

TITLE:

Attitudes to sexual coercion and rape within the Anglican Church, Cape Town: A cross sectional survey

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“Declaration

I, the undersigned, hereby declare that the work contained in this assignment is my original work and that I have not previously submitted it, in its entirety or in part, at any university for a degree.

Signature: Date:”

Abstract.

Introduction: In South Africa 5.6-5.9 million people are currently living with HIV/AIDS, making South Africa the country in the world with the largest number of people living with HIV/AIDS. Despite numerous government measures to curb the pandemic, the prevalence and deaths due to HIV/AIDS have continued to rise to unacceptable levels.

South Africa is reported to have one of the highest rates of sexual violence in the world and has the worst known figures for gender-based violence for a country not at war. Violence and coercive practices have been found to dominate sexual relationships in South Africa. Male dominance in sexual relationships as well as the role of traditional masculinity has made women vulnerable and encouraged the spread of HIV/AIDS. Church attendance has been found to have an inverse relationship with domestic violence. This implies that the church through its community engagement could assist with reducing gender based violence and sexual coercion.

Aims & Objectives: To determine to what extent the Anglican Church in the Cape Town Diocese is contributing to or challenging rape-supportive attitudes, sexual coercion and gender inequality.

Specific objectives were:

- 1) To determine the beliefs, values and attitudes relevant to rape, sexual coercion and gender inequalities amongst people attending the Anglican Church in the Diocese of Cape Town: clergy, leaders and members of the church.
- 2) To make recommendations to the church regarding any specific issues that the church should address through its gender desk or other structures.

Method: A cross sectional survey, which collected quantitative data. Study population was members of the Anglican Church from the 48 churches within the Diocese of Cape Town. 21 churches were selected by simple random sampling that was stratified in terms of the membership numbers and predominant racial composition of the congregation. All people who attended the church on the study day were asked to complete a questionnaire. The data was analysed using Statistica version 8 with the help of the Centre for Statistical Consultation at Stellenbosch University.

Results: There were 581 respondents from 21 churches of which 380 were females (65.4%), 184 were males (31.1%) and 17 (2.9%) did not indicate their gender. In general, the Anglican

Church in the Diocese of Cape Town espoused progressive attitudes that did not create an environment conducive to sexual coercion, gender violence and rape. For instance, 98.8% of respondents disagreed that a man has good reason to hit his partner if she does not complete her housework to his satisfaction. 94.9% of respondents agreed that the church leadership considers rape and domestic violence to be important, while 98.3% of respondents disagreed that it is okay for a man to have multiple partners. However, the survey did show some potentially discriminatory attitudes amongst the church members towards those living with HIV and that different archdeaconries have different degree of openness in dealing with issues of rape, divorce, marriage and domestic violence. More than half of the respondents agreed that it is okay for a man to ask for a divorce or separation when he is afraid that the partner may infect him with HIV while two-third of respondents agreed that a woman could also do so for the same reason.

Conclusion: In general the Anglican Church in the Diocese of Cape Town espoused progressive attitudes towards sexual coercion, rape and domestic violence that stand in contrast to more conservative and discriminatory attitudes reported in other denominations and African countries. Churches were willing to talk openly about the issues and to offer practical support and counselling. This implies that this faith based organization may be a useful ally in addressing these issues in South African society.

Keywords: HIV & AIDS; Rape; Gender violence; Anglican Church; Religion; South Africa.

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BACKGROUND AND INTRODUCTION

South Africa has the largest number of people living with Human Immunodeficiency Virus (HIV) worldwide, despite efforts to curb the disease.¹ About 5.7 million South Africans were estimated to be living with HIV in 2008 according to the United States Agency for International Development (USAID) global report 2008 and United Nation International Children Emergency Fund (UNICEF) reports highest estimate of 5.9 million for 2009.² This figure was 5.3 million in the 2004 report.³ The prevalence of HIV has continued to rise in South Africa. The prevalence rate in the adult population (age 15 -49) has risen from 16.2 percent in 2005 to 16.9 percent in 2008 and 17.8 percent at the end of 2009 according to AIDS epidemic update report 2009 and UNAIDS report on the global AIDS epidemic 2010.^{4,5} The prevalence rate reported by Human Sciences Research Council in their survey in 2002, 2005 and 2008 were 11.4 percent, 10.8 percent and 10.9 percent respectively of the South Africa's population except those under two years.⁶ These figures are lower than those reported by USAID but has not shown any significant decline but rather remained unacceptably high. Among those living with the virus, women far outnumber the men.¹ The burden of this disease on the country is enormous and it is estimated that more than 500,000 South Africans have died of AIDS- related causes.⁷ By 2015, this number is projected to grow by a factor of 20, to more than 10 million deaths.⁶ Over 50% of adult deaths in South Africa were HIV/AIDS related between 2002 and 2004.⁵ USAID in their 2008 global report state that South Africa has the highest number of orphans, including those affected by HIV, receiving some form of support (medical care, school assistance, financial support, or psychological services) among the nations in East and Southern Africa.¹

Information about HIV/AIDS and despite the distribution of condoms the latest report shows that about 12 million children (under age of 18) have lost one or both parents to HIV/AIDS in Sub-Saharan African and the number of children orphaned by the epidemic continues to rise.⁸ Despite the recent report of decrease in HIV incidence in South Africa;⁹ successful implementation of prevention of mother to child transmission (PMCT) programme across all nine provinces;¹⁰ increased roll-out of Anti-retroviral drugs and the new government national HIV counseling and testing campaign,¹¹ the number of deaths attributed to HIV/AIDS remained unacceptably high. The number of deaths due to HIV & AIDS in 2009 was 310,000.¹⁰ The infant and maternal mortality rate are 46.9 per 1000 infants in 2010¹⁰ and 625 per 100,000 live births in 2007 (quadruple of the figure in 1998 (150 per 100,000 live births))¹² respectively. HIV/AIDS is the major contributing factor of these deaths accounting for up

to 43.7 percent of maternal death between 2005 to 2007.¹² This calls for a re-look into the strategies in fight against HIV/AIDS in South Africa.

South Africa is reported to have one of the highest rates of sexual violence in the world¹³ and has the worst known figures for gender-based violence for a country not at war.¹⁴ Data available shows that rape reported to the police (240 incidents of rape and attempted rape per 100,000 women each year) represents the tip of an ice-berg of sexual coercion. For example, in the 17-48 age groups there may be as many as 2,070 such incidents per 100,000 women per year.¹⁵ In 1995, the Human Rights Watch report on domestic violence and rape, dubbed South Africa “the rape capital of the world” citing a figure of 35 rapes for every one reported to the police.¹⁶ The Medical Research Council study in 2005 estimated that one in nine rape victims reports the crime to the police.¹⁷ In 1997, 55,000 South African women over the age of 16 years were rape victims with an incidence of 134/100,000 according to Statistic South Africa.¹⁸ South Africa Police Service report of 2009 -2010 showed that 27,417 children were victims of sexual crimes between April 2009 - March 2010. 3.5 percent of them were killed and 44.0 percent of them were assaulted with an intention to cause serious bodily harm.¹⁷ According to June 2009 report of Solidarity (South Africa’s largest independent trade union), forty five percent of all rapes in South Africa were perpetrated against children and less than twelve percent of these crimes are reported to the police.¹⁷ In qualitative studies, violence and coercive practices have been found to be dominating sexual relationship in South Africa.¹⁸ One of the consequences of apartheid is that for many people, physical violence has become a first line strategy for resolving conflict and gaining influence over one another.¹⁹ Research conducted by Love Life in 2000 reports 39 percent of sexually active girls in South Africa say they have been forced to have sex.²⁰ The issues of HIV/AIDS and domestic/sexual violence are strongly influenced by underlying behaviour and beliefs. For example, traditional roles of masculinity discourage condom usage among men since it is seen as limiting virility.²¹ Research has shown that men who self-report traditional stereotypical masculinity are more likely to hold rape-supportive attitudes than those with less traditional masculinity beliefs.²² Many people believe that it is natural for a man to have more than one partner.²³ This belief is culturally rooted in most African societies thereby encouraging multiple sexual partners.

