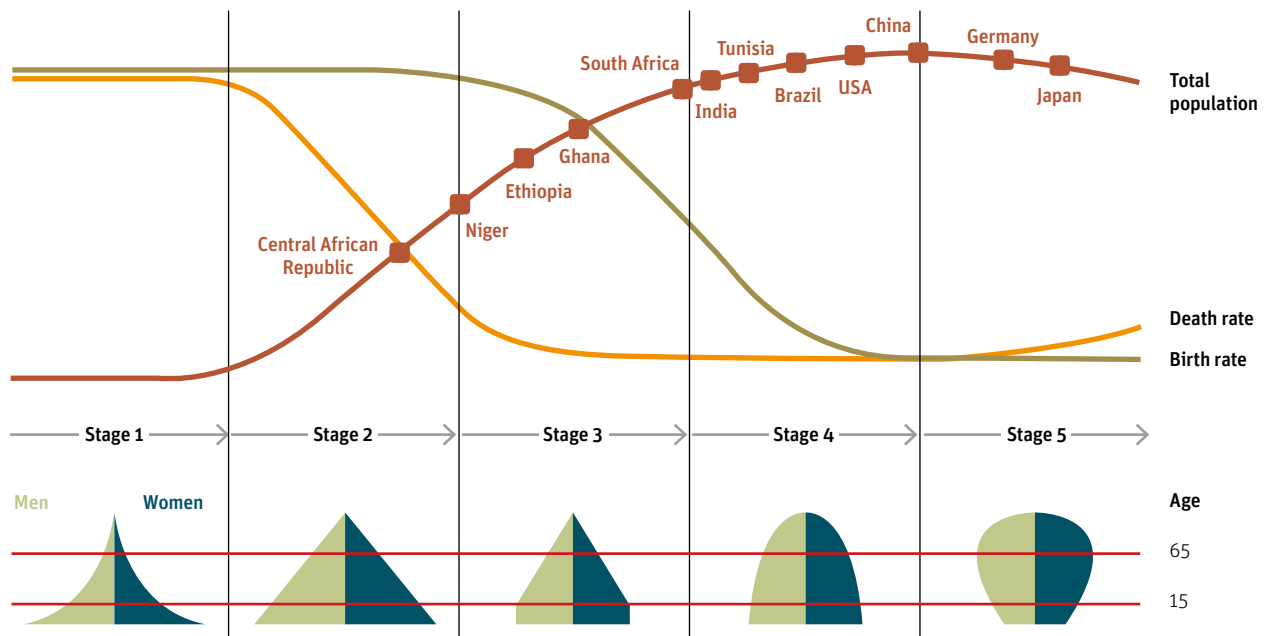
Every country undergoes a **demographic transition** (see glossary) as part of its socio-economic development (see graphic). During this transition, which occurs at different speeds and times, countries experience a shift from high to low mortality and fertility rates. As a result of improved nutrition, sanitation and public health, mortality rates initially decrease, while fertility rates remain high for some time. This temporarily leads to high population growth. Fertility rates eventually start to decline once it becomes clear that more children survive, when education levels and incomes rise, gender equality improves, and people – especially

women and girls – have a greater ability to make self-determined decisions about their life. As a rule, governments can accelerate this process by improving girls' education and women's socio-economic empowerment in addition to strengthening sexual and reproductive health and rights for everyone.

During the demographic transition, the shifting age structure of a population towards an increasing share of working-age people (aged 15 to 64) opens a **window of opportunity** (see glossary) for the so-called demographic dividend.

The Path Through the Demographic Transition

This graphic illustrates the path through the demographic transition by highlighting the development of birth and death rates, total population size, and age structure for a selection of countries in Africa, Asia, Europe and the Americas. Many African countries are still in the earlier phases of transition: since child mortality has already fallen significantly, but the fertility rate remains at a comparatively high level, Africa is still experiencing strong population growth.



(Own representation based on Global Change Data Lab – Our World in Data¹³)

THE DEMOGRAPHIC DIVIDEND EXPLAINED

The demographic dividend is a concept first introduced by the economist David Bloom and colleagues in the 1990s,¹⁴ and has gained significant attention since then. Today the concept is widely used in development cooperation.^{15, 16} Put simply, the demographic dividend describes the potential for an economic boost that can result from shifts in a population's age structure: when the share of the working-age population (aged 15 to 64) is considerably larger than the non-working-age population of young and elderly dependents (14 and younger, and 65 and older).

The “Asian Tigers” as Role Models

The demographic dividend is based on the idea that the socio-economic development that the so-called “Asian Tiger” states – Hong Kong, Singapore, South Korea and Taiwan – achieved is replicable in other contexts.¹⁷ These countries experienced a rapid demographic transition in the second half of the 20th century, which was a critical factor for their **economic growth** (see glossary).¹⁸

During the demographic transition, better access to health care and a rising level of education lead to a decline in fertility rates. When a country's mortality and fertility rates drop, this results in a larger proportion of the population within the working-age group. As soon as the share of the working-age population increases, the so-called window of opportunity for a demographic dividend opens. The potential to reap a demographic dividend then depends on several factors: how quickly and how long the share of working-age population increases, as well as the maximum share of working-age population a country reaches.¹⁹ Even with this change in the population's age structure, a demographic dividend is still not guaranteed. Governments must provide their populations with high-quality education and employment opportunities, invest in young people's health and improve living conditions significantly. These and other necessary structural developments – for example gender equality and women's participation in the labour market – may take many years to realise.²⁰

With a few exceptions in Northern Africa (Algeria, Egypt, Morocco, Tunisia) and Southern Africa (Botswana, Namibia, South Africa), most countries in Africa are still in earlier stages of the demographic transition.^{21, 22} And the path of the Asian Tiger states is only one of several patterns of how the share of the working-age population can develop.²³ Current projections suggest that most countries in Africa will enter the window of opportunity for harnessing a demographic dividend in the next 20 to 30 years.²⁴ Among the numerous countries that are still waiting to reach a peak in their working-age population, there are major differences when it comes to the preconditions that have to be met to reap a demographic dividend.

The contexts and challenges most African countries face are also very different from those seen in the historical case studies economists look to in Eastern Asia. High numbers of internally displaced persons, food insecurity, and the impacts of the climate crisis, among others, impose an entirely different set of challenges on African governments. These disparities make it necessary to adopt a context-specific perspective – recognising each country's unique challenges and priorities – when addressing significant socio-economic issues and advancing the demographic transition.

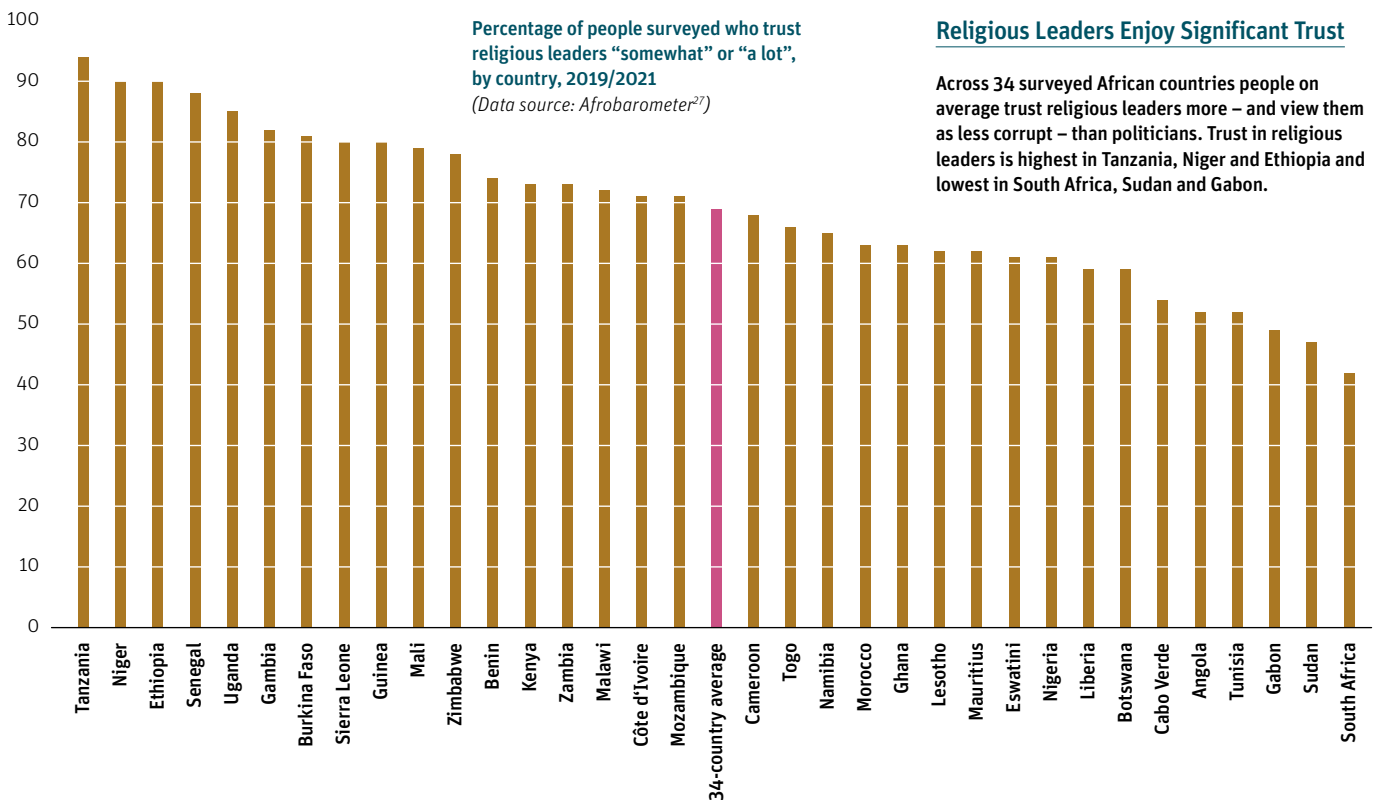
3 | FAITH ACTORS AS AGENTS OF CHANGE

Policies intended to influence demographic developments such as migration and population growth often do not achieve their intended outcome. One of the reasons for this is that far too often, policy makers draft and enact policies without consulting the communities they are aiming to help – both during planning and implementation. But communities usually know best what support and interventions are needed to address the problems they face. Therefore, community engagement is crucial for policy interventions to succeed.

