

CHRISTIAN EDUCATION STRATEGIES FOR ADDRESSING GENDER-BASED VIOLENCE AND HIV/AIDS IN AFRICAN COMMUNITIES

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ABSTRACT

Gender-based Violence (GBV) is violence involving men and women, in which the female is usually the victim; and which results from unsatisfactory power relationships between men and women. In the African communities, violence is directed specifically against a woman because she is a woman, or affects women unduly. Examples of GBV include physical, sexual, and psychological harm. Gender-based violence (GBV) climaxes the relationship between women's secondary status in society and their increased vulnerability to violence. Studies have revealed that high levels of violence perpetuated against women can directly and indirectly expose them to HIV. This is a concern which needs to be addressed. And this paper enunciates that Christian leaders have designated role of leadership in their organisations and communities. They serve as replicas of care and compassion as well as have the ethical power to raise awareness about GBV and an ethical obligation to thwart violence, offer support and care, and attempt to transform societal or religious norms or practices that perpetuate such violence and vulnerability to HIV. The paper elucidates Christian education as that which applies biblical principles to Christians' social relationships. The dimension of being socially applied is vital in the emphasis of Christian education strategies and actions in this paper. Thus, the paper clinches with ten Christian education and action plans for raising awareness, campaigning against and providing support and care to victims of GBV and HIV/AIDS.

INTRODUCTION

This paper uses the term GBV, as it includes both sexual violence and other forms of violence against women, and pinnacles the prominence of the gender dimension of violence. Gender-based violence (GBV) emphasizes the nexus between women's seeming secondary status in society and their increased vulnerability to violence. GBV has been described as "any harm or suffering that is perpetrated against a woman or girl, man or boy and that has a negative impact on the physical, sexual or psychological health, development or identity of the person."² The principal reason for the violence is founded in gender-based power inequalities and gender-based discrimination. Research has shown that worldwide, about one in four women experience gender-based violence including amongst others; sexual, physical or emotional abuse by a close partner (this is known as intimate partner violence-IPV), family members or others; sexual harassment or abuse, trafficking for forced labour or sex, forced marriage, female genital mutilation, child marriages, and sexual violence in conflict situations. It is widely believed that women face these and other types of violence as a result of their secondary status in society, which is boosted by laws and customary practices including polygamy, virginity testing, and female genital mutilation (FGM), among others. High

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² Swedish International Development Cooperation Agency (SIDA). Preventing and Responding to Gender-Based Violence: Expressions and Strategies. Stockholm, Sweden, 2015. www.sida.se sida@sida.se. Accessed July 5, 2016.

levels of violence perpetuated against women can directly and indirectly expose them to HIV/AIDS through forced or coercive sex with an HIV-infected partner; rape, women's inability or limited ability to negotiate condom use with partners; men having multiple sexual partners; use of alcohol or drugs; transactional sex and many more.³

Committers of GBV are individuals, groups or institutions that directly impose, support and condone violence or other abuse against a person or a group of people. Perpetrators are in a position of real or perceived power and can thus exert control over their victims. Contrary to common belief, most acts of GBV are committed by someone known to the victim, and many violent incidents are planned.⁴ Perpetrators can be close partners (husbands, boyfriends), family members, close relatives, caregivers and friends; influential community members (teachers, religious figures, leaders, politicians, employers, supervisors and colleagues); security forces and soldiers, including peacekeepers; humanitarian aid workers; and institutions and states.⁵ While men, boys, and other vulnerable or marginalized people also experience GBV and thus vulnerability to HIV/AIDS, the writer of this paper is specifically perturbed by violence against women as a key expression of GBV.

