

THE SOCIO-CULTURAL INFLUENCES ON SEXUAL AND REPRODUCTIVE  
RIGHTS OF WOMEN IN THE CHURCH FORUM IN SWAZILAND

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Pietermaritzburg in South Africa.

**SUPERVISOR**

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**12th MATCH 2014**

## **DECLARATION**

In accordance with the University regulations, I hereby declare that this work has not been presented at any other University or any other institution of higher learning other than the University of KwaZulu-Natal (Pietermaritzburg Campus), and that unless specifically indicated to the contrary within the text, it is my original work.

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**12<sup>TH</sup> MATCH 2014**

As candidate supervisor I hereby approve this thesis for submission



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**PROF. RODERICK R HEWITT**

**12<sup>TH</sup> MATCH 2014**

## **DEDICATION**

I dedicate this work to my daughter Eglá Shukrani Miriágo. Thank you for your prayers and patience all this would not have come to a completion without your prayers.

## **ACKNOWLEDGEMENTS**

The completion of this study is a product of the contribution of many persons to whom I owe my gratitude. First and foremost, I would like to extend my thanks to the Almighty God for mercifully granting me health, peace, wisdom and grace which enabled me to accomplish this task.

Secondly, I am profoundly grateful to my Supervisor Rev. Professor Roderick Hewitt, who is also the Academic Leader in the School of Religion, Philosophy and Classics. It is his remarkable commitment to academic excellence, humility, integrity and critical engagement in the entire process of my study that has made this study possible.

## **ABSTRACT**

This study has endeavored to find out socio-cultural factors that influence gender injustices with special focus on sexual and health reproductive rights of women in Swaziland community. It has further examined the extent to which Church Forum as ecumenical instrument has addressed these issues of concern. It has been argued that gender injustice in Swaziland is a result of multifaceted factors. In the first place, the model of governance stands at the apex in championing gender injustice while perpetuating the violation of women sexual and health reproductive rights. It has been found that Swaziland community has embraced a hybrid of both Western and traditional features of governance where the preeminence of the traditional element has been evident. Patriarchal dominance is the second another contributing factor to the plights of women's gender injustice on issues of sexual and health reproductive rights. This has been compounded by polygamous marriage which is overwhelmingly evident and which is honored, respected and cherished throughout the community. Coupled with absolute poverty, a third factor, these are the critical factors that have significantly contributed to promoting gender injustice forcing most women to engage into a risk unhealthy sexual and reproductive behavior. The Church Forum, which stands as ecumenical instrument has made an intense attempt in addressing issues that affect the entire community of Swaziland, particularly women's concern. However, this study has revealed that the church engagement has been narrowly limited to HIV and AIDS and food security. It is due to this deficiency of the church engagement into the broader perspective of gender inequalities, unhealthy women's sexual and reproductive rights have persisted. In this regard, the study has suggested that the ecumenical body in Swaziland should take a more holistic life-affirming approach in order to address women's gender concerns comprehensively. Such approach must begin with a re-envisioning ecumenical commitment while incorporating aspects of radical feminist approach in order to foster life-enhancing change in Swaziland Community, especially women sexual and health reproductive rights.

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## **ABBREVIATIONS**

CEDAW - Convention on the Elimination of all forms of Discrimination Against Women

CF - Church Forum

CTL - Customary Tenure Land

FAO - Food Agriculture Organization

FGM - Female Genital Mutilation

GBV - Gender Based Violence

ICPD - International Conference on Population and Development

MDGs - Millennium Development Goals

(NCP)- Neighboring Care Points

SADC - Southern Africa Development Community

SDHS - Sexual Reproductive Health Survey

SNL - Swazi Nation Land

SWANNEPHA - Swaziland Network of People living with HIV and AIDS

TDL - Title Deeds Land

UNFPA - United Nation's Population Fund

WSRHR – Women's Sexual Reproductive Health Rights

## **CHAPTER ONE**

### **GENERAL INTRODUCTION AND BACKGROUND**

#### **1.1 INTRODUCTION**

This chapter offers a general introduction to this study. Its objective is to present various aspects of the study that include the background and identification of the research problem, the research questions and objectives. Furthermore, the chapter offers a brief literature review, the theoretical framework adopted by study, the research design and the methodological underpinnings before presenting the entire structure of the study.

#### **1.2 Background of the Study**

Isabel Phiri and Sarojini Nadar (2006:9) describe women's health as the physical, emotional, social and psychological wellbeing of women. According to the 2010 Millennium Development Goals (MDGs), particular attention has been paid to improving women's health conditions worldwide as articulated in the MDGs 4 and 5. MDGs are part of the eight international development goals that were established after submit of the UN in 2000. This summit established goals among member countries to create universal education for all primary education, eradicate poverty, promote gender equality and empowerment of women etc. Women's access to health has continued to be a major challenge especially in Africa, hampering the achievement of the MDGs with regard to improvement of women's health.

Therefore, it is contended that women in Africa have limited access to their sexual and reproductive rights. This is due to certain socio-cultural African practices, or understandings of reproduction (Kholika 2006:2, Masenya 2003:125). Similarly religion, especially Christianity, has played both a passive and active role in promoting women's sexual and reproductive rights<sup>1</sup>. This has led to questions about the role of religion in advocacy for women with the view to achieve the anticipated Millennium Development Goals MDGs. Religion has been criticized for its patriarchal structures and literal interpretation of scripture, factors that have undermined women's sexual and reproductive rights (Masenya 2003:125). Due to the preceding obstacles, it has become imperative for men in Africa, especially in Christian faith communities, to make

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<sup>1</sup> Human right is a concept based on the principle that human beings are born free and equal and that by virtues of being human. Rights can also be universal AMICAALL-SWAZILAND 2008:4-5

decisions on what is “good praxis” in regard to women’s sexual and reproductive health. Swaziland is not an exception to this.

There is an interdenominational organization that is called the Church Forum (CF) in Swaziland that is tackling HIV and AIDS as one of the negative consequences of women not having the freedom to exercise their reproductive and sexual rights. The identity, vocation and witness of the CF embrace an ecumenical framework in its response to women’s sexual and reproductive rights in Swaziland. This study examines the underlying cultural, religious and socio-economic factors that influence the sexual and reproductive health rights of women and the ways in which the CF addresses them.

The context of Swaziland is significant for this study because it provides the background to some of the important issues that affect women’s sexual and reproductive health. According to the Swaziland Demographic and Health Survey (SDHS) 2006/07, the country is among those with the highest prevalence of HIV in Africa. According to the Joint United Nations Program on HIV/AIDS of the UN and the World Health Organization (2006:6), 33% of Swazi adults were living with HIV in 2005. However the UNAIDS 2012 report estimated that 26.5% of people were living HIV and AIDS which remains high, at slightly over one quarter of the Swazi total population (UNAIDS 2012). Mbelu (2013:10) points out that Swaziland is a country of less than one million people and with over a quarter infected, it is facing unprecedented challenges which are evidenced by the worsening human development indicators.

Given its very high rates of HIV infection, the Church of Sweden selected the Church Forum in Swaziland as a mission partner in response to women’s sexual and reproductive health needs. Their outreach project in Matsapha is part of the pilot project in Swaziland. The project is jointly undertaken with Siphilile in Matsapha (Siphilile 2013).

The study pursue the discipline of Gender and Religion studies and therefore, explore the socio-cultural influences on sexual and reproductive rights of women in the Church Forum in Swaziland using a theoretical framework that employs ecumenical hermeneutics. It will be argued that the Church Forum, being an ecumenical community, is driven by this ecumenical identity to address factors that underpin sexual and reproductive health of women. To this end, the study seeks to find out the extent to which the Church Forum is playing a positive role in the

promotion of Swazi women's reproductive and sexual health/rights. The underlying assumption of this study is based on the hypothesis that women's sexual and reproductive rights can be better served if the church, through its ecumenical identity, vocation and witness, engages in joint action for the common good. In addition, attention will focus on the strategic role that patriarchy, and its expression through polygamy (upheld by cultural and religious beliefs) and socio-economic injustice, contributes to the challenges faced by women in accessing their sexual and reproductive health rights.

Another important tenet that this study must take into account is the gender identity of the researcher. Being male and located within the leadership of the Redeemed Gospel Church in Kenya, the researcher is cognizant of being part of that gender that is accused of intentionally denying women their sexual and reproductive rights because of being addicted to the maintenance and preservation of male power over women. Therefore the researcher, through his exposure to both contexts, has observed the strategic roles that women play as productive agents in economic development - from the family to the highest level of the state. It is therefore my primary concern for gender justice that has influenced the choice of this study. The researcher's current location as a theology student in the Gender, Religion and Health's Pilot program has afforded him the opportunity to engage with the Church Forum project in Swaziland.

### **1.3 Research Problem,**

Socio-cultural and religious practices and socio-economic conditions shape women's sexual and reproductive rights (Hallonsten 2012). Addressing these is crucial in bringing about gender equality. Therefore, the research problem of this study seeks to identify and uncover selective socio-cultural factors that influence the sexual and reproductive rights of Swazi women within the Church Forum and how they are being addressed. In response to the research problem, the core research question is:

### **1.4 Questions and Objectives**

What are the socio-cultural factors that influence the sexual and reproductive rights of Swazi women within the Church Forum and to what extent are they being addressed?

From this core question the following sub-questions are delineated to facilitate a comprehensive response to the research problem:

1. What is the status of women's sexual reproductive rights in Swaziland?
2. What are the ways in which the socio-cultural factors influence Swazi women's sexual reproductive rights?
3. How does the CF respond to the threats to sexual and reproductive rights of women within CF?
4. To what extent are the sexual reproductive rights of Swazi women influenced by socio-cultural factors related to patriarchy as expressed through culture and religion?

### **1.5 Research Objectives**

The study is guided by the following objectives:

1. To identify the status of women's sexual and reproductive rights in Swaziland.
2. To examine the influence of socio-cultural factors on Swazi women's sexual and reproductive rights
3. To assess how the CF is responding to threats to women's reproductive and sexual rights
4. To evaluate the extent to which the CF functions as a life-giving ecumenical instrument in the context of women's sexual and reproductive rights

### **1.6 Research Hypothesis**

This research argues that abuse of sexual and reproductive rights of Swazi women is rooted in the patriarchal power structure that existed in the country before, and has continued after, independence. From this premise, it is plausible to conclude that women's subjugation has always been a part of the Swazi Culture<sup>2</sup>.

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<sup>2</sup> Swazi culture, practice, beliefs and Customs, how women are understood and treated Swazis are the people of Swaziland sometime also referred as "Swati's"

### **1.7 Preliminary Literature Study and Reasons for Choosing this Study**

Gathumbi (2007) in her work “Making reproductive health rights a reality” argues that throughout the world, gender inequality permeates every society and every aspect of women’s life. She postulates that violence against women has consequences for those women affected. According to Gathumbi, gender inequality denies women access to their reproductive health, rights. Gathumbi (2007:77) adds that most women who undergo who are domestically abused by their intimate partners may not have an opportunity to access reproductive health. Therefore, Gathumbi argues that it is imperative for every woman to have the right to access basic healthcare services and information. This is because, women reproductive rights forms part of basic human right that are mainstreamed in several international conventions and instruments such as the Convention on Elimination of all forms of Discrimination Against Women (CEDAW) among others.

However, despite the fact that women sexual and reproductive rights having been enshrined in the many organizations’ constitutions, it is disappointing that within the health sector, violence against women is still being perpetuated (Gathumbi, 2007:77). Such women, who live within violent contexts, remain without adequate access to reproductive health services. However, Gathumbi points out that culture plays a role in perpetuation of women’s sexual and reproductive rights. Majority of health workers are products of a culture that view gender-based violence as a normal way of life and do not feel obliged to pay attention to women with the signs and symptoms of abuse (Gathumbi, 2007:77). Confirming the normalization of the violation of women’s sexual and reproductive rights, the 2001 World Health Report observes that “the recurrent abuse among women can become ‘normalized’ and women are then also at risk of other psychological problems, for example traumatic stress disorder (Ageng’o 2007:77).

According to Ageng’o (2007:6), violation of women’s sexual and reproductive rights in Africa is a product of retrogressive cultural practices and traditions, poverty and armed conflicts. Ageng’o points out that patriarchy has had an upper hand in implementing discriminatory laws and policies that renders women incapable of enjoying their sexual and reproductive health rights. This leaves women in an inferior position (Ageng’o, 2007). Ageng’o points out that several African countries have provided free primary education without discrimination on the basis of sex, however many girls drop out after the first few years mainly because of domestic

responsibilities (2007:7). It is such discrimination that has made the World Bank (2002:3) to regard gender inequalities in Swaziland as a major contributor to poverty. Therefore, it can be argued that lack of gender sensitive laws and policies endanger the lives and health of women around the world in general and Swaziland in particular.

In spite of the important role of women within Swaziland, the continuing socio-cultural impediments have restricted the pace of their development. Their inequality persists because gender roles and expectations are deeply entrenched within the Swazi society. Swaziland is a highly patriarchal society (Nyanhongo 2011:9). Some of the identifiable oppressive patriarchal aspects include polygamy-polygyny, arranged early marriages for girls, sacrificial marriages for the benefit of male children and general subordination of women's rights. The Pan-African Christian AIDS Network (2011:32) claims that although Swaziland has been able to combine modern ways with traditional ways in its form of governance, women's sexual and reproductive rights have continuously been violated.

The socio-political system seems to be intentionally designed (Ageng'o 2007:7) to ensure that political and religious powers are primarily the prerogative of men. This has heightened the gender stratifications in which women suffer most. The use of tradition and culture to deny certain members of the community fullness of life by denying them their sexual and reproductive rights should be called into question, regardless of their legitimacy as constituting historic practices within the community. Within the Swaziland monarchial system of governance it is very difficult to question socio-cultural influences that are bequeathed by their tradition. The commitment to protect tradition even at the expense of the sexual and reproductive rights of women carries grave consequences of perpetuating sexual abuse and gender discord.

Underpinning this study is the argument by African woman theologians who emphasize that there is a link between culture, religion and the wellbeing of women in Africa. Culture and religion are intimately linked to who a person is, rich or poor, male or female, white or black and this is all about identity. In the context of this study the wellbeing of black Swazi women is the focus. It is necessary to engage with the theory of African feminist theologies to discover how in their views, the identity of these women is shaped so that they become oppressed and unable to access basic human rights, including human reproductive and sexual rights.

