COMMUNAL PASTORAL COUNSELLING: CULTURALLY GIFTED CARE-GIVING IN TIMES OF FAMILY PAIN—A VHAVENDA PERSPECTIVE

BY

DEMBE REUBEN PHASWANA

Submitted in accordance with the requirements for the degree of

DOCTOR OF THEOLOGY

in the subject

PRACTICAL THEOLOGY

at the

UNIVERSITY OF SOUTH AFRICA

PROMOTER: DR. M E HESTENES

NOVEMBER 2008

...............
DECLARATION

I Dembe Reuben Phaswana,

student number: 0421 588 – 5

declare that

COMMUNAL PASTORAL COUNSELLING:
CULTURALLY GIFTED CARE-GIVING IN TIMES OF
FAMILY PAIN—A VHAVENDA PERSPECTIVE

is my own work and that all other sources that I have used or quoted have been indicated and acknowledged by means of complete references.

__________________________
DR PHASWANA

_____________________
DATE
ACKNOWLEDGEMENTS

This thesis is the illustration of communal endeavour. Without the communal involvement I wouldn’t have started and submitted this thesis.

I thank God All Mighty, the Father of our Lord Jesus Christ. He is big, and I am small. It reminds me of a trip of an elephant and mouse crossing the bridge. After crossing the bridge the mouse commented, “Did you hear how we shake that bridge?” The elephant agreed that they did shake the bridge, while the real shaking was done by the elephant. In this project God is the one that did the real shaking. “Soli Deo Gloria!”

My thanks go to my promoter Dr. M.E. Hestenes. He gave me encouragement from the first day. As I keep on writing and rewriting he was reading and rereading with encouraging comments.

The UNISA Library staff members were too kind for me. I was far from the library but I could find the books I need. I thank them.

I thank the Reformed church Fundudzi for the Family Enrichment Conferences (FEC). They taught me to minister communal care. They also welcomed my application to study. Reformed church Nzhelele also understood and accepted that I am in a study programme. Reformed church Tshiawelo hosted me when I was on study leave. I thank families of Tseisi M. Simon, Rev. Ramantswana Hulisani, Rev. Rabali Thiofhi and Heidelberg Theological Seminary students.

I acknowledge the encouragement which fellow ministers in the reformed synod Soutpansberg made. The late Reverends Netshitangani ET and Mugeri MS encouraged me many times to study.
My family sacrificed for this study as they suffered pain of my absence due to this study. Some did not understand why I am doing this at this age. I want to thank my wife Mukondeleli for the wonderful contribution she made for this study to be a success. I thank my children for giving their whole life for this study. They are: Unarine, Pfulufhedziso, Muhuliseni, Ampfarisaho. I say, “A nti ntsileli, Vhakwevho!” This is your sweat!
The thesis argues that there is a need for Christian communal pastoral care and counselling practice beyond the individualistic Western pastoral care and counselling practices. The communal pastoral care model advocated by the author uses culturally gifted care-givers who follow spontaneous caring models.

Several of the major books concerning communal pastoral care and counselling were reviewed. The author concludes that the church has been impoverished by ignoring the cultural gifts of the majority of members and the mutual communal care of the community.

Pain and its healing in this thesis are understood in a culturally sensitive manner. Pastoral care must be done in context, in this case in the Vhavenda context. Hence the thesis looks systematically at the way in which the Vhavenda understand and heal pain from their cosmological perspective.

The thesis engages in empirical research among the Vhavenda people using qualitative interview. The author selected five small communities to test for their understanding of pain and healing. He developed his own interview schedule. Themes encountered in interpreting the research results include pain as part of life.

The thesis develops two sub-models of a Vhavenda-Christian culturally gifted model of communal care arguing the need of their incorporation into Christian communal care. They are “Kha ri vangulane” model which pictures pain as a thorn which people help to remove from a person; and the “khorö” or “dzulo” gathering which is family or community care-giving. A case study has illustrated how they are used.

Finally, the author argues that the Bible is full of communal pictures which resonate well with the African people. Hence it is fairly easy to correlate the Vhavenda sense of community with the body of Christ model of Christian community as found in the Bible. The conclusion is that members of the Christian community need to
reincorporate their culturally gifted care resources and integrate them with the biblical care.

KEY WORDS AND PHRASES
Communal pastoral care and counselling, culturally gifted care-giving, Vhavenda cosmology, Vhavenda communal care giving, Vhavenda family care giving, pastoral model, cultural gathering, pain, suffering, Christian communal pastoral care, healing
TABLE OF CONTENTS

TITLE PAGE .................................................................a
DECLARATION .........................................................b
ACKNOWLEDGEMENT ...............................................c
ABSTRACT .................................................................e
KEY WORDS ...............................................................f
TABLE OF CONTENTS ..............................................i

CHAPTER 1 .................................................................1

INTRODUCTION

1.1 ORIENTATION ....................................................... 1
1.1.1 Africans are people in real pain ................................. 1
1.1.2 Communal actions can heal pain ............................... 3
1.1.3 God’s care is omnipresent in communal care .............. 5

1.2 THE RESEARCH PROBLEM .................................... 7

1.3 PRACTICAL THEOLOGY, MUTUAL / COMMUNAL CARE AND
   EMPIRICAL METHOD .............................................. 8
1.3.1 Practical Theology .............................................. 8
1.3.2 Theory and praxis complements each other .................................. 9
1.3.3 The correlation model .......................................................... 11

1.4 COMMUNAL CARE AS MUTUAL CARE, PASTORAL CARE AND, COUSELLING AND PASTORAL THERAPY ................... 13

1.5 CULTURAL MATERIALS AS EXTRA-BIBLICAL MATERIALS IN COMMUNAL PASTORAL CARE ........................................ 18
1.5.1 Culture as an extra-biblical material in pastoral care .............. 19
1.5.2 The Reformed tradition and culture .................................... 21

1.6 PRACTICAL THEOLOGY AND ITS RELATIONSHIP TO EMPIRICAL METHOD ................................................................. 26

1.7 COMMENTS OF THE SAMPLE POPULATION TO BE INTERVIEWED ............................................................. 27

1.8 THE DEFINITION OF KEY CONCEPTS................................. 28

1.9 CHAPTER HEADINGS FOR THE FUTURE CHAPTERS ........... 29
CHAPTER 2 ................................................................. 31

COMMUNAL PASTORAL CARE LITERATURE REVIEW

2.1 INTRODUCTION ......................................................... 31

2.2 WESTERN LITERATURE ............................................. 34

2.2.1 “A Caring Church: A Guide for Lay Pastoral Care” .............. 34

2.2.1.1 Lay pastoral care and counselling is imperative ................. 35

2.2.1.2 Community involvement in care is pastoral care ............... 37

2.2.1.3 Training of lay pastoral care-givers ............................. 38

2.2.1.4 Conclusion ...................................................... 40

2.2.2 “The Pastoral Care in Context: An Introduction to Pastoral Care” .... 40

2.2.2.1 The times and things are changing ............................. 40

2.2.2.2 Three supplementing paradigms in pastoral care ............... 43

2.2.2.3 The communal contextual paradigm in pastoral theology ........ 44

2.2.2.4 Conclusion ...................................................... 45

2.3 AFRICAN LITERATURE ............................................. 46

2.3.1 Orientation ......................................................... 46

2.3.2 “Pastoral Care to the Sick in Africa” ............................ 47

2.3.2.1 Introduction .................................................. 47

2.3.2.2 Jesus Christ as the first ancestor .............................. 48

2.3.2.3 African culture and pastoral care ............................. 49

2.3.2.4 A Christian diviner .......................................... 50

2.3.2.5 Christian African pastoral care and counselling ............. 52
2.3.2.6 Conclusion ................................................................. 54
2.3.3 “Pastoral Counselling In Inter-Cultural Perspective” .................... 55
2.3.3.1 Introduction ................................................................ 55
2.3.3.2 There has been pastoral counselling in other cultures ............... 55
2.3.3.3 Human life: Ghanaian and traditional Christianity dialogue .......... 58
2.3.3.4 Conclusion ................................................................ 60
2.3.4 “Pastoral Counselling in South Africa with Special Reference to the Zulu” 61
2.3.4.1 Introduction ................................................................ 61
2.3.4.2 Pastoral care and counselling should be contextualised .............. 61
2.3.4.3 Pastoral care and counselling is holistic ............................... 62
2.3.4.4 Pastoral care and counselling can be enriched by looking at how communities care for themselves ......................................................... 62
2.3.4.5 Conclusion ................................................................ 64
2.3.5 “Community Healing and the Role of Pastoral Care of the Ill and Suffering in Africa” ................................................................. 65
2.3.5.1 Introduction ................................................................ 65
2.3.5.2 Pastoral Communal Care versus African Communal Care .......... 65
2.3.5.3 Pastoral Healing, Community and African Community and Christian Faith Community ................................................................. 66
2.3.5.4 Evaluation ................................................................ 67
2.3.5.5 Conclusion ................................................................ 69

2.4 EVALUATION OF THE LITERATURE REVIEW ............... 69
2.4.1 Evaluation of the Western books review ..................................... 70
2.4.2 Evaluation of the African books review ..................................... 72
CHAPTER 3 ............................................................................................. 77

PAIN: A PHYSICAL, PSYCHOLOGICAL, SOCIAL AND
THEOLOGICAL ANALYSIS

3.1 INTRODUCTION ................................................................. 77

3.2 DEFINITIONS OF PAIN ................................................... 78

3.3 AN EXPLORATION OF PAIN .............................................. 79
  3.3.1 An exploration of pain: A physical perspective .......... 80
  3.3.2 An exploration of pain: A psychological perspective .. 81
  3.3.3 An exploration of pain: A sociological perspective .... 84

3.4 BIBLICAL AND THEOLOGICAL PERSPECTIVES OF PAIN .... 85
  3.4.1 Pain in the Old Testament and Judaism ................... 86
    3.4.1.1 Pain in the book of Job ..................................... 88
    3.4.1.2 Praise and lament in the book of Psalms ............. 92
  3.4.2 Pain in the New Testament ....................................... 94
    3.4.2.1 Pain and suffering in Jesus’ life and death .......... 94
3.4.2.2 Pain in the book of 1 Peter ........................................ 96

3.5 HEALING OF PAIN ......................................................... 97

3.6 THE MEANING OF PAIN AND SUFFERING ...................... 99

3.6.1 Introduction ........................................................... 99

3.6.2 The meaning of suffering ........................................... 100

3.6.3 Where is God while people are in pain? ....................... 102

3.6.4 Is suffering the will of God? ..................................... 103

3.6.4.1 The inclusive argument ......................................... 103

3.6.4.2 The exclusive argument .......................................... 107

3.6.4.3 The balance of inclusive and exclusive arguments ...... 109

3.6.5 Does God still love people in pain? ............................ 111

3.6.6 God is the source of both joy and pain ....................... 112

3.6.7 Pain as an instrument of blessings ............................ 112

3.7 CONCLUSION ............................................................. 113

CHAPTER 4 ........................................................................ 115

VHAVENDA COSMOLOGY AND COMMUNAL CARE

4.1 INTRODUCTION .......................................................... 115

4.2 A VHAVENDA COSMOLOGY AND PAIN ....................... 116

4.2.1 Worldview and cosmology: Beliefs have consequences. .... 116
4.2.2 Some important features and functions of the worldview .................. 117
4.2.3 Cosmology is life among the Vhavenda ...................................... 119

4.3 GOD IN VHAVENDA COSMOLOGY ........................................... 120
4.3.1 God exists ................................................................. 120
4.3.2 Raluvhimba, a supreme creator ........................................... 120
4.3.3 Nwali the God of the Vhavenda ........................................... 123
4.3.4 Midzimu cult ............................................................. 124
4.3.5 The spirit world ......................................................... 125
4.3.6 Zwidudwane (Dissociated spirits) ......................................... 125
4.3.7 God is communal ......................................................... 126

4.4 THE VHAVENDA COMMUNALISM .......................................... 127

4.5 THE VHAVENDA FAMILY ..................................................... 129

4.6 THE COMMUNAL CONCEPT OF A PERSON ................................. 135

4.7 RECONSIDERING RELIGION AND SECURITY OF COMMUNAL-FAMILY LIFE ................................................................. 137

4.8 CONCLUDING REMARKS ...................................................... 139
CHAPTER 5 ....................................................................................................................141

TOWRDS A TRADITIONAL VHAVENDA UNDERSTANDING OF
PAIN AND CARE

5.1 INTRODUCTION ................................................................................................................. 141

5.2 BORN TO SUFFER: VHAVENDA’S EXPRESSION OF PAIN  .......... 141

5.3 PAIN IS BROADER THAN BODILY SUFFERING ................................. 147

5.4 MAJOR SOURCES OF PAIN IN THE VHAVENDA WORLDVIEW … 148
  5.4.1 Witchcraft .......................................................................................... 149
  5.4.2 Ancestor’s spirit can cause pain ..................................................... 151
  5.4.3 Communal disorder can cause pain .............................................. 152

5.5 DEATH AS PART OF PAIN IN VHAVENDA CULTURE ............... 152

5.6 MEDICINE AND HEALING PAIN AMONG THE VHAVENDA  ....... 154
  5.6.1 The medico-magician herbalist .................................................. 155
  5.6.2 Divination ...................................................................................... 155
  5.6.3 Medicine and magic ................................................................. 156
CHAPTER 6 .................................................. 166

QUALITATIVE EMPIRICAL RESEARCH ON PAIN IN
VHAVENDA COMMUNITY

6.1 INTRODUCTION ........................................... 166

6.2 QULITQITVE EMPIRICAL RESEARCH ...................... 166
6.2.1 What is qualitative research and how does it differ from quantitative research? ................................................... 166
6.2.1.1 Characteristics of qualitative research ...................... 167
6.2.1.2 The participant’s perspective and interpretation .......... 167
6.2.1.3 The descriptive nature of this method and individual cases ........ 168
6.2.1.4 The importance of context in which the research is undertaken....... 169
6.2.1.5 Attention to the dynamic nature of life by focusing on processes rather
than single events ................................................................. 170

6.2.1.6 The flexible and open approach: the hallmark of qualitative approach ................................................................. 170

6.2.1.7 Quantification and measurements are minor qualitative approach .... 171

6.2.2 Why should we use quantitative and qualitative research methods in practical theology ................................................................. 172

6.3 STEPS OF PLANNING THE INTERVIEW ......................... 174

6.3.1 The pilot interviews ................................................................. 174

6.3.2 Gathering the data ................................................................. 177

6.3.3 The language of interview ......................................................... 178

6.3.4 Interview setting ................................................................. 179

6.3.5 Qualitative approach renders a service to participants ............ 179

6.4 REPORT ON PILOT QUALITATIVE RESEARCH ....................... 180

6.4.1 Introduction ................................................................. 180

6.4.2 The interview questionnaire .................................................. 181

6.4.2.1 Kha ri vangulane (the interviewing guide) .................... 182

6.4.2.2 Grouping the interview questions ...................................... 182

6.5 REPORT ON PILOT INTERVIEW ........................................... 185

6.5.1 The personalities and characteristics of the pilot interview participants ... 186

6.5.2 The main themes from the pilot interview ................................ 188

6.5.2.1 Pain is real in people’s lives ........................................... 188

6.5.2.2 A desire for healing .................................................... 189
6.5.3 Changes of questions for the major qualitative interview .......................... 189
6.5.4 Conclusion .................................................................................................. 191

6.6 REPORT ON MAJOR QUALITATIVE RESEARCH ................................. 191
6.6.1 Introduction ............................................................................................... 191
6.6.2 The personalities and the characteristics of the interviewees ................. 192
6.6.3 Themes that come out from the interview ............................................... 195
6.6.3.1 Pain is part of life .................................................................................. 195
6.6.3.2 Pain occurs beyond people’s control ..................................................... 197
6.6.3.3 The family support .............................................................................. 198
6.6.3.4 The neighbour support ....................................................................... 199

6.7 CONCLUSION ................................................................................................ 200

CHAPTER 7 ......................................................................................................... 202

VHAVENDA CHRISTIAN CULTURALLY GIFTED COMMUNAL
AND FAMILY CARE MODELS

7.1 INTRODUCTION ............................................................................................ 202

7.2 CHRISTIAN CULTURALLY GIFTED COMMUNAL PASTORAL
CAREGIVERS MODEL ..................................................................................... 203
7.2.1 There are always people with gifts of care ............................................. 205
7.2.2 The communal gifted pastoral care as mutual care ............................... 206
7.2.3 Every member of Christian community has special gifts................. 209

7.3 “KHORO” OR “DZULO” AS A MODEL OF VHAVENDA CHRISTIAN
COMMUNAL CARE ................................................................. 210
7.3.1 The meaning and purpose of “kboro” or “dzulo” model ................. 210
7.3.2 The “kboro” or “dzulo” and the African palaver .......................... 212
7.3.3 The example of family “dzulo” model of care ............................. 217

7.4 INDIGENOUS GATHERINGS AND THEIR CONTRIBUTION TO
COMMUNAL PASTORAL CARE .............................................. 222
7.4.1 Indigenous gatherings can promote the priesthood of Christian community
members ................................................................. 223
7.4.2 Indigenous gatherings teach embracement and acceptance ............... 225
7.4.3 Indigenous gatherings promote inclusiveness .............................. 227
7.4.4 Indigenous gatherings promote remembrance ............................. 229

7.5 U VANGULANA (TAKING OFF EACH OTHER’S THORNS) OF CHRISTIAN
COMMUNITY ................................................................. 231

7.6 SOME GENERAL IMPLICATIONS OF THESE MODELS ........................................ 238

7.7 CONCLUSION ................................................................. 240
RECOMMENDATIONS

8.1 INTRODUCTION ................................................................. 242

8.2 MODELS OF COMMUNAL PASTORAL CARE AND COUNSELLING TO
PEOPLE IN PAIN ................................................................. 242

8.3 ALLIED RESEARCH AND THE NEED FOR MORE RESEARCH ON
VHAVENDA COMMUNAL CARE MODELS .............................. 243

8.3.1 Pastoral care and counselling is for the whole community .......... 244
8.3.2 The culturally gifted people should do to caring and counselling .... 245
8.3.3 Counselling people who fear ancestral spirits and witchcraft ........ 245
8.3.4 "Khoro" or "dzulo": a model of communal pastoral care .............. 246
8.3.5 Communal pastoral counselling in indigenous African healers ...... 247
8.3.6 Communal pastoral counselling in indigenous initiation schools .... 247

8.4 CONCLUSION ................................................................. 248

BIBLIOGRAPHY ................................................................. 250

APPENDICES ................................................................. 261

DIAGRAMS

DIAGRAM 1 ................................................................. 18
DIAGRAM 2 ................................................................. 23
CHAPTER 1

INTRODUCTION

1.1 ORIENTATION

1.1.1 Africans are people in real pain

Pain and suffering are daily experiences for most people of Africa. Many Africans suffer pain through political violence,\(^1\) economic deprivation, communal deterioration and family breakdown. The rate of unemployment is high;\(^2\) most of those employed are underpaid; due to poverty there is malnutrition and starvation in many people.\(^3\) In Africa one meets people who are really sick. African people suffer from malaria, TB and AIDS.\(^4\) Many African people are victims of a multiplicity of oppressive forces which lead to great pain, depression, mistrust and lack of hope.\(^5\) This is also

---

\(^1\) Cf. “Violence is the most serious problem in South Africa; in the early 1990s the country was estimated to be one of the most dangerous in the world. . .” in an article: South African, in Microsoft® Encarta® Encyclopedia 2005 © 1993 – 2004 Microsoft Corporation. Violence is the problem of Africa. Also cf. Peter Kanyandago, “Violence in Africa: Pastoral Response from a Historical Perspective,” in “Pastoral Care in African Christianity: Challenging Essays in Pastoral Theology,” D.W. Waruta and H. W. Kinoti (eds.) (Nairobi: Action Publisher. 1994) 35 – 58.

\(^2\) Cf. “Unemployment affects one third of the working population, and among blacks is about 50 per cent”; in an article: South African, in Microsoft® Encarta® Encyclopedia 2005 © 1993 – 2004 Microsoft Corporation.

\(^3\) Cf. “. . . as 21st century dawned, Africa remained a continent of sharp contrasts and paradoxes. Democratic oppositions clashed with corruption of authoritarian regimes; poverty and malnutrition, augmented by natural disasters . . .” in an article: “Africa,” in Ibid.

\(^4\) Cf. the rough figures of Africa of 2005: “Approximately 10 per cent of adults on the continent have HIV/AIDS . . .” in Ibid.

\(^5\) Cf. “According to . . . (UNEP), Africa is the only region in the world where poverty is expected to increase in the 21st century . . .” in Ibid.
particularly true of the rural areas, like Vhavenda land in Limpopo Province, where the author ministers. The poverty is still seen in the appearance of the villages—poor housing, the roads to the villages, schools in other villages need renovations. People in rural areas still move to the cities for jobs.

Throughout history, Africans have learned to care for one another in times of pain and despair. The result is that pain and death, in communal African cultures, are not individual issues but are family and communal concerns. They affect the whole family and other families. The whole community feels the pain when an individual is in pain, and usually shows its care and solidarity through spontaneous communal or mutual care.

Poverty makes death to be a most painful event of life in an individualistic society. When a member of the family dies, it is totally the responsibility of the family to bury the deceased. Members of the family have to struggle alone to find money for burial. Funerals are very expensive in the individualistic competitive perspective. Families often lack the money to bury the family member according to proper customs and

---

8 In communal funeral programmes, it is a custom that the community leader or the representative gives words of condolences in the funeral on behalf of the community.
rituals. There is not enough money left for the family for living. Illness is particularly painful because there are so few sophisticated resources available, particularly in the outlying areas.

Communal life is part of the answer of these and other problems. Without community, African people cannot survive. The communal lifestyle has helped and is still helping many Africans to survive. Healing and indigenous communal care are vital to African peoples. The irony is that indigenous institutions like families and communities that used to combat and heal pain have all but deteriorated to the point of collapse. This began in the urban areas and continues in the rural areas. What remains in the indigenous cultural and religious resources that can help to heal people’s pain? The author is going to engage in this question throughout this thesis.

1.1.2 Communal actions can heal pain

African peoples have always had communal interactions among many other healing resources which they need to revitalise and rediscover in order to address the depth of pain in communities and families. In the Apartheid era, African peoples and / or

---

11 Cf. W.V van Deventer, Poverty and Practical Ministry of Liberation and Development within the Context of Traditional Venda man (Pietersburg: University of the North, Dissertation, 1989) 75. Cf. also Mbiti’s expression, “I am because we are”.

12 Cf. South Africans have funeral clubs in townships and villages to help in times of death and funeral.


14 Cf. Sarah Getrude Millin, The South Africa (New York: Boni and Liveright Publishers, 1927) 256. She expressed that the change was slow but sure: “While the white men are discussing with one another whether they shall or shall not educate the native and civilize him, Nature is laughing at them. ‘You began this business,’ she says. ‘But can’t you see I have taken it out of your hands now? For better or for worse this thing is going on, and you won’t stop it. You have lost control . . . Soon it will be no longer a question of finding a native for jobs. It will be a question of finding work for the natives. They will demand it, and adequate payment for its performance.’”
resources were often regarded as being naïve about their own culture to an extent that some even tried to become as white and Western as possible on the surface leaving deep feelings of uneasiness at the bottom.\(^{15}\) They changed their names to Western names, their clothes to Western clothes and colour by using some creams that made their skin lighter. Inside, however, they were Africans. The attitude was that, “One of the most difficult things to do these days is to talk with authority about anything to do with African culture. Somehow Africans are not expected to have any deep understanding of their own culture or themselves.”\(^{16}\) The communal actions were deprived.

Fortunately this is changing with the arrival of the New Democratic South Africa. However, the Western worldview has deeply taken root in African worldview. It is replacing the communal perspective.

This thesis wants to build the hope that communal actions can be rediscovered and heal the communities and the nation. In Africa things are traditionally done communally and thus care in the African context should be seen as communal endeavour. The members of community are culturally obligated to care for each other. They visit the sick people in their communities for the reason that they are part of the community. Hence they are part of each other.

\(^{15}\) Cf. Bernard Makhosezwe Magubane, *The Political Economy of Race and Classs in South Africa* (New York and London: Monthly Review Press, 1979) 56. “Missionaries, whether they were aware of it or not, were used by the colonists to justify their own position and psychologically enslave the colonized peoples. They condemned African institutions and customs, and taught social norms of capitalist civilization as if they comprised a universal moral code. They instilled in their converts a belief in the virtues of work, private and respect for authority, and thus translated African peasant life in a methodical way of industrial capitalism.”

People who graduated and continue to graduate in Western educational institutions need to reclaim and reassess their African worldview. The re-education in this sense is that pain should not be understood only from a Western worldview, but it must also be understood from the African context.

