Understanding and Addressing Gender-Based Violence in Places of Worship: A Case Study in KwaZulu-Natal, South Africa

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Abstract: Gender-based violence (GBV) in places of worship is a prevalent issue in societies around the world, including KwaZulu-Natal (KZN), South Africa. This study investigates the occurrence, nature, and consequences of gender-based violence (GBV) in KZN’s places of worship. A quantitative research approach was used to collect data, and 2835 respondents from 11 district municipalities in KZN participated. The outcomes of this study indicate a significant incidence and knowledge of GBV in places of worship. Approximately 55.38% of respondents reported being victims of GBV in places of worship. However, most of these occurrences are carefully concealed to protect the dignity of both the church and the perpetrators. Based on these findings, this study advocates a more robust legal system to protect women and children, the closing of places of worship where abuse has been documented, and the eradication of damaging gendered norms and beliefs as ways to combat GBV. This study also suggests implementing awareness and education programs, training religious leaders and community members, establishing reporting mechanisms, offering support services, advocating for policy changes, empowering marginalized groups, and investing in additional research and monitoring. These efforts are critical for fostering safer and more supportive settings in places of worship where everyone can worship without fear of violence or prejudice.

Keywords: Gender-Based Violence, religion, financial abuse, abuse of power, marginalization.

1. Introduction

Gender-based violence (GBV) remains a prevalent and deeply entrenched issue within societies worldwide, transcending geographic, cultural, and religious boundaries. In recent years, increasing attention has been directed toward understanding and addressing GBV in religious institutions (Takyi & Lamptey, 2020; Marshall et al., 2021). This is primarily because scholars have argued that while religious institutions can be instrumental in fighting GBV, they may also contribute to normalizing violence and perpetuating gender inequalities that underlie GBV (Pertek, et al., 2023). Before delving into the interplay between religion and GBV, it is imperative to understand the current state of GBV from a broader perspective, considering its prevalence, severity and impact on individuals and society. While this study acknowledges that GBV affects all groups, irrespective of race, gender, and class, it has become increasingly apparent that women and children are at a greater risk of experiencing violence, making them a particularly vulnerable population. (Lippel, 2018). According to a report by the World Health Organization (WHO) in 2021, approximately 1 in 3 women worldwide have experienced physical or sexual violence, often perpetrated by intimate partners or family members (World Health Organization, 2021).

In South Africa, including KwaZulu-Natal (KZN), there has been an outcry regarding the disturbing drastic increase in the number of media reports on sexual abuse, molestation and rape perpetrated in places of worship, particularly by religious leaders (Times Live, 2018; Dlamini, 2022). However, there is limited research addressing the prevalence and crisis of GBV in places of worship in South Africa as a whole. This gap is also observed globally, for example, McPhillips & Page (2022) observe that despite the extensive scholarship on GBV in general, far less attention has been paid to how it intersects with religion. Religion has not been explicitly considered as a starting point for research on gender-based violence. In light of these gaps, this study aims to contribute to the existing literature by examining the prevalence, nature, and implications of GBV within places of worship in KwaZulu-Natal, South Africa. By employing a comprehensive approach that integrates qualitative data collection methods, this research endeavors to provide valuable insights into the factors contributing to GBV and awareness of the issue. Ultimately, the findings of this study aim to inform evidence-based strategies for combating GBV within religious contexts, fostering environments of safety, respect, and dignity for all.
2. Literature Review

Gender-based violence (GBV) is a multi-dimensional public health and human rights issue of universal concern. It operates as intimate, interpersonal, and structural violence, affecting millions of individuals, families, and communities worldwide (Aghtaie & Gangoli, 2014). GBV encompasses domestic violence, intimate partner violence, politically motivated violence, sexual harassment, and violence in the workplace (Dzinavane, 2016). The Inter-Agency Standing Committee (IASC), as cited in the United Nations High Commission for Refugees (UNHCR, 2020), defines GBV as an umbrella term for any harmful act committed against someone’s will that is motivated by socially constructed (i.e., gender-based) differences between men and women. These acts can include any psychological, emotional, physical, mental, or financial harm and can be perpetrated in public or private contexts. Notably, these acts are often deeply rooted in patriarchal, religious, and cultural institutions. Although there is compelling evidence that, to some degree, men and other minority groups do suffer from GBV, evidence suggests that the frequency, severity, and intensity of such violence is much greater for women and children (Ali, 2018). The relationship between religion and gender-based violence (GBV) has been a subject of scholarly inquiry, revealing complex intersections between religious beliefs, practices, and social norms that influence attitudes towards gender roles and violence.