GBV is prevalent in the lives of girls and women at every stage of their life cycle. It occurs at an individual level, in a relationship and at household level, at community level and in the society. It facilitates the labelling of gender roles that repudiates human dignity of an individual and impedes human development⁶ by affecting human health, self-esteem and livelihoods. It is considered a violation of human rights protected by international human rights treaties (such rights include the right to security of person; the right to the highest attainable standard of physical and mental health; the right to an adequate standard of living, including food, the right of freedom from torture or cruelty, callous or degrading treatment, and the right to life.⁷

This paper explores types of GBV; their effects on the female gender, as well as the nexus between HIV/AIDS and GBV. More intently, the paper launches the rationale for the involvement of Christian leaders who have designated role of leadership in their organisations and communities. They serve as replicas of care and compassion as well as have the ethical power to raise awareness about GBV and an ethical obligation to thwart violence, offer support and care, and attempt to transform societal or religious norms or practices that perpetuate such violence and vulnerability to HIV. Specifically, as Christian leaders and the churches around the world reiterate "the sanctity of human life, they and their communities have the moral authority and obligation to raise awareness about and campaign against GBV and strive to transform societal or religious norms or practices that promote such violence and vulnerability to HIV/AIDS."⁸ The paper culminates with some Christian education strategies and actionable steps/ plans

³ UN.Report of the Special Reporter on Violence Against Women, its Causes and Consequences, Yakin Erturk, Integration of the Human Rights of Women and the Gender Perspective: Violence against Women. Towards an Effective Implementation of International norms to End Violence Against Women., 2004. C.f. UNGA.Sixty-First Session of the United Nations General Assembly on the Advancement of Women Informal Thematic Debate on the "Gender Equality and Empowerment of Woman. From 9th -11th October, 2006. www.un.org/womenwatch/dew/documents/ga61.html . Accessed July 5, 2017.

⁴ UNHCR.Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons: Guidelines for Perception and Response (Geneva: UNHCR, 2003). www.rhrc.org/resources/gbv/gl_sgbv_03.html. Accessed July 5, 2017.

⁵ IASC. Task Force on Gender and Humanitarian Assistance. Guidelines for Gender-Based Violence in Humanitarian Emergency Settings: Focusing on Prevention of and Response to Sexual Violence in Emergencies. Geneva: IASC Task on Gender and humanitarian Assistance,2005, p. 5.www.data.unaids.org/publications/eternal-documents/IASC_Guidelines-Emergency-settings-en.pdf. Accessed February 5,2018.

⁶ Ibid. UNHCR, p. 7.

⁷ IASC, p. 1.

⁸ USAID,2006.

that could be taken/employed in raising awareness, campaigning against and providing support and care to victims of GBV and HIV/AIDS in their environs.

EXPLORING TYPES OF GENDER-BASED VIOLENCE AND THEIR EFFECTS ON THE FEMALE GENDER

Gender-based violence (GBV) is a major problem throughout the world and only in Africa. GBV includes physical, sexual, emotional, and financial abuse; structural discrimination (formal structures that result in differences or stigmatization in services); state-sponsored violence (i.e., persecution of sex workers, men who have sex with men, women living with HIV); and trafficking of women and girls. GBV primarily affects women and girls, but men, boys, and gender marginal communities are also impacted.⁹ Specifically, the main forms of GBV and effects from literature include the following:

1. **Physical violence:** Selling and/or trading in human beings for sexual exploitation, forced labour or services, slavery, servitude etc. With respect to children, this type of violence refers to all forms of slavery, use of child soldiers, trafficking of children, commercial sexual abuse, and the use of children in illicit activities as well as hazardous child labour.¹⁰
2. **Sexual violence:** Rape and marital rape, defilement, sexual harassment, forced prostitution or exploitation, and child sexual abuse. It is often used systematically and exactly as a weapon of war for purposes of subverting people and destroying community and family bonds. Young girls may be forced to exchange sex for life necessities such as food, sanitary towels, clothes and or money to support themselves (i.e. commercial sex).¹¹
3. **Violence related to harmful traditional practices:** Female genital mutilation, forced marriage and early marriages, infanticide and/or neglect, and denial of education for girls or women.
4. **Emotional and psychological Violence:** Isolating a person from friends/family or restricting movements, thus causing increased dependence, anxiety and fear.
5. **Socio-economic violence:** Acts of exclusion, denial of economic and social benefits and opportunities. It also includes restrictive access to employment opportunities, services and social benefits, or preventing persons from exercising and enjoying their Fundamental Human Rights.¹²
6. **Property grabbing:** a current manifestation of socio-economic gender-based violence, “Property grabbing” refers to a situation whereby a person when widowed or separated, loses land, a house or shelter and other belongings, and thus also the main source of livelihood and welfare. It is gradually recognized as a new form of gendered violence, threatening the security of women and orphaned children in many countries.¹³ Dispossession of land and property may in some instances be followed by physical, emotional and other forms of violence and abuses. Even when it is not, it does increase women’s and children’s vulnerability to other forms of GBV, including physical and mental harassment and abuse, forced labour and sexual