1.1.3 God’s care is omnipresent in communal care

The argument of this thesis is that God’s care can also be actualised in indigenous African communal care, where the whole community avails its God given talents for a person as the symbol of the omnipresence of God. This should help to turn away from the assumptions of many ministry trainings where the Western values and virtues are considered to be identical with Christian or biblical values and virtues.\(^{17}\) The known fact is that, due to equating Western worldviews to Christianity, African cultures have been studied suspiciously. Each culture is God’s gift to serve the community. De Cruchy from a historical perspective pointed it out in this way:

“There were indigenous cultures flourishing in what is now South Africa prior to the arrival of European Christianity, and these, though varied, were inevitably religious in character. Without romanticising, it remains true that a profound sense of the presence of God is evident in traditional African culture. Tragically this was not recognised by those Europeans, whether settlers or missionaries, who first introduced Christianity in the subcontinent. They regarded the indigenous cultures as devoid of any genuine religious life and belief in God, considering them too primitive to be taken seriously or so demonic that they could only be rejected. Contrary to the scripture, according to missionaries God has left himself without a witness in Southern Africa.”\(^{18}\)

Scripture supports God’s presence in what people do in all cultures. Lartey, a prominent African practical theologian, arguing from the same conviction, wrote that:


“This is an affirmation of the positive nature of all cultures and traditions and can be said to spring out of the Christian doctrine of creation with its statement that all creation comes from God and that God is at work in all history, upholds all the world, cares for all people within it and is present in all areas of life. There is in the Old Testament a recognition of just men outside the fold of Israel. Cyrus, for instance, is seen as an instrument of God’s salvation in Isaiah 44:28 - 45:7. There seems, also in the prophetic message, to be an indication that other religions can be a proper response (Mal. 1:11).”

Paul, in Acts 17, presented the gospel using what people have in their cultures, religions, philosophy and customs. Thus, he affirmed some form of knowledge of God outside the Christian presentation. It goes without saying that God accepts people as they are with their ideas, experiences and structures in contrast with doubting or not recognising them.

God then is the creator of life and culture. Kalilombe has this to say:

“God has been ever present among his people, just as he has been in all peoples, cultures, religious tendencies of the world, not just as a condescension, but because this benevolent presence is in the logic of the cosmic Covenant of creation and re-creation. We must therefore assume that in all serious efforts of mankind (sic) to make sense of its own life and destiny, God has been in and with his peoples.”

---


20 Cf. “During the Greco-Roman period, the Greco-Roman culture was used for the presentation of the gospel . . . ” in David T. Adamo, *Reading and interpreting the Bible in African Indigenous Churches* (Benin City: Justice Jeco Press and Publisher Ltd, 2005) 109.


God’s presence does not mean that people can find salvation without Christ. The author of this thesis holds to a position of religious inclusiveness\textsuperscript{24} in the sense that Christ’s saving power works from within when people accept the gospel. People’s religious reality like the name and the concept that there is a God should serve as bridges to the “biblical” message—Jesus Christ is the Saviour. The Word of God is “near” (Romans 10: 6 – 12).\textsuperscript{25} Hence the task of the missionary is not only to let people know the Word but equally important understand the Word.\textsuperscript{26} The culture may be deformed in the sense that it is not worshiping the true Living God. The gospel should penetrate into the darkness of other religions and reveal the truth, Jesus Christ. Although people are aware of God’s presence, it does not mean that they can find salvation without faith in Christ’s death and resurrection. The author believes that there is a need to grapple with the reality of other religions and cultures. The truth and wisdom that are found in other cultures and religions is the bridge to the gospel.

\subsection*{1.2 THE RESEARCH PROBLEM}

The problem that this research wants to address is the shallowness of Christianity in Africa. The author’s hunch is that one cause of this shallowness of Christianity in Africa is due to the foreignness of Christianity planted in Africa. It does not deal with the African issues, but with Western history and confessions. Hence it does not go deep to the heart of Africa.


\textsuperscript{25} A study of the word as “ῥήμα” indicates that the message of incarnated and risen Christ is that He the Lord in all cultures, Jews and Greek (Gentiles). Cf. Wuest, K. S. \textit{Wuest's word studies from the Greek New Testament: For the English reader} . Eerdmans: Grand Rapids, 1984.

The study will focus on how Christian pastoral care and counselling can incorporate communal care and counselling to heal pains,\(^{27}\) without ignoring “the entire realm of traditionalist assumptions.”\(^{28}\) It will look at those means used by indigenous communal communities, culturally gifted, to heal pains as part of God’s given means of healing pains. Therefore, the research problem of this study is the following: Can Christian pastoral care and counselling use communal principles in its operation to heal pains and suffering? More specifically, how can Christian care and counselling use Vhavenda communal principles to help heal pain and suffering?

The research project will use a practical theological framework and empirical methodology to explore this problem and focus on a new model for dealing with care in the Vhavenda community.

1.3 PRACTICAL THEOLOGY, MUTUAL / COMMUNAL CARE AND EMPIRICAL METHOD

1.3.1 Practical Theology

The practical theologian, Prof van der Ven has observed that:

“Many times the question of the methodology in practical theology is at stake. Some argue that practical theology has no methodology at all, and even should not have one. Because practical theology, they say, is not a discipline that makes use of procedures and techniques. Theology generally refers to truth and not method. Truth transcends method, interrupts and even negates methods. This especially applies to the truth of God’s revelatory praxis in Jesus, the Christ, which is mediated by the people’s praxis inside and outside the church in the context of modern society. This truth does not ask for methodology, but for openness, awe, wondering, concern, commitment, surrender. From these attitudes, the practical theologian

\(^{27}\) John Patton, Pastoral Care in Context: An Introduction to Pastoral Care (Louisville: Westminster / John Knox Press, 1993) 137 - 184.

does not strive to master God’s revelatory praxis, but to open himself or herself for it, to approximate to it in a respectful and reverent way.”

The two poles of this methodological approach, theory and praxis are interrelated in practical theology. Theory here is referred to as the teaching or doctrine of the church and the biblical truth. It can be described in general as a worldview. In this thesis theory is the biblical concept of communal pastoral care and counselling to people in pain. It is the formulation and development of systematic ways of communal pastoral care to people in pain. Praxis refers to what is taking place in practical life, which in this thesis is the individual in pain and how community heals pain in its communal mutual care. It is the action of people in their interaction to each other or mutual care. Mutual care is “the most basic level of care provided when members of faith community are for each other.” Practical theology is therefore not just praxis, but it on equal basis formulates methodologies of its praxis.

1.3.2 Theory and praxis complements each other

Theologians usually fall into a trap of choosing between theory and praxis as the point of departure. The approach emphasises one pole at the expense of the other. Theologians need to be aware of this danger because theory and praxis complements each other, they do not oppose each other. “Traditionally, practical theology was seen as an applied science with no independent field of inquiry; it belonged rather in a training centre than in university.” It was supposed to focus on caring for people who are suffering, not on thinking of the ways of caring or building a theology of

---

29 A. Johannes, Van der Ven, Practical Theology: An Empirical Approach (Kampen: Pharos, 1993) 323.
caring. The implication is that it was not thought that practical theology could do both—caring and giving a theory of caring. It has been established that practical theology, pastoral theology, can make a theoretical statement. They are not just engaged in practical work. They also engage in thinking the principles of caring for the people in different situations.

Theology is easily reduced to abstract thinking or abstract theory. Uneducated people can be taken out of theological engagement because it is preserved for the few, the professionals or the trained ministers. If this happens, practical theology can lose its proper place in Church community involvement. Lack of community involvement is attested to by the fading away of pastoral care and counselling from a communal perspective.

There is a tension between Practical Theology as an elite university discipline dealing primarily with theory and “practical theology” as practised at the grass roots and hence concerned with praxis. The tension here is that “modern theology as practised within the walls of the universities has often developed in isolation from the church

33 Uneducated is used in Western view of going to school. There are mental abilities or knowledge apart from the ones acquired from formal schooling. Cf. Gerard Vincent Grant, The Organization of Mental Abilities of an African Ethic Group in Cultural Transition (Johannesburg: University of Witwatersrand, Dissertation 1969)36 - 39.
35 Cf. “Many persons outside the field began to think that pastoral care, while perhaps important for the day-to-day work of the parish pastor, was not equipped to encounter prophetically the larger public issues of the day.” V. Charles Gerkin, Widening Horizons by Redefining the Task: Pastoral Care and Practical Theology (Philadelphia: Westminster Press, 1986) 11.
and the Christian community.” There has been a lot of debate on this issue. However the academic and pastor are both using theory and praxis which are ultimately complementary. Doing theology in a concrete situation does not only make theology alive and relevant, it also helps one to understand theology better. Theology is alive and is not in a sociological vacuum, but in the lives of both the academic and non-academic communities. Practical Theology deals with what people hold in their faith today. Therefore Practical Theology focuses on the fundamental problem of theology, which is “the relation and the balance between our Christian tradition and the modern situation of Christian religious experience.”

1.3.3 The correlation model

In addition to the above affirmation of balancing theory and praxis in Practical Theology, there is another closely related understanding of Practical Theology as a “correlational” discipline. Stone, a practical theologian who is passionate on communal pastoral care, suggests a method proposed and used by Tillich that is

---

38 Cf. “Theology is not a noun; but a verb.…it is in discerning the will of God, in the process of obediently participating in his mission, that we learn to understand that faith makes sense.” H. Jurgens Hendriks, Studying Congregations in Africa (Willington: Lux Verbi.BM, 2004) 24.
called a “method of correlation”. Theology is understood as a two-way conversation between culture or context and Christian fact or Scripture. Stone argues that for theology to be real to its context, a correlation method needs to be used. He argues, “Yet, the term correlation remains a handy label for a complex process of comparison and contrast that takes place in all theological reflection.”

He defined the concept of correlation as follows:

“To correlate, then, is simply to bring two discrete entities into mutual relation with each other. Correlating theology with the practice of ministry involves allowing the insights of theological thoughts to impinge upon, interact with, and influence the actual day-to-day tasks of ministry and vice versa.”

Tracy’s model of correlation is in line with Tillich’s—it suggests that “the situation or context of the interpreter listening to and questioning classic texts” be correlated. Correlation is done through conversation. Tracy views Practical theology as correlating in saying that it is, “the mutual critical correlation of the interpreted theory and praxis of the Christian fact and the interpreted theory and praxis of the contemporary situation.” The correlation initiative comes from either Christian faith or current praxis.

The Whiteheads (Evenly and James) revised Tracy’s model of correlation from the two-ways conversation to a three-ways conversation. Personal experience is

---

43 Ibid.
45 Ibid.
46 Cf. Compare the Whiteheads’ three-ways conversation with Gerkin’s which are, an individual (“persons as individuals and members of church communities”), Christian fact (“the day-to-day
included. Correlation, in the Whiteheads’ view, is the conversation at three levels, which are,\(^{47}\) (i) interpretations of contemporary cultural experiences and practices (culture, context) (ii) interpretations of personal appropriations of that broader cultural experience and practices (individual, self), and (iii) interpretations of the meaning and practices of the central Christian witness or fact (confessions, Scriptures).

By adding these elements the Whiteheads (Evelyn and James) brought the idea that Practical theology should not ignore some of the insights of psychotherapy and clinical pastoral training.\(^{48}\)

1.4 COMMUNAL CARE AS MUTUAL CARE, PASTORAL CARE AND COUNSELLING, AND PASTORAL THERAPY

The author is using the concept communal pastoral care as comparable with what others, especially European theologians, call “mutual care”. Mutual care from this understanding of communal care is not a “one-to-one” care, but communal care. From that background De Jongh van Arkel calls mutual care “the foundation of all care.”\(^{49}\)


\[^{48}\text{Ibid.}\]

\[^{49}\text{J. T. de Jongh van Arkel, “Care,” in Practical Theology: only study guide for PTA 200-W (Pretoria: University of South Africa, 1985) 75.}\]
He goes on to write of Heitink’s view: “In the Christian church mutual care is the basic form of pastoral care . . . is an essential part of the church.” It simply means “one cannot speak of a church or congregation in the absence of such care.”

He is in line with what Tillich believed about care, as he described care as “essentially mutual.” It is an informal care in the sense that it “usually takes place within an informal network of communities—friendship, small prayer groups, telephone conversations and spontaneous reactions to crises.” Its motive is community because “it emanates from believers’ commitment to one another and is associated with an acceptance of the community of believers.”

Mutual communal care supplements official pastoral care, which is mostly organised by the church.

De Jongh van Arkel’s conclusion that: “mutual care has been neglected in pastoral theology” is correct. Mutual care has been neglected in the study and practice of pastoral care. He concluded further that “certain dignitaries are made responsible for activities that are inseparably part of Christian life.

Thus the caring activity of the church has been left to particular people and is no longer the responsibility of everybody.” Much of the work in pastoral care focuses on “pastoral care as a caring action”, which “is part of the official upbuilding and

50 Ibid.
51 Ibid.
52 John Patton, Pastoral Care in Context: An Introduction to Pastoral Care (Louisville: Westminster / John Knox Press, 1993) 100.
53 Ibid.
54 Ibid.
56 Ibid.
nurture of the congregation.” 57 This work is done by the ordained minister or pastor. 58 In other churches pastoral care is left in the hands of the few: elders and ministers of the Word. The rest of the congregation is the receiver of the care. The elite forms of care are called pastoral counselling, which is short term counselling, and pastoral therapy, which is long term therapy, and both these require specialised training.

The other element that propelled the neglect of mutual care was the change of the office of minister and the service of care. 59 “The role of clergy has become increasingly professionalized because of secularisation.” 60 A minister has to specialise in pastoral counselling, and may be the only one in the congregation who is skilled. In this specialisation “the emphasis of pastoral work has become too individualistic.” 61 It is no more the work of every member in the congregation. The emphasis of care also changed. “In pastoral counselling too great an emphasis has been on structure of the interview, on the correct responses and setting.” 62 This made it difficult for an

57 Ibid. 112.
58 Cf. Benner describes “pastoral care as the total range of helping contacts that occur between the pastor and parishioners, including but not limited to such activities as visiting the sick, attending the dying, comforting the bereaved, and, in sacramental tradition, administering the sacraments.” Benner David G., Strategic Pastoral Counselling: A short term structured model (Grand Rapids: Baker Book House, 1992) 15.
59 Note that Clinebell describes pastoral care and counselling as disciplines that “involve utilization by persons in ministry of one-to-one or small group relationships to enable healing empowerment and growth to take place within individuals and their relationships.” Clinebell, Howard John, Basic Types of Pastoral Care and Counseling: Resources for Ministry of Healing and Growth London: SCM Press 1984), pp. 25 - 26.
61 Ibid.
62 Ibid.
ordinary church member to be a care-giver. The “spontaneity and mutuality and care for the whole person”, which “embodies ekklesia and koinonia”63 faded away. The pre-reformation scenario,64 where the church members were not the participants of church ministry, came back in another fashion.

This should not give the impression that concentrating on personal problems in pastoral care and counselling is unacceptable in communal pastoral care and counselling. One-to-one care is not to be abandoned. This thesis wants to bring balance of community and individual to pastoral care and counselling. While the thesis points to the danger of over-emphasis on the individual in pastoral care, it does not say that there is no danger in over-emphasis of the community in pastoral care and counselling. The extreme of each side can be a problem.

The research wants to look at the fading away of mutual care in the community. The concept of a “caring community”65 is in line with biblical truth of love and body model of a church. This means that Christian counselling does not only serve an individual by an individual but also serves an individual through a community and a community through a community.

63 Ibid.

64 Note the historical fact in Schaff, P., & Schaff, D. S. History of the Christian church: Vol. vii Modern Christianity: The German Reformation (Grand Rapids: WM. B. Eerdmans Publishing Company, 1910) 24. “The Roman church is an exclusive hierarchy, and assigns to the laity the position of passive obedience. The bishops are the teaching and ruling church; they alone constitute a council or synod, and have the exclusive power of legislation and administration. Laymen have no voice in spiritual matters, they can not even read the Bible without the permission of the priest, who holds the keys of heaven and hell.”

This idea can be stated clearly today because it is now clear that Western Christianity is not pure Christianity, as “nowhere do we find absolutely pure Christianity.”

Throughout church history “eclectic approaches” were used in one way or another. The research project will “eclectically” look at the communal gifts to heal pains. The thrust of the matter is that a community has gifts to heal its members. As the gifts of the Spirit are bestowed on individuals, they are also bestowed to communities. Communal communities have strong family ties.

African communal communities help each other in any suffering, but when it comes to death and grief they excel. There are sayings in some African cultures that express that in case of death even enemies help each other. In Tshivenda they say: “A dzimana u la malombe, mukosi a a phalalana,” which means people possessed by the spirit may withhold food from each other but when there is trouble they help each other.

To summarise, then, this thesis will focus on the whole church community ministry of mutual care as part of communal care. It approaches Christian pastoral care and counselling as a ministry of the whole church community which will also involve conversations with indigenous Vhavenda care-giving.

Mutual care ministry is not the ministry that is centred on one person but on the community. Pastoral care from mutual and communal perpective is the responsibility of the whole church, not only the ordained minister or elder. Communal member thinks of himself or herself in the context of others. The thesis will look at how the communal care can enrich mutual care in Christian pastoral care and counselling.

---

1.5 CULTURAL MATERIALS AS EXTRA-BIBLICAL MATERIALS IN COMMUNAL PASTORAL CARE

The presupposition of this thesis is that pastoral care will be meaningless if it ignores the cultural context. Jones and Butman use a concept, “responsible eclecticism.” Though this concept is from psychotherapeutic point of view, it is applicable here. This will mean that the pastoral counsellors, like psychotherapists, will be “eclectic or pluralistic in their approach.” It is called responsible because in that process eclectic is done in such a way that it desires to not contradict the biblical Christian faith apparent in a community.

---

Pastoral care and counselling should let the people being served be creative in such a way that they are able to use things from their culture in a responsible way. This means that it is not everything that needs to be accepted in a Christianised community. At the same time, equally, it is not everything from the culture that needs to be rejected. “Identification and differentiation are given equal weight.” 68 The task of “responsible eclecticism” is done by the people who are part of the community, not by foreigners. People inside the culture are able to look at culture “from outside.” 69 Culture here is used in pastoral care and counselling to understand the present setting so that the work should address the issues of the people. This does not suggest that culture is equal to the Bible, but it is needed to care and counsel people using it. The biblical message is able to come down to the people.

1.5.1 Culture as an extra-biblical material in pastoral care

Culture or context is an extra-biblical material that helps in pastoral counselling. 70 Christian pastoral care and counselling must be true and faithful to both the Bible and context. This is based on the inter-connection of “the knowledge of God and of ourselves.” 71 This had been true to all church ministries as Luzbetak noted.

“Even centuries before the science of culture was born, the most effective missionaries were those blessed with a deep appreciation of the diversity of cultures and of the important role


70 It is necessary to study the culture in which pastoral care is done. Cf. Browning Don, “Methods and Foundations for Pastoral Studies in the University,” in ed. A. Visscher, *Pastoral Studies in the University Setting: Perspectives, Methods, and Praxis* (Ottawa: University of Ottawa Press, 1990), p. 51. Note there should be a systematically studied “a particular religious tradition, particular mode of faith, and a particular consciousness of God with regard to ‘carrying out practical task’”.

which cultures play in human behaviour. . . Missionary effectiveness has always gone hand in hand with immersion in cultures.”

What needs to be clear here is that, for people to understand the gospel, it needs to speak to their context. Luzbetak underlines the “truth” of what this thesis is attempting to portray, that the Bible and dialogue with the “local cultural context” are essential and paramount. Groskreutz describes what this thesis calls the Bible as “the Christian affirmation of fundamental reality and value” and the context is described as “concern for the wholeness and well-being of persons”.

Taking the Bible and culture seriously, earths the gospel to the people because it addresses relevant problems people face every day. Earthing the gospel, has to do with what Paul meant by being “All things to all men” (1 Cor. 9: 22). This is a challenge in Christian ministry. Luzbetak describes this challenge as a way of “emptying” oneself.

---


73 Bob Smith, *Basics of Bible Interpretation* (Waco: Word Books Publisher, 1978) 25. Note that the Bible is written in human cultures. “Thus, we must be careful to hear the word in its cultural and temporal setting: yet its truth transcends all temporal, racial, language, and cultural boundaries.”


In writing from a “modern pastoral theology” point of view, Groskreutz identifies “what makes pastoral theology distinctively and truly modern.” Modern pastoral theology maintains a healthy balance between the Bible and culture:

“The implication of pastoral concern in accordance with the best information, insights, and understanding of both needs and available resources for meeting those needs, irrespective of the specific historical identity of the resource. . . It assumes a dialogical understanding of interpersonal relationship with freedom and responsibility to explore and clarify issues and relationships between the ‘secular’ and ‘religious’. It thus posits fundamentally a dialogical understanding of the relation between faith and culture, and it assumes that the fundamental intention of all dialogue in pastoral theology is involved in the attainment of clarity, understanding, and appropriate activity toward the fulfilment of objective implied in the definition of pastoral theology.”78

Modern pastoral theology also thus uses other disciplines.79 The “pluralistic culture becomes the historical arena in which the theory and practice of pastoral work are being developed and actualized” 80 The conviction underneath is that God is in control. He changes evil things to good things for his children.

1.5.2 The Reformed tradition and culture

The author of this thesis has a Reformed background and is particularly concerned with communal pastoral care and the Reformed understanding of communal cultures as revealed in the body model of the church. These paragraphs are going to explore some of the “Reformational” view on culture.

---

79 Ibid.
80 Ibid. 63.
The origin of culture, in the Reformed tradition, “is the fulfillment of the mandate given to man (sic), the king of creation, by his (sic) Maker in the Garden of Eden.”81 The Reformed conviction is that “Had man (sic) remained in paradise, and had there been no sin, he (sic) would still have had the task of culture.”82 Culture is not the result of sin. Herridge is right in saying that “A thoroughly cultured person is one who is thoroughly matured in every part of his (sic) life, so that he (sic) is able to fulfil the purpose of his creation.”83

The divine mandates referred are: Be fruitful, multiply, fill the earth, subdue the earth, rule over all creatures, keep the garden and dress it (Cf. Gen. 2: 15 and 1: 28). It is believed that “culture is the execution of this divinely imposed mandate.”84 This is because: “In his (sic) cultural task man (sic) is to take the raw materials of this universe and subdue them, make them serve his (sic) purpose and bring to nobler and high levels, thus bringing out the possibilities which are hidden in nature.”85

The raw material, ideas and beliefs are included in culture. Van Til defined culture as: “any and all human effort and labor upon the cosmos, to unearth its treasures and its riches and bring them into the service of man (sic) for the enrichment of human existence unto the glory of God.”86 The Reformed tradition expresses culture in positive terms, culture serves God. The goal of culture is: Soli Deo Gloria. Serving

82 Ibid. 80.
83 Ibid. 79
God does not oppose serving people in their predicaments. Loving and respecting other human beings, is the culture born of loving and respecting God the Creator.

This definition of culture includes worldview of human beings. “For by culture we do not merely understand the historical action of man (sic) and his (sic) moulding power in subduing the earth and bringing it to the fullest fruition, but culture also comes to expression in definite patterns of life which portray certain ideals.” 87

The worldview as the vision of a person influences how a person thinks and lives. In this way a person’s worldview forms his or her culture. A person would not like culture or anything to go against him or her. The worldview has to change first for contrary things to be accepted. In other words culture has the elements that support people’s worldview. It tells them how and what to think and live.

Culture also includes core traits:

![Diagram 2: Core traits of culture](image)

It is against this background that culture is understood as “the pattern for living used by a social group to mould its environment so as to achieve the fulfilment of its dreams.” 88 Hence what culture should achieve is:

“the fulfilment of purposive moulding of nature in execution of the creative will of God. Man (sic) as cultural creature is an analogue of the great Architect and Artist of the universe. Man

---

87 Ibid. 30.

(sic) as creature, therefore, is co-worker within bringing creation to its fulfilment. He (sic) is not, of course, a collaborator, but neither is he (sic) a blood fool. Man (sic) is an instrument who is conscious of what he (sic) is doing. But due to the fall of man (sic) into sin, he (sic) is no longer willing to admit the claims of creator or serve God. . . it is because of man’s (sic) fall that his culture is apostate and in the state of continual crisis. But, culture, as such, is a gift of God to man (sic) as well as an obligation.”

The fall of people into sin does not mean that culture is no more necessary in people’s lives:

“Sin has not made man’s (sic) cultural task unnecessary or superfluous. Sin never makes unnecessary God’s demands, nor can it ever thwart God’s purposes. We are just as much in duty bound to keep God’s laws today as Adam was, even though we cannot keep them because of our enslavement to sin.”

Van Til argues that, “one must not forget that man’s (sic) cultural instinct and calling can never be divorced from his (sic) covenant relationship to the Creator”

This conviction makes the Reformed tradition believe that, because sin cannot “thwart God’s purposes” in every culture there are good things to cherish. It “stands in opposition to those who advocated that the African way of life is foolishness compared to the Western and European way of life.”

“If, then sin tends to break down culture, must we conclude that no culture is possible in heathen lands, where the redemptive work of Christ is not found? Not at all. That would be true if sin were the only force still at work there. For sin would destroy and ruin all. But as we

---

learned in our study of common grace, even in pagan lands God still causes forces to work to
counteract the destructive force of sin; and brings to pass much cultural good despite sin.” 93

This Reformed conviction would like the culture to be “in-filled” with the gospel in
such a way that culture serves Christ wherever it is exercised. Culture is not viewed
as something against Christ, but as something for Christ.

