G20 INTERFAITH FORUM 2021

Addressing the COVID-19 Emergency: Religious Partnerships
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Summary and Call to Action

Religious and faith communities have played vital roles in mitigating the effects of the COVID-19 emergencies, including the numerous health, social, and economic challenges it has presented since the WHO declared COVID-19 a global pandemic. Much remains to be done, including urgent action on vaccination and providing health care for millions of people. Effective and strategic engagement of religious actors can affect the outcomes. Beyond the immediate crisis of COVID's direct health threats, future success in addressing unacceptable health disparities, weak primary health care systems, and wide gaps in preparing for future pandemics are also at stake. **G20 leaders and partners therefore need far more purposeful engagement with religious actors in the pandemic respons**e.

The most immediate priority is to engage and organize strategic religious support in **global COVID19 vaccination campaigns**, with, notably, action on global vaccine equity, logistics of vaccine distribution and administration, positive messages to communities, and countering misinformation and vaccine hesitancy. Religious communities can address and combat resistance and counter misinformation, whether or not religious actors are responsible.

Religious leaders and communities will play crucial roles in the **next phases of the COVID-19 crisis and recovery.** Cooperation on vaccination rollouts can help build trust and local community confidence. The effectiveness of both national strategies and multilateral support may well depend on effective religious engagement.

Practical next steps involve drawing on knowledge and experience of **a diversity of faith actors** in planning and coordination meetings and structures, Engagement needs well targeted strategies that, for example, understand the religious dimensions of vaccine resistance and recognize that these religious dimensions will be deeply intertwined with other societal factors. Engaging religious actors early on in developing public health messaging can head off resistance.

Experience argues for proactive **support to the majority of religious communities that follow public health measures, provide social protection (hunger, livelihoods), and address conflicts**. Strategic attention should go to the minority of religious communities that resist public health measures, further divisions, and spread misinformation. Clear information for policy makers on lessons from religious engagement can bolster the response.

Framing and delivering **public health messages** is crucial in the COVID-19 health response. International and national health authorities are engaging faith actors and could do more; WHO's

appreciation for vital roles of religious leaders is reflected in outreach efforts and specific guidance directed to religious communities[1]. Public health guidelines on gatherings, for example, meet generally positive responses and active cooperation from religious groups, but also some opposition and resistance.

Religious **delivery of health care** (integrated to varying degrees in national health systems) and spiritual care merit sharper attention. The positive potential of these roles is often ignored and the distinctive assets and challenges of religious actors are often not actively engaged or taken fully into account.

Religious community efforts to protect and support vulnerable communities suffer from weak coordination with, and limited support from, the public health sector. Religious focus on **direct assistance for social and economic needs of vulnerable communities and advocacy for the voiceless** argue for G20 engagement. This applies to health, pastoral care needs, and indirect effects of economic shutdowns.

Social tensions linked to the COVID-19 emergency often involve religious communities, including scapegoating of specific, often minority, groups. Increases in domestic violence and abuse of children during the crisis demand religious community response, as does active religious involvement in broader promotion of social cohesion through education and leadership, including addressing that hate speech which has expanded with the pandemic.

Religious dimensions of COVID19 Emergencies

With the second year of the COVID-19 pandemic drawing to a close, many governments face challenges in maintaining compliance with pandemic-linked health and safety restrictions. Culturally and religiously specific factors can impede effective prevention and treatment of COVID-19; these include attitudes toward social distancing, funerary and burial rites, and Western medicine. Oversimplified, one-size-fits-all messaging about COVID-19 transmission, treatment, and prevention can come across as culturally or religious insensitive, discouraging rather than promoting behavioral changes crucial to protecting lives. One example of this is public health guidance on burials: some approaches to restrictions on funeral gatherings and handling of the deceased have unnecessarily antagonized communities, causing stress for families and community members, eroding trust in public health services and causing some people to hide the ill or dying out of fear that they will be denied a proper burial.[1] Similarly, some employer vaccine mandates in the U.S. have angered and alienated members of faith communities. In both these cases, public health recommendations have the potential to be more effective if grounded in the cultural and religious specificities of its target audience. To give one example, a survey conducted in the U.S. in June 2021 found that 4 in 10 vaccine-hesitant Americans who attended religious services regularly would consider getting vaccinated if their faith leaders were involved in promoting the matter.[2]

Access to and uptake of COVID-19 vaccines are essential in order to reduce transmission and prevent the development of dangerous virus variants, yet obstacles to vaccine distribution persist. There are global disparities in the distribution of vaccines, with poorer nations in the

Global South receiving far fewer vaccines per capita than those in the Global North, and often at inflated prices. In May 2021, only one percent of the 1.3 billion vaccines administered worldwide had been on the continent of Africa.[3] While the WHO-sponsored Covax scheme aims to address vaccine inequity by providing low-priced vaccines to poorer nations, the program has faced challenges due to national governments claiming vaccines produced within their borders.[4] Furthermore, although over 5 billion doses of COVID-19 vaccine have been administered worldwide as of August 2021, vaccine hesitancy has become a significant issue, with countries such as the United States, France, and Japan falling short of vaccination goals due to limited acceptance of available vaccines.[5]