⁹ C., García-Moreno, A.f.M. Jansen, M. Ellsberg, I. Heise, and C. Watts. *WHO Multi-Country Study on Women’s Health and Domestic Violence against Women: Initial Results on Prevalence Health Outcomes and Women’s Responses* (Geneva: World Health Organization, 2005).

¹⁰ Britt Herstad. *The Role of Religious Communities in Addressing Gender-Based Violence and HIV Report of the United States Agency for International Development (USAID) Health Policy Initiative, Task Order 1, Project, August 1, 2009, p.20; Guidance Note. Gender-Based Violence and Livelihood Interventions: Focus on Populations of Humanitarian Concern in the Context of HIV Best Practices on Challenging Gender Dynamics in Cultural Contexts. Padare and Women’s Action Group Implementing the ‘Changing the River’s Flow’ Programme’ in Zimbabwe 2011, Women’s Action Group. www.wag.org.zw.*

¹¹ Ibid.

¹² UNHCR, 2003, p. 18

¹³ K. Izumi. *Gender-Based Violence and Property Grabbing in Africa: Denial of Women’s Liberty and Security. In Gender & Development, March, 2007. Vol. 15, Issue 1, p. 9.*

- exploitation. In some cases, it can lead them to engage in harmful coping strategies such as commercial sex for survival, which exposes them to high risk of HIV infection¹⁴.
7. **Commercial sex:** Commercial sex is a particular kind of exchange relationship in which men and women exchange material benefits and sex.¹⁵ According to a recent study in Botswana and Swaziland, for women in sub-Saharan Africa, “insufficient food for their daily needs is strongly linked to multiple (often interdependent) risky sexual practices: sex exchange and inconsistent condom use, which results in the increase in HIV transmission”.¹⁶ In the context of caring crises, commercial sex linked to survival is a common livelihood strategy among households that are unable to meet their basic needs.¹⁷

THE NEXUS BETWEEN HIV/AIDS AND GBV

The connection between HIV and GBV is widely acknowledged¹⁸ with an increased risk of HIV for women experiencing GBV increasingly documented.¹⁹ GBV has been recognized as a consequence of and a risk factor for HIV. According to Maman *et al.* there are three devices through which violence is imagined to increase women’s risk for HIV infection:

- a. Through forced or coercive sexual intercourse with an infected partner,
- b. By restraining women’s ability to negotiate safe sexual behaviours, and
- c. By establishing a pattern of sexual risk taking among individuals assaulted in childhood and adolescence.²⁰

Women’s experience of HIV disclosure in three provinces of South Africa in a study revealed a high level of HIV-related violence, and acceptance of HIV-related violence. This has expanded the evidence base to

¹⁴ K. Izumi (ed.). *The Land and Property Rights of Women and Orphans in the Context of HIV and AIDS. Case Studies from Zimbabwe*, FAO and The Global Coalition on Women and AIDS, Rome, 2006, pp. 28-29, <ftp://ext-ftp.fao.org/ES/data/ESW/HIVAIDS/FinalConsultationReport.pdf> . Accessed May 23, 2017.s

¹⁵ UNAIDS. 2008 Report on the General AIDS Epidemic. (Geneva: UNAIDS, 2008); A. Swidler and S.C. Watkins. *Ties of Dependence: AIDS and Transactional Sex in Rural Malawi*, December, 2008. <http://repositories.cdlib.org/cgi/viewcontent.cgi?article=1152&context=ccpr> . Accessed, May 23, 2017.

