Gender justice, ministry and healing

A Christian response to the HIV pandemic

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One pastor in Zimbabwe, for example, told us: “I expect my wife to bow down before me as I bow down before Christ.”… In Burkina Faso … one woman’s comment sums up: “Our husbands treat us like beasts and animals. They come in, have sex and leave.” (Marshall and Taylor 2006, p369)

Introduction: fundamental problems of patriarchy and sexism

This title in Progressio’s Comment series on HIV seeks to contribute towards a holistic and community-centred ministry and theology in halting HIV infections and eradicating the global HIV pandemic.1 Ongoing in-depth research and documentation have demonstrated that injustices emanating from gender inequality and sexism are central drivers of the pandemic, especially among women and young people (aged 15-24) in Africa.2 During the last four decades, gender discourse has taken centre stage in the areas of development and human rights, and to a lesser extent in secular education systems, with a focus on women’s and girl-child empowerment and calls for them to be treated with dignity and receive justice.

Regrettably, a focus on empowering women and girls has been understood by some people to mean that gender discourse refers only to women’s issues, rather than to human issues and to the underlying oppressive structures and systems that fuel power imbalances between women and men. Reductionist ways of understanding gender inequality demonstrate either naivety or a deep-seated ignorance of the oppressive and dehumanising nature of patriarchy and sexism in our families, societies and religious communities. It is of great importance that when we engage in gender discourse in theology, in the search for recognition, reconciliation, healing, justice and fullness of life, that we confront the fundamental problems of patriarchy and sexism in the face of the pandemic. We are not just dealing with a virus and a medical condition. The impact of the HIV pandemic goes beyond this, affecting developmental and human rights issues. Essentially we are confronted by deep broken relationships and by many social injustices at different levels and contexts. In effect, we are confronted by massive spiritual, ethical, pastoral and theological challenges, which have deep implications for the church of Christ. As Christians, the pandemic comes to us as a wake-up call and as some have clearly outlined, this is a kairos moment.3

Certainly, committed Christians around the world are struggling to move Christian communities – in particular churches, ecumenical and theological institutions – to dismantle patriarchy and sexism by mainstreaming gender discourse and justice in all theological disciplines and church ministries.
The pace, though, has been painfully slow. We still have a very long way to go, as some of our theological discourse and practices, especially in public worship spaces, reinforce discrimination against women and other marginalised groups, including people with disabilities. For instance, one of the most contested areas is how to exercise justice for both women and men in ecclesiastical leadership. Another difficult aspect in theological and ethical discourse in Christian communities, which is directly related to the HIV pandemic, is the lack of decision-making power on sexual and family matters among women and girls. The scientific evidence that HIV is spread through bodily fluids – blood, semen, vaginal mucus and amniotic fluids – in itself means that no response to HIV prevention will succeed until we critically address our understanding of sexuality and decision-making power on sexual and family matters. Moreover, the pandemic reveals the complex and dynamic nature of human relationships and our relationship with our Creator.

Twenty-seven years of the pandemic have revealed that gender justice, life-giving theologies and effective leadership are at the heart of HIV prevention, healing and fullness of life. Effective prevention therefore is composed of many facets and is complex. This paper will focus on a ministry that is helping African Christian women to provide effective leadership (including ecclesiastical leadership) in creating theological discourse that affirms gender justice in the process of HIV prevention and healing. It will highlight that instead of reinventing the wheel, we should build on those ministries already in place, to develop an international and ecumenical advocacy ministry that is holistic and community-centred.

**Healing, justice and life-giving reading ministry**

This paper draws primarily on the author’s experiences and perspectives as an African Christian woman, whose faith has been essentially shaped by an African worldview and context, from a Protestant Christian tradition in a global ecumenical encounter. It aims to describe the ministry undertaken by African theologians, particularly women, that of ‘healing, justice and life-giving reading ministry’ of the Bible, African indigenous religion, and culture and context.