Religious institutions have traditionally contributed to a wide range of humanitarian activities, such as providing physical protection, facilitating access to aid, promoting peace-building activities, combating discrimination, and addressing gender-based violence (Marshall et al., 2021). However, some scholars suggest that these institutions may also expose individuals to harmful gender norms, which may result in violence or contribute to society’s tolerance of violence (Nadar, 2005; Ghaafournia, 2017). Scholars such as Powell & Pepper (2021) have revealed alarming rates of GBV occurring within these sacred spaces. These scholars conducted a comprehensive study on intimate partner violence in the Anglican Church of Australia (Powell & Pepper, 2021). The research revealed that the prevalence of violence within the church was either the same or higher than that of the wider community. Moreover, the study found that women were at a significantly higher risk of being victims of such violence compared to men. When seeking help, victims were found to rely less on the church and more on external support services. Similarly, Dlamini (2022) conducted a study reflecting on the lived experiences of Christian women survivors of GBV in KwaZulu-Natal. The findings of this study demonstrate that African Christian women are subjected to abuse under the guise of religion and culture. Additionally, this study argues that patriarchal beliefs, cultural norms, and religious language and doctrines that exist in this context serve as fertile ground for GBV.

According to Swindle (2017), abuse in religious settings manifests itself in various ways, including abuse perpetrated by religious leadership. In this context, religious leaders who commit abuse may use their authority or position to manipulate and control their victims, who may be congregants or people who rely on them for spiritual guidance. Another form is the abuse perpetrated by a religious group, directed either toward an individual or towards a group of people. Lastly, abuse in which the abuse itself has a religious component to it, can manifest in different ways, such as using religious texts to justify abusive behavior or using religious practices as a means of control. In agreement, Dlamini (2022) contends that theological justifications can provide a foundation for abusive social patterns, creating a patriarchal milieu where women experience abuse, oppression, and victimization. Scholars such as (Vaughan, 2021) identify various factors within religious contexts that reinforce gendered drivers of violence, including misinterpretations of religious teachings, misquotation of bible verses, hierarchical leadership structures, and barriers to divorce for abused women. Christian women, scarred by abusive pasts, often find themselves attending church services with a façade of ideal families while grappling with trauma in private (Benyei, 2014). A comprehensive investigation is imperative to comprehend how distorted interpretations of biblical texts within the Christian faith can adversely affect the health and well-being of women and children.

Dlamini (2023), says that victims of GBV sometimes find themselves entrenched in or returning to harmful relationships, justifying their choices through the lens of their religious convictions. This phenomenon is particularly evident within the Christian faith, where longstanding patriarchal norms often place women in a marginalized position as the ‘other’ in relation to the holy trinity of man, God, and the Church (Gervais et al., 2018). The consequences of such gender dynamics are starkly illustrated by (Kobo, 2018) who draw parallels between the historical oppression of Black women in dungeons on Ghana’s Gold Coast and the contemporary
plight of Christian women trapped in toxic marriages. The visualization of broken Black African women's bodies in dungeons serves as a metaphor for the structural oppression and commodification of Black humanity as enslaved people. This grim imagery mirrors the experiences of Christian women facing GBV condoned by the church, emphasizing the urgent need for radical modification and pastoral intervention rooted in Womanist theologies and ethics (Berman, 2015). Henry (2019) stated that the role of churches as potential facilitators of violence against women becomes apparent through hierarchical structures that deny women equal roles, perpetuating stereotypical gender norms.