Violence, previously considered a social issue, is now acknowledged as a public health problem. Interpersonal violence (including not only the injury burden but also some of the mental health, behavioural and reproductive long-term health consequences) is an important

risk to health in South Africa.²⁴ The age-standardized homicide rate in year 2000 (65 per 100,000) was more than seven fold the global average, making South Africa one of the most violent countries in the world. Intimate partner violence was responsible for 64.4% of the total interpersonal violence attributable health burden in females.²⁴ Out of the 17 risk factors included in the South Africa comparative risk assessment, interpersonal violence was the second leading cause of healthy years of life lost (DALYS) after unsafe sex.²⁴ Some factors that influence rape include traditional notions of masculinity and normalization of interpersonal violence as well as poverty.²⁵ It is clear that men are at the main perpetrators of domestic violence in South Africa.

Religious organizations are participating in the fight against HIV/AIDS, usually through caring for people living with HIV, but are not very involved in the issue of domestic/sexual violence. They have not been proactive in the fight even though religion has a great potential role to play. *Religion is overwhelmingly important in the African search for wellbeing, so deeply woven into daily life and entwined in African values, attitudes and decision-making frameworks that the inability to understand religion leads to an inability to understand people's lives.*²⁶ Religion undoubtedly has a great influence, therefore, on people's beliefs and behaviour.

Tearfund reports that local evangelical churches in Burkina Faso, Zimbabwe and South Africa are largely silent on the issues of gender and sex or are reinforcing traditional values which contribute to HIV infection.²⁷ They also found that in some of the countries, the church seems to have failed to provide leadership to young people especially to young women facing a lot of pressure to be sexually active.²⁸ Some church leaders have little influence on behaviour and even accept that men may have multiple partners.²⁷ The Catholic church has been found to be one of the largest health providers in Africa due to its theological understanding of care ,but has been heavily criticised for its stance on condoms and prevention.²⁹ At a conference held in Thailand, October 2008, concerning the involvement of Christians in the fight against HIV/AIDS, there was a strong feeling that the church is doing little or nothing concerning underlying gender inequalities and stigmatization of people with HIV/AIDS. One of the heart-breaking statements at the conference was as follows.³⁰ *“How can Christians remain silent soldiers of the status quo in light of the injustice women face in a world of HIV/AIDS? It is appalling that those who claim to be disciples of Jesus, the Christ, are often participants and perpetrators of the widespread global stigmatization and discrimination faced by persons infected and affected by HIV/AIDS”.*

In Nigeria, some churches are caring for HIV/AIDS victims and are already participating actively in the fight against HIV/AIDS. A study conducted in Nigeria by the USAID bureau for Global Health in 2003 showed that the Redeemed Christian Church of God (one of the Pentecostal churches in Nigeria) has responded well to the fight against HIV/AIDS.²⁶ This faith-based organization not only handles the matter of caring for people with HIV/AIDS with compassion, but also has a comprehensive plan to discuss HIV/AIDS openly and to educate the faithful to prevent infection. Five years ago, with the funding from USAID through the Family Health International's IMPACT project, the church developed a dynamic HIV/AIDS prevention program that focused on changing risky behaviour and advocating for those affected by the disease. The project empowers individuals and families to prevent HIV by using peer education, interpersonal communication and counseling, spiritual counseling, drama and HIV/AIDS education modules in the church's Bible college curriculum.³¹ While the majority of religious groups admit that HIV/AIDS is a serious problem, there is wide disparity in the implementation of faith-based initiatives.³² The full potential for religious groups to contribute to HIV/AIDS awareness and prevention is currently untapped. However, compared to other Christian denominations, the Anglican Church is reported to be more proactive in the matter.³³

Despite the varied track record of church involvement in HIV prevention there remains a huge potential to contribute to the fight against HIV/AIDS, rape, domestic violence and gender issues. The church has a widespread network in Africa and is often present in areas that other agencies cannot reach.³³ Faith based organizations are locally based with well understood norms and values; they have a high level of acceptability, sometimes higher than the state or foreign organization.²⁶ They are also well grounded and deeply conversant with local culture.³⁴ Faith based communities reach into almost all communities and religious attendance is quite high in South Africa. Faith based communities are also expected to address lifestyle, beliefs, attitudes and moral values. Furthermore, Ferguson et al (1986) reported an inverse relationship between church attendance and spousal abuse for their New Zealand study.³⁵ A 1999 study of U.S. couples also found that men and women who attend religious services regularly are less likely to commit act of domestic violence as compared with those who attend rarely or not at all.³⁶ A study conducted in Canada³⁷ as well as that conducted by Straus, Gelles and Steinmetz³⁸ reported that men and women without religious affiliation have the highest rate of domestic violence among their partners. Another study conducted in U.S. reported that the frequency of religious attendance is inversely associated

with the likelihood of domestic violence. They also reported 40 percent less likelihood of a woman of African American origin (where prevalence of domestic violence is highest when compared with other American racial groups) of being a victim of domestic violence when the woman attends church several times a week.³⁹ With all this potential, one could argue that the church is in an excellent position to positively influence people's behaviour in the fight against HIV/AIDS, domestic and sexual violence.

The Anglican Church in the Diocese of Cape Town has recently set up a gender desk to help the church think through its approach to gender related issues. In addition the church has established Fikelela (www.fikelela.co.za), which is an organization focusing on HIV/AIDS care and prevention. While one may expect that church leaders and members may have attitudes and beliefs towards rape and sexual coercion different to the general population, this cannot be assumed. Previous research by Fikelela has shown that sexual behaviour amongst the Anglican youth is no different to the general population.⁴⁰

This study therefore intends to survey the attitudes of people attending the Anglican Church towards rape and sexual coercion. This will help the gender desk and Fikelela to understand how the church should address these issues internally and modify its influence on the broader community. The study hopes to make suggestions for interventions which will help the church and its members, as well as society at large, to fight these huge problems facing the country. Much work has been done in the secular world to investigate these problems, but very few studies have been done focusing on faith based communities and their possible contribution.

Aims and objectives

The aim of this study therefore was:

To determine to what extent the Anglican Church in the Cape Town Diocese may be contributing to or challenging rape-supportive attitudes, sexual coercion and gender inequality.