How Religious Actors Can Help Advance the Demographic Transition

The vast majority of Africans, 95 percent, identify with a religion. According to recent surveys from 34 countries across the continent, just over half identify as Christian, about one-third say they are Muslim and four percent self-identify as belonging to other

religions.²⁵ In many African countries – as in other parts of the world – religious leaders are respected figures who enjoy greater trust than the state.²⁶ In addition, many faith-based organisations (FBOs) are already engaged in areas that are crucial for socio-demographic development, including as service providers in health care, education, psycho-social wellbeing and humanitarian assistance.



Religious Leaders Enjoy Significant Trust

Across 34 surveyed African countries people on average trust religious leaders more – and view them as less corrupt – than politicians. Trust in religious leaders is highest in Tanzania, Niger and Ethiopia and lowest in South Africa, Sudan and Gabon.

Given the respect and influence that many faith leaders garner in their communities as well as religious organisations' role in providing social services, faith actors are in a position to be powerful allies in tackling demographic challenges. That governments rarely systematically engage them in efforts to advance socio-demographic change is a missed opportunity.

The world of religions, which includes religious communities of all types, all over the world, dwarfs our secular institutions – governmental, non-governmental and intergovernmental. We know religious institutions are the oldest social services providers.

Prof. Azza Karam, former Secretary General, Religions for Peace (Dialogue 1)

Because of the level of trust and respect that faith actors often enjoy, they wield significant influence in their communities and in individual peoples' lives. At an individual level, a person's decisions when it comes to questions around relationships, sex, marriage or family planning are influenced by their personal values and beliefs, which in turn tend to be influenced by the dominant traditions and cultural values in their (religious) community. When in doubt, people may turn to their Imam, Priest, Rabbi or other faith leader for guidance.

Faith leaders and communities advise and support their members on key questions of life, such as: How should we educate our children? What are my responsibilities as a husband or wife, as a father or mother? In turn, religious leaders consult holy scriptures and provide guidance on applying these teachings and practices to everyday life, including on issues related to gender equality, girls' education, family planning and marriage.

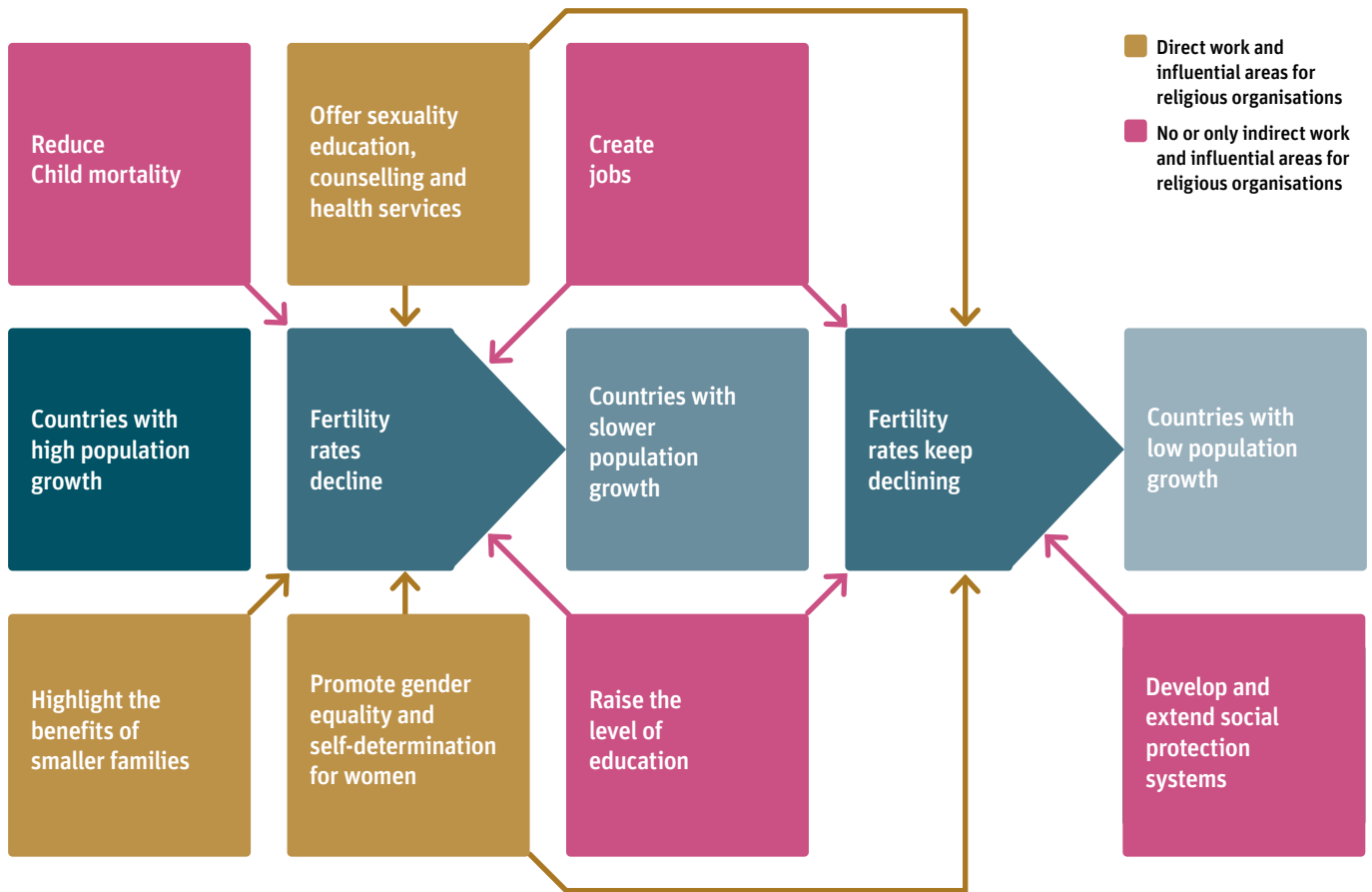
And exactly these types of issues are critical to advancing countries' demographic transition and achieving sustainable development: greater gender equality, universal girls' education through secondary school and beyond, ending **child marriage**, and improvements in **sexual and reproductive health** (see glossary). This is how faith actors and leaders can play a critical role in achieving these goals – and in many instances and places are already playing such a role.²⁸

Many religious actors are contributing to advancing socio-demographic change, for example, by compiling and disseminating religious arguments for family planning. They argue that maternal and child health must be the top priority for parents, and that further pregnancies should not jeopardise mothers' or their children's health. Some faith leaders also advise their communities that responsible parenting means having only as many children as parents can reasonably provide for.²⁹

Others mobilise moral, spiritual and material resources to question traditional concepts of masculinity to combat **gender-based violence** (GBV; see glossary). This can take the shape of working with communities to develop positive alternatives and to transform gender roles for both men and women.³⁰

Change from Within

At the same time, it is important to acknowledge that there can also exist significant resistance to, for example, gender equality within religious institutions and faith communities. As a result, those faith actors who advocate for greater gender equality or speak openly about improving sexual and reproductive health often experience stigma and opposition from within their communities, institutions or from other religious leaders.³¹ Nonetheless, religious actors from multiple faiths across Africa are working to help individuals, families and communities realise their sexual and reproductive health and rights as a moral and spiritual matter.^{32, 33, 34}



(Own representation based on BMZ)³⁵

Beyond outward-facing efforts, religious leaders, faith-based organisations and multi-religious networks are in a unique position to examine and address the exclusion of women, youth, people with disabilities and other **marginalised** (see glossary) groups within their own institutions. By creating change within religious structures and organisations, faith actors can make further strides towards empowering women and young people in particular.

Faith actors contribute to lay the social foundation upon which a demographic dividend is built. They deliver life-saving services to women and girls, help shift social and gender norms, and contribute to the education and empowerment of young people, just to name a few.

Diene Keita, Deputy Executive Director (Programme), UNFPA (Dialogue 1)

Religious Organisations' Spheres of Influence for Demographic Change

Faith actors can influence demographic change both directly and indirectly. For example, religious leaders can highlight the benefits of smaller families or advocate to end child marriage within their communities. At the same time, some faith-based organisations can create jobs for young people, which has an indirect impact on the demographic transition.

Entry Points for Faith Actors

During the inaugural dialogue of the African Dialogues on Faith and Demography, participating faith actors were asked to explore the role faith actors and organisations can play in advancing socio-demographic change – and possible entry-points. The takeaways from these roundtable discussions informed the focus issues selected for the ensuing dialogue series.

■ **Religious actors know their local traditions and norms best.** Therefore, they are in an ideal position to adapt the measures necessary to influence demographic change to the specific socio-cultural and religious realities in their communities. In addition, they can act as key partners to external and secular stakeholders to help them adapt their programmes to local contexts.

■ **Faith leaders can use religious teachings to correct misconceptions about family planning** and sexual and reproductive health more broadly. They can also sensitise their communities on the benefits of smaller families to ensure the ability to provide for one's family financially and otherwise.

■ **Religious organisations are often already engaged as service providers in key areas** critical to advancing the demographic transition, such as education or health. Thus, they have a natural role to play in these settings to, for example, promote girls' education or to end harmful practices.