¹⁶ S.D. Weiser, K. Leiter, D.R. Bangsberg, L.M. Butler, F. Percy-de Korte, Z. Hlanze, N. Phaladze, V. Iacopino, M. Heisler . *Food Insufficiency is Associated with High-Risk Sexual Behaviour among Women in Botswana and Swaziland*, 2009. Available at: www.plosmedicine.org/article/info:doi/10.1371/journal.pmed.0040260 . Accessed, June 15, 2017.

¹⁷ UN, 2005, Paragraph 5.

¹⁸ Y. Ertürk, Y. “Integration of the Human Rights of Women and the Gender Perspective: Violence Against Women.” *Intersections of Violence Against Women and HIV/AIDS report of the Special Rapporteur on Violence Against Women, Its Causes and Consequences* (Geneva: United Nations, Commission on Human Rights, 2005); C. García-Moreno, A.f.M. Jansen, M. Ellsberg, I. Heise, and C. Watts. *WHO Multi-Country Study on Women’s Health and Domestic Violence against Women: Initial Results on Prevalence Health Outcomes and Women’s Responses* (Geneva: World Health Organization, 2005); A. Guedes, *Addressing Gender-Based Violence from the Reproductive Health/HIV Sector: A Literature Review and Analysis*. Washington, DC: LTG Associates, Inc. and Social & Scientific Systems, Inc. for USAID Interagency Gender Working Group (IGWG), 2004; Harvard School of Public Health. Harvard School of Public Health, Program on International Health and Human Rights, Center for Women’s Global leadership. “Meeting Report: Action on Gender Based Violence and HIV/AIDS: Bringing Together Research, Policy, Programming and Advocacy.” Toronto, August 9-10, 2006.

¹⁹ K.I. Dunkle, R. K. Jewkes, H. C. Brown, G. E. Gray, J.A. Mcintyre, and S.D. Harlow. “Gender-Based Violence, Relationship Power, and Risk of HIV infection in Women attending Antenatal Clinics in South Africa,” *The Lancet*, 2004, 363:1415; S. Maman, J. K. Mbwapo, N. M. Hogan., G. P. Kilonzo, J. C. Campbell, E. Weiss, and M. D. Sweat. “HIV-Positive Women Report More Lifetime Partner Violence: Findings from a Voluntary Counselling and Testing Clinic in Dares Salaam, Tanzania.” *American Journal of Public Health*, 2002,92(8):1331.

²⁰ Maman et al., p.1419.

strengthen advocacy related to women's perceptions and experiences of violence as a consequence of HIV disclosure.²¹

RATIONALE FOR INVOLVEMENT OF RELIGIOUS LEADERS AND FAITH-BASED COMMUNITIES IN ADDRESSING GBV AND HIV/AIDS IN AFRICA.

Christian leaders are influential figures in churches and communities in many African contexts. They exercise an enormity of influence in their communities which provides them with ample opportunity to stem the tide on GBV and mitigate the spread of HIV/AIDS. They are divinely saddled with the responsibility of providing hope, care, and support for persons that have been victims of GBV and HIV/AIDS. While women who are more inclined to visit churches than men, the authority of religious leaders extends beyond the church, which makes them important agents of change in their respective societies.²²

Christian leaders have the responsibility of making concerted efforts towards exemplifying the theology of love, compassion, and mercy. They are meant to be God's representatives and as such, they need to preach God's message of love and compassion for all, in the knowledge that every single person, male and female, is made in God's image²³ and should be treated with dignity and respect. In the past, theological attitudes toward HIV/AIDS focused on it as punishment for sin. This theology has now changed to one of love, compassion, and non-judgmentally. However, faith-based communities still need to become more involved than they have been in the past, particularly in addressing GBV and HIV, given the increasing plight of victims of both scourges.²⁴