Specific objectives were:

1) To determine the beliefs, values and attitudes relevant to rape, sexual coercion and gender inequalities amongst people attending the Anglican Church in the Diocese of Cape Town-

clergy, leaders and members of the church.

2) To make recommendations to the church regarding any specific issues the church should address through its gender desk or other structures

METHOD

Study Design:

A cross-sectional survey, which collected both quantitative and qualitative data.

Setting

There are 3 Anglican Dioceses in the Western Cape namely, Diocese of Cape Town, Diocese of Saldanha Bay and Diocese of False Bay. The Diocese of Cape Town is the ‘mother’ diocese (first diocese) amongst them and the seat of the Archbishop, therefore it is presumed to have influence over the other dioceses. In other words, what is adopted in diocese of Cape Town is likely to be adopted in other dioceses. The study focuses on churches in the Anglican Diocese of Cape Town, South Africa. The Diocese has an administrative centre in city of Cape Town and predominantly covers urban and peri-urban communities. There are 48 churches in the Diocese, which include all socio-economic classes and racial groups.

Study population

The study population was people attending or leading the Anglican Church in the Diocese of Cape Town, South Africa. There are 48 churches in the Diocese of Cape Tape with an estimated 8,165 church members. These churches are grouped into archdeaconries. There are 6 archdeaconries in the Diocese namely Athlone, Constantia, Grootte Schuur, Ibongoletu, Rondebosch and Waterfront. The numbers of churches in each archdeaconry are seven, twelve, seven, eight, seven and seven respectively. Out of the 48 churches in the Diocese, 5 have a predominantly black membership (640 people), 12 predominantly white (2020 people) and 31 predominantly coloured (5505 people); which reflects the communities served by these churches. Black communities are amongst the poorest (e.g. Gugulethu and Crossroads), Xhosa-speaking and included several informal settlements. Coloured communities varied, some on the Cape Flats in low socio-economic housing in communities often created during forced removals under Apartheid (e.g. Hanover Park) and some were middle class (e.g.

Wynberg), white communities were typically middle class to very affluent in areas such as Constantia and Camps Bay.

Sampling Procedure

Weighted cluster sampling was used by the Centre for Statistical Consultation to calculate a representative sample of 570 that was proportionally allocated to the churches according to their membership numbers and predominant racial composition. This resulted in a desired sample of 30 people from 1 predominantly black church, 390 people from 13 predominantly coloured churches and 150 from 5 predominantly white churches. The churches were then selected randomly for inclusion in the survey.

Data Collection

Data was collected by questionnaire. The questionnaire contained structured questions pertaining to demographic information, attitudes to gender and information on the church's response to issues such as rape and teenage pregnancy. Questions were locally adapted from the international questionnaire used by the World Health Organization in their multi-country study on women's health and life experiences.⁴¹

Field assistants were identified through the Fikelela AIDS project who helped with the distribution of the questionnaires. The field assistants were lay counselors in the Diocese and were trained in how to administer the questionnaires. The data collection process was piloted outside the Diocese, in an Anglican Church from another Diocese before the actual distribution.

The dates for distribution of the questionnaire to the selected Churches were arranged with the help of Fikelela AIDS Project. One week beforehand the congregations were informed about the research project and given a chance to discuss it. The questionnaires were self-administered with the help of field assistants. On the day of data collection the questionnaires were distributed at the end of the service by the assistants, after the research project was explained to the congregation. Questionnaires were completed and returned immediately.

Data analysis

MS Excel was used to capture the data and STATISTICA version 8 (Stat Soft Inc. 2008) was used to analyze the data with the help of the Centre for Statistical Consultation at

Stellenbosch University. Summary statistics was used to describe the variables. Distributions of variables were presented with histograms or frequency tables. Medians or means was used as the measures of central location for ordinal and continuous responses and standard deviations and quartiles as indicators of spread. The relationships between continuous response variables (e.g. age) and nominal input variables were analyzed using analysis of variance (ANOVA). Relations between nominal variables (e.g. gender) were investigated with contingency tables and likelihood ratio chi-square tests. A p-value of $p < 0.05$ represents statistical significance in hypothesis testing and 95% confidence intervals were used to describe the estimation of unknown parameters.

The open questions that asked about the church's response to rape, domestic violence and teenage pregnancy, generated short answers of just a few words. This qualitative data was categorized into a short menu of different responses and was then analysed quantitatively.

Ethical considerations

Ethical approval (N09/06/178 code number) was obtained for the study from the Health Research Ethics Committee of Stellenbosch University. Bishop Garth Counsell of the Anglican Diocese of Cape Town gave written permission for the research study to be conducted. Permission was also obtained from the priest in charge of each selected church. They were made aware that the results of the study will be presented as a research assignment at Stellenbosch University and are likely to be published in a scientific journal. The study is to be presented to the bishop, archbishop and the diocesan priests.

The first page of the questionnaire contained information about the study required for informed consent and this information was also explained verbally before beginning the questionnaire. Completing and returning the questionnaire was then taken as an indication of consent. Confidentiality was maintained and only those 18-years and older completed the questionnaire.

RESULTS:

There were 581 respondents from 21 churches, of whom 380 respondents were females (65.4%), 184 males (31.7%) and 17 (2.9%) did not indicate their gender and were not

included in the comparisons between males and females responses below. Two predominantly black churches, 14 coloured churches and 5 white churches were sampled with 54 (9.3%), 390 (67.1%) and 137 (23.6%) respondents respectively. The respondents were mainly age 40 years and above accounting for two-third (63%) of the sample size as shown in Figure 1. Sixty-nine respondents did not indicate their age and were not included in the analysis among different age groups. The majority of the respondents were regular members of the church (73%), a further 23% were in leadership positions, 2% were clergy and only 3% were visitors as shown in Figure 2. Twenty-three respondents did not indicate their role in the church and were not included in the analysis.