This is manifested in the restriction of women from leadership positions, thereby reinforcing a perceived superiority of men. Moreover, a literal interpretation of certain biblical texts, such as the assertion that man is the 'head of the woman,' can inadvertently legitimize male superiority, particularly in patriarchal cultures (Trible, 1973; Barlas, 2019). le Roux (2022) reported that churches inadvertently facilitate violence by neglecting to address Gender-Based violence. This social problem, if left unacknowledged and unstudied within religious communities, can manifest in subtle yet damaging ways that attack human dignity. Furthermore, violence may be encouraged by 'spiritualizing' situations that require urgent help and treatment, fostering the belief that prayer alone can miraculously transform aggressors (Mullett, 2023). While recognizing the potential for divine intervention, it is crucial to emphasize the importance of seeking professional help and taking necessary measures to protect the lives and dignity of those experiencing violence. Besides patriarchy, the religious context presents religious leaders with enormous power and influence which sometimes leads to abuse. This can lead to the inherent assumption that these religious figures are trustworthy, authoritative, and deserving of their status as spiritual and moral leaders. In a context where religious figures wield such control over their members, all forms of abuse can take place and be concealed, normalized, and even perceived as God's will (Visser, 2012). Such incidents of abuse in religious institutions are exerted in many ways, such as using scriptures to manipulate and control women.

For example, one controversial scripture is 1 Timothy 2:11-12 "A woman should learn in quietness and full submission, do not permit a woman to teach or to assume authority over a man; she must be quiet." Additionally, 1 Corinthians 14:34-35 states, "Women should remain silent in the churches. They are not allowed to speak but must be in submission, as the law says. If they want to inquire about something, they should ask their husbands at home, for it is disgraceful for a woman to speak in the church." Such scriptures prohibit women from speaking out, even against abuse. In South Africa, several high-profile cases involving leaders of religious places have made headlines. Based on recent reports of abuse of church members by their church leaders is no longer a myth but rather a reality, given the number of cases before our courts where these leaders are being prosecuted. Moreover, patriarchal structures within religious institutions have been identified as key drivers of GBV, exerting control over women's bodies, behaviors, and choices. Research conducted by Dlamini (2023) revealed that patriarchal interpretations of religious teachings often prioritize male authority and dominance, relegating women to subordinate roles and perpetuating systems of oppression. Within this framework, women are subjected to various forms of violence, including domestic abuse, sexual harassment, and forced marriages, under the guise of religious obedience and adherence to traditional gender roles (Dlamini, 2023). Despite the complicity of religious institutions in perpetuating GBV, studies have also highlighted the potential role of religious leaders and organizations in addressing and mitigating this issue (Enaifoje, 2019; Dlamini, 2023). While some religious leaders have been instrumental in challenging patriarchal norms and advocating for gender equality, others have been reluctant to acknowledge or confront the prevalence of GBV within their communities.

3. Methodology

This study's data was gathered utilizing a quantitative research approach. Quantitative research refers to data that is quantifiable. This is due to the huge sample size, which is thought to be representative of the entire population. The results are interpreted as a generic and adequately complete perspective of the whole population (Martin & Bridgmon, 2012). A simple random sampling technique was used to gather responses from the target population.

**Recruitment Strategy, Data Collection and Analysis:** In this study, data was collected from 11 district municipalities in South Africa's KwaZulu-Natal province from churchgoers, worshippers, and the general public.
aged 18 and above. The recruitment strategy involved obtaining permission from religious authorities and gatekeepers before collecting data from individuals who agreed to participate. Data collection methods included survey questionnaires and in-person interviews, focusing on demographics and the prevalence and causes of gender-based violence (GBV) in places of worship. Additionally, a Likert scale was used to score responses on the causes of GBV in places of worship and intervention tactics. The collected data were analyzed using the Statistical Package for Social Sciences (SPSS) and STATA version 17, which included the utilization of the Pearson chi-square test to explore associations between categorical variables, such as demographic characteristics and GBV victims. Descriptive analyses were also conducted, incorporating graphs and tables to visually represent the data, providing a comprehensive examination of the research questions and findings.