Christian leaders are in a good position to address GBV because of their designated roles in their communities as campaigners of change and social transformation. It is upheld by some persons that leaders need to revisit liberation theologies: The Christian response and responsibility to helping the poor and oppressed in society. This theology calls upon faith communities to focus on Jesus as the liberator of the oppressed and includes a Christian mission to bring justice to the poor and oppressed. Additionally, it has been pointed out that their positions as religious leaders enable them to work with stakeholders from all parts of the community.²⁵ Hence, the need for them to increase engagement and commitment to addressing GBV and HIV issues in their environs is sacrosanct.

More importantly, another rationale lies in the need to address sensitive issues in contemporary situations as a body of Christ, serving oversight function in respective communities. Bartelink and Maniema opined that in order to bridge the gaps between how sensitive issues such as GBV, sexuality and HIV/AIDS are addressed within missionary/church contexts, some organisations have developed methods to engage Christian leaders in speaking about these issues more constantly and purposefully within their ministries. Initially HIV/AIDS was a key concern and was often chosen as a lens to address issues of sexuality, gender and broader human rights. Drawing on general Christian principles that underline grace rather than judgement, they engage Christian leaders and churches in becoming more inclusive. This is among other roles played to engage religious leaders on topics related to sexuality, gender and HIV/AIDS, and providing them with the information and materials they need to address these issues within their own congregations.²⁶

When Christian leaders are progressively enlightened on subject such HIV/AIDS, gender based violence and sexuality; they are given guidebooks that can help them discuss these issues within their respective congregations. In these guidebooks, frequent references would be made to the Bible to support

²¹ Herstad, p.9.

²² Brenda Bartelink, and Erik Maniema. A Mapping on Sexuality, Human Rights and the Role of Religious Leaders: Exploring the Potential for Dialogue Knowledge. Centre Religion and Development, July 2014, p.26.

²³ Herstad, p.20.

²⁴ Ibid

²⁵ Ibid, p. 20

²⁶ Bartelink, and Maniema,2014, p. 12.

the inclusion of people who are living with HIV/AIDS. Christian leaders and members of faith based organisations are key change agents when working on issues of social justice and community transformation.²⁸

As Rooyen cited by Bartelink, and Maniema explained that “particularly in Africa and sub Saharan Africa, people have a much stronger link to faith communities, and have a very strong trust relationship with their faith communities. We believe that it would be impossible to bring social change and social transformation without, without the full involvement of faith communities.”²⁹

CHRISTIAN EDUCATION STRATEGIES OF RELIGIOUS LEADERS AND COMMUNITIES

Bridging the gap and providing ample support for victims of GBV and HIV/AIDS is critical for preventing the scourge of HIV particularly in African societies. Since there is strong evidence linking GBV with other forms of gender inequity in relationships to HIV vulnerability, and upon the rationale for the involvement of Christian leaders and communities in addressing the epidemics, it is necessary to outline some roles of religious leaders and communities, enthused by Christian education and theology. Recognising the importance of collaborating and networking to prevent and reduce GBV and HIV among women and girls, the strategies stimulated by Christian education and theology urges for the development of the capacity of religious leaders and faith-based organisations (FBOs) to respond to GBV and its links to HIV.³⁰

Christian education has been described to as education “which is Bible Based, Christ-centred, Holy Spirit controlled, pupil related, socially applied with the Scriptures being the authority in all things.”³¹ The dimension of being socially applied is vital in the emphasis of Christian education strategies and actions in this paper. Christian education is not socially centred, but it is socially applied. GBV and HIV/AIDS are part of contemporary social problems which are to be interpreted in the light of the Bible. Christian education applies biblical principles to Christians’ social relationships so that they will live as Christ expects in the world.