Figure 1: Age (years) distribution of study population

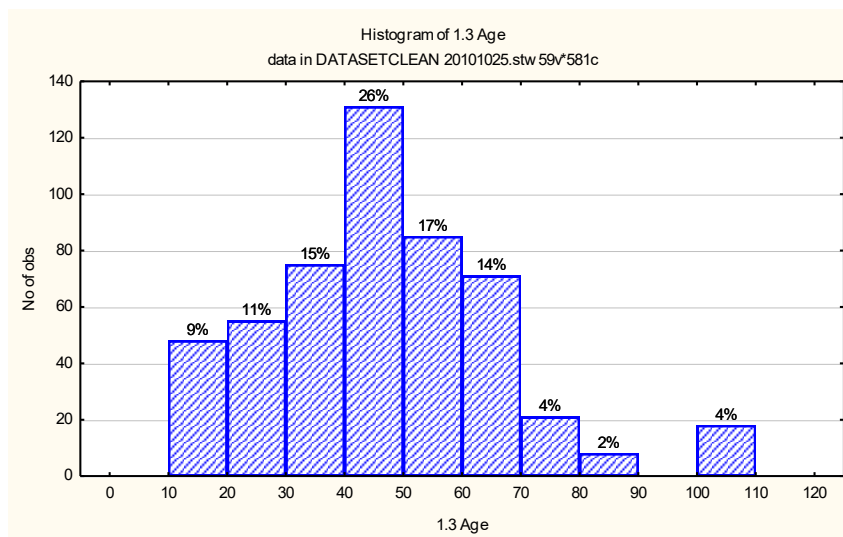
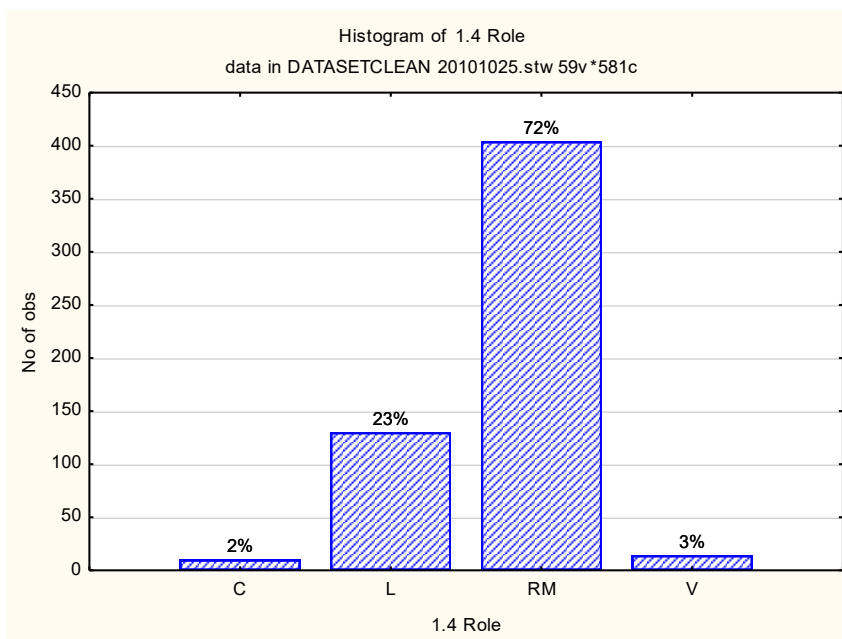


Figure 2: Distribution of roles amongst respondents.



Key: C = Clergy, L = Leaders, RM = Regular members and V = Visitors.

The results were divided into 5 thematic categories for clearer presentation:

- regarding marriage,
- those pertaining to intimate partner violence,
- those pertaining to sex,
- those pertaining to gender and power,
- those pertaining to the church's response to rape, domestic violence and teenage pregnancy.

Beliefs and values regarding marriage:

Table 2 shows the respondent's attitudes and beliefs regarding marriage. In general, the participants tended to agree with attitudes and beliefs that promote gender equality. However, a quarter of the sample agreed with the statement "the church teaching on divorce is that you must stay together whatever the circumstances" and out of these there were more men than women ($p < 0.01$). Nevertheless 52.4% of respondents agreed to the statement "it is okay for a man to ask for a divorce or separation when he is afraid that the partner may infect him with HIV" while 63,3 % of the respondents agreed that it's okay for a woman to ask for divorce or separation when she is afraid that the partner may infect her with HIV.

Table 2: Beliefs and values regarding marriage

Statements	Total no. that agreed. n (%) N=581	Total no of males that agreed. n (%) N=184	Total no of females that agreed. n (%) N= 380	Non-responders n (%)	p-value
Family problems should only be discussed in the family.	216 (37.1)	75 (40.7)	141 (37.1)	18 (3.1)	0.41
A woman should be able to choose her own friends even if her partner disapproves.	429 (73.8)	141 (76.6)	288 (75.8)	22 (3.8)	0.80
If a man mistreats his partner, others outside of the family should intervene.	437 (75.2)	147 (79.9)	290 (76.3)	24 (4.1)	0.26
If a woman works, she should give her money to her partner.	18 (3.1)	9 (4.9)	9 (2.4)	11 (1.9)	0.12
A woman needs her partner's permission to do paid work.	48 (8.3)	20 (10.9)	28 (7.4)	21 (3.6)	0.14
It is a woman's job mainly to take care of the home and cook for the family.	116 (20.0)	37 (20.1)	79 (20.8)	18 (3.1)	0.87
It is okay for a woman to ask for divorce or separation when she is afraid he may infect her with HIV.	368 (63.3)	114 (62.0)	254 (66.8)	46 (7.9)	0.21
It is okay for a woman to					

ask for divorce or separation when her husband never listens to her.	244 (42.0)	79 (42.9)	165 (43.4)	45 (7.7)	0.68
It is okay for a woman to ask for a divorce or separation when her husband spends money on other children and not his partner and children.	353 (60.8)	113 (61.4)	240 (63.2)	34 (5.9)	0.73
It is okay for a woman to ask for a divorce or separation when her husband is unfaithful.	452 (77.8)	114 (62.0)	308 (81.1)	41 (7.1)	0.63
It is okay for a man to ask for divorce or separation when the partner cannot have children.	12 (2.1)	4 (2.2)	8 (2.1)	31 (5.3)	0.95
It is okay for a man to ask for divorce or separation when the partner has not given him a male child.	10 (1.7)	6 (3.3)	4 (1.2)	32 (5.5)	0.07
It is okay for a man to ask for divorce or separation when his partner does not do her housework well.	18 (3.1)	9 (4.9)	9 (2.4)	33 (5.7)	0.12
It is okay for a man to ask for divorce or separation when his partner is unfaithful.	414 (71.3)	135 (73.4)	279 (73.4)	33 (5.7)	0.98

It is okay for a man to ask for a divorce or separation when he is afraid that the partner may infect him with HIV	305 (52.5)	86 (46.7)	219 (57.6)	54 (9.3)	0.07
The Church's teaching on divorce is that you must stay together whatever the circumstances.	147 (25.3)	66 (35.9)	81 (21.3)	33 (5.7)	0.0003
The church teaches that a man must sometimes discipline his wife.	70 (12.1)	29 (15.8)	41 (10.8)	25 (4.3)	0.11
The church teaches that man is the head of the household.	336 (57.8)	118 (64.1)	218 (57.4)	32 (5.5)	0.19

Note: 17 respondents did not specify gender.

Attitudes and church responses to intimate partner violence

Table 3 shows the respondent's attitudes towards intimate partner violence (IPV) and the church's response. The majority of the participants agreed that "it is okay for a woman to ask for divorce or separation when the husband beats the children" with significantly more women agreeing than men ($p < 0.01$). However 70.8% of the participants also agreed that "women in abusive relationships sometimes bear their cross and stay in them".

In terms of church support, 64.3% of the participants agreed that their church offer support to those who have been raped and 62.1% agreed that their church takes a stand on issues of rape, domestic violence and teenage pregnancy in the community. On the other hand, only 46.4% agreed that their church offers support to those who have been divorced.

