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Religious Leadership Practices and Women's Participation in Community Development Initiatives in Sub-Saharan Africa

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Abstract

Purpose: The aim of this study was to investigate the religious leadership practices and women's participation in community development initiatives in Sub-Saharan Africa.

Methodology: The study adopted a desktop research methodology. Desk research refers to secondary data or that which can be collected without fieldwork. Desk research is basically involved in collecting data from existing resources hence it is often considered a low-cost technique as compared to field research, as the main cost is involved in executive's time, telephone charges and directories. Thus, the study relied on already published studies, reports and statistics. This secondary data was easily accessed through the online journals and library.

Findings: The findings suggested that religious leadership practices significantly influence women's participation in community development initiatives in Sub-Saharan Africa by shaping opportunities for empowerment, decision-making, resource mobilization, and leadership involvement. Inclusive religious leadership practices, particularly gender-sensitive teachings, mentorship, and participatory decision-making, are associated with greater women's involvement in education, healthcare, poverty reduction, and community welfare programmes. However, patriarchal religious structures, restrictive cultural beliefs, and limited representation of women in leadership positions continue to constrain their participation, highlighting the need for gender-responsive religious leadership and institutional reforms.

Unique Contribution to Theory, Practice and Policy: Transformational leadership theory, social role theory, empowerment theory may be used to anchor future studies on the religious leadership practices and women's participation in community development initiatives in Sub-Saharan Africa. The study is expected to provide practical insights for religious leaders, faith-based organizations, women's associations, and community development practitioners seeking to strengthen women's participation in community development initiatives across Sub-Saharan Africa. The study is expected to inform the development of gender-responsive policies that strengthen women's participation in community development initiatives supported by religious institutions across Sub-Saharan Africa.

Keywords: *Religious Leadership Practice, Women's Participation, Community Development Initiatives*

INTRODUCTION

Women's participation in community development initiatives refers to the active involvement of women in identifying community needs, planning development programmes, mobilizing resources, implementing projects, and evaluating outcomes that improve collective well-being. It encompasses women's engagement in community-based organizations, voluntary associations, local governance, education, healthcare, environmental conservation, and economic empowerment programmes. The discussion below uses two country examples from each economic grouping, with statistical indicators of participation and peer-reviewed literature published in 2021 or earlier. United States of America. In the United States, women's participation in community development initiatives is reflected in voluntary organizations, neighbourhood associations, educational programmes, charitable activities, and community welfare projects that address local socioeconomic needs. According to the U.S. Bureau of Labor Statistics (2016), women's formal volunteering rate declined from 29.9% in 2011 to 27.8% in 2015, representing a reduction of 2.1 percentage points, although women's participation remained higher than men's rate of 21.8% in 2015.

The same statistics established that 36.1 million women volunteered in 2015, with common activities including food distribution, teaching, fundraising, and assistance to community organizations. These findings suggest that women remained important contributors to community development despite declining participation rates, although volunteering alone does not capture their influence over community planning and resource allocation. Research on gender differences in volunteering further demonstrates that women's community participation is influenced by time allocation and competing social responsibilities, emphasizing the importance of supportive institutional arrangements (Downward, 2020). United Kingdom. In the United Kingdom, particularly England, women's participation in community development initiatives involves formal volunteering, neighbourhood support, charitable organizations, social welfare programmes, and informal assistance to vulnerable community members. The Community Life Survey established that women's monthly informal volunteering increased from 31% in 2019/2020 to 37% in 2020/2021, compared with an increase from 25% to 28% among men (Department for Digital, Culture, Media & Sport [DCMS], 2021). Downward (2020), using longitudinal data from the British Household Panel Survey, established that women's decisions to volunteer were significantly influenced by participation in other leisure activities, demonstrating the importance of competing time demands. These findings indicate that women's community participation responds to changing socioeconomic circumstances and that sustainable engagement requires flexible volunteering arrangements, recognition of unpaid contributions, and institutional support.