■ **Religious leaders can approach women's religious associations** within their community to collaborate on advocacy and awareness related to gender-specific issues. Religious councils can also work to include women and youth in their ranks.

■ **Youth wings of churches and mosques present an opportunity to work with and empower youth** to be the driving force in Africa's socio-economic transformation. With a better understanding of what young people need and how religious institutions can support them, faith actors can use their influence to push for and help implement better education opportunities, support young people's employment and entrepreneurship, and empower youth within their own organisations.

■ **Faith actors cater to people's holistic well-being** and know that a person must be healthy to live her or his spirituality. From this perspective, family planning and education are not mere worldly matters. Spiritual leaders therefore have a natural entry point to make sure families are healthy and can improve their living conditions.

4 | INSIGHTS FROM THE DIALOGUE SERIES: LEARNINGS AND GOOD PRACTICES

Four African Dialogues on Faith and Demography focused on a specific issue that was identified as a potential entry point for religious actors to address current demographic challenges. For each dialogue topic, the event organisers prepared a short background brief that was shared with all invited participants. For the dialogue itself, organisers identified and invited (1) a keynote input from an African expert, (2) multiple case study presentations from religious leaders and faith-based organisations, as well as (3) moderators for smaller roundtable discussions in which all participants were invited to share their insights and exchange ideas and experiences with each other. This chapter provides a short introduction to each topic followed by a review of key learnings and good practice examples from each topic-specific dialogue.

4.1 ADVANCING GENDER EQUALITY TO REALISE THE DEMOGRAPHIC DIVIDEND

Gender equality is a human right that remains out of reach for countless women and girls in every region of the world.³⁶ Persistent gender inequality has a direct, negative impact on the lives of women and girls. The impacts of gender inequality are both systemic and individual, and in Africa – as elsewhere – they preclude the full achievement of the continent’s potential social and economic development.³⁷

Achieving gender equality for all women and girls in all areas of public and private life is a prerequisite for sustainable development as well as for advancing the demographic transition and unlocking the potential of a demographic dividend. Greater gender equality also benefits men and boys by disrupting harmful social and gender norms that negatively impact all people.³⁸

Gender equality is central to both the Sustainable Development Goals (SDGs)³⁹ and the African Union’s *Agenda 2063: The Africa We Want*. Explaining that “[n]o society can reach its full potential, unless it empowers women and youth and removes all obstacles to women’s full participation in all areas of human endeavours,” Agenda 2063 calls for “gender parity in public and private institutions, and the removal of all forms of gender discrimination in the social, cultural, economic and political spheres” as well as the immediate end to “child marriages, female genital mutilation and other harmful cultural practises that discriminate against women and girls.”⁴⁰

While many African countries are measuring successes in combating gender inequality in its multiple forms, success is not universal and in some cases is not keeping up with population growth.⁴¹ For example, the prevalence of harmful traditional practices such as **female genital mutilation** (FGM; see glossary) is declining in many countries in Africa, but not all of them.⁴²

Religious leaders and faith-based organisations are at the heart of social transformation.

Nafissatou Diop, Director of Sahel Women’s Empowerment and Demographic Dividend Project (SWEDD), UNFPA (Dialogue 6)

Three key areas of impact – that religious actors can directly influence – in this context are family planning, early and child marriage, and GBV.

Unintended Pregnancies Are Common

Nothing is more central to a woman’s ability to lead a self-determined life than her freedom to make informed decisions about the number and timing of her children. As a result, improving family planning is key to reducing poverty and achieving gender equality. Family planning programmes, which provide information about and access to modern contraceptive methods, have long become common across Africa. Many countries, including Ethiopia, Malawi, Morocco, and Rwanda, have incorporated family planning into their national health programmes.^{43,44} Nevertheless, unmet need for **modern contraception** (see glossary) remains high on the continent. Fifty-eight million African women aged 15 to 49 want to avoid a pregnancy but – due to a range of reasons – are not using a modern method of contraception (such as oral contraceptive pills or condoms) or are using a less reliable traditional method.⁴⁵ As a result, each year 43 percent of pregnancies in Africa are unintended.⁴⁶

Child Marriage is Widespread, Especially in Western and Central Africa

A marriage is considered a child marriage if at least one party is under the age of 18. Therefore, a child marriage is a violation of human rights and a threat to the health and rights of young women. The issue tends to affect girls more than boys because in most cases a girl is married to an older man.⁴⁷ Women who are married as children are at greater risk of becoming pregnant before they are physically or mentally ready. They are also more likely to contract **HIV** (see glossary) and other sexually transmitted infections.⁴⁸



According to United Nations estimates, sub-Saharan Africa is home to 125 million women and girls who were married before their 18th birthday. In a global comparison, the risk of being married as a child is higher in Sub-Saharan Africa than in any other region of the world.⁴⁹ Child marriage is most widespread in Western and Central Africa. Here, almost four out of ten girls marry before they turn 18.⁵⁰ While the number of women married as children has been slowly declining in all parts of Africa since the 1990s, the positive impact of this change has disproportionately benefited girls from wealthier households. When the statistics are disaggregated by household income, the number of children married in the poorest households is increasing in some regions of Africa.⁵¹

Poverty Is One of the Main Causes of Child Marriage

In sub-Saharan Africa, almost four million teenage girls get married every year. Even though the practice of child marriage is increasingly losing support worldwide, in sub-Saharan Africa almost one in three girls under the age of 18 is forced into marriage – one in ten before the age of 15. The risk of getting married is particularly high for girls who are affected by poverty or live in rural regions.^{53, 54}

Percentage of women aged 20 to 24 in sub-Saharan Africa who were married before the age of 18, by socio-demographic characteristics, 2023
(Data source: UNICEF⁵²)

Many women in Africa have their first child at a young age. In sub-Saharan Africa, one in four women gives birth to their first child before the age of 18. In 2022, eleven million African girls under the age of 18 gave birth.⁵⁵ In addition to the health risks of early pregnancy and childbirth for young women themselves, the children of adolescent (see glossary) mothers also face higher health risks than children of women who wait until their twenties to have their first child.⁵⁶ Moreover, pregnant girls and **adolescent** mothers in Africa frequently face social marginalisation, which significantly impacts their physical and mental health, social life, and economic situation.⁵⁷

Preventing child marriage and early childbearing is critical to protect young women's health, and it is also essential for achieving gender equality and a demographic dividend. Improving education for girls is critical in this context. As a rule, the longer a young woman remains in school, the later she will get married and have her first child.⁵⁸

One in Three Women Experience Gender-Based Violence

Gender-based violence (GBV) represents one of the most widespread human rights violations worldwide. Globally, one in three women experience GBV in their lifetime, most commonly in the form of intimate partner violence (IPV) or sexual violence.⁵⁹ GBV has a profound impact on women's physical, mental, sexual, and reproductive health.⁶⁰

One in three women in Africa will also experience GBV in her lifetime. According to statistical data, most of the physical and sexual violence is perpetrated by their partners. IPV has a significant impact on the physical and mental health of women and their children, both in the short and long term. This includes physical injuries, depression, anxiety, unwanted pregnancies, sexually transmitted infections, and even death.⁶¹

Young women and girls are disproportionately affected by GBV. In sub-Saharan Africa – and globally – almost 20 percent of girls aged 15 to 19 who have been in romantic relationships have experienced physical and/or sexual violence from a current or former partner in the past year.⁶² Girls may drop out of school as a result of experiencing GBV, while in other contexts going to school may put them at risk of abuse. This shows a clear linkage between GBV and limits to educational attainment, which must be tackled in order to advance gender equality, the demographic transition, and sustainable development. Moreover, GBV also directly affects women's participation in the labour market as it can lead to increased absenteeism at work and limit women's mobility. As a result, GBV leads to reduced productivity and earnings among women.⁶³

How Faith Actors (Can) Engage on these Issues

The goal of the dialogue was to explore the role and potential of multi-religious engagement in addressing key gender equality issues at the community level, such as transforming gender roles; supporting women's economic empowerment and leadership including within religious institutions; and addressing GBV and harmful practices. Dialogue participants highlighted numerous specific ways in which faith actors can engage on these and other related issues. In breakout sessions, invited speakers shared examples from their work of how they use faith-based approaches to promote gender equality. Suggestions based on participants own experience and practices include:

- Faith actors can help mobilise communities to end FGM, GBV, IPV and other harmful and abusive practices by working to shift norms and perceptions.
- Religious leaders can offer a faith-based rationale for family planning and birth spacing that is grounded in close readings and interpretations of religious texts such as the Bible or Qur'an.
- Faith-based organisations and religious institutions can create child protection policies and educate their communities about the harmful impacts of child marriage.
- Religious leaders can bring men to the table and engage them in conversations about gender equality issues in their families and communities.
- Religious organisations and councils can become more inclusive and empower women within their own structures and leadership.

