Domestic abuse in marriage and self-silencing: Pastoral care in a context of self-silencing

The socialisation of women into self-silencing by religion has complicated pastoral care interventions for the victims of domestic violence, particularly within the context of marriage. This article is written from an intercultural approach to pastoral care and applies the theory on silence. The aim of this article is to explore the way pastoral caregivers can extend caregiving to the victims of marital domestic violence who have silenced the self. The article draws from qualitative data that were collected through autobiographical narratives, in-depth interviews and observations, and analysed through thematic analysis. The findings indicate that women are forced to silence the self in contexts of domestic violence by not speaking about the abuse that takes place in marriage. The self-silencing is justified by those who interpret Biblical texts that address marriage naively; in this case one of the two women who participated in this study confirmed that Proverbs 21:9 is used to justify self-silencing. Thus, the article concludes that pastoral care interventions in such contexts should include a circle of the significant others that women interact with such as the perpetrator and the broader community, including her social networks.

Introduction

Studies across disciplines highlight that women are the main victims of domestic violence (Kapuma 2015; Mazibuko & Umejesi 2015:6584). Studies are also consistent that women make up the majority of members in any church (Hadebe n.d.; Kasomo 2010; Mwaura 2005:410; Phiri 1997). Awareness programmes on gender-based violence have conscientised most people, particularly women and girls, to break the silence on domestic violence, which can be physical and emotional or active and passive. Mwaura (2010:102) perceives domestic violence as an act that is motivated by the power disparity between men and women, usually victimising women physically, psychologically, culturally, economically and sexually because of their gender. Some women experience all forms of domestic violence in their homes, while others just experience particular forms. African women theologians such as Phiri (2002), Mwaura (2010), Dreyer (2011) and Siwila (2012), among others, agree that patriarchy, unequal gender roles, culture and biased biblical interpretations expose women to domestic violence in their marriages. Some of these women attend church every Sunday and put on a brave face while participating in their Christian duties as worshippers and leaders. Some women display the visible scars of domestic violence, while other women’s scars are invisible. In view of the scars displayed by women in their communities and churches, the challenge of addressing this scourge from a pastoral care perspective is real and persists in African churches.

In most African countries, domestic violence is linked to the socio-economic deprivations imposed on the majority of the black population by colonialism (Mazibuko & Umejesi 2015:6584) and the patriarchy that informs the nature of marriages (Chisale 2016a:66; Phiri 2002). Some scholars blame the domestic violence that is prevalent in black African communities on missionaries who enforced the subjugation of women by men through the patriarchy of the Bible (Owino 2010; Phiri 2002:20). Consequently, African women theologians have conducted substantive research on domestic violence in Christian marriages in Pentecostal, African Independent and mainline churches in the sub-Saharan Region (Dreyer 2011; Kapuma 2015; Mwaura 2010; Phiri 2002). Their findings indicate that the church is aware of the domestic violence experienced by some members even if it does not speak out about it. In cases where women speak out about experiences of domestic violence in their marriages, Kapuma (2015) maintains that:

… the only advice they get from the church is to return home and sort out their family problems. In other cases, women are told that they themselves are the cause of the trouble; that they need to respect their husbands and do what is expected of them as women. (p. 264, [author’s own italics])

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In such cases, victims of domestic violence choose to remain silent rather than be further victimised by the church. Maluleke and Nadar (2002:11) found that the church discourages women from leaving their abusive husbands by encouraging them to work hard to save their marriages because divorce is assumed to be against God’s will. Correspondingly, Phiri (2002:20) argues that religion is used to tolerate domestic violence through naive Biblical interpretations. Thus, Heggen’s (1996:15) study found that some of the perpetrators of domestic violence are Christian men, who claim not to see any contradiction between their behaviour and their Christian beliefs. This indicates that the church is often not a safe space for victims of domestic abuse, especially if the perpetrator is the husband who is perceived to be the head of the household (Heggen 1996:15).