Let us first briefly reflect on ‘what is gender?’:

Historically, gender roles – the socially constructed roles of women and men – have been ordered hierarchically, with men exercising power and control over women. Male dominance and female subordination have both ideological and material bases. Patriarchy has been entrenched in social, religious and
cultural norms, institutionalised in the law and political structures and embedded in local and global economies. It has been ingrained in formal ideologies and in public discourse. Patriarchy restricts women’s choices but does not render women powerless, as evidenced by the existence of women’s movements and successful claims by women for their rights. (UN Secretary General, 2006, p28, point 70, this author’s emphasis)

Consequently, it is right to say that the subordination of women is one common thread that runs through many religious communities, in the Bible, in African religion and culture, and in most of the world’s cultures and religions.7 It is equally right to say that from a Christian perspective many women do not accept that patriarchy and other dehumanising structures render them powerless and less than equal as human beings. Men and women are created in the image and likeness of God (Genesis 1:26-27). If women did indeed believe they were powerless, they would not struggle as hard as they do to resist and denounce gender inequalities and injustice. As a result many Christian women have resolved to reject victimhood, reclaim their God-given birthright and dignity, and be fully engaged in God’s mission. Hence, some African women theologians and religious scholars have chosen to focus their energies constructively and creatively by identifying a ministry8 that brings reconciliation, healing, justice, peace and fullness of life. As Christian women, we take our example from Jesus, and try his ways of ‘breaking all the rules’ that dehumanise people and fuel death. As LaVerne M Gill points out:

The position of women today is not to dwell on the past but to prepare to walk through the doors when God opens them and to know that our ministry is not confined by geography, culture, denomination, or ambitions, but by the call of God in our lives. (Gill 2006, p36)

In response to the call of God in the face of the HIV pandemic, African women are engaging in a ministry of Bible reading which enables them to confront patriarchy, sexism, gender inequality and many other injustices in any given setting.9 For instance, the gospel narrative of the bleeding woman and Jairus’ daughter (Mark 5: 21-43)10 has helped African women to reclaim their power and dignity as they join Jesus in breaking the rules about cleanliness, public encounters with women, and death. Despite the distance in time, we are able, in this gospel narrative, to engage critically with the life situation of the woman and the girl and all those involved. We are able to unearth the social structures and institutions mentioned in the narrative
such as family, health sector, economic system and the nature of leadership provided by Jesus and other characters. Above all, this narrative has facilitated in-depth theological discourse on our own life situation, as women afflicted by many illnesses and broken relationships.

This ministry of reading has been extremely helpful to Christian women living with HIV and those personally affected, such as care givers and financial providers. It has given a voice for sharing personal stories as well as speaking out on some of the recommended HIV prevention methodologies. For example, married women who are HIV-positive have shown how ABC (abstain, be faithful or use a condom) does not work in patriarchal family structures that promote the man – even when he is an absent father – as the head of the home and the breadwinner. Patriarchy and sexism prevent women from having a say in sexual decision-making in personal relationships, as well as in decision-making in the public arenas of church and politics. ABC has also been found to be grossly inadequate in the way that it does not deal critically with other social injustices such as structural violence (socio-economic and political structures that produce social injustice) and gender-based violence in Christian communities and in society. It tends to give short term solutions for just a few people in a society. It also has an individualistic approach to a pandemic that requires long term holistic and community-centred ministry. Musa W Dube, a leading African biblical theologian who contributes to HIV theological discourse, writes:

To be effective, an HIV and AIDS prevention strategy has to promote both short term and long term goals. The short term strategy tends to promote abstinence, condoms, faithfulness (so-called ‘ABC’) and care giving, despite its limitedness. On the other hand, the long term strategic focus on addressing poverty, gender inequality, civil and spousal violence, child abuse, racism, ethnic and sexual discrimination, national corruption, and international injustice more often than not makes the ABC strategy ineffective. The realisation that HIV and AIDS are social justice issues that pervade all aspects of life has promoted a multi-sectoral strategy – an approach that challenges all departments, disciplines, and sectors to struggle with how they can become part of promoting prevention of HIV and AIDS and give quality care to the infected and affected, to be part of breaking the silence and stigma, and to address the social injustice that drives the epidemic. (Dube 2006, p132-133)
In contrast, this ‘reading ministry’ has made it possible for women theologians to engage male theologians and religious leaders, and enable them, too, to find themselves in the narrative. Simply put, the ministry has many advantages because it is holistic and community-centred with regard to the social and ecclesiastical issues confronting us all as women and men, beyond gender, stigma, discrimination and condoms. The ministry of these women helps to:

- Identify and deal with other social, political, legal and economic factors that complicate the search for gender justice and fullness of life.
- More deeply scrutinise different religio-cultural settings (cultural hermeneutics) that impact on our lives, eg biblical cultures, African cultures and elements of imposed colonial cultures, westernisation and globalisation.
- Provide a prophetic voice to resist and reject social and ecclesiastical injustices and to announce that neither HIV nor death have the last word.
- Identify a theology of lament to accompany a seeking for healing, hope and fullness of life as caregivers and financial providers for people who are deeply affected by HIV.
- Advocate for justice and empowerment of girls, with a clear mandate from Jesus, who called to life Jairus’ daughter and demanded that she have food to empower her to embrace the gift of life.
- Enable an exploration of other biblical narratives to demonstrate that indeed God calls both women and men into leadership at various levels of ecclesiastical responsibility, if necessary opposing what is proclaimed by male dominated leadership.
- Provide effective and collaborative leadership that leads to changed lives and changed communities.
- Demonstrate that the public worship space can be transformed to educate Christians in how to become part of the solution, through liberating sermons, prayers, songs and liturgy.
- Give courage and boldness to introduce gender discourse and HIV curricula in theological institutions and Theological Education by Extension Programmes, even when male dominated leadership may present obstacles to these efforts.
- Allow participants to cultivate honesty, respect and safe spaces where women and men can confront difficult issues of sexuality, including homosexuality, masculinity, sexual violence (including marital rape), being HIV-positive, stigma and discrimination. These are all issues which many Christian communities have found difficult to address. This is done for instance through contextual Bible studies on sexual violence texts or the ‘texts of terror’, such as Genesis 19, 34; Judges 19;
Esther 1 and 2; 2 Samuel 11, 12, and 13.

- Provide well-researched theological works that have been used globally, even if some wonder if anything good can come out of a continent ‘hopelessly’ ravaged by the HIV pandemic and other pandemics of war, hunger, violence and extreme poverty.
- Provide critical ecumenical and inter-faith spaces without fear where people can face differences, and channel God-given skills, talents and gifts to create communities of equals.

In conclusion, the words of LaVerne M Gill provide inspiration for developing a healing, justice and life-giving ministry:

As women doing theology and ministry, we cannot just sit back and accept that biblical writing is tainted by patriarchal cultures whose writers depict women as harlots, prostitutes, or adulteresses. If we believe that the Bible is divinely inspired, we must also believe that the presence of women – God’s good creation – is important to the story of redemption and salvation. Consequently, we must search deeper to discern the role that these women play in scripture and to use these interpretations to give a relevant ethos to our ministry. (Gill 2006, p39)