**Sampling Design and Sample Size:** The sampling strategy is the act of picking appropriate individuals, entities, and events to represent a wider population for the study (Sekaran & Bougie, 2013). The population size for this study was 9 426 017 (Statistics South Africa, 2006), and the sample size was 2653, calculated using the Raosoft sample size calculator with a 99% confidence level and a 3.5% error margin. However, the study gathered information from 2885 respondents from all KZN districts. In accordance with established principles of data integrity, 2,835 responses were utilized for analysis out of 2,885 total responses due to the presence of missing variables, ensuring statistical rigor, and maintaining the integrity of the research outcomes. This approach adheres to methodological transparency and ethical standards, upholding the quality and credibility of the academic research. This study’s subjects were chosen at random. Simple random sampling is a widely used sampling technique in scientific research. For very homogeneous groups, simple random selection is used, in which research participants are chosen at random (Bhardwaj, 2019). In this method of sampling, sample members are chosen at random and entirely by chance. As a result, the sample’s quality is unaffected because each member has an equal probability of being chosen for inclusion.

**Reliability and Validity:** In this study, a panel of experts validated the instrument (questionnaire) through content validity and cognitive interviewing. The Item - Content Validity [I-CVI] was employed in this study as a Content Validity Index (CVI). Three academic content experts were asked to rate the relevance of each issue on a four-point Likert scale: 1 = not relevant, 2 = slightly relevant, 3 = relevant, and 4 = highly relevant. The number of experts who scored 3 or 4 on each issue was then counted (3,4 - relevant; 1,2 - nonrelevant). The recommended I-CVI ranges between 0.78 and 1.00, and the score obtained for the questionnaire was 0.9.

**Ethical Considerations:** Ethical considerations were carried out by obtaining written and signed informed consent from the participants. The informed consent form provided a brief explanation of what the study was all about and informed the participants of their rights. This included informing them that participation was voluntary and that confidentiality and anonymity would be ensured. Moreover, ethical clearance was obtained from the research ethics committee. Additionally, victims of GBV were further referred to relevant organizations for additional support and counseling.

**4. Findings and Discussion**

**Descriptive Analysis Results:** The Pearson chi-square test was employed to check the association between GBV victimization in places of worship and socio-demographic factors in Table 1. This study revealed that approximately 55.38% of the participants were victims of GBV in places of worship, while 44.62% indicated that they were not victims. These findings are consistent with the various investigations that have highlighted the GBV issue in religious institutions. A pastor was arrested in Luvisi village, Nquthu municipality, in northern KZN, for allegedly raping 13 minors aged 5 to 17 (TimesLive, 2022). Another Pastor was accused of raping a 16-year-old virgin; the victim claimed that the Pastor asked her to have sexual relations with him at 12 a.m. in the church to wash her of her sins (Makhoba, 2019). A second victim came forward, claiming that the pastor in question sexually assaulted her after she was selected as a church leader and used his position to coerce her. The victim was then warned by the pastor’s armed bodyguards not to report the incident to authorities.

A married woman joined in to report the same Pastor for making multiple sexual advances and offering her a job at the church in exchange for sexual favors (Makhoba, 2019). In another case, a pastor from his People’s Church admitted to having sexual encounters with two church members (Ajam, 2003). In addition, a preacher from Jesus Dominion International is currently in jail and facing 63 counts of rape and human trafficking in the
Port Elizabeth High Court. He is alleged to have sexually groomed approximately 30 victims and began molesting them from the age of 14 (Bezuidenhout, 2023). These findings are merely the tip of the iceberg, as most GBV incidents in places of worship are usually concealed by both the perpetrator and the congregation. The results in Table 1 below show that age, race, type of religion, nationality of the church leader, and district municipality have an impact on GBV victimization in places of worship.

Table 1: Association between GBV Victimization in the Space of Worship and Socio-Economic Parameters