The pandemic has unleashed an "infodemic" of virus-related information, including misinformation surrounding the origin, transmission, and treatment of the virus. The use of social media platforms such as Facebook, Twitter, and YouTube can amplify the spread of misinformation, making it possible for users to view, generate, and spread inaccurate information rapidly; furthermore, algorithms designed to provide content based on user preference can further accelerate the spread of misinformation. Misinformation has been linked to vaccine hesitancy; a study conducted in September 2020 found that exposure to online misinformation decreased individuals' likelihood to take the vaccine in the U.K. and the U.S.[6] Furthermore, misinformation can contribute to the scapegoating of particular groups for the origins and spread of the virus; one example of this is the rise in discrimination and hate crimes against Asian diaspora communities around the world, with some political leaders actively fueling anti-Asian rhetoric.[7] The advocacy group AAPI Hate documented over 9,000 anti-Asian hate incidents in the U.S. between March 2020 and June 2021, including verbal harassment, shunning, and physical assault, but the true number of incidents is likely much higher.[8] In some instances, religious communities contribute to the spread of misinformation, even as many faith leaders endorse public health messaging around the virus.[9]

The economic downturn brought on by the COVID-19 pandemic has exposed and exacerbated socio-economic disparities across the world. Vulnerable groups include the poor, elderly, people with disabilities, women and children, refuges, Indigenous populations, people who are incarcerated, people living in conflict-affected areas, people working high-risk jobs, and ethnic, racial, and religious minorities.[10] According to the International Labor Organization, 114 million people lost their jobs or left the labor market because they were unable to work under pandemic restrictions in 2020 alone, with the true number likely higher.[11] Furthermore, the pandemic has exposed gaps in social protection, including child care, access to food and shelter for food insecure and/or homeless people, care for the elderly and the disabled, and other mechanisms of support for vulnerable groups. These and other problems have contributed to social unrest in many countries, including Cuba and South Africa, where unemployment and the increasing divide between rich and poor have sparked large-scale protests.[12]

Pandemic conditions have contributed to a spike in social tensions and domestic violence in communities across the globe. In the past, outbreaks of disease have frequently been accompanied by social unrest, especially in places with existing inequalities, more widespread poverty, low trust in governmental institutions, and weak governance mechanisms.[13] At the same time, some political leaders have used the pandemic to consolidate power and stifle opposition, targeting political protestors and journalists in countries such as Nigeria, Venezuela, and Egypt.

Conflict zones have not been exempt from the virus, and while local and international bodies have called for ceasefires, existing conflicts have raged on with little change in places such as Yemen, the Philippines, and Eastern Ukraine.[14] Lockdown restrictions have also contributed to a spike in domestic violence and abuse across the world. According to U.N. women, reports of domestic violence had increased by 33 percent in Singapore, 30 percent in France, and 25 percent in Argentina since the lockdown started in those countries.[15]

The COVID-19 crisis highlights wide disparities in healthcare infrastructures around the world, sharpening the need to achieve universal health coverage (UHC) objectives, especially as they relate to primary health care. Lockdown restrictions have disrupted and delayed essential health services regarding maternal health, child immunization, family planning, sanitation, non-communicable diseases, and HIV/AIDS, TB, and malaria intervention and treatment programs; moreover, many people choose not to visit health facilities for basic health services out of fear of being exposed to COVID.[16] Funding for health care is essential in order to preserve advances made in the past decades, recoup slowed progress in primary health care objectives during the pandemic, and ensure preparedness for future outbreaks; this is especially important as many scientists warn that COVID-19 will become endemic in many regions of the globe.[17] Areas of particular concern include a lack of trained health care personnel, shortages of basic medical supplies and equipment (such as ventilators), and a lack of medicines and/or vaccines to treat and/or prevent sickness (including COVID-19).

COVID-19 has taken a toll on the mental health of millions, whether from grief at losing loved ones, loneliness from lack of social contact, fear of getting sick, stress from caretaking responsibilities, or anxiety due to financial strain. National surveys in the U.K. and U.S. documented an increase in mental health-related problems: in the U.K., the number of adults reporting symptoms of depression grew from 10 recent in the period between July 2019 to March 2020 to 19 percent in June 2020. In the U.S., adults reporting anxiety or depression increased from 11 percent in 2019 to 42 percent in 2020.[18] Essential worker have been especially hard hit; they are nearly three times as likely to be diagnosed with a mental health disorder during the pandemic (25 percent compared to 9 percent of the general population).[19] To make matters worse, the pandemic has disrupted and/or stopped mental health services in 93 percent of countries; these services include counseling and psychotherapy, harm reduction services, emergency interventions, and school and workplace mental health services.[20] While it is difficult to gauge the long-term impact of the virus on mental health, experts warn that these trends may persist even as COVID cases decrease and social distancing and lockdown restrictions ease.[21]

Government regulations enacted in response to COVID-19 occasionally raise issues linked to Freedom of Religion or Belief (FoRB). Some religious groups have invoked FoRB to contest or reject restrictions on public gatherings during COVID-related lockdowns.[22] Some individuals have also justified their decision not to get vaccinated as a matter of religious freedom, viewing employer mandates as a form of religious-based discrimination.[23] These concerns have sometimes furthered the politicization of public health issues and have frayed the relationship between government authorities and faith communities. At the same time, the matter of FoRB has led to divisions within faith communities: in the U.S., for examples, Catholic bishops have disagreed about whether or not to issue religious exemptions for the COVID-19 vaccine to believers in their dioceses.[24] Yet scholars argue that it is possible to balance public health

concerns with FoRB, and many religious leaders actively promote public health messaging on risk reduction strategies and vaccination.[25]

Religious Responses

Faith-based responses to COVID-19 take different forms. Documented responses in different regions of the world demonstrate areas of existing engagement, as well as areas that demand greater engagement and collaboration with G20 governments and international institutions such as the World Health Organization and UNICEF. While not comprehensive, the efforts featured below exemplify both the potential for productive collaboration with faith actors in the response to the pandemic and the impact of such collaboration on the social, economic, and political landscape.