In the work of Madipoane Masenya (2003:114), she notes that both the Bible and African culture have been used as a negative tool to undermine the wellbeing of African women. She argues that African culture has continued to dominate and undermine African woman irrespective of their status within the community. The lived experiences of women in Africa have thus been shaped both the interpretations of the Bible from a patriarchal position and by cultural norms which place males above females. It is from this vantage point that Tsvakai Zhou (2013:75) sees women's identity as intrinsically linked to female submission to oppressive practices and values, supported by religion, because scriptures are read through the lenses of patriarchy which suggests that women should remain subordinate to men.

Masenya (2003:114) says "our rootedness in African culture as African women makes us susceptible to define womanhood/manhood which is detrimental to our well-being as women". She laments that the Bible has been interpreted for African Christian women by men to suit their interest, while on the other hand women have been socialized to absorb these male interpretations.

In the opinion of Zhou (2013:76) patriarchy has oppressed women to the point that they can hardly stand directly with God and present their petition because African culture only allows them to connect to God through men. Rakoczy (2004:183) confirms that the identities of women as mediated through the religions of Jewish and Gentile traditions coupled by class, race, and ethnicity which make the matter worse for women in regard to their liberation. Kanyoro (2010:22) further notes that cultural practices like female genital mutilation, lobola, polygamy, the male prerogative to inherit land remain fundamental in shaping women identity.

Although women have contributed to uplifting society in many ways, the literature reveals that the women's identity is shaped by cultural and religious forces. Indeed, culture and religion dictates the gender specific ways in which women determine their future, both in terms of economic and social development and – relevant for this study – in terms of wellness. Culture and religion are thus the key components in deciding the fate of African women.

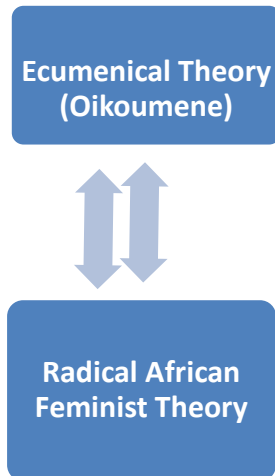
In Swaziland where this study is located, (Linda van Rooyen and Cycil Hartell 2010:320) affirm that since the earliest times, conventional and extremely conservative attitudes are the norm. They mention the 'medieval traditions' that prescribe to women what they might or might not do,

what they should or should not wear, etc. arguing that the sustained observance of this practice confirms the fact that women are viewed as 'legal minors' in Swaziland.

## **1.8 Theoretical Framework**

This study uses two theoretical frameworks, namely, ecumenical theory and radical feminist theory to gain a full understanding of how sexual and reproductive rights for women in Swaziland are perceived by the society and Christian church. However, the study engages ecumenical theory as the main theory in the discussion while radical feminist theory fills covers aspects that the former theory is unable to deal with in developing an understanding of certain questions the study seeks to answer. Since unity and wholeness are constitutive ingredients of ecumenical theory, it is plausible that ecumenical theory becomes a natural ally with radical African feminist theory in the quest for justice for women (Simidele Dosekun, 2007). It follows that there can be no just ecumenical engagement that does not embrace a commitment to gender justice.

To begin with, ecumenical theory is about affirming life as whole (Raiser, 2002). The guiding principle is derived the word “ecumenical” which has its roots in the Greek word, *Oikoumene* meaning, “the whole inhabited world and humanity” (Konig 1984:176-7). In this context, the theory connotes being in a community, the ecclesial community, that is committed to the promotion of unity and wholeness for all of God’s creation by engaging in ecumenical action (Raiser 1991:742). In this study, Christian unity seeks to provide common witness in mission and evangelism as a way of promoting a just and equitable society that does not discriminate others because of their gender (Raiser 1991:742). In this sense, women are considered as partners in the endeavor and not just passive recipients.



Radical African feminist theory pursues truly fundamental equality between women and men in Africa. It aims not to replace men with women, “but rather to transform the very structures of our societies which produce and perpetuate gender [and sexual] inequalities” (Dosekun 2007). The theory seeks firstly, to bring about transformation by examining women’s situations and advocating on their behalf. Secondly, it seeks to radically overhaul all power relations that result in the disempowerment of women. Thirdly, “it advocates for mutuality and respect in the place of hierarchy, abuse, oppression and exploitation” (Dosekun 2007). Finally, it works toward peace, justice and freedom. Therefore, radical African feminism in partnership with ecumenical theory provide a proper understanding of how Swazi patriarchal structures can deconstructed to create an egalitarian society in which women can be perceived as equals in developing the society and address social injustices including sexual reproductive and health rights for women (Dosekun 2007). However, the question, which this study seeks to answer, remains: does the Church Forum Community in Swaziland have same perception in relation to sexual and reproductive rights of women as espoused by both international bodies; and does this perception also mirror the understanding of gender rights espoused by radical African feminism while echoing at the same time the goals of the ecumenical movement?

### **1.9 Research methodology and design**

This study is qualitative in design and praxis. A qualitative study utilizes both primary and secondary data (Mouton, 2001:145). This study is qualitative-textual because it relies on literature as its primary source of data. This study will therefore utilize existing relevant

literature on sexual and reproductive health of women in Swaziland and especially the data available through the CF.

A Qualitative research such as this raises a number of concerns for example it often influences how people observe and report phenomena which intend breeds possibilities of partiality. To allay this concern, Lincoln and Guba (1985) argue that researchers should be content with prior research, provided it meets the four criteria of qualitative research which are: “(a) truth–value (credibility); (b) applicability (transferability); (c) consistency (dependability); and (d) neutrality (conformability)” (Lincoln and Guba 1985 in Thomas and Magilvy 2011:152). The information used in this study will be drawn from various sources with the hope that conflation and analysis of these different sources will meet the four criteria mentioned.

In meeting the preceding criteria, the study will follow three steps: a historical evaluation, a critical social evaluation and a theological evaluation. The historical evaluation is limited in scope to embrace only an overview rather than an in-depth historical analysis of the biographical story of Swaziland and its cultural, political, and economic context. This will aid the study in understanding the context in which the CF works. The social evaluation will involve an analysis of how the cultural, political and economic situation in Swaziland impacts on women’s reproductive rights. African feminist cultural hermeneutics (Kanyoro 2002, Phiri and Nadar 2006, Njoroge 1997, Phiri 1997) will assist to evaluate the role Swazi culture plays in the way the forum approaches women’s sexual reproductive rights. Lastly, a theological evaluation will involve analyzing how the CF ecumenical instrument responds to sexual and reproductive rights of Swazi women.

### **1.10 Sources of Data**

The data used in this study has been garnered from materials on the socio-cultural influences of women’s sexual and reproductive rights in Swaziland. Some of the data provided are from secondary sources that could be challenged because of the risk that facts have been embellished and manipulated for reasons of propaganda. However, secondary data is based on what meaning and interpretations people attach to phenomena (Hopkins, 1980:256). In fact, this data has certain advantages which primary data cannot proffer. A person who observes phenomenon from an outside perspective (qualitative) could provide a neutral assessment free of emotional judgments and compromised conclusions.

### **1.11 Research Limitations**

The researcher entered into this study without the authority of prior knowledge of the Swaziland socio-political and religious context and how the socio-cultural influences affect sexual and reproductive health rights of women within the church forum. However, my exposure to the academic discipline of gender and religion has equipped me with insights that should offer fresh perspectives on the unique context of Swaziland and its socio-cultural influences on the sexual and reproductive health of women.

### **1.12 Structure of the Dissertation**

The study is developed in seven chapters. Chapter one presented the motivation, research problem, key research question, sub-questions and objectives, method and theoretical framework of this study, the scope of study and conclusion. Chapter two offers the contextual background of the political, economic, cultural and religious environment of Swaziland. It begins with identification of Swaziland's location on the map of Africa and then proceeds to argue that political, religious, economic and cultural influences are playing a key role in the subversion of Swazi women's sexual and reproductive rights. The objective of the chapter is to establish the background to women's subjugation in Swaziland and how the government has been addressing women.

Chapter three constitutes the review of women's sexual and reproductive rights. This chapter traces the origin, development and mainstreaming of women sexual and reproductive rights. In relation to Africa, it is argued that the implementation of global women's sexual rights has been impeded by retrogressive cultural practices and traditions, poverty and armed conflicts (Ageng'o, 2007:6). The central objective of the chapter is to outline what is happening in Swaziland and whether it is indicative of many African countries in regards to the implementation of women's sexual and reproductive health rights.

Chapter four will continue to explore the understanding of women's sexual and reproductive rights, emphasizing the point that the Swazi men have assumed an intrinsic superiority over women. Chapter five discusses the socio-cultural factors that influence and undermine Swazi women's sexual and reproductive rights. It will categorize socio-cultural factors into three: structural (patriarchy, governance, socio-political and economic factors), cultural (patriarchy,

cultural practices) and religious. However, the chapter contends that patriarchy is a foundation on which others factors that influence women's sexual and reproductive rights are constructed.

Chapter six analyzes qualitatively the ecumenical identity and vocation of the Church Forum and the extent to which it functions as a life-giving ecumenical instrument in addressing women's sexual and reproductive rights in Swaziland. This chapter offers theological reflections on the response of the CF in Swaziland in addressing the plight of women in terms of the violation of their sexual and reproductive rights. The chapter uses an array of interpretive techniques in discussing, describing, decoding and translating the data collected and making meaning of the available data of the CF response to Swazi women's sexual and reproductive rights.

Chapter seven concludes the study, giving attention to key summaries of each chapter and identifying strategic perspectives that emerge from the study and their implications.

### **1.13 CONCLUSION**

This chapter has set the scene for what the study seeks to do and how it seeks to achieve it. The study asserts that there are various perspectives concerning the socio-cultural influences on women's sexual and reproductive rights in Swaziland. The aspect of gender identity is very crucial in bringing about gender equality if the CF has to achieve its stipulated goal. It has also been noted that both the Bible and African culture have been used as a destructive tool to undermine the wellbeing of African women prompting the church to question. The next chapter explores the background information on the political, economic, cultural and religious situation in Swaziland.

## **CHAPTER TWO**

### **BACKGROUND OF THE POLITICAL, ECONOMIC AND RELIGIO-CULTURAL SITUATION IN SWAZILAND**

#### **2.1 INTRODUCTION**

The previous chapter was preliminary in its thrust. It introduced the background to the study and the reason for choosing the Church Forum as the location of the study. The study by no means purports that this is the only way of uncovering the plight of women's sexual and reproductive right in Swaziland. This chapter introduces the geographical location and context of Swaziland that consists of a brief introduction to its demographic, political, religious, cultural and economic situation. In addition, the religious and cultural patriarchal systems that underpin the structure of the society and its traditions will be identified. The chapter concludes with tentative indicators of some of the root causes of the sexual and reproductive subjugation of women that constitutes threats to their health.

#### **2.1 Location of the Kingdom of Swaziland within Africa**

Swaziland is located in Southern Africa and is surrounded by the nations of South Africa and Mozambique; the mainstay of its economy is agriculture, forestry, and mining (Ministry of Health 2013:11). 60% of the population is Christian but culturally, traditional practices continue, for example, the reed dance. Swaziland is a country with a population of 1,018,449 million (Ministry of Health, 2013:10). The Ministry of Health further points out that in Swaziland, females make up 52.6% of the total population and the corresponding proportion for males is 47%. The total population of reproductive age (15-49 years) was at 53.5% in 2011 (Ministry of Health, 2013:10). The population of Swaziland is generally young, with 47% of the total being aged less than 18 years (Central Statistics Office, 2007).

## **2.2 Political Organization (form of governance)**

The Constitution of the Kingdom of Swaziland (2005:15) states that Swaziland is a unitary, sovereign, democratic kingdom. The Kingdom gained independence from Britain in 1968. In pre- 1973, the political system of Swaziland comprised a multi-party democratic process within a monarchical system (Whiteside et al, 2006:15). In 1973, King Sobhuza II assumed legislative, judicial and executive powers. He repealed the Constitution and banned all political. Sobhuza II introduced the *tinkhundla* system of governance, whereby individuals are elected into parliament through various constituencies (Whiteside et al, 2006:15). The King took over the role of appointing the prime minister and cabinet. The current King Mswati III has continued the legacy of his father. However, he has allowed the promulgation of a new constitution that defines the powers of the King (Whiteside et al, 2006:15).

Kumalo (2013:58) argues that access to power is not by ballot but rather inherited from father to son. This point is backed up by Article 1 (4) 1 of the Swazi Constitution, which points out that the King and Ngwenyama of Swaziland is a hereditary Head of State and shall have such official name as shall be designated on the occasion of his accession to the throne. The Kingdom of Swaziland is a male dominated affair (only sons can inherit power) with no women allowed to rule. Kumalo (2013:58) explains that the Queen Mother is referred to as the she-elephant (*indlovukazi*) whose main work includes preserving Swazi culture, being a custodian of the rain-making rituals, and running the royal household. She has equal powers to that of the King, but this is not borne out in practice. The current government maintains a dual system of governance, with a modern government led by a Prime Minister as well as a traditional system of government run by the chiefs who report to the King as *Ingwenyama* (Whiteside et al 2006:15).

## **2.3 The Economy of Swaziland**

Swaziland is classified as a low middle income country, with per capita income of approximately US\$1350 (ACTSA, 2010:6). The World Health Organization (WHO 2010) contends that the distribution of income in Swaziland is highly imbalanced. A certain class of individuals is very wealthy while the majority of population is left in a state of abject poverty. The World Health Organization (WHO 2010:1) report estimates that 63% of people in Swaziland live below the poverty line. In the same report, WHO (2010) points out that this per capita income could sustain the whole country of Swaziland, but most of the resources fall into the hands of the elite group.

According to the report, there was also an increase in unemployment from 22% in 1995 to 29% by 2010 (WHO 2010). The HIV and AIDS pandemic also contributes to people's loss of employment. An estimated 210,000 to 230,000 out of the estimated Swaziland population of 1.018 million are infected with HIV (Swaziland Demographic Survey 2006-2007). This translates into about a quarter of the total population.