These strategies and action plans for raising awareness, campaigning against and providing support and care to victims of GBV and HIV/AIDS are presented as follows:

Sensitisation and Awareness

Sensitization could be done through a number of community awareness (outreach, and mobilization) and community-based approaches including local involvement (such as quick chats, dramas, community conversations, and community action groups), media and advocacy; communication materials and training can be organized in programmes to transform gender relations and responses. Working with men and boys as well as women and girls ensures that GBV (among other harmful expressions of gendered power imbalances) is seen as a societal issue with negative consequences for men as well as women and not just as a women’s issue only. It promotes the examination of the root causes of violence, and creates an opportunity to address attitudes and behaviours that lead to violence, such as negative or risky notions of masculinity.³²

²⁸ Ibid.

²⁹ Bartelink, and Maniema, p. 12 citing Rooyen, Lyn van. Impact Report. Analysis of Impact based on reports of Trained Churches of Channels of Hope Facilitator Activities in their Local Communities (CABSA), 2014.

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³¹ E. Watke, Jr. What is a Christian Education? Revival in the Home Ministries, Inc., 1998,16. http://www.Stclementsedu/grad/ gradoyem.pdf_br . Accessed June 1, 2017.

³² Herstad, p.11.

The following are aspects of promising community awareness and mobilization programme practices that have been effective in changing gender norms:³³

- a. Use of affirmative messages showing that change is possible and what is needed to make change is available. Messages that engage individuals at a personal level first and context-specific. For example, a continuing radio programmes or jingles working to promote social change, positive attitudinal changes related to male and female gender roles and sexual violence could be achieved as individuals listens to such messages.
- b. Inclusion of those who have influence and/or power in communities, including people of good faith and good will, celebrities, Christian leaders, and sports figures who already made desired attitudinal and behaviour changes.
- c. Conducting campaigns that feature multiple programme-related components including a human rights framework; extensive use of mass media; face-to-face education including group and peer education; empowering women and youth; and changing gender norms.
- d. Organising youth leadership training and capacity building programmes that promote skills and alliance building across different groups.
- e. Participation in and strategic coordination of national and local youth groups and alliances to realize the importance of the role played by youths in creating awareness and sensitizing communities; particularly, based on the impact they have on their peers, youths should be involved in the organization of programmes to combat GBV and cushion the spread of HIV/AIDS in their communities.
- f. Increased collective efficacy i.e. increasing the confidence that friends, family, and immediate community can organize and take action relating to domestic violence and HIV.³⁴
- g. Face-to-face and small group (peer group) education. Key elements of peer education
- h. Integrates with other interventions, including services that will be needed (i.e., for condoms, counselling and testing, and other health services).³⁵
Facilitating behavioural change through collaborations with NGOs and engagement by participants in community action teams which are significant aspects of supporting and sustaining individual change in knowledge, attitudes, and behaviours.³⁶

Challenging and Encouraging Christian Leaders to Preach against GBV and HIV Associated Issues.

Christian leaders as the guardians of the Bible are best placed to guide and influence their communities. They should preach and teach sound biblical messages as well as be exposed to education and awareness in respect of GBV and the issues associated with HIV/AIDS in communities such that their sermons will be well pointed to fit in the context. Moreover, they should educate their congregations by using their Bible texts to promote awareness and knowledge of GBV and the role that both Christian leaders and the community can play in eradicating GBV. Through sermons they could address stigma, denial, and discrimination against people affected and infected with HIV/AIDS. Furthermore, Christian leaders are ideally placed to bring hope to the survivors of GBV. They should promote responsible behaviours that respect the dignity of all persons and defend the sanctity of life. They could provide continual spiritual and

³³ G. Barker, C. Ricardo, and M. Nascimento. *Engaging Men and Boys in Changing Gender Based Inequity in Health: Evidence from Programme Interventions* (Geneva: World Health Organization, Promundo, 2007).

³⁴ Irela Solorzano. *Catalyzing Personal and Social Change around Gender, Sexuality and HIV: Impact Evaluation of Puntos De Encuentro's Communication Strategy in Nicaragua* (Washington DC: Population Council, 2008).