Religious leaders are effective spokespeople for vaccination in their communities. While many vaccine-hesitant and vaccine-resistant individuals are motivated by religious arguments, there is evidence that faith leaders can play a prominent role in shifting these attitudes: one U.S.-based study found that a quarter of vaccine-hesitant Americans said they would consider vaccination if exposed to a faith-based approach to vaccination, such as a religious leader encouraging it or their house of worship holding an information forum on the topic.[26] Drawing on this potential, the U.S.-based interfaith group **Faiths4Vaccines** brings together local and national faith leaders and medical professionals in order to encourage religious congregations to support vaccine rollout, promote the equitable distribution of vaccines, and combat vaccine hesitancy in their communities.[27] **Pope Francis** has spoken out in support of vaccines on numerous occasions, saying that getting the vaccine is an "ethical choice"[28] and an "act of love"[29] and calling on those in power to prioritize vulnerable populations in vaccine rollout;[30] the Pope also established a **Vatican COVID-19 Commission** to address some of the most pressing issues raised by the pandemic.[31] In April 2021, more than 150 religious leaders, including the **Dalai Lama** and former Archbishop of Canterbury **Rowan Williams**, pledged their support for efforts to immunize the global population and combat vaccine nationalism.[32]

Secular-religious partnerships bring together faith actors, national governments, and international governance bodies to address numerous facets of the COVID-19 crisis. **UNICEF** has partnered with **Religions for Peace** and the **Joint Learning Initiative on Faith & Local Communities** to launch the Global Multi-Religious Faith-in-Action Covid-19 Initiative to assist interfaith and religious groups in adapting worship services to reduce transmission, introducing hygienic practices, combatting discrimination linked to the virus, and providing pastoral care for community members.[33] The **World Health Organization** has convened discussions with representatives from **Religions for Peace** to discuss the roles of faith institutions and interfaith cooperation in COVID-19 responses and vaccine efforts. [34] In late 2020, the WHO's **Information Network for Epidemics (EPI-WIN)** launched three "Communities of Practice" focused on exchanging knowledge with over 50 of its faith partners on matters relating to effective communication, research, and development of long-term strategy relating to prevention and treatment.[35]

International faith-linked NGOs financially support local initiatives to address the virus and its effects. In March 2020, **ACT Alliance**, a network of 135 faith actors in 120 countries, launched a

global appeal to assist its local affiliates in responding to COVID-19; in its first round of funding, the Alliance sponsored 14 local projects aimed at assisting faith leaders in disseminating public health messages, supporting national health services, and providing for vulnerable populations, especially women.[36] **Religions for Peace** launched the Multi-Religious Humanitarian Fund in April 2020 to support grassroots interfaith initiatives responding to COVID-19 and preparing for future health crises; the Fund provides seed grants to Interreligious Councils (IRCs) whose projects support vulnerable populations, combat virus-linked discrimination, and promote safety measures in their communities.[37] As of August 2020, the Fund was financing 20 projects in 20 countries. [38] In May 2020, **KAICIID** announced an initiative to fund grants for short-term, interreligious projects responding to COVID-19 in the Middle East, Myanmar, and Nigeria;[39] the organization offered a second round of grants in 2021.[40] Elsewhere, faith-inspired grassroots networks have provided moral and material support to their members during the pandemic; chapters of the **United Religions Initiative** have organized efforts to deliver groceries to food-insecure individuals and families and PPE to health professionals.[41] The **Community of Sant'Egidio,** a lay Catholic community active in over 70 countries, is harnessing its extensive volunteer networks to provide resources and support to vulnerable groups during the COVID-19 pandemic.[42]

Some organizations contribute to the virus response by producing and disseminating information that promotes partnerships among faith-linked and secular organizations. Working in collaboration, the **Berkley Center for Religion, Peace, and World Affairs**; the **World Faiths Development Dialogue**; and the **Joint Learning Initiative on Faith & Local Communities** have compiled a digital "resource repository" to foster collaboration and coordination among policymakers, development practitioners, and faith actors in responding to COVID-19.[43] The **Tony Blair Institute** has also published a guide for governments seeking to partner with religious leaders and faith-linked organizations in their COVID-19 responses.[44]

Looking Ahead: Recommendations for G20 Leaders and Faith Actors

The following recommendations focus on concrete steps that G20 members and religious authorities can take. They draw on scientific and policy analysis and highlight urgent areas for action.

1) *Integrate faith actors more actively into vaccine rollout efforts.* Successful collaborations between public health authorities and faith leaders demonstrate that religious voices are invaluable to promoting vaccine uptake. G20 leaders should support local, regional, and national initiatives that mobilize religious leaders in promoting equitable access to vaccines, encouraging vaccine uptake, and combatting misinformation linked to low vaccination rates. At the same time, policymakers should work to ensure that the concerns of faith communities regarding vaccination are heard and addressed.