GOOD PRACTICE EXAMPLES

Transforming Masculinities to End Sexual and Gender-Based Violence

Tearfund is an international faith-based Christian NGO that works in partnership with Christian organisations and churches in more than 50 countries. As part of its mission to tackle extreme poverty, it implements programmes to promote gender equality and address sexual and gender-based violence (SGBV). One of these programmes, **Transforming Masculinities**, engages with men and boys within faith communities to challenge and transform harmful gender norms and behaviours.⁶⁴ Using various approaches, such as community dialogues, programme facilitators promote positive masculinities and gender equality, including through scriptural reflections. The programme and its tools have been implemented and adapted to specific country contexts in different world regions. Guides on how to adapt and implement the Transforming Masculinities programme are available for other organisations that wish to use this approach.⁶⁵ In Africa, Tearfund has implemented the programme – with measurable success⁶⁶ – in the Democratic Republic of Congo, Central African Republic, Rwanda, Burundi, Nigeria and Chad, among others.⁶⁷

Strengthening Women's Religious Leadership in Morocco

Dar El Hadith El Hassania is an institution of higher education and scientific research in Morocco that is responsible for the training of *oulémas* (religious leaders) and researchers in the field of advanced and specialised Islamic studies. As part of a strategic partnership with **UNFPA Morocco**, in 2021 the school started developing programmes focused on strengthening students' capacities to empower and promote women and youth in their future role as religious leaders. Many of the school's students are women, so the initiative also directly aims to strengthen the capabilities of future female religious leaders. Through creative arts workshops, for example in theatre and photography, students are taught how to communicate about challenging topics related to gender equality, such as child marriage and GBV. The goal is to teach future religious leaders innovative ways to engage on these issues and promote positive norms in their communities – especially with young people.⁶⁸

Advocating for Economic Justice for Widows

Widows are among the most socially and economically vulnerable women in Africa – and it is not just elderly women who are frequently widowed. Recent surveys in sub-Saharan Africa have shown that in many countries up to three percent of all women between the ages of 15 and 49 are widowed.⁶⁹ Looking only at the age group

of 40 to 49, an average of nine percent of women are widows.⁷⁰ Widows often experience serious economic hardship and a loss of social support.⁷¹ Upon the death of a husband, women in some African communities are immediately subjected to dehumanising cultural norms and harmful practices unique to widows, which rob them of their rights and dignity. These experiences include land grabbing; denial of inheritance, land rights and property ownership; eviction; suspicion of being a witch; stigma; and dehumanising cultural rites such as wife inheritance and sexual violence.^{72,73} The social and economic impacts of widowhood not only affect women, but also their children. In response to these realities, the **All Africa Conference of Churches (AACC)** launched the **Advocacy Toolkit for Justice for Widows** in 2022. The toolkit is intended to help faith leaders and communities gain a biblical understanding of the role of churches in advocating for the rights of widows.⁷⁴ It outlines support for widows as a moral and religious imperative – from the immediate assistance they may need after being evicted from their home, to economic empowerment programmes to help widows become financially independent so that they can care for themselves and their children. The toolkit is highly adaptable, offering a range of different strategies and is accessible on the AACC website for anyone who wishes to use it – including religious leaders from other faiths.⁷⁵

4.2 IMPROVING SEXUAL AND REPRODUCTIVE HEALTH TO ACCELERATE THE DEMOGRAPHIC TRANSITION

Ensuring that every person – woman, man, girl or boy – can lead a self-determined life with dignity and in good health is central to sustainable development. And to be able to be healthy, make informed and responsible decisions about their lives, and lead a life in accordance with their beliefs and values, every person needs to be able to realise their sexual and reproductive health and rights. Safeguarding people’s sexual and reproductive health (SRH) helps prevent adolescent pregnancies, HIV and other sexually transmitted infections (STIs), unintended pregnancies, and reduces maternal mortality and infant mortality. In short: good SRH is key to a healthy life.

This is why the United Nations included “universal access to sexual and reproductive health-care services, including for family planning, information and education” in the Sustainable Development Goals.⁷⁶ The importance of promoting the “health of women, including sexual and reproductive health” is also anchored in Article 14 of the African Union’s *Protocol to the African Charter on Human and People’s Rights on the Rights of Women in Africa* (commonly referred to as the Maputo Protocol).⁷⁷

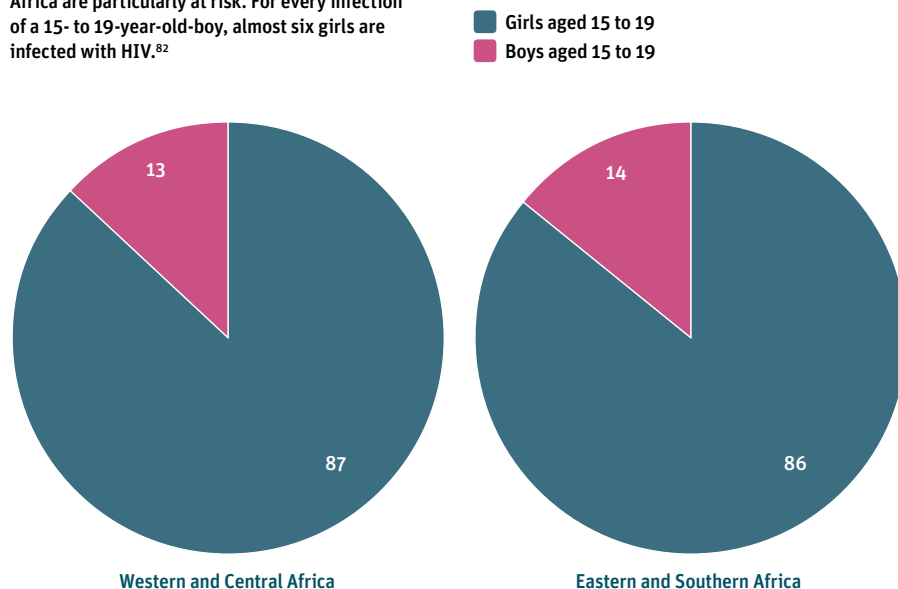
Yet much work remains to ensure that all people receive adequate sexual and reproductive health information and services. For example, women in many African countries have more children than they desire.⁷⁸ In 2019, women in Africa had a total of 27 million unintended pregnancies, about half of which ended in unplanned births and the other half in abortions, miscarriages or stillbirths.⁷⁹ One of the reasons for this is a high level of unmet need for modern contraception. Fully meeting the need for modern contraception would reduce the annual number of unintended pregnancies in Africa by almost 80 percent.⁸⁰

Young women have a high risk for HIV infection

Worldwide, girls between the ages of 15 and 19 are infected with HIV significantly more often than boys in this age group. Young women in sub-Saharan Africa are particularly at risk. For every infection of a 15- to 19-year-old-boy, almost six girls are infected with HIV.⁸²

Meanwhile, HIV remains a significant threat to the well-being of young people in Africa. While the number of HIV infections is decreasing worldwide, the proportion of young people living with HIV is increasing. Sub-Saharan Africa is home to 89 percent of the world youth population aged 10 to 19 living with HIV. This equates to 1.3 million children and adolescents (550,000 boys and 750,000 girls).⁸¹

Sexuality education, which is sometimes also called *life skills*, *family life* or *HIV education* can improve young people’s health, well-being and dignity by equipping them with the information they need to make responsible decisions about their sexual and reproductive health. Providing young people with age-appropriate and scientifically accurate information about human anatomy, contraception, childbirth and HIV improves their overall health outcomes and leads to a reduction in risky behaviour and a decrease in adolescent pregnancies.⁸⁴



Annual new HIV infections among adolescents aged 15-19, share by gender, in percent, 2022
(Data source: UNICEF⁸³)

SRH services and education enable young people and adults alike to make informed and self-determined decisions about their sexual and reproductive health, including the timing and number of their children. This leads to healthier families and communities. At the same time, this helps countries' progress along the demographic transition towards a sustainable population structure and development.

To support sexual and reproductive health throughout the life cycle, services across a variety of sectors must be strengthened. This is from health to education to outreach to young people. In all these areas, religious institutions, religious leaders, and faith communities in Africa play a key role – providing health care services, providing educational materials for schools, and churches offering spiritual guidance, teaching young people critical life skills and advancing human rights at the community level.

Fredrick Okwayo, Technical Advisor, UNFPA Regional Office for East and Southern Africa (Dialogue 3)

How Faith Actors (Can) Engage on these Issues

Faith-based organisations and religious leaders in Africa play a central role in people's lives: as health care providers, educators, spiritual leaders and advocates for their communities. When working or speaking on issues related to SRH, faith actors often encounter stigma and opposition from within their communities or from other religious leaders. Nonetheless, religious actors from various faiths across Africa are working to help individuals, families and communities realise their sexual and reproductive health and rights as a moral and spiritual matter.⁸⁵

Building on the first two dialogues, the third dialogue focused on the importance of improving and expanding SRH services and education across the African continent—and the role of faith-based service providers, religious leaders and other faith actors in this effort. Dialogue participants exchanged experiences and best practices in addressing issues such as expanding support for family planning; improving HIV/AIDS (see glossary) prevention and life skills education; reducing maternal mortality, maternal morbidity (such as obstetric fistula)* and unsafe abortion; and addressing adolescent pregnancy. Suggestions for how to promote SRH using faith-based approaches include:

* The World Health Organization defines maternal morbidity as any health condition attributed to and/or aggravated by pregnancy and childbirth that has negative outcomes to the woman's well-being. Obstetric fistula (an abnormal opening between a woman's vagina and her bladder and/or rectum) is a devastating childbirth injury caused by obstructed labour that leaves women and girls incontinent, stigmatised, and isolated from their families and communities.

- Religious institutions can develop and publish declarations in support of family planning, SRH education for youth, and adequate health services for women and girls. Through their influence, they can increase support and acceptance for these issues.
- Faith actors can widely disseminate and use existing faith-based curricula on family planning that promote support for birth spacing and family planning in accordance with religious texts.
- Religious leaders can receive training on the facts about HIV/AIDS and as a result become better advocates for HIV prevention and treatment. With a better understanding of HIV/AIDS, faith actors can also help reduce the stigma that people living with HIV frequently experience.
- Faith leaders can mobilise their communities to respect the rights of girls and adolescent women using faith teachings and scriptures.