<table>
<thead>
<tr>
<th>Variables</th>
<th>Measures</th>
<th>Non-GBV Victim (n=1,265)</th>
<th>GBV Victim (n=1,570)</th>
<th>X²</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percentage (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Citizenship</td>
<td>0= South African</td>
<td>43.25</td>
<td>56.75</td>
<td>0.172 n.s</td>
</tr>
<tr>
<td></td>
<td>1= None- SA</td>
<td>46.51</td>
<td>53.49</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= Dual citizenship</td>
<td>51.52</td>
<td>48.48</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0= 18-34 years</td>
<td>48.45</td>
<td>51.55</td>
<td><strong>0.000</strong>*</td>
</tr>
<tr>
<td></td>
<td>1= 35-54 years</td>
<td>40.35</td>
<td>59.65</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= 55+ years</td>
<td>43.09</td>
<td>56.91</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>0= Female</td>
<td>44.93</td>
<td>55.07</td>
<td>0.190 n.s</td>
</tr>
<tr>
<td></td>
<td>1= Male</td>
<td>44.35</td>
<td>55.65</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= Other</td>
<td>0.00</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td>0= Black</td>
<td>44.53</td>
<td>55.47</td>
<td><strong>0.032</strong></td>
</tr>
<tr>
<td></td>
<td>1= White</td>
<td>57.89</td>
<td>42.11</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= Mixed race</td>
<td>57.78</td>
<td>42.22</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3= Indians</td>
<td>31.67</td>
<td>68.33</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4= Other</td>
<td>25.00</td>
<td>75.00</td>
<td></td>
</tr>
<tr>
<td>Religion</td>
<td>0= Pentecostalism</td>
<td>37.97</td>
<td>62.03</td>
<td><em><strong>0.000</strong></em></td>
</tr>
<tr>
<td></td>
<td>1= Catholicism</td>
<td>34.88</td>
<td>65.12</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= Christianity</td>
<td>36.04</td>
<td>63.96</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3= Islam</td>
<td>30.99</td>
<td>69.01</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4= Hinduism</td>
<td>19.44</td>
<td>80.56</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5= African Initiated church</td>
<td>37.14</td>
<td>62.86</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6= Other</td>
<td>88.65</td>
<td>11.35</td>
<td></td>
</tr>
<tr>
<td>Nationality of a church leader</td>
<td>0= Not South African</td>
<td>35.37</td>
<td>64.63</td>
<td><em><strong>0.000</strong></em></td>
</tr>
<tr>
<td></td>
<td>1= South African</td>
<td>57.74</td>
<td>42.26</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2= Both</td>
<td>38.74</td>
<td>61.26</td>
<td></td>
</tr>
<tr>
<td>District municipality</td>
<td>1=Amajuba</td>
<td>32.94</td>
<td>67.06</td>
<td><em><strong>0.000</strong></em></td>
</tr>
<tr>
<td></td>
<td>2= Harry Gwala</td>
<td>7.10</td>
<td>92.90</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3= King Cetshwayo</td>
<td>58.66</td>
<td>41.34</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4= Ugu</td>
<td>49.61</td>
<td>50.39</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5= Umgungundlovu</td>
<td>40.47</td>
<td>59.53</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6= Umkhanyakude</td>
<td>40.00</td>
<td>60.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7= Uthukela</td>
<td>32.06</td>
<td>67.94</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8= Zululand</td>
<td>41.53</td>
<td>58.47</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9= eThekwini</td>
<td>78.66</td>
<td>21.34</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10= iLembe</td>
<td>65.75</td>
<td>34.25</td>
<td></td>
</tr>
<tr>
<td></td>
<td>11= uMzinyathi</td>
<td>43.86</td>
<td>56.14</td>
<td></td>
</tr>
</tbody>
</table>

Note: *, ** and *** means statistically significant at a 10%, 5% and 1% level, respectively; n.s means not significant.
The results in Table 1 showed a statistically significant association between age and GBV victimization (P<0.01). Individuals aged 35-54 years exhibit the highest GBV victimization, which shows that 59.65% were victims of GBV in places of worship and 40.35% were not victims, followed closely by those aged 55 years and above, indicating that 56.91% were victims and 43.09% were not victims. Furthermore, the results show that of individuals who fall under the youth category in South Africa, only about 51.55% were victims of GBV, and 48.45% were not. The findings are consistent with existing literature that identifies middle-aged and older people as at higher risk of experiencing GBV in place of worship, attributed to factors such as relationship dynamics, economic stressors, and life transitions (World Health Organization, 2012). Middle-aged and older individuals may be more susceptible to abuse in places of worship compared to younger people due to several factors.