Let’s not reinvent the wheel

Compared to the long history of theological discourse that is based on patriarchal, sexist, racist and colonised mindsets in Africa, the reading ministry described above is only in its infancy. However, there exists already a strong foundation for a holistic and community-centred ministry of HIV prevention, care and healing, especially with regard to issues such as gender, stigma and discrimination, and condoms. Hence there is no need to reinvent the wheel. Rather, there is perhaps a need to take a deep breath, listen carefully and heed in preparation for encountering one another, all bringing a wide diversity of experiences and perspectives of the pandemic. The advocacy work of Progressio and others that seek to influence leading Catholic and ecumenical leaders in the global North may also benefit from this healing, justice and life-giving ministry. Obviously, many theologians from other continents in the global South have made their own contributions. However, perhaps because Africa has been the most affected continent, we find a wealth of theological literature, though there is still a long and difficult way ahead. There are also those from the global North who have reached out and become part of the solution in Africa. A few examples are in order.
In 2003 Kari A Hartwig, assistant clinical professor at Yale University, USA, conducted a field research study at Mwangaza Teachers’ Resource Centre, affiliated with the Evangelical Lutheran Church in Tanzania. The study included seven men and eight women from their early 30s to mid 50s in age. All were grassroots church leaders without senior leadership positions. The men were pastors and evangelists and the women were leaders of women’s groups and parish workers who taught Bible studies to young people. A portion of her findings is very perceptive:

Men’s social roles in ‘community politics’ and their higher status of pastors and evangelists compared to the women’s roles as women’s group and Bible study leaders suggests that they had a greater sense of authority and responsibility in speaking out on the issues of AIDS, sexuality and gender both publicly and privately, while women generally spoke only in the private sphere with other women.

These gender role distinctions also came into evidence during participatory strategic planning exercises with the church leaders planning future actions and identifying areas of change. Working in small groups and then reconfirming results in the larger group, participants were asked to identify obstacles to HIV prevention in the home, church, school, the village and cities... The obstacles identified in the home to HIV prevention were notable for identifying the low status of women, the influence of traditional and community norms that influenced women’s vulnerabilities, such as wife inheritance, and limited couples’ communication on sex or sexuality between one another and in teaching their children. (Hartwig 2006, p33-34)15

In conclusion, says Hartwig, the study helped these leaders to understand how gender inequalities diminish women’s influence in community politics – including the church – as well as emphasising the critical need to strengthen their theological and biblical interpretations in the face of the pandemic. This micro-study in the heart of Africa illustrates how more theological discourse on leadership, and in particular ecclesial leadership, for both women and men, could be advanced where Christian communities are serious in undertaking a holistic and community-centred HIV ministry.

A more elaborate piece of desk and field research has been carried out among local evangelical churches in Burkina Faso, Zimbabwe and South Africa, by Tearfund, a UK-based non-governmental organisation. In Africa, the Bible plays a central place in Christian communities, despite the fact
that most of those called to interpret the scriptures (especially women) may have never studied theology. Therefore it is not surprising that the Tearfund study has this to report:

In the rural communities that we visited, a common pattern emerged of wives being submissive to their husbands, and the men taking biblical texts out of context in order to back up their opinions and justify the way they treated their wives. In this case, believing strongly in their own interpretation of the text, the men genuinely believed they were right. One pastor in Zimbabwe, for example, told us, “I expect my wife to bow down before me as I bow down before Christ.” When asked how he reconciled this with a preceding passage in the Bible, which states that all Christians should “submit to one another” (Ephesians 5:21) and that husbands are called to love their wives “as Christ loved the church and gave himself up for her” (Ephesians 5:25), he replied, “We find that difficult.” In Burkina Faso we found this approach of selective interpretation of the Bible had dire consequences for relationships, when they were in fact using and abusing their wives. Women, on the other hand, felt very differently, as one woman’s comment sums up: “Our husbands treat us like beasts and animals. They come in, have sex and leave.” (Marshall and Taylor 2006, p369)

This provides evidence of how deep rooted problems of gender are and how difficult they are to address. Christian communities must first and foremost acknowledge how grave the situation is because, long before HIV, theological and biblical interpretations regarding the humanity of women have been a major problem. We must pause and consider how God intended relationships between women and men to be when He created them. How do we as Christians allow God to be God when we have such very strong views of our own about our place in the order of creation? How do we develop our theology to address issues of leadership of women in the public arena in worship, in decision-making boardrooms in the local church, or even in global ecumenical bodies? The previous two studies of Christian communities reach the same conclusion: namely, that unequal power relations between women and men, irrespective of social status, are proving to be a fundamental problem and a major driving force of the HIV pandemic.