In India, women's participation in community development initiatives has expanded through self-help groups, rural savings associations, livelihood programmes, and community-based organizations that promote financial inclusion and collective decision-making. According to the World Bank (2020), the JEEViKA rural development programme in Bihar mobilized more than 12 million women into approximately 1,004,373 self-help groups and over 60,000 village organizations between 2007 and 2020, demonstrating the considerable expansion of women's organized community participation. The programme further facilitated approximately US$1.9 billion in institutional credit and US$170 million in savings, strengthening women's capacity to undertake economic activities and contribute to household and community welfare. Kumar (2021)

established that self-help group membership positively influenced women's empowerment through increased control over income, participation in credit decisions, and active involvement in collective organizations.

Bangladesh. In Bangladesh, women's participation in community development initiatives is largely facilitated through microfinance institutions, savings groups, community health programmes, and rural development organizations such as BRAC and Grameen Bank. Murshid (2018) reported that more than 30 million married women accessed microfinance services in Bangladesh, demonstrating the substantial reach of collective financial initiatives among women, although this figure represents programme reach rather than a measured increase over time.

In Kenya, women's participation in community development initiatives is reflected in women's groups, savings associations, community health programmes, agricultural cooperatives, and local development committees that support economic empowerment and social welfare. The Kenya Demographic and Health Survey 2022 established that 78% of married women participated in decisions concerning major household purchases, while 66% participated in all three assessed household decision-making areas, demonstrating substantial but unequal levels of decision-making participation (Kenya National Bureau of Statistics [KNBS], 2023).

The same survey indicated that participation in all three decisions increased from 55% among women without formal education to 78% among those with more than secondary education, highlighting the importance of education in women's empowerment. Freeman (2020), through a randomized controlled trial in western Kenya, examined a community-based care-group intervention addressing water, sanitation, hygiene, and nutrition, demonstrating the relevance of organized community participation to public health development.

In Rwanda, women's participation in community development initiatives has been supported through gender-responsive governance policies, decentralized administration, women's councils, and representation in local decision-making institutions. According to the National Institute of Statistics of Rwanda (2021), women's representation in district consultative councils increased from 45.2% in 2016 to 46.1% in 2021, while representation in sector consultative councils rose from 42.7% to 48.0% during the same period.

More substantial progress was recorded at the cell level, where women's representation in consultative councils increased from 34.5% in 2016 to 47.3% in 2021, representing an improvement of 12.8 percentage points. These trends indicate an expansion of women's formal representation in institutions responsible for community planning and local development, although numerical representation does not necessarily guarantee meaningful influence over development priorities. Evidence from research on women's collective empowerment in developing contexts suggests that participation becomes more effective when institutional representation is accompanied by decision-making authority, resource control, and opportunities for collective action (Kumar, 2021).

Religious leadership practices refer to the strategies, behaviours, decisions, and institutional arrangements employed by religious leaders to guide followers, mobilize resources, promote social values, and facilitate community development activities. The concept can be operationalized through four dimensions: inclusive decision-making, religious teachings and gender advocacy, community resource mobilization, and women's leadership mentorship. Inclusive decision-making

involves incorporating women into religious committees, development planning, and institutional governance, thereby strengthening their participation in identifying community priorities and implementing development projects (Stewart-Thomas, 2010). Religious teachings and gender advocacy involve using sermons, religious education, and moral guidance to challenge discriminatory gender norms and encourage women's participation in economic, social, and community development activities (Agadjanian, 2015). Community resource mobilization encompasses the coordination of financial contributions, volunteers, partnerships, and institutional resources to support women-led development initiatives, including education, healthcare, livelihood improvement, and poverty reduction programmes (Moyer, 2012; Kinoti, 2019).