2) *Collaborate with religious leaders and faith-linked organizations to craft culturally relevant and sensitive public health messaging.* With little sign of the pandemic easing in many parts of the globe, G20 leaders should prioritize culturally sensitive public health strategies, working with faith actors to ensure that health restrictions and policies consider and respect

religious communities. G20 member nations can use their influence with international governance bodies to promote intervention strategies that consider the particular religious and cultural context in which they are working.

3) *Engage faith actors as active partners in strengthening primary health care systems.* With health experts predicting that COVID-19 will become a recurring health concern, it is more important than ever to improve primary health care systems and achieve universal health coverage. G20 leaders should promote financing of basic health care services during and after the pandemic, particularly for services to which funding was cut during the pandemic, including maternal health, family planning, immunizations, sanitation, and non-communicable diseases. Special attention should be given to historically underserved communities, including racial, ethnic, and religious minorities, as well as poorer nations where access to primary health care services and personnel is a pressing issue. With their knowledge of local needs, faith-linked health care providers are invaluable partners on the ground, and G20 policymakers should prioritize efforts that draw on their expertise. G20 leaders should partner with faith groups to promote initiatives that encourage regular visits to health facilities, as many people have avoided doing so out of fear of contracting COVID-19.

4) *Strengthen resources that address mental health and domestic violence.* A rise in cases of depression, anxiety, and other mental health conditions linked to COVID-19 highlights the importance of mental health as a public health concern. G20 leaders should focus on mental health among their health care policy priorities and increase funding to existing government-sponsored mental health services. G20 leaders can emphasize their commitment to combatting domestic violence by funding programs focused on education, prevention, intervention, and assistance to survivors.

5) *Prioritize support for socially and economically vulnerable populations in post-COVID economic recovery plans.* G20 leaders should take bold steps to ensure that all members of their populations are able to make a strong recovery from the COVID-linked economic downturn, especially the most economically vulnerable. Economic recovery plans should prioritize social support services including child care, shelter and housing services, care for elderly and disabled populations, and support for unemployed or underemployed individuals. G20 member nations should strengthen these services and should support the creation of new services in places where they have not existed previously. Collaborating with local faith actors can be invaluable in these efforts, as religious leaders are often most familiar with the needs of their community members.

6) *Work with religious authorities both to ensure Freedom of Religion or Belief (FoRB) and to rebuild trust between faith communities and public health actors.* It is important to ensure that invocations of FoRB are not unjustifiably used to reduce the success of vaccination efforts. With the input of faith actors more important than ever, it is essential that policymakers and health authorities gain trust. G20 members should work with local, regional, and national governments in their countries to ensure that public health regulations strike a balance between promoting the health and wellbeing of all members of the population and protecting the rights of people to practice their faith. In addition, G20

countries should support international platforms that share best practices and amplify faith-linked perspectives on issues related to the COVID-19 crisis. It is especially important to include religious leaders and faith-linked organizations in these initiatives.

References

"A Year of Covid-19: The Pandemic's Impact on Global Conflict and Demonstration Trends." The Armed Conflict Location & Event Data Project. 2021. https://acleddata.com/acleddatanew/wp-content/uploads/2021/04/ACLED_A-Year-of-COVID19_April2021.pdf

Abbot, Alison. "COVID's mental-health toll: how scientists are tracking a surge in depression." *Nature.* 2021. https://www.nature.com/articles/d41586-021-00175-z

"About Us." Faiths4Vaccines. 2021. https://faiths4vaccines.org/about-us/

"ACT's COVID-response – one year in." ACT Alliance. 2021. https://actalliance.org/act-news/acts-covid-response-one-year-in/

Al-Dawoody, Ahmed & Oran Finegan. "COVID-19 and Islamic burial laws: safeguarding dignity of the dead." International Committee of the Red Cross. 2020. https://blogs.icrc.org/law-and-policy/2020/04/30/covid-19-islamic-burial-laws/

Alimardani, Mahsa & Mona Elswah. "Online Temptations: COVID-19 and Religious Misinformation in the MENA Region." *Social Media + Society*. 2020. https://journals.sagepub.com/doi/full/10.1177/2056305120948251

Barrett, Philip et al. "COVID's Long Shadow: Social Repercussions of Pandemics." IMF Blog. 2021. https://blogs.imf.org/2021/02/03/covids-long-shadow-social-repercussions-of-pandemics/

Bauer, Nickolaus. "'Little to lose': Poverty and despair fuel South Africa's unrest." *Al Jazeera.* 2021. https://www.aljazeera.com/news/2021/7/14/little-to-lose-poverty-and-despair-fuel-south-africas-unrest

Beaumont, Peter. "Vaccine inequality exposed by dire situation in world's poorest nations." *The Guardian.* 2021. https://www.theguardian.com/world/2021/may/30/vaccine-inequality-exposed-by-dire-situation-in-worlds-poorest-nations

"COVID-19 disrupting mental health services in most countries, WHO survey." World Health Organization. 2020. https://www.who.int/news/item/05-10-2020-covid-19-disrupting-mental-health-services-in-most-countries-who-survey

"Covid-19: Guide for Governments Working with Religious Leaders to Support Public-Health Measures." Tony Blair Institute for Global Change. 2020.