The persistence of domestic violence in Christian marriages raises important questions about the nature of pastoral care in Christian churches. Husbands, who are the main perpetrators of domestic violence, do not attend church themselves, thus making it difficult for the church to have a strong and intimate relationship with them. At times, cultural ideologies are introduced and the pastor, who is often younger than the couple or not married himself, may find it difficult to intervene. In African traditional contexts, people earn respect through age; therefore, a young person cannot question or address adults about their marital affairs (Chisale 2016b:7279; Rudwick 2008). In certain contexts, however, people earn respect through status and gender (Rudwick 2008:156); thus, a young pastor may have the power to question his or her congregants about their marital problems through his status as their church pastor. This illustrates that pastoral care functions may empower a pastor to negotiate caregiving in culturally diverse communities.

There are seven functions of pastoral care, including the four that were conceptualised by Clebsch and Jaekle (1964:4). They include healing, which is about restoring the person to a condition that he or she has lost through active, responsive and open listening; and sustaining, which according to Clebsch and Jaekle (1964:42), is offered when healing is not possible and refers to journeying with a person towards finding some strength and support from within and without in order to cope effectively with a situation that cannot be changed (cf. Larney 2003:63). Guiding is a diverse function and differs from context to context; however, in general guiding seeks to journey with people towards making confident and truthful choices regarding their situation. Larney (2003:65) asserts that guiding enables ‘people through faith and love to draw out what lies within them’. Davies and Dreyer (2014:n.p.) argue that the guidance extended by a pastoral counsellor to the victims of domestic abuse ‘focuses on helping them to function at an acceptable cognitive and moral level in their thinking, attitudes, emotions and behaviour’. Reconciling seeks to promote harmonious relationships by restoring broken relationships between a person and other persons, as well as between a person and God.

In addition to Clebsch and Jaekle’s four functions, Clinebell (1984) conceptualises nurturing as the fifth function of pastoral care. Nurturing seeks to promote the growth of people and society through caring, using confrontation (Clinebell 1984:19). Larney (2003) added the sixth and seventh functions, which include liberating and empowering. Liberating, according to Larney (2003:67), entails a process of conscientising people about the sources and causes of their oppression and suffering in society and journeying with people through the process of seeking for viable solutions towards transformation. Additionally, Larney (2003:68) developed and added the function of empowering to the pastoral care functions. Empowering seeks to conscientise people as a community about their capabilities and talents in the interests of emancipation. It involves lobbying and mobilising each other towards developing one’s own alternative power base to enhance personal well-being. Although all the functions are implemented by different churches, Wimberly (1979:20) argues that sustaining and guiding are the dominant functions in the black church. While Wimberly’s argument is very old and outdated, the guiding and sustaining functions are still dominant in postmodern African black churches, where the pastor is seen as a guide and the leader of the church. The other visible function in African churches is liberation. More pastoral care initiatives are focusing on liberating communities and congregants. However, it is not an easy task for a pastoral caregiver to liberate congregants and communities in contexts of patriarchy and domestic violence because they have internalised the patriarchy of the Bible (Owino 2010; Phiri 2002:20). Thus, both men and women accept violence by the husband as a corrective measure for lack of submission (Baloyi 2013:n.p.).

The aim of this article is to explore how pastoral caregivers can extend caregiving to the victims of marital domestic violence who have silenced the self. This article is divided into four sections: Firstly, a discussion on the theoretical perspective of the article and how it applies to the findings; secondly, a presentation of the methodology used to collect data; thirdly, a presentation and critical discussion of the emergent themes of marital domestic violence in the context of Christian marriage and its implications for pastoral care; and finally, some concluding remarks are made.