GOOD PRACTICE EXAMPLES

Age-appropriate Sexuality Education from an Islamic Perspective

Amina and Ali are the appealing cartoon teenagers who front a serious project to encourage age-appropriate sexuality education for Muslim youth. The **Kenya Muslim Youth Development Organization (KMYDO)** is a national youth-led organisation that developed the faith-based **Amina Ali toolkit**.⁸⁶ KMYDO grounds its faith-based approach in Islamic values and principles, and the Qur'an's emphasis on acquiring knowledge. The Amina Ali toolkit uses a human rights-based approach and is in line with UNESCO guidelines for sexuality education. Its goals include increasing awareness around issues related to adolescent SRH, increasing contraceptive use and schooling, and reducing risky behaviours and adolescent pregnancy. Prior to implementation of the project, religious leaders carried out a lot of advocacy work among parents, teachers and youths to ensure the largest possible impact of the project. The programme using the Amina Ali toolkit is delivered through faith actors to adolescents in and out of school. The programme has reached 24,000 Muslim adolescents in schools in majority Muslim districts in Kenya. One impact evaluation of the project found a ten percent decrease in the teenage pregnancy rate and an increase in secondary school completion.⁸⁷

Supporting Girls' SRH in Displaced Settings

The project **No More Violence Among Us!** by **Religions for Peace – Democratic Republic of Congo (DRC)** aims to support particularly vulnerable girl children: street children, those living in camps for internally displaced persons (IDP), and orphaned children from war zones. Implemented in IDP camps in Goma, DRC, the project aims to teach girls how their bodies work, and give them accurate information about STIs, HIV and AIDS, including about testing. The project also creates safe spaces for girls who have experienced SGBV and provides them with psychological and spiritual support. To break down taboos in families, Religions for Peace DRC organises intergenerational dialogues with children, young people, parents and chaplains to promote dialogue on issues around sexuality.⁸⁸

Women Educating Women About Birth Spacing and Menstrual Hygiene in Chad

In Chad, the **League of Women Preachers (la Ligue des Femmes Prédicatrices)**, a group of female Muslim teachers, is educating girls and young women about **menstruation** (see glossary) and tackling the stigma around it in order to alleviate **period poverty** (see glossary). In the Lake region of Chad, the group teaches in all-girl classrooms with up to 50 pupils.⁸⁹

In a project supported by **UNFPA**, the League also aims to increase women's use of health centres by educating women about the reproductive health services that are available at clinics, as well as about proper birth spacing, contraception and menstrual hygiene. One successful strategy the group has employed is educating people – including religious leaders – about Islamic arguments for birth spacing, which allows for planning at least two years between births.⁹⁰ According to these arguments based in Qur'anic teachings, after two years of breastfeeding, a woman can get pregnant again in the third year. They argue that this method for spacing births can prevent couples from having more children than they have the resources to feed or educate. Raising awareness about the positive impacts of family planning for children's health among religious leaders has been critical to the League's success to date.⁹¹

4.3 GIRLS' EDUCATION: THE KEY TO DEMOGRAPHIC TRANSITION

Primary and secondary school education for every child is a human right, essential for achieving sustainable development and gender equality, and boosts economic growth for entire communities and countries. For a girl, being able to attend and complete primary through secondary school can help her take control of her own life and destiny, delay marriage and childbearing, and improve her ability to earn a good income as an adult.⁹²

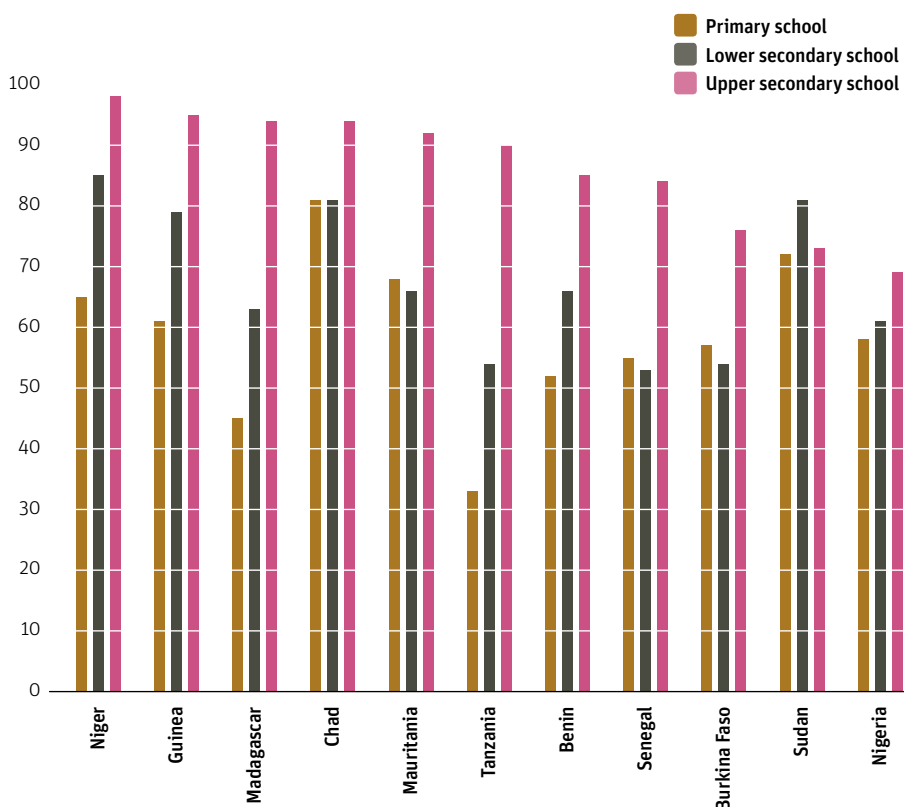
Therefore, girls' education – especially, completing secondary education – is also key to advancing the demographic transition. When girls and women get married and have their first child later and have smaller families as a result of going to school longer, this contributes to changes in the population age structure.

Many African countries have made great progress in getting girls and boys into school over the past twenty years. Still, in 2023, almost 20 percent of children of primary school age in Africa were not enrolled in school. More concerning, the absolute number of out-of-school children in this age group increased from 37 million in 2012 to 41 million in 2023.⁹³ Much progress has also been made to reduce gender inequality in school attendance, but some gaps persist. At the primary school level, about one in four girls are out of school in sub-Saharan Africa, compared to one in five boys. This gap becomes wider at the secondary school level, when girls are more likely to leave school than boys.⁹⁴

Barriers that keep children out of school vary across countries but are often related to poverty (financial barriers), living in a rural area (geographic barriers), armed conflict and displacement, and poorly equipped schools. Girls must overcome these as well as additional gender-specific barriers to attending school, especially at the secondary school level. These barriers include child marriage and early pregnancy, gender-based violence (for example, when rural girls are not safe walking long distances to school), and a lack of menstrual health supplies or toilets at schools. In Western and Central Africa in particular, girls affected by poverty are most likely to be out of school.⁹⁵

Girls Affected by Poverty Are Most Likely to Be Out of School

Girls who are most affected by poverty are much more likely to be excluded from education than girls who live in wealthier households. The likelihood of not being in school increases with age. In Tanzania, for example, one third of primary school age girls from the poorest households is out of school. At lower secondary school age this proportion increases to just over half. By upper secondary school age nine out of ten girls are not in school. In five African countries – Niger, Guinea, Madagascar, Chad and Mauritania – over 90 percent of upper secondary school age girls are out of school.



Percentage of girls from the poorest (fifth of) households who are out of school, by school age and country, 2018-2022

(Data Source: World Inequality Database on Education⁹⁶)

How Faith Actors (Can) Engage on these Issues

In this fourth dialogue, participants explored the importance of girls' education and the barriers that need to be removed to ensure every African girl can receive and complete a high-quality education – and the role of faith-based service providers, religious leaders and other faith actors in this effort. This dialogue was conceptualized in collaboration with the United Nations Children's Fund (UNICEF).

It is really important for us to be working with traditional and religious leaders towards achieving gender equality in education, if we want to have an impact at the community level.

*Boubakar Yougbare,
Programs Officer, African Union
International Centre for Girls' & Women's
Education in Africa (AU/CIEFFA) (Dialogue 4)*

Dialogue participants exchanged experiences and best practices in addressing some of the major barriers to girls' education, such as social and cultural norms, conflict and displacement, early pregnancy, and schools' lack of water and sanitation facilities. Invited speakers and other participants shared examples of how they work in and with faith communities to support girls' education. Among the opportunities for faith actors to engage in this effort that were identified in the discussions were:

- Faith actors can use their influence to advocate for girls' education as a moral good to achieve gender equality, and create healthier and more resilient families and communities.
- Religious leaders can work towards ending child marriage in their communities. In addition to being a violation of children's human rights, child marriage is also one of the most common reasons for girls to drop out of school. Therefore, efforts to prevent child marriage – work that many faith leaders are already engaged in – also serve to keep girls in school longer.
- Faith-based organisations that operate schools or other educational programming can adopt gender-sensitive measures to ensure girls can safely participate and succeed. This can look like providing girls with the supplies and facilities they need to be able to attend school while menstruating, or permitting pregnant girls and young mothers to stay in school and complete their education.