https://institute.global/sites/default/files/inline-files/Tony%20Blair%20Institute%2C%20Working%20With%20Religious%20Leaders%20to%20Support%20Public%20Health%20Measures.pdf

"COVID-19 significantly impacts health services for noncommunicable diseases." World Health Organization. 2020. https://www.who.int/news/item/01-06-2020-covid-19-significantly-impacts-health-services-for-noncommunicable-diseases

Dwoskin, Elizabeth. "On social media, vaccine misinformation mixes with extreme faith." *The Washington Post*. 2021. https://www.washingtonpost.com/technology/2021/02/16/covid-vaccine-misinformation-evangelical-mark-beast/

"Essential workers more likely to be diagnosed with a mental health disorder during pandemic." American Psychological Association. 2021. https://www.apa.org/news/press/releases/stress/2021/one-year-pandemic-stress-essential

"Faith and COVID-19: Resource Repository." Berkley Center for Religion, Peace & World Affairs. 2021. https://docs.google.com/document/d/1FLxwvN6ICTxWWYOwRiv9sBLgf7v0vstsSzV7_o_1-B8/edit

Finn, John. "Freedom of religion doesn't mean freedom from mask mandates." *The Conversation.* 2020. https://theconversation.com/freedom-of-religion-doesnt-mean-freedom-from-mask-mandates-144190

"Following a Stellar Year of Achievements, KAICIID Renews its Call for Proposals for the 2021 Dialogue60 Grant Programme." KAICIID Dialogue Centre. 2021. https://www.kaiciid.org/news-events/news/following-stellar-year-achievements-kaiciid-renews-its-call-proposals-2021

Hodge, James et al. "Balancing Religious Freedoms and Public Health Protections During the COVID-19 Pandemic." Berkley Center for Religion, Peace & World Affairs. 2020. https://berkleycenter.georgetown.edu/responses/balancing-religious-freedoms-and-public-health-protections-during-the-covid-19-pandemic

Horowitz, Jason. "Pope Calls Coronavirus Vaccinations an Ethical Obligation." *The New York Times*. 2021. https://www.nytimes.com/2021/01/09/world/europe/pope-coronavirus-vaccinations.html

"How can we vaccinate the world? Five challenges facing the UN-backed COVAX programme." UN News. 2021. https://news.un.org/en/story/2021/04/1088932

"How COVID-19 Impacts Women and Girls." UN Women. 2021. https://interactive.unwomen.org/multimedia/explainer/covid19/en/index.html

"ILO: Uncertain and uneven recovery expected following unprecedented labour market crisis." International Labour Organization. 2021. https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_766949/lang--en/index.htm

"In A Message To Americans, Pope Francis Says Getting Vaccinated Is 'An Act Of Love.'" *National Public Radio*. 2021. https://www.npr.org/sections/coronavirus-live-updates/2021/08/18/1028740057/in-a-message-to-americans-pope-francis-says-getting-vaccinated-is-an-act-of-love

"KAICIID to Provide Grants for Interreligious Responses to COVID-19." KAICIID Dialogue Centre. 2020. https://www.kaiciid.org/news-events/news/kaiciid-provide-grants-interreligious-responses-covid-19

Kaminer, Debbie. "Can an employee object to mandatory COVID-19 vaccines on religious grounds?" *The Conversation.* 2021. https://theconversation.com/can-an-employee-object-to-mandatory-covid-19-vaccines-on-religious-grounds-153058

"*Lancet* COVID-19 Commission Statement on the occasion of the 75th session of the UN General Assembly." *The Lancet*. 2020. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31927-9/fulltext

"Launch of Global Multi-Religious Faith-in-Action Covid-19 Initiative." UNICEF. 2020. https://www.unicef.org/press-releases/launch-global-multi-religious-faith-action-covid-19-initiative

Lee, Rennie et al. "Anti-Asian bias isn't just an American problem." *The Washington Post*. 2021. https://www.washingtonpost.com/politics/2021/03/26/anti-asian-bias-isnt-just-an-american-problem/

"Locked-down Niger braces for violence as Ramadan approaches." *Pulse News*. 2020. https://www.pulse.com.gh/news/world/locked-down-niger-braces-for-violence-as-ramadan-approaches/7wvsvf1

Longoria, Jaime et al. "As the pandemic spreads in Latin America, some Christian communities find themselves caught between faith and science." First Draft. 2020. https://firstdraftnews.org/articles/religious-misinformation-in-the-coronavirus-pandemic/

Loomba, Sahil et al. "Measuring the impact of COVID-19 vaccine misinformation on vaccination intent in the UK and USA." *Nature Human Behavior*. 2021. https://www.nature.com/articles/s41562-021-01056-1

"Love Thy Neighbor: People of All Beliefs, Including Christians, Muslims, Jews, Agnostics, Helping Each Other Through COVID-19 Crisis." United Religions Initiative. 2020. https://www.uri.org/uri-story/20200424-love-thy-neighbor-people-all-beliefs-including-christians-muslims-jews-agnostics

Morris, Emily. “Cuba’s mass protests are driven by the misery of COVID and economic sanctions.” *The Conversation*. 2021. https://theconversation.com/cubas-mass-protests-are-driven-by-the-misery-of-covid-and-economic-sanctions-164505

“News #Coronavirus.” Community of Sant’Egidio. 2021. https://www.santegidio.org/pageID/30284/langID/en/tags/2704_5/NEWS_coronavirus.html