³⁵ Population Council. *Peer Education and HIV/ AIDS: Past Experience, Future Directions* (New York: The Population Council, 1999). www.popcouncil.org/pdfs/peer_ed.pdf .Accessed July 1, 2017.

³⁶ D. Peacock and A. Levack. "The Men as Partners Program in South Africa: Reaching Men to End Gender-Based Violence and Promote Sexual and Reproductive Health." *International Journal of Men's Health*, 2004, 3(3):176.

psychosocial support to individuals, families, and/or communities in need through sermons, community sensitization programmes and household visits.³⁷

Christian Leaders Talking about Sexuality in Christian Contexts

While unlawful sex as sin has been repeatedly discussed in churches, sexuality is often not an issue openly discussed by Christian leaders; it has not been in the pulpit. The church still remains silent and considers it as a taboo. 90% of infections have emerged from sexuality related issues; yet, the church is still silent about it. Many leaders feel that if they discuss sexuality openly, they will indirectly support loose sexual morals and weaken Christian principles they should uphold.³⁸ Bartelink and Maniema corroborated that notion by positing that Christian leaders often feel compulsorily obliged to protect their faith, ethical values and what they believe God is calling them to do. As it relates to sexuality, that is often one of the hardest areas to touch on.³⁹

Holistic Approaches: Touching Mind, Heart and Soul

A holistic approach is recommended when talking about sexuality and gender. This implies that in conversations on sexuality and gender, ample 'space' should be created to explore Christian values and other values, as well as perspectives from public health, human rights and other discourses⁴⁰

Diversity, Flexibility and Pragmatism

An enormous diversity exists within African Christian contexts as well as closely related to other contextual factors such as an urban or rural setting, class, ethnicity and economic status. It is the issue of something existing as a 'faith-based sector' which underlines the importance of a clear focus on which Christian leaders want to engage with and for what purposes. This diversity can also be strength when engaging with leaders across different denominations, countries and backgrounds. Channels of Hope, for example invites Christian leaders with various viewpoints to engage in debates on certain aspects of sexuality. Leaders are given tough statements that often create a massive debate, and take on their own theologies and the discourses of their specific council or denomination. This situation encourages high levels of diversity, flexibility and pragmatism in ideas, philosophies, doctrines, and interactions.⁴¹

Education of Women about their Rights and their Religion

Education of women and girls on the necessity to place premium on their rights and what the Bible teaches is vital in addressing GBV and HIV/AIDS. It is not enough for Christian leaders and communities to condemn the evils of GBV and HIV/AIDS, but they need to work to enhance the status of women by clearly teaching that women and girls are people with dignity, their lives and bodies are precious and are not sex objects but they are human also beings created in God's image as their male counterparts are. Consequently, they should neither be violated nor abused.⁴² Also, women should be trained so that they can assist in GBV and HIV/AIDS-related activities and consultations. They should be encouraged to form alliances, support and social groups, raise awareness on GBV issues working in partnership with local authorities, community healthcare givers, teachers, and caretakers within households and other women networks that alleviate the plight of women in GBV and HIV/AIDS.

³⁷ Ibid.

³⁸ Ibid.

³⁹ Bartelink, and Maniema, p.28.

⁴⁰ Ibid., p.45.

⁴¹ Ibid., p.46.

⁴² Sunday Layi Oladipupo, Celestina O. Isiramen, Friday J. Imuekhat and Benson O. Igboin (eds). "Child Trafficking and National Development" In *Religion and the Nigerian Nation. Some Topical Issues*. Ibadan: En-Joy Press & Books, 2010, p, 290.