Table 3: Attitudes and church responses to intimate partner violence

Questions	Total that agreed N=581	Males that agreed N=184	Females that agreed. N=380	Non-responders	p - value
A man has a good reason to hit his partner if she does not complete her housework to his satisfaction.	7 (1.2)	4 (2.2)	3 (0.8)	16 (2.8)	0.18
A man has a good reason to hit his partner if she disobeys him.	16 (2.8)	8 (4.3)	8 (2.1)	20 (3.4)	0.15
A man has good reason to hit his partner if she refuses to have sex.	10 (1.7)	4 (2.2)	6 (1.6)	22 (3.8)	0.62
A man has a good reason to hit his partner if she asks him if he has other girlfriends.	27 (4.6)	11 (6.0)	16 (4.2)	19 (3.3)	0.36
A man has a good reason to hit his partner if he suspects she is unfaithful.	14(2.4)	4 (2.2)	10 (2.6)	22 (3.8)	0.75
A man has a good reason to hit his partner if he finds out she has been unfaithful.	22 (3.8)	8 (4.3)	14 (3.7)	23 (4.0)	0.71
A woman should tolerate being beaten in order to keep her family together.	9 (1.5)	4 (2.2)	5 (1.3)	23 (4.0)	0.46
It is okay for a woman to ask for divorce or separation when the husband beats the children.	392 (67.5)	114 (62.0)	278 (73.2)	26 (4.5)	0.004
It is okay for a woman to ask for divorce or separation when the husband hits her frequently.	459 (79.0)	144 (78.3)	315 (82.9)	26 (4.5)	0.18

A woman has good reason to refuse sex with her partner if the husband beats her.	488 (84.0)	163 (88.6)	325 (85.5)	28 (4.8)	0.24
It is okay for a man to force his partner to have sex.	16 (2.8)	3 (1.6)	13 (3.4)	25 (4.3)	0.21
It is not rape if a married man forces his wife to have sex.	33 (5.7)	13 (7.1)	20 (5.3)	23 (4.0)	0.38
Does your church offer support for those who have been raped?	374 (64.4)	125 (67.9)	249 (65.5)	114 (19.6)	0.47
Does your church offer support for those who have been divorced?	270 (46.5)	79 (42.9)	191 (50.3)	239 (41.1)	0.30
Women in abusive relationships sometimes “bear their cross” and stay in them.	412 (70.9)	139 (75.5)	273 (71.8)	48 (8.3)	0.34
Does your church take a stand on issues of rape, domestic violence and teenage pregnancy in the community?	361 (62.1)	126 (68.5)	235 (61.8)	112 (19.3)	0.68

Note: 17 respondents did not specify gender.

Attitudes to sexual intercourse:

Attitudes and beliefs towards sexual intercourse are shown in Table 4. Two thirds (62.5%) of the participants believed that a woman can refuse sex with her partner when she is pregnant and 83.7% if she has recently given birth. Fourteen percent of the participants agreed that sexual violence does not include unwanted touching and five per cent agreed that a woman who wears sexy clothing wants to have sex or may mean ‘yes’ when they say ‘no’ to sex. There was no significant difference between males and females in all of these.

Table 4: Attitudes to sexual intercourse

Statements	Total that agreed N = 581	Males that agreed. N=184	Females that agreed. N=380	Non-responders	p-value
A woman must have sex with her partner even if she doesn't feel like it.	39 (6.7)	11 (6.0)	28 (7.4)	21 (3.6)	0.54
A woman has a good reason to refuse sex with her partner when she is afraid he will infect her with HIV.	497 (85.5)	162 (88.0)	335 (88.2)	26 (4.5)	0.75
A woman has a good reason to refuse sex with her partner when she is menstruating.	475(81.8)	156 (84.8)	319 (83.9)	29 (5.0)	0.93
A woman has a good reason to refuse sex with her partner when she is pregnant.	364 (62.7)	117 (63.4)	247 (65.0)	33 (5.7)	0.85
A woman has a good reason to refuse sex with her partner when he has a relationship with another woman.	493 (84.9)	160 (87.0)	333 (87.6)	29 (5.0)	0.82
A woman has a good reason to refuse sex with her partner when she has recently given birth.	487 (83.8)	163 (88.6)	324 (85.3)	32 (5.5)	0.15
A woman has a good reason to refuse sex with her partner when she is tired and does not feel like it.	452 (77.8)	151 (82.1)	301 (79.2)	32 (5.5)	0.30
It is okay for a man to have multiple partners.	10 (1.7)	2 (1.1)	8 (2.1)	23 (4.0)	0.38
Sexual violence does not include unwanted touching.	84 (14.5)	33 (17.9)	51	36 (6.2)	0.12

			(13.4)		
Women mean yes when they say no to sex.	31 (5.3)	10 (5.4)	21 (5.5)	30 (5.2)	0.98
Women who are raped are often asking for it.	15 (2.6)	8 (4.3)	7 (1.8)	28 (4.8)	0.09
A woman who wears sexy clothing wants to have sex.	29 (5.0)	9 (4.9)	20 (5.3)	26 (4.5)	0.87

Attitudes to gender and power issues:

Table 5 presents attitudes towards gender and power issues in general; 20.8% agreed that a good woman obeys her partner even if she disagrees.

Table 5: Attitudes to gender and power issues.

Statements	Total that agreed N = 581	Males that agreed. N=184	Females that agreed. N=380	Non-responders	p-value
A good woman obeys her partner even if she disagrees.	121 (20.8)	40 (21.7)	81 (21.3)	21 (3.6)	0.92
It is important for a man to show his partner who is the boss.	27 (4.7)	7 (3.8)	20 (5.3)	13 (2.2)	0.45
A man should always have the final say.	21 (3.6)	11 (6.0)	10 (2.6)	12 (2.1)	0.05
There is nothing that a woman can do if her partner wants to have a girlfriend.	19 (3.3)	7 (3.8)	12 (3.2)	19 (3.3)	0.65

Church response to rape, domestic violence and teenage pregnancy:

Overall 94.9% of respondents agreed that the church leadership consider rape and domestic violence to be important issues, 30.8% said they frequently heard sermons or messages on the

topic while another 43.4% said that they sometimes did so. Despite its importance a quarter (25.8%) said they had never heard a sermon or message on the topic. There were no significant differences in these views between males and females.

The survey showed that the church responded mainly to issues of rape, domestic violence and teenage pregnancy by counselling the victims and providing some sort of non-specific support; as shown in Table 6.