Pesce, Nicole Lyn. “This is the most anti-vaxxer country in the world.” MarketWatch. 2019. https://www.marketwatch.com/story/this-is-the-most-anti-vaxxer-country-in-the-world-2019-06-19

Phillips, Nicky. “The coronavirus is here to stay — here’s what that means.” *Nature*. 2021. https://www.nature.com/articles/d41586-021-00396-2

“Religions for Peace funds multi-religious actions on COVID-19 in 20 countries.” *Religious News Service*. 2020. https://religionnews.com/2020/08/20/religions-for-peace-funds-multi-religious-actions-on-covid-19-in-20-countries/

“Religions for Peace Launches the Multi-religious Humanitarian Fund in Response to COVID-19.” Religions for Peace, 2020. https://www.rfp.org/religions-for-peace-launches-the-multi-religious-humanitarian-fund-in-response-to-covid-19/

“Religious Identities and the Race Against the Virus: Engaging Faith Communities on COVID-19 Vaccination.” Public Religion Research Institute. 2021. https://www.prri.org/research/prri-ifyc-covid-vaccine-religion-report/

Sadowski, Dennis. “Vaccine mandates open door for bishops to discern an appropriate action.” *Catholic News Service.* 2021. https://www.catholicnews.com/vaccine-mandates-open-door-for-bishops-to-discern-an-appropriate-action/

Sherwood, Harriet. “Global faith leaders call for drug firms to vaccinate world against Covid.” *The Guardian*. 2021. https://www.theguardian.com/world/2021/apr/27/global-faith-leaders-call-for-drug-firms-to-vaccinate-world-against-covid

Sherwood, Harriet. “‘Let us disobey’: Churches defy lockdown with secret meetings.” *The Guardian*. 2020. https://www.theguardian.com/world/2020/nov/22/let-us-disobey-churches-defy-lockdown-with-secret-meetings

“Strengthening partnerships with the faith community.” World Health Organization. 2021. https://www.who.int/activities/strengthening-partnerships-with-the-faith-community

Sullivan, Helen. “South Africa paying more than double EU price for Oxford vaccine.” *The Guardian*. 2021. https://www.theguardian.com/world/2021/jan/22/south-africa-paying-more-than-double-eu-price-for-oxford-astrazeneca-vaccine

"'Urbi et Orbi' Message of His Holiness Pope Francis." Libreria Editrice Vaticana. 2020. https://www.vatican.va/content/francesco/en/messages/urbi/documents/papa-francesco_20201225_urbi-et-orbi-natale.html

"Vatican COVID-19 Commission." Dicastery for Promoting Integral Human Development. 2021. https://www.humandevelopment.va/en/vatican-covid-19.html

"World Health Organisation and Religions for Peace Convene on Paramount Role of Multi-faith Cooperation on COVID-19 and Vaccine Efforts." Religions for Peace. 2021. https://www.rfp.org/world-health-organisation-and-religions-for-peace-convene-on-paramount-role-of-multi-faith-cooperation-on-covid-19-and-vaccine-efforts/

"World religious leaders call for massive increases in production of Covid vaccines and end to vaccine nationalism." Relief Web. 2021. https://reliefweb.int/report/world/world-religious-leaders-call-massive-increases-production-covid-vaccines-and-end

Yellow Horse, Aggie et al. "Stop AAPI Hate National Report." 2021. https://stopaapihate.org/wp-content/uploads/2021/08/Stop-AAPI-Hate-National-Report-Final.pdf

[1] Al-Dawoody, Ahmed & Oran Finegan. "COVID-19 and Islamic burial laws: safeguarding dignity of the dead." International Committee of the Red Cross, April 30, 2020. https://blogs.icrc.org/law-and-policy/2020/04/30/covid-19-islamic-burial-laws/

[2] "Religious Identities and the Race Against the Virus: Engaging Faith Communities on COVID-19 Vaccination." Public Religion Research Institute, March 1, 2021. https://www.prri.org/research/prri-ifyc-covid-vaccine-religion-report/

[3] Beaumont, Peter. "Vaccine inequality exposed by dire situation in world's poorest nations." *The Guardian,* May 30, 2021. https://www.theguardian.com/world/2021/may/30/vaccine-inequality-exposed-by-dire-situation-in-worlds-poorest-nations; Sullivan, Helen. "South Africa paying more than double EU price for Oxford vaccine." *The Guardian*, January 22, 2021. https://www.theguardian.com/world/2021/jan/22/south-africa-paying-more-than-double-eu-price-for-oxford-astrazeneca-vaccine

[4] Beaumont, Peter. "Vaccine inequality exposed by dire situation in world's poorest nations." *The Guardian,* May 30, 2021. https://www.theguardian.com/world/2021/may/30/vaccine-inequality-exposed-by-dire-situation-in-worlds-poorest-nations; "How can we vaccinate the world? Five challenges facing the UN-backed COVAX programme." UN News, April 5, 2021. https://news.un.org/en/story/2021/04/1088932

[5] Pesce, Nicole Lyn. "This is the most anti-vaxxer country in the world." MarketWatch. June 19, 2019. https://www.marketwatch.com/story/this-is-the-most-anti-vaxxer-country-in-the-world-2019-06-19

[6] Loomba, Sahil et al. "Measuring the impact of COVID-19 vaccine misinformation on vaccination intent in the UK and USA." *Nature Human Behavior*, February 5, 2021. https://www.nature.com/articles/s41562-021-01056-1