GOOD PRACTICE EXAMPLES

Meeting Girls' Menstrual Health Needs in Schools in Uganda

Girls across Africa frequently miss school – or even drop out – once they begin menstruating. They may experience difficulties managing their periods because of lack of education about how to do so, a lack of resources (such as sanitary pads, clean school toilets or the ability to reduce menstrual pain) also known as period poverty, and/or the stigma attached to menstruation.⁹⁷ Starting in 2016, the British faith-based organisation **Faith in Water** began conducting consultations with faith groups in Uganda on how poor **menstrual hygiene management** (MHM; see glossary) affects girls' education and health – and what can be done to support them.⁹⁸ Out of these consultations grew the **Dignity for Girls** project, which was implemented in both Muslim and Christian schools to improve girls' well-being and school attendance. Implemented in collaboration with local organisations and faith leaders, as a first step, project activities involved educating students, parents, teachers, and faith leaders on proper MHM.⁹⁹

Implementing the project in Muslim primary schools, the NGO **HEAR Uganda** also ran workshops to teach students of all genders how to make reusable sanitary pads and made improvements to schools' water, sanitation and hygiene (WASH) infrastructure. This included building new latrines and urinals, changing rooms for girls, and clean water stations. Working with Church of Uganda and Catholic communities, the Christian FBO **A Rocha Uganda** did similar work in eight parochial schools, improving WASH facilities and establishing girls' clubs. The work on WASH facilities included repairing latrines and building new ones; adding higher walls and replacing missing doors and locks; adding handwashing facilities; repairing gutters on tanks; and installing three rainwater harvesting units. The purpose of the girls' clubs was to reduce stigma and raise awareness around MHM through games, sewing reusable sanitary pads, initiating school exchange visits and parents' days, and adding music, dance, drama, and sport activities for girls. An evaluation of the project across all schools involved in the project found a major reduction in the proportion of girls missing school due to their period – falling from almost 70 percent to only ten percent.¹⁰⁰

Increasing Support for Girls' Education in Sierra Leone

From 2019 to 2023, the project **Every Adolescent Girl Empowered and Resilient (EAGER)** sought to engage marginalised out-of-school adolescent girls aged 13 to 19 in Sierra Leone with informal education and empowerment programmes. The goal was to teach girls who had missed out on formal education – including adolescents who were pregnant, mothers, married and/or had disabilities – literacy, numeracy, and other life skills. In the long-term, EAGER sought to increase adolescents' economic resilience and strengthen their psycho-social well-being.¹⁰¹ To ensure the project's long-term success, the project implementers (a consortium made up of **International Rescue Committee, Concern Worldwide, Restless Development, and BBC Media Action**) strategically engaged local community and religious leaders through community dialogues and other outreach efforts to gain their support. These engagements proved crucial to shift attitudes among faith leaders towards appreciating the value of girls' education.¹⁰²

Interfaith Mobilisation to Support Muslim Girls' Education in Malawi

In Malawi universal education for girls remains a challenge – especially at the secondary level.¹⁰³ This is particularly true for Muslim girls, who often do not attend school at all.¹⁰⁴ In recent years, a major obstacle emerged in the effort to increase Muslim girls' education in Malawi: a conflict over whether girls were allowed to wear a headscarf in school.¹⁰⁵ Yet even after the Minister of Education issued a directive allowing girls to wear hijab in school, several Christian schools continued to prohibit the practice. This resulted in disputes, school closures and even instances of violence.¹⁰⁶ The **Religions for Peace Interreligious Council Malawi** found that eventually the keys to success in overcoming resistance to Muslim girls wearing headscarves in school were grassroots mobilisation and negotiations with religious leaders outside of the Muslim community. Bringing civil society organisations on board that focus on girls' education was also critical to refocus conversations around everyone's commitment to promoting girls' education. In the end, this interfaith grassroots movement approach was critical to resolving disagreements and achieving the core goal: getting Muslim girls into school.¹⁰⁷

4.4 YOUNG PEOPLE'S NEEDS AND OPPORTUNITIES

Africa is home to the largest youth population in the world today, representing almost 60 percent of the total population, or approximately 890 million children and young people under the age of 25.¹⁰⁸ Based on UN estimates, this number will rise to over 1.2 billion by 2050. The youth population on the continent will continue to grow throughout the 21st century.¹⁰⁹

Youth Consultation Process

This dialogue was youth-led, moving the spotlight onto Africa's youth generation and elevating the perspectives of young people on key areas of demographic relevance, including education, employment and SRH.

Heeding the call from youth activists worldwide, "Nothing About Us Without Us," this dialogue was planned in consultation and collaboration with young people. The organisers hosted two virtual consultations¹¹⁰ in English and French with more than 30 young activists from across Africa in May 2023 to seek their input on the content and format of this dialogue. Following the consultations, two youth leaders from Religions for Peace joined the dialogue's planning committee.

Some of the key areas of action identified during the consultations with youth activists included health, education, skills training and job opportunities. Relatedly, issues around sexual and reproductive health (SRH) and gender equality came up as a key concern – from the need to eliminate child marriage and early pregnancies, to more and better SRH education and services. The urgent need for (more) disability inclusion also emerged as a cross-cutting issue in the consultations.

These generations of young people will have a decisive impact on the future of the region. As tomorrow's business leaders, policymakers, doctors, farmers, as well as parents, they determine how Africa's 54 countries are going to change during this century, both socio-economically and demographically. What actions must be taken today to ensure that young people can make informed and empowered decisions for themselves, their families and their communities? In short, young people need to be healthy, and receive a good education, skills training, and job opportunities.

For many young people a high-quality and affordable education that prepares them for the labour market in the 21st century remains inaccessible. At the same time, the labour market does not provide sufficient employment opportunities for young people and as a result, underemployment and unemployment are high.¹¹¹ The International Labour Organization estimates that one in four Africans aged 15 to 24 are not in education, employment or training (NEET) – and that proportion is higher among young women than men.¹¹²

Our religious institutions, they have fundraising and income-generating activities – schools, places of work. How do young people get into there? Can we have a quota within the different religious [institutions] ... to start to give young people opportunities?

*Benson Makusha, Co-Chair,
Africa Interfaith Youth Network &
Pan African Coordinator, International Young
Catholic Students (Dialogue 5)*

As the world's largest youth generation that has the potential to drive major economic development and social change, young Africans also demand a seat at the table. Young people already play a key role as actors of change. Over the past decade, young people have become a driving force for societal change through social mobilisation – pushing for action on climate change, seeking racial justice, promoting gender equality, and advocating for human rights and dignity for all. Young people are also driving innovative changes in business, technology and science. But in many settings, young people remain excluded from decision-making spaces, be it in political, faith-based, business, or academic institutions.

Africa Has the World's Youngest Population

Walking through the streets in Western, Central and Eastern Africa, the majority of faces you see are young. Overall, six out of ten people in Africa are under the age of 25. By comparison, worldwide it is four in ten, with strong regional differences. In rapidly ageing societies such as South Korea, Japan or Italy, only 20 percent of the population is younger than 25, compared with around 70 percent in Niger or the Central African Republic.

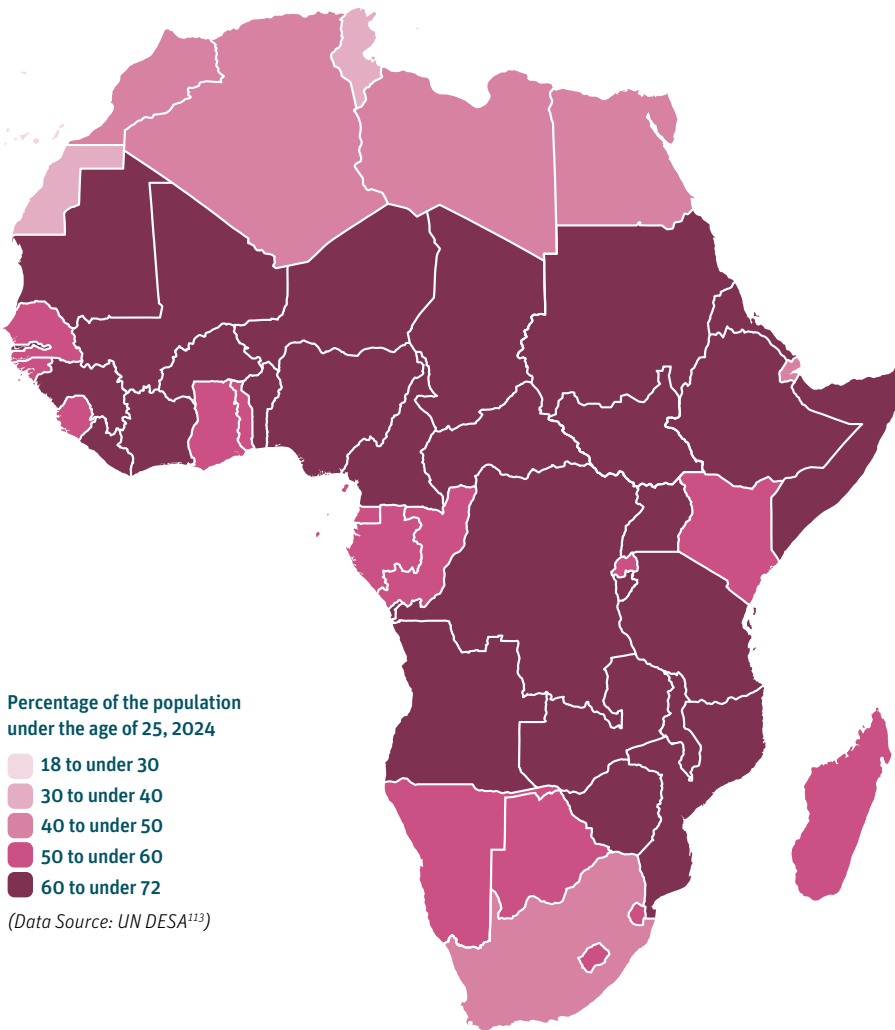
Young people need empowerment and representation so that they can help shape their futures. This is particularly true for marginalised young people, including youth with disabilities. The World Health Organization estimates that 1.3 billion people – about 16 percent of the global population – currently experience a significant disability.¹¹⁴ Estimates for the prevalence of disability in Africa vary and are difficult to calculate due to a lack of data, but in 2021

UNICEF estimated that in Sub-Saharan Africa alone, 70 million children aged 0 to 17 have a disability.¹¹⁵ Education, training and formal employment opportunities are out of reach for a significant proportion of children and young people with disabilities due to numerous factors including physical (in)accessibility, poverty and stigma.¹¹⁶

How Faith Actors (Can) Engage on these Issues

The youth-led dialogue aimed to create space for a learning exchange between young people and those working at the intersections of demographic processes in Africa – especially within faith-based organisations and (inter-)religious institutions – to foster greater collaboration to meet the challenges facing youth. With a better understanding of what young people need and how religious institutions can support them, faith actors can use their influence to push for and help implement better education opportunities, more inclusive practices, and empower youth within their own organisations. Young people participating in this dialogue identified several opportunities for multi-faith engagement to meet young people's needs, including:

- Religious leaders and organisations can organise intergenerational as well as interfaith dialogues that empower young people to speak up in order to make progress on children's and young people's rights.
- Schools and hospitals run by religious institutions that generate employment opportunities can make a concerted effort to train and hire youth, including young people with disabilities.