#### **2.4.1 Food Security**

Food security can be argued to exist if and only if, people have physical and economic access to sufficient, safe and nutritious food at all times (FAO, 1996:3). In relation to Swaziland's situation, from 1999, the principal goal of the government has been to achieve food security. The government of Swaziland has enacted an agricultural self-sufficiency policy that is centered on the production of the main staple crops such as maize (Terry and Ryder, 2007:263). The government has also increased export earnings from the agricultural sector via large scale privately owned commercial estates. As a result, there is widening agricultural productive gap between Swazi Nation Land (SNL) and privately-owned Title Deed Land (TDL). This is causing chronic food insecurity among the Swazi population. Ironically, 80% of female headed families in Swaziland are involved in gardening as a way of combating food insecurity. On contrary, it is only 76% of male-headed families that are engaged in farming (Terry and Ryder, 2007:267).

#### **2.4 Cultural practices in Swaziland**

Many cultural practices are practiced in Swaziland. Majority of these cultural practices are organized by the King and the Queen Mother who are the rulers of the country. The present King, Mswati III serves as both a political and a traditional leader (*Ingwenyama*<sup>3</sup>). The king plays a key role in the organization of the annual reed dance Whiteside et al (2006:18).

Traditionally, polygamy is a common cultural practice where Swati men marry more than wife. However, the opposite cannot be thought of as it is illegal. Whiteside et al (2006:18) argue that the Swati men see polygamy as a way of safeguarding a man from engagement in casual sex. Ironically, many modern Swazi men locate their wives in different homesteads and geographical location across the country. This practice of modern polygamists has opened for additional sexual partners. As a result, it made wives vulnerable HIV, sexual dissatisfaction and loss of

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<sup>3</sup> The title given to the king as a traditional leader

financial support from their husbands. However, Dlamini (2005) quoted in Whiteside et al 2006:18) argues that many married women (who are sexually dissatisfied) are having extramarital relationships with their secret lovers.

Also, in Swaziland, it is customary for the widow of the deceased brother or the next of kin to be inherited to male within the family. Although the widow is under no obligation to have sexual relations with the male, it is expected and almost unavoidable (Whiteside et al 2006:18).

Similarly, many Swati practice *Kushenda*<sup>4</sup> - a traditional practice that allows a young unmarried woman to act as a concubine with an intention of getting married later.

#### **2.4.1 The Yearly Reed Dance**

Enongene Mirabeau Sone (2008:2) observes that, before the introduction of Western education, Swazi children acquired knowledge of their culture and its material expression by participating in the everyday life of the community. Every child came therefore to learn how to sing, dance and appreciate good performance as part of the early socialization. In the argument of Sone (2010:113) traditional Swazi people have an essentially functional approach to life, so that the element of spectacle or oral performance is not an end in itself but rather is thought to be appealing mainly to the extent to which it fulfills its purpose. Its main function is seen to be to serve as an instrument for creating social, emotional and aesthetic community solidarity (Sone 2010:133).

Gugulethu Sebenzile Nkosi 2013:18) states that the ritualistic and ceremonial nature of the reed dance has specific social implications such as social contact, social interaction, and embracing changing population demographics and enhancing participation among its participants. The event is announced during the end of August or early September by the elders of the country, according to the position of the moon and the stars. Sone (2010:134) “the girls are summoned from all the chiefdoms to the royal Kraal. From the Kraal<sup>5</sup>, they form a long line and March to the reed cutting site (Sone 2010:134)”, they then carry the reeds with them in the ceremony “to the Royal Kraal where they present their bundles to the queen mother”. The purpose of the

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<sup>4</sup>

<sup>5</sup> The royal house of the king

cutting of reeds by married and unmarried women is to perform tribute Labour showing loyalty to the *Ngwenyama*<sup>6</sup> and *Ndlovukati*<sup>7</sup> (Sone 2010:11).

Swaziland National Network of People Living with HIV and AIDS (SWANNEPHA 2011:7) states that the annual reed dance is a custom of preserving girls' chastity and paying homage to the Queen Mother. SWANNEPHA Says "according to the Swazi culture only virgins are allowed to participate in the dance, this is the time the virgins present the queen Mother Ntombi with reeds which she uses to build windcreens around the royal village". It is contended that 30,000 girls take part in the dance every year. Although the event is colorful and exuberant, in the opinion of SWANNEPHA (2011:5), there are mixed feelings within the communities in Swaziland with regard to the reed dance.

Swazi culture embodies traditional morality which is instilled in girls through regular education, as Hilda Kuper (1978:109) points out. She begins by affirming the moral respect of the Swazi's for sex, highlighting "their recognition that the physical desires of the young were natural and healthy, and that fertility was the theme song of the universe". Sex in Swazi culture took on deeper dimensions since the power of sex was both creative and regenerative, and thus it should be approached by means of customs, and associated with growth in ways that will benefit a wider community. Kuper emphasizes the conflict between the missionaries' system of education that tend to look at sex "sex" an evil, and the approach of traditional Swazi culture and the reverence the Swazis displayed toward sex (1978: 109). Kuper (1978:109) further explains how the missionaries' approach to sex presented a major obstacle to [Swazi King] Sobhuza II's efforts to introduce a national educational policy in the 1920s and 1930s. The specific content of the policy was expressed through age regiments or *emabutfo*<sup>8</sup> of the boys and *umcwasho* for the girls"; because while he wished to maintain the sex education provided by traditional means, the missionaries were strongly opposed to this.

#### **2.4.2 Girls Initiation Rite of Passage in Swaziland**

According to SWANNEPHA (2011:7), 'Hyena' is a practice in which a girl's virginity needs "to be taken" by her uncles before she can be allowed to engage in any sexual relationship. The practice is seen as a means of verifying that the girl has indeed remained a virgin before she is

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<sup>6</sup> The title given to the king

<sup>7</sup> The title given to the queen

<sup>8</sup> Young men Warriors who are trained to fight in the battle, against any opposition.

bestowed to a man through marriage. In this way, it is said that girls are more likely to remain virgins if they know that their virginity will be checked. Any irregularities found would have consequences. The shame and ridicule experienced when found not to be a virgin is a deterrent to pre-marital sex. SWANNEPHA reports that due to the secrecy that surrounds the practice and the fact that the HIV status of the uncle may not be considered or known, this practice fuels the spread of HIV, especially among girls and women, and the men that go on to marry other women (SWANNEPHA 2011:7).

### **2.4.3 The tradition of Widow Inheritance in Swaziland**

Sisana Mdluli (2009:64) notes that in Swazi belief, death is seen as an unavoidable ending to all human life. It is a natural phenomenon that human nature can neither control nor regulate. In the Swazi culture therefore, upon the death of a man in a family, a woman is expected to be inherited by a brother or a close relative. This is a cultural practice in Swaziland in which the brother-in-law becomes the widows substitute husband and a father to the widow's children (SWANNEPHA 2011:6). Through the widow, the brother-in-law also receives all the property of the deceased, leaving the widow and the children with no choice but to submit to him in order to be taken cared for financially. SWANNEPHA further reports that it also depends on the age of the woman in this marriage; sexual relationships may either be mandatory or implied. For example, if the widow is of child-bearing age, she is expected to bear children for the new husband; but even if the woman is past child bearing age, sexual relations may be implied (SWANNEPHA 2011:6).

### **2.5 Religions of Swaziland**

The Swaziland Christian Handbook says that 80% of Swazis are Christian, while 20% are adherents of traditional religion (Rautenbach 2008:435). About 60% of Swazis belong to indigenous churches<sup>9</sup>, with the most rapid growth being in the independent charismatic African churches, in particular the Zionist Christian Church (ZCC), consisting of freestanding congregations under the umbrella of the ZCC (Marjorie 1994:21). The ZCC synthesizes mainline Christianity with traditional religious practices such as ancestor veneration (Benson 1997:51).

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<sup>9</sup> Indigenous churches this are local churches founded by the Swazi people and run by the locals or African founded churches.

From the 19<sup>th</sup> century, Christian missionaries have played a significant role in the country. It was King Somhlolo who tolerated early Christian missionaries (Rautenbach 2008:435). There is a legendary story that goes around Swaziland that King Somhlolo encountered a strange man with long hair that would bring two things: *umculu* (Bible) and *indilinga* (money). The voice directed the King to choose the *umculu*, that is, the Bible. From that time, King Somhlolo's vision paved the way for Christian missionaries in Swaziland (Rautenbach 2008:435).

The traditional Swazi religion follows broadly the pattern of African traditional religions, with the following components: a creator God, an ordered universe, human beings as integrated with the universe and with one another, the ancestors, and evil powers and imbalances as the source of suffering - for example, witchcraft (Hallonsten 2012:67-73). Among the Swazi traditional religion, the Queen Mother shares a dual monarchy with her son and together they serve the royal ancestor and make rain magic (2012:73).

Although Swazi women play subordinate roles within the central communal cults of traditional African religions, they frequently have important roles in personal rituals of status transformation associated with birth, puberty, and death. From the perspective of women's ritual and secular roles, the most important status transforming rituals are concerned with the transformation of a girl into a nubile maiden (Kilson 1976:139).

## **2.6 CONCLUSION**

This chapter discussed the background of the political, economic and religio-cultural situation in Swaziland. It has also highlighted the various cultural practices that are highly esteemed in the country as the traditional Swazi religion follows broadly the pattern of African traditional religions. It has been argued that the pride of the Swazi heritage entirely depends on their culture. Before looking at the specific work of the Church Forum, it is necessary to position women's sexual reproductive rights in a global, continental and Swazi context, which is the discussion for chapter three.

## CHAPTER THREE

### INTERNATIONAL AND REGIONAL PERSPECTIVES ON WOMEN'S SEXUAL AND REPRODUCTIVE HEALTH RIGHTS

#### 3.1 INTRODUCTION

The previous chapter established the location, political, cultural, religious and economic situation of Swaziland. The objective of this chapter is to define, conceptualize, women's sexual and reproductive Health rights (WSRHR) through different perspectives. Firstly, it offers a description of what is meant by WSRHR. Secondly, the chapter presents a brief overview of how the status of WSRHR has been advocated within Africa in general and the Kingdom of Swaziland in particular.

#### 3.2 Women's Reproductive Rights: Definitions and Conceptualization

Scholars differ on the understanding of reproductive rights. This depends on their background. For instance, Rebecca Cook et al (1996) in her article, *Advancing Reproductive Rights*, define women's reproductive rights as "legal rights and freedom in relation to sexual and reproductive health". Cook emphasizes that reproductive rights include the right to make decisions concerning reproduction in a manner that is free of discrimination, coercion and violence. Central to her understanding is the ability of the woman to act in the interest of the wellbeing of her health.

An understanding of women's reproductive rights given by the United Nations Population Fund (UNFPA 2011) points out that women should be free and responsible in deciding the number, spacing, and timing of the children they want. Similarly, UNFPA argues that women should have a right to information and the means of making reproductive decisions. Linked to the UNFPA, the International Conference on Population and Development (ICPD 1994) argues that women are endowed with reproductive rights, and autonomy is a primary component of their reproductive health. Therefore, according to ICPD (paragraph 7.3), any woman has a choice to decide on her personal matters regarding her fertility and sexuality without the consent of a man or any state coercion or violence. This ICPD assertion sees reproductive rights to be human rights like other rights. Similarly, the Centre for Reproductive Rights (2009:1) sees reproductive rights as a basic law that protects freedom of choice with regard to women's reproductive health. As men and women have different experiences when it comes to reproductive rights, Amnesty

International (2002) advocates specifically for the reproductive rights of women as a way of mitigating gender-based violence. Consistent with the above understanding of women's sexual and reproductive rights are respect for her human dignity to exercise and make decisions for the good of her health and not being put under pressure or being forced not to act in her best interest.

The preceding arguments concur that women's reproductive rights are rights among other national and international human rights. This gives women a right to access the necessary information on the available reproductive health care. Therefore, this study endorses the UNFPA (2011) understanding of women's reproductive rights, using it as a basis with which to critique the situation as regards women's reproductive rights in Swaziland. In this study, women's sexual and reproductive rights are understood as the right to make decisions concerning reproduction, free of discrimination, coercion and violence. This is because the UNFPA description of women's rights does not restrict sexual and reproductive rights to couples only - meaning it allows individuals to exercise their freely chosen sexual rights and to access information regarding their preferred reproductive health care.

### **3.3 Historical Origins and Mainstreaming of Women's Rights**

Cook et al. (1996) argues that it was during the 1995 Beijing Platform on Reproductive Rights, that equality in relationships between women and men in matters of sexual relations and reproduction was endorsed. This was as a result of the 1994 Cairo Program of Action. During the Beijing platform, it was recommended that there was a need for respect and integrity of the person on sexual consent between men and women (ICPD paragraph 96). Also, the Beijing platform documented the 1994 Cairo Program of action to become an international policy document. According to Knudsen (2006), the 1994 Cairo policy had given women power to control basic aspects of their relationships. This included; having sex free of coercion so as to avoid unintended pregnancy or sexually transmitted infections (Knudsen 2006:6). Also, the Cairo Program of Action calls for all countries to incorporate women's reproductive health care in their primary health care systems by 2015.

Lori, (2001) argues that the Cairo Conference on Reproductive Rights sought to introduce methods, techniques and services that were to contribute in improvement of women's sexual and reproductive health. The Beijing Platform also suggested the enhancement of women's personal relations. The new documented women's sexual and reproductive rights endorsed the inclusion

of women in political and economic decision making if women are to be the pivots around which our populations grows and expands( Asiimwe, 2007:15).

### **3.4 Global Strategies in Implementation of Women Rights and some Obstacles Met**

There are two instruments and agreements that are internationally known to fight for women's sexual and reproduction rights. These are; Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) and, the 1996 Beijing Platform (Thwala, 2010:156).

CEDAW was adopted in 1979 but was enforced in 1981. It was the first instrument that put together all the scattered women's human rights (Mukasa, 2009:27). CEDAW was hailed as the first Bill of Rights for women. CEDAW received 179 member states' ratification. Mukasa (2009) contends that in CEDAW's 30 Articles, the elimination of all forms of discrimination of women is authenticated. CEDAW sees the exclusion of women as having had an impairing or nullifying the recognition, enjoyment of women rights and fundamental freedom. It also denied them their contribution to political, economic, social, cultural, and civic life.