[7] Lee, Rennie et al. "Anti-Asian bias isn't just an American problem." *The Washington Post,* March 26, 2021. https://www.washingtonpost.com/politics/2021/03/26/anti-asian-bias-isnt-just-an-american-problem/

[8] Yellow Horse, Aggie et al. "Stop AAPI Hate National Report." 2021. https://stopaapihate.org/wp-content/uploads/2021/08/Stop-AAPI-Hate-National-Report-Final.pdf

[9] Dwoskin, Elizabeth. "On social media, vaccine misinformation mixes with extreme faith." *The Washington Post*, February 16, 2021. https://www.washingtonpost.com/technology/2021/02/16/covid-vaccine-misinformation-evangelical-mark-beast/ ; Alimardani, Mahsa & Mona Elswah. "Online Temptations: COVID-19 and Religious Misinformation in the MENA Region." *Social Media + Society*, July 30, 2020. https://journals.sagepub.com/doi/full/10.1177/2056305120948251 ; Longoria, Jaime et al. "As the pandemic spreads in Latin America, some Christian communities find themselves caught between faith and science." First Draft, August 27, 2020. https://firstdraftnews.org/articles/religious-misinformation-in-the-coronavirus-pandemic/

[10] "*Lancet* COVID-19 Commission Statement on the occasion of the 75th session of the UN General Assembly." *The Lancet*, September 14, 2020. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31927-9/fulltext

[11] "ILO: Uncertain and uneven recovery expected following unprecedented labour market crisis." International Labour Organization, January 25, 2021. https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_766949/lang--en/index.htm

[12] Morris, Emily. "Cuba's mass protests are driven by the misery of COVID and economic sanctions." *The Conversation*, July 16, 2021. https://theconversation.com/cubas-mass-protests-are-driven-by-the-misery-of-covid-and-economic-sanctions-164505 ; Bauer, Nickolaus. "'Little to lose': Poverty and despair fuel South Africa's unrest." *Al Jazeera,* Julyl 16, 2021. https://www.aljazeera.com/news/2021/7/14/little-to-lose-poverty-and-despair-fuel-south-africas-unrest

[13] Barrett, Philip et al. "COVID's Long Shadow: Social Repercussions of Pandemics." IMF Blog, February 3, 2021. https://blogs.imf.org/2021/02/03/covids-long-shadow-social-repercussions-of-pandemics/

[14] "A Year of Covid-19: The Pandemic's Impact on Global Conflict and Demonstration Trends." The Armed Conflict Location & Event Data Project, April 2021. https://acleddata.com/acleddatanew/wp-content/uploads/2021/04/ACLED_A-Year-of-COVID19_April2021.pdf

[15] Statistics from April 2020; "How COVID-19 Impacts Women and Girls." UN Women, 2021. https://interactive.unwomen.org/multimedia/explainer/covid19/en/index.html

[16] "COVID-19 significantly impacts health services for noncommunicable diseases." World Health Organization, June 1, 2020. https://www.who.int/news/item/01-06-2020-covid-19-significantly-impacts-health-services-for-noncommunicable-diseases

[17] Phillips, Nicky. "The coronavirus is here to stay — here's what that means." *Nature*, February 16, 2021. https://www.nature.com/articles/d41586-021-00396-2

[18] Abbot, Alison. "COVID's mental-health toll: how scientists are tracking a surge in depression." *Nature*, February 3, 2021. https://www.nature.com/articles/d41586-021-00175-z

[19] "Essential workers more likely to be diagnosed with a mental health disorder during pandemic." American Psychological Association, March 11, 2021. https://www.apa.org/news/press/releases/stress/2021/one-year-pandemic-stress-essential

[20] "COVID-19 disrupting mental health services in most countries, WHO survey." World Health Organization, October 5, 2020. https://www.who.int/news/item/05-10-2020-covid-19-disrupting-mental-health-services-in-most-countries-who-survey

[21] Abbot, Alison. "COVID's mental-health toll: how scientists are tracking a surge in depression." *Nature*, February 3, 2021. https://www.nature.com/articles/d41586-021-00175-z

[22] "Locked-down Niger braces for violence as Ramadan approaches." *Pulse News*, April 22, 2020. https://www.pulse.com.gh/news/world/locked-down-niger-braces-for-violence-as-ramadan-approaches/7wvsvf1; Sherwood, Harriet. "'Let us disobey': Churches defy lockdown with secret meetings." *The Guardian*, November 22, 2020. https://www.theguardian.com/world/2020/nov/22/let-us-disobey-churches-defy-lockdown-with-secret-meetings

[23] Kaminer, Debbie. "Can an employee object to mandatory COVID-19 vaccines on religious grounds?" *The Conversation*, February 3, 2021. https://theconversation.com/can-an-employee-object-to-mandatory-covid-19-vaccines-on-religious-grounds-153058

[24] Sadowski, Dennis. "Vaccine mandates open door for bishops to discern an appropriate action." *Catholic News Service,* August 26, 2021. https://www.catholicnews.com/vaccine-mandates-open-door-for-bishops-to-discern-an-appropriate-action/