Mounting Advocacy Campaigns

Advocacy and media campaigns could be launched to ensure more skills and sensitivity in the standard of media coverage on GBV and to undertake urging all media outfits to assist in an education campaign on GBV and its link to HIV/AIDS. The campaign may use Mass and print mediums, including television, radio, dramas, talk shows, text messaging, social networking, etc. Additionally, building partnerships with other religious organizations, NGOs, private sectors, and government agencies to advocate against GBV are all part of strategies to mount advocacy campaigns.⁴³

Counselling, Support and Care for Victims

Christian leaders and communities could initiate counselling sessions for victims and engage in referral networks required for survivors' long-term needs to be met. This involves programmes to revitalize community and family life as well as values. Setting up support groups and putting systems in place for the survivors and their children. Safe houses could also be set up in communities to cater for their immediate protection and care need. Focusing on the particular areas of vulnerability of women and girls being infected with HIV and providing them with special protection is also part of strategies to reach out to victims.⁴⁴

Collaborating with Traditional or Community Leaders

Involvement of traditional or community leaders in gender transformation of African societies is apt. They could be involved on how to address Gender-Based Violence, promote gender equality and reduce HIV/AIDS in their communities. Support of traditional leadership in engaging men and women in taking action in their own homes and communities to end domestic and sexual violence, change their perception of masculinity and address HIV and other health-related issues is workable. This approach has been recognised by various African governments such as in Lesotho, Swaziland, Botswana, Ghana, Zambia, Malawi, South Africa, Zimbabwe and Nigeria, who recognize traditional, or community leadership structures and religious groups as key elements in implementing partners in their national strategic plans to fight HIV/AIDS.⁴⁵

Integrating GBV and HIV/AIDS as part of the Curricula of Theological Education. Theological Education

Theological institutions such as Seminaries, Bible Colleges, and other institutes of spiritual and ministerial formation, saddled with the responsibility of training God-called men for church and FBOs leadership could consider it germane to integrate GBV and HIV/AIDS as part of their curricula for theological education. Such integration should emphasize on the advocacy role of religious leaders and the role of the church to provide support, care and love to victims of GBV and HIV/AIDS. It should also guide pastors on why and how they should address the issues through specific activities and approaches. Secular organizations working on GBV and HIV also can use this guide to find examples of how to collaborate with religious leaders, communities, and institutions.⁴⁶

CONCLUSION

This paper has set forth a profound background for Christian leaders and communities to engage respective societies on issues surrounding Gender Based Violence and HIV/AIDS. The truth remains that

⁴³ Herstad, 22.

⁴⁴ USAID. Addressing Gender- Based Violence through USAID's Programs: A Guide for Health Sectors Program Officers. Washington, D.C July, 2006, p. 15.

⁴⁵ Herstad, p.23.

⁴⁶ Stigma Reduction Initiative. Selected Resources for Faith Leaders Responding to HIV-Related Stigma and Discrimination. Africa, Asia & Latin America, March, 2013.

while it may be tasking to totally eradicate peculiar occurrences of the concerns of this paper (GBV and HIV/AIDS); it is necessary to raise the bar for human relationships and conducts especially as it affects the female gender. Women and girls are not tools to work with or objects to be discarded once they express the weakness of their humanity. They are treasures, God's image, helpmeets, leaders, partners, mothers, sisters and friends who must be taken care of, include in daily life activities, and given opportunities to express their diversity and capabilities.

In the same vein, if cases of Gender Based Violence and HIV/AIDS epidemics must be drastically reduced in the world, Christian leaders and communities must intentionally and strategically engage the earth's community in every possible way to stem the tide. As partners with God in His redemptive-love agenda for the world, Christian leaders and communities must continually reiterate the sanctity, dignity and frailty of human life, they should educate the world on God's expectation from man to man - no one should be considered as insignificant and victimized on any bases.

More intently, theological education must include deliberate and pragmatic strategies to equip leaders of Christian communities with viable skills and knowledge that are relevant in reducing the incidence of GBV and the stigmatization as well as vulnerability of persons with HIV/AIDS. Only then can the campaign against GBV and eradication of stigmatization experiences of people living with HIV/AIDS be declared successful as well as the transformation of societies attainable.

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