Firstly, middle-aged, and older individuals often hold positions of authority or leadership within religious communities, making them vulnerable to abuse of power by others in positions of trust. This power dynamic can be exploited by perpetrators to manipulate and control their victims. Secondly, as individuals age, they may become more socially isolated or dependent on religious institutions for social support, increasing their vulnerability to abuse. They may be less likely to question or challenge abusive behavior due to feelings of loyalty, fear of repercussions, or a lack of alternative support networks. Additionally, middle-aged, and older individuals may be experiencing significant life transitions, such as retirement, loss of a spouse, or declining health, which can make them more susceptible to manipulation and exploitation (Dlamini, 2022). Perpetrators may target individuals who are experiencing vulnerability or emotional distress, exploiting their need for comfort and guidance. Table 1 results show a significant association between race and GBV victimization at a 5% significant level, with individuals identifying as “other” exhibiting the highest GBV victimization in places of worship with 75% who have been affected and 25% who have not been subjected to abuse in place of worship, followed by Indians respondents where 68.33% are victims of GBV and 31.67% are not.

Black participants who were victims of GBV were approximately 55.47%, and 44.53% were not. White and mixed-race respondents exhibit lower prevalence rates at approximately 42% affected and 58% not victims of GBV in place of worship in KZN. This finding underscores the intersectionality of race and GBV, highlighting the disproportionate impact of GBV on marginalized communities. Research suggests that systemic inequalities, historical injustices, and cultural factors contribute to differential rates of GBV among different racial groups (Jewkes, 2014). A significant association between religion and gender-based violence (GBV) victimization in places of worship in KwaZulu-Natal (KZN) is observed at a 1% significance level. A high percentage of GBV victims within Hinduism and Islam communities, at 80% and 69.01%, respectively, suggests the presence of complex sociocultural dynamics within these religious contexts (Ghafoournia, 2017; Takyi & Lamptey, 2020). These dynamics may include gender roles, patriarchal structures, and interpretations of religious teachings that contribute to heightened vulnerability to GBV among worshippers. Conversely, the lower percentage of GBV victimization observed in the “Other” category, at 11.35%, may reflect unique aspects of these religious affiliations that foster environments resistant to GBV (Barlas, 2019).

Furthermore, the intermediate prevalence rates of GBV victimization among Pentecostalism and African Initiated Church congregations underscore the nuanced relationship between religious beliefs and practices and the occurrence of GBV (Dlamini, 2023; Jewkes, 2014). The analysis reveals a statistically significant association between Gender-Based Violence (GBV) victimization within places of worship and the nationality of church leaders (p<0.01). Specifically, where the church leader is not South African, a substantial 64.63% of respondents are classified as GBV victims, compared to 35.37% as non-GBV victims, indicating a higher prevalence of GBV in these settings. Conversely, in places led by South African church leaders, the percentage of GBV victims drops to 42.26%, with 57.74% categorized as non-GBV victims, suggesting a relatively lower prevalence of GBV. In cases where the church leader holds dual nationality, 61.26% of respondents are identified as GBV victims, while 38.74% are non-GBV victims, implying a higher incidence of GBV in places of worship led by individuals with dual nationality. Consistent with the findings of this study, Ms Thoko Mkhwanazi-Xaluva (Chairperson of the CRL Rights Commission) indicated that the country has a proliferation of independent and charismatic churches led by both South African and foreign pastors (Memela, 2018). The district municipalities in KwaZulu-Natal (KZN) significantly influence the prevalence of Gender-Based Violence (GBV) victimization within places of worship, as depicted in Table 1.
Notably, these findings are statistically significant at the 1% level. In the Harry Gwala district municipality, an alarming 92.90% of respondents report being victims of gender-based violence (GBV) within places of worship. This underscores a profound vulnerability to GBV within religious communities in this district. Similarly, in the Uthukela district municipality, a substantial 67.94% of respondents report being victims of GBV within places of worship. While not as extreme as Harry Gwala, this percentage still indicates a significant prevalence of GBV victimization within religious settings. Conversely, in the eThekwini district municipality, only 21.34% of respondents report being victims of GBV within places of worship, notably lower than the overall average of 55.38%. This suggests a comparatively lower prevalence of GBV victimization within religious communities in this district. Although lower than in Harry Gwala and Uthukela, this percentage still highlights a notable prevalence of GBV victimization within religious contexts.