[25] Hodge, James et al. "Balancing Religious Freedoms and Public Health Protections During the COVID-19 Pandemic." Berkley Center for Religion, Peace & World Affairs, June 3, 2020. https://berkleycenter.georgetown.edu/responses/balancing-religious-freedoms-and-public-health-protections-during-the-covid-19-pandemic ; Finn, John. "Freedom of religion doesn't mean freedom from mask mandates." The Conversation, August 11, 2020. https://theconversation.com/freedom-of-religion-doesnt-mean-freedom-from-mask-mandates-144190 ; "World religious leaders call for massive increases in production of Covid vaccines and end to vaccine nationalism." Relief Web, April 27, 2021. https://reliefweb.int/report/world/world-religious-leaders-call-massive-increases-production-covid-vaccines-and-end

[26] "Religious Identities and the Race Against the Virus: Engaging Faith Communities on COVID-19 Vaccination." Public Religion Research Institute, April 22, 2021. https://www.prri.org/research/prri-ifyc-covid-vaccine-religion-report/

[27] "About Us." Faiths4Vaccines, 2021. https://faiths4vaccines.org/about-us/

[28] Horowitz, Jason. "Pope Calls Coronavirus Vaccinations an Ethical Obligation." *The New York Times*, January 9, 2021. https://www.nytimes.com/2021/01/09/world/europe/pope-coronavirus-vaccinations.html
[29] "In A Message To Americans, Pope Francis Says Getting Vaccinated Is 'An Act Of Love.'" *National Public Radio*, August 18, 2021. https://www.npr.org/sections/coronavirus-live-updates/2021/08/18/1028740057/in-a-message-to-americans-pope-francis-says-getting-vaccinated-is-an-act-of-love
[30] "'Urbi et Orbi' Message of His Holiness Pope Francis." Libreria Editrice Vaticana, December 25, 2020. https://www.vatican.va/content/francesco/en/messages/urbi/documents/papa-francesco_20201225_urbi-et-orbi-natale.html
[31] "Vatican COVID-19 Commission." Dicastery for Promoting Integral Human Development, 2021. https://www.humandevelopment.va/en/vatican-covid-19.html
[32] Sherwood, Harriet. "Global faith leaders call for drug firms to vaccinate world against Covid." *The Guardian*, April 27, 2021. https://www.theguardian.com/world/2021/apr/27/global-faith-leaders-call-for-drug-firms-to-vaccinate-world-against-covid
[33] "Launch of Global Multi-Religious Faith-in-Action Covid-19 Initiative." UNICEF, April 7, 2020. https://www.unicef.org/press-releases/launch-global-multi-religious-faith-action-covid-19-initiative
[34] "World Health Organisation and Religions for Peace Convene on Paramount Role of Multi-faith Cooperation on COVID-19 and Vaccine Efforts." Religions for Peace, March 19, 2021. https://www.rfp.org/world-health-organisation-and-religions-for-peace-convene-on-paramount-role-of-multi-faith-cooperation-on-covid-19-and-vaccine-efforts/
[35] "Strengthening partnerships with the faith community." World Health Organization, 2021. https://www.who.int/activities/strengthening-partnerships-with-the-faith-community
[36] "ACT's COVID-response – one year in." ACT Alliance, April 28, 2021. https://actalliance.org/act-news/acts-covid-response-one-year-in/
[37] "Religions for Peace Launches the Multi-religious Humanitarian Fund in Response to COVID-19." Religions for Peace, April 14, 2020. https://www.rfp.org/religions-for-peace-launches-the-multi-religious-humanitarian-fund-in-response-to-covid-19/
[38] "Religions for Peace funds multi-religious actions on COVID-19 in 20 countries." *Religious News Service*, August 20, 2020. https://religionnews.com/2020/08/20/religions-for-peace-funds-multi-religious-actions-on-covid-19-in-20-countries/
[39] "KAICIID to Provide Grants for Interreligious Responses to COVID-19." KAICIID Dialogue Centre, May 28, 2020. https://www.kaiciid.org/news-events/news/kaiciid-provide-grants-interreligious-responses-covid-19
[40] "Following a Stellar Year of Achievements, KAICIID Renews its Call for Proposals for the 2021 Dialogue60 Grant Programme." KAICIID Dialogue Centre, May 11, 2021. https://www.kaiciid.org/news-events/news/following-stellar-year-achievements-kaiciid-renews-its-call-proposals-2021
[41] "Love Thy Neighbor: People of All Beliefs, Including Christians, Muslims, Jews, Agnostics, Helping Each Other Through COVID-19 Crisis." United Religions Initiative, April 24, 2020. https://www.uri.org/uri-story/20200424-love-thy-neighbor-people-all-beliefs-including-christians-muslims-jews-agnostics
[42] "News #Coronavirus." Community of Sant'Egidio, 2021. https://www.santegidio.org/pageID/30284/langID/en/tags/2704_5/NEWS_coronavirus.html
[43] "Faith and COVID-19: Resource Repository." Berkley Center for Religion, Peace & World Affairs, 2021. https://docs.google.com/document/d/1FLxwvN6ICTxWWYOwRiv9sBLgf7v0vstsSzV7_o_1-B8/edit
[44] "Covid-19: Guide for Governments Working with Religious Leaders to Support Public-Health Measures." Tony Blair Institute for Global Change, 2020. https://institute.global/sites/default/files/inline-files/Tony%20Blair%20Institute%2C%20Working%20With%20Religious%20Leaders%20to%20Support%20Public%20Health%20Measures.pdf