**An intercultural approach to pastoral care and self-silencing in a context of domestic abuse**

Pastoral care in diverse contexts requires that a caregiver be sensitive to the care seeker’s context. Emmanuel Larney (2003:33–34) recommends an intercultural approach to pastoral care and counselling that takes into consideration three basic principles – contextuality, multiple perspectives and authentic participation. Firstly, the principle of contextuality requires that the pastoral caregiver consider every piece of behaviour and every belief within the framework in which it takes place. Thus, the social, cultural,
economic, political and environmental contexts of congregants and the community are taken seriously because of the influence they have on people’s lived experiences and interpretations of life. Secondly, the principle of multiple perspectives takes into consideration that there is no one answer to a problem; two people may examine an issue and arrive at different understandings. Hence, the two different understandings should be taken seriously through the process of listening and dialogue because all perspectives could prove suitable for solving or dealing with a particular situation. Third is the principle of authentic participation where the priority is the mutual concern for the integrity of other people and gives all people concerned the right to participate and engage in a discussion towards finding a solution, on their own terms (Lartey 2003:33–34). In pastoral care, the participation of recipients in their own spiritual and emotional well-being is essential. Msomi (2008:40) asserts that the worldview of the pastoral care recipient is vital in the intervention and their healing process. In addition, Wimberly (1979:20) asserts that because of the cultural context of black people, ‘the black pastor is a symbol reflecting the hopes and aspirations of black people for liberation from oppression in this life’. Similarly, Msomi (1992) argues that pastoral care by African pastors, theologians and communities should be understood from an African perspective as:

concern has to do with a quest for liberation of the person … as well as passionate zeal that others be liberated in Christ in their own context, instead of being enslaved in a Christianity that is not their own. (p. 12)

Contextuality is significant in extending the intercultural approach to pastoral care to women who have silenced the self in a context of domestic violence because it takes people’s lived experiences seriously. Contextuality is achieved by taking the traditional content of the Christian message and people’s traditions seriously while remaining faithful to the Gospel (Pears 2010:31). As a result, this article seeks to explore the struggles with domestic violence experienced by women in Christian marriages and how pastoral caregivers can extend caregiving to such women, particularly those who have silenced the self.

Theorists of silence such as Jack (1991:129) argue that most victims of abuse resort to silencing the self, which causes depression. It is argued that self-silencing is a product of a gendered society and is used as a form of self-expression in intimate relationships (Jack 1991:129). In African contexts, self-silencing is a socialised attitude and behaviour that indicates respect mainly by women and children (Chisale 2016b:7278). Psychology literature highlights that although self-silencing is mainly a feminine attitude it is noticeable in both men and women, albeit in considerably different ways (Cramer & Thoms 2003:525; Gratch, Bassett & Attra 1995; Ussher & Perz 2010). Theorists of silence link self-silencing to depression, anxiety, low self-esteem and a loss of self (Jack 1991:129; Ussher & Perz 2010). The wife-husband relationship, particularly in Christian contexts, emphasises a wife’s submissive role and respect for her husband; therefore, disciplined wives are encouraged to be silent in order to demonstrate respect (Chisale 2016a:66; 2016b). The private nature of marriage forces women to be silent about issues that happen privately in their marital homes regardless of the pain they experience. In both traditional and Christian premarital counselling, women and men are advised ‘not to hang out their dirty linen in public’; they are encouraged to ensure that what happens behind closed doors stays behind closed doors, because marital issues are private (Chisale 2016b:7278).

Feminist scholars such as Catharine MacKinnon (1989) and Elizabeth Schneider (1991) critique the notion of family privacy for its tendency to protect the perpetrators of woman and child abuse. Domestic violence, if the perpetrator is the husband, is a private issue that cannot be shared with the public. This is perpetuated by African culture that conceptualises marriage as a hierarchy that is to be protected by all means possible. African women are forced by culture to use silence in efforts to protect their marriages. African women theologians such as Moyo (2005:133) argue that women are taught through culture and religion to keep silent about their experiences of violence in marriage, they are reminded that anything that threatens men, and in particular their husbands’ dignity and respect, should be kept under wraps (Chauke 2003:135). Therefore, they use self-silencing as a survival strategy (Chisale 2017:78). In critiquing women’s silence in a context of abuse, African women theologians argue that silence in a context of domestic violence handicaps (Oduyoye 2005:82) and hinders women from ‘experiencing the liberating promises of God’ (Kanyoro 1996:5). Thus, they campaign for the breaking of this silence by calling on the church to challenge the perpetrators of violence, particularly men, to change (Haddad 2003:160).