Types of Abuse Prevalent in Places of Worship: Figure 1 depicts the most common types of abuse that occur in houses of worship: financial abuse (1142), misuse of authority (1040), brainwashing (920), emotional and psychological abuse (836), spiritual abuse (708), and sexual abuse (591). According to Adams et al., 2008), financial abuse, also known as economic abuse, includes actions such as limiting a person's access to education (undermining empowerment), preventing a partner from working (creating dependency), and deliberately undermining their professional endeavors (sabotaging their career).

In South Africa, there's been an alarming increase in the abuse of power by religious leaders. This includes incidents involving pastors coercing the congregation to embark on obscene, cult-like activities such as eating snakes, cockroaches, and grass, farting on people’s faces, forcing the congregation to perform oral and penetrative sex for healing purposes, etc.

Similarly, Curtis & Curtis (1993) discovered that brainwashing and indoctrination are key recruitment methods in cults. Furthermore, experts such as (Richardson, 1979) have highlighted the complex relationship between brainwashing and religion. Independent Online (IOL, 2022) recently published an article about a pastor from the Seventh-Day Adventist Church (SDA) who reportedly sexually assaulted a 16-year-old youth member and was protected by the church. Furthermore, Slough (2010) emphasized the pastor’s complex relationship with the congregation and how such power and authority frequently lead to abuse. Religious orientations and procedures institutionalized and educated church members to honor and respect their religious leaders. Along with this comes the implicit belief that these religious individuals are trustworthy, authoritative, and worthy of their position as spiritual and moral leaders. These levels of trust often make church members vulnerable to control, manipulation, and abuse.
Causes of GBV in Places of Worship: The major causes of GBV in places of worship are pastors or priests taking advantage of the most vulnerable and impoverished members (49.4%). This is linked to financial desperation (49.3%), poor and ineffective justice system (46.5%), harmful social gender norms (46.3%) and the belief that priests and prophets are above the law (44.1%) (Figure 2). In alignment with the discoveries of this study, Curtis & Curtis (1993) argued that conditions of vulnerability, along with emotional and psychological factors, serve as catalysts prompting individuals to join cult-like places of worship. The study underscores the pressing necessity to empower women economically, particularly at the grassroots level. It advocates for the economic emancipation of women, emphasizing the importance of fostering self-sufficiency and encouraging financial independence. The study highlights that women’s reliance on men for financial support can, at times, place them in vulnerable positions, leading to the toleration of abuse from their partners (Women’s Aid, 2019). Moreover, it is no secret that the justice system sometimes fails GBV victims, as most of the offenders are usually released on minimal bail. Furthermore, police stations are designed in a manner that hinders reporting of sexual assaults and or sexual violence.

Additionally, the congregation protects leaders from places of worship, there’s a poor investigation by the police, and most of the cases end up being dropped by the victim due to secondary victimization (Mgolozeli & Duma, 2020). Approximately 46% of the respondents indicated that priority should be placed on reducing oppressive gender and social norms in our communities. Similarly, (Zawaira et al., 2022) observed that internalized societal gender norms prevalent in African nations include the assumption that women must be submissive, whilst men are socialized as powerful, strong, and dominant people deserving authority and respect. These damaging attitudes and/or social gender norms encourage violence against women and children. Other contributing reasons are patriotic society, which blames the victim, encourages the culprit (44%), and desperation (43%).

![Figure 2: Causes of GBV in Places of Worship](image_url)