Table 6: Church response to rape, domestic violence and teenage pregnancy

Answers	What does the church do about rape, domestic violence and teenage pregnancy? N = 277 n (%)	What support does your church offer to women or girls who have been raped? N = 311 n (%)	What support does your church offer to those who have been divorced? N = 346 n (%)	How does your church deal with teenage girls who fall pregnant? N = 220 n (%)	How does your church deal with boys who get their girlfriends pregnant? N = 195 n (%)
No response					
None	14 (5.1)	39 (12.5)	40 (11.6)	33 (15.0)	47 (24.1)
Prevention and awareness interventions					
Talks, Sermon	30 (10.8)	2 (0.6)	2 (0.6)	9 (4.1)	14 (7.1)
Awareness campaigns	13 (4.7)	N/A	1 (0.3)	N/A	N/A
Discussion with children/teens	2 (0.7)	N/A	N/A	1 (0.5)	N/A
Positive individual interventions					
Prayer	12 (4.3)	32 (10.3)	32 (9.2)	17 (7.7)	10 (5.1)
Counselling	110 (39.7)	165 (53.1)	190 (54.9)	78 (35.5)	74 (38.0)
Practical	5 (1.8)	2 (0.6)	N/A	1 (0.5)	N/A

assistance of victims					
Support group	16 (5.8)	9 (2.9)	5 (1.4)	3 (1.4)	1 (0.5)
Community outreach & support.	8 (2.9)	2 (0.6)	N/A	N/A	N/A
Refer to other organizations	3 (1.1)	12 (3.9)	5 (1.4)	5 (2.3)	1 (0.5)
Provide place of safety	N/A	2 (0.6)	N/A	N/A	N/A
Send victims to courses pertaining to divorce	N/A	N/A	18 (5.2)	N/A	N/A
Negative individual interventions					
Suspend them from church	1 (0.4)	N/A	N/A	3 (1.4)	5 (2.6)
Criticize them	N/A	N/A	N/A	6 (2.7)	5 (2.6)
Non-specific interventions					
Discuss with them one on one	N/A	N/A	1 (0.3)	1 (0.5)	N/A
Non-specific help	63 (22.7)	46 (14.8)	52 (15.0)	63 (28.6)	38 (19.5)

Key: N/A = Not applicable

The data were further analysed for any significant differences due to age and between the various archdeaconries. The Tables below only report on statistically significant associations between age and attitudes towards gender issues. There was a mixed pattern of association between age and attitudes towards marriage. Younger people tended to believe that a woman should be allowed to choose her own friends or work; and could divorce her husband if he was unfaithful. However older people tended to believe that outsiders should intervene in the family if they had problems or abusive relationships.

Table 7: Association of age and attitudes towards marriage

Statements	Mean age in years (95% CI). Agree	Mean age in years (95% CI). Disagree	P - Value
Family problems should only be discussed in the family.	43.1 (40.1 – 45.4)	46.5 (44.7 – 48.1)	0.04
A woman should be able to choose her own friends even if her partner disapproves	43.1 (40.7 – 45.4)	49.0 (46.0 – 52.1)	0.01
If a man mistreats his partner, others outside of the family should intervene.	46.2 (44.6 – 47.9)	42.2 (38.9 – 45.5)	0.05
A woman needs her partner's permission to do paid work.	51.5 (46.4 – 56.4)	44.5 (43.0 – 46.1)	0.01
It is okay for a woman to ask for a divorce or separation when her husband is unfaithful.	43.9 (42.3 – 45.5)	49.5 (45.6 – 53.3)	0.01

Key: CI = Confidence interval. Note: 69 respondents did not indicate their age.

Table 8 reports on statistically significant association between age and attitudes towards intimate partner violence. There was also mixed association between age and attitudes towards intimate partner violence. Although the younger age group seemed to support intimate partner violence if the wife/partner does not complete her housework to the man's satisfaction the mean age of 18 years is due to only 7 responses and may not be a reliable result. The other responses show a tendency for younger adult respondents to be less inclined to intimate partner violence.

Table 8: Association of age and attitudes towards intimate partner violence.

Statements	Mean age in years (95% CI). Agree	Mean age in years (95% CI). Disagree	P - Value
A man has a good reason to hit his partner if she does not complete her housework to his satisfaction.	18.4 (3.9 – 32.9)	45.5 (44.0 – 46.9)	0.01
A man has a good reason to hit his partner if she asks him if he has other girlfriends.	51.2 (44.4 – 58.0)	44.8 (43.8 – 46.3)	0.05
It is okay for a woman to ask for divorce or separation when the husband beats the children.	43.2 (41.5 – 44.9)	49.0 (46.2 – 51.8)	0.01
It is okay for a woman to ask for divorce or separation when the husband hits her frequently.	44.2 (42.6 – 45.8)	48.8 (45.1 – 52.5)	0.03

Key: CI = Confidence interval. Note: 69 respondents did not indicate their age.

The table below report on the statistically significant association between age and attitudes towards sex. The older people tended to support the idea that a woman must have sex with her partner even when she does not like it and that women may mean yes when they say no to sex and disagreed that a woman could refuse sex when she is pregnant.

Table 9: Association of age and attitudes towards sex.

Statements	Mean age in years (95% CI). Agree	Mean age in years (95% CI). Disagree	P - Value
A woman must have sex with her partner even if she doesn't feel like it.	51.5 (46.1 – 57.0)	44.5 (43.0 – 46.0)	0.02
A woman has a good reason to refuse sex with her partner when she is pregnant.	43.8 (42.1 – 45.6)	48.1 (45.5 - 50.7)	0.01
Women mean yes when they say no to sex.	50.7 (44.6 – 56.7)	44.5 (43.0 – 46.0)	0.03

Key: CI = Confidence interval. Note: 69 respondents did not indicate their age.

Furthermore, table 10 reports on the statistically significant association between age and attitudes towards gender and power issues. Younger people tend to agree more that a man should always have the final say in a relationship and that women are powerless when it comes to their partners choosing to have girlfriend/s.

Table 10: Association of age and attitudes towards gender and power issues

Statements	Mean age in years (95% CI). Agree	Mean age in years (95% CI). Disagree	P - Value
A man should always have the final say.	35.2 (27.5 – 42.9)	45.7 (44.2 - 47.2)	0.02
There is nothing that a woman can do if her partner wants to have a girlfriend.	32.5 (24.6 – 40.4)	45.6 (44.1 – 47.1)	0.01

Key: CI = Confidence interval. Note: 69 respondents did not indicate their age.

Table 11 shows responses to key questions about the response of archdeaconries to rape, domestic violence, divorce and teenage pregnancy. Almost twice as many respondents in the Groote Schuur and Ibongolethu archdeaconries agreed with the statement ‘the church’s teaching on divorce is that you must stay together whatever the circumstances’ compared to those from Constantia and Rondebosch ($p < 0.01$). Interestingly Constantia and particularly Rondebosch were also less exposed to sermons on rape and domestic violence ($p < 0.01$).

Table 11: Agreement with statements on the church’s response to domestic violence, rape and sexual coercion between archdeaconries

Statement	GSH n (%).	IBG n (%).	ATH n (%).	CON n (%).	ROND n (%).	P - value
	N=61	N=69	N=139	N=220	N=54	
The church’s teaching on divorce is that you must stay together whatever the circumstances	24 (39.3)	28 (40.6)	40 (28.8)	45 (20.5)	12 (22.2)	<0.01
	N = 63	N = 71	N = 142	N = 225	N = 53	
The church teaches that a man must sometimes discipline his wife	13 (20.6)	13 (18.3)	11 (7.8)	31 (13.8)	5 (9.4)	0.12
	N = 64	N = 74	N = 141	N = 219	N = 51	
The church teaches that the man is	28 (43.8)	32 (43.2)	46 (32.6)	83 (38.0)	17 (33.3)	0.53