“The great Reformed theologians and Churchmen (sic) did not originally set out to enrich
culture. Their work was interpretation and application of the Word of God and leadership in
the life of the church. Yet in performing these functions with integrity and competence, they
mightily shaped culture.” 94

In the Reformed tradition there is belief and awareness that God is alive and is
present in any culture as “power, energy, intentionality” 95 make it thrive in any
situation. This belief can make a church community to be other-people-oriented
rather than self-orientated and still remain true to Christ. The church is an
institution that does live for those outside of itself. Hence,

“It is still possible that a Reformed community that lives with integrity in the larger
community will shape the larger community without compromising its own integrity and
without doing injustice to the freedom and conscience of all people. In its best moments the
Reformed community has been willing to depend upon the power of the preached word and
the testimony of the Christian community’s life to create a godly public opinion and shape the
future. The opportunity for this witness is open in a free and pluralistic society.” 96

93 Henry H. Meeter, *The Basic Ideas of Calvinism* (Grand Rapids: Grand Rapids International
94 John H. Leith, *An Introduction to the Reformed Tradition: A Way of Being the Christian Community*
food for the men in Christ. Bible study is feeding the people of God.” (Italics mine), by Bernard Ramm
95 Ibid. 214.
96 John H. Leith, *An Introduction to the Reformed Tradition: A Way of Being the Christian Community*
One should think that the present society needs this Reformational worldview. The Word witnesses to the situation, on the other hand the situation, makes the Word clear and specific or contextual. The word of God that ignores the situation is proclaimed out of context. The context of Hebrew or Jews and Greco-Romans will help a Bible reader to understand the message of the Bible. The present context will also help the preacher to let the message if the Bible speaks to people of today.

It can be pictured in this diagram as empirical-confessional:

![Diagram 3: The Word of God and the situation](image)

1.6 PRACTICAL THEOLOGY AND ITS RELATIONSHIP TO EMPIRICAL METHOD

Practical theology is interested in studying the theory and praxis of people in a variety of settings and contexts. Religious theory and praxis needs to be investigated scientifically. Many methods from the social sciences can be borrowed to enable the researcher to aim for depth in his results.

The author planned to have an interview with the people to find out the sense of the communal pastoral care in people’s lives. Qualitative interviews were conducted for this research project. These interviews were conducted in Tshivenda and translated into English. The author conducted the interviews with the people without screening.

---

people with special pain like sickness, death, social problems and economic problems. The reason is that the nature of the thesis looks at pain in general but healed by communal endeavours. The author created an own questionnaire. The testing of concepts is qualitative.

The author will conduct a pilot study to prove the validity of his questionnaire. He will then question a limited number of people regarding pain and their support systems and needs. The empirical section will be illustrative rather than exhaustive.

The author also uses an “anecdotal-illustrative” method when highlighting some personal observations from his experience of Vhavenda culture and religion. These observations are meant to enrich the depth of the thesis regarding Vhavenda culture.

1.7 COMMENTS ON THE SAMPLE POPULATION TO BE INTERVIEWED

The study will be done in an African culture: the culture of the Vhavenda people. The author grew up and is serving as a pastor in this group of people.

The Vhavenda community is a communal community. They share life, pains and joy together. The author, therefore, is not an outsider but an insider and intimately integrated into both the Vhavenda culture and the Christian tradition or the Bible. Some studies previously done indicate that “among the African people ... pastoral care and counselling are done mainly by the church as community,” 98 and not by an individual representing the church community.

1.8 THE DEFINITION OF KEY CONCEPTS

Community: Community is a group of people living together as one body or bigger family. Community is families living together. They are interrelated in one way or another. Their interrelation helps them to cope with their situation.

Communal pastoral care and counselling: This is an approach of counselling, which uses community resources to help each other. Care and counselling in this approach is not the function purely of one person but ideally of community to community.

Culture: The ways and means how people live and / or do things as a group. The ways and means of living in this instance are mostly done instinctively. There is no formal council to monitor them.

Family: Family includes all people related by birth, marriage and living together. Family does is not limited to father, wife and children. It is the extended family that we are concerned about as a healing institution. Family is one of the elements that shape community. 99

Pain: Any situation that causes stress and takes away the joy of any person or community is pain. In pain tears of suffering and sorrow are shared.

Healing: Restoration of total peace and happiness of the body and mind is healing. The total healing takes into account other factors that disturb peace and happiness in people’s lives.

1.9 CHAPTER HEADINGS FOR THE FUTURE

CHAPTERS

There are another seven chapters, which expand the present chapter.

Chapter 2: Communal Pastoral Care Literature Review: Pastoral books with an emphasis on communal care will be reviewed.

Chapter 3: Pain: A Physical, Psychological, Social and Theological Analysis: Pain will be discussed and analysed through these perspectives.

Chapter 4: Vhavenda Cosmology and Communalism: The worldview and cosmology of the Vhavenda people will be outlined and critiqued.

Chapter 5: Towards a Traditional Vhavenda Understanding of Pain and Care: It explores features of pain in Vhavenda context.

Chapter 6: Qualitative Research on Pain in the Vhavenda Community: An exploration of pain in small communities through an interview schedule will be undertaken.

Chapter 7: Vhavenda-Christian Culturally Gifted Communal and Family Care. It develops the communal models of healing.

Chapter 8: Recommendations. It summarises the communal pastoral care and counselling models and points out possible future research projects.
PAIN: Empirical Research in Vhavenda Culturally Gifted and Family Care

CHAPTER 1
Pastoral care and counselling can use indigenous communal care and counselling

CHAPTER 2
Reviews Pastoral books with an emphasis on communal pastoral care

CHAPTER 3
Pain is discussed/analysed from physical, psychological, social and theological

CHAPTER 4
The outline and critique of worldview and cosmology of the Vhavenda

CHAPTER 5
Exploration of features of pain in African/Vhavenda thought and context

CHAPTER 6
Exploration of pain in small communities through interview reports

INTRODUCTION
COMMUNAL BOOKS REVIEW
PAIN
VHAVENDA COSMOLOGY & COMMUNALISM
VHAVENDA VIEW OF PAIN AND CARE
EMPIRICAL RESEARCH IN VHAVENDA

COMMUNAL PASTORAL COUNSELLING: CULTURALLY GIFTED CARE GIVING IN TIMES OF FAMILY PAIN—A VHAVENDA PERSPECTIVE

INTRODUCTION
COMMUNAL BOOKS REVIEW
PAIN
VHAVENDA COSMOLOGY & COMMUNALISM
VHAVENDA VIEW OF PAIN AND CARE
EMPIRICAL RESEARCH IN VHAVENDA

COMMUNAL PASTORAL COUNSELLING: CULTURALLY GIFTED CARE GIVING IN TIMES OF FAMILY PAIN—A VHAVENDA PERSPECTIVE
CHAPTER 2

COMMUNAL PASTORAL CARE LITERATURE REVIEW

2.1 INTRODUCTION

The previous chapter declares a conviction that there is a need of developing a theory or a model using communal pastoral care. The author proceeds in this chapter to show that need by reviewing selected classic pastoral care literature which cry out for a balance of individual approaches and communal approaches of healing pain.

Firstly, the author gives an orientation of the kinds of literature to be reviewed and the reasons for review. Secondly, the author then proceeds to review two classic books with Western backgrounds and three classic books from African backgrounds. The author has selected these five books which he regards as classic to give a strong historical awareness of the communal pastoral care and counselling in the history of pastoral care and counselling. Thirdly, the author will also review a recent article by Magezi (2006) dealing with the community healing in African perspective. In conclusion the author outlines the possibility of pastoral communal care in every context.

In this thesis, the mutual pastoral care is seen as communal pastoral care. Up to the present the subject of mutual pastoral care has not been thoroughly researched. Consequently there are few books and journal articles which focus on this approach. More spadework is still needed. There are also few articles and books focusing on African pastoral care and counselling by Africans. Western literature lacks much of
the communal pastoral care. The West is rich in psychotherapy counselling but it is lacking mutual and communal pastoral care.

This review will help people to see how some theologians and members from Christian communities struggle or succeed in this approach. The author is fully convinced that there are voices calling for community caring in pastoral ministry.¹ These voices are from all over the world at a time when community has been reduced to a role of a spectator in pastoral care and counselling.

The principle of this thesis is that the Western and the African worldviews do not compete each but compliment each other. It should be indicated that, though this study is about African communal pastoral care, Western literature is also crucial and thus needs to be reviewed. The West has produced much on theology and pastoral theology in particular. There are pastoral theologians who are not satisfied with the dominant Western or individualistic psychotherapeutic pastoral care. This thesis wants to look at the contributions made by those Western theologians who are critical of individualism and desire a broader communal pastoral theology.

African literature on this subject is of great interest. The reason this needs to be borne in mind is that in former years most African theological institutions, if not all, were established by Western theologians and in the Western fashion with a Western curriculum and tutored by Western teachers or professors. Hence Christian pastoral care and counselling from an African perspective was done by people who were trained in pastoral care and counselling in Western institutions, either in Africa or

abroad. Therefore there is a scarcity of literature on pastoral care and counselling, from an African perspective.²

Most of us from Western institutions think in a “white” or rather Western way, though we are Africans. This is the result of the curriculum and leaders of the institutions where we were trained. The training directly or indirectly and consciously or unconsciously neglected the African experiences and cultures.³ This was due either to silence, as there was no talk about African experiences and culture in theologising, or by a lecturer showing how bad or uncivilised the African cultures are and how good the Western cultures are.⁴ The warning of Louw is important, “We must guard against authoritarian missionary pattern, in which the Western model is regarded as superior and the African model as inferior. Pastoral care then develops an aloofness which results in distance.”⁵

Today there are many attempts being made to reaffirm the value of African ideas and experiences. It is, however, not easy to retrieve and accept aspects of the African indigenous ways of life which have been so negatively portrayed. Thus African literature will be of advantage to this thesis. It will be of interest to see how some African theologians, being products of the West, struggle to re-do theology from their continent, homelands, cultures, contexts, and churches. Much of African pastoral care

² Vivian V. Msomi, Pastoral Counselling in South with Special Reference to the Zulu (Cape Town: University of Cape, Dissertation, 1992).
³ Note that there is no neutral education when it comes to worldview because a worldview is usually held unconsciously. Cf. Albert E. Greene, Reclaiming the Future of Christian Education (Colorado Springs: Purposeful Design Publications, 2003) 65.
⁴ I experience this as a student. Some tutors talked about African cultures but failing to reveal the richness because they did have the experience. Some did talk about it.
is not yet fully written, but is found in their stories, proverbs, poems, rituals and attire which require further study.

One interesting issue is that African pastoral care and counselling looks at how African people, before the adoption of the Western ways of life, cared for each other. The struggle of caring for each other communally was even experienced daily when societies were forced into or opted for a Western lifestyle. The result of this struggle is that many people in Africa, especially those who have accepted a Western lifestyle, lived or are living in two opposing worlds—African, which is communal, and Western, which is individualistic. We should also be aware that not everything about the African practice of care is automatically good and that this will become apparent during the course of this thesis.

2.2 WESTERN LITERATURE:

2.2.1 “A Caring Church: A Guide for Lay Pastoral Care”

The first book from Western literature to be reviewed is *The Caring Church: A Guide for Lay Pastoral Care*, by Howard W. Stone. Though it does not have a communal worldview as proposed by this thesis, it has the sense of including Christian community in pastoral care and counselling. It proposes that every Christian has a positive role to play in pastoral ministry.

The general presupposition of the whole book is that all Christians are in one way or another involved in pastoral care. Stone’s cry is that Christians were holding back, leaving the ministers alone in the ministry. Most people today, due to the spirit of

---

professionalism in pastoral care and counselling, are afraid to commit mistakes. Their excuse is that they are not trained for that work. The informal training in church service and serving in committees is not considered sufficient. Thus, they expect those trained and hired for the ministry, the ministers, to provide the ministry. They can pay the salary of the ministers.

2.2.1.1 Lay pastoral care and counselling is imperative

There are many family problems in a congregation. It should be clear that because there are so many, ministers cannot handle them alone efficiently. A “lone ranger” minister will place many people on the waiting list for a long time. It is not healthy for people to stay with a problem for a long time. It is not healthy for a minister either. Other members of the congregation are needed for a true healing of these wounds. The first people to know about the problems of church members are usually fellow church members. Church members touch the life of a person in pain at an earlier stage than a minister. They usually think that this needs a minister, and would not attempt to solve such a problem. They know what is troubling their neighbours but because they do not know what to do to solve the problem they are “afraid of becoming involved.”

Lay pastoral care is thus imperative. Hence, lay people in the congregation need to be trained so that they can do this service well. For Stone, when people say they cannot do pastoral care because they are not trained and that they do not know what to say when they have visited a person who has a problem, are “not just excuses; they are the

---


genuine apprehensions of many lay people.” 9 Though people have that genuine problem, it does not mean that a minister should care for the whole church alone. It is clear that no person can do it alone. The answer is training for preparing people for the service.

The purpose of the book is to find a way to train church members with the presupposition that every member is called to serve in the spirit to “bear one another’s burden” (Gal. 6: 2). There is no member who is not called to bear the burden of other members. Stone does not claim this to be the only way. He wanted others to think of other ways that can be used to train lay people for pastoral care. Stone identifies some of the problems in training lay persons for pastoral care. The theological understanding of lay pastoral care and its training is discussed.

He concludes the foundation of lay pastoral care by saying: “All Christians have two callings or vocations. The first is to their stations in life; the second is to the universal priesthood. In these callings they are commissioned to love and serve others.” 10 Training of lay people for pastoral care does not mean that if not formally trained they cannot do it. To be a Christian is to be a disciple. The informal training is taking place every day. It is the spirit of specialisation and “professionalisation” that instils darkness and fear in people’s minds in practising Christian services.

Thus “the training of laity in pastoral care method is designed to answer fears, give skills, heighten awareness of the task and above all instil confidence and conviction that even the simplest acts of care are commissioned by God.” 11 Christians are trained

---

9 Ibid, 3.
10 Ibid. 22
11 Ibid.
by the Word and examples of other Christians as people. They are called to serve and are able to serve each other.

What lay people lack primarily, is confidence when they serve other people in real need. They need to be empowered to serve themselves and others. Hence, Stone says that the purpose of training is “to answer fears, give skills and methods”. Christians have the tools. They need to be helped on how they can use them for the benefits of the kingdom.

2.2.1.2 Community involvement in care is pastoral care

Stone uses training of lay pastoral caregivers to restore what the church has lost in modernism. He is worried about this loss. He revisits Clebsch and Jaekle’s definition of pastoral care and the importance of “representative Christian persons”, who are responsible for pastoral care, as not only referring to ordained ministry. He emphasised that “pastoral care is a task of the total Christian community—a task of ministering to one another and reaching out beyond ourselves.”

He made it clear that from the birth of the church, caring has been the task of the whole community, not of the few:

“Throughout the centuries, as Clebsch and Jaekle suggest, the laity has always been part of pastoral care ministry. The emphasis upon such ministry and the visibility of such caring have varied considerably from era to era. In recent decades lay pastoral care appears to have receded in practice, and when given it is often without the support or encouragement of the ordained.”

Stone knew the time when this valuable asset of pastoral care—community, was pushed out from operating. “With the advent of specialization in pastoral counseling has come a growing belief among lay and clergy alike that pastoral care can be

---

12Ibid. 4 - 5.
performed only by ordained ministers.” He, therefore, argues for its return to the field in this way:

“If all pastoral care could be summed up as counseling, then I agree. But if we readopt the traditional, historical tasks of pastoral care—healing, sustaining, guiding, and reconciling—and if we accept our responsibility to care for others as God has loved us, then the lay person is not only able but is commissioned to participate.”

His argument is that, because pastoral care is not condensed to counselling, the church needs the whole community in this vital task and that it is the most possible way of pastoral care. Many people who experience difficulties in their lives and are not willing to seek help from professional therapy discuss their difficulties with their friends and other people who are close to them. Ordained ministry cannot do it alone. It needs the participation and service of the whole Christian community. In everyday life, people care for each other—even in the most serious catastrophes of life.

2.2.1.3 Training of lay pastoral care-givers

As stated in the purpose of his book, Stone views the training of lay pastors as a gate to let the whole Christian community get in pastoral care. He put it this way:

“It is crucial to recognise that training lay persons in caring ministry of the church involves far more than getting a few people to help the minister with visitation. The training creates a place in the life and ministry of the church for those who, hearing and believing, want to put their faith into practice in a tangible way. ‘Love one another’ (John 15: 17) becomes something active.”

13 Ibid. 5. Also Cf. E.Y. Lartey, “Some Contextual Implications for Pastoral Counselling In Ghana,” in Pastoral Care and Counselling in Africa Today, eds. Jean Masamba Ma Mpolo and Diasy Nwachuku (Frankfurt / New York: Peter Lang, 1991) 35.

Training for lay pastoral caregivers is one of the requirements of the spirit of modernism. Modernity came with an understanding that a person has to be trained formally for every work that must be done. This is the spirit of specialisation and “professionalisation.” Lay pastoral training, as Stone uses it, was to bring back those spiritual gifts for utilisation in the church and in the lives of Christians in general. His hope is that they will do it spontaneously once lay pastoral care is back in Christian community service. This means that people would never be ashamed to share with other people the little they have. Faith and hope are needed in this operation. By faith is meant that God is using the weakness for greater things. By hope is meant that the small gifts when shared by all will be joined and make a whole service for the kingdom.

Three features of his practical approach are useful to consider at this point. Firstly, the role of the minister in training: Stone sets up a programme, which a minister should follow for training lay pastoral workers. A minister, if Stone’s programme is followed, will spend most of the time with people who will serve others rather than people who need to be served.

Secondly, the actual training of lay pastors: Stone uses the modern tool of formal training to bring back ministry to the church community. The modern period is characterised by formal training as a way to acquire knowledge. Training has been a way of learning all the time. Before modernity training was more informal than

---

15 Cf. From medieval period through modernity formal training was the recognised training. “A most glaring and enduring change in substance (or content) was evident in the 18th century when the agenda of training in the university shifted towards specialist interests . . . The minister was expected to be Master of the theological disciplines even when the vast majority of the faithful remained largely unschooled.” Cole Victor Babajide, *Training of the Ministry: A Macro-Curricular Approach* (Bangalore: Theological Book Trust, 2001) 4.
formal. People acquired knowledge in life as it was lived. Jesus trained his disciplines for ministry primarily by activity.\textsuperscript{16} He talked to people in their present and walked with them. It is true that he taught them separately from the crowds, but most of the time it was in the ministry itself that they learned the ministry.

Thirdly, the spontaneity of pastoral care: Stone takes training as a first step to community involvement in pastoral care. Christian community learns all the time about caring for each other as a way of expressing love that God has poured out to his children through His Spirit. People are being trained daily for service and they should not wait. Christian service is in actual fact an “in-service training”.

\textbf{2.2.1.4 Conclusion}

Stone cautions modern pastoral theology against emphasising the individual at the expense of community. He does this from a Western worldview of community, as his community is the church. It is a valuable contribution to this thesis which concludes that pastoral care should not ignore community endeavours.

\textbf{2.2.2 “The Pastoral Care in Context: An Introduction to Pastoral Care”}

The second book from the Western literature, the author would like to review is Patton’s book, \textit{“Pastoral Care in Context: An Introduction to Pastoral Care”}. He extends Stone’s contribution in a number of different ways.

\textbf{2.2.2.1 The times and things are changing}

Patton, looking from the Western worldview, notes that “things have changed in pastoral care” since he started to work both as a minister and as a professor in pastoral

\textsuperscript{16}\textit{Ibid. 64}
care and counselling. When one reads his books, these changes are clear. He was moving from an individualistic approach to an approach in which, though an individual has an important place, the community has an equally positive role in pastoral care. Pastoral care and counselling is not only a minister’s or counsellor’s role, but also a community’s role. A community has a ministry to heal its members and itself. Patton still maintains, though, that a community that has the ability to heal is the faith community or Christian community—a church.

Patton is right, as he added that people who are involved in pastoral care today are no longer only “male clergy person of European ancestry working professionally in a parish or hospital setting” as it was before. He asserts that pastoral care is not the responsibility of one person like a minister, but in addition to the minister it is the responsibility of the whole Christian community. According to him every one in a Christian community or a church is called to care for others as one cares for oneself.

When Patton wrote his book, the position and involvement of women in pastoral ministry had changed tremendously than when he started his ministry. Apart from the issue of ordination of women in the office, today women as part of the community are given a ground for exercising their Spirit-given-gifts in contrast to some years ago. Women also have a vital place in pastoral care and counselling.

The assumption of his book on pastoral theology that needs to be observed, is that

“... it is the caring community, inclusive of both laity and clergy, that provides pastoral care. The ministry of pastoral care should be understood holistically rather than hierarchically, following the body image of Paul in 1 Corinthians 12 and Ephesians 4. This means that the theory, or theology, of pastoral care for the laity and clergy should be the same.”


18 Ibid.

19 Ibid.
This assumption says that it is not only the minister, or only someone in the hierarchy of the church, who has to do pastoral care and counselling. The whole church, as a community mutually coming together, is a community caring for each other. Patton echoes Fenhagen’s argument, “The church is not a community gathered around a minister, but a . . . community of many ministries . . .” 20

In other words community has the connotation of caring for each other. This idea of community is clear when Patton says that communal care is care as “remembering.” 21 Burck, in this understanding, describes community etymologically and says, “the term community refers to the obligations, gifts, or services that persons bring to one another; thus what they have, they have partly ‘in common’”. 22 Here the term community is described from its function as the interaction of people. The prefix co- means getting into each other’s life. A contrast term of community is immunity that implies “not under obligation, exempt”. 23

Communal community, in other words, should have the connotation of service to each other. Community members interact in serving each other. A community is not regarded as a community, in the communal perspective, if community members do not serve each other. Community serves like a family—only that community is a broader extended family. Community touches the individual, though it is not as close as the family. It concerned about the joy and sorrow of an individual without at considering the relationships, but only on the basis of being human and sharing life in the same

20 Ibid.
21 Ibid. 15 - 37. Note that Patton provided the whole chapter showing that community being together—remembering each other.
23 Ibid.
environment and community. The community’s touch to the individual may not be as warm as the touch of the family to the individual. The family touch is a closer touch. Community touches the individual through the family. In the normal society the touch of the family is warm enough to promote life.

2.2.2.2 Three supplementing paradigms in pastoral care

In this book, Patton addresses the subject of communal pastoral care. He tells his readers that he builds his paradigms on Hodgson’s (1988: 12) three paradigms of the Christian theological tradition.24 (i) The classical paradigm is from the Patristic period through the Reformation. The emphasis on classic paradigm was on the message of pastoral care. (ii) The modern paradigm is from early eighteenth century to the late twentieth century (the eighteenth through the twentieth century is called the Enlightenment period). Its emphasis was on the person involved in giving and receiving the message of care. (iii) The post-modern paradigm is from the end of the twentieth century to this day. The communal contextual paradigm for pastoral care emerged from the 1960s. It is associated with the new ecumenicity exemplified by Vatican II. It broadens the clinical pastoral care by reviving the classical contribution and including the caring community to pastoral care. Its emphasis is to call attention to contextual factors affecting both the message of care and the persons giving and receiving care.

Patton maintains that these three paradigms do not negate each other, but rather complement each other. The church or caring community needs all these paradigms “to think and to carry out pastoral care of the church at this point in history.”25

Balance is needed in order to have a healthy pastoral care. Patton comes up with an

24 Ibid, 4.
25 Ibid. 5.
eclectic approach by saying that the ministry of pastoral care should annul and preserve. It should “preserve the most valuable features of the previous paradigms, but also annul some of them in order to present a view of care that is less hierarchical, less naively provincial, and less uncritically individualistic . . .”  

2.2.2.3 The communal contextual paradigm in pastoral theology

Patton wants to introduce a new approach in pastoral care. He wants to bring in community in a new form. It is a concern for a communal context to fit the time. He thinks that a communal contextual paradigm offers both old and new understanding.

“It is old in that it is based on the biblical tradition’s presentation of God who cares and who forms those who have been claimed as God’s own into a community celebrating that care and extending it to others. It is new in that it emphasises the caring community and the various contexts for caring rather than focussing on pastoral care as the work of the ordained pastor. In the communal contextual paradigm, pastoral care is understood to be a ministry of faith community which reminds members of God’s scattered people that they are remembered.”

The three elements: message, person and context are equally important in pastoral care—they should be used together equally. None of these should be emphasised at the expense of the other.

The basis of a communal contextual paradigm is that human beings are relational beings. Total healing should restore the self in relation with the self and others.

Finally, let us look at some important aspects of this theological position from three points of view.

Firstly there is the relationship with God: This is the most basic of relationships. God is related to his people and the people of God are related to God. This is clear from a

---

26 Ibid.
27 Ibid.
creation perspective. A human being is not just created but created in the image of God. God is the Creator and Comforter, he is the Father or Mother, Sister or Brother.

*Secondly, pastoral care as hearing:* Patton describes the possibility of pastoral care as based on the fact that “God continues in relationship with creation by hearing us.” God hears the people he has created. It is comforting to know that God hears us. It is healing. People need to be heard. Hearing helps to heal.

*Thirdly, pastoral care as remembering:* In some African cultures when you visit someone, in the process of greeting you will express that “I remembered you today” or the person you visited may say that you remembered him or her. People who visit each other are related in one way or another. Patton used the word remember in this way—making someone part of you, as he said using Palmer’s words “Remembered means to re-member. It means to put the body back together. The opposite of remembers is not to forget, but to dismember.”28 Thus, to be remembered is to be made part of the family or community.

### 2.2.2.4 Conclusion

Patton believes in community pastoral care, a care that includes both the laity and minister which could be described as a caring community. He wants to move away from a ministry that had ranks such as lower and higher offices. Lay people should be competent to care for other people. Ministry, according to Patton, should be understood “holistically”. Ministry should touch all the aspects of life, not only the soul. Holistic pastoral care means that pastoral care should not only touch religious aspects, but must equally touch the social aspects, economic aspects, political aspects and psychological aspects. Patton’s community is the church community. He does not

---

28 Ibid. 28.
come to a point of looking at non-church community as community that interacts and serves each other in a pastoral sense.