Women's leadership mentorship, the fourth dimension, involves providing women with leadership training, spiritual guidance, organizational skills, and opportunities to coordinate community-based development programmes, thereby strengthening their confidence and decision-making capabilities (Agadjanian, 2015). Stewart-Thomas (2010) established that congregations led by women were more likely to participate in social service programmes, suggesting that religious leadership structures can influence community development engagement. Similarly, Ruark (2019) demonstrated that collaboration among religious leaders, faith-based health facilities, and community health volunteers contributed to increased access to family planning services in Kenya, highlighting the potential of religious institutions to support community welfare. Conceptually, inclusive decision-making is expected to strengthen women's involvement in development planning, religious teachings and gender advocacy to encourage their social participation, community resource mobilization to enhance their implementation of development projects, and women's leadership mentorship to improve their leadership and decision-making roles (Moyer, 2012; Kinoti, 2019). Therefore, the study hypothesizes that religious leadership practices positively influence women's participation in community development initiatives, although restrictive religious interpretations, patriarchal leadership structures, and unequal access to resources may weaken these relationships (Agadjanian, 2015; Stewart-Thomas, 2010).

Problem Statement

Religious institutions play an important role in community development across Sub-Saharan Africa by providing social services, mobilizing financial and human resources, promoting education and healthcare, and influencing community attitudes towards women's empowerment. Religious leaders occupy influential positions within these institutions, making their leadership practices important in determining women's opportunities to participate in community development initiatives. Ideally, religious leadership should promote inclusive decision-making, gender-responsive religious teachings, equitable resource mobilization, and mentorship opportunities that enable women to participate meaningfully in community planning, project implementation, and leadership. However, women's participation in community development continues to be constrained by patriarchal institutional structures, unequal access to leadership opportunities, restrictive interpretations of religious teachings, and limited control over development resources. Agadjanian (2015) established that women's religious authority in Sub-Saharan African settings may simultaneously create opportunities for empowerment and reinforce institutional dependency, while Moyer (2012) demonstrated the important contribution of faith-based organizations to community development in Kenya. These findings raise concerns about

whether existing religious leadership practices adequately promote women's meaningful participation in community development initiatives.

Empirical evidence demonstrates that religious institutions can contribute significantly to community development when religious leaders actively engage women and other community members in development activities. In Kenya, Ruark (2019) examined a faith-based family planning initiative implemented between 2013 and 2017 through six health facilities in western Kenya, involving religious leaders and community health volunteers. The study established that family planning visits at the first two participating facilities increased from 705 to 4,286 during the initial implementation phase, representing more than a sixfold increase. Furthermore, participating religious leaders reported reaching approximately 700,000 people with family planning messages and referring more than 87,000 clients to healthcare facilities, demonstrating the potential of religious leadership in community mobilization and health development (Ruark, 2019). Nevertheless, the study primarily examined healthcare access and community mobilization rather than the extent to which inclusive religious decision-making, gender-responsive teachings, resource mobilization, and women's leadership mentorship influence women's participation in community development planning, project implementation, and leadership. Consequently, although religious institutions contribute to community welfare, the effectiveness of their leadership practices in promoting women's active participation and decision-making remains insufficiently established within the reviewed empirical evidence.

Despite growing recognition of women's contributions to community development, gender disparities persist in institutions responsible for development planning and resource allocation across Sub-Saharan Africa. According to UN Women (2024), women occupied approximately 26% of elected local government seats in Sub-Saharan Africa, compared with a global average of approximately 35.6%, demonstrating persistent underrepresentation in formal local decision-making structures.

Although these statistics concern local government rather than religious institutions, they illustrate the broader institutional challenges surrounding women's representation in community-level governance. Furthermore, UN Women (2024) reported that women in Sub-Saharan Africa spent substantially more time on unpaid domestic and care work than men, highlighting additional constraints that may limit women's availability for leadership and development activities. Within religious institutions, such structural inequalities may be reinforced or challenged depending on leadership approaches, interpretations of religious teachings, access to resources, and opportunities for women's leadership development. However, available evidence does not adequately establish the relative contribution of these religious leadership practices to women's participation in community development initiatives across different religious and sociocultural settings in Sub-Saharan Africa.