In CEDAW's article 2, all parties are required to commit themselves in ensuring that their respective governments comply with the regulations in eliminating all forms of discrimination in public and private institutions. This Article seeks to abolish all discriminatory laws, regulations, customs and practices. Similarly, CEDAW's Article 4 in there clauses, authorizes the adoption of special measures that would create temporary inequality in favor of women.

The 1995 Beijing Declaration and Platform for Action aimed at removing all obstacles against women's active participation in economic, social, civil and political decision-making (Mukasa 2009:39). The Beijing Declaration and Platform for Action (1995:2) sought to restore equality and development and peace for all women in the interest of all humanity. During the Platform, the focus was on acknowledgement of all the voices of women taking note of their diversity, roles and circumstances.

The declaration made during the platform has elevated the status of women in some important respects in the past decade despite the fact that there are persisting inequalities between women and men.

Ijeoma (2006:6) argues that the Beijing Declaration and Platform for Action ultimately embraced the provisions of the Cairo Program of Action on Reproductive and Sexual Rights. The Cairo Program of Action had called governments to support education on the human and legal rights of women in specific areas around the globe. This position was further emphasized by the Beijing Declaration's stance on reproductive and sexual rights as human rights. This implies that governments, the international community and civil society must take responsibility and are obliged to protect women's sexual and reproductive rights as they have protected other human rights (Mukasa 2009:39).

A similar position is held by the Center for Reproductive Rights Committee which argues that reproductive rights are fundamental to women's health. Therefore, international bodies should commit in ensuring that cultural practices that undermine women's sexual rights should receive serious attention (Ijeoma 2006:4). In its elaboration of equality of rights between men and women in general, the Committee directs states/parties to report on laws as well as on government or private actions that subjugate women's equal enjoyment of their right to privacy in the area of reproductive health.

### **3.5 Developments of Women Sexual and Reproductive Rights in Africa**

Since the focus of this study is Swaziland, there is a need to unravel how African states have progressed in development women's reproductive and sexual health rights. In Africa, the following efforts have so far been made as a respond to the issues of women's sexual and reproduction rights.

#### **3.5.1 The African Charter on Human and Peoples' Rights**

To respond to the issues raised by CEDAW in Africa, Mukasa (2009:32) points out that the African Charter on Human and Peoples' Rights was adopted in 1981 and was implemented in 1986. In its implementation, the Charter sought to address the missing links within the international human rights instruments in addressing human rights from an African perspective. Therefore the Charter sought to use a combination of African values and traditions with those of the international human rights organization in addressing the African situation (Mukasa 2009: 32). As stated by Ijeoma (2006:2), sexual and reproductive rights in multicultural and multi-ethnic societies within Africa have statutory/common laws, customary and religious legal systems. According to Ijeoma, the propagation of the term 'reproductive and sexual rights' by

international institutions and national policies in Africa can only be realized if an African approach is incorporated in their methods. This could be the reason why the African Charter on Human and People's rights was implemented.

This Charter is one of the instruments that seek to use an African approach in implementing civil and political rights such as non-discrimination, equality before the law, the rights to dignity and freedom, liberty and security of persons in Africa. The Charter gives women power to own property, to work under equitable condition and to receive equal work for equal pay. In addition, the Charter protects the rights to physical and mental health, education and freedom to participate in cultural activities (Mukasa 2009:32). Also, the Charter endorses that African families should enjoy the rights to protection and assistance from state. However, it is argued that the Charter is brief in touching on discrimination against women and children (Mukasa 2009:32).

In his argument, Houghton (2007:50) views the Charter to have recognized the importance of women's rights in four of its articles – these are Articles 2, 3, 18 and 60. Article 2 states that there should be equality in enjoyment of freedom and rights by all irrespective of their sex. Article 3 states that every individual will be equal before the law. Article 18(3) maintains that families should be protected and promises to ensure that all forms of discrimination against women including sexual and reproductive abuses are eliminated. Article 60 states that the African Charter on Human and People's Rights will draw inspiration from international human rights instruments such as CEDAW (Mukasa 2009:35)

### **3.5.2 The Protocol to the African Charter on Human and People's Rights of Women**

The Protocol to the African Charter on Human and People's Rights of Women was adopted to supplement that the African Charter on Human and Peoples' Rights. This protocol is so far the best initiative that was undertaken by African leaders in ending women discrimination (Mukasa, 2006:32). The Protocol on the African Charter on Human and People's Rights (ACHPR) came into effect on 21 October 1986. However, it was adopted by the AU on 11 July 2003. Article 26 of the protocol argues that, it is the obligation of the State to implement and monitor the rights of women through provision of funds and other resources.

The Protocol legitimates the fight against gender oppression as an African struggle. This was an attempt for African nations to adopt international human rights by addressing violence against women and prohibit harmful traditional practices (Mukasa 2009:4). The sole role of the protocol is to address issues such as health and reproductive rights including HIV and AIDS, and the exclusion of rape, sexual slavery and other sexual violence in crime against humanity.

Similarly, the protocol emphasizes that African state should ensure that the right to health of women, including sexual and reproductive health, is respected and promoted. Among these rights are; the right to control their fertility, the right to decide whether to have children, number of children and the spacing of children, the choice of any method of contraception, the right to be informed on one's health status and the health of one partner (Mukasa, 2009:36).

The protocol combines both the international standards and African values. This African women's protocol promotes equality in marriage with regard to decision making, property rights and children. The protocols seeks to uphold equal representation in political life and gives women the right to live in positive cultural policies as an instrument developed by Africans for Africans. In promotion of maternal healthcare, the protocol calls for the authorization of medical abortion for sexual assault/rape, incest or unsafe pregnancies (Mukasa 2009:59).

By 2009, it was only 13 member States of the African Union who had ratified the protocol to the African Charter on Human and People's Rights of Women in Africa (Mukasa 2009:42). The slow ratification of this declaration shows how it is difficult to engage the state the state in implementing women's sexual and reproductive rights. This shows how states have historically been the most hostile institutions in responding to advancement of the rights of women. This is also an explanation to why many regimes have laws that are discriminatory towards women.

Religious fundamentalism and conservatism has also had an upper hand in the slow implementation of women's sexual and reproductive rights (Mukasa, 2007:47). This has been due to an increasing resistance to progressive measures to protect the sexual and reproductive rights of women by many mainstream churches. As Mukasa (2007:43) argues, the existence of customary and religious law on one hand and statutory law on the other has compromised women's rights. Article 14 of the African Charter has proved to be the most contentious to be implemented in a number of African countries. Although this Article is the most liberating in

providing choice for women in matters of bodily integrity and autonomy, many African states are relaxed on its implementation (Gathumbi, 2007:79). This has made Africa to be seen as a continent that is characterized by oppressive gender relations.

However, Africa has made tremendous efforts in advancing the implementation of women's sexual and reproductive rights. For instance there is an increasing access for women and girls to the public sphere in both local and national politics and education. As Houghton (2007:49) states, many African countries have promoted women's right in regard to control of their fertility and affordable and accessible health services.

### **3.5.3 Southern African Development Community (SADC) Declaration**

The SADC Declaration on Gender and Development was adopted in 1997 in Blantyre, Malawi (Mukasa, 2009:40-41). The SADC declaration demands that all countries in this region should have at least 30 percent women representation in political and decision making structures. The declaration also aims at promoting women's access to and control over productive resources in order to reduce the level of poverty among women. The SADC declaration's target the abolition of all regressive laws and in amending constitutions that still subject women to discrimination and violence (Mukasa, 2009:40-41). The draft of the SADC protocol is a clear road map in overcoming sexual and gender inequality. This declaration seeks to address a range of issues that affect women like; constitutional and legal rights, governance, education, gender based violence (GBV), health, HIV and AIDS, peace building and conflict resolution by 2015 (Mukasa 2009:40).

Therefore, there is a need of Swaziland as a signatory of the SADC declaration on the Elimination of all forms of Discrimination Against Women to address the preceding abuses to women. In chapter five, the study will discuss in details the women's sexual and reproductive rights in Swaziland.

## **3.6 CONCLUSION**

Chapter three has noted that various international and local organizations have played a big role to advocates specifically for the reproductive rights of women. In the discussion, it became evident that just as men do, any woman has a right to decide on her personal matters regarding her fertility and sexuality without the consent of a man or any states of coercion or violence. In

relation to development and implementation of women's sexual and reproductive rights, Africa's oppressive patriarchal gender relations are viewed as a hindrance to the preceding rights.

The chapter showed that there have been a number of Charters and Protocols in Africa that have been concerned with the promotion of women's sexual and reproductive rights. This shows that women's rights, like other human rights, are areas of concern in today's Africa. The SADC draft protocol that mandates all SADC member states to have constitutions that protect gender inequality and ensure that customary laws adhere to the constitution by 2015 is proof enough (Mukasa 2009:40). Based on the perspectives shared in the preceding literature review, the next chapter focusses on analyzing the reality of women's sexual reproductive rights in Swaziland.

## **CHAPTER FOUR**

### **AN EXPLORATION OF WOMEN'S SEXUAL AND REPRODUCTIVE RIGHTS IN SWAZILAND**

#### **4.1 INTRODUCTION**

In chapter three, the literature has shown that there have been a number of efforts made internationally and regionally in Africa to promote women's sexual and reproductive rights. Although the implementation of these efforts has proved to be contentious, it is a clear sign that women's rights like other human rights are areas of concern in Africa generally and in Swaziland specifically.

The preceding chapters have explained how women's sexual and reproductive rights have received mixed reception due to entrenched patriarchal power structures within many African societies. Chapter four will therefore explore the perspectives that inform the understanding and praxis of women's sexual and reproductive rights in Swaziland. This is a society where Swazi men have been culturally given intrinsic superiority over women as a consequence of patriarchal stratification. This has greatly influenced the understanding of women's sexual and reproductive rights in Swaziland. The chapter begins by stating the efforts made so far by the Kingdom of Swaziland in the implementation of women's sexual and reproductive rights as argued in chapter three. Central to this chapter is the objective of assessing the Swazi's understanding of women's sexual and reproductive rights.

#### **4.2 Women's Reproductive Rights and Gender Issues in Swaziland**

Nhleko (2001:3) contends that Swaziland as a country condemns and rejects discrimination against women in all its forms and manifestations. In 2004 Swaziland ratified the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW). However, the country is criticized for not following the principles or practices espoused by CEDAW and continues to be a pronounced patriarchal society where women lack fundamental civil rights (Hallonsten, 2012:146). As argued earlier in section 3.1.4, the Beijing Declaration Cairo Program of Action argues that "reproductive rights should involve the constellation of methods, techniques and services that contribute to the reproductive health and wellbeing of women (Lori, 2001)". As Asimwe (2007:15) says, reproductive rights require that Swaziland includes women in political

and economic decision making if their sexual and reproductive rights are to be protected. The preceding argument has made Swaziland's commitment to issues of gender equality attract criticism from both local and international human rights observers. As a signatory to the SADC Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), Swaziland has been blamed for its laxity in implementing the preceding SADC declaration (Mukasa, 2009:16).

In its constitution, Swaziland has unequivocally committed herself in upholding gender equality and non-discrimination. This was shown clearly in 2005 whereby government amended its Constitution. In the Bill of Rights, it is argued that all Swazi's are equal before the law. The bill does not discriminate anyone on the grounds of gender. Therefore, according to the Bill of Right women arte to be treated equally just like their male counterparts. (The Constitution of Kingdom of Swaziland, 2005: 23). In addition, the bill of right, the State is party to several international law treaties which call for gender equality and non-discrimination.

However, there is an ambiguity concerning women's legal rights. The country is administered by two legal systems. Similarly, the new Constitution has not yet proved itself to have the allegiance of all citizens (Hallonsten, 2011:146). Although there has been marginal improvement for women, their daily life is still strictly surrounded by customary laws and Swazi tradition (Physicians for Human Rights 2007: 31-32)

In relation to customary law, Kaunda (2013:4) quoting Van Schalkwyk (2006) argues that the Swazi customary law is subject to the provisions of a Bill of Rights in the Constitution. According to Kaunda (2013:4), the Bill of Rights is of the view that the principles and conditions of Swazi customary law may be challenged by the guarantees of human rights such as gender justice and equality. However, this provision of the Bill of Rights seems baseless and costly toward the marginalized and exploited, especially women who cannot afford to hire a lawyer to represent them. Therefore, the Swazi customary law works as a mechanism "in which gender relations are subjected to the powerful ideological and political patriarchal forces surrounding legal systems of governance and national identities" (Manson 2008:4).

Although the Ministry of Health and the parliament have discussed the sexual reproduction policy, Griffin (2006:3) says that Swaziland lacks the political will of implementing it. This has

been shown by absence of financial and budgetary allocation to sexual reproductive health by both international donors and the Swazi government. Therefore, it can be argued that Swaziland, just like some African countries, has subjected women to historical forms of unequal social, economic political and cultural treatment.

In its efforts to promote Women's sexual and reproductive rights, the Ministry of Health (2013:11) has developed a Sexual Reproductive Health Policy through consultations with key stakeholders. The Sexual Reproductive Health Policy seeks to ensure that there is proper coordination, integration and harmonious delivery of comprehensive sexual reproductive health services. The sexual reproductive health policy also seeks to better the health and the wellbeing of all the Swazi population as well to contribute to its socio-economic development by improving their sexual reproductive rights irrespective of their gender (Ministry of Health 2013:13)

On the contrary, the low prevalence of the use of contraceptives by women does not resonate with the Ministry of Health efforts. According to statistics, the use of contraceptives among the Swazi population is 29% .It is argued that the minimal use of modern contraceptives in Swaziland could be due to socio-cultural factors which include men's attitudes towards the understanding of contraceptives. Ziyane and Ehlers (2007) argue that men's attitude towards the use of contraceptives in Swaziland heavily impact on the contraceptive practices Lori (2001:9) add that even if women in Africa and Swaziland were inclined to the use of contraceptives, culturally the campaign might meet its dead-end simply because they will need to have approval from their male counterparts.