**Re-telling an ‘Untold Story’ of marital violence: Methodological considerations**

The increase in femicide in South Africa challenges everybody to participate in finding solid solutions to ending this scourge. To do justice to women and children who have directly or indirectly experienced domestic violence, theologians should be at the forefront of interventions and research because in certain communities religion is used to promote and defend violent patriarchy. In my attempt to re-tell the story of domestic violence as perpetuated by religion, I present the stories of two women who experienced domestic violence in silence. This article is located within the field of feminist pastoral theology. Feminist theologians promote diverse methodologies as well as flexibility. As a result, the ontological and epistemological positions of this article are diverse and the different beliefs, values and practices within this discipline inform the methodology of this article. The feminist and pastoral care theology standpoint informs my analysis by allowing me to position and locate myself subjectively in this article in the interpretation of the women’s different experiences (Hesse-Biber 2007:118).
This article draws from qualitative data on the personal narratives of two women who participated in a project that I conducted in 2016 titled: Patriarchy and Resistance: A Feminist Symbolic Interactionist Perspective of Highly Educated Married Black Women. Data for that study were gathered through autobiographical narratives, in-depth interviews and observations. From that data, I set aside two narratives that captured the experiences of domestic violence by Christian wives and their challenges in speaking up about domestic violence as a result of religio-cultural socialisation. In the analysis of the autobiographical narratives of all participants who participated in that project, two narratives diverged from the study by narrating the issue of domestic violence in Christian marriage and the role of the church in enhancing that violence. I then called the two participants and requested to conduct in-depth interviews with them, to which they both agreed. The in-depth interviews were audio recorded and it took almost 2 h with each participant; a series of follow-up interviews were also conducted to clarify some issues. I shall not present all the data that I collected from these participants in one article, but there is a series of articles to follow. At the time, the probing questions that I asked these participants differed from the other participants were asked because their autobiographical narratives took the project in another direction. In this article, I present the participants’ struggles with domestic violence, their resistance and the implications for pastoral care. Pseudonyms are used to refer to participants for identity protection. Data were analysed using thematic analysis.

Findings and discussion

The aim of this article is to challenge pastoral care to search deeper for solutions to the silencing of the victim in the context of domestic violence in marriages and intimate relationships, as well as to assist in eradicating this silence. Patriarchy is the main cause of domestic violence in intimate relationships (Phiri 2002:19). However, the church, as an accomplice in the elevation of patriarchy, is shying away from tackling it head on. The participants confirmed that because they are Christians married to Christian men who are leaders in the church, they are not in a position to publicly speak up against the abuse they endure at their husbands’ hands. Women’s efforts to become a ‘good Christian wife’ seem to pose a challenge in curbing domestic violence. It is critical to note that the participants do not condone domestic violence; the reason that they chose to share their experiences is that they wanted a safe space to speak up against this scourge. In this section, I focus on the themes that emerged from the data.

Experiences of domestic violence: Proverbs 21:9 Condemns a quarrelsome wife

Noma, one of the participants, is a university lecturer with a master’s degree. At the time of the project, she was studying for a doctorate. Noma confirmed that she experiences emotional violence in her marriage but does not know how to resist it because her husband is a respected leader in the community and in the church. Noma said that her husband has money; he buys her expensive gifts such as cars and jewellery and gives her all that a woman could ask for. He also donates generously to the church and is always giving to the poor. However, behind closed doors Noma confirmed that he is violent:

‘My husband’s tongue is a sharp sword and when he talks the pain goes deeper, he says hurtful things and does not want me to backchat him, therefore I remain silent it is the safest way of resisting his rage and humiliation, he quotes verses from the Bible and reminds me of my place by quoting the Bible verses such Proverbs 21:9 … I don’t talk about this to anyone but I resist by singing and praying to the Lord, that way I speak out my pain to God and feel better. I love Don Moen’s song ‘God will make a Way’ it comforts and calms me.’ (in-depth interview with Noma, 11 November 2017)