The central problem is that although religious institutions are influential actors in community development across Sub-Saharan Africa, the extent to which their leadership practices facilitate or constrain women's meaningful participation in community development initiatives remains insufficiently understood. Existing studies have established the importance of faith-based organizations in delivering community services and mobilizing development resources, but they have given comparatively limited attention to the relationship between specific religious leadership practices and women's involvement in community development decision-making, planning,

implementation, and evaluation (Moyer, 2012; Ruark, 2019). Moreover, Agadjanian (2015) demonstrated that women's religious authority may involve both empowerment and dependency, suggesting that participation within religious institutions does not automatically translate into meaningful leadership autonomy. This creates a conceptual gap concerning the combined influence of inclusive decision-making, religious teachings and gender advocacy, community resource mobilization, and women's leadership mentorship on women's participation in development initiatives. It also presents a contextual gap because religious institutions operate within diverse patriarchal, socioeconomic, and cultural environments that may influence women's opportunities to participate in community development.

Theoretical Framework

Transformational Leadership Theory

Transformational leadership theorywas originally introduced by James MacGregor Burns (1978) and subsequently developed by Bernard Bass (1985). The theory emphasizes that effective leaders inspire, motivate, intellectually stimulate, and empower followers to achieve shared organizational and societal objectives. Løvaas (2020) examined transformational leadership within a religious organization and highlighted its importance in facilitating organizational innovation and adaptation.

Social Role Theory

Social role theory was developed by Alice Eagly (1987) to explain how socially constructed gender expectations influence individuals' behaviours, responsibilities, and opportunities within society. The theory maintains that traditional gender roles shape perceptions of leadership, authority, and participation in public decision-making. Kgatle (2019) established that women contribute significantly to religious activities in South Africa but continue to experience inequalities in religious leadership structures.

Empowerment Theory

Empowerment theory was developed by Julian Rappaport (1981) and subsequently advanced by Marc Zimmerman (1995). The theory emphasizes individuals' and communities' ability to gain control over decisions, resources, and opportunities affecting their lives. Chowdhury . (2019) demonstrated that faith-based organizations contribute to community empowerment through capacity building, local leadership development, community participation, and resource mobilization.

Empirical Review

Ruark (2019) investigated how collaboration between religious leaders, faith-based healthcare facilities, and community health volunteers could improve access to voluntary family planning services in western Kenya. The researchers employed a programme evaluation approach using health facility service statistics, project implementation records, monthly reports, and feedback from religious leaders and community health volunteers across six faith-based health facilities between 2013 and 2017. The findings established that family planning visits increased from 705 to 4,286 during the first implementation phase, while religious leaders reached approximately 675,000 people with family planning information and referred 85,810 individuals for services by 2017. The study recommended strengthening collaboration between religious institutions,

healthcare providers, and community volunteers through leadership training, referral systems, and sustainable resource support. However, the research primarily examined community health mobilization rather than establishing how inclusive religious decision-making, gender advocacy, resource mobilization, and women's leadership mentorship influence women's direct participation in community development planning and governance (Ruark ., 2019).

Kwaramba and Dreyer (2019) examined women's roles, leadership opportunities, and contributions to organizational development within the Apostolic Faith Mission in Zimbabwe. The researchers adopted an exploratory and descriptive practical theology approach guided by the Exploratory Descriptive Normative Action research model to examine church leadership structures, succession arrangements, gender relations, and women's involvement in institutional decision-making. The findings revealed that women contributed to church development but remained excluded from senior leadership positions despite the absence of explicit institutional policies prohibiting their appointment. The researchers identified patriarchal assumptions and informal leadership practices as significant barriers to women's recognition and participation in organizational governance, highlighting the need for gender-responsive leadership structures and greater recognition of women's contributions. Although the study provides important evidence on women's exclusion from religious decision-making, it concentrates on internal church governance rather than examining how religious leadership practices influence women's participation in wider community development initiatives.