2.3 AFRICAN LITERATURE

2.3.1 Orientation

African literature on pastoral care and counselling is still in its infancy. In practice it had been there orally and practised before Christianity came. African people believe in caring for each other as part of being a person.

Communal pastoral care is expressed in the concept of “Ubuntu” which lingered among the Africans long ago in African history. “It was an idea that had grown over centuries without being written down. It was contained in the stories and poems, recited at the communal celebrations, told by parents to children. It was expressed in customs and institutions and the whole way of life.”29 African people lived it in clearer way than they verbally teach it. Further, “The conception of ‘Ubuntu’ was developed over many centuries in traditional African culture. This culture was pre-literate, pre-scientific, and pre-industrial. And the ‘Ubuntu’ was expressed in the songs and stories, the customs and the institutions of the people.”30 The teaching and instruction was done through stories and life. Africans lead by example. The Vhavenda have the expression that says “Nwana wa mbevha ha hangwi mukwita”, which can be translated as “The baby mouse does not forget the way of the mouse.”

30 Ibid.
The understanding of “Ubuntu” underlies much of the material and experience of African peoples. The books that are to be surveyed here may not touch “Ubuntu” formally, but they value its existence and role in African community life and care.

2.3.2 “Pastoral Care to the Sick in Africa”

Berinyuu has done some deep reflections regarding African pastoral care and counselling. His book is titled: “Pastoral Care to the Sick in Africa”.  

2.3.2.1 Introduction

This book deals with pastoral care to the sick from an African perspective. It expresses a Ghanaian experience. He puts this clearly when he writes, “The primary purpose here is a formulation of some valid approaches of Christian pastoral care to Christians who fall sick”. He wrote his book with a view of engaging a dialogue with African traditional customs in the healing process. The plea is that pastoral care from a communal perspective needs to be given an ear. This is another valuable contribution to this plea.

Its main contribution in African pastoral care is to introduce some of the issues with which Christians in Africa are still struggling with. He wants to place the issues of pastoral care from an African perspective in a broader view. In his approach he pays attention to “the model of dialectic dialogue of Christian theology and psycho-social and spiritual dimension of the treatment to the sick in African culture”. In this model of dialectic dialogue he maintains a mutual respect and honesty as he has promised. In that dialectic dialogue he tries to compare African counselling with

31 Abraham Adu Berinyuu, Pastoral Care to the Sick in Africa: An Approach to Transcultural Pastoral Theology (New York: Verlag Peter Lang, 1988)
32 Ibid. 2.
33 Ibid.
Western counselling. His purpose was to find how European terms and forms of counselling can be replaced and be used by the Africans. He tries that by looking at Freudian Psychoanalysis\textsuperscript{34} and Frank’s psychotherapy\textsuperscript{35}.

The other issue Berinyuu introduces is the position of the traditional healer to the Christian community. There are many questions today about the difference of using the medicine from the Western trained doctor and traditional doctor or healer. Some feel that there is no difference because the Western medicine is from the known herbs or trees, while some feel that there is a big difference because the indigenous healers claim they have succeeded because they are in touch with the ancestral spirits. In some African Independent Churches, when one has been praying over a long period of time with no positive result, it is recommended by the leadership of the church to visit the traditional healer.\textsuperscript{36} During those visits a person is regarded as unclean but after undergoing all traditional rituals, a purification ritual by the church is done and that person is allowed in the church again. The understanding is that a traditional healing is not separated from religion. A healer represents the spirits and gods or ancestors. A Christian can visit a traditional healer but there are impure elements or practice. Hence, purification rituals are needed.

\textit{2.3.2.2 Jesus Christ as the first ancestor}

Many people in Africa practice ancestor worship or veneration as preferred these days. The question is, “What is the position of ancestors in the Christian community?” Berinyuu tackles this question. As indicated above, there are some churches and individual church members that would sympathise with members who visited the

\textsuperscript{34} Ibid. 52 - 65.
\textsuperscript{35} Ibid. 69 - 79.
traditional healer and are instructed to worship the ancestors, when there are continuous serious problems like illnesses or deaths. In some instances instructions to make rituals for the ancestors come from the office of the prophets in the Independent churches.

Berinyuu argues that the traditional healers are the African psychiatrists. Through divination a traditional healer can go with a patient to deep issues of the heart, those hidden in the heart for many years. Traditional healers get into the things that people are worried about every day like fear of some evil forces like witchcraft or anger of the ancestors because they are not honoured or venerated properly.

Fear is still a big problem for many Christians in Africa. They are afraid of many powers around them. Anybody who claims to have power is gladly followed without question. In his Christology, Berinyuu suggests that “Jesus can be seen in an African society as ‘a first ancestor’”.37 Praying to Christ is equated with praying to the first ancestor, the Creator.

2.3.2.3 African culture and pastoral care

Berinyuu does not believe that African culture can hamper pastoral care operation. His pastoral assumptions are:

a). God has not left himself / herself without a witness among all peoples of the earth; b). The Spirit of God is actively present in what all people do to cope in times of crises or in their understanding of the mysteries of life; and c). These mechanisms of coping and / or of trying to understand the mysteries of life are worth sharing with the rest of God’s people and must of necessity be incorporated into the gospel of Jesus Christ and enriching the quality of relationships among all people”.38

37 Abraham Adu Brinyuu, Pastoral Care to the Sick in Africa: An Approach to Transcultural Pastoral Theology (New York: Verlag Peter Lang, 1988) 103.
38 Ibid. 4.
He describes the indigenous African worldview as sharing the relationship of a person to the community. The relationship of a person and community embraces every aspect of life. In that description Berinyuu dwells “chiefly on the psycho-social or psycho-cultural and spiritual aspects of African worldview and a person”.\textsuperscript{39}

He sees a close relationship between a Biblical view of a person and the African worldview (Ghanaian worldview in particular).\textsuperscript{40} The same applies to the view of community—African cultures are close to the Bible. The closeness is primarily in that a human being is attached to community and is religious. He puts it clearly that Israel is revealed as a communal nation. It is clear that the individual is an important asset to the community, not only to himself or herself, because what an individual does, affects the whole family or community. Thus an individual has a special place in the eyes of God. Berinyuu concludes:

“Person and community as presented in the New Testament, illustrate that the traditional Ghanaian view and Christian witness today, generally speaking, are not different from each other. In the New Testament the early Christian community gathered around the resurrected Christ. By faith and baptism, they had entered the church of God by confession of Jesus Christ”.\textsuperscript{41}

\textbf{2.3.2.4 A Christian diviner}

Berinyuu’s view is that the minister should fill the position of the traditional healer. Hence, he suggests that a minister, from an African perspective, should be called a Christian “diviner”—a title of traditional healer. This Christian “diviner” should deal with the sick taking into account the pre-Christian traditions. He does not want Christians to operate as if there was nothing in place. Long before a European placed

\begin{itemize}
  \item \textsuperscript{39} Ibid. 5.
  \item \textsuperscript{40} Ibid. 22-23.
  \item \textsuperscript{41} Ibid. 25.
\end{itemize}
his or her foot in African soil, people were sick and cared for successfully. That needs to be looked into.

The issue of ancestors should not be hidden in pastoral care to the sick in Africa. Some people may have the opinion that their sickness is the result of not observing some traditional ritual. It is in the process of sickness that Christians quietly resort to the traditional rituals directed to worship the ancestors. Connected to that is the issue of evil spirits or the work of witchcraft that a patient may think is the cause of the sickness or a problem. Usually Christian counsellors ignore this element in caring for the sick.

Thus Berinyuu suggests that the minister’s position should be like that of a traditional diviner. He suggests that a Christian minister or priest, in Africa, be called a diviner.42 This is because this powerful figure of the diviner plays a profound role in treating and caring for the sick in Africa by touching all aspects affecting a patient.

He tells his readers that Bengt Sundkler suggests that the minister be given the position of a chief in community.43 He comments that the hierarchy in this position would be a problem because in some African cultures traditionally there were no chiefs. The colonial rulers imposed some people on them as chiefs. This makes the term and position of chief sensitive.

The other suggestion of the name of Christian leader is an “elder”. “Christian community can be viewed as a new community drawn out of the larger community. Like the larger community, the new community must have an elder or groups of elders to whom its members must turn when they are in difficulties.44 In this way

---

42 Ibid. 93.
43 Ibid. 2.
44 Ibid. 4.
Berinyuu suggests that pastor(s), may be called the elder(s) of the church of new Christian communities in Africa.

Diviner becomes a favourite name or title for African minister or pastor of the church in Berinyuu’s argument. His defence of pastoral talk or conversation as divination is that “Divination is an ancient practice. The culture of the Bible involved a form of divination. There are several instances in the Bible where divination was used, such as the casting of lots. In some cases it was used as a way of judging the victim or innocent”.  

The difference, between biblical divination and African divination, lies on the intentions and God’s intervention. African indigenous divination or casting lots may call upon the spirits of the living dead, while divination or casting lots in Christian tradition is done calling upon the name of the Lord to find the will of God (Acts 1: 23 – 26). God’s intervention in casting lot in Jonah 1: 7 is clearly seen in the context of the whole book.

2.3.2.5 Christian African pastoral care and counselling

Berinyuu does not accept that a “Christian theology manufactured in some other cultural milieu should fit into an African situation”.  

He is saying that Europe throughout its history built and developed a theology, which they have tested, as they read the Bible in their situation, and found it to be true and relevant.

Though some aspects of Western theology may be true to other cultures, it does not mean that everything from Western theology will fit properly or be relevant to the new situation if the gospel is spread faithfully and effectively. The reason Western theology had to fit in Africa is that the situation of evangelisation in Africa, in the first

45 Ibid. 38.

46 Ibid. 91.
generation from the West, went hand in hand with emancipation or imposition of Western ideology through colonial power.

Today one should expect such a Christian theology and pastoral theology in particular, to be born in Africa. Berinyuu is pointing to this point when he says: “Christian theology should make its claims to African culture”.47

Theology, for Berinyuu, should be contextual. This means that it should be relevant to the context or situation where it is being practiced. “Christian theology is universal only when it can be particular”.48 He made an attempt, in this trans-cultural Christian theology of pastoral care, to incarnate the Word of God in the people of God in Africa. He goes on and writes that in order to make Christian ministry of healing relevant, the approach needs to be “unorthodox.” It is in this approach that he is “presenting Christ in a relevant, contextual and meaningful way to the Christians in their African situation. It is an attempt to translate the gospel of Jesus Christ into African languages, thought forms, concepts ad praxis”.49

Contextualisation of the gospel is important in fleshing out Christ and his ministry in any context. “For Africans to believe and live with Jesus as Lord, especially in times of sickness, does not mean they should be turned into Europeans, Asians or Americans. Instead Jesus comes and enters deeply into the holistic African worldview and ethos.”50 Contextualisation of the good news of Jesus Christ attempts to make the salvation to be “a wholeness of life which includes holistic healing, body, soul and spirit, social redemption and reconciliation.”

---

47 Ibid.
48 Ibid. 92.
49 Ibid. 3.
50 Ibid.
African pastoral care to the sick is a delicate issue. Berinyuu argues for the African view of holistic healing. A patient remains a human being all the time of sickness. A human being in Africa is not separated into parts like soul, body and spirit. A person is a combination of all parts—they are equally important. Hence a patient is not properly treated when only the physical ailment is given medicine. The soul should also be looked at and cared for in order to bring effective healing. African healing is connected with religion. A healer from an African perspective is a religious person because he or she has connection with the ancestors or gods. A traditional healer communicates with his or her ancestors for the cause of sickness and for the right medication.

Berinyuu suggests that a minister in African context should be called a healer to connect healing and religion. Africans do not have a division of a priest and a healer but do distinguish between them. Thus issues like prayer and worship should go hand in hand with medication.

2.3.2.6 Conclusion

Berinyuu’s book is a ground-breaking book which engages directly with the tensions and dialogue between Western psychology and medicine, and African psychology and medicine. It contributes to the African communal pastoral care theme by highlighting many novel and creative images of Jesus as the first ancestor and the minister as a African indigenous healer and is embedded in communal concern. Jesus as the first ancestor should not reduce the deity status of Christ as he has indicated that “I and the Father are one” (John 10: 30 NIV). This is illustrated in the expression of the Triune God as God the Father, God the Son and God the Holy Spirit. Berinyuu’s main concern is the import theology that plant European Churches in Africa. These churches depend on Europe because they were formed from there.
2.3.3 “Pastoral Counselling In Inter-Cultural Perspective”

2.3.3.1 Introduction

Lartey’s contribution is also a valuable asset to communal pastoral care. In this section the author would like to review Lartey’s book, “Pastoral Counselling in Inter-Cultural Perspective.”\textsuperscript{51} He is one of the Africans who are not satisfied with the one-sided emphasis in pastoral theology being a Western individualistic emphasis. The main thesis of his book is to develop an inter-cultural approach to pastoral counselling. An inter-cultural approach is an approach that draws attention to the culture, values, beliefs and views of the people it serves. It is the opposite of using one culture in all people of the world, the super-culture mentality. Though Lartey’s main worry is that pastoral counselling should not ignore other cultures if it has to be done effectively, he also advocates that pastoral theology should use African psychology in pastoral care and counselling.

2.3.3.2 There has been Pastoral counselling in other Cultures

Pastoral counselling from an inter-cultural perspective proposes that there has been pastoral counselling in other cultures long before the West invaded them. This is also true in Africa as Ma Mpolo puts it,

“In the Western sense, pastoral care psychotherapy are relatively new disciplines in Africa. While both were part of the colonial and missionary medical and theological heritage, they have aroused the interests of researchers, governments, and church institutions only within the last twenty years.”\textsuperscript{52}

Lartey has this to say:

“Pastoral care of course, has a long and important history in the various traditions— a history which John McNeill traces from Socrates who wished to be . . . (a healer of the soul) right

\textsuperscript{51} Emmanuel Yartekwei Lartey, \textit{Pastoral Counselling in Inter-Cultural Perspective} (Franfurt am Main. Bern. New York : Verlag Peter Lang, 1987).

down the ages to Otto Rank’s radical revisions of psychoanalysis to affirm ‘the operation of spiritual forces.’”

He goes on to quote Clebsch and Jaekle, commenting on pastoral care in church history. They write that:

“each specific period reveals one or another function, or mode of performing that function to have been practised so pervasively or with such fascination that the era may be characterised by it. In any one era a single pastoral function, healing or sustaining, guiding or reconciling polarised all the others round itself.”

By implication it means that, even in African cultures, in different eras there have been some practices of some medications or rituals to bring healing or sustaining, guiding or reconciling to people.

Thus, traditional Christian theology can be engaged in dialogue with African concepts and symbols of humanity. In the same way Western psychotherapeutic approaches can have a dialogue with the African psychotherapeutic approaches.

The goal of this dialogue is to earth theology. The terms, concepts and practices that are in the indigenous cultures need to be recognised and be “baptised” in the Christian community. Theology in this way is rooted in the indigenous soil. The language used is indigenous. The concept of “baptism” suggests that it needs to be reinterpreted so that it can be understood in biblical sense.

A clear study of African cultures reveals that some concepts and symbols of Africa, though they may have some elements that seriously honour other gods or spirits or ancestors, serve the people and in the last analysis honour the Living

---

53 Ibid. 8.
54 Ibid.
55 Ibid. 10.
56 The biblical sense should not be confused with the Western worldview. The two are not identical at all.
God proclaimed by the Bible. Churches that have let the Christian message talk to their cultures have identified many rituals and worldviews from their traditional cultures that they can continue to use to enhance healing in a new Christian society. African indigenous churches can be cited as an example. Though there are different views on what they do with the Bible and African cultures, they have tried to let the Bible speak to their cultures in such a way that they accommodated the Bible in their cultures and their cultures to the Bible.

Lartey’s thesis tells us that pastoral care and counselling should deal with the African cultures seriously because practising pastoral care and counselling in Africa is dealing with African worldview. African cultures and customs are not just history. They have survived the brutal history of Africa.

“This sociologically and historically speaking, in spite of the colonial experience of depersonalization and cultural invasion, African cultures have, by and large, preserved their vitality. This vitality is expressed in the revival of African languages, dances, music and literature and in Africa’s contribution to human sciences and to the world church.”

Lartey’s conviction and approach is in line with the Pan-African conference of Third World Theologians who met in Accra, Ghana, in December 1977. This conference concludes by saying:

“We believe that African theology must be understood in the context of African life and culture and the creative attempt of African peoples to shape a new future that is different from colonial past and neo-colonial present. The African situation requires a new theological methodology that is different from the approaches of the dominant theologies of the west.”

---


59 Ibid. 13.
Lartey’s conviction is that African theology should be looked at from an African perspective not from a Western perspective. Colonial and neo-colonial eras did not only colonise the people physically, but also spiritually. Africans worship God in the Western way—not in an African way. The judgement that discourages the African way of worship is not based on the Bible but on the Western worldview. The context in which people want to understand African theology is a Western worldview like scientific, civilisation, modernism and others.

2.3.3.3 Human life: Ghanaian and traditional Christianity dialogue

The concept of human life in Ghanaian views among the Ga is under the Supreme Being, the Creator, and under the deities, the immortal gods. Human life is above the animals and plants. “The creative power of the Supreme Being differentiates him (sic) from all other types of being, the immortality of gods distinguished them from all forms of created life, the rationality of human beings differentiates them from animals and plants.”60 Traditional Christianity deals with the same hierarchy in human life. God, the Creator, is addressed as the Father; and people are the children of God. People are also placed in the land to rule over the whole creation—including animals and plants. The Ga concept of human life does not have every detail like the traditional Christianity has, but there are some correspondences like human beings are placed above the animals and plants.

Human beings have a unique dignity, as they are placed above other created beings. This should serve as the bridge of the biblical concept of Imago Dei in which a human

60 Ibid. 25.
being is created as indicated in Genesis 1: 27. The Imago Dei is a symbol of human dignity in Christian theology.\textsuperscript{61} The \textit{Ga} describes a human being as a compound consisting of three constituents which are self, soul, and body.\textsuperscript{62} These three constituents, though distinguished, are not separated. The self, soul and body interact with each other. Thus a person is a whole—the \textit{Ga} has a holistic understanding of a person. Traditional Christianity also describes a human being as holistic, but with compound of body and soul as indicated in creation (Gen. 2: 7). Body and soul are equally important in a way that without one there is no human being. Lartey’s thesis is broad and expansive and it is important to understand his comparisons of the Creator God and peoples.

On another level, it is vital to note that serious dialogue between Western psychotherapy and Ghanaian Christianity can enrich both sides. He gives the example of holism in Gestalt therapy that can enrich and be enriched by Ghanaian holism. He has this to say: “Gestalt therapy’s holism is largely acceptable to and reconcilable with Ghanaian holism. The notions of unity and wholeness within persons, psychosomatic integrity and the body as the true and visible experiences of life, are common to both perspectives.”\textsuperscript{63}

In similar vein he gives another example of dialogue in family therapy with the Ghanaian concept of family. The central affirmation of family therapy is that human beings have capacity and need for relationships.\textsuperscript{64} Family therapy views relationships in a broader perspective. Family therapy can be enriched by family relationships

\textsuperscript{61} Ibid. 59.
\textsuperscript{62} Ibid. 29.
\textsuperscript{63} Ibid. 86 - 87.
\textsuperscript{64} Ibid. 101.
further in Africa as well. In Africa, ancestors are recognised as part of the living community. Ancestors also play a role in pastoral counselling.

Communication is a key to healing pains in all cultures. Other cultures use more rituals in communication than spoken words. “In Ga and Akan life, drumming and dancing are important means of communication.”

Lartey discusses the implication of an inter-cultural approach in pastoral counselling as having three ingredients “which are far-reaching in their effects. The three are psychology, theology and perhaps the most influential, culture.” Culture is explained as “the most influential” ingredient of pastoral counselling. Culture is the praxis in a community. It is the context in which pastoral care is taking place.

Therefore, pastoral counselling should not ignore the context in which it is operating. Thus, pastoral counselling in an inter-cultural perspective warrants that “the importance of worldview dialogue in the task of the theologizing in Africa is brought out in the first part of the work.” The inter-cultural approach to pastoral counselling implies that pastoral counselling will take the shape of the culture where it is operating.

2.3.3.4 Conclusion

Lartey’s book reveals the cry of recognition of Christian counselling based on understanding and dialogue with indigenous cultures. He does not believe that indigenous cultures should be replaced by the Western culture for people to live a Christian life. It is possible to be an African and live a Christian life. The

---

65 Ibid. 109.
66 Ibid. 110.
67 Ibid. 181.
68 Ibid. 183.
69 Ibid. 184.
contextualisation of the gospel is needed for this purpose. He provides a useful comparison and is much in line with the perspective of Berinyuu.

2.3.4 “Pastoral Counselling in South Africa with Special Reference to the Zulu”

2.3.4.1 Introduction

Msomi’s contribution in community pastoral care and counselling is valuable for this thesis. He looks at the Zulu communities. The Zulu people, like the Vhavenda, use the “-ntu” prefix for a human being. This means that the Zulu people and Vhavenda are both of the “Bantu” group. They have many things in common with regard to a person and community. Their communities are communal-oriented. Thus Msomi’s work supports what this thesis wants to look at and develop.

2.3.4.2 Pastoral care and counselling should be contextualised

Msomi is among African theologians who “have a common passion, arguing for the rooting of Christianity or contextualisation on African soil” of theology. He wants theology done in Africa, Pastoral theology, in particular, is to be understood from an African perspective. “This concern has to do with a quest for a liberation of the person himself or herself, 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.”

He wants to indicate that there are models of pastoral care and counselling in the Zulu context or in the culture of the Zulu people. He argues that these models are based on

---


71 The author is using the name Zulu for AmaZulu following Msomi’s book.


73 Ibid.
how the Zulu people believe and live—they are based on an African theology. Msomi says: “African theology brings to the surface ‘bridges’ for pastoral care and counselling. This label refers to those behaviours which must be attended to carefully in order to facilitate care; if neglected, caring would be superficial and irrelevant.”74

2.3.4.3 African pastoral care and counselling is holistic

African theology comprises the whole of life. “Life is not perceived as compartmentalised in body-mind or religious-secular dichotomy. Life is holistic. The person is a unit.”75 Pastoral care and counselling among the Zulus is something one cannot separate from religion. Religion is like a thread that goes through all spheres of life knitting or binding them to one whole. Msomi’s work reveals that this is the case among the Zulu people. Hence, healing in pastoral care and counselling among the Zulu people, plays a central role. Healing simply means to undo what evil has done. Evil brings disorder in people’s relationships and environment. Disease means things are put in disorder. Healing is the restoration of order in all things. Disorder in one aspect affects other aspects. Life is like a chain. Once one piece of a chain is broken, the whole chain is infected or affected. The example is that disorder in a person’s hand affects the whole body and the soul.

2.3.4.4 Pastoral care and counselling can be enriched by looking at how communities care for themselves

The cry for holistic care and counselling is clearly seen in pastoral care and counselling as illustrated in the lives of the Zulu people. It does not work to put an indigenous Zulu person in a narrow worldview. He or she will not feel his or her concerns covered. A traditional doctor covers many spheres of life. “In traditional

74 Ibid. 220.
75 Ibid. 122.
Zulu society, the inyanga fulfils a multi-dimensional role as priest, psychologist, philosopher and general practitioner; he \textit{(sic)} practises the art of healing and has all-encompassing function as an adviser. The Zulu doctor operates in an atmosphere of active involvement with others. The patient is approached within his \textit{(sic)} own cultural milieu."\textsuperscript{76}

The other bridge for pastoral care and counselling in an inter-cultural setting is community and extended family emphasis. Life, for the Africans, is in community. \textquote{African nature cannot take being alive and isolated.}\textsuperscript{77} Isolation is equal to death. Belonging to a community is therapeutic for the Africans. \textquote{This is essential because these patterns of existence are ‘stamped’ in African psyche.}\textsuperscript{78}

Another bridge for pastoral care and counselling is \textquote{the Zulu world-view}. \textquote{The Zulu, for example, have a certain way of interpreting reality and making sense of their being in the world. This will naturally include their values, ideas and beliefs.}\textsuperscript{79}

Msomi says that among the Zulu therapy there is an emphasis on group therapy. In this therapy community plays an important role. For example, \textquote{sickness is not only personal, it can be communal and societal as well.}\textsuperscript{80} This goes with the concept of \textquote{Ubuntu} because \textquote{alienation destroys Ubuntu…}\textsuperscript{81} The Zulu traditionally emphasised relationships in the community, which is an extended family. Thus these emphases are of great use in maintaining a wholesome life.\textsuperscript{82}

\textsuperscript{76} Ibid. 120.
\textsuperscript{77} Ibid. 121.
\textsuperscript{78} Ibid.
\textsuperscript{79} Ibid.
\textsuperscript{80} Ibid. 223.
\textsuperscript{81} Ibid.
\textsuperscript{82} Ibid. 225.
Msomi deals with a training of pastoral counsellors in an African context. He also deals with the development of counselling centres in Africa. He says:

“Among issues raised in some research and pilot projects in pastoral supervision and counselling in the African context are the following: contextualisation, integration, the importance of using African language effectively and creativity, the role of traditional religion in the pastoral ministry, legalistic tendencies in African Christianity, authority, the role of prayer, the role of pastor, understanding of the healing ministry, confrontation and supervision, theology of suffering, the wholeness of life and other issues.”