Gugu, another participant, has a master’s degree and was also studying for a doctorate. She has an administrative post at a university. She confirmed that she almost died as a result of high blood pressure, which was a result of the abuse she experiences at the hands of her husband who is an Evangelist in their church. She was once admitted to a hospital for 2 weeks and the doctors were concerned that she might have a heart attack because her blood pressure was too high and could not be normalised. Gugu said:

‘When congregants came to visit me at hospital and asked about my problem I could not tell them that my husband beats me and scolds me. I wanted to protect him; he is a respected church Evangelist and a counsellor to those with problems in our community and church. If I tell them that he abuses me what will they think about me or him and our marriage? They may think that I am a disrespectful wife. It is not as easy as people make it. My husband is a marriage counsellor; most couples in our church and community come to him when they have marriage problems … he condemns a talkative wife, he says most problems in marriage are caused by women who are confrontational and provocative to their husbands … I am a confrontational person and he makes sure that he silences me by rebuking or beating.’ (in-depth interview with Gugu, 18 November 2017)

Like Noma’s husband, Gugu’s husband links the problems of marriage to women who are confrontational. Obviously, as an Evangelist he refers to Proverbs 21:9. Gugu was admitted to hospital not because of the physical scars that she suffered at her husband’s hands, but because of her invisible internal scars. The two narratives indicate that women resort to self-silencing not only to protect themselves but also to protect the ‘fake’ dignity of their abusive husbands. In such contexts, intervention strategies such as pastoral care should be sensitive to protecting life rather than the ‘fake’ dignity of the perpetrator.

Pastoral care in a context of self-silencing and domestic abuse

As indicated by the participants, the clergy use the same biblical texts that silence women when counselling couples in...
a context of domestic violence. Theorists of silence argue that silence is both oppressive and liberative for women (Fivush 2010:94). In situations where silence is used as a protective mechanism, the silencer and the silenced interact with both one another and the broader community in silence. In contexts of life and death such as domestic violence, silence is oppressive and masking a problem is lethal and may lead to serious depression (Fivush 2010:94; Jack & Dill 1992), as emerged from Gugu, the participant in this article who was hospitalised. Silence is oppressive if it is a result of intimidation or repression and if it is imposed and sought with a promise of hope and reward. Such silence destroys a person’s self-esteem and humanity. On the other hand, silence is liberative if it is deliberate and inspires transformation. Harris (1988:29–30) proposes a spirituality of pedagogy for women where she identifies silence as the first of five generative themes. According to her, silence has the potential to empower women but acknowledges that it should not be encouraged. According to Harris (1988:29–30), if women can engage in the silence which destroys, they should equally engage with silence that liberates and heals. Silence can be conceptualised as being silenced, in contrast to having a voice, can be imposed and can signify loss of power, as opposed to being silent where silence is shared (Fivush 2010:92). Being silent means the voice is absent and may be a form of power, may be voluntary or, on the other hand, signify loss of power. In conservative situations such as religion and traditional contexts, silence is a tool that is used as a form of respect. Women are taught to be respectful by not being outspoken particularly to their elders and men; hence, they resort to self-silencing in contexts of abuse.

Self-silencing is a socialised behaviour, particularly in women, aimed at preserving or fostering an intimate relationship (Fivush 2010:92; Remen, Chambless & Rodebaugh 2002). Silence has different meanings attached to it, such as fear, loss of power and hidden power. From the findings, it would seem that some Christian marriages silence women. This happens mainly in contexts of control and domination where women are implicitly and explicitly encouraged not to ‘hang their dirty linen in the public eyes’. Women who speak up about their experiences or the challenges in their marriages are either blamed or demeaned. Many women, in an effort to be a ‘good Christian wife’ engage in a conspiracy of silence.

The findings of this article indicate that Christian married women often silence themselves in an effort to protect their husbands’ dignity as well as their own. What, therefore, should pastoral care offer in such contexts? Lartey (2003:31) acknowledges the significance of an intercultural approach to pastoral care in diverse contexts. In this approach the clergy and pastoral caregivers should learn to listen to the silent voices of the abused and the abuser and respond accordingly. Clearly it is not easy to escape the reality and the patriarchy of marriage. In addition, the clergy and pastoral caregivers, who are often men, should be aware of the role they play in silencing female voices.