Nwakamma (2019) evaluated the effectiveness and sustainability of religious community-led interventions in addressing gender inequality and maternal and child health challenges in Benue and Kaduna States, Nigeria. The researchers employed a mixed-source programme evaluation approach involving reviews of monthly project reports, focus group discussions, key informant interviews, and in-depth interviews conducted in eight randomly selected communities during the implementation of the CHESS-Advocates initiative between September 2018 and July 2019. The findings demonstrated that trained religious leaders and congregational advocates facilitated community discussions on gender justice, promoted maternal healthcare awareness, challenged harmful gender norms, and established support mechanisms for women and families. The study supported strengthening faith-based community advocacy through religious leadership training, gender-responsive communication, congregational support groups, and partnerships with community health organizations. However, although the research demonstrated the potential of religious leadership in promoting gender justice and community welfare, it did not comprehensively examine how inclusive decision-making, women's leadership mentorship, and resource mobilization influence women's participation in the planning and implementation of community development initiatives.

Ayifah (2021) investigated how religious affiliation influences women's livelihood choices and economic participation. The researchers adopted a quantitative research approach involving 1,209 women and examined the relationships between religious affiliation, livelihood activities, risk preferences, social capital, and religious group identity. The study investigated how religious affiliation relates to women's economic choices through social networks, shared identity, and attitudes towards economic risk, providing evidence that religion is relevant to understanding women's livelihood decisions. The findings suggest that women's economic empowerment programmes should consider the social networks and institutional relationships associated with

religious communities rather than treating religious affiliation as an isolated demographic characteristic. However, the study concentrated on religious affiliation and individual livelihood choices rather than directly examining how religious leaders' decision-making practices, gender advocacy, resource mobilization, and mentorship influence women's participation in collective community development initiatives.

Bormet (2021) investigated how religious leaders and faith-based organizations could influence public policy, financial commitments, and community support for voluntary family planning services. The researchers employed a programme-based evaluation and case-study approach, examining advocacy activities and documented outcomes from partnerships involving Christian Connections for International Health, the Christian Health Association of Kenya, and the Churches Health Association of Zambia between 2014 and 2019. The findings demonstrated that religious leaders could contribute to policy dialogue, engage government officials, support community reproductive health education, and advocate for improved family planning services when provided with relevant knowledge and advocacy skills. The study recommended strengthening religious leaders' technical capacity, promoting collaboration between faith-based institutions and government agencies, and ensuring that advocacy approaches respect religious beliefs while advancing community health objectives. Nevertheless, the research concentrated on reproductive health advocacy and institutional partnerships rather than assessing how religious leadership practices influence women's participation in wider community development planning, resource allocation, project implementation, and leadership

METHODOLOGY

This study adopted a desk methodology. A desk study research design is commonly known as secondary data collection. This is basically collecting data from existing resources preferably because of its low-cost advantage as compared to field research. Our current study looked into already published studies and reports as the data was easily accessed through online journals and libraries.

FINDINGS

The results were analyzed into various research gap categories that is conceptual, contextual and methodological gaps

Conceptual Research Gap

Previous empirical studies have examined the contribution of religious institutions to women's empowerment and community development, but they have largely concentrated on individual aspects of religious engagement rather than comprehensively investigating religious leadership practices as a multidimensional concept. Ruark (2019) and Bormet (2021) examined religious leadership in promoting family planning access and reproductive health advocacy, while Nwakamma (2019) investigated faith-based interventions addressing gender inequality and maternal health challenges. Similarly, Ayifah (2021) explored the relationship between religious affiliation and women's livelihood activities, whereas Kwaramba and Dreyer (2019) examined women's participation in religious organizational leadership. Although these studies established the importance of religious institutions in community mobilization, gender advocacy, and women's empowerment, they did not comprehensively examine how inclusive decision-making, religious teachings and gender advocacy, community resource mobilization, and women's leadership

mentorship collectively relate to women's participation in community development planning, development activities, project implementation, and leadership decision-making. Consequently, a conceptual gap exists concerning the combined and individual relationships between these religious leadership practices and women's meaningful participation in community development initiatives. The present study seeks to address this gap by developing an integrated conceptual framework that examines religious leadership practices as the independent variable and women's participation in community development initiatives as the dependent variable within Sub-Saharan Africa.