2.3.4.5 Conclusion

Msomi argues correctly that there are tools for care-giving in all cultures and also in the Zulu culture. Culture has provided with these tools naturally. People’s cultures if looked deeply have “instinctual” pastoral care. Caring for each other is done as part of living.

Msomi’s argument is for a Christian communal pastoral care. The communal pastoral care is not only the African term. It is biblical term like bearing each other’s burden (Galatians 6: 2). The sharing of goods of the Church in Jerusalem is the Christian communal community that does communal pastoral care and counselling.

Msomi’s approach is Christian and dialogical. Christ remains at the centre of pastoral care and counselling. It is not only the traditional culture that needs to help people, but the Bible or Christian tradition has a great role to play. Christianity has lost its message when trapped into individualistic worldview. The care that is clear in Christian teaching was reduced into theory. Msomi wants the dialogue with Zulu culture to enrich the Zulu culture and pastoral care.

---

83 Ibid. 244.
2.3.5 “Community Healing and the Role of Pastoral Care of the Ill and Suffering in Africa”

2.3.5.1 Introduction

Lastly the researcher reviews a recent article, “Community healing and the role of pastoral care of the ill and suffering in Africa”, by Magezi. Magezi’s article is a new attempt, comparable with the current researcher’s thesis, to describe and critique, and also to integrate the African systems of healing with those of the Christian tradition. While both authors argue about similar issues, such as cosmology, resources of African communal care and healing, the integration of the Christian faith and African healing trends, they tend to approach the topic from different angles.

2.3.5.2 Pastoral Communal Care Versus African Communal Care

The researcher of this thesis follows directly from the tradition of Berinyuu, Lartey and Msomi which contends that the African community is a service provider for a process of healing and hence that healing, to be holistic, must be facilitated by the African community and extended family. Further, they argue that African communal healing can be translated into an effective pastoral healing ministry for the church. They argue thus for a critical convergence of African healing resources and Christian healing resources that can aid healing and addressing pain.

Magezi argues against all these opinions and raises a variety of questions about them from his evangelical point of view. He sharply divides pastoral healing, which he sees as spiritual and faithful in the Christian sense, from the healing processes of African communities. He is also concerned that by combining the two views of communal healing, that they may in fact be competing forces in healing and actually

---

84 V. Magezi, “Community healing and the role of pastoral care of ill and suffering in Africa,” In die Scrifig 40 (3) 2006: 505 – 521
85 Ibid. 506 - 507
increase the pain. He highlights further that African communal healing has many negative elements which need to be taken into account. He opposes “romanticised” African healing processes and argues strongly for healing processes from a Christian faith perspective.

2.3.5.3 Pastoral Healing, African Community and Christian Faith Community

Magezi argues that healing goes back to Jesus ministry and cannot be separated from the theological understanding of salvation. Pastoral healing is about salvation and refers to being transformed from a condition of death to life. Soul healing for Magezi is essential to pastoral healing. The context of pastoral healing is the “koinonia” which he describes as the community of faith believers. The goal of healing is to acquire mature faith. The healing process for him is through the “koinonia” to free people to better worship and serve God and become more like the Lord.

Magezi asks how his view of Christian healing differs from that of the African community? Like the current researcher he stresses how life in traditional situations was communal and stresses the possibility of generating solutions as found in community. Magezi then attempts to compare African communal healing versus pastoral faith communal healing. He clearly sees them as competitive rather than easy to integrate. He argues that in fact the extended family and community pressure to conform can work against pastoral or Christian practices of healing. In his opinion these rituals can be contrary to Christian principles of healing and to biblical teaching.

---

86 Ibid. 507
87 Ibid.
88 Ibid., 508
89 Ibid., 509
90 Ibid.
91 Ibid., 510 - 513
92 Ibid., 514
He argues further that it is necessary for the pastoral counsellor to determine the positive and negative effects of a person’s community and remember that pastoral healing is about salvation. He argues that an African person and community should have a culture or worldview “metanoia” or cultural conversion in order to really be involved in pastoral and Christian and spiritual healing. African culture then needs to be transformed in order to receive the benefits of pastoral healing.

His final integration of African communal care and pastoral care of the faith community asserts that salvation and healing in Africa can use Ubuntu but “The challenge, however, lies in confronting someone’s worldview in order to conform to biblical thinking…Should he/she follow the biblical way and go against the community elders, or should he follow the elders and forsake the Christian faith?”

2.3.5.4 Evaluation

The researcher welcomes Magezi’s critical contribution and his desire to clear up and investigate differences between Christian and spiritual care and healing and African traditional communal healing. Magezi is arguing firstly for the communal care of the church community and then looking at aspects of African traditional communal care which could be integrated. The current researcher argues that African traditional communal care can and does enrich Christian communal care in a more equal manner. The church community in fact is an African church community and not just a Western community with a few African members, and this needs to be taken clearly into account by all researchers in this area. Magezi’s article though incisive, does not appear to stress the African nature of the church enough and the closeness of African

93 Ibid., 15
94 Ibid., 17
95 Ibid., 519 - 520
community in general to the church community in particular. The fact that they culturally overlap all the time does not appear to be taken into account adequately in his article. It should be said then that there is no church community that starts in a cultural vacuum. The church operates within a certain environment and culture whether people are aware or not aware of it. It may be the indigenous culture or the missionary’s culture that dominates the church. There is no pastoral care without a cultural orientation.

Secondly, Magezi is concerned by the “constructive and destructive role of the community”. The article focuses on the potential destructive role of the secular community on the Christian community. As noted above, the two communities often overlap greatly in Africa. Christianity has not always done the right thing in Africa nor is it perfect in human form. Conforming to community life occurs in all cultures including the West. Americans attend church and live in a highly secularised and material culture. They appear to conform to both and live easily or uneasily within an integrated American religious culture. Hence both African communal culture and pastoral communal culture can be detrimental to people’s healing. Abuse is not limited to African communal care.


Pastoral care is not a new concept in Africa.\textsuperscript{100} It has been in Africans’ practices long before Western Christianity came to Africa. For example salvation is connected to healing\textsuperscript{101} and the African holistic understanding of healing is open to this point. Care has been in Africa as long as Africans existed in the continent. The “earthing” of the gospel, that this thesis argues for to be practical, implies that people are able to use any pastoral tools in their disposal. One of these pastoral tools is community. “Koinonia” is also not a new concept in Africa. There is fellowship that overlaps between indigenous community and church.

\textbf{2.3.5.5 Conclusion:}

Magezi is finally wrestling with a major problem of many pastoral theologians. He is concerned about the disappearance of community or “\textit{koinonia}” in pastoral care and counselling, which is being replaced by individualistic approach. His article is provocative and worthy of further dialogue and it is clear that his original approach challenges the tradition of Berinyuu, Larney and Msomi in a new way. This researcher remains more with the former than the latter tradition.

\textbf{2.4 EVALUATION OF THE LITERATURE REVIEW}

The researcher concludes this chapter with critical comments regarding the Western books review and the African books review concerning communal pastoral care.\textsuperscript{102} He will then highlight themes which appear to be important to this thesis.

\textsuperscript{100}Abraham Adu Berinyuu, \textit{Pastoral Care to the Sick in Africa: An Approach to Transcultural Pastoral Theology} (New York: Verlag Peter Lang, 1988) 4.
\textsuperscript{102}Hiltner’s conviction is that the task of a theologian or competent pastoral counselor is “is to deal with the Gospel in terms that are relevant to the people in the situation in which they are at the present...
2.4.1 Evaluation of the Western books review

It has been clear that the West is looking for community in pastoral care. The West has been crying for community involvement in pastoral care since the invasion of the individualistic worldview.\textsuperscript{103} There are voices crying for pastoral care that involves the community or the whole church. The books reviewed in this chapter are example of those voices.

The argument is that pastoral care is reduced to counselling or guidance in individualistic settings. Care can no longer be done by any person in the community but by a person who is specialised in that field. Pastoral care is, however, broader than counselling. It includes helping people in other aspects of life, like comforting, healing and reconciling. Thus the whole church community can be of help in pastoral care. They can use what they hear from the sermons, they can also use what they read from the Bible, and they can also read Christian books about pastoral care and attend lay training courses.

Church community can also play an important role in counselling. This implies that in counselling some good advice may be given by both the counsellor and the counselee.

---

\textsuperscript{103} Cf. The individualistic worldview was borrowed: “Admittedly all of the major families of disciples of theological education have at times attempted to accommodate reductionistic historical . . . All have borrowed methodologies . . . from the cultural context . . . But no discipline illustrates this more powerfully, dramatically, tragically, and influentially than does pastoral care.” Oden Thomas C., “Pastoral Care and Unity of Theological Education,” \textit{Theology Today} - VI. 42, No. 1 - April 1985, p. 35.
to one another. Daily, church members also find themselves in a position of counselling. Friends want to discuss a problem. In that setting they reach for some guidance. Part of the guidance might be referral, to the minister, counsellor or therapist. Christian maturity comes from caring and means that a Christian is able to talk to a person who has a problem as a way of bearing each other’s burden.

The Western pastoral theologians, whose books were reviewed in this thesis, view the community in pastoral care as the church community. When they refer to community, they are referring to a church community and not a community in general. Part of the reason is that what the Bible teaches about community and communal living has been swallowed by individualistic persons. The distinction between Christian community and a community in general is very important. Community in general should also learn true love and communal living from this new community founded by Christ.

One principle to be noted and observed from the Western literature review is that community and individual should be balanced. The individual is also important in pastoral care and counselling. It would be a serious mistake to overlook this principle. The rise of individualism was also a reaction of an extreme communalism—where an individual disappears in community, and had no freedom of thinking and or expression of one’s view.

The extreme individualism, on the other hand, has its detrimental effects. Members of a community are not deeply or practically united. They do not share as the principle of individualism encourages them to look at their needs not at others’ needs. The spirit of selfishness is inflamed.

Hence a balance of communal living and individual living is needed. A person should be a person in a community acknowledging that no individual exist without others. Another important principle to be noted and observed from the Western literature is that professionalism should be balanced with charisma. These literature reviews clearly tell us that both professionalism and charisma are needed. It is not healthy to emphasise one aspect at the expense of the other. Profession can also help to build up charisma. Training of pastors is important for pastoral care. It should, however, accommodate charisma.\textsuperscript{105} It is a fact that not all people will go to a theological school, but all can be prepared for the “works of service” (Ephesians 4: 12). People have gifts of ministry, but they need to be developed. The profession can help to release those gifts.

\subsection{2.4.2 Evaluation of the African books review}

African book review has indicated that there is a possibility of African pastoral care and counselling. African cultures still have some anchors in community. There are many people living in two worldviews, African and Western. The Western worldview is coming with full force. Pastoral care should, however, be done in context. It is not healthy to look only at the Western context and give guidance only in Western philosophy in doing pastoral care to African people. The African context should be looked into deeply. Some of the good things from the African context should be taken up for the edification of the

\footnote{\textsuperscript{105} Cf. Wyne Oates, chairman of a Commission on the Ministry sponsored by the New York Academy of Sciences who “advised that the clergy not be encouraged to regard counselling as religious or professional ‘speciality.’” E. Brook Holified, \textit{A History of Pastoral Care in America: From Salvation to self-Realization}, (Nashville: Abingdon Press, second edition 1984) 342.}

The lesson from African book review is that community is important. Communal community is central to African existence. Without community the people would not survive. A community in African context is composed of connected families and community relationships. The African concept of community is summed up in Adeyemo’s words:

“A popular expression which adequately depicts African sense of community life is: ‘I am because we are’ . . . An African is a being-in-community. He (sic) is part of an organic whole . . . Life which has a meaning is that which is lived in the community—not in isolation—and which somehow contributes to the betterment of the community.”

Also the intimate relationship between extended family and community must always be taken into account in the African context.

African book review reveals that family in African perspective is important. African pastoral care values family support and solidarity. African family is not one thing. Members of the family are there for each other. Family members feel the oneness in blood. Each member exists for the benefit of the whole family.

108 Cf. “First, that family is not a single thing, to be captured by a neat verbal formula. Second, many social units can be thought of as ‘more or less’ families, as they are more or less similar to the traditional type of family. Third, much of this graded similarity can be traced to the different kinds of role relations to be found in that traditional unit.” William J. Goode, The Family, (Anglewood Cliffs: Prentice-Hall, Inc., 1982) 9. It is difficult to define what constitutes the family. Cf. Sylvia Viljoen, “Family Structure and Support Network: Situating the Theme Theoretically and Empirically within the South African Context,” in A. F. Steyn (ed.), Human Science Research Council 1987, (Pretoria: Human Science Research Council, 1987) 7.
Family is not limited to a couple and their biological children. Family covers all related by blood and cattle or marriage goods, the living and the dead or children who are not yet born. It should be understood as an extended family. African pastoral care focuses on the role of family in people’s lives.

A faith community should be a new family in the African context. It should be people who are connected to each other in such a way that they form a family. The African extended family lives in unity. Their unity is clearly seen or felt in hard times. When someone dies they come together for comfort, support and burial. The church should not be composed of individuals who are on their own or who do not care for each other but above all are part of a church family.

The African books review has revealed that ancestor worship or veneration should not be ignored in African communal pastoral care and counselling. Worship and / or veneration of ancestors is one of the keys to the understanding African religion. Ancestor belief is placed down in the heart’s basement when people are westernised, even when the westernisation is confused with Christianisation or conversion into Christianity. In hard times it always comes out that some Christians visited a traditional healer or worshipped the spirits of ancestors. They live in two worlds the Western and the African worlds.

---


110 Cf. “Each person was linked through family to others in the village so that, to the West African mind, the village became the family writ large.” Clarence Walker, *Biblical Counseling with Africans-American: Taking Ride in Ethiopian Chariot* (Grand Rapids: Zondervan Publishing House, 1992) 14.

Pastoral care should go deeply into what people fear or dream deep in their heart’s basement. African people respect their dead people. We should distinguish ancestor worship from respecting and honouring the ancestors.\textsuperscript{113} When the ancestors take the place of God, we talk of ancestor worship. Respect means that people recognise that they have ancestors who form part of their history.

The understanding of health and sickness from African perspective will make pastoral care and counselling possible in doing pastoral care and counselling to Africans. African health means the well-being of both the spirit and body—the spiritual and the physical. The spirit and body are not viewed independently from each other, but they are interwoven. If one aspect is not in good order there is no health because the other is affected. Thus, to keep one healthy means to care for one’s environment. The African worldview of care is that a person’s duty is to care for other people and vice versa. There is a total mutual care.

Sickness, in the African worldview, embraces imbalance and requires concern for the whole person and family and community. It is not only the body that gets sick. The sickness of the body makes the soul sick and vice versa. It is not only the individual that gets sick. When one person is sick, the whole community or rather creation is sick. It is clear that it takes the whole community and creation to heal a person.

\section*{2.5 \hspace{1em} CONCLUSION}

This chapter illustrates that, although people have been embracing individualistic approaches in doing pastoral care and counselling, there is a cry for communal

\begin{footnotesize}
\begin{itemize}
\item \textsuperscript{113} Ibid. Note that, “we should strive to differentiate between remembering and worshipping the dead.”
\end{itemize}
\end{footnotesize}
pastoral care and counselling and a conviction that it is possible. Communal pastoral care is needed because there is much lost in the process of isolating people from their families and communities or cultural realities. While the West is deficient in communal care both in church and society, Africa traditionally has excelled at such care. They live as community that cares. However the researcher concludes that it is not an either-or. There should rather be a balance of individual and community care which can bring better personal care.

The next chapter discusses pain from a theological, social, psychological and physical perspective with the purpose of understanding the communal healing of pain.
CHAPTER 3

PAIN: A PHYSICAL, PSYCHOLOGICAL, SOCIAL AND THEOLOGICAL ANALYSIS

“Pain is out of fashion, both in practice and theory, as it never has been in modern times.”

3.1 INTRODUCTION:

The previous chapter has indicated that it is necessary and possible to have practical theology focusing on communal caring for people living with pain. The literature review has clearly indicated this fact. This chapter proceeds to look at pain from physical, mental, social and theological perspectives. These perspectives will be discussed separately but they are not “differentiated” in this thesis. The understandings of pain from all these perspectives influence each other. Practical theology healing pain without taking into account what other disciples are saying about pain has missed a mark. In times of pains, a person needs someone or something to lean on, to talk to, to walk with, to feel with and to team with. Hence, this suggests that pain calls for communal care.

The fact that some people think and feel that pain is out of fashion in modern times should be understood from the fact that nowadays pain is denied and / or cured instantly. Before the discoveries of the present pain blocks, people were used to

---


experience pain, or pain was in fashion. Apart from the medical pain blocks there are psychological and social pain blocks. Hence this study is about healing pain in and through communal pastoral care endeavours. The author intends exploring pain perspectives such as the physical, psychological, social and theological perspectives, which are often the expansions of definitions encountered in the text. Since the author is writing about culturally gifted care and healing of pain, he is going to look at pain critically and culturally.

3.2 DEFINITIONS OF PAIN

Pain and suffering in other areas in this thesis may be used interchangeably because according to the author the concepts are closely related, but pain will be the main focus of the research. Pain will be used with concepts like suffering, hurt, feel badly, etc. The two concepts pain and suffering are distinguished in this thesis, but are not separated.

Pain (vhutungu) is distinguished from suffering (u tambula). The relationship of pain and suffering rests on the fact that pain can cause suffering. Cotterel combined and distinguished the two concepts in this way: “Pain and suffering are, of course, related: pain is the physiological cause of many experiences of suffering. But emotional suffering may have no associated physiological pain; thus suffering is to be distinguished from pain.”3 Pain and suffering are related, hence not separated, but they are not identical.

The author’s understanding is that pain (vhutungu) is, suffering (u tambula) at a deeper level. Pain is part of people’s lives and conditions⁴, but hard to define in a “simple sentence,”⁵ or to define “satisfactorily”.⁶ Suffering is “enduring undesirable pains and experiences.”⁷ The concept of suffering has to do with a duration and process of feeling pain. A person who is physically hurt feels pain. The same applies to a person who hears bad news, for example: the death of a loved one. Pain, however, “is at once and the same time a spiritual, emotional, physical, and mental malaise and condition in which the whole being is traumatized significantly. One is forced to deal with realities that bring new and unwelcome experience that cause pain, raise questions, baffle us, and give us few answers.”⁸ Pain is thus the uneasy state of the whole person due to the uneasiness of spiritual, physio-socio-economic life.

3.3 AN EXPLORATION OF PAIN

The exploration of pain from physical, psychological and sociological perspectives serves to clarify the challenge pastoral care and counselling faces in caring for people in pain.

⁵ Daniel J. Louw, Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling (Frankfurt am Main: Peter Lang, 2000) 9.
3.3.1 An exploration of pain: A physical perspective

A physical perspective can define pain as the disorder of the bodily system. Physical pain is the disorder of the body system—human physiology. Pain, therefore “invariably implies some disturbances of the regular order of the body.” Physiologically, “acute pain starts with the stimulation of one or more of the many special sense receptors, called nociceptors, in the skin or internal organs.” A person feels pain in the whole body even if the pain is in one part of the body it affects the whole body. It is “a basic bodily sensation induced by a noxious stimulus, received by naked nerve endings, characterized by physical discomfort (as pricking, throbbing, or aching), and typically leading to evasive action.” These sense receptors receive information about heat to its intensity, heavy pressure, pricks or cuts, or any bodily damage. There are two types of nerve fibres that are used by the body to carry this information from the nociceptors to the spinal cord. They are: “A-delta fibres”, which transmit information quickly and appear to be responsible for the acute sense of pain; and “C-type fibres”, which transmit impulses more slowly and may cause the nagging sense of pain.

Physical pain affects the body system that is vital for the life of a person. It should be clear that there are physical problems that need to be handled well for good health. Physical “pain may have many causes, including immobility, infections such as

---

12 Ibid.
13 Ibid.
herpes zoster (shingles), swelling of the extremities (caused by Kaposi’s sarcoma or heart problems), headaches (sometimes associated with encephalitis or meningitis), lesions caused by Kaposi’s sarcoma, pain of the oral, rectal or vaginal mucous membranes due to opportunistic infections such as herpes simplex or thrush, muscle aches and surgical wounds, and peripheral neuropathy. . . Depression and anxiety often accompany a patient’s physical pain. Counselling and exploring fears, worries or concerns with the patient may help relieve pain.”14

Pain tells us that there is something wrong in the body. It is the cry of the body that there should be something done to solve the problem. Physical pain is easy to identify. A person can easily identify where the physical pain is located. One can feel pain in a part of the body like the head, stomach, hand, or leg for example. Pain thus tells a story. Pain has a serious message that needs attention. “Pain serves as warning sign; an alerting signal that focuses our attention on the injury or defect.”15 Without pain the infected part of the body will not be identified.

3.3.2 An exploration of pain: A psychological perspective

Pain can be looked at from a psychological perspective. Bodily sensation is connected to mental sensation. These two dimensions—body and mental/mind—are not separated though they can be distinguished as it is done in this section. Pain is a bodily and mental sensation that brings discomfort or suffering in physical and

---

14 This information is adapted from Alta van Dyk, *HIV AIDS Care and Counselling: A Multidisciplinary Approach* (Cape Town: Pearson Education South Africa, 2005) 315.

spiritual dimensions of a person. The Oxford Advanced Dictionary of Current English gives this meaning to pain: Pain is “suffering of mind and body.”

The International Association for the Study of Pain, in 1980, further defines pain as: “unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage.” This definition emphasises the psychological contribution to the experience of pain in people’s lives. It is an “unpleasant sensory and emotional experience.” Pain in this sense excludes animals because it is not yet clear whether an animal’s pain has the psychological dimensions. But with people is it clear because “pain is the single most common complaint for which people visit doctors.”

The word pain also carried the sense of sorrow and bereavement, which is the psychological side of pain. Physical pain also moves beyond the mind to the soul of a person. The soul can be distressed by “anguish of misfortune, death, annoyance, insult, or outrage.” As indicated above that physical and psychological pains are connected, a stressed soul can cause some diseases like heart failure and high blood pressure.

Psychologically, intensity of pain varies from person to person. A person, who is not ready for a painful experience, will suffer more than a person already in a painful

---

17 Daniel J. Louw, Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling (Frankfurt am Main: Peter Lang, 2000) 10.
18 Ibid.
situation. Soldiers in battle may be wounded severely but do not complain of pain because they are ready for pain even to the point of death. The same applies to the athletes who are injured but not experiencing real pain until the contest is over.  

People who are expecting pain feel it differently from people who are not expecting it. On the other hand unexpected pain causes shock, denial and bargaining with the experience. These elements increase the concentration of pain.

Another psychological aspect that reduces or increases the intensity of pain is the duration of pain. People experience pain differently in different situations and circumstances depending on the intensity and duration of pain. It can be easy to endure pain that is intense but brief like the pain when a dentist is taking out a tooth. But the longer the pain endured the more unbearable it would be—like pain of some cancer patients.

The duration of pain is connected to chronic pain. In this condition patients may be complaining of pain for years. The cause of pain may not be organ injury. Researchers have suggested that chronic pain is a behaviour state that is “initiated by a real injury.” In chronic pain, pain has become the disease. Many patients who are in chronic pain depend on strong pain-killers medicines. Chronic pain drives them to a cycle of pain, depression, and inactivity. A number of special clinics have been formed to treat people with chronic pain. These clinics emphasise reduction of dosage

---


and encourage exercise, activity therapy, and “relaxation techniques such as hypnosis and biofeedback,” and “psychological counselling.”

To sum up, psychological pain can also be described as a psychological imbalance. This imbalance acts as a warning signal that tells that all is not well psychologically. It indicates that “a person is in a crisis, and therefore needs help, it can also serve as a mask behind which people may hide their inner brokenness and dislocation.”

3.3.3 An exploration of pain: A sociological perspective

Sociological pain is disorder of social structure. Sociologically pain is caused by and exposed out of “social veins”. “Social veins”, according to the author, are primarily community’s relationships. People are members of one body in a way that one person’s pain also pains others. The death of a member of family or community opens a social vein that lets people feel the emptiness or activates the “anti-social virus” to come into the social life of the people.

A solidarity slogan: “An injury to one is an injury to all!” is the illustration of carrying each other’s pain. People do experience pain when they see or hear of pain in other people’s lives. The pain of a member of a family can be the pain of the whole family. The whole community is affected because they are a community and a society built on the foundation of the family. The sickness of one member in a community is the sickness of the whole community. In Vhavenda traditions there was communal mourning, which is called “tshiila” when a community member died. The communal

mourning is symbolised by abstaining from joyful festivals like dancing and even from ploughing the field for some days.

Sociological pain happens then when the social order is disturbed or changed. Sickness or disaster can cause pain in a community. “Negative attitudes like selfishness, hatred, lust, unresolved conflicts” can bring pain to the community. Lack of love can cause sociological pain. Social rejection can open a wound in a person’s life. People suffering from illnesses, which are stigmatised by society, like HIV and AIDS may “withdraw physical and emotionally from social contact”. This is an example of sociological pain. People in pain may withdraw from society. They want to live alone. The loneliness causes another serious problem because the social interaction is important for people’s well-being.