Pastoral care for the victim

Domestic violence is a social ill that the church should address on all platforms. At times, caregiving is difficult or impractical in contexts of domestic violence, particularly where a person has silenced the self. This then calls for pastoral caregivers to master well-developed theories relating to the resistance strategies people use in contexts of abuse. Gerkin (1997:91) rightly argues that pastoral caregivers should be able to listen to the private meanings that govern a person’s inner life such as hidden conflicts, unspoken desires, unspeakable fears and faint hope. In cases of self-silencing, the pastoral caregiver should be able to read women’s silences and respond to the victim’s plight without the victim having to talk about it. Some silences speak volumes while others are difficult to read, but all forms of silence have a meaning; thus, the supposed silence is not silence at all, but a form of communication that requires a critical response. As a result, Bons-Storm (1996:57) argues that it is critical to listen to women’s silences and coined the term ‘unstory’ (Bons-Storm 1996:57) in this regard. Similarly, Laird (1991:437) conceptualises women silences as a ‘story that is not there’. According to Bons-Storm (1996) and Laird (1991), in an ‘unstory’ or a ‘story that is not there’, women struggle to give any meaning to their lived experiences that match the self-narrative. A painful or shameful experience often remains an ‘unstory’ or ‘unstoried’, an ‘unspeakable or even unthinkable experience, consigned to silence’ (Bons-Storm 1996:57; Woolley 2015:37). It is important to listen carefully to the ‘unstoried’ narratives of women through contemplation in order to ‘hear’ what has been silenced. Morton (1985) narrates her experience of a silenced woman who narrated her story in a women’s workshop that she facilitated in 1971. According to her, the woman, who was silent and alone during the workshop, started speaking awkwardly and hesitantly on the last day. According to Morton (1985):

When she reached the point of the most excruciating pain, no one moved. No one interrupted her. No one rushed to comfort her. No one cut her experience short. We simply sat. We sat in a powerful silence. (p. 205)

Some women are not fortunate enough to attend a workshop and at times a workshop comes a little too late when some are already dead or destroyed.

The media reports that some victims of domestic violence die at the hands of their intimate partners in silence, for example, Karabo Mokoena who was killed and burnt by her boyfriend (ANN7 12 May 2017) and Zestah September who was strangled by her boyfriend, a soldier, in December 2015 (Chabalala n.d.). The list of women abused and killed by their sexual partners is growing in South Africa. According to the South African Medical Research Brief published in 2012, the majority of murdered women are killed by their intimate partners (Abrahams et al. 2012:1). The role of the church by way of pastoral care is crucial in intervention, particularly for victims who resort to self-silencing. The symbolic presence of the church in people’s lives enables the unlocking of critical elements of a person’s inner self that have been shut down
Pastoral care for the perpetrator

African women theologians call on the church to engage perpetrators to change (Haddad 2003). It emerged from the participants’ narratives that some of the perpetrators of domestic violence are well respected and that they conceal their abuse by helping the community, particularly the needy, donating to the church and showering their victims (spouses) with gifts. In this way, the perpetrator is already silencing the victim, the community and the mediator. It is obvious that the perpetrator maintains his disguise by silencing everyone, knowing well that people may not believe the victim in the absence of physical scars. In such contexts, a pastoral caregiver needs good analytical skills to be able to understand the silent voice of the perpetrator. Larney (2003:33) argues that pastoral caregivers should have concern for what meets the eye about the human person as well as what lies buried deep within them. This is a skill that should be built over time as humanity evolves and meanings change. Larney’s (2003:33) intercultural approach recommends multiple perspectives that take into consideration the fact that there is no one answer to a problem and, as a result, the services of a psychologist may be required. The fact that the perpetrator may require psychological evaluation needs to be considered in all pastoral care initiatives. The presence of the church in this life as loving and compassionate can encourage him to conduct introspection on his actions. Because not all domestic violence is confirmed by physical scars, some men may not be aware that they are abusive to their partners; therefore, a pastoral caregiver should be realistic in his or her intervention process by helping the perpetrator to identify his actions as abusive.