A final example highlights the World Council of Churches Ecumenical HIV and AIDS Initiative in Africa (WCC/EHAIA) which began in 2002 and
is now working in 45 countries across sub-Saharan Africa. In the process of launching a plan of action for EHAIA, more than 100 church leaders from Africa and the global North acknowledged that:

As the pandemic has unfolded, *it has exposed fault lines that reach to the heart of our theology, our ethics, our liturgy and our practice of ministry.* Today, churches are being obliged to acknowledge that we have – however unwittingly – contributed both actively and passively to the spread of the virus. Our difficulty in addressing issues of sex and sexuality has often made it painful for us to engage, in any honest and realistic way, with issues of sex education and HIV prevention. Our tendency to exclude others, our interpretation of the scriptures and our theology of sin have all combined to promote the stigmatisation, exclusion and suffering of people with HIV or AIDS. This has undermined the effectiveness of care, education and prevention efforts and inflicted additional suffering on those already affected by HIV. Given the extreme urgency of the situation, and the conviction that the churches do have a distinctive role to play in the response to the epidemic, what is needed is a rethinking of our mission, and the transformation of our [ecclesial] structures and ways of working. This Plan does not call for uniformity. Africa is the home of many realities, and what works in one place may not work in another. What it does attempt to achieve is a new and realistic initiative which will make it possible for church leaders and their congregations to speak honestly about HIV and AIDS, and to act practically in response to it. (WCC Plan of action 2001, p4, this author’s emphasis)

As a result, one of the major contributions of EHAIA has been to facilitate and coordinate the production of theological literature and curriculum material on HIV and AIDS, in order to enable theological institutions and churches to mainstream issues related to the pandemic in the churches’ teaching and preaching ministries. This has meant identifying a community of theological educators and religious scholars to contribute their writing, research and teaching skills despite resource limitations. This initiative provides a powerful basis for a holistic and community-centred ministry to HIV prevention and care as well as spiritual well-being. EHAIA does not limit itself to membership of the WCC but attempts to reach out to all Christian communities in Africa including Roman Catholics, Pentecostals, Evangelicals, Salvation Army, Seventh Day Adventists and
African Instituted Churches. It is also open to work with people of other faiths as only half of the African population is Christian. Other religions that have a strong following and impact in Africa are African indigenous religions and Islam. Being a WCC ministry, EHAIA has global connectivity and dynamism. EHAIA’s vision is clear:

The ecumenical family envisions a transformed and life-giving church, embodying and thus proclaiming the abundant life to which we are called, and capable of meeting the many challenges presented by the epidemic. (WCC Plan of action 2001, p6)

EHAIA is a ministry that invites people of faith to a new journey in God’s mission as we face broken relationships that have been so strikingly revealed by the pandemic. EHAIA is a ministry with the churches and Christians in Africa and people of other faiths. It is an ambitious undertaking. HIV has caused such “monumental human suffering and anguish”17 that we must all do our best to see in this a kairos moment – “a moment of special grace”18 – and respond to that grace. We dare not proclaim a compassionate and loving God if we have no answers for the women of Zimbabwe and Burkina Faso who are instructed to treat their husbands as they would treat Christ, yet in return, are dehumanised by their husbands. So much has been researched, documented and published on the major problems emanating from patriarchy, sexism, gender inequalities and other global social injustices with regard to HIV. What is called of us now is an honest and true respect for one another, and to do God’s will by nurturing life in its abundance (John 10:10).