### 3.4 BIBLICAL AND THEOLOGICAL PERSPECTIVES OF PAIN

Theological pain is separation from God. It is the pain of the emptiness in the heart or to be in darkness as far as the relationship with God implies. Theologically pain comes in people’s lives with the fall into sin of the first people God created. Pain is part of life in this world. People need to endure living though in pain, and persevere faithfully in the Lord’s way as revealed in His Word. The brokenness of this world is

---

24 Ibid.


26 Cf. Daniel J. Louw, *Illness as Crisis and Challenge: Guidelines for Pastoral Care* (Hafway House: Orion, 1994) 10. Note that, “Pastorally speaking, we are healthy when we have a source of faith enabling us to impart meaning to life.”
characterised by pain and suffering. Hence, people experience pain in one way or another in their lives.\textsuperscript{27}

The Bible is the Word of God that was born and developed out of the voices of pains and prayers of pain.\textsuperscript{28} The Old Testament is surrounded by the violence of Egyptian slavery, the Israeli wars with other nations and the Babylonian exile experiences. The New Testament is also surrounded by suffering from the birth to the crucifixion of Christ and also from the birth to the persecution of the New Testament church—the Christians. If people take away pain from the biblical narrative, there is no biblical story. If there is no biblical story of pain, there is no Good News of Christ’s deliverance. The mighty hand of God is seen amidst the pains of His people and the salvation of Christ is His suffering for His people. The author wants to highlight some facts from biblical and theological perspectives to illustrate this truth.

### 3.4.1 Pain in the Old Testament and Judaism

The Old Testament view of pain is holistic in the sense that pain affects both body and soul at the same time. The Old Testament does not define and analyse pain but shows people in pain. People in pain and God’s intervention are narrated in real life stories without analysing the concepts.\textsuperscript{29} Pain in the Old Testament covers body and soul. This is inline with the author is arguing. It is closely to African worldview, which

\textsuperscript{27} Daniel J. Louw, \textit{Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling} (Frankfurt am Main: Peter Lang, 2000) 9.


does not differentiate body and soul or spirit, though distinguishes them. The author thus wants to go a little deeper to look at the biblical pain.

The Old Testament view of pain is focused on the understanding of the Jews. Pain is understood culturally or in context. It is based on the words that Hebrews use to express the concept of pain. In the LXX “λύπη” is the rendering of various Hebrew terms. The “meaning of ‘λύπη’ varies, covering concepts like physical exertion, trouble, pain, sorrow, anxiety, and annoyance.”30 The meaning of pain among the Jews, like in African understanding of pain, implies that a person can say that his or her leg is painful, which will refer to physical pain. A person can again say that his or her soul is painful, which will refer to the psychological pain. The understanding from the context may refer to the family or community suffering pain.

Pain does not exist on its own, without its contrast. A person who experiences pain understands what he or she means by good health. Life is not one-sided like only joy or only pain. Life experiences both sides at the same time. Though they contrast, they complement each other and reveal a whole picture. Pain and health make each other clearer and more meaningful. People are able to tell the difference because they know both sides. Life is full of pains and joys. “Proverbs (14:13) accepts the fact that joy and pain intermingle in human life (cf. Eccl. 3:4).”31

Though pain is narrated in the whole story of the Old Testament, the author singles out the pain in the story of Job in the book of Job, and praise and laments in the book of Psalms to illustrate the biblical and theological pain.

31 Ibid.
3.4.1.1 Pain in the book of Job

The book of Job in general is a book of a family in pain and the family’s interventions with their cultural principles of pastoral care. It contains a painful story. Job, a family member and leader, was suffering from a skin disease which culturally was not accepted (Lev. 13 and 14). The suffering of Job is the suffering of the family and community. The author is arguing this point in this thesis. A person does not suffer or heal pain alone. This is also how indigenous Africans understand pain and healing.

“The prologue and epilogue” of the book tells us about an “upright and God-fearing person and also the richest man in the east” named Job.32 The story depicts that God is in control over everything in heaven and earth. Natural and social phenomena are under God’s ministries. The discussions between God and the prosecutor whose name is Satan reveal that even the calamities of Job were accepted by God to shame the devil. Here the winds, the robbery of his livestock and the death of his children were part of God’s ministries to mould him. In this process Job’s spiritual commitment was tested and found to be genuine. The route of the test was a painful experience for Job. “He lost all he had and was afflicted with a painful and disfigured disease.”33 Everything that surrounded him was taken and / or destroyed but he continued to trust God.34 Job continued to trust in God though suffering all these pains (Job 1: 1 – 2:

33 Ibid.
34 Cf. “… the person injured can, in faith, begin to see the injury or hurt as an asset in his or her spiritual inventory. . . The fire that burned you can be a fire that warms someone else.” Glandion Carley and William Long, Trusting God Again: Regaining Hope After Disappointment and Loss (Downer Grove: InterVersity Press, 1995) 29
10). The end of the story of Job leaves him a more healthy and wealthy person than when the story began.

What is the perspective of pain in the book of Job? The pain of the body affects the soul. In Job 14: 22 the bodily pain flows to the soul: “But his flesh upon him shall have pain, and his soul within him shall mourn.” (KJV)

The meaning of pain in the book of Job is “grief”. Pain (kaw-ab) means to feel pain that is associated with the meaning of grief. Properly this word means “to feel pain; by implication to grieve; figuratively to spoil: - grieving, mar, have pain, makes sad (sore), be sorrowful.” 35 The combination of the bodily and mental pain is also evident in Job 30: 17 where pain is used figuratively: 36 “My bones are pierced in me in the night season: and my sinews take no rest.” (KJV) The combination is strengthened by the purpose of pain in people’s lives: to correct or chasten. Job 33: 19 reveals this: “He is chastened also with pain upon his bed, and the multitude of his bones with strong pain.” (KJV italic mine).

The cause of pain in the book of Job, as depicted by the community, is a particular sin. Pain is depicted as the result of a particular sin. Job’s friends believe that Job committed a sin in secret. Now God is correcting and chastening him. Their problem was that Job claimed to be blameless. His friends persisted in attaching Job’s pain to a particular sin. Job’s counsellors did not believe that a good person could suffer. God would never do that or allow that to happen to his child. The conclusion was that Job might have done some sins in private. Hence he needs to repent so that God may heal him and bring back the joy in his life.

35 Strong’s Hebrew and Greek Dictionaries taken from Strong’s Exhaustive Concordance by James Strong, STD., LL.D. 1890.
36 Ibid.
Drane\textsuperscript{37} sums up the book of Job in the way that it serves to illustrate the pain in Job’s theology. First, the book of Job wants to answer the question: If God rules the world, why do good people suffer so much? Part of the answer is that no suffering comes without the knowledge and permission of God. Every suffering has a purpose. The book of Job has the maturity of Job and shame of the devil as the purpose.

Second, the people’s answer to the problem was easy, and is in fact represented in some other wisdom books like Proverbs. It says that “those who were prosperous must be good, and those who suffered must be evil.”\textsuperscript{38} Practically it was difficult to see this in real life, “especially in the case of a person like Job.”\textsuperscript{39}

Third, Job’s friends did not understand him: The friends of Job were incapable of understanding that, and though they sympathised with Job in his suffering they were quite sure that regardless of what he thought he must have sinned against God and hence he brought his suffering on himself.

Fourth, Job knew his position: Job knew that he had not sinned against God, and was convinced that the simplistic theology of his friends was quite misguided, even though that in itself did not make it any easier for him to see God at work in his own life. He confessed this when he said, “I have searched in the east, but God is not there, nor have I found any trace when I searched in the west” (23:8). But he never abandoned his certainty that, though it may be hard to discern, “God has been at work in the north and the south” (23:9). Indeed, it was worse than just being blind to God’s


\textsuperscript{38} Ibid.

\textsuperscript{39} Ibid.
purpose, for it was God’s very “hiddenness” that mostly concerned Job. He says, “It is God, not the dark, that makes me afraid” (23:17).

Job’s conviction of the cause of pain is God. God gives and takes. In every case the name of God should be praised. He believed that pain is not necessarily connected to a particular sin that he committed. In Job’s case, Job experienced that doing good had evidently led to exactly the opposite outcome. Job’s new experience conflicted with the conventional view of connecting goodness with prosperity, which was so deeply entrenched in the culture. Against this background Job’s friends need to be understood. It is therefore true that the only way his friends could think of to try to help him was by suggesting that maybe he was not as good as he thought he was. They have a question “if Job is good, why would he have suffered at all?” Job knew this to be untrue, and rejected their diagnosis out of hand.40

Job became a new person when he “realised that he could never resolve his own predicament, and was forced to rely on God alone.” 41 The healing of the broken heart came to Job when “God burst into his life and surrounded him once more with constant care and love.” 42 The big question then is not, “Where is God when people suffer?” The big question is, “Do people in pain let God come into their life and be surrounded by His care and love?” This implies a “renewed and constant trust in God.” 43 It is the only way of healing.

42 Ibid.
43 Ibid.
3.4.1.2 Praise and lament in the book of Psalms

Another book that can help people to understand the Old Testament view of pain is the Book of Psalms.\(^{44}\) The Psalms have the Old Testament view of looking at pain. When one suffers pain it is viewed that God’s wrath is being vindicated.\(^{45}\) Pain is perceived as times in which God seems to have no power and take no positive action, which leave people in pessimism and despair.\(^{46}\) The book of Psalms provides a list of fascinating prayers of praise and lament. In praise psalms the people of God praise God’s mighty works, which are accompanied by his great love throughout their history. The praise psalms were used with enthusiasm at the great religious festivals. Israel commemorated historical events by looking back on God’s goodness in their history. Israel as a nation used the memory of these events to celebrate God’s goodness. These Psalms are those “that express a confident, serene settlement of faith issues.”\(^{47}\) This happens because “some things are settled and beyond doubt, so that one does not live and believe in the midst of overwhelming anxiety.”\(^{48}\) These praises are the expressions of the reliability and trustworthiness of God.


\(^{45}\) Cf. “Suffering people's alienation . . . does not only reside in their feeling that they are betrayed by their bodies and communities, but that they are also unsure about the presence and love of a caring God. . . For the Old Testament believers one of the worst things that could happen to a person is that God turns his face away from that person. Especially the Psalms bear witness to this truth. In the New Testament this alienation culminates in the cry of Jesus on the cross: My God, My God why have thou forsaken me? The Heidelberg Catechism defines this alienation as hell.” In Nico Koopman, “Curing or Caring? Theological Comments on Healing,” Religion and Theology, 13/1 (2006), 41.


\(^{48}\) Ibid.
There are many good things happening in people’s lives. People should not close their eyes as if nothing is happening. These psalms teach that people need to shout praises when they experience good things in their lives.

There is another side of the coin to be considered and reckoned with in a similar serious light. “The problem with a hymnody that focuses on equilibrium, coherence, and symmetry is that it may deceive and cover over. Life is not like that. Life is also savagely marked by disequilibrium, incoherence, and unreliable asymmetry.” 49 Hence, lament in Psalms is part of worshipping God the Almighty on equal footing with praise.

Israel’s liturgy is not complete without a lament. Their liturgy was praise and lament.

But for every jubilant psalm there are two or three others in which the worshippers express not joy, but sorrow and dismay. Even those with a quiet confidence in God often recognize that spiritual meaning has to be sought in times of ‘deepest darkness’ (Psalm 23:4), while others complain that life’s realities seem inconsistent with the reports of God’s mighty deeds in the past (Psalm 44). 50

The biblical story is praise and lament. People praise God when His mighty works deliver them from the pain. On the other hand they lament when they are in pain. “The lament, at its heart, is giving voice to the suffering that accompanies deep loss, whatever the loss may be. . . Lament is the languaging of suffering, the voicing of suffering.” 51

49 Ibid.
The author sees a similarity of the view of pain in Psalms and the view of pains in African worldview. Pain does not just come from the nature like from germs and bacteria, but from God. The Africans also believe that the gods or spirits can cause sickness and death. The difference is that Psalms do not talk about witchcraft as the source of pain and sickness.

### 3.4.2 Pain in the New Testament

#### 3.4.2.1 Pain and suffering in Jesus’ life and death

Pain in the New Testament enfolds the pain and suffering of God. It is the pain of God when He incarnates and becomes one with the people. He left His glorious heavenly seat and pitches a tent among the sinful people. He becomes a sinner for His people even though He has no sin in himself. The pain and suffering of Jesus was vicarious. It was done purposefully of the blessing for others. The biblical story is also death and deliverance as found in the New Testament.

One thing that the author thinks that it is easy for the indigenous Africans to accept Jesus Christ is His mission on pain in this world. He came to heal or deliver people from pain and death. Christ did not spiritualise pain and death. He met the sick people and healed them. He met dead people and he brought back life in their body.

The New Testament word that is used to describe the experience of pain and suffering is “οδύνη”. “Οδύνη” has meanings that cover “physical pain” and “mental distress.” The verb “οδύναω” is “‘to cause pain or sorrow,’ passive ‘to feel pain,’ ‘to suffer.’”

---


“Odýnē” is used in the Bible to express deep pain. It is used mainly for the deep grief of the soul (Zech. 12: 10; Is. 38: 15; Amos 8: 10; Prov. 17: 25). Pain in the New Testament does not only refer to physical, but it refers to the mental or soul and spirit. This is the communal understanding of pain. It is not individualistic.

The Greek and Hellenistic view of pain is expressed by a word páschō. Its basic meaning is “to experience something that comes from outside.” Things from outside are believed to be usually bad. A person has to stand firm during pain so that good can prevail.53

Pain had to do with punishment in one way or another. When a person was in pain, it was connected with something wrong which that person had done.54 This was the culture of the people, which was never supported fully by the Bible. What is evident is that, because of the fall or sin in general people would suffer. People need deliverance in the serious note. God sent His Son to this effect.55

The New Testament is composed of the story of pain and suffering. The birth of Jesus was followed by the killing of all two years old boys in Bethlehem and his death on the cross. But, as it was the case in the Old Testament, there is deliverance. Jesus means the “Saviour” who comes to save his people from their sins (Matt. 1: 21). The book of Revelation introduces Christ as the conqueror who will take away pain and suffering (Revelation 21 – 22).

---

53 Ibid.
54 Ibid.
55 Cf. Christ as the Divine Healer as illustrated in these words: “Jesus, as Christ, is the ‘Sine’. His healing is total, encompassing body/spirit, family/community and earth/heaven. . . Those who, through their life and activity, are his disciples partake in Jesus’ medi-sine, the mediation of health to human beings, to other creatures and to the earth itself. Because this is the mediation of life as such, it is also the overcoming of death,” in James R. Cochrane, “Conceptualising Religious Health Assets Redemptively,” Religion and Theology, 13/1, 110.
3.4.2.2  Pain in book of 1 Peter

Peter focuses on the pain of persecution for the Christian community. He tells his readers to accept suffering which is not an easy thing to do (1 Peter 1: 6). Peter teaches that under persecution Christians should be faithful and accept it as part of their lives and their experience (1 Peter 4: 12-18). It is Peter’s conviction that to suffer in the name of Christ is a blessing and the Spirit of God rests upon such a person. A person who suffers because of being a Christian should rejoice and not be ashamed.

The reason for pain and suffering is to demonstrate the genuineness of faith and faithful endurance. Suffering purifies the faith. It makes people to be strong in the Lord. In this sense their faith is renewed.

Salvation does not mean that people are immune to pain and suffering. Jesus also suffered and died even though he knew no sin. Suffering from God’s perspective then continues to give strength and hope to people.

Why should Christians suffer even though Christ has suffered for them and won a great victory? The book of Peter answers this question by putting pain of Christians in a new context. In Peter, the meaning of suffering has changed because it is seen from the vicarious suffering of Christ. Suffering is viewed as a continuation of Jesus’ life on earth through us. It is something to be rejoiced in because it means to participate in the suffering of Christ. In Peter the suffering is for the sake of Christ.

---


Suffering shapes and equips Christians. God’s strength is with us when we suffer. Christians need encouragement to continue doing their Christian responsibilities, even through suffering (1 Peter 4: 12-19). Hence the major themes of 1 Peter are submission, suffering, blessing and joy.\(^{59}\)

The suffering of a Christian for being faithful in following Christ is the suffering of the whole Christian community. The communal understanding of pain is made clear in the book of 1 Peter. Christians are encouraged to endure suffering for the sake of Christ. The promise to those who endure is blessings and joy.

### 3.5 HEALING OF PAIN:

True happiness comes from the healing of pain.\(^{60}\) There is a way to cope with pain. Lamenting is one way depicted in the Bible in dealing with pain. “Whether or not humans can find answers to their questions about suffering, they still need some ways to cope with the immediate experience.”\(^{61}\) People in pain would like to have God or any powerful being to deliver them from pain once and for all. They bargain with God for the healing and coping mechanisms.

“...The biblical laments provide some help, not with the ‘why’ questions, but with the ‘how’ questions. How can one survive? How can one get through the long nights of pain, the months of loneliness without the loved one, the weeks and months when despair hangs like a heavy weight around one’s neck? ‘How long, O Lord?’”\(^{62}\)

Biblical lament is a strong plea for help. It is a struggle to find God’s mercy and grace. Lament is a fight with God. It is a cry that says, “How long must I wait? Oh

---


\(^{60}\) Ibid.


\(^{62}\) Ibid.
Lord”. The liturgical prayers of Israel had the functions of “rehabilitation and restoration.”

Lament teaches one to talk to God in tears. God does talk to His people in anger when they have committed sins. In lament there is that role reversal. Here a person talks to God in anger, asking God the “how?” and the “how long?” questions. “The laments (e.g., Psalms 3; 5; 10; 17; 38) provide a biblical resource that helps sufferers to keep praying to God even when they are angry with God, doubtful of God’s good intentions, uncertain even where God might be found. They give them permission to express negative emotions without fear of reprisal from God.”

Talking to God in pain may result in strong language to God, after which repentance may be required by the ever-loving Father.

Pain can also be healed by reminding the person of history. The way our forefathers lived and passed the route of pain brings healing to the people today.

“They remove the isolation, letting people know that others who have travelled this way before, even great heroes of the faith like David and Jeremiah, have had thoughts and feelings similar to their own. They are not the only ones who have ever lived who have felt like this. Perhaps they are not losing their minds or their faith.”

The liberating hope comes in looking to the hand of God for those in pain. God is still the same.

The understanding of healing in the Bible is that it is a blessing from the Lord. Health depends on God not on people. People go to God in prayers for good health. The author reads the African worldview understanding. The headache does not heal

---

64 Ibid.
65 Ibid.
without the intervention of the supernatural power. The healing does not depend on the medicine but on God.

3.6 THE MEANING OF PAIN AND SUFFERING:

3.6.1 Introduction:

In this section the author presents a critique and overview of a book of Louw titled, “Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling”. The author is looking at this book for three reasons. Firstly, the book deals with pain, though from the broader perspective of suffering. Secondly, the book looks at suffering from a “Reformational” perspective. The author of this thesis is from the African and Reformed background. Thirdly, the book has a South African flavour as Louw struggles to earth Practical theology and pastoral care and counselling to African soil. Louw is also one of the practical theologians who feel that there is richness in communal care.

Does pain have meaning in people’s lives? Why do people suffer in their lives? These are the critical questions in the people’s lives and the people living in pain in particular. Louw has a passion to find the meaning of suffering to the people living in pain. Against today’s culture of avoiding pain in the name of Christ, avoiding biblical teaching like the providence of God and predestination and human history, Louw gets into them, looking at the meaning of suffering.

The purpose of Louw’s book is to answer these questions on meaning, with the purpose to understand the meaning of life in suffering. The meaning question in the

---

66 Daniel J. Louw, Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling (Frankfurt am Main: Peter Lang, 2000).
book is stated as being, “Who am I and what do I strive for?” Here it becomes clear that the meaning of life is “related to our goals, objectives and achievements. It reveals the character and nature of daily existence and determines the quality of human behaviour. It challenges our belief system and exposes Christians to an understanding and portrayal of God and their expectations and reasons for faith.”

The meaning of life in pain and suffering is possible when the goals, objectives and achievements of life are in place.

The danger in answering these meaning questions is to push for a “god of the gaps”. To push God aside is to find control of suffering and fill the gaps with technological, pharmaceutical and medical achievements.

Suffering in Louw’s book covers the whole person—physical, social, economical, political, spiritual and emotional. When one aspect is feeling pain other aspects are affected.

### 3.6.2 The meaning of suffering

Is there meaning in suffering? Why is there suffering anyway? The purpose of Louw’s book is to understand pain and suffering for the sake of being able to do pastoral care. There are mainly two ways of searching for the meaning of pain and suffering. They are lament and theodicy.

**Lament:** Lament is crying for help from God mourning for the pain. Lament is confronting God in looking for the meaning of suffering. It is the search for the meaning of suffering because through it the righteous people struggle to express to

---

67 Ibid. 1.

68 Cf. section 4.4.1.2 in this chapter on Praise and Lament in Psalms.
God their experience of the injustice of suffering.\textsuperscript{69} Lament simply means that the people of God are saying that they do not understand God standing aloof while they are suffering. They want God to answer the question “why?” because they trust Him, and from Him alone they will have the answer. Hence the lament accuses God of not being fair. It does this because there is no one to be blamed or who is responsible. Lament is rich in faith and hope in that God is the only one to deliver. There is no one to help because God is the only God who is alive. Complaint is based on hopelessness, while the lament is based on hope and trust that God will act soon. Lament even urges God to act soon, because there is none to rise and deliver. Lamentation is done day and night. It is done many times because of faith and trust in the Lord. In fact, lamentation says there is nowhere to go because there is no other God apart from the Lord. In that exercise of lamentation the meaning of suffering is vindicated.\textsuperscript{70}

\textbf{Theodicy}: Theodicy, though it is not a biblical term, is the way to justify God in the injustice of suffering and stop to lament.\textsuperscript{71} It opposes lamentation. While lamentation says that, “No, God, You can’t let me suffer! You can’t let your child suffer!” theodicy says that, “Yes, You are justified to let me, your child, suffer this way!” Theodicy is a compound of two words: God (theos) and justice (dike). It is used in justifying God in the existence of evil prevailing in the lives of the people and creation. Theodicy justifies that God is omnipotent and omnibenevolent while evil is

\begin{flushleft}
\textsuperscript{69} Daniel J. Louw, \textit{Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling} (Frankfurt am Main: Peter Lang, 2000) 21.


\end{flushleft}
still real. “Therefore, theodicy is an attempt to reconcile belief in the goodness and power of God with the fact of evil in the world.”\textsuperscript{72} God’s power does both good and evil. Theodicy is a theory that holds simultaneously a belief in the omnipotence and omnibenevolence of God existing together with evil as real, without contradiction. The facts of theodicy cannot be denied. “Anyone who has any interest in religion as an issue of life and death is inevitably in theodicy.”\textsuperscript{73}

### 3.6.3 Where is God while people are in pain?

Theodicy asks about the place of God in pain. Is He inside or outside the pain? Is God both in and out at the same time? These questions tell that people do not only understand pain physically, they also understand and suffer pain theologically. Pain and suffering are also theological issues.\textsuperscript{74} Suffering can affect a person’s relationship with God. It can, depending on a person and the circumstances, let people see the grace and love of God or let the people question the existence and fairness of God. Suffering and pain may teach people to understand the love of God in enduring the pain. On the other side of the same coin it can make people hate God. The hate can be in the form of doubting God’s existence and love; it can also be in the form of despair and anxiety. A person may have many questions without answer. The forms of these questions are: If God really exists, why this pain? Why the suffering? Why the problems? Why are the people dying of the incurable disease called AIDS?

\textsuperscript{72} Daniel J. Louw, \textit{Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling} (Frankfurt am Main: Peter Lang, 2000) 25.

\textsuperscript{73} Ibid.

\textsuperscript{74} Ibid. 11.
The theological question for people in pain is: “Where is God when people are suffering?” “The question of suffering is of extreme importance for a pastor who is involved in caring for people in distress. The ramifications of suffering are such that they affect one’s total existence and one’s search for meaning.”75

3.6.4 Is suffering the will of God?

There are two answers to this big question. They are the exclusive and the inclusive arguments.

3.6.4.1 The inclusive argument:

In this argument, the following presuppositions which include God in pain are important to be noted.

The first presupposition is that, “pain is the will of God in this fallen creation.” The inclusive argument argues that pain is the will of God. The argument goes to the extent of saying that evil is the will of God or the existence of evil is the will of God. In this approach theologians try to connect God to evil with the view that God is all-powerful. Thus there is nothing that happens which is not linked to the will and providence of God.76 The principle of this belief is: God is omnipotent, so there is nothing on earth and under the heavens that can happen without God’s will and permission. God safeguards his omnipotence so that that nothing on earth could happen without his permission. “If suffering could be viewed as an exponent and manifestation of evil, i.e. of the disruption of our fundamental relationships, the threat

75 Ibid.
76 Ibid. 28.
of chaos and disobedience to God’s law and plan for human life, then, (and this is the argument) evil cannot be an entity apart from his sovereignty.\footnote{Ibid. 28.}

God has all power in His hand. There is nothing impossible for him. He is also a benevolent God. He wants to do good things all the time.\footnote{J. R. Illingworth, “The Problem of Pain,” in Charles Core (ed.), Lux Mudi: A series in the Religion of the Incarnation, Third Edition, (London: John Murray, 1890) 1.} He changes evil to good for his children. Pain is part of evil things. It does not exist apart from the sovereignty of God. After the fall God ordained pain in labour and giving birth.