The designations employed and the presentation of material on the map do not imply the expression of any opinion whatsoever on the part of UNFPA concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

- Faith-based organisations and faith leaders can create safe spaces for young people to learn about their bodies as essential to their physical, spiritual and mental health.
- Religious leaders can encourage parents in their communities to have open conversations with their children about sexual and reproductive health.
- Faith leaders and institutions can provide spiritual and material support to young women who are pregnant or parenting, and create a welcoming environment for them within religious spaces.
- Religious leaders can amplify the voices of young people by giving them space to express themselves in churches or mosques, and by inviting them to assume leadership positions in religious organisations.
- Faith actors can use their influence to condemn discrimination and violence against young people with disabilities, and advocate for their rights.

GOOD PRACTICE EXAMPLES

Breaking Down Barriers for Young People with Disabilities

The international NGO **Light for the World** works closely with national and regional authorities in several African countries to expand eye care for children and youth with eye diseases as well as inclusive education for young people with visual impairments.¹¹⁷ In Tanzania and elsewhere in Africa young people with visual impairments and other disabilities routinely face barriers to schooling and employment, which significantly impacts their livelihoods and quality of life. Inclusive education and/or vocational training programmes are critical so that people with disabilities can become financially independent and contribute to their local economy. In the absence of government programmes to support young people with disabilities, Light for the World advocates for and implements numerous economic empowerment programmes to help people with disabilities learn entrepreneurship skills or gain access to vocational training.¹¹⁸ While the programmes do not currently have an explicit faith component, religious organisations can support this effort by creating inclusive practices and training programmes, and employing young people with disabilities.¹¹⁹

Empowering Young Africans as Agents of Change

The **All Africa Conference of Churches (AACC)** is a Pan-African association of Protestant, Anglican, Orthodox, and Indigenous churches that recognises the potential in Africa's youth generation to economically transform the continent.¹²⁰ One key barrier to unleashing this potential is the lack of young people's participation and leadership in political processes. To that end, AACC launched its **Africa: My Home. My Future.** continental campaign in 2022.¹²¹ AACC works to help build young people's leadership skills, foster their creativity, and create opportunities for youth to participate in ecumenical movements in Africa and internationally. Empowering youth leaders in meaningful ways is both important for them to feel valued and confident – and to challenge stereotypes older generations may hold of young people as unsuited for leadership roles.¹²²

4.5 CHALLENGES FAITH ACTORS AND ORGANISATIONS (CAN) FACE

Over the course of the dialogue series, participants from diverse types of religious organisations and different faith backgrounds shared compelling arguments and examples of how and why faith actors are well-positioned and able to engage on key demographic issues – from promoting gender equality and girls’ education to raising awareness about sexual and reproductive health, and empowering young people. At the same time, every discussion on opportunities for multi-religious engagement on these issues also included a conversation about the obstacles or challenges faith actors and organisations have encountered or might encounter. These challenges must be named and acknowledged so that they can be effectively addressed.

One of the most common issues that dialogue participants spoke about was that religious scriptures have historically been misinterpreted and/or misused to support harmful practices such as FGM, GBV or child marriage. Correcting such misinterpretations can be difficult when this looks like challenging long-held **patriarchal** beliefs (see glossary) that restrict women’s and girls’ rights. In addition, religious or cultural taboos make it challenging to openly speak about “sensitive topics” including but not limited to adolescent pregnancy, menstruation, sexuality education, and contraception. Dialogue participants shared that some religious leaders want to speak out about issues related to sexuality, but do not out of a fear that doing so would result in a loss of standing and respect within their communities. In the face of deeply rooted social norms that are enforced by fellow faith leaders and community members, religious leaders and actors may therefore find it difficult to start openly engaging with their communities on such topics.

Young people of faith can also find it difficult to connect with religious leaders in their communities – especially if they are their elders. Younger dialogue participants explained that it can be difficult for teenagers to understand the formal language many faith leaders use. In addition, when it comes to sexual and reproductive health topics, especially older religious actors may resort to critical language of sin and condemnation, thereby alienating youth. As a result, young people may not see religious centres as safe spaces where they can have open conversations about their needs. Intergenerational divides exist in many different types of religious institutions and faith-based organisations – especially regarding the exclusion of women and youth from leadership and decision-making spaces.

The structures of religious institutions can also present challenges. Authority structures, factionalism and a resistance to change can all be major obstacles to faith actors who wish to bring in new ideas. Similarly, rigid structures can make interfaith coordination and consensus challenging, and progress can be slow due to different perspectives on, for example, SRH and GBV. At the same time, mistrust between different religious communities can also be a significant barrier to interfaith collaboration. In addition, the hierarchical structure of churches can cause difficulty in terms of regional cooperation to advocate for an end to practices like FGM or child marriage.

Finally, a major barrier to faith actors’ engagement in the promotion of gender equality, SRH or girls’ education exists within secular organisations. Among secular actors working to promote gender equality, there often exists a generalised distrust of faith-based organisations and religious actors. Because vocal opponents of gender equality or SRH are frequently associated with religious institutions, cooperation with faith actors on these issues is often avoided. For example, secular actors in development may question the motives of religious organisations that wish to become more involved in education or programmes for social change. While this has slowly changed in recent years, the problem largely remains. Religious leaders are therefore often excluded from national conversations or key engagements around socio-demographic issues.

5 | RECOMMENDATIONS

Faith leaders, actors and organisations can make crucial contributions to advancing the demographic transition across Africa in the coming decades while also promoting gender equality and sustainable development. In addition to traditional and cultural values, many people are guided by their faith when making key decisions in life, which is why Imams, Priests and other religious leaders have immense influence when they stand up for gender equality, girls' education or family planning. Many people continue to view religious leaders as authorities on religious questions, who interpret sacred scriptures and provide guidance on how to apply these in everyday life.

The African Dialogues on Faith and Demography were grounded in this reality. In every dialogue, participants exchanged ideas, opportunities and best practices for faith actors to engage on issues related to demographic change. While challenges and barriers were also explored in each dialogue, so were recommendations to overcome these. This chapter summarises the recommendations that came out of the dialogue series – from the expert inputs, religious leaders' contributions, and roundtable discussion participants – to harness the potential of faith actors to influence demographic change.

Secular Organisations, Governments and Development Cooperation Agencies Should...

- Identify and support religious organisations and actors that are already advocating for family planning, gender equality, and girls' education. They may need or benefit from increased funding, capacity-building, network-building or other resources. Many grassroots FBOs have limited to no funding. With additional capacities FBOs can help bridge the gap of understanding between secular and faith actors, for example, in campaigns to end FGM or GBV.
- Recognise the potential of religious organisations as partners in developing and implementing health and education strategies and programmes. Compared to their secular counterparts, faith actors can reach people with orthodox religious views. The multiplier effect of their influential advice and guidance can help increase acceptance of family planning and girls' education.
- Seek partnerships with faith-based organisations in diverse settings, including in humanitarian emergencies. Religious organisations may already have structures and networks in place that can be used to meet local communities' needs. In camps for IDP and refugee populations, FBOs can create safe spaces for women affected by SGBV, provide sexual and reproductive health education, supply girls with menstrual products, and refer women and girls to health clinics.

- Adapt or identify appropriate language for respectfully engaging with faith actors on a long-term basis. This can look like steering away from mandates to implement sexuality education programmes using a specific term that may meet resistance in local contexts.
- Avoid making assumptions about religious actors' views on traditionally sensitive issues, such as adolescent sexuality or abortion. Asking and listening to better understand their views on such issues – and why they hold them – can lead to transformative collaboration.
- Resource and inform grassroots communities of faith on key socio-demographic issues. To start, this can involve linking them with accessible information on how and why issues such as inclusive education, women's economic empowerment, and youth leadership affect the day to day lives of families and communities.
- Connect faith actors with resources developed by other faith-based organisations, such as existing Islamic sexuality education curricula or church declarations in support of family planning.

Faith Actors, Organisations and Leaders Should...

- Develop and promote interpretations of holy scriptures that support gender equality, family planning, and girls' education. Delink harmful cultural practices from religion and condemn practices such as FGM, child marriage, and GBV.
- Educate themselves about key SRH issues affecting their community members, including fertility, HIV/AIDS, and other STIs so that they can sensitise their community, tackle stigma, and encourage affected community members to seek appropriate health care and information when needed.
- Raise awareness within their faith spaces – for example, their institutions or among other religious leaders – about the importance of gender equality, girls' education, and youth empowerment.
- Sensitise parents in their communities about the long-term impacts of decisions they make for their girl children's futures, for example, by highlighting the benefits of girls' education or the harm caused by FGM.
- Create child protection policies for their organisations.
- Teach life skills in Sunday school and other religious education settings, emphasising that a person's physical, mental, and spiritual health are interconnected. In these classes, faith actors can educate youth on topics ranging from how to recognise sexual abuse at home to the importance of completing primary and secondary school.
- Keep up with the modernisation of society, including in terms of technology, by recruiting and empowering youth leaders to advise their planning and decision-making.
- Promote and actively support youth leadership within their institutions, and amplify young people's voices and concerns. Faith-based institutions that generate employment opportunities should prioritise educating, training and hiring youth.
- Create inclusive spaces and practices for young people with disabilities, and advocate for their right to education, training and employment.
- Mediate conflict and promote peace among young people. Faith leaders should also incorporate lessons about the importance of interfaith tolerance and understanding into their teachings.
- Use their position of influence with policymakers to support human rights-based policies at various levels – sub-national, national, regional, global – and to better meet their communities' needs; for example, by advocating for the provision of sanitary pads in public schools and elimination of taxes on sanitary products.
- Reach out to boys and men to challenge traditional gender roles that harm them as well. Educate boys and men about how gender equality and family planning benefits them in their roles as brothers, fathers or husbands.