Contextual Research Gap

Existing empirical studies have predominantly investigated religious leadership and women's empowerment within specific institutional and sectoral contexts, particularly reproductive healthcare, religious organizational governance, gender justice, and individual economic activities, rather than examining women's participation in broader community development initiatives. Ruark (2019) and Bormet . (2021) concentrated on family planning programmes implemented through faith-based healthcare institutions, while Nwakamma (2019) examined religious community-led interventions addressing maternal health and gender inequalities in Nigeria. Kwaramba and Dreyer (2019) focused on women's exclusion from senior leadership positions within the Apostolic Faith Mission in Zimbabwe, whereas Ayifah (2021) investigated religious affiliation and women's livelihood choices in Ghana. Although these studies demonstrated that religious institutions influence women's access to services, economic opportunities, and organizational leadership, they provided limited integrated evidence on how religious leadership practices relate to women's involvement in identifying community development priorities, planning projects, mobilizing resources, implementing initiatives, and participating in development-related decisions. Furthermore, the reviewed studies did not comprehensively examine how religious leadership practices operate within broader community development settings characterized by patriarchal norms, socioeconomic inequalities, institutional barriers, and unequal access to leadership opportunities. Therefore, the present study seeks to address this contextual gap by examining the relationship between religious leadership practices and women's participation across different dimensions of community development, extending beyond healthcare programmes, individual livelihoods, and internal religious governance.

Geographical Research Gap

The reviewed empirical literature indicates that research on religious leadership and women's participation in development activities has largely been conducted within selected countries and localized institutional settings in Sub-Saharan Africa, limiting the extent to which findings can be generalized across the region. Ruark (2019) examined faith-based healthcare initiatives in western Kenya, while Bormet (2021) investigated religious advocacy for family planning in Kenya and Zambia. Similarly, Kwaramba and Dreyer (2019) concentrated on the Apostolic Faith Mission in Zimbabwe, Nwakamma (2019) investigated faith community-led interventions in Benue and Kaduna States in Nigeria, and Ayifah (2021) examined women's livelihood activities in the Yilo and Lower Manya Krobo districts of Ghana. Although these studies provide valuable country-specific evidence, the five reviewed studies do not offer a comprehensive comparative assessment of how religious leadership practices relate to women's participation in community development initiatives across different Sub-Saharan African religious, cultural, and socioeconomic

environments. In particular, limited comparative evidence emerges from the reviewed literature concerning similarities and differences in religious leadership practices and women's development participation across Eastern, Western, Central, and Southern Africa. The present study therefore seeks to address this geographical gap by examining religious leadership practices and women's participation in community development initiatives among selected communities in Sub-Saharan Africa, thereby generating evidence that can support context-sensitive religious leadership approaches and gender-responsive community development policies.

CONCLUSION AND RECOMMENDATIONS

Conclusions

Religious leadership practices play a significant role in shaping women's participation in community development initiatives in Sub-Saharan Africa by influencing access to leadership opportunities, decision-making processes, institutional resources, and community support systems. The reviewed empirical literature demonstrates that religious institutions contribute to community development through healthcare provision, gender advocacy, economic empowerment, and community mobilization. Ruark (2019) and Bormet (2021) established that religious leaders can facilitate community development through healthcare advocacy, institutional partnerships, and resource mobilization, while Nwakamma (2019) highlighted the contribution of faith-based initiatives to promoting gender justice and community welfare. However, Kwaramba and Dreyer (2019) demonstrated that patriarchal leadership structures and institutional practices continue to restrict women's access to religious leadership positions, potentially limiting their involvement in development-related decisions. These findings suggest that religious leadership can either facilitate or constrain women's participation in community development depending on the inclusiveness of leadership structures, interpretations of religious teachings, availability of resources, and opportunities for women's empowerment.