The reasons for this argument are:\footnote{Ibid. 29 – 31.} (a). Suffering and evil as punishment for sin: Suffering is linked to punishment and wrath of God.\footnote{Cf. T. R. McNeal, “Suffering,” in Parsons Technology: Holman Bible Dictionary, (1981 - 1995 Microsoft Corporation).} (b). Suffering and evil as way of purification or discipline: Suffering as a means to a higher end within a process of development or evolution. (c). Suffering and evil as part of life in this imperfect creation: Suffering and the imperfection of creation under God’s permission.\footnote{Cf. “Another variation of this biblical understanding of suffering is the idea that a person’s own suffering is of benefit to him or her. Many have attested that they are better people after being tested by the fires of adversity. Eliphaz (Job 5:17) and Elihu (Job 33:15-18; 36:8-12) suggest this possibility to Job.” In Achtemeier, P. J., Harper & Row, P., & Society of Biblical Literature. 1985. Harper's Bible dictionary. Includes index. (1st ed.). Harper & Row: San Francisco} The second presupposition is that, “God is in control of the pain of His creation.” Pain should be separated from a particular sin. The Catechism of Heidelberg (Question 27)

Q. What do you understand by the providence of God?  
A. God’s providence is His almighty and ever present power \cite{Jer. 23:23-24; Act. 17:24-28} whereby, as with His hand, He still upholds heaven and earth and all creatures,\cite{Heb. 1:3} and so governs them so that leaf and blade, rain and drought, fruitful and barren years, food and drink, health and sickness, riches and poverty \cite{Jer. 5:24; Act. 14:15-17; John. 9:3; Pro. 22:2} indeed, all things, come not by chance \cite{Pro. 16:33} but by His fatherly hand \cite{Matt. 10:29}.\footnote{Cf. \textit{This we Believe thus we Confess} (Johannesburg: The Andrew Murray Congregation of the Dutch Reformed Church) 26.} 

Many people do not believe that God is still upholding heaven and earth and all creatures because there are events, which they do not want in their lives. Events like drought, barren years, sickness and poverty are always excluded from God’s intervention. The belief in God’s exclusion here makes lament a painful moment. Inclusion belief, on the other hand, makes pain part of life, which God has given. 

The benefit of knowing that God as the Creator and Upholder of His creation by His providence is that people be patient in days of pain. Patience has to do with endurance in faith and hope even when things are not as good as expected. Louw argues that Calvin links faith and hope in dealing with pain and suffering.\footnote{Daniel J. Louw, \textit{Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling} (Frankfurt am Main: Peter Lang, 2000) 122.} Christians’ hope is not a vague longing, but is based on the true promises of God, which are vindicated by Christ the Mediator of the covenant of grace. Hope unlocks the future.
Pain does not take the people away from God, but it takes them up to God. Faith and hope make people able to face the mountain before them because they believe that beyond the mountain there is something good. Facing the mountain implies the belief that God can change a bad scenario to a good scenario. Pain is the absence of joy, though pain makes joy meaningful or enjoyable. In short, God does intervene in human suffering.

The belief in God’s providence gives new hope in the midst of pains and all troubles because God does not leave things to chance. The biblical view of providence is that things are not left to work on their own, God is driving. “The God of creation is the God of providence. For the Maker of the universe never deserts the works of his hands (Ps. 138:8).” Providence means that nothing happens on the universe without God’s care. “Moment by moment every force in the universe and every spark of life in the world is upheld by the everlasting arms of our Father.”

In the Reformed tradition it is believed that suffering for God’s children is part of God’s providence.

“Firstly, we must seek an answer to: ‘Where is God in suffering and how does He provide?’ within the communion between Christ and the church. The church is the true arena of God’s compassionate acts, the particular showpiece of his providence. Berkhof (1973:434) formulates it thus: the congregation is the first fruits or ‘experimental garden’ of God’s intentions for a new humanity. As Lord of his church, God is also Lord of the world. He therefore guides and directs events in nature and history in order to preserve and guide the

---


89 Ibid. 81.
church towards ultimate glory. Therefore, Calvin is convinced that the church is the place where, by faith, God’s providence is recognized and confessed.\textsuperscript{90}

The third presupposition is that, “God plans evil for His people.” This is the extreme view of the inclusive approach. The extreme view of the inclusive approach would imply that God plans evil for His people.\textsuperscript{91} It goes on to say God loves and enjoys it when His people are in pain. It goes on to say that pain is the will of God. However, God does not love evil. He hates it. Thus He suffers pain when He sees evil. Fighting against pain is not fighting God.\textsuperscript{92} The argument of the inclusive approach is that God is powerful in such a way that He puts the devil to shame by bringing good out of the evil or pain.

\textbf{3.6.4.2 The exclusive argument}

The exclusive argument has the following presuppositions that are important to be noted.

The first presupposition is that, “God cannot be included in the pain of His creation.”

An exclusive approach is the reaction to an inclusive approach. They feel that God is not pictured fairly in an inclusive approach. God is good, thus He cannot be included in the pain of his creation. They stress God’s compassion and love. Hence they speak of the suffering God. God’s suffering is his protesting way against pain and suffering.

\textsuperscript{90} Daniel J. Louw, \textit{Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling} (Frankfurt am Main: Peter Lang, 2000) 122 – 123.

\textsuperscript{91} Although suffering is by definition a very undesirable experience, it may lead to some greater good. As terrible as it seems at the time, one may look back on it from a distance and realise that some good has come from it. Many have found this to be a helpful way to find meaning in their suffering. It avoids preoccupation with suffering as punishment, with God as the Judge, and turns the sufferer toward the future and the possibilities that God will work something good from what seems so bad. In Achtemeier, P. J., Harper & Row, P., & Society of Biblical Literature. 1985. \textit{Harper's Bible dictionary}. Includes index. (1st ed.). Harper & Row: San Francisco.

God’s identification with pain and suffering shows that He is not the cause of pain and suffering.  

The ground of the exclusive approach is that the exclusive argument is grounded on the theory that says, “Pain is not the will of God.” This approach views no relationship between evil and God. Some people call it the “theopaschitic approach”. God, in this approach, does not will evil, though He suffers under evil as a way, which makes him display his compassion. The suffering of God under evil displays his solidarity with his suffering creation. This is fully displayed in the cross of Christ. God identifies with suffering and is not apathetic towards it. In this sympathetic involvement with suffering, God shows his compassion, thereby proclaiming that suffering is directly opposed to his will.

The second presupposition is that, “the exclusive argument is generally accepted.” Many people, including Christians, accept the argument that suffering is not the will of God. In fact some converted to Christianity with anticipation of ending their pain and suffering. It is argued that the inclusive argument cannot be accepted because God’s suffering shows that He is weak, vulnerable and powerless in this world. People believe in God because He is powerful and will destroy evil, and in fact in Christ that He has already conquered evil.

The proponents of the theopaschitism approach include (a). Bonnhoeffer (1970) who argues that God’s suffering reveals the weakness of God. (b). Solle (1973) who argues that the theopaschitic approach reveals that God is powerless. (c) Jungel (1967) who

---

93 Daniel J. Louw, Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling (Frankfurt am Main: Peter Lang, 2000) 28.
94 Ibid. 33.
95 Ibid.
96 Ibid. 34
argues that the theopaschitic approach tells that God is not complete, He is being an event of becoming. (d). Moltmann (1972) who argues that the theopaschitic approach reveals God’s forsakenness. (e). Berkhof (1973) and Wiersing (1972), who argue that the theopaschitic approach shows God’s defencelessness. 97 The theopaschitic approach says that God can be linked to suffering as a passionate partner. God is saying that His people should not suffer pain.

People’s responsibility in saying “no to evil” is placed in what is called “doing theodicy”. In this action God’s pathos is proved by human and moral acts. When there is injustice in society and a political system people have to say no to evil. “This approach shifts the theodicy question away from God’s no to evil, towards humankind’s no to evil, injustice and social suffering. 98 Evil beyond humankind’s control are under God’s no evil.

The third presupposition is that, “God does not punish people.” The extreme exclusive view may reject God’s punishment in this life and after death or eternity. It may sound like God’s compassion does not care when people continue in their sins. It is true that God is compassionate, but it is true that He puts people in pain in order to be compassionate when they repent. God’s dealing with the people of Israel is full of the compassion and judgement using painful means.

3.6.4.3 The balance of exclusive and inclusive arguments:

The balance of these true approaches brings a better picture and answer of God’s position when people are suffering. It is true that God is compassionate but his compassion has blood as seen in the Old Testament sacrifices, which are the shadow of the sacrifice of His Son, Jesus Christ, on the cross. The blood is a sign of pain. At

97 Ibid.

98 Ibid. 35.
the beginning the blood of animals was poured out and at the end the blood of His Son was poured out. This is done on the behalf of the people. People without share in the blood of Christ will face the pain of God’s judgement. In people’s suffering it is strange to say that it is the will of God that they suffer. God is the Healer—He cannot fight Himself. The balance can be that God permits pain. He does not send pain but allows the evil one to send it.99

The cross or crucifixion is the balance of God’s inclusiveness and exclusiveness arguments. God loved the world so much that he gave His Son to die to save everyone who believes. The balance of the cross means, however, that Christ died on the cross for his people.100 The cross continues to work in his people because they are still sinners.101 A theology of the cross reframes our understanding of God. God’s love and justice are intermingled.102 A theology of the cross finally prevents our theology from making a romantic caricature of God and his love and our suffering and joy.

100 Daniel J. Louw, Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling (Frankfurt am Main: Peter Lang, 2000) 112 - 116.
101 Cf. “All are vulnerable to the possibility of suffering in their lives. The mere fact of being human and living in a world where people hurt each other and themselves can account for much of what is called suffering.” In P. J. Achtemeier, Harper & Row, P., & Society of Biblical Literature. 1985. Harper's Bible dictionary. Includes index. (1st ed.). Harper & Row: San Francisco
102 Cf. “Pain alternates with joy (hēdonē) in the Greek view of things. There is a natural desire to live without it, yet life in mere hēdonē would be vegetating. The things that bring joy also bring pain (e.g., children). We also bring sorrow on ourselves by our deeds. Carousing offers brief hēdonai and many lýpai. 3. Dealing with lýpē only in relation to hēdonē, philosophy sees that there can be no hēdonē without it. Plato thinks hēdonai and lýpai belong to the lower part of the soul but differentiates true and spiritual hēdonai from others. Yet even here there is the possibility of deception by a false evaluation of things or by trying to have joy by the concealment of pain. True hēdonē comes with the perception of goodness, truth, and beauty. But this poses a limitation for lýpē and raises the question of its purpose.” In G. Kittel, G. Friedrich, & G.W. Bromiley,1995, c1985. Theological dictionary of the New Testament. Translation of: Theologisches Wörterbuch zum Neuen Testament. W.B. Eerdmans: Grand Rapids, Mich.
3.6.5 Does God still love people in pain?

The clear character of God is that “God is Love” in whatever circumstances (1 John 4: 16). Love, in general, means happiness and peace. No one can reconcile love and pain in human knowledge and reasoning. Humanly speaking, pain can be reconciled with hatred and enmity, but not with love. This understanding has blinded people’s eyes in discipline. God’s love and pain can be seen in discipline (Hebrews 12: 4 – 11). The purpose of discipline is correction and joy, it is not hatred.

However, God is the first to announce pain in childbirth and in the suffering of nature (Genesis 3: 1 – 19 and Romans 8: 18 – 23). The disobedience of Adam and Eve, in the Garden of Eden, brought this calamity (Genesis 3). People will live in pain in this world. The earth is also cursed. The anger and wrath of God that Bible readers read of in plain words everywhere in the Bible make us to realise that a capacity for righteous anger is involved in true love. Human guilt and divine wrath cannot be separated in human suffering. “Is there in God anything in any wise corresponding to the pain of Cross and Passion? Many people would say, No; pain only belongs to multiform and complex, and imperfectly unified and therefore jarring human venture, God is perfectly simple, and therefore purely happy without alloy of pain.”

God’s love is vindicated in sending His only Son, Christ. Christ came because of sin in the world, which results in pain. God inserted the cross in the midst of pain. He came and took the place of people and suffering for them so that when they believe in Him they are delivered from pain as a symbol of the everlasting pain. God reconciles pain and love, while people, in most cases, distance pain from God.

3.6.6 God is the source of both joy and pain

It should not be interpreted that the way to joy is through suffering. Suffering should always be identified with the fall. Christian joy is joy despite suffering. God is love. But there are biblical records that indicate that this God of Love is the source of all pain and suffering due to the fall of people. God is therefore the source of both joy and pain. God did not only announce the entrance of pain in the world and to the human race in particular, He also announced heaven or the new earth “in which there is no more pain, no cry, and in which nature gives abundantly of its fruits (Rev. 21: 1–4; 22: 1–5).” Hence, both praises and lamentation shadow the Christian liturgy.

3.6.7 Pain as an instrument of God’s blessing

All things from God give blessing to His children. This includes pain in the lives of God’s children. God’s providence, as noted previously, is that God does not programme things in life in such a way that they move by themselves. He is involved in events on earth and in heaven in such a way that all things come from the loving hand of the Father.

The knowledge and acceptance of the truth of the providence of God, benefits a believer both in happy days and in painful days. In days of pain people who hold this view will be patient. During prosperity this truth (faith) teaches people to be thankful. It teaches us to have hope for the future because there is no creature that can separate God’s people from His love.

Hence, knowing that there is the providence of the ever-loving and faithful God gives patience when things are going against us, and thankfulness when things go in our favour. This knowledge fulfils the positive effect of pain discussed by Louw discussing “illness as an opportunity for growth.” It makes one face pain as a “challenge” of growth. The destructive effects of pain like despair and loss of all vision are suppressed by this knowledge.

3.7 CONCLUSION

This chapter has identified some main features of pain from physical, psychological, social, and theological perspectives. The thesis distinguishes these perspective for clarity, but they work in unity. The unity means that healing should not only look at the injured perspective because all perspective is affected.

It can be stated without doubt that there is a theology of pain infiltrating through physical, socio-politico-economic life. People have beliefs about the pain they are suffering. Their belief gives them an answer of the question, “Where is God when I am feeling pain?” They respond to their pain according to these beliefs. They touch the physical and spiritual realms of life. Biblical people responded to pain in

---

accordance with their faith in God and pain. The way people respond to pain is in accordance with their faith in God in relation to pain.\textsuperscript{108}

The following diagram can illustrate how faith in God infiltrates life:

![Diagram 5: Faith or belief infiltrates other life perspectives](image)

The next chapter looks at how Vhavenda people view pain. It looks at pain in the Vhavenda’s cosmology and communalism.

\textsuperscript{108} Cf. Churches that have special services for the sick are attracting many people to their membership. Cf. N.P. Phaswana, Justification by Faith or Justification by Grace? A Study of Faith and Social Engagement in Luther and Lutheranism, (Pretoria: UNISA, 2000), p. 219.
CHAPTER 4
VHAVENDA COSMOLOGY AND COMMUNAL CARE

4.1. INTRODUCTION

The previous chapter has argued that there is a need of approaching pastoral care and counselling from a communal perspective. The need of communal pastoral care is global. Communal pastoral care and counselling, calls Christians to join hands, in helping a person in pain.

A communal expression “Munwe muthihi a u tusi mathuthu”, translated as, “one finger cannot take out cooked maize grains”, is relevant here. A person with one finger will find it difficult to do the work; hence other fingers will help.

The present chapter shows the reality of communal pastoral care and counselling by looking at the cosmology of the Vhavenda. A care-giver cannot care for the Vhavenda properly if he or she does not know and respect their cosmology. The general principle is that a person gives relevant care by knowing the cosmology of people receiving that care. The proper understanding and acknowledgement of people’s cosmology help to care for their pains. The Vhavenda practise communal care, which has helped them for many years. A care-giver should avoid the temptation of saying the traditionally gifted care-givers are undeveloped or pre-scientific. Hence Vhavenda communal care is looked at critically but positively to find out what must be retained for good pastoral care and counselling.

People do not react to pain in a cultural or contextual vacuum, they react to it according to their understanding of it and how the God they believe in and other
people around them view it. If their worldview has a mighty God who controls pain, they react to it leaning on Him and if there are people who control pain, they react to it leaning on them.

4.2. A VHAVENDA COSMOLOGY

4.2.1 Worldview and cosmology: beliefs have consequences

Communal pastoral care among the Vhevenda can be understood from the background of their cosmology. Ma Mpolo describes African cosmology in this way: “African cosmology is perceived and lived as one composed of seen and the unseen spirit beings. They constitute life-force which constantly interact with, and thus influence, the course of human life for good or for bad. The departed ancestors are of this constellation of the living spirits.”¹

People do things in certain ways from the richness of their beliefs. Beliefs have consequences. People behave and do things from the background of what they believe about their origin, present, future and things around them. Belief in the existence of God or any deity plays a role for people to understand pain. This is also the case in cultures of Africa.

Africans understand pain in relation to God or deity. People’s beliefs create their worldviews. A worldview is just like a pair of glasses through which one sees, understands and interprets things. It is created over a period of time and passed from parents to children. Over a period of years it may be reshaped or changed to fit the

new settings. People with different worldviews are like people wearing different glasses on their eyes. They see things according to the colour of their glasses.

The above point is also the author’s conviction. He will look, therefore, at the Vhavenda cosmology to see how it influenced and it is still influencing their treatment of pain. Cosmology is the collection of people’s beliefs and living those beliefs for many generations. There are theories that the Vhavenda had contacts with many people who in one way or another influenced their cosmology. It is believed that they migrated from as far as Egypt down to the Sub-Sahara. Some hold the opinion that they moved from Central Africa or the Great Lakes area. Vhavenda like any people could not act above or contrary to their cosmology. Thus pain should be understood and treated according to the cosmology held. The environment, culture and God around the people have much to say of their experience of pain and healing. This makes this review of Vhavenda cosmology very important in this thesis.

4.2.2 Some important features and functions of the worldview

A common worldview cannot be overemphasised among a people. Khorommbi mentions the functions of people’s worldview as embracing further characteristics like:

i. They tell and explain to that group of people how and why things appear the way they are and should be done in particular ways. A

---


worldview “explains and interprets man’s environment.” It depends on the glasses through which you view them. If you have red glasses, the world around you is red and you will probably explain it that way.

ii. They serve as an evaluation measure. Values and goals of a society are measured by their worldviews. Things that do not fit in the existing worldview are judged wrong and rejected. Usually people wear one pair of glasses. This makes their judgement strict because they have a narrow view of things. It is in the process of enculturation that they test encounter and test another type of glasses and assimilate some of the elements from the new glasses into the old glasses.

iii. They give people a “psychological reinforcement”. People come to a point of identifying themselves in that way—different from other people who have different worldviews.

iv. They integrate people. People are connected or bound together by what they believe or the way they see the world before them. Worldview is like a web of strings around the people. If the worldview is broken the people are also broken—the webs of strings are broken. The Tower of Babel could be built up as long as people have one vision or language. When the language was confused, the work stopped (Genesis 11: 1 – 9).

v. They serve in governing “the adaptational level of the people” New cultures are not just swallowed without thorough chewing. The teeth to chew a new culture are the worldview.

---

These functions of people’s worldviews explain why it is necessary to have a general view of Vhavenda cosmology. It is true that God left His seed of love and care in people’s lives. However, they do that differently according to their worldviews. Worldview answers unanswered questions about the origin of things and their ends.6

4.2.3 Cosmology is life among the Vhavenda

The issue which can disturb people from outside is that Vhavenda cosmology, and of course, all African cultures, it is part of life. They live it. Vhavenda do not talk about their cosmology, but they live it.7 This often confused foreign researchers.8 It is true that the Vhavenda worldview is a logically integrated whole. The integration is in the sense that things in life are not in separated compartments but work together. People from the West—where there is no integration of life when studying African cultures “are prone to arrive at an erroneous conclusion,”9 that says that African cultures are blended with no distinction of elements.

However, it is not true that in African cultures “no distinction can be made between sacred and secular, between natural and supernatural, for nature, man and the unseen, are unseparably in one another in a total community.”10 This conclusion is erroneous because there are links in the cosmos, which make up this logical whole.

---


8 Cf. Ibid., 3. Van Rooy used Taylor’s observation.


10 Ibid.
4.3 GOD IN VHAVENDA COSMOLOGY

4.3.1 God exists.

In their daily lives the Vhavenda respect the existence of God more than anything. They have a high sense of the existence of God. The Vhavenda God has no “no-go areas”. There is no space where God is not there and is not actively involved. Though there can be more deities in some instances, everything is under the domain of God or a Supreme Being. Looking from one angle Vhavenda has a monotheistic view of God but when other subjects are addressed as gods there is a view of polytheism. The gods are the servants of one Supreme God, the Creator. The Supreme God controls the whole universe in general while the gods function as “forces of nature”. The gods are connected to nature because they are “concerned with the wind, the lightning, the thunder, the creeks, the water, the fish and fauna” in the water. It is believed that these gods ensure to protection the hunter, and they guard the rivers and other resources on condition that they are properly served. The gods are not the creators for there is only one creator.

4.3.2 Raluvhimba, a Supreme Creator

Raluvhimba is the mysterious and monotheistic God of Vhavenda who is also the supreme creator. “This Creator is known by different names, the most important being

---

11 Ibid.
12 Ibid.
14 Ibid.
Raluvhimba, Nwali, and Khuzwane.” 15 Hence “Raluvhimba is the mysterious, monotheistic deity of the Ba-Venda . . . is connected with the beginning of the world, and is supposed to live somewhere in the heavens and is connected with all astronomical and physical phenomena.”16 The abode of Raluvhimba is the heavens. He is the creator of the world which means he existed before the world was formed. It is believed that when there are earthquakes it is the sign that he is moving. Traditionally people shouted with joy praising Raluvhimba when there was an earthquake.

Raluvhimba is also identified by the Vhavenda “with Nwari, the Mashona god, who reveals himself at Mbvumela in the Matoba Hills of Matebeleland.”17 The Shona people use Mwari for the name of God. There remain different interpretations about this because it is sometimes assumed that Raluvhimba and Nwali are two separate deities: one for Vhavenda another for Vhashona. The known tradition referring to the wonderful creation of mountains around Lake Fundudzi is that “Nwali, Mudzimu wa Vhavenda o ita dambi,” “Nwali the God of Vhavenda has done a miracle.” Here it is clear that Nwali is the God of the Vhavenda too.

The fact that Raluvhimba makes things, means that he is associated with creation.18 Raluvhimba is concerned with people’s daily activities. Raluvhimba, it is believed, does many activities in the cosmos. Hence he is not a God who is far away from the people and people do not need to approach him only through some special people.

---

17 Ibid. 31. Styt mixed Vhavenda and Shona spelling of Nwari / Mwari because he researched from Vhavenda perspective. Vhavenda use Nwali for God.
People are daily in touch with the winds, sky and stars or sun and moon. They are occasionally in touch with storms and rains. These natural phenomena are associated with Raluvhimba, the God of Vhavenda. It does not need to be defended that there is an intimate relationship between Raluvhimba and his people. Raluvhimba is thus heard every day and everywhere. “A shooting star is Raluvhimba travelling, his voice is heard in thunder; comets, lightning, meteors, earthquakes, prolonged drought, floods, pests, and epidemics—in fact, all the natural phenomena which affect the people as a whole—are revelations of the great god.”

Khorommbi is of the opinion that Raluvhimba is a supreme Creator. Vhavenda put Raluvhimba cult on higher state as Khorommbi commented, “There can be no doubt that Raluvhimba represents some extinct monotheistic cult; he is still at times greeted spontaneously by the whole people in a way that is most unusual among the Southern Bantu.”

Raluvhimba is addressed as “Makhulu”—an implication that he is close to his people.

It should be noted that:

“There are different spots where Raluvhimba occasionally manifested Himself. One is at Luvhimbi (north of Sibasa) which has been a religious stronghold of Vhatavhatsindi under Chief Muthivhi who was subdued by Ravhura, one of Thohoyandou’s sons. There is such a close relationship between the chief, representing the people and Raluvhimba. Raluvhimba calls the chief “muduhulu” (grandchild). In Tshivenda religion it is the chief’s duty to perform the rites in connection with rain.”

20 Ibid. 231
22 Ibid. 26 - 27.
Water or rain is very important in Vhavenda culture because people depend on agriculture. The fact that Raluvhimba is responsible for rain through the chiefs means that he is in touch with the people all the time in giving rain or in withholding it.

“In thunderstorms he appears as a great fire near the chief’s dwelling place, whence he booms his desires to the chief in a voice of thunder. What is interesting is that he can be talked to, especially by the chief, as the leader of the people, who addresses him as ‘makhulu’ (grandmother) . . . As He passes on, there will be clapping of thunder. . . . ‘occasionally he is angry with the chief and takes his revenge on the people by sending them drought or a flood or possibly by opening an enormous cage in the heavens, and letting loose a swarm of locusts on the land.’” 23

4.3.3  Nwali the God of the Vhavenda

It is also argued that the correct Vhavenda word for God is Nwali. The Vhavenda Bible translation uses the word Mudzimu as it is used in everyday life in Vhavenda communities. 24 The word Mudzimu, however, referred to ancestors and not to the Living God. Nwali is the equivalent of the Shona Mwari. 25 African Initiated Churches prefer to use the name Nwali in their worship. 26 This cult should be looked at serious because it is found in many tribes but also because Nwali is also regarded as the God of Vhavenda. “The Ndembu of Zambia, the Shona and Ndebele of Zimbambwe, the Shoko and the Rozwi regard Nwari as their God and developed the nwari-cult around their cultures as they deemed fit and necessary.” 27 Vhavenda praise Nwali as the Creator who created Lake Fundudzi. “Nwali Mudzimu wa Vhavenda o ita dambi,”

---

23 Ibid., 26.
25 Ibid. 155.
27 Ibid.
translated as “Nwali the God of Vhavenda has done a miracle or wonder.” Nwali is the giver of rain. 28 Another name for Nwali, among the Vhavenda then is Raluvhimba, 29 as discussed above.