GLOSSARY

Adolescence

The period between childhood and adulthood, which is characterised by significant physical, psychological, and social developmental changes. It begins with the onset of puberty, which typically occurs between the ages of 10 and 13, and ends in young adulthood, which generally occurs between the ages of 18 and 21.

Child Marriage

A marriage in which at least one spouse is under the age of 18. Once girls begin menstruating and are considered marriageable, they are often impacted by child marriage. In some countries, adolescents are legal adults before the age of 18. In such instances, marriages would be referred to as early marriages. Forced marriage, on the other hand, refers to a marriage to which one or both partners have not consented freely (regardless of age).

Demographic Dividend

The economic growth potential resulting from favourable age distribution in a population due to a decrease in dependent populations and an increase in the working-age population.

Demographic Transition

The shift from high birth and death rates to low birth and death rates in a country's population over time.

Economic Growth

An increase in the production and consumption of goods and services over time.

Female Genital Mutilation (FGM)

This term describes all procedures involving the partial or total removal or cutting of the external female genitalia for non-medical reasons. The World Health Organization has classified four categories: Partial or total removal of the clitoris and/or clitoral hood (Type I), partial or total removal of the clitoris and vulval labia minora, with or without removal of the vulval labia majora (Type II), narrowing of the vaginal opening by joining and stitching the vulval labia minora and/or majora (Type III), and all other harmful procedures on the female genitalia for non-medical reasons, such as piercing, cutting, scraping and etching (Type IV). FGM is a serious human rights violation that can result in a range of immediate and long-term complications and in some cases, even death. In the long term, it can cause significant damage to the urinary, reproductive, and sexual organs, increasing the risk of birth complications and significantly impairing sexual pleasure.

Fertility Rate

The average number of children born to women during their reproductive years (between the ages of 15 to 49).

Gender-Based Violence (GBV)

Gender-based violence is a human rights violation. It includes all forms of violence and abuse, including physical, sexual, psychological, and economic violence inflicted on an individual because of their gender or perceived gender roles and expectations. Women, girls, and people who do not conform to traditional gender norms are disproportionately affected by GBV.

Gender Equality

Equality means that everyone has the same rights, obligations, and opportunities. Equality is primarily concerned with legal equality (being equal before the law). However, legal equality does not always mean actual equality. Therefore, equality can be defined as a political process or set of measures designed to achieve equal treatment existing in real life. This means that every person can exercise their rights and participate in political, economic, and social activities equitably without discrimination. Gender equality is a key prerequisite for sustainable development.

HIV/AIDS

The Human Immunodeficiency Virus (HIV) is a virus that damages the immune system. Without the right treatment, it can lead to the Acquired Immune Deficiency Syndrome (AIDS), a life-threatening disease. HIV medication suppresses the virus and prevents the outbreak of AIDS, allowing those affected to live long and fulfilled lives.

Marginalisation

Describes how systems of discrimination based on (perceived) identity markers, including sexual orientation, race, ethnicity, religion, social class, educational level, economic status and/or disability, result in the geographical, economic, social and/or cultural displacement of a person or group to the margins of society. Consequently, marginalised individuals and groups are treated as less important or inferior by society, which leads to a loss of resources, influence and status, and negatively impacts their health.

Menstrual Hygiene Management (MHM)

This term refers to what a person needs to safely and hygienically manage their menstruation with dignity. WHO/UNICEF describe this as the following: “Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials.” A precondition to this is that they understand the basic facts about the menstrual cycle and how to manage it with dignity and without discomfort or fear.¹²³

Menstruation

The natural bodily process of releasing blood and associated matter from the uterus through the vagina as part of the menstrual cycle.

Migration

The movement of people from one location to another, which can impact population demographics.

Modern Contraception

Modern contraceptives include oral contraceptive pills, contraceptive implants, contraceptive injections, intra-uterine devices (IUDs), condoms (male or female), the morning-after pill, diaphragm, sterilisation (male or female), and the lactational amenorrhoea method.

Mortality Rate

The number of deaths per 1,000 people in a year.

Patriarchy

A social system in which men dominate and determine values, norms and behaviours. It encompasses control over resources, traditions, laws, the division of labour, and the role of women. Patriarchal structures can exist in supposedly equal societies.

Period Poverty

The inability or struggle to afford and access menstrual products such as pads or tampons, pain medication, underwear, and sanitation and hygiene facilities to manage menstrual health.

Sexual and Reproductive Health (SRH)

A state of physical, emotional, mental, and social well-being in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction or infirmity. SRH requires that people of all ages can make decisions governing their bodies, and to access services that support that right. Achieving sexual and reproductive health relies on realising sexual and reproductive rights.

Window of Opportunity, Demographic

A period when the working-age population is significantly larger than the dependent population, providing an opportunity for accelerated economic growth.

COMPLETE LIST OF PROJECTS PRESENTED IN THE DIALOGUES

Dialogue	Project	Country	Faith	Organisation(s)
Gender Equality	Exemple de pratiques pour le renforcement du rôle du leadership religieux féminin	Morocco	Islam	Dar El Hadith El Hassania (in partnership with UNFPA Morocco)
	Transforming Masculinities	Numerous Countries in East and Central Africa	Christianity	Tearfund
	Advocacy Toolkit for Justice for Widows	Regional	Christianity	All Africa Conference of Churches (AACC)
	Community Mobilization and Sensitization on SRH, GBV & HIV through Interfaith Approach	Uganda	Interfaith	Interreligious Council of Uganda (IRCU)
	Ending Harmful Practices such as Child Marriage and Female Genital Mutilation: A Best Practice from Tanzania	Tanzania	Multifaith	Association for the Termination of Female Genital Mutilation (ATFGM) (in partnership with UNFPA Tanzania)
Sexual and Reproductive Health	Addressing Population Growth and Family Planning Issues through Capacitating Religious Leaders	Egypt	Christianity	Bishopric of Public, Ecumenical and Social Services (BLESS), Coptic Orthodox Church (in partnership with UNFPA)
	Population Education Curriculum	Egypt	Islam	International Islamic Center for Population and Research, Al- Azhar University (in partnership with UNFPA)
	HIV Project: Social Mobilization, Care and Support for Orphans & Vulnerable Children, Capacity-Building	Ethiopia	Interfaith	Ethiopian Interfaith Forum for Development, Dialogue and Action

Dialogue	Project	Country	Faith	Organisation(s)
	Community Education Projects on HIV Prevention and Treatment	Ethiopia	Christianity	Ethiopian Orthodox Church Development and Inter Church Aid Commission (EOC-DICAC)
	Engagement of Religious Leaders to Dialogue on Sexual and Reproductive Health and Rights in Uganda	Uganda	Multifaith	Hautement Smile Uganda
	Prevention of Adolescent Pregnancy	Liberia	Interfaith	Inter-Religious Council of Liberia
	Age-appropriate Comprehensive Sexuality Education from an Islamic Perspective	Kenya	Islam	Kenya Muslim Youth Development Organization (KMYDO)
Girls' Education	#ImamsForShe Campaign	Burundi	Islam	#ImamsForShe
	Dignity for Girls	Uganda	Islam & Christianity	Faith in Water, A Rocha Uganda, HEAR Uganda
	Every Adolescent Girl Empowered and Resilient Project Sierra Leone (EAGER)	Sierra Leone	Multifaith	Restless Development (in partnership with International Rescue Committee, Concern Worldwide, BBC Media Action)
	Creating Safe Spaces for Girls in Faith-Based Schools	South Sudan	Christianity	Save the Children South Sudan
	No more violence among us!	Democratic Republic of Congo (DRC)	Interfaith	Religions for Peace DRC

Dialogue	Project	Country	Faith	Organisation(s)
Young People's Needs and Opportunities	Bridging the Gender Gap in STEM Education	Comoros		IMARA Comoros
	Supporting Skills Training & Employment for Young People with Disabilities	Tanzania		Light for the World International
	Promoting Young Women's Sexual and Reproductive Health	Rwanda	Christianity	Young Women's Christian Association (YWCA)
	Africa: My Home. My Future.	Africa	Christianity	All Africa Conference of Churches (AACC)
	Promoting Inclusion for Persons with Disabilities	Somalia		ILEYS Organization for the Blind
Strategies for Success	Capacity Building for Religious Leaders to Combat HIV and Improve SRH	South Africa	Christianity	KwaZulu Natal Christian Council (KZNCC) (in partnership with UNFPA)
	Interfaith Grassroots Mobilisation to Promote Muslim Girls' Education	Malawi	Interfaith	Religions for Peace – Interreligious Council Malawi
	Educating Women about Menstruation and Birth Spacing	Chad	Islam	League of Women Preachers (la Ligue des Femmes Prédicatrices) (in partnership with UNFPA)
	Sahel Women's Empowerment and Demographic Dividend (SWEDD)	Burkina Faso, Côte d'Ivoire, Mali, Mauritania, Niger, Chad, Benin	Multifaith	UNFPA

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