In the beginning of 2010, Swaziland's High Court gave married women a legal right to register property in their own names. However, it was a fraction of successful women and activists who celebrated this move (ACTSA, 2010:10). In 2005 the Constitution was amended to guarantee gender equality between men and women. However, in practice, many laws remain gender biased. Old laws that treat women as minors have remained on the statute books (Hallonsten, 2012 and Daly 2001:46). Consequently, the Swazi society has become accustomed to male control and decision making (Daly, 2001:46). This has made gender activists to argue that all legal obstacles to equity in terms of land and other properties should be eradicated (Mndzebele, 2001:6).

While the preceding situation leaves women as victims within the matrix of a patriarchal culture, the country's Constitution upholds positive values. However, these are yet to see the light of day. Constitutionally, women can own and control land and their finances (Chapter xii on Land Act 24(3)). However, traditional social systems discriminate severely against women and often bar them from owning and controlling land. This is so despite the social phenomenon that households headed by women are growing in number. Such women struggle to feed their families and meet household needs single-handedly.

#### **4.3 The understanding of Women's Sexual and Reproductive Rights in Swaziland**

The understanding of women's sexual and reproductive rights in Swaziland has been defined by several factors that are centered on patriarchal forms of organization (Daly 2001:45). Culturally, the understanding of women's sexual and reproductive rights in Swaziland has become a prerogative of the men. Many women in Swaziland have no say on how, when and with whom to engage in sex. For example, there are situations where the father even chooses the daughter's husband without consulting her (Hallonsten 2012:118). Most girls are married off accordingly, aged 16 years old and under. Against this backdrop, the Swaziland Ministry of Home Affairs (2008:10) argues that most women in traditional Swazi marriage are unable to exercise their rights to make sexual and reproductive decisions as pertains to their lives.

Tfwala (2008:86) affirms that in the Swazi society, a woman is someone who cannot make her own decisions, but consults her husband to make decisions for her because of the traditional and structural systems that are in place. In addition, Kidd et al (1997:69) lament that women have always been regarded as minors and that this view has resulted in women not being able to contribute to decision making in matters pertaining to their own lives as well as to the wider economic development of Swaziland. This puts women at risk of unwanted pregnancies, and this problem is further compounded by the freedom of men to have sexual relationships with other women beside their regular partner. If the woman becomes pregnant she may not receive any support from the man.

The aforementioned argument has made the Swaziland Demographic Survey (2006-07:16) note that many women in Swaziland do not have the power to makes decision, as everything is decided by their male counterparts. This leads Hallonsten, (2012:24) to conclude that "women in

Swaziland lack some fundamental civil rights, and their living conditions are characterized by pervasive disempowerment.”

Another factor that defines the understanding of Swazi women’s sexual and reproductive rights is poverty. IFAD (2007:1) points out that about 84 percent of Swaziland’s poor live in rural areas, where per capita income is about four times lower than in urban areas, and food consumption is two times lower. About 66 percent of the population is unable to meet basic needs. Also, the Swaziland Demographic Health Survey reported that poverty compels women to have numerous sexual partners to ensure steady income. This makes women not to advocate for their sexual and reproductive rights. As Fakudze (2009:1) affirms, it is poverty that pressures women to survive and support their families by engaging in unsafe sex. In 2010, 20 per cent of households were headed by women, and a further 20 per cent were managed by women while adult males were employed away from home (ACTSA, 2010).

The failing economic sustainability is endangering the Swazi family. Many Swazi men are seeking employment in neighboring South Africa and other countries. This is weakening family links and traditional roots. In many instances, once the male leaves the home to go and work elsewhere, he gets another woman to satisfy their need for companionship (Daly 2001:40-41). This leaves the wife to seek for other avenues of sustaining her family.

As postulated by the United Nations Development Program (2013, Goal 5), poverty among women has increased maternal mortality in Swaziland. The probability of life being at risk every time a woman is pregnant was estimated to be 1 in 69 in 2003. The UN Development Program observes a maternal mortality trend which shows that maternal mortality increased from 229 per 100, 000 live births in 1997 to 370 per 100, 000 live births in 2006.

The continuous increase in maternal mortality rate within the nation is also associated with the rapid spread of HIV and AIDS and is linked to the limitations of the effectiveness of the Swazi health system. The percentage of women assisted by health professionals in Swaziland has increased from 70% in 2000 to 74% in 2006. Despite the increase in the health-seeking behavior of pregnant women, the country has not made significant progress towards achieving the Millennium Development Goal (MDG), which targets a reduction in maternal mortality rates (Demographic and Health Survey of Swaziland, 2007).

Another factor that defines the understanding of women's sexual and reproductive rights is the Swazi traditional view on marriage. Within the context of Swaziland, the social status of a married woman ensures that she receives different experiences and treatment within the community where she lives. On the contrary, divorced and single women are treated differently and are prescribed different roles within the patriarchal society. In most cases, divorced and single women are discriminated against socially, especially from their male counterparts (Thwala 2010:158). Prescribed gender roles determine specific duties and responsibilities that married or single or divorced women in Swaziland are expected to perform. In spite of these deterrents women are also expected to earn money and make a significant contribution to the financial wellbeing of the family.

#### **4.4 The Contemporary Situation of Swazi Women as Regards their Health**

Daly (2001:45) asserts that in Swaziland, as in many other African nations, the women are still facing historical discrimination in education, health and in legal representation.

##### **4.4.1 Education**

According to a 2012 National Survey, Swazi rural women have less access to education. Similarly, about 70 per cent of adult females are illiterate, compared to the national average of 21 per cent for men (Hallonsten, 2012:24). According to Hallonsten, (2012:24) "a Swazi woman is not supposed to be educated, she is not supposed to be working, she should wait to be given money so that she appreciates and thanks the husband", even though we explored the fact, in section three, that the Constitution seeks to uphold the equality of women. The reason why education is important in the context of women's health is that broadly, low education means low income, and this in turn means low standards of living. More specifically, studies around the world have shown that poorly educated women will have more children; leading to potential health problems associated with early motherhood and indicating their lack of decision-making rights over their bodies and lack of access or to contraception (Rahani 2006:40-46).

##### **4.4.2 Health**

In Swaziland, HIV and AIDS has remained a severe sexual reproductive health problem. Fakudze (2009:35) states that the women continue to practice unsafe sex even after knowing their positive HIV status. According to Dube (2003: VI), the HIV and AIDS epidemic affects all aspects of their lives. She argues that the epidemic weakens economies as productivity is reduced

and expenditure goes up. The question of HIV and AIDS highlights both strengths and weaknesses of a culture. Dube (2003) observes that HIV and AIDS reveal the structures of social institutions – how they are constructed and how they affect the well-being of individuals and the community as a whole. HIV and AIDS among pregnant women negatively affect their maternal mortality rate. For instance, the Human Development Report of 2008 estimated about 50% of pregnant women refused to take anti-retroviral treatment due to fear resulting from a lack of HIV and AIDS education, even after being counseled to do so, which in turn worsens their health condition (Human Development Report, 2008).

#### **4.4.3 Legal Representation of Women**

Although Swaziland's Constitution upholds equal rights between men and women, knowledge and understanding of human rights among poor and vulnerable women is lacking. In this regard, the establishment of a Human Rights and Public Administration Commission (Daly 2001:48) is yet to be strengthened. There are calls for change coming from the highly educated Swazi women. However, their voices have received resistance from those who want to maintain the 'older' traditional customs. As a result, the system of governance in Swaziland is struggling to deal with competing forces for change between the one calling for increasing equality for women and the other calling for full return to the traditional laws (Robin Root 2009:296).

Due to lack of access to education, many women are ignorant of their constitutional rights in Swaziland. This gives room to the traditional government in Swaziland to remain steadfast in its adhering to long-held customs and efforts that discriminate women (Daly, 2001:49). As a result reverential fear has been induced in women. This has led to an increased institutionalization of gender inequality. Many Swazi women seeking greater equality are finding the existing customs a bitter pill to swallow. The more outspoken traditionalists claim that these women's rights groups, by demanding equality, are really seeking gender superiority over men (Daly 2001:49).

#### **4.5 CONCLUSION**

Chapter four of this study has looked on the assumption of the intrinsic superiority of men over women in Swaziland. In this regards, it has been discovered patriarchy has influenced the understanding of women's sexual and reproductive rights in Swaziland. It is also noted, as result of this complicated structures, the country has a high rate of poverty due to lack of understanding

of sexual and reproductive rights of women and in this case, Women's sexual and reproductive rights has become an affair of men. At the same time, poverty among Swazi women has led them to engage in risky sexual affairs and relationships that have compromised their sexual and reproductive rights. Lack of political will, education and legal representation has undermined access to the constitutionally mandated women's rights in Swaziland. The next chapter presents a detailed discussion of socio-cultural factors that influence and undermine the sexual and reproductive rights of women in Swaziland.

## **CHAPTER FIVE**

### **SOCIO-CULTURAL FACTORS THAT INFLUENCE AND UNDERMINE WOMEN'S SEXUAL AND REPRODUCTIVE RIGHTS IN SWAZILAND**

#### **5.1 INTRODUCTION**

The previous chapter showed the perceived intrinsic superiority of men over women in Swaziland. It exposed how patriarchy influences the understanding of women's sexual and reproductive rights. The chapter has established that patriarchy is a major hindrance to the achievement of women's sexual and reproductive rights in Swaziland. It has played a role in the political, economic, religious and social ordering of Swaziland. Major decisions regarding the affairs of women have been made by men. At the same time, patriarchy has passively created poverty among Swazi women in that it has created physical and psychological dependency because women rely on men for their upkeep and maintenance. This dependency has led women to normalize abuses that result from patriarchy and to be blindfolded in advocating for their sexual and reproductive rights.

Therefore this chapter discusses the socio-economic factors that influence and undermine Swazi women's sexual and reproductive rights. It will be argued that all the socio-economic factors that will be discussed are centered on patriarchy. The chapter does not aim to criticize patriarchy as a whole. However, it will be argued that in relation to women's sexual and reproductive rights, Swazi men are to be blamed for the debilitating situation of women.

#### **5.2 Political/Economic Factors and Sexual and Reproductive Rights**

The UNAIDS/WHO (2007, 2008) findings shows that politically, an African woman is still subjected to relegation, discrimination and deprivation of her sexual and reproductive rights. African men claim to be naturally endowed with supremacy (lordship) over women. In this situation, as Rakoczy (2000:15) opines, it can be difficult for women to uphold their sexual and reproductive rights. Gender imbalances in political institutions in Africa seriously undermine women rights and this is particularly the case in Southern Africa (Kanyoro 1992: 18-50). For instance, the Kingdom of Swaziland's expenditure focuses much on the royal family (Hallonsten 2012:125). This makes it difficult to allocate more funds to the other sectors. Health care, women's health care to be specific, suffers as a consequence of this royal spending. Instead of

investing in women's reproductive health, the Kingdom invests much more in the yearly cultural entertainment - the Incwala - a national ritual (Hallonsten 2012:124-125)

Heywood (2004:34) points out that Swaziland's political, social and economic institutions are headed by men. This is the case in many countries in Africa. As a result, there is patriarchy-caused poverty and great economic inequality in the different countries. Although men are the most empowered economically and politically, there is an emerging trend whereby more households are being headed by women in sub-Saharan Africa, and Swaziland is not an exception (Heywood 2004:34). For instance, in most cases women do not have the right to own land and property in general so as to run the households they head. Although the newly formed Swaziland constitution gives women this right, tradition bars it (Tfwala 2008:59). The land is often allotted to them by the husband, male relative and/or village chiefs who often seek sexual favors from the prospective women before rendering such service. In the opinion of Tfwala (2008:59), a woman in Swaziland is only regarded useful in the reproductive field.

Men-headed institutions do not allow women to be aware of their sexual and reproductive rights and moreover the system violates the already existing rights, thus impacting severely on their health. As a result, patriarchy-constructed poverty drives some women into prostitution to fend for themselves. Many women who engage in prostitution depend on the mercy of their male clients while negotiating for safer sex (Byamugisha et al 2010:17). Gender-based violence has been inferred as part and parcel of African culture. Added to this, while it is known that HIV is mainly transmitted through unsafe sexual practices, it is a taboo in most African communities for men to discuss sex as a subject with their female counterparts.

Since majority of Swazi women depend on men economically, they lack access to opportunities. This makes them vulnerable and to lack of proper reproductive health care/rights and thus an escalation of HIV and AIDS (Weinreich, 2004:26). The women's financial dependency on men may be as a result of illiteracy, lack of job opportunities for women, poor salaries due to lack of skills and sometimes due to retrenchment, poor skills or poor health. On a similar note, the migration of people for work purposes, the breaking up of families whether by men or women, exposes women to acts of sexual violation. A woman who remains in the location alone is forced to fend for herself for basic needs and to some extent for her sexual satisfaction. However, a

woman who seeks satisfaction is termed immoral while a man who does the same is considered to be a conqueror (Buseh et al 2002:178).

### **5.3 Cultural Factors and Women's Sexual and Reproductive Rights**

Gally Griffin (2006:2) argues that cultural factors are crucial in determining the nature of sexual behavior of any community. In a country like Swaziland where men are rulers and women are the ruled, the former attempt to control and transcend nature (Moore, 1994). The latter are placed in a subordinate position, hence denied their freedom on sexual and reproductive rights. Muthei (2008:4) agrees with Moore by arguing that cultural norms in Africa demote girls to second class citizen with no say on matters of their sexuality. Such cultures make women to take submissive positions in the society (Oduyoye 2000:481), thus surrendering their sexual and reproductive rights.

Griffin (2006) states that issues around sex and sexuality are taboo in most African cultures. As a result there is reluctance to discuss and address sexual health matters. As regards the socio-cultural wellbeing of the Swazi people, Mdluli (2009:61) posits that Swaziland as a nation is known for holding onto its traditional cultural values. He maintains that many Swazi women are still keen to see the traditional norms and values being observed. Therefore, discussion on sexual matters that pertain women is met with resistance by the preceding category of women. Some Swazi women are embroiled in the tradition that women's status in Swaziland is tied to motherhood (Gule, 1994:40).

