

Commitments to Action ***Resilience & Renewal: faith in the HIV response***

We are individuals, faith and spiritual leaders, representatives of communities and organizations of diverse faith traditions:

- **Compelled** by our shared values and
- **Inspired** by the stories of Resilience & Renewal shared at the HIV Interfaith Conference *Resilience & Renewal: faith in the HIV response*, which took place virtually on 22, 23 and 24 September 2020, and by the recommendations made by the many participants from countries around the world, and
- **Keen** to promote the central role of positive faith in action to end AIDS as a public health threat

We commit to urgently take significant and sustained actions in the following areas during the next ten years:

- 1) Increase access to HIV education, prevention, treatment, care, and support.
- 2) Promote the human rights and dignity of all people.
- 3) Address HIV stigma and discrimination.
- 4) Build bridges of collaboration among different faith traditions as well as between faith and non-faith actors.

As unique individuals and organizations, we each commit to using our gifts and strengths to ensure a focused and holistic faith response for the achievement of the 2025 HIV targets, and we invite others to join us in this commitment:

- I/We commit to exercising stronger, more visible, and practical **leadership** in the response to HIV by:
 - Endorsing the "**Commitments to Action**" (link) for individuals, faith and spiritual leaders, and organizations
 - Signing on "**The 12 Million Campaign**" (link) to promote access to services for the 12 million children, women and men living with HIV who are not yet on antiretroviral treatment

- I/We commit to being mutually **accountable** for contributing to the achievement of the 2025 HIV targets by:
 - Indicating my/our specific commitments among those listed in the "*Commitments to Action*"
 - Tracking progress every six months towards those commitments.

- I/We commit to being **well-informed about the HIV epidemic**, including the latest evidence-based methods of prevention, testing and treatment, by:

- Participating in meetings, conferences, and training programs related to HIV and AIDS
 - Sharing this information within our spiritual and religious communities
 - Countering misinformation and myths about HIV and AIDS
 - Promoting the role of science and medicine in public health policy
 - Being informed by and contributing to scientific evidence about the impact of faith-inspired interventions on the HIV epidemic
- I/We commit to **engaging meaningfully with people living with HIV** and at-risk populations by:
- Working to create welcoming and safe places of worship for everyone
 - Ensuring that our programs address the unique needs of different groups
 - Involving people living with HIV and at-risk populations in leadership and decision-making processes
- I/We commit to promoting **universal access** to optimal diagnostic products and antiretrovirals and to supporting retention, adherence, and viral load suppression of all people living with HIV by:
- Sharing information about the value and importance of testing, treatment adherence, care and support of all people as soon as they are diagnosed
 - Developing support programs tailored to the needs of different constituencies, including:
 - Women and girls, who in many countries are the most vulnerable to new infections
 - Men, who often have poorer treatment coverage than women
 - Other groups for whom harm reduction strategies are particularly appropriate
- I/We commit to listening to and engaging with **adolescents and young people** by:
- Promoting dialogues with adolescents and young people to ensure that HIV interventions are truly shaped around their needs
 - Educating and empowering adolescents and young people with the information, tools and support needed to prevent HIV transmission
 - Encouraging young people to take leadership roles in our faith communities, including on HIV-related activities
- I/We commit to promoting access to optimal diagnostic products and antiretrovirals for children and to supporting retention, adherence and viral load suppression of all **children living with HIV** by:
- Standing with and for children living with HIV and their families
 - Sharing information about paediatric HIV through faith-inspired health services and congregational platforms for outreach
 - Encouraging community members to make full use of services for children living with HIV
- I/We commit to protect and uphold **human rights** by:
- Growing our understanding of human rights principles
 - Acting decisively to protect human rights within our faith communities