the head of the household						
	N = 54	N = 61	N = 109	N = 192	N = 45	
Does your church offer support for those who have been rape?	6 (11.1)	10 (16.4)	24 (22.0)	27 (14.1)	10 (22.2)	0.31
	N = 25	N = 34	N = 88	N = 142	N = 46	
Does your church offer support for those who have been divorced?	22 (88)	29 (85.3)	68 (77.3)	122 (85.9)	37 (80.4)	0.48
	N = 60	N = 66	N = 136	N = 221	N = 48	
Women in abusive relationships sometimes “bear their cross” and stay in them	44 (73.3)	43 (65.2)	109 (80.2)	189 (85.5)	39 (81.3)	0.10
	N = 54	N = 65	N = 112	N = 191	N = 43	
Does your church take a stand on the issues of rape, domestic violence and	43 (79.6)	51 (78.5)	89 (79.5)	159 (83.3)	29 (67.4)	0.31

teenage pregnancy in the community?						
	N = 44	N = 48	N = 86	N = 155	N = 29	
What is the attitude of your church leadership towards rape and domestic violence? – It is very important to them.	43 (97.7)	43 (89.6)	84 (97.7)	144 (93.0)	28 (96.6)	0.13
	N = 62	N = 69	N = 137	N = 216	N = 51	
Have you ever heard sermon/message about rape and domestic violence in your church? --- Yes	53 (85.5)	58 (84.1)	110 (80.3)	157 (72.7)	10 (39.2)	<0.01

Key: GSH = Groote Schuur and Waterfront, IBG = Ibonguletu, ATH = Athlone, CON = Constantia, ROND = Rondebosch.

DISCUSSION

Key findings

In general, the Anglican Church in the Diocese of Cape Town espoused progressive attitudes that did not create an environment conducive to sexual coercion, gender violence and rape; and an openness to discuss these issues and offer practical support. However, the survey did

show some potentially discriminatory attitudes amongst the church members towards those living with HIV/AIDS and that different archdeaconries have different degree of openness in dealing with issues of rape, divorce, marriage and domestic violence. A quarter have never heard a message or sermon about these issues and the church response to domestic violence, rape and teenage pregnancy is mainly individual counselling which is very little in terms of raising awareness in the community leaving out other measures. The older members seemed to hold patriarchal/traditional church values as against the younger members in general.

Comparison to the literature

The World Health Organization (WHO) conducted a similar survey at fifteen sites in ten countries which focused on women's health and the prevalence of intimate partner violence in the general population.⁴² The study included women from three African countries: Ethiopia, Namibia and Tanzania. The two studies may not be exactly comparable given that WHO study focused on general population while this study looked at Faith Based organisation, but the same tools were used in both studies. Table 12 compares some of the findings of this study with the WHO study on intimate partner violence. For example the WHO study showed a wide variation between study sites in the percentage of women who justified wife beating for different reasons. The Anglican Church in Cape Town shows a much lower response to all statements, which suggests that this faith based community may be quite different to the broader community in many African countries.

Table 12: Compares this study with WHO Study on intimate partner violence.

Percentage of women who agree that a man has good reason to beat his wife if:

Percentage of women who agree that a man has good reason to beat his wife if:	Anglican church South Africa N=380 n (%)	Ethiopia N=3016 n (%)	Namibia N=1500 n (%)	Tanzania N=1820 n (%)	Brazil N=1172 n (%)
Wife does not complete house work	0.8	65.8	9.7	29.1	4.5
Wife disobeys her husband	2.1	77.7	12.5	45.6	1.4
Wife refuse sex	1.6	45.6	3.5	31.1	0.3

Wife asks about other women	4.2	32.2	4.3	13.8	0.3
Husband suspects infidelity	2.6	43.8	6.1	22.9	2.0
Wife is unfaithful	3.7	79.5	9.2	51.5	8.8

Furthermore, many women in the WHO study agreed that a woman has the right to refuse sex from her husband if she does not want it (range 25% - 97%), and the same applied in this study (92%).

A study conducted in Nigeria about the perception of Nigerian women on domestic violence showed that up to 66.4% of women agreed that a husband is justified in beating his wife/partner while more than 61% of men also supported this viewpoint.⁴³ It is important to note that among the 12,892 participants in the study, 51% were Christians. These figures are in stark contrast to the findings from the Anglican Church in Cape Town. There was no subgroup analysis of the Christians available in the study for more accurate comparison. There was no similar study conducted in South Africa suitable for comparison. The only one found that was close was based on the general population and focused only on the youth.

Overall religious leaders in the Anglican Church in Cape Town appear to take a stand on the issue of rape, domestic violence and teenage pregnancy through sermons and practical support. Leadership in other African countries is not so progressive and in Nigeria, for example, leaders interpret HIV as a punishment from God and refuse to engage openly with the issue of HIV transmission and prevention.⁴⁴ The Anglican church in Cape Town may have more liberal attitudes than other Anglican dioceses and provinces in Africa given what is reported by Archbishops and the history of this Anglican church. Anglican Church was part of the liberation movement in South Africa. This included liberation of women. In 1992, the first woman priest was ordained which was one of the first in Africa aside from Anglican communion in Kenya and in Uganda who ordained woman priest in 1981 and 1983 respectively.⁴⁵ Desmond Tutu promoted a liberation agenda, for example condemning discriminations among gay people in South Africa.⁴⁶ Subsequent archbishops, Njongonkulu Ndungane and Thabo Makgoba have echoed a more liberal policy towards homosexuals.⁴⁷ However, in Nigeria for example, the attitudes are in stark contrast. The Anglican Church of Nigeria is more traditional. Peter Akinola archbishop and primate of church of Nigeria in the Anglican Communion strongly condemned homosexuality and has vowed to rescue the

Anglican Church from its crisis over sexuality.⁴⁸ Church of Nigeria Anglican Communion is yet to ordain women priests but only allow women ordination to the diaconate.⁴⁹

The survey did reveal a few potentially discriminatory attitudes towards people with HIV as at least half of men and women felt that having an HIV positive partner was grounds for divorce. It was not clear whether this was because of the implied adultery or because of fears of being infected. This may also represent a significant difference between the attitudes of church members and the official teaching of the church on marriage and divorce. It could also be interpreted as the church teaching on this is ambivalent. Other faith based organization have shown different discriminatory attitudes towards people living with HIV such as excluding them and their families from church activities or refusing to perform the sacrament of marriages.⁴⁴ In general however the Anglican Church has taken more of a stand against discrimination. For example the Anglican Church in Tanzania, Dodoma diocese in November 2004, announced that 12 of its priests were HIV positive and three of them declared their HIV status publicly.⁴⁴ Canon Gideon Byamugisha (Anglican priest) was supported by the Ugandan Anglican Church after he publicly declared that he was living with HIV. He became the first African Anglican priest to publicly declare his HIV status.⁵⁰

There were some differences amongst the archdeaconries with more conservative views on marriage and divorce being shown in churches with a predominantly black membership and less attention given to issues of rape, divorce and domestic violence amongst churches with a more affluent and white membership. All archdeaconries recognized that some women may feel obliged to “carry their cross” and stay in abusive relationships for religious reasons.