Polygamy is another cultural practice that Swaziland has embraced. Most Swazi men practice polygamy because this makes them feel great and powerful in the society. Ironically, such men do not consider the big responsibility they have for caring for all their wives and children along with their family members. Men who have one wife are seen as 'powerless and lesser men' (Buseh et al 2002:177). On the contrary, Buseh et al (2002) argue that it is the role of most Swazi women in a polygamous marriage to be responsible for carrying out daily activities. It is ironical that the Swazi women who are considered weaker than men are the one who care for their polygamous husbands, children and the extended family. Therefore, the death of such a woman leads to disorientation of a family (Buseh et al, 2002:177). Although men may prefer more than one wife, women in these unions appear to like and cherish each other. However, they are often

not happy but they cannot openly express their unhappiness in such marriages (Buseh et al, 2002:179).

Polygamy as a practice does not guarantee sexual safety as it is easier for sexually transmitted infections and HIV to be spread (Hallonsten 2012:149). The chances of HIV infection are heightened when men get involved with other wives or women whose sexual infectious status is not known. It may also be that sexual dissatisfaction of one or more of the wives or men mean they seek sexual pleasure outside marriage. Hallonsten (2012:151) argues that the Swazi society does not legitimize sex outside marriage. However, this argument is not true in cultural practice.

Another cultural practice that influences women's sexual and reproductive rights in Swaziland is related to how women dress. According to Kisaalu (2007:30), the Swazi women dress themselves, leaving their breasts uncovered during the annual cultural reed dance. This is mainly done as entertainment to men who are the spectators. Kisaalu adds that such occasions can lead to an increase in men's libido and as a result, lead them to engage in unprotected sex or even rape. Kisaalu sees this culture to have subjugated women to being a source of entertainment for men and lowers women to an inferior position in the society in comparison to their male-counterparts.

In Swaziland, both male and female are both expected to keep these socially accepted norms. However, in many cultures male are valued than female (World Council of Churches 1983:28-29). For instance, younger women in traditional Swazi culture have little power to determine their sexual behavior. An older woman of status may encourage her to date an old wealthy man. The old man is termed as the economic provider for the young girl and her family (Buseh et al 2002:178). In such situations these young women cannot protect their sexual and reproductive rights. They do not have power to ask their partners to use condoms or to refuse unprotected sex.

#### **5.4 Religious Factors and Sexual and Reproductive Rights**

Griffin (2006:3) points out that religion has had a major influence in the field of sexual reproductive health rights. Similarly Muthei (2008:4) and UNFPA (2010) point out that religion especially has concerned itself with regulating sexual behavior of the faithful at various times and in different cultural settings. For example, the majorities of churches are against the use of

contraceptives and have compromised the promotion of condoms as a measure to prevent sexually transmitted infections and AIDS.

Also many churches shy away from discussing sexual and reproductive issues which are deemed to be “secret” and “sacred” (Muthei, 2008:4). This in turn empowers men to use religion to subjugate and control women’s access to reproductive health information and services. They also exercise enormous power over finances, transportation and other resources. As Tuyizere (2007) states, the use of scripture to defend men as leaders is a powerful ideology which determines the choices and limits that are presumed by the faithful (male/female) – and which in any case privileged the male. Mary Wollstonecraft(1996) as well as WCC (1983) have indicated how the Bible is used to turn women into objects of convenience or pleasure for men; and how men use the Bible to gain power - the ideology of male supremacy. This power is also extended to matters pertaining to women’s sexual and reproductive rights. This is a central theme taken up by African women theologians such as Kanyoro and Oduyoye.

Furthermore, many religious leaders are silent on raising their voice against certain cultural practices that endanger women’s health. In their mission of winning the faithful, “this silent attitude” is unfortunately held in their ministry. Some shy away from discussing sexual health related issues because they consider them to be a taboo (2008:4). For instance, the United Nations Population Fund UNFPA (2010) found out that all the mainstream religions are headed by men. This gives them considerable power and an enormous say in women’s health related matters, especially in areas related to reproductive health information and services. In addition, Scripture is interpreted in a manner that privileges men.

## **5.5 CONCLUSION**

In chapter five, the socio-economic, religious and cultural factors that undermine sexual and reproductive rights of women in Swaziland were outlined. As argued by African women theologians, the Bible and culture are both interpreted and employed to uphold patriarchy and to justify men’s own interest. The next chapter focuses – in the light of what has been discovered in the preceding chapters on the situation in Swaziland as regards women and their sexual and reproductive rights - on the work of the CF in Swaziland.

## **CHAPTER SIX**

### **THE C.F. AND WOMEN'S SEXUAL AND REPRODUCTIVE RIGHTS IN SWAZILAND**

#### **6.1 INTRODUCTION**

The previous chapter emphasized on patriarchy and how it hinders women's rights in Swaziland. This chapter provides a theological reflection on how the CF is addressing the plight of women's sexual and reproductive rights. Two theories underpin this study: ecumenical theory and radical feminism in relation to the Matsapha Church Forum in terms of its response to the situation on the ground in Swaziland.

The CF's response to women's sexual and reproductive rights in Swaziland faces both internal and external setbacks. Ecclesial institutions, like society at large, are products of patriarchy, therefore within these institutions and in their dealings with them, women face discrimination and antagonism. This has made some gender activists to blame the church for being an obstacle to the attainment of women's sexual and reproductive rights. This is only the case in so far as the conduct of the church is the result of the same comprehensive socio-cultural influences that impact on broader the society and that require comprehensive changes.

#### **6.2 An Overview of the Work of CF in the Swaziland Community**

As argued by REDI (2011:3), within both its programmatic and project work the Church Forum on HIV and AIDS "seeks a society in which men and women enjoy the same opportunities, positive outcomes, rights and obligations in all spheres of life".

As the name suggests, the Church Forum is a church-based organization that brings together several churches of Swaziland to raise awareness on HIV and AIDS. It also incorporates government bodies within Swaziland such as the National Emergency Response Council to HIV and AIDS (Church Forum Report 2009:10). Faced with the HIV pandemic, with many members affected directly or indirectly, the churches in Swaziland felt that that they had to act, and recognized that they needed to have a coordinated and well organized approach due to the magnitude of the problem they were dealing with.

The Church Forum was formed in 1999 as a World Council of Churches project that is an HIV-focused network of churches from all three ecumenical bodies together with the freestanding

churches (Hallonsten 2012:100). It was launched as a network for receiving and channeling funds from the National Emergency Response Council on HIV and AIDS which wanted to bring about the coordination of churches and their HIV work in Swaziland. The Church Forum thus began with the aim of uniting all churches in Swaziland to address challenges of HIV and AIDS. Members include the Swaziland Council of Churches, the Conference of the Seventh Day Adventists, the International Tabernacle Ministries, and the Swaziland Christian Churches United in Christ (SCCUC). The CF is thus one of the biggest Christian bodies in Swaziland, comprising all the churches (The Church Forum Annual Report 2009:12-14). The Church Forum on HIV and AIDS program in Swaziland is one of the WCC projects that has been on the forefront in training church leaders in HIV and AIDS prevention and matters of gender concern (Hallonsten 2012:102). The Church Forum focuses on issues of stigma and discrimination, gender and HIV, and also on a food growing and stock rearing.

By coordinating an effective faith-based response to the HIV and AIDS pandemic and by linking the various churches, the Forum aims at creating a collaborative, coordinated and effective approach to the HIV and AIDS challenge. Furthermore, the Forum also tries to identify and mobilize resources that can be used towards the various churches' response to HIV and AIDS. Finally, by being one voice, the forum aims at creating a systematic and coordinated response of the whole church to HIV and AIDS. Basing itself on the Christian faith and using biblical principles, it aims at creating an open and honest approach to the issue, because very often sexuality has been seen as taboo in Swazi society and in the church. The CF is governed by eleven women and men on a board of elected or reelected members, underpinned by a constitution. Members serve for a period of three years and cannot exceed two terms (Church Forum Annual Report 2009:5).

### **6.3 Ecumenism as the Theological Framework that Informs the Church Forum Mission**

#### **Practice**

The fact that CF is an ecumenical organization demonstrates that the organization operates within an ecumenical framework in response to God's mission on earth. For David Bosch (1993:519), ecclesiology, ecumenism, and mission are interwoven. He says that "mission is mission Dei" and this mission of God is what informs all work of the church, including its missionary enterprises and programs – be they aimed at spreading God's word through

evangelization or at the promotion of God's will for social justice. Bosch (1993:390) further says that, "to participate in [God's] mission is to participate in the movement of God's love towards people, since God is a fountain of sending love".

Bosh (1996: 400) states that the integral character of salvation – both spiritual and physical - demands that the scope of the church's mission be more comprehensive than the traditional focus on conversion alone. Mission should be based on an involvement in the on-going dialogue between God who offers his salvation and the world which does not live up to God's demands for justice. In the context of this study, this means that the church's mission should include advocacy for and implementation of women's reproductive rights. In the light of this, it is therefore necessary to briefly reflect on the ecumenical movement in Swaziland, before examining the particular ecumenical organization that is the Church Forum.

### **6.3.1 The Ecumenical Movement in Swaziland**

In the work of Gunilla Hallonsten (2012) a review of the development of various institutions of ecumenical cooperation in the country is presented. Hallonsten (2012:94) points out that the ecumenical movement in Swaziland incorporates three different bodies for ecumenical cooperation, namely, the Swaziland Conference of Churches, the League of African Churches in Swaziland and the Council of Swaziland Churches. Although there are certain ecumenical exchanges that take place within these bodies, ecumenical awareness is generally low. The main objective of ecumenical cooperation in Swaziland is to establish a strong spiritual ground for Christian faith and evangelism. It is on the basis of this ecumenical movement that an International Bible Society in Swaziland was formed (Hallonsten 2012:94).

The Pan-African Christian Network (PACANET 2009:7) reports that the Swaziland Conference of Churches is an ecumenical organization for 60 evangelical churches, although, according to Swaziland Conference of Churches report of 2009, there are 89 member churches. The League of African Churches in Swaziland was founded by King Sobhuza II, who has been elevated within the Zion Christian Church to the position of transcendent religious leader and is counted among the Kings of Judah (Hallonsten quotes Malan 1985:70). The Council of Swaziland Churches includes ten member churches, and is thus the smallest of the instruments for ecumenical cooperation. Their mission churches include the Anglican Church, the Roman Catholic Church, the Lutheran Church and the Methodist Church (PACANet 1994:21).

Since the Church Forum include all three of the above bodies and the members, by nature, many of the churches that constitute CF have a conservative theological orientation which does not allow them to engage with issues of gender justice (Hallonsten 2012:288). This means that by themselves, these churches are not capable of standing up and joining in the struggle concerning women's plights. In this regard, the issues that individual churches cannot tackle, such as gender issues, are better addressed in the ecumenical circle. It is evident therefore, that ecumenism serves as an important instrument that helps such conservative churches to begin to address matters that within their own contexts are controversial and often taboo. Hallonsten (2012:95) affirms this by arguing that it is the social issues facing the entire county which have led to the unity of these churches.

As discussed in chapter one, despite denominational differences, there is common space when it comes to the work of the churches in dealing with social problems. It is at this intersection that the CF operates. Added to the common ground on many social issues, Malan (1995:70) observes that Swazi Christians continue to blend their culture and religion, and Hallonsten (2012:97) thus concludes that the Swazi traditional religion and culture provide a strong basis for communion in Swaziland. Hallonsten (2012:95) points out that the Swazi identify themselves as Christians, but combine traditional and western elements in their religious worship; and in addition, most Christians also continue to be loyal to their king, to venerate and adore ancestors as well as pay visits to the *tagoma* and *tinyanga* (the traditional diviners and healers).

Two areas in which the ecumenical movement has been particularly active are that of HIV and AIDS and the issue of poverty. It appears that the ecumenical response to issues that affect the lives of many women in Swaziland has been directed towards addressing the HIV and AIDS pandemic and the provision of food packages. Without undermining this significant contribution, this study argues that structural social inequality and injustice are integrally linked to the problems of poverty, disease, under education, violence and conflicts (Dosekun 2007). The ecumenical engagement requires that a holistic approach to God's mission be adopted. It is not enough to deal with the outcomes of HIV and AIDS, but what is essential is that the gendered nature of the pandemic, as well as the impact of gender on women's sexual and reproductive rights, must be addressed. Similarly, it is not enough to hand out food parcels, but is also essential that the socio-economic structures and inequalities underpinning poverty be addressed.

Clarke (2012:439) argues that Africa and Swaziland without exception should learn from the women who are crushed and abused by the existing structures in the society. In this case, those who are crushed are women who are marginalized. This mirrors the demand of radical African feminists, of whom African women theologians are representative in the sphere of theology, that the real experiences of women must be examined and addressed. The life experience of such crushed people includes:

- (1) The struggle for daily survival. This means that in their everyday life, they are challenged in getting enough food, water, and trying to ensure that they have a roof over their heads.
- (2) The hope for a better future. They could not face their daily struggles without the hope that things can improve for them.
- (3) Their self-preservation which means that their priority is to look after themselves and their families.
- (4) Their engagement in communal collaboration and working together to improve each person's chances in life. They have no access to financial or other resources in sufficient amounts to be able to uplift themselves. However, the CF recognizes that by working together for a common goal, they can uplift not only themselves, but also one-another (Clark 2012:439).

Theologically, the ecumenical movement in Swaziland can learn as Clarks suggests;

- (1) God in life: God sustains daily life, but God also gives hope for a better future, provided God's will is done on earth.
- (2) God of life: God came to us in the form of Jesus, who shows compassion for the daily suffering of people (feeds the poor, visits the prisoners and the sick etc.), but Jesus also demands justice (he liberates the prisoners, empowers the poor, and heals the sick etc).
- (2) Hope for a better future must also be worked towards by struggling for justice in collaboration in Swaziland, just like communities of the crushed, abused rejected women. Indeed this collaboration is what ecumenism is all about as churches work toward their shared goal of bringing about the kingdom of God on earth. In this case, such a struggle for justice includes campaigning for gender justice that will help to end violence against women. Another way will be by criticizing the underlying structures of patriarchy (cultural, religious, legal structures) and creating an awareness of the gendered nature of HIV and AIDS. Masenya (2003:125) notes that

the church should also critically revisit the androcentric interpretations of the Bible since these interpretations have contributed to the perpetuation of the view that the female is inferior, and that the male is God-ordained. This leads to Clarke's (2012) stance that it is not just enough to look at these issues at face value but instead the church should critically pay attention to issues of injustice such as poverty and lack of education, cultural practices like virginity testing and widow inheritance and tackle them without compromise. This will in turn improve the lives of people in general (men and women) so they do not fall victim to human dignity abusers.