Strategies and Intervention Address the Crisis of GBV in Places of Worship: Regarding strategies to address Gender-Based Violence (GBV) in places of worship, 52.4% of respondents underscored the necessity for a more robust justice system aimed at safeguarding women and children (Figure 3). Additionally, 48% of participants emphasized the urgency to address the predation on vulnerable and impoverished individuals by priests and prophets. Nearly half of the respondents (47%) argued for punishment against priests and prophets who abuse their authority. Approximately 44% of participants believe that shutting institutions where abuse has been reported is an effective method of addressing GBV in houses of worship. While this shutdown may be an effective technique, there are no norms or regulations barring religious leaders from opening new branches in other districts or locations, which raises serious concerns. Furthermore, the uncontrolled expansion of charismatic churches is not sufficiently managed, resulting in the spread of these institutions throughout the province.
Official Reporting of GBV Cases in Places of Worship: The findings suggest a significant underreporting of GBV cases within religious places, indicating a prevailing concealment that hinders proper documentation as shown in Figure 4. It is noteworthy that there is limited literature on GBV in places of worship, and the existing sources are often outdated. As illustrated in Figure 4, 46% of respondents conveyed that no cases have been officially reported or opened by the church in response to incidents of abuse. Despite the prevalence of Gender-Based Violence (GBV) incidents within places of worship in South Africa, there is a notable dearth of official data on such cases. The lack of information is a result of the role that church leadership plays in covering up GBV cases. Consistent with the findings of this study, The World Council of Churches (2016) recognizes that churches in their contexts are guilty of perpetuating GBV through traditions that need to be challenged (Herstad, 2009). These traditions include blaming the victim and supporting the perpetrator (pastor or church leader). Misquoting bible verses to suit the pastor’s agenda to abuse his authority and abuse women and children. The notion that women should be submissive to the church leader (men) serves to fuel GBV. Only 17% of the respondents reported that they are aware of the cases that have been opened following GBV-related incidents. These findings highlight a need for an urgent intervention to educate, liberate and empower churchgoers to stand against GBV by reporting incidents that transpire in their places of worship.

5. Conclusion and Recommendations

There is limited research that has been conducted in South Africa that addresses GBV in places of worship. The contribution of this research is immeasurable as it draws warranted attention to the crisis of GBV and the injustice that is happening in religious places. Additionally, this study proposes practical strategies and
Interventions on how GBV in religious places could be circumvented by providing valuable insights into the prevalence, awareness, types of abuse, reporting of gender-based violence (GBV) and interventions to deal with GBV within the places of worship in KwaZulu-Natal (KZN), South Africa. The findings reveal a concerning reality of GBV occurring within religious contexts, with varying levels across different districts. Demographic factors such as citizenship, age, race, and gender were found to influence the prevalence of GBV, highlighting the intersecting dynamics of socioeconomic disparities, cultural norms, and power dynamics within religious communities. Various forms of abuse were reported, underscoring the multifaceted nature of GBV and the urgent need for comprehensive interventions to address these diverse manifestations of violence. Additionally, the significant underreporting of GBV cases within religious places highlights the need for improved reporting mechanisms and accountability measures to ensure the protection and support of survivors.

Based on the findings of this study, the following recommendations are proposed to address gender-based violence within places of worship in KZN and beyond:

- **Awareness and Education**: Implement educational programs and awareness campaigns within religious institutions to educate congregants about GBV, challenge harmful gender norms, and promote a culture of accountability and support for survivors.
- **Training and Capacity Building**: Provide training for religious leaders and community members on recognizing signs of GBV, responding to disclosures of abuse, and implementing appropriate support services and referrals.
- **Reporting Mechanisms**: Establish clear and accessible reporting mechanisms within religious institutions to facilitate the reporting and documentation of GBV cases, ensuring confidentiality, sensitivity, and accountability in the handling of such cases.
- **Regulation of religious places**: Legislation should be put in place to allow for the accountability, transparency, registration, and regulation of churches and religious leaders.
- **A stronger justice system**: That will protect the victims of abuse and punish the perpetrators. There is an urgent need for a stronger justice system that will prosecute unscrupulous church leaders and prevent them from preying on the most impoverished and vulnerable in our society.
- **Policy development**: Develop policy and regulatory framework in South Africa that will address GBV in places of worship. Furthermore, based on the findings of this study, it is highly recommended that religious places where GBV incidents have occurred should be permanently closed and church leaders should be prohibited from opening other similar establishments.

**Limitation of the Study**

The main difficulty in doing this research was the religious authorities' refusal to allow the researchers to interview the congregation. Furthermore, GBV at houses of religion is not an openly discussed topic, thus other individuals were hesitant to participate.

**References**