About two-thirds (62.5%) of the respondents believed that a woman has good reason to refuse sex with her partner when she is pregnant and 83.7% if she has recently given birth. This implies that faith based organizations may have not been informed correctly regarding sex in pregnancy and postpartum. For a healthy woman without any complications during pregnancy like bleeding, multiple miscarriages, fear of sex, there is no proven scientific reason prohibiting sexual intercourse during pregnancy.⁵¹ During postpartum period, there is no scientific evidence not to have sex except when a woman sustains wounds (episiotomy, bruises, laceration) during birth, in this case, the wound should be allowed to heal before starting sexual intercourse.⁵¹

Strengths and limitations of the study

Answers to the questionnaire may reflect espoused rather than actual values, especially as the questionnaire was completed on the church premises and immediately after a church service. One cannot know if these values are actually seen in action at home. Those with more negative attitudes may have not completed the questionnaire. Giving the congregation one week notice of the research may have influenced the responses in that some members especially those with more negative attitudes may have avoided attending church service that day. Some of the questions were open to interpretation such that some of the respondents may have interpreted them differently. There is possibility of recall bias with some questions, which may have affected the results.

The sample size was not calculated to compare results based on age, sex or archdeaconry. Therefore these subgroup analyses should be interpreted with caution.

The questionnaire used was adapted from the WHO and allowed comparison with international data.

Recommendations and implications

The values espoused in this survey suggest that programmes to combat intimate partner violence and sexual coercion as well as to care for survivors may be possible to implement within the Anglican Church and the communities that it serves.

The church should continue to work towards eliminating stigmatization from HIV/AIDS and co-ordinate their teachings across all archdeaconries about domestic violence, divorce and rape. The church should take notice of the discrepancies elucidated in this study for instance, at least half of men and half of women felt that having HIV positive partner was a ground for divorce. One of the ways to deal with this will be to educate the church members more about HIV/AIDS and to develop or enhance policy in the church that consolidates the teachings. Church leaders may need to be educated about the issues around HIV/AIDS and sex by organizing seminars and workshops where they will get first hand, correct and current information about HIV/AIDS and sex. In this way, the leaders will be equipped to pass accurate and correct information to the congregation.

Further research should be undertaken on this subject matter especially qualitative research to elucidate the actual practices of this faith based organization on the issues of sexual coercion, rape and domestic violence, using this research as a baseline. It will be interesting to explore

the experience of people in the church with divorce, HIV/AIDS, rape and domestic violence, and to determine whether their stories are congruent with the findings of this study. This will enable the church to plan and execute adequate intervention if there are discrepancies in what is known now and the actual practices by the church.

CONCLUSION

In general the Anglican Church in the Diocese of Cape Town espoused progressive attitudes towards sexual coercion, rape and domestic violence that stand in contrast to more conservative and discriminatory attitudes reported in other denominations and African countries. Churches were willing to talk openly about the issues and to offer practical support and counselling. This implies that this faith based organization may be a useful ally in addressing these issues in South African society.

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APPENDIX

DIOCESE OF CAPE TOWN RESEARCH INTO GENDER ATTITUDES			
In this community and elsewhere, people have different ideas about families and what is acceptable behaviour for men and women in the home. This is a list of statements, and I would like you to tell me whether you agree or disagree with the statement. There are no right or wrong answers. Please make a cross by your answer. Please do not write your name on the questionnaire.			
PART ONE : GENERAL			
1.1	Name of church		
1.2	Gender	1. Male 2. Female	
1.3	Age		
1.4	In the church are you	1. Clergy 2. A leader 3. A regular member 4. A visitor	
PART TWO:ATTITUDES TO GENDER			
		AGREE	DISAGREE
2.1	A good woman obeys her partner even if she disagrees		
2.2	Family problems should only be discussed in the family		
2.3	It is important for a man to show his partner who is the boss		
2.4	A woman should be able to choose her own friends even if her partner disapproves		
2.5	A woman must have sex with her partner even if she doesn't feel like it		
2.6	If a man mistreats his partner, others outside of the family should intervene		
2.7	A man has a good reason to hit his partner if:		
2.7.1	▪ She does not complete her housework to his satisfaction		
2.7.2	▪ She disobeys him		
2.7.3	▪ She refuses to have sex with him		
2.7.4	▪ She asks him if he has other girlfriends		
2.7.5	▪ He suspects she is unfaithful		
2.7.6	▪ He finds out that she has been unfaithful		
2.8	A man should always have the final say		

2.9	If a woman works, she should give her money to her partner		
		AGREE	DISAGREE
2.10	A woman needs her partner's permission to do paid work		
2.11	It is a woman's job mainly to take care of the home and cook for her family.		
2.12	There is nothing that a woman can do if her partner wants to have a girlfriend.		
2.13	A woman should tolerate being beaten in order to keep her family together.		
2.14	It is okay for a woman to ask for divorce or separation when:		
2.14.1	▪ she is afraid he may infect her with HIV		
2.14.2	▪ her husband never listens to her		
2.14.3	▪ he beats the children		
2.14.4	▪ he hits her frequently		
2.14.5	▪ he spends money on other children and not his partner and children		
2.14.6	▪ he is unfaithful		
2.15	It is okay for a man to ask for divorce or separation when:		
2.15.1	▪ she never listens to him or does not value his opinion		
2.15.2	▪ she cannot have children		
2.15.3	▪ she has not given him a male child		
2.15.4	▪ she does not do her housework well		
2.15.5	▪ she is unfaithful		
2.15.6	▪ he is afraid she may infect him with HIV		
2.16	A woman has good reason to refuse sex with her partner when:		
	▪ she is afraid he will infect her with HIV		
	▪ she is menstruating		
	▪ she is pregnant		
	▪ he beats her		
	▪ he has relations with other women		
	▪ she has recently given birth		
	▪ she is tired and does not feel like it		
2.17	It is okay for a man to force his partner to have sex		
2.18	It is okay for a man to have multiple partners		
2.19	Sexual violence does not include unwanted touching		

2.20	Women mean yes when they say no to sex.		
2.21	Women who are raped are often asking for it		
2.22	A woman who wears sexy clothing is wanting to have sex		
2.23	It is not rape if a married man forces his wife to have sex		
	THREE : THE CHURCH'S RESPONSE		
		AGREE	DISAGREE
3.1	The Church's teaching on divorce is that you must stay together whatever the circumstances		
3.2	The Church teaches that a man must sometimes discipline his wife		
3.3	The Church teaches that man is the head of the household.		
3.4	Does your church offer support for : a. those who have been raped b. those who have been divorced?		
3.5	Women in abusive relationships sometimes 'bear their cross' and stay in them.		
3.6	Does your church take a stand on issues of rape, domestic violence and teenage pregnancy in the community?		
3.7	If so, what do they do?		
3.8	What is the attitude of your church leadership towards rape and domestic violence? (Choose one answer)	1. They do not care 2. It is very important to them 3. I do not know	
3.9	Have you ever heard sermons/messages about rape and domestic violence in your church? (Choose one answer)	1. Never 2. Sometimes (only once a year) 3. Frequently (more than once a year)	
3.10	What support does your church offer to women or girls who have been raped?		
3.11	What support does your church offer to those who have been divorced?		
3.12	How does your church deal with teenage girls who fall pregnant?		
3.13	How does your church deal with boys who get their		

	girlfriends pregnant?	
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Thank you very much for taking the time to fill in this questionnaire, with your help the Church can offer a more effective ministry.