The Church Forum on HIV and AIDS in Swaziland as argued in this chapter, is a good example of an ecumenical body which follows Clarke's recommendations; it provides for both the survival of people (through its agricultural programs) and also works for social justice through its programs on gender and HIV, and through its programs on stigma and discrimination. The Swaziland Church Forum on HIV and AIDS (2009:16) states that as a church, we have the opportunity to get back on track towards the achievement of the first Millennium Development Goals (MDG). They say "we need to meet that demand by increasing food security by making sure that everyone is involved. The involvement aims at empowering and mobilizing the Church to effective response to the challenge of HIV and AIDS, gender advocacy and gender equity" (The Church Forum Report 2009:25). In support of the work of the Church Forum, Van Wyngard (2006:1099) quotes WCC (2001:3), affirming that: The church has a role to play regarding the plight of African Christian women; the church is supposed to be their spiritual home (Masenya 2003:125).

Since the church is grounded in the community, she has the strength in combating gender injustice and in fighting for human dignity. Therefore, the church is challenged to be the first institution to transform herself in face of the right of women's sexual and reproductive health. This is the only church's way of bringing healing, hope and accompaniment to the broken (Masenya 2003:125).

Therefore, it can be concluded that the mission of the church is to lead humankind to its final destiny of hope, revealing the hidden plans of God through the times (Ephesians 3:4). The church should fight a battle of truth against lies, life against death, justice against corruption,

health against disease, and morality against immorality. The church at the center of its mission is an incarnational community, not the structures or building, but “Ecumenism” where life is affirmed. It is imperative therefore, that the church has to come out of her comfort zone of fear and moral judgment in bearing witness to Christ’s reconciliation. The sanctity and dignity of human is important than the preservation of church’s traditions.

### **6.3.2 The Church Forum as a Socially Responsive Ecumenical Body**

As stated above, the Church Forum represents the Council of Swaziland Churches, the League of African Indigenous Churches, and the Swaziland Conference of Churches (Hallonsten 2012). Its main aim is to work directly on programs and projects associated with HIV and AIDS on behalf of the church in Swaziland (The Church Forum News Letter, 2009-2013 Plan:10-16).

The Church Forum is an ecumenical instrument that facilitates conversations between different ecclesial groups that work within the areas of HIV and AIDS and social justice (Church Forum on HIV and AIDS Report 2009:10). According to “The Evaluation of the Church Forum on HIV and AIDS in Swaziland” (2009:7), a newsletter report, the Director of the organization points out that there have been attempts to bring churches to work together on social issues, economic and political, but most of these attempts failed to bridge that gap between different organizations and denominations in the country. However with the advent of HIV and AIDS in Swaziland and in view of its impact across all sections of the Swazi society, the way has been paved for all churches to unite and face the reality of the pandemic.

However, Van Wyngaard (2006) points to a personal conversation with Bongani Langa, coordinator of the Church Forum, who revealed that there is still very little happening concerning the church’s involvement in the issue of gender. While a number of organizations, such as UNAIDS, WHO, UNICEF and NERCHA became actively involved in engaging with gender as key in the fight against HIV and AIDS, the Christian church has on the whole not done so in Swaziland. “The churches have strengths, they have credibility, and they are grounded in communities” (WCC 2001:3 quotes from Van Wyngard 2006). This offers them an opportunity to make a real difference in combatting HIV and AIDS, but they are required to then deal with the question of gender justice, including the issue of women’s sexual and reproductive rights.

According to Masenya (2003:125) the church has a role to play regarding the plight of African Christian women; the church is supposed to be their spiritual home. Education should be geared towards women's empowerment which should entail the redefinition and transformation of African culture in a way that will be life-giving to both women and men.

#### **6.4 CF Programs: A Detailed Overview**

The CF runs the following programs which have a very practical nature:

##### **6.4.1 Neighborhood Care Points**

The N.C.P program attempts to provide for the physical, spiritual and emotional needs of orphans who have lost their parents to HIV. It supports children through Bible readings and prayer, through the provision of food and clothes, and through giving them love and care at centers set up in churches to serve that purpose. Nine such centers had been established by 2009, in collaboration with UNICEF (Church Forum Annual Report 2009: 10).

##### **6.4.2 Shelter Box clothes distribution**

The CF works together with the UK-based Shelter Box agency, which provides personally tailored boxes of clothing to individual children, mostly those who have been orphaned due to HIV (Church Forum Annual Report 2009:11).

##### **6.4.3 Farming God's Way**

The Church Forum has also responded positively to issues of rampant food insecurity due to a combination of the HIV and AIDS pandemic and high levels of unemployment. Thus, through the CF, firstly, food packages are distributed to the orphaned families. Secondly, a low cost but high yield farming method called "farming Gods way" has been developed. Workshops and training were conducted at Caritas, Manzini on this faming method. Care givers were capacitated and encouraged to share the skills they had learnt, as well as being supplied with farm inputs after training (Church Forum Annual Report 2009:13).

##### **6.4.4 Care Givers Training**

Via the structures of Neighboring Care Points (NCP), communities are galvanized to join together with AIDS orphans and ensure that they get access to education, nutrition and health services. Several training programs have taken place in this way (Church Forum Report 2009:14).

#### **6.4.5 Siphilile Mother Mentor Program**

The Mother Mentor Program works to educate and empower women to access health centers and to maintain healthy lives as mothers, both for themselves and their children.

The CF is involved in the following advocacy and lobbying campaigns:-

##### Candle light memorial

This memorial service is held in memory of lost loved ones in order to reduce stigma and discrimination linked to HIV, to ensure access to preventative and treatment options, as well as to “promote gender involvement” in the communities’ responses (Church Forum Annual Report 2009:18).

##### Worlds AIDS Day Campaign

This day highlights awareness for the need for HIV victims to receive care and support, as well as to highlight the need for voluntary testing in order for people to know their status (Church Forum Report 2009:19).

##### Human Rights Day

Emphasizing that HIV is a human rights issue is a way of stressing that the right to dignity and care does not end with HIV infection (Church Forum Report 2009:22).

##### A Man’s Knows Campaign

Consultations with the Swazi government about population development and the role of the church in promoting the Millennium Development Goals in particular those concerning women’s sexual and reproductive health and rights (Church Forum Annual Report 2009:22).

#### **6.5 Women’s Sexual and Reproductive Rights and the CF: A Critique from a Radical African Feminist Perspectives**

Since this thesis builds on the theory of radical African feminism, it is also necessary to insert here a reminder of their aims – as discussed in chapter one – which can then be employed in the discussion on the work of the Church Forum. The aims are:

- To bring about transformation by examining women's situations and advocating on their behalf;
- To radically overhaul all power relations that result in the disempowerment of women;
- To struggle for mutuality and respect in overcoming systems of hierarchy that promote oppression and exploitation.
- To work toward peace, justice and freedom (Dosekun 2007).

In the previous chapter, the central role played by culture and religion in shaping male and female roles and social positions was highlighted by employing also the work of African women theologians (Phiri, Rakoczy, Kanyoro, Oduyoye and others). Clearly the aims of radical African feminism outlined above, mirror those of African women theologians, who critique culture and religion for the roles they play in:

- Keeping women in situations of poverty and subjugation;
- Justifying power relations at home, in society and in the church, that place women at the mercy of men;
- Struggling against systems of hierarchy (in leadership, in socio-economic settings, in the political realm, in churches, in communities and at home) that position men above women in every respect;
- Working to end violence against women, gender justice, and freedom of choice for all.

A critique of the work of Church Forum will indicate whether this body is as receptive to the demands of radical African feminism as it is to the requirements of ecumenical theory.

Prior to examining the CF approach to women's sexual and reproductive rights, it is necessary to get an overview of the broader church's understanding of these rights. Sexual reproductive rights, as argued earlier in chapter three, deal with the human right of all people to have the best possible standards of sexual health. This includes; the right to access sexual health care services, quality information, respect for the bodily integrity and the ability to choose sexual partners.

Swaziland is considered to be a strongly patriarchal society as argued earlier in these study (see chapter five), and it also has a high prevalence of HIV and AIDS. Recently, an ecumenical

movement (the Church Forum on HIV and AIDs in Swaziland) has made a significant contribution to the effort to address the challenges brought about by the HIV and AIDS pandemic. The Church Forum has also sought to address the challenges which have a more broadly adverse effect on gender justice, and which in turn impacts on the sexual reproductive rights of women in Swaziland. For the church in general, any sexual activity is linked to marriage. This is despite the fact that in Swaziland, around half of the adult populations are married or cohabiting in long-term stable relationships, together with their children. “In Swaziland, only 23% of children live with both parents, and of the 45% of children who live with only one parent, most (81%) do have another living parent” (Ruark 2010: 30).

In view of the radical feminist approach regarding the above mentioned situation, the CF has to engage with the patriarchy hierarchy to promote gender justice, women empowerment, peace and freedom of women in Swaziland. This is significant as most churches do not address the issue of multiple and concurrent sexual partnerships, the idea of patriarchy, and violence against women. Instead, they continue to base their teachings on the assumption that most adults are in stable long term relationships or married. Besides the generally accepted view among churches that women have the right to access treatment and information linked to sexual and reproductive health, most of their other stances on sexual and reproductive rights continue to be tied to marriage. Even where marriage still takes place, women are disadvantaged. For instance, Swazi men prefer marrying according to Swazi custom. This is because this custom encourages them to have more than one wife. It is not uncommon for a man to marry his wife in civil rights and then decide to become a polygamist” (Mabuza 2010:33).

Due to the continued emphasis on marriage by the church as indicated in the work of Taruvinga (2010:48-57) and Okaalet (2010:58-63), the church in fact lacks a proper understanding of women’s sexual and reproductive rights as they appear on the ground. This stance leads to the following consequences for women as regards their sexual and reproductive rights: the prevalence of sexually transmitted infections; unwanted pregnancies and unwanted children; unstable marital and non-marital relationships; physical and emotional abuse; perpetuation of gender stereotypes; and the prevention and non-use of protection such as condoms (Njoroge and Wanjiru 2010: 46-47).

As outlined in the paragraphs above, the work of the CF is more directly linked to the following realities which impact directly on women's sexual and reproductive rights: the law; culture; poverty; and education.

Gender justice is a central concern when it comes to the issues of women's sexual reproductive rights. It is something that the church needs to tackle if it seeks to make a positive impact on its community. Isabel Phiri (2002:77) contends that gender justice is the promotion of the humanity of both women and men in the church through their gifts as revealed by God. She adds that any form of discrimination and oppression stains the image of God in creation and humanity. According to Phiri, God is a God of justice and the practice of Christianity is supposed to reflect the justice of God. In the context of reproductive rights, Nyambura (2009:4) quotes the United Nations Secretary General's Report (2006:28,) that views gender justice from the historical perspective:

Gender roles - the socially constructed roles of women and men in our times - 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. ... [Also] institutionalized laws and political structures are embedded in the local and global economies. Patriarchy restricts women's choices but does not render women powerless, as evidenced by existence of the women's movements and successful claims by women for their rights.

### **6.5.1 The CF and Cultural Engagement**

CF engages church leaders in education, modeling and promoting best realistic alternatives for mediators who want to know how to better resolve conflict. Leaders from different churches are trained in conflict transformation and advocacy on the best strategies for solving conflicts in the churches as well as families (Church Forum Third Annual Report 2009:26).

The church has a role to play regarding the plight of African Christian women. Since it is a spiritual home for both women, she is called about to proffer women's empowerment in redefining and transforming powerful patriarchal African cultures (Masenya 2003:125). In Swaziland many women are in a slumber in realizing that patriarchy renders them powerless and to be lesser human beings (Nyambura 2009:5). However, this is against the fact that God created women and men in Gods image.

However, through the lens of radical African feminism, the church forum ought to be cognizant that men dominate women through institutionalized and structural means. Therefore, to use radical feminism will mean that the greatest concern of the church is to focus on the constructive theologies that can bring reconciliation, healing and peace and fullness of life to the marginalized communities, including women (Chitando and Chirongoma 2012). Chitando and Chirongoma (2012:19) in their article “Redemptive masculinity” quote Musa Dube (2001) who contends that Jesus is a role model for African men in our contemporary times. Instead of abusing power, Jesus empowered others. Dube suggests that Christian women should strive to learn from Jesus, because he broke the rules and regulations and norms that denied people life. It is from this example of Jesus that the ecumenical movement should embrace radical feminism in calling for a “Just, participatory and sustainable society, for peace and the integrity of the society” (Conradie 2010:203). Discrimination and injustice are major causes of worldwide women’s poverty as well as their vulnerability to abuse of their sexual reproductive rights. Therefore, the church is called upon to ensure that both women and men benefit equally from the churches’ ministry. “There is a need for courageous and empowered leaders in this era that must be committed to evangelization and ecumenism... if gender justice is to prevail” (Mwaura 2004:10).

When ecumenical theory converses with radical African feminism it becomes what Hunter (1990:397) describes as the wholeness and complete process of life of faith that is always striving to be brought into being; without this, the quest for justice is uncertain. It is with the same radical feminism that the role of the church is to persistently respond to the social sins of political oppression, economic exploitation and cultural alienation in order to inaugurate the reign of Christ (Kaunda, 2013:3). Kaunda adds that social justice is one of the central issues in the Bible. God created the world and human beings for abundant life. Thus the sexual reproductive rights of women and HIV pandemic and other social injustices including gender injustice, provide the church leaders in Swaziland with an unprecedented opportunity for a major breakthrough in developing the moral consciousness of their society for transformation.

Masenya postulates that in the course of the education process, educators should expose powerful patriarchy as an evil system which continues to be used by the church to perpetuate inequalities between people (Masenya 2003:125). As part of its program of working for the development of mediation and leadership in resolving conflicts, the CF tries to build bridges, but

it does not overtly deal with the gender disparities at the heart of many issues of conflict. This could be due to patriarchal structures that the same church is built on. However, radical feminism calls for transformation of these church structures. In principle, church structures are supposed to be open, and offer equal treatment to both parties' men and women.