- Advocating for the removal of discriminatory laws, policies and practices that violate human rights and are significant barriers to accessing HIV services
 - Raising awareness in our faith communities about human rights violations and social practices that put people at greater risk of infection, such as gender and sexual-based violence, child marriage, and female genital mutilations/cutting
- I/We commit to **eliminating stigma and discrimination** towards all people living with and affected by HIV, particularly marginalized and key populations, by:
- Delivering a strong statement of advocacy and commitment in our faith communities and places of worship on World AIDS Day each year, until the AIDS pandemic is over
 - Launching, supporting, and strengthening activities and campaigns aimed at reducing stigma and discrimination in our local faith communities and at the global level
 - Creating safe and welcoming communities and congregations for people living with HIV, including children, adults, and families, as well as members of marginalized populations
 - Engaging with local faith communities in different ways, including through trainings and communication prototypes on HIV and COVID-19 such those developed by the PEPFAR Faith and Community Initiatives
- I/We commit to working with governments to engage national and local religious leaders and faith-based organizations to support the development and implementation of **national multi-faith HIV action plans** which:
- Are aligned with national HIV strategies and priorities and the achievements of global HIV targets
 - Promote cooperation among faith-based groups, people and networks of people living with HIV, governmental authorities, civil society organizations, the private sector, donors and other key partners
 - Have solid accountability frameworks with clear process indicators and results for the achievements of national HIV targets and stigma reduction interventions through the contribution of faith actors
- I/We commit to **building the capacity** of faith communities by providing widespread training for local and national religious leaders, including:
- Basic information about HIV and AIDS
 - Best practices for a variety of issues and situations
 - Variations that reflect the local context and local languages
 - Progress tracking for both training and impact
 - In collaboration with and through the support of UN Agencies and other international agencies, donors, and key stakeholders in the HIV response
- I/We commit to using the *Interfaith Health Platform* to identify, gather, organize, and disseminate **interfaith best practices** for the faith response to HIV, including:
- Articulating practices related to the commitments listed in the "*Commitments to Action*"
 - Describing experience with the practices in specific settings
 - Providing evidence about the effectiveness of those practices

- I/We commit to **mitigating the impact of COVID-19** in our faith communities and places of worship and to call for equitable access to approved COVID-19 vaccines by:
 - Using the lessons learned in the HIV pandemic
 - Ensuring continuity of services to people living with HIV and at risk of infection
 - Sharing sound science-based information on COVID-19 mitigation measures
 - Countering misinformation
 - Standing up against COVID-19 related stigma and discrimination
 - Adhering to evidence-based public health guidelines
 - Assisting in the care and support of those affected by COVID-19, including both those affected directly by the virus and those affected by second-order impacts, such as food insecurity and domestic and sexual violence.

- I/We commit to being **strong advocates** by repeatedly and persistently:
 - Calling on global, national and local leaders, international bodies and donors to keep their commitments; to ensure that there is adequate funding for the global response to HIV and AIDS, including funding for faith-based initiatives; and to renew their engagement to ending the AIDS pandemic by 2030.
 - Calling on high-level religious leaders from diverse religious traditions to reaffirm, through their words and actions, the urgency of strengthening the global response to HIV and to recommit themselves and their institutions to actively work toward ending AIDS
 - Calling on global and national political and faith leaders to implement laws, policies, and multinational agreements that reduce the structural barriers to integrated and equitable health systems, such as poverty and racism

- I/We commit to achieving our goals through **collaboration** by:
 - Creating opportunities to become strong and active partners with governments, civil society, and non-governmental organizations at all levels in responding to the HIV epidemic
 - Working with other community-based organizations, governments and other stakeholders to ensure that HIV services are available in communities where we have a presence
 - Partnering with religious leaders of different faith and spiritual traditions to influence local, national, regional and global decision-making processes on HIV
 - Actively engaging with and challenging religious leaders and institutions when planning and implementing HIV strategies
 - Facilitating dialogues at all levels among religious leaders, communities, people living with HIV, youth and members of marginalized, vulnerable, and at-risk populations
 - Working with providers of health services, both secular and faith-based to ensure that HIV services are available to all members of their communities, including marginalized and vulnerable populations, free of stigma and discrimination and the risk of criminal prosecution; and to ensure that optimal testing and treatment products are accessible to all.

As people of faith, we commit to do our part to help to achieve the 2025 targets and to eliminate AIDS as public health threat by 2030; and we invite others to join us.