EHAIA has committed to address gender-related issues:
- We will challenge within our churches and church institutions those traditional gender roles and power relations which have contributed to the disempowerment of women, and consequently to the spread of HIV and AIDS.
- We will combat sexual violence, abuse and rape in homes, communities, schools and conflict and war situations.
- We will address family gender roles and relations that contribute to the vulnerability of women and girls to HIV infection.
- We will support organisations that help empower young women to negotiate for safer sexual relationships. (WCC Plan of action, p11)
Conclusion

The HIV pandemic has revealed the ugliest side of our deep broken relationships and severe social injustices, and in particular gender injustice. On the other hand, it has also revealed the great resilience, courage, determination and effective leadership of those most affected, those who are HIV-positive, especially women, who are most often denied a place at the ecclesial decision-making table. Many Christian HIV initiatives have been launched and manuals and resource toolkits written, and workshops providing training in addressing the pandemic are offered in many places. Christians are obligated to continue efforts in exposing and eradicating gender injustice as a central driver of HIV transmission. We can build further on the foundation that has already been laid by ecumenical and theological responses to the HIV pandemic. The journey is shorter together. We must work together, creatively and with patient endurance, so that we may bear fruits worthy of our Christian faith.

Notes

1 See also the author’s other contribution on the same topic in ‘Resisting gender inequality and injustice in the name of Jesus’ in D’Sa, F and Lohmayer, J (eds) (2007) Heil und Befreiung in Afrika, Echter Verlag GmbH, Wurzburg, pp54-73.


4 Eg widowhood rituals that require ‘sexual cleansing’ of widows by a male stranger before burial of their husband, after which and without her consent a widow is ‘inherited’ by a male relative of her dead husband. Another example is arranged marriages for girls as young as 12 and 13 years, without even a basic understanding of sexuality and motherhood.

5 The author is greatly indebted to the small but significant community of African theologians and religious scholars (mostly women) who for the past 20 years have researched and written on African culture and religion, Christianity, theology, the church and gender in an attempt to nurture healthy communities of faith, beginning with the family, institutions, churches and theological bodies. Equal thanks also to the resources provided by a wide variety of human rights organisations, and those resulting from the United Nations Conference on Women, Beijing, 1995. The International Women’s Summit on HIV and AIDS, held in July 2007 in Nairobi and attended by 2,000 women, including 500 HIV-positive women, also provided great inspiration and hope. It was the first international conference on HIV organised by and for women, and was co-hosted by the World Young Women’s Christian Association (YWCA) and the International Community of Women living with HIV and AIDS. For further details see www.worldywca.org/World-Council-IWS/Press-Release/media-advisory-009.2007 accessed 16 June 2009.

7 See Messer, D E (2004) Breaking the conspiracy of silence: Christian churches and the global AIDS crisis, Fortress Press, Minneapolis, especially chapter 5, where the author discusses the ways that Christianity and other faiths contribute towards oppressive beliefs and practices in patriarchal societies.

8 The word ‘ministry’ here is intended to refer to the work and commitment of socially engaged African women theologians and scholars who address social injustice (particularly economic and gender injustice and the devastating impact of HIV) from women’s faith and lived experiences and women’s perspectives: the Circle of Concerned African Women Theologians. www.thecirclecawt.org/profile.html accessed 16 June 2009.

9 It is of note that increasing numbers of African female and male theologians and ordained pastors, ministers, priests and bishops (ecclesiastical leaders) are addressing social questions raised by HIV.

10 All scripture references and quotations are from the New Revised Standard Version (National Council of Churches, USA, 1989).

11 A good example is the leadership provided by the YWCA that has focused on the theme of power to change lives and communities. For further details see www.worldywca.org accessed 16 June 2009.


15 Hartwig’s findings concur with the studies carried out by African women theologians and religious scholars discussed here.

16 Since the production of theological books is very expensive and uncommon in Africa, all books on HIV and AIDS published by the World Council of Churches are provided free.


18 Kelly, M J, SJ, as above.

19 For example, the 500 HIV-positive women present at the International Women’s Summit on HIV and AIDS in Nairobi, July 2007. These women have provided significant leadership in the struggle against HIV, particularly in confronting stigma and discrimination and highlighting attention to links between HIV, gender inequality and gender-based violence. For further details see note 5 and www.worldywca.org accessed 16 June 2009.
Selected Bibliography