Added to this, the CF has been involved in sensitizing churches to tackle the issue of faithfulness and fidelity as well as abstinence. "The CF on HIV and AIDS has exploited the onset of the epidemic as an opportunity to reinforce its traditional moral teachings and values with regards to sexual behavior and marital relationships" (Church Forum Annual Report 2009:26). The CF position is that while condoms have a role to play in preventing transmission, they rather wish to emphasize the need for sexual purity before marriage, and fidelity within marriage. This program was run together with the Swaziland Population Services International beginning in 2008, when youth camps and leadership training on this subject was delivered to churches (Church Forum Annual Report 2009:27). However, the Roman Catholic church is opposed to birth control as an agent of contraception in spite of the perception that the so-called "natural methods of family planning", which are approved by the Catholic church, are unreliable, unacceptable, and ineffective (Ryder 1993:723).

Oduyoye (1995:481) contends that there is a need for a new biblical interpretation and the Christian theology in Africa so as to promote the advancement of women's rights in Africa. Oduyoye questions the misinterpretation of sacred scripture as the church's foundation of gender inequality. She condemns the use of outdated exegetical methods by church ministers that enthrone an uncritical use of the biblical texts against women. She says, although there are legalities within the ecclesia, decision making is reserved for men who serve on pulpit. As a result, women cannot make any decision on their own including power over their own bodies.

The CF's "A Man Knows" campaign is directly linked to the acknowledgement that women's subordination due to patriarchy means that they are often very vulnerable to HIV infection. The Church Forum has responded by taking church leaders on programs that are aimed at changing attitudes to women and breaking down stereotypes. For instance, Linda van Rooyen and Cyclic Hartell (2010:320) and Kidd et al (1997:69) argue that Swazi women have always been regarded as minors and that this view has resulted in women not being able to contribute to decision making in matters pertaining to their own lives as well as to the wider economic development of

Swaziland. As a result, women bear the burden of unwanted pregnancies, and this problem is further compounded by the freedom of men to have sexual relationships with other women beside their regular partner. If the woman becomes pregnant she may not receive any support from the man.

Therefore, the preceding stereotypes are embedded in Swazi cultural thinking. To change such attitudes, a comprehensive approach is needed to challenge these cultures that undermine women's sexual and reproductive rights. As Kanyoro (1997) alludes, such backward cultures have silenced many women in Africa making them unable to experience the liberating promise of God.

The CF has also been engaged in a program dealing with stigma and discrimination. A Consultancy on Reducing Stigma and Discrimination in the Church was held with the help of LCC Capital Consultants in 2009, and aimed at dealing with the assumed promiscuity and pre-marital sexual engagement of those infected with HIV. The labeling of these people as "sinners" was highlighted as both untrue and unhelpful in the fight against the pandemic. Men's promiscuity in many cultures may be seen as heroic acts, while women, if they engage in such acts, are termed immoral. Blaming women for promiscuity is against the UNFPA description of women's rights which does not restrict sexual and reproductive rights to couples only - meaning it allows individuals to exercise their freely chosen sexual right with whoever they want, whether married or not.

### **6.5.2 The CF and Women's Health Programs**

Siphilile is an ecumenical project supported by the Church of Sweden in collaboration with the Church Forum on HIV and AIDS (Siphilile, 2013:1-2). Siphilile aims to improve maternal and child health and nutrition through the implementation of a Mentor Mother program. This community-based peer support model empowers women, and society as a whole, to make fact-based decisions and to take action for a better, healthier life.

The Mentor Mother program for instance supports pregnant women to follow their antenatal health care plans, gives advice on nutrition and hygiene, promotes exclusive breast feeding, identifies malnourished children, mediates contacts with the health system, and refers women and children to the appropriate place (Siphilile, 2013:3).

The strength of the sustainability of the Mentor Mother program lies in the fact that it builds on skills and coping mechanism that are already present within communities. The most effective mentorship comes from the people who have faced the same challenges in the same context as those in need of support (Church Forum Annual Report 2009:14). From a radical African feminist perspective, this program is probably a positive step. However, a program like this needs to address the underlying problems like poverty and patriarchy that lead to the abuse of women's sexual and reproductive rights.

In addition, the CF has been extensively involved in working with the Swazi government in regards to an International Conference on Population and Development, held in 1994 in Cairo, to which Swaziland became a signatory. The core outcome of this conference was the need for reproductive health to be seen as an issue of human rights, human wellbeing, and individual wellbeing (Church Forum Annual Report 2009:24). After having adopted this policy in 2003, the Swazi government recognized that the policy involves not only health, but also development, education, employment and environment. The CF works together with the Christian Network on Population and Development for the implementation of the goals of the Cairo agreement and the Millennium Development Goals. Consultative regional meetings were held in 2009 with church leaders, as was a workshop which aimed to educate the populace on the above-mentioned goals; to find a biblical and commonly (interdenominational) acceptable approach to population and human development (birth control); and to sensitive church leaders on gender equality and equity. Crucially, the essential importance of women's reproductive and sexual health, as well as the promotion of gender equality, was recognized and stated as integral to the achievement of the wider Millennium Development Goals that will lead to a better quality of life for all (Church Forum Annual Report 2009:25). Since a radical feminism framework calls for equal treatment of women in terms of their rights, this is a positive step forward in recognizing that all human development depends on women's development.

In the cotemporary world, there is an urgent need for provision of artificial contraception as one of the answers to overpopulation. However, this urgency has brought into play a denominational difference of opinion on the use of contraceptives. For instance, the Catholic Church is totally opposed to use of artificial birth control methods in support for the so-called "natural methods of family planning". However, this method is widely regarded as ineffective (Ryder 1993:723) by

some of the evangelical churches like the Methodist who support the use of artificial contraceptives. Also, some CF member churches may also be opposed to gender equity in their doctrinal approach. However, within the safe space of the CF, there is the opportunity for churches to engage in activities they might not be able to do otherwise, because of internal opposition.

## **6.6 CONCLUSION**

This chapter has provided a qualitative analysis of the mission of the Church Forum as a life-giving ecumenical instrument that adheres to radical African feminists' demands in addressing women's sexual and reproductive rights in Swaziland. In its engagement, it has offered a theological reflection, from the viewpoint of African women's theology on how the CF has responded to address the plight of women's sexual and reproductive rights. Since then it is established that Church Forum has managed to initiate various programs that have had significant impact which has allowed an honest and detailed examination of the life situations of women and recognition that their transformation is needed. However, the chapter found that unjust power relations and patriarchal systems of hierarchy couching social, political, ecclesial and domestic relationships which lead to the disempowerment, oppression and exploitation of women have yet to be addressed meaningfully. Only thereafter will the goals of peace, justice and freedom which radical African feminism shares with the ecumenical movement, finally be realized. Chapter seven intends to give an overview of the study and its conclusions, highlighting some key findings while pinpointing potential areas for future study.

## CHAPTER SEVEN

### CONCLUSIONS OF THE CONCLUSION

#### 7.1 INTRODUCTION

In general, this study has endeavored to identify the socio-cultural factors that influence the sexual and reproductive rights of Swazi women within the Church Forum and the extent to which these issues are being addressed. In this chapter, an overview and key findings of the study are presented, followed by recommendations for further study.

#### 7.2 Summary of the Study

Chapter one served as an introductory chapter which outlined the background of the study, a brief literature review, the research problem and objectives, and the theoretical framing of the study. It presented the research design, methodological aspects and the structure of the study.

Chapter two was devoted to describing the context of Swaziland where this study was carried out. It was pointed out that Swaziland is one of the African countries located in the Southern parts of Africa. It has been argued that Swaziland is a special country in that it subscribes to both western and traditional model of governance. This is demonstrated by the fact that the King exercises absolute rule over the economy which is predominantly agricultural. Further, the community is characterized by patriarchal rule which cuts across all areas of politics, economics, cultural practices and religious affairs, with polygamous marriage being highly practiced and honored. All these characteristics create an environment that allows for gender injustices, especially of women's sexual and reproductive health rights.

In chapter three, the concept of women's sexual and reproductive health rights was conceptualized, analyzed and discussed both globally and regionally. It was pointed out that women's sexual and reproductive health rights is a concept that has to do with women's freedom and capability to make decisions regarding their sexual and reproductive health without discrimination, coercion and violence – essentially enjoying the same rights equally as men do. This idea emerged out of the context of oppressive patriarchal gender relations in Africa and other parts of the world. In order to promote women's sexual and reproductive health rights, a number of protocols and charters have been agreed to and signed. A good example of these protocols is the SADC draft protocol which mandates all SADC member states to

constitutionally protect against gender inequality and ensure that all customary laws observe the Constitutional provision of gender justice in general.

The focus of chapter four was on the exploration of women's sexual and reproductive health rights in the context of Swaziland. It is apparent that men in Swaziland have taken an intrinsically superior position over women because of the persistence of the patriarchal system coupled with their absolute poverty. It was further evident that the constitutionally mandated women rights are not being realized because of the absence of political will, insufficient education and absence of legal representation.

Qualitative analysis of the mission of the Church Forum in responding to the plight of women in Swaziland was presented in chapter five. The Church Forum is acknowledged as a life-giving ecumenical instrument full of the potential to address women's sexual and reproductive health rights in the Swaziland community. However, it is also apparent that the ecumenical response to women's plight in Swaziland has been limited to issues of HIV and AIDS and food security. Little attention has been given to broader issues of gender justice, suggesting that much needs to be done if the church is to fully and genuinely participate in God's mission.

Chapter six of this study uses ecumenical theory coupled with *missio Dei* and radical feminist theory to evaluate the current work of Church Forum and suggests ways through which the ecumenical movement can be a more life-affirming instrument through its holistically addressing gender injustices.

### **7.3 Summary of Conclusions**

As it has been indicated throughout the study, especially chapter one, gender injustice in the Swaziland Community results from multifaceted factors. In the first place it begins with the entire model of governance adopted by the Swaziland community where the hybrid of both western and traditional (Kingship) features of governance is evident. Patriarchal dominance is another contributing factor, with polygamous marriage being one of the pre-eminent characteristics of the society, which is honored, respected and cherished throughout the country. This is compounded by the absolute poverty which forces women to engage into risky, unhealthy sexual and reproductive behavior.

Apart from SADC resolutions and constitutional provisions on gender justices, women in Swaziland have continued to suffer under unequal gender power dynamics, with men being accorded a superior position which is abusively used to infringe women's rights, even in matters of sexual and reproductive health choices. This situation is exacerbated by the insufficient education on women rights, lack of political will and inadequate legal representation for women. The Church Forum which stands as the ecumenical body, has been working hard to address issues of gender injustice, but mainly focusing on HIV and AIDS and food security issues. Since insufficient attention has been paid to challenging the broader perspective of gender inequality through unequal power relations and oppressive systems of hierarchy – as per the demands of radical African feminism - the abuse of women's sexual and health reproductive rights has persisted. In order for this ecumenical instrument to be a holistic, life-affirming instrument which addresses women's gender concerns comprehensively, the study has suggested that the Church Forum's mission and commitment be revisited while integrating a radical feminist approach in order to foster life-enhancing change in the Swaziland community, especially concerning women's sexual and health reproductive rights.

#### **7.4 Signposts for Further Inquiries**

Throughout this study it has been pointed out that gender injustice that women of Swaziland experience in everyday life, especially their choices and decisions on sexual and health reproductive matters, are life-threatening. Also this study has brought to the fore the need for the church to be critical of this and always seek to affirm life holistically as it strives to fully participate in God's life-saving mission. Given that this study was limited in terms of scope and time, it is fair to admit that this study has not been exhaustive. There are some areas that this study could not cover in great detail, thus opening up opportunities for further advancement.

The following are some of the areas this study has identified as needing further inquiry has to do with mainstreaming sexual and reproductive health rights of women in Swaziland. This is necessary due to that fact that the traditional and patriarchal systems in Swaziland community have deeply embedded roots, such that no quick-fix transformation can be easily achieved. Mainstreaming of gender justice in general and sexual and reproductive health in particular has the potential of initiating a transformation process. It means that gender issues must be made part

of the church mission, the daily life of people, as well as the education systems. However, how such mainstreaming is to be carried out is the subject of another inquiry.

Despite the fact that Culture is a source of identity and solidarity, it can be a stumbling block to responding to the challenges of women sexual and reproductive health rights in Swaziland. Culture may undermine advocacy for women sexual and reproductive rights when it reinforces back powerful and domineering patriarchy. This study has established that there is a need for development of a new culture that enhances mutuality between men and women in the CF Swaziland. Further study needs to be taken to unravel all cultural norms that contribute to gender inequality, sexual violence, sexual exploitation of women and girls, virginity testing, multiple sexual partners including polygamy and use of sex by men as a proof of manhood.

In its ecumenical engagement, the church needs to promote the understanding that marital love is mirrored on God's love for the church. In relation to the preceding, there is a need to carry out a study on how ecumenical engagement can advance the advocacy for development of women's sexual and reproductive rights within the church. Ecumenism calls for the church to understand God's love as the love for women who are the oppressed. This can be achieved by promoting women's sexual and reproductive rights starting with the church as institution then lighting it up to the rest of the world. Rather than calling for women to be submissive to their husbands, the church need to be an instrument of advancing mutual understanding and support between husband and wife.

The church has to spearhead and be innovative. Throughout history the church has been at the forefront of providing schools, hospitals and so forth. Why can the church have the education and promotion of women in general and particular in sexual reproductive concerns? Therefore, this study challenges the church in Swaziland to respond to the question as to why it plays a passive role on matters of Swazi women's sexuality.

## **7.5 CONCLUSION**

This chapter covered all the findings of the study from chapter one through chapter seven. It has concluded that patriarchy is a major hindrance to the achievement of women's sexual and reproductive rights in Swaziland. Patriarchy in this case has played a role in the political, economic, religious and socio-cultural ordering of Swaziland. Significant decisions regarding the

affairs of women continue to be made by men. At the same time, the study has provided a qualitative analysis of the mission of the Church Forum and explored the extent to which it is serving as a life-giving ecumenical instrument in addressing women's sexual and reproductive rights in Swaziland. In terms of its response to the situation on the ground in Swaziland. Meanwhile, through the lens of radical African feminism, including its expression in the work of African women theologians, the work of the Church Forum has been critiqued in terms of the impact it is making with regard to the oppression and exploitation of women, as mirrored in their continued lack of full access to sexual and reproductive rights.

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