Furthermore, the reviewed studies reveal that women's meaningful participation in community development requires more than their involvement in religious activities or access to faith-based social services. Inclusive decision-making, religious teachings and gender advocacy, community resource mobilization, and women's leadership mentorship emerge as important dimensions through which religious leadership may influence women's participation in development planning, project implementation, resource contribution, and leadership decision-making. Nevertheless, existing empirical studies have predominantly concentrated on reproductive healthcare, religious organizational governance, gender justice, and individual livelihood activities, providing limited integrated evidence on the relationship between these leadership practices and women's broader participation in community development (Ayifah, 2021; Kwaramba & Dreyer, 2019; Ruark ., 2019). Consequently, further empirical investigation is necessary to establish how different religious leadership practices relate to women's participation across diverse sociocultural and institutional settings in Sub-Saharan Africa. The proposed study is therefore expected to contribute to knowledge by examining these relationships and generating evidence that can inform gender-responsive religious leadership, inclusive community development strategies, and policies aimed at strengthening women's participation in sustainable community development initiatives.

Recommendations

Theoretical Contributions

The study on Religious Leadership Practices and Women's Participation in Community Development Initiatives in Sub-Saharan Africa is expected to contribute to the advancement of Transformational Leadership Theory, Social Role Theory, and Empowerment Theory by providing an integrated explanation of how religious leadership practices relate to women's participation in community development. First, the study will extend Transformational Leadership Theory by examining how inclusive decision-making, religious teachings and gender advocacy, community resource mobilization, and women's leadership mentorship may inspire and empower women to participate in community development planning, project implementation, and leadership. Second, the study will contribute to Social Role Theory by examining how religious leadership practices can reinforce or challenge traditional gender expectations that influence women's access to leadership positions and development opportunities. Third, the study will strengthen Empowerment Theory by investigating how women's access to institutional resources, mentorship, leadership opportunities, and decision-making authority relates to their meaningful participation in community development initiatives. The study is therefore recommended to develop and empirically test an integrated theoretical framework connecting religious leadership practices, gender norms, women's empowerment, and community development participation, thereby extending existing theoretical explanations beyond religious organizational governance and healthcare interventions.

Practical Contributions

The study is expected to provide practical insights for religious leaders, faith-based organizations, women's associations, and community development practitioners seeking to strengthen women's participation in community development initiatives across Sub-Saharan Africa. First, religious institutions should adopt inclusive decision-making structures that provide women with meaningful representation in development committees, programme planning, resource allocation, and project evaluation rather than limiting their involvement to implementation activities. Second, religious leaders should promote gender-responsive religious teachings and advocacy that encourage women's leadership, challenge discriminatory cultural practices, and recognize women's contributions to community development. Third, faith-based organizations should strengthen community resource mobilization by establishing transparent funding mechanisms, developing partnerships with development agencies, and allocating resources to women-led initiatives in education, healthcare, entrepreneurship, and social welfare. Fourth, religious institutions should establish women's leadership mentorship programmes that provide training in project management, financial literacy, advocacy, organizational leadership, and community mobilization. These recommendations build on evidence that religious leaders can support community mobilization and development advocacy, while recognizing that institutional barriers may continue to restrict women's leadership opportunities

Policy

The study is expected to inform the development of gender-responsive policies that strengthen women's participation in community development initiatives supported by religious institutions across Sub-Saharan Africa. First, governments and religious regulatory or coordinating bodies

should encourage gender-inclusive governance policies that promote women's representation in faith-based development committees, institutional leadership, and community development decision-making structures, while respecting applicable constitutional protections and religious freedoms. Second, policymakers should support the integration of gender equality and women's empowerment principles into partnerships between governments, religious institutions, and community-based organizations to ensure that development programmes provide equitable opportunities for women. Third, governments and development partners should establish gender-responsive funding and accountability frameworks that encourage transparent resource allocation, strengthen support for women-led community projects, and assess women's participation in programme planning, implementation, and evaluation. Fourth, national and regional development institutions should support policies that facilitate women's leadership training, protection against gender-based discrimination, and collaboration between faith-based organizations and women's empowerment agencies. These policy recommendations are consistent with empirical evidence demonstrating the potential of religious institutions to advance community welfare and gender-responsive advocacy, while highlighting the need to address structural inequalities that limit women's participation

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