Findings of this article resonate with African women theologians that women suffer in order to sustain their marriages and protect their husbands (Chauke 2003; Moyo 2005); therefore, pastoral care interventions should include the perpetrator as well. Women are enculturated not to run away from problems in their marriages; this emerged from the project conducted, as well as many studies that have been carried out on domestic abuse particularly by African women theologians. Therefore, in interventions the perpetrator should be accommodated, listened to and journeyed with just like the victim.

In pastoral caregiving, there should be sensitivity towards the perpetrator’s worldview. Larney’s (2003:33) intercultural approach emphasises authentic participation where there is mutual concern for the integrity of the other, and the people involved are engaged in the examination of an issue on their own terms. As much as a perpetrator is a problem, he or she may also be a victim of ‘something’ unknown that needs to be known and addressed in order to correct the wrong and abusive behaviour. It is clear that the pastoral caregiver should do what is right by God, by helping both the perpetrator and the victim. Research highlights that victims of abuse do not leave their abusive partners until it is too late (Mazibuko & Umejesi 2015:6585). Thus, victims often approach the pastor – if they do at all – when a situation has already escalated, and emotions are complex (Davies & Dreyer 2014:n.p.). I argue that the perpetrator should not be excluded from interventions. This is because both parties (the victim and the perpetrator) are in crisis and in need of help. Rather than confronting and judging the perpetrator, interventions should be compassionate to both parties. Compassion creates a safe space for accepting that one has a problem which needs to be addressed. Some perpetrators are skilled in never taking responsibility for their actions. This may be exacerbated by confrontational and judgemental attitudes, because the perpetrator may become defensive, denying that he has a problem, justifying his behaviour, blaming the victim and avoiding help. Pastoral care is about compassion and being present for those in the greatest need of love and compassion. Etymologically, compassion comes from the two Latin words *pate* and *cum* which literally mean ‘to suffer with’ (Nouwen 1981:9–10). According to Nouwen (1981:24), compassion challenges us to leave our safe spaces and to enter areas where we are not comfortable, where people are in pain and in anguish; it challenges us to share the pain, fear, confusion, anguish and brokenness of the victim and the perpetrator. Furthermore, compassion challenges us to be weak with those who are weak, vulnerable with the vulnerable and powerless with the powerless (Nouwen 1981:10). Pastoral care is about bearing each other’s burdens and demonstrating solidarity to the suffering in order to instil hope; hope for healing and hope to deal with the anger that nurtures violence.

From an intercultural pastoral care perspective, one would theologise the silence of the perpetrator as a concealment of God’s love and grace for both the victim and perpetrator. The silence of the perpetrator (abuser) should be interpreted as suspicious because it imposes silence on the victim (abused). According to Woolley (2015:31), ‘[feminist theologians primarily identify women’s silences as imposed’. Elisabeth Schüssler Fiorenza comprehends that the feminist ‘theological task is to interrupt the patriarchal silencing of women and to make women visible as God’s agents of grace and liberation’ (1985:14). Engagement with the perpetrator through pastoral care helps women to find and gain access to their silenced voice. A key theme within pastoral care and feminist theology is that in telling stories of their experiences, women construct new meanings and knowledge which empowers and liberates them (Woolley 2015:139). Dreyer (2011) argues that the:
feminist task will be over when all human beings are valued equally and have the equal opportunity of leading healthy lives being who God made them to be, living authentic lives in the presence of God as a community. (n.p., [author’s own italics])

