Dhaka Declaration on Faith-Based Diabetes Prevention

Adopted at the International Conference on Faith-Based Diabetes Prevention Dhaka, Bangladesh | August 2026

Organized by:

Centre for Global Health Research, Diabetic Association of Bangladesh (BADAS), **Directorate General of Health Services (DGHS)** – Ministry of Health and Family Welfare, **Islamic Foundation** – Ministry of Religious Affairs, and the **World Diabetes Foundation (WDF)**

In collaboration with: Organization of Islamic Cooperation (OIC-COMSTECH). International Diabetes Federation (IDF), Japan International Cooperation Agency (JICA), and World Health Organization (WHO)

Preamble

We, the participants of the International Conference on Faith-Based Diabetes Prevention — representing governments, global organisations, scientific bodies, and faith-based institutions — acknowledge the escalating burden of diabetes and related non-communicable diseases (NCDs) across low- and middle-income countries, especially among the 57 OIC Member States.

We recognise the transformative role of faith institutions and religious leaders in promoting healthy lifestyles, influencing social norms, and expanding reach to underserved communities.
We further acknowledge that this role extends across diverse faith traditions, including Islam, Hinduism, Christianity, and Buddhism, and that inclusive engagement of multi-faith leaders is essential for equitable and culturally responsive diabetes prevention globally.

We reaffirm our commitment to global frameworks — including the UN Political Declaration on NCDs, the WHO Global Diabetes Compact, SDG Target 3.4, and the OIC Strategic Health Program of Action (SHPA) 2024–2030 — that call for equitable, culturally grounded, and sustainable diabetes prevention strategies.

We commend Bangladesh's leadership in developing the Diabetes Prevention through Religious Leaders (DPRL) programme, implemented jointly by BADAS, NCDC-DGHS, and the Islamic Foundation with support from WDF. The programme demonstrated, through a cluster-randomised clinical trial (*JAMA Network Open*, 2025), a 43% relative reduction in incident diabetes, establishing a robust, evidence-based, and community-driven model recognised globally.

Guiding Principles

1. **Equity and Inclusion:** Initiatives must prioritize underserved, low-resource, and gender-diverse populations.
2. **Integration, Not Substitution:** Faith-based interventions should complement, not replace, formal health systems.
3. **Evidence and Accountability:** Interventions should be grounded in scientific evidence, with transparent monitoring and evaluation.
4. **Global Solidarity and South–South Collaboration:** Cooperation across countries and international partners is essential for scale-up and shared learning.
5. **Interfaith Inclusivity and Respect: Faith-based health initiatives should actively engage leaders from multiple religious traditions—including Muslim, Hindu, Christian, and Buddhist communities—to ensure inclusivity, mutual respect, and broader societal impact.**

Commitments

We, the participants of the Dhaka Conference, commit to:

1. **Integrate faith institutions into national diabetes and NCD prevention policies,** recognising religious leaders as effective community partners for health promotion.
2. **Scale and adapt the faith-based diabetes prevention model** across interested countries, building on Bangladesh's proven experience.
3. **Develop and distribute standardized faith-aligned educational tools and sermon guides**—including Khutbahs and equivalent teachings across other faith traditions—promoting healthy lifestyles, prevention, and stewardship of health.
4. **Promote structured engagement of multi-faith leaders**—including Muslim, Hindu, Christian, and Buddhist representatives—in delivering community-based diabetes prevention, awareness, and behaviour change interventions.
5. **Establish Health and Wellness Corners within faith institutions** that provide community-level screening, referral, and counselling, with appropriate linkage to national NCD information systems.
6. **Promote maternal and preconception health education through faith leaders**, reducing intergenerational transmission of diabetes.
7. **Promote sustainable multi-sectoral and public–private partnerships** to mobilize financial and technical resources for faith-based engagement within national NCD prevention frameworks.
8. **Support international collaboration platforms** to facilitate cross-country learning, knowledge exchange, and regional capacity building.
9. **Document and disseminate outcomes** through regional and global platforms to advance international knowledge sharing and exchange of best practices.
10. **Engage media and community networks** to amplify awareness campaigns and highlight success stories.
11. **Adopt and operationalise this Dhaka Declaration,** ensuring policy translation and reporting progress through joint annual reviews.

Implementation and Next Steps

1. **The Dhaka Declaration** will serve as a foundational framework for global faith-based diabetes prevention advocacy.
   - It will be formally submitted to:
   - Member States for consideration and integration into national NCD action plans
2. Relevant international platforms for global dissemination and policy alignment
3. **BADAS, DGHS, and partners** will jointly lead the development of a Five-Year Regional Roadmap (2026–2030) in collaboration with global stakeholders to guide implementation and monitoring.
4. **An annual Dhaka Forum** will be organised to review progress, share experiences, and strengthen the global coalition for faith-based diabetes prevention.
5. **Special emphasis will be placed on multi-faith collaboration**, ensuring representation and active participation of Hindu, Christian, Buddhist, and Muslim faith leaders in national and international implementation efforts.

Conclusion

We, the undersigned, affirm our shared conviction that faith, science, and solidarity can unite to prevent diabetes and foster healthier, more resilient communities.

We pledge to implement the Dhaka Declaration's principles within our respective institutions and countries — transforming mosques, temples, churches, monasteries, and all places of worship into inclusive centres of health, compassion, and prevention.

Adopted in Dhaka, Bangladesh, August 2026

Signatories:

Representatives of participating governments, organisations, and institutions, **including recognised leaders from Muslim, Hindu, Christian, and Buddhist communities**, alongside:

BADAS | DGHS | Islamic Foundation | WDF | WHO | IDF | JICA | OIC-COMSTECH | Partner Countries | Civil Society