**Pastoral care for the community**

Black African communities are communal, interrelated and connected. African women theologians argue that women experience themselves as more connected to the community than men (Kasomo & Masemo 2011:158). They believe that their sense of connection is a ‘morval imperative to look after needs, desires and feelings of others at the expense of theirs’ (Jack 1991:129; Kasomo & Masemo 2011). They engage in ‘cognitive activity’ to actively silence the voice of the authentic self by refocusing on the interests of the community (Jack 1999:236). The interaction of women with the community challenges pastoral care initiatives against domestic violence not to isolate the broader community. The brokenness of a community member means the brokenness of the entire community; therefore, as the pastoral caregiver extends compassion to the victim and perpetrator, she or he should extend compassion to the broader community. Compassion and community are connected (Nouwen 1981:9–10). From an intercultural pastoral care approach, the principle of authentic participation confirms that ‘women’s empowerment and liberation is gradually extended into wider society’ (Woolley 2015:139). The silence of women is often a social construction perpetuated by different communities in the name of culture and religion. Laird (1991:430) and Bons-Storm (1996:58) perceive silencing by society as sociocultural narratives that mirror the values and norms of society.

Women are communal beings and nurturers of communities; therefore, pastoral interventions should engage with the community. Thus, pastoral care for community members is an important aspect of any church’s ministry because the church is located within the community. Pastoral care is a process for empowering and liberating the person and the significant other in their daily interactions and decision making. It includes partnership in discussion and reflection about the specific problems and challenges faced by the community and the individuals in them. As a result, pastoral care is concerned with many different aspects of a community, including the physical, practical, psychological, social and spiritual needs that affect humanity. In the process of pastoral caring, a pastoral caregiver confronts sociocultural constructions that dehumanise human beings such as attitudes, behaviours and environments. Theorists on silencing the self, such as Jack (1999) and African women theologians such as Oduyoye (2005) and Haddad (2004) highlight that for some women this is the only option they have owing to the limited safe options for resistance and fears of negative consequences in patriarchal systems such as discrimination, rejection and abuse.

The community plays a significant role in the healing of broken souls. Magezi (2006:516) articulates that we should not divorce the role of the community in a process of healing because it is a distinctive character within pastoral care. By community I refer to the broader community, which includes the faith and the social community. The community’s worldviews, beliefs, values and norms play a critical role in contexts of domestic violence, as both victims and perpetrators comprehend and anticipate their attitudes and behaviour in terms of the social attitudes and standards of their communities. According to Magezi (2006:516), ‘pastoral healing in Africa is impossible if the counsellor does not determine either the positive or negative effects of the affected person’s community (network of relationships)’.

Social scripts are authored and nurtured by society. Thus, ignoring the community in pastoral interventions does not solve the problem of violence but rather results in some confusion for both the victim and the perpetrator. At times it forces them to live a double life by trying to fit into two different contexts such as their social networks and the church. As such, Gerkin’s pastoral care theory of shepherding reminds pastoral caregivers that ‘care in the Christian sense of the word always involves both care of the community and care of persons involved in any situation with which the pastor is confronted’ (1997:115). Pastoral care interventions cannot target one person when domestic violence in marriage is perpetuated by many factors, including the significant others that both victim and perpetrator interact with.

**Conclusion**

The aim of this article was to explore how pastoral caregivers can extend caregiving to the victims of marital domestic violence who have silenced the self. Findings of the article highlight that the silencing of women is both a Christian and a social compliance issue. Breaking the silence about domestic violence in marriage is not easy for some women; difficulty intensifies if the perpetrator is a husband to the victim and an active Christian member. The two participants of this article confirmed that in such cases perpetrators use the Bible to silence the victim. Proverbs 21:9 emerges as one of the Biblical scriptures used to silence women. This then challenges pastoral caregivers to focus their interventions on the circle of significant others that surrounds the victim and the perpetrator and with whom they interact. This circle includes the victim, the perpetrator and the broader social network that influences the victim and the perpetrator’s lives. It is significant that in such interventions, the pastoral caregiver should work in collaboration with trained psychologists, because such experts will be able to read the silenced voice of both the victim and the perpetrator. Silence is dangerous in contexts where it is a threat to life; thus, it should be on every church’s pastoral care agenda to help the victims who have been silenced to speak out about their abuse so that they will receive appropriate holistic healing.

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**Competing interests**

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