4.3.4 Midzimu cult

The Vhavenda believe that death is not the end of life. There is life after death. One dies and joins the “midzimu” or “vhadzimu.” Thus Vhavenda have a “midzimu-cult.” In this cult the ancestors are approached by names and asked to pass the message to others and to Nwali who is addressed as “Goko musika vhathu makhulu thi mu di” (Goko the creator of people the grandparent whom I do not know).

The approach to “vhadzimu” is not a prayer but a reprimand because they are often feared and not loved. Vhadzimu are to be instructed or told to heal or act. The “muphaso” ritual is also called, “U sema vhadzimu,” which can be translated as “To reprimand the gods or ancestors.” Their appearance has to do with many misfortunes of their family members and demanding some sacrifices. 30 This cult appears to have developed as a system of communicating with Nwali. 31 It is believed that if the ancestors are not handled well, they can take revenge through bringing misfortune. 32 People serve them by giving them some of the crops or giving to an animal called “makhulu” (grandfather).

28 Ibid. 27.
4.3.5 The Spirit world

The Vhavenda have a belief that spirits can stay in or indwell anything. The Vhavenda believe the spirits can inhabit any place but especially places called “zwifhoni” or places of worship. “Zwifho” can be explained better by this description:

“Every chief has a place in which the spirits of his ancestors are reputed to abide. Such places were mainly burial places for the chiefs. Other spirits are reputed to stay and abide in rivers and lakes. Lake Fundudzi is connected with the ancestor spirits of Tshiavha who are the guardians of the lake. The lake is associated with a great . . . beliefs… The spirits associated with rivers include Phiphidi (falls) and Guvhukuvhu (falls). There are many other localities associated with particular spirits, including resting places (zwiawelo) which are scattered through out the country.”

The wonderful natural resources in Vhavenda land are believed to be the abode of the spirits. Places, like Tshatshingo Potholes and Fundudzi Lake are believed to be a place of the spirit. Zwiawelo are the resting places for the transporting of the corpse and are respected as the place of the spirits. People using that path are expected to rest too at these sites. People who choose not to rest are expected to put in a stone or a twig that will rest for them.

4.3.6 Zwidudwane (Dissociated spirits)

The Vhavenda believe that there are spirits who are not directly connected to particular ancestors. They are believed to be in the rivers and mountains.

“They are dissociated spirits, often vague and shadowy in character, but none the less terrifying and dangerous to the traveller. . . These creatures, though credited with human reasoning, do not appear in complete human form; one spirit is a leg, another an arm, another a body without a head another an eye, and another is a monster with one eye, one arm, and one leg.”

The fear of Lake Fundudzi is that it is populated by the “zwidudwane.” One can see the fear instilled in people as they believe that “zwidudwane” are in many rivers, dams and mountains or forests. The message is clear that there are things living there. People talk about them and instruct what must be done to avoid annoying them.

4.3.7 God is communal

The above paragraphs have indicated that the Vhavenda worldview has the concept of God, who is the creator of human race. He has the servants under him, who serve him. These are the vhadzimu, spirits and zwidudwane.

The hierarchy of the Vhavenda worldview about God can be viewed in this illustration.

Diagram 6: Hierarchy in the concept of God
4.4 THE VHAVENDA COMMUNALISM

The way people view an individual is congruent with how they view community or communalism and care for those in pain. The focus of the Vhavenda is upon the community and not on the individual. Communal living is “the voluntary sharing” of a way of life by a group of people “who believe that they can live better together than they can alone”. In a communal society, “the welfare of the group is considered more important than the comfort of the individual.” This is true in indigenous African society in general. Community starts from the family and their ancestors who are the living dead. In Vhavenda culture nobody is expected to live alone. There are proverbs to emphasise this concept.

Muthu ndi muthu nga munwe (A person is a person through another person)
Muthu u bebeblwa munwe (A person is born for another)
A u tsukisi ndila u wothe (You cannot tread open the footpath on your own)
Munwe mutithi a u tusi mathuthu (One finger cannot take samp from the pot)
Matanzu maswa a tikwa nga malala (New branches are held intact by the old ones.)

A person, who lives alone, separated from others, is always suspected of practising witchcraft. This is based on the view that people should stay together and share life

together. Once a person is detached from the community or family, a principle of the Vhavenda worldview is broken in such a way that that person is suspected of being dangerous for the community. It is dangerous because it may disunite the people or it may break the community equilibrium. There are no concepts of a normal person living alone.\textsuperscript{41} Thus all aspects in life and worldview are bound together in a circle of unity, harmony, continuity and equilibrium. The people’s being is thus determined by means of which all internal and external dimensions of their existence are fused together into the purposeful relationships with God, other people and nature.\textsuperscript{42} One thing that a person fears in this context is to break away from the family and community. The “muima wa ga shaka ndi nnyi”, (translated as “standing alone, who is your relative”), meaning that standing on one’s own as an individual is not accepted. People do not want to be rejected because rejection by one’s community is equal to death. The implication is that people would not choose to be separated from their own people. Community is an important institution in people’s lives. It starts with the family which is the smallest unit of the community. The purpose of the family is to serve the individual and the community at large. Community is larger than people can see because it includes people who are dead. They are part of the community in such a way that they decide terms for the living people, who accept it by saying “ipfī la mufu a li pfukwi” (The instruction of the deceased must not be disobeyed). The dead are the living dead.

\textsuperscript{41} In Van Deventer W. V, \textit{Poverty and Practical Ministry of Liberation and Development within the Context of the Traditional Venda Concept of Man} (Pietersburg: University of the North, Dissertation, 1989) 47.

\textsuperscript{42} Ibid. 47 - 48.
The Vhavenda worldview is immersed in communal care. This has made it survive through all the years. They have love for each other, which is revealed and encouraged by what they believe. There are many rules of the community that are set for the well-being of a person within the community. They also believe that people need to help each other in this world. Life is not possible alone. No person is encouraged to try it alone. People need to join hands in order to bear it.

The underpinning principle is that what a person has is there to serve others. The selfish attitude is equated with the practice of witchcraft. People, who do not want to share what they have with other people are not accepted at all.

**4.5 THE VHAVENDA FAMILY**

This thesis uses family pains to indicate that pains of an individual are pains of the whole family and to some extent of the whole community. There are many institutions in Vhavenda culture that illustrate communal care. Family is one of them.

The family, among the Vhavenda, is the centre of care. Community care in Vhavenda culture, like in many cultures of Africa, starts in the family. The family is the place of love and warmth. Vhavenda do not have a word that is equivalent to family in the sense of Western concept. The word “mudi” suggest the village or home. Vhavenda concept of family is not the nuclear family but an extended family. The word which is

---

43 Cf. “From the work of black scholars we learn that each aspect of the lives of West Africans was permeated with the African belief in strong kinship bonds. . . Each person was linked through family to others in the village so that, to the West African mind, the village became the family writ large.”

being used for family is “muta” which means a courtyard that is situated next to or surrounding a hut.\textsuperscript{44} It is true also in Vhavenda culture that:

“one thing that really is the same in almost every African tribe is the importance place of the family; not the family itself but the idea of family, the idea of a small group of people to which you belong and which is part of a larger group. The family in Africa is probably the most important unit of all.”\textsuperscript{45}

The Vhavenda places the family at the centre of their culture. The family is the institution that brings a person to this earth and cares for that person. “So the family ideal—the family as a model of unity that is imitated at lineage, clan, and tribal levels—is really a device for ensuring that nobody is left alone or unable to fend for himself (sic). It establishes a kind of economic aid society.”\textsuperscript{46} A person is related to another person in one way or another.

Vhavenda do not think of a person without a family because when a child’s parents die there were people to take their position and function in a perfect way. The Vhavenda have no word for street kids or street people. If they see a person walking around they invite him or her and after a while he or she is assimilated in the family.\textsuperscript{47}

\textsuperscript{44}Cf. The word family in Tshivenda is “muta”, literally means “court yard”. This is found in other African cultures. “The family,’ as a concept, has little meaning in many parts of the third world. There is not even a word for ‘family’ in some parts of Latin America and Africa. In Botswana the nearest equivalent word is lôlwapa, which means ‘compound,’ the place in which people live.” David Augusburger, \textit{Pastoral Counseling Across Cultures} (Philadelphia: The Westminster Press, 1986) 176.


\textsuperscript{46} Ibid., p. 39.

\textsuperscript{47} I saw this assimilation in my parents’ family many times. The last was when a very old man of about eighty years, by the nick name of Mphithuli became part of our family. They did not know him nor his real name, apart from that he is from the then Rhodesia.
If there is no one to adopt an orphan, the community leader or the chief has the responsibility to do that.

The family, in Vhavenda perspective, builds a sense of belonging. The Vhavenda believe that at least every person has a family. Every person in Vhavenda culture becomes a member of a family. In such a way a person always identifies himself / herself with that family even in anticipation of birth. To know a person is to know his or her parents or the mountain where his ancestors are buried. So, a person’s story does not begin at birth and end at a person’s death. Even among the Vhavenda, “Nobody begins from scratch. We all stand on the shoulders of those before us. . .”\(^{48}\) A person’s story starts by saying “Before I was born . . .” Death is not the end of the story and life “but the beginning of the next.”\(^{49}\) The Vhavenda family is broader than the Western family. It starts from an ancestor. Hence, many people are included in the extended family.\(^{50}\) The ancestors are part of the family. It is believed that they still have a great say in family affairs. Their wishes are still obeyed and respected. This is to illustrate that they are part of the family.


\(^{49}\) Colin M. Turnbull, *Tradition and Change in African Tribal Life* (Cleveland and New York : The World Publishing Company, 1966) 47. Also cf. China’s concept of Family as described in Chinese Fables: The foolish old man replied, “You see but five men, but I have committed my whole family. We are all there is now, but when I die, my sons will carry on. When they die, there will be my grandsons to carry on, and on and on to infinity. High as they are, mountains cannot grow any higher, and with every bit we dig they will be much lower. Why can’t we clear them away?” David Augusburger has a Chapter on A theology of the family in, *Family, Family Theory, and Therapy Across Cultures: A Theology of the Family*, in his book, *Pastoral Counseling Across Cultures* (Philadelphia: The Westminster Press, 1986) 175.

Their happiness and/or welfare is the happiness and welfare of the family. This means that they still care for the family. The family communicates to them through prayers which are called “muphaso” and “thevhula.” However, when they are angry they cause unhappiness in the whole family, which makes a two-way communication. Thus, the family care is not just physical. It is also spiritual in the sense that the spirits of the ancestors need to be pleased in order to have good harmony in the family.

An individual has value in the family. A person belongs to the family; he or she is part of the family. The value of an individual is connected to the service a person renders in the family or to other people. “The African valuation of man individually and collectively or as a person or persons is based on the concept of belonging. Man is never just himself for himself but himself for others and others for him.”

Females in Vhavenda culture also have the sense of belonging. In the Vhavenda way of life this is illustrated in many ways.

“The females are scattered through marriage. Makhadzi (father’s sister: holds an authoritative position in relation to her brother’s children, on the assumption that her marriage cattle enabled her brother to marry . . . As Makhadzi wa vhana (children’s aunt), she is the recognized head of her brother’s wife. She is the arbitrator in family feuds, offers the leading rituals, and officiates in the religious life of the family. On the death of her brother, she is the one charged with the responsibility of supervising the distribution of property and estate of the deceased.”

This illustrates that every person has a place to belong and have an important role to play. A woman belongs to her family of origin. In her in-laws’ family “she is


considered an outsider, even by her own children.53 But in her parents’ family she holds a key position.

The sense of belonging is comforting in the life of an individual.

“An African is never regarded as a lost entity to be dealt with strictly individually. His being is based on or coupled with that of others . . . The concept of plurality and belonging to is always present, e.g. a person is always viewed as: “Motho wa batho” (person of persons or belonging to persons). “Motho weso (Our person or person that is ours).”54

This is illustrated by the way the Bapedi address each other in belonging language like “Ngwana wa ngwan’so (Ngwana wa ngwana weso) which means “the child of the child that belong to us,” or “the child of one of us.”

The family care has to do with broader relationships. The Vhavenda have no half relationship. People are either brothers / sisters or they are not. The Vhavenda have no term for half-brother or half-sister. It must be emphasised that the Vhavenda like staying together as a clan and their relationships are vital and there is no half relationship with them.55 The sense of belonging goes with the sense of relationship between family members.

The Vhavenda are highly communalistic. A cow may belong to an individual in the family but it is labelled as belonging to that particular family. In many instances a person would not say “my cow”, but would say “our cow”. Even a married woman is “mufumakadzi wa hashu”, translated as “our wife or woman.” The individual is within the group. Within the patrilineal lineage each member’s status is determined

53 Ibid. 45.
by two factors: sex and seniority. The reciprocal term between brother and sister is khaladzi (sister), mukomana means either man’s elder brother or a woman’s elder sister. Male members of the first and second generations are fathers (khotsimuhulu) addressed like one’s own father, and referred to as khotsimuhulu or khotsimunene if they are respectively older or younger than one’s father. Grandfather and grandmother are all makhulu.\textsuperscript{56} These relationships illustrate the obligations they have to each other. A person may sacrifice many things but not family.\textsuperscript{57} Nomalungelo Mbuku sees family life in this way: “Family means unity and if there are any differences between us, we fix them—we don’t hold grudges. The family also stays close because we respect one another. We compromise a lot for each other in the family.”\textsuperscript{58} They are of the same flesh and blood. The Ba-Pedi call each other by these bonds of belonging: wa-Rra, meaning “of my father”, referring to brother, and sa-Mma, meaning “of my mother” referring to the sister.\textsuperscript{59} These networks of relationships call for the communal care they have to each other from birth to death and after death. The concepts of mutual care, communal care or pastoral care and counselling from African perspective come from this view they have of each other. A person exists in relation with others. This is not ethnic- or racial-based, but human-based. They could give the European land to settle

\textsuperscript{57} Cf. “When you’re just managing to cope with life . . . But think twice before you sacrifice family life. . . Family means unity and if there are any differences between us, we fix them— we don’t hold grudges. The family also stays close because we respect one another. We compromise a lot for each other in the family.” \textit{Woman’s Value} (Monthly Magazine) January 2000 (Cape Town) 36.
\textsuperscript{58} Ibid.
as they did to every Muvenda. The children of Coenraad du Buys were given land and girls for marriage.\textsuperscript{60} People care for each other on the basis that they belong to each other. The blood bond makes care a special one and an obligation. Khuba who did intensive studies in Tshivenda says that blood in Vhavenda is thicker than water.\textsuperscript{61} The relationships by marriage are strong on the basis of blood. Marriage does not change one’s totem or the mountain and ancestors, though women moved to their in-laws. They only have the body, but the head belongs to the woman’s parents.

\section*{4.6 THE COMMUNAL CONCEPT OF A PERSON}

The Vhenda concept of a person is communal. The Vhavenda do not see a person as an individual in the first place. A person is seen in connection with the community—connected to other people. Hence we speak of a communal worldview. Communal life is also biblical because “humans are created for communal life” (Genesis 2: 18; Matthew 22: 34 – 40; Romans 12: 4 – 5).\textsuperscript{62} It means that people think mostly of the group, not of the individual as the starting point. The importance of the individual is in the community. The Vhenda say “muthu u bebelwa vhathu” (a person is born for other people). This means that a person is born to serve other people.\textsuperscript{63} The Muvenda praises a person who has helped him / her by saying that “vhe’ bebanani ni ande” (that

\begin{footnotesize}
\begin{itemize}
\item \textsuperscript{60} N. L. Khoronmmbi, \textit{Lutherans and Pentecostals in Mission Among the Vhavenda—A Comparative Study in Missionary Methods} (Pretoria: Unisa D. Th. Dissertation 2001) 20.
\item \textsuperscript{61} Asnath E Khuba, \textit{The Proverbs as Mirror of the Venda Culture and Philosophy} (Unpublished M. A Dissertation: University of the North, 1985) 144.
\item \textsuperscript{62} Stuart Fowler, \textit{A Christian Voice among Students and Scholars} (Potchefstroom: IRS, 1991) 10.
\item \textsuperscript{63} Not the critique that “the concept of umuntu” can “promote more togetherness at the cost of individuality.” In Michael John Nel, \textit{The Ancestors and Zulu Family Transitions: A Bowen Theory and Practical Theological Interpretation} (Pretoria: UNISA, Dissertation, 2007) 115.
\end{itemize}
\end{footnotesize}
is why they say you must multiply). This expresses that many people should be born because that would mean much help. One who does not care for others is not a real person in Vhavenda. Care is a qualification of a person—because “muthu ndi muthu nga vhanwe” (in Zulu: umuntu ngumuntu ngabantu), that can be translated as, “a person is a person through other persons.”64

There are rituals that are performed to connect the person with the family and community. The purpose of these rituals is to make a person safe in the interaction with the people from infancy to adulthood. People are not just physical beings, but they are spiritual and powerful beings. A person, it is believed, is going to live and work with people from different mountains. Mountains in Vhavenda culture, mean their groupings and totems. They prepare a person to that type of interaction from the rite of “muthuso” done to infants and other rites as a person grows and holds different positions in community.

A person in Vhavenda culture is characterised by good morals. They simply say “ndi muthu ula lini” (that is not a person) referring to a person without good morals. It is expected that a person should behave in other ways in different circumstances. A person who fails to behave in the way the group expects is not classified as a person. Hence people of other cultures who join the Vhavenda communities are regarded as people when they learn to live according to the Vhavenda code of conduct.

The emphasis of “dzingoma” (initiation schools) should be understood against this background. Some classify “dzingoma’ under social activities as Mulaudzi has indicated in a research conducted: “Several social activities are found among the Venda people. Each social variety binds people according to its needs, beliefs and

64 Augustine Schutte, Philosophy for Africa (Rondebosch: UCT Press, 1993) 46.
norms. These varieties know no regional or geographical boundaries and occur in both rural and urban areas.\textsuperscript{65} In these social activities morals are communicated to the right group and the right age. Morals are taught to people in these “dzingoma”. Every member of the community is expected to attend “dzingoma” because the actions and the education found in these institutions are believed to make, shape and mould a person. The manhood and womanhood are believed to be created in these initiation schools. People who did not undergo these African indigenous schools are not considered real men and women. They are not allowed to give counsel to any one. The initiation schools “have an educative function; initiates are taught about sexuality, inter-sexual relationships and gender roles.”\textsuperscript{66} “Dzingoma” include among others “murundu” (circumcision school for male), “musevhetho” (for females) and “vhusha” (puberty institution for females).

4.7 RECONSIDERING RELIGION AND SECURITY OF COMMUNAL-FAMILY LIFE.

This chapter concludes by returning to its religious concern. Security and care are the vital core of Vhavenda religion that cannot be stressed enough in the scope of this thesis, as indicated in Van Deventer’s research using Bosch.

“We cannot globally understand and process the wealth of the religious heritage of Africa. . . Even though the traditional African God seems to be lurking in the background and even though this God seems to be totally superfluous to the superficial observer, He is extremely


important and the African cannot imagine a single moment of life without God. God in a
certain sense is the assurance of the existing order, the ‘support’ upon which everything rests.
With one reservation we feel able to agree with what Swailem Sidhom said, namely that God
is; hence man is—that is the core of African belief!" 67

The Vhavenda concept of God is that of a person, “makhulu”, 68 who cares for his
children or grandchildren. But that is not the whole truth because the Vhavenda have
a concept of one God, the Creator. 69 Vhavenda religion is about care here and now.
The world is filled with uncountable enemies who surround them. So, without the
God who cares for them here and now they are in big trouble. Security is a major
issue in their religion. Thus there are elements of worship or shrines in their lands,
homes and around their bodies to protect them from the evil ones. They respect these
shrines as they represent their creator and protector or ancestors. They believe that
God cares for the community—“God is equally a rain bringer.” 70 It is difficult to find
an atheist in Vhavenda community Setiloane points out this conviction saying:

“Bantu life is essentially religious . . . Religion so pervaded the life of he people that it
regulates their doing and governs their leisure to an extent that it is hard for Europeans to
imagine . . . the Bantu are hardly likely to be secularized, for they will never be content with a
religion that is not able to touch every phase of life and interpret the divine terms of
humanity.” 71

---

67 In Van Deventer W. V, Poverty and Practical Ministry of Liberation and Development within the
Context of the Traditional Venda Concept of Man (Pietersburg: University of the North, Dissertation,
1989) 46 - 47.
68 N. L. Khorommbi, Echoes from Beyond a Pass Between two Mountains (Pretoria: UNISA,
Dissertation, 1996), 26
69 Ibid. 25. Vhavenda end their prayers to the ancestors by addressing “Gole / Goko musika vhathu,
makhulu thi mudi”, translated as “Gole the Creator of human being, the granny I do not know.”
70 N. L. Khorommbi, Lutherans and Pentecostals in Mission Among the Vhavenda—A Comparative
71 In Van Deventer W. V, Poverty and Practical Ministry of Liberation and Development within the
Context of the Traditional Venda Concept of Man (Pietersburg: University of the North, Dissertation,
Religious elements are arranged around the community, which is a religious centre. The faith in God is based on the safety and continuing existence of community. Religion is judged by its “management of the existential problems of suffering and adversity, in the combat against phenomena like disease, death and infertility and other catastrophes which threaten the continuation of the community.” 72 This is possible when the order of things is kept. Disorder cause chaos and chaos is followed by pain and death.

Security and safety is so important that even those converted to Christianity adopt their traditional expressions like “Ho tou lwa vhadzimu” (ancestors defended) or “Vhadzimu vhave ndi vahulwane” (His / her ancestors are great). Some choose to go to church with security and safety in mind. Thus when things are not as expected, they change the church or even go back to their traditional worship. Churches that are concerned with safety and security usually attract many Africans. These are those churches that have time in their liturgy of praying for people who are sick. It always needs to be done in such a way that they come forward and hands are placed on them or they are given some elements to attach to their body or use at home. The African background of God who cares for our security and safety plays an important role.

4.8 CONCLUDING REMARKS

There are many changes in Vhavenda culture due to the influence of the West and of Christianity. However, it must be said that in times of pain people think that they should go back to the graves and pick up some cultural traits, which they think can bring healing. Africans are living in these two worlds which are

72 Ibid. 27.
in some sense contradicting each other. They want good things from each side. The problem in doing this is difficult and one is not certain of the limits. This thesis is far from resolving this problem. It, however, makes a contribution to opening the way of caring in the communal setting. People in pain need a caring community that understands the situation. It is communal care. It needs a group of people working together or caring for one person or other persons in pain. This way of care goes beyond the church walls, in that it cares for other peoples and communities in general. In this way communal pastoral care has a mission dimension. The next chapter moves to a focus and exploration of pain and care from the Vhavenda perspective in particular.
CHAPTER 5

TOWARDS A TRADITIONAL VHAVENDA UNDERSTANDING OF PAIN AND CARE

“The fact of human suffering is one that needs no arguing, and fresh evidence of its reality comes to hand everyday. Today’s newspaper is full of tragic tale, and tomorrow’s will contain as many more.”¹

5.1. INTRODUCTION

The previous chapter focussed broadly on Vhavenda cosmology, community and family life. This chapter continues the Vhavenda worldview exploration through a more focused study of pain and communal care among the Vhavenda. The author is aware that these days most Vhavenda people live in a mixture of Vhavenda and Western cultures. This chapter will, however, focus on the more indigenous traditional cultural wisdom of the Vhavenda worldview in dealing with pain. The Vhavenda did not have newspapers, but they had stories about their joys and pains going around daily.

5.2. BORN TO SUFFER: VHAVENDA’S EXPERIENCE OF PAIN

The Vhavenda concept of pain is found in expressions like “Tsho bebwaho tsho fa,” which can be translated as, “That which is born is dead”. This means that a living

creature is due or destined to experience pain and death. This expression alludes to the truth that Vhavenda are people of pain and suffering. It is believed that coming into the world is coming into the suffering and the end of that pain is death. The expression also tells that the Vhavenda people believe that there are many evil forces and spirits that cause suffering to people. Thus the birth of a child is accompanied by many customs and rituals to prevent a child and the mother from suffering.

There is a belief that pain and suffering comes from living in poor conditions. Everything is done to protect a person from pain and suffering because they believe that a person is not a stone, which remains in the same condition. The Vhavenda have an expression that says “Muthu a si tshitanda” which means that “a person is not a log”. A log does not suffer from pain. The overall interpretation is that there are times of pains and suffering in the life span of every person. A stone does not have blood and as such does not feel pain, nor does it suffer.

There are pains from bodily injury and spiritual problems of life like conflicts and disagreements. The Vhavenda adults in community are expected to endure pain for the sake of life and harmony. It is said that, “Muhulwane u kanda mupfa a tshi u vhona.” which can be translated as “The elderly or the leader steps deliberately on the thorn.” The implication is that one has to face pain. This is done as a way of bringing about a remedy. Leaders of families use this expression. It means that they hold pain in their hands so that their family may enjoy peace.

---

2 Cf. Darrow Miller in Vision Conference Notebook Worldview and Development Section a Conference for Hope for Africa. 9.
3 One of the rituals is “muthuso”, translated as “helper”.
Another expression that teaches Vhavenda people to accept pain goes like this: “U kona gumba ndi u mila lo ralo, u tafuna li a silinga,” which can be translated as, “To defeat an egg is to swallow it without chewing, because chewing will make you feel like vomiting.” The interpretation means that to solve a problem you have to accept it. You open your heart and put in the pain and close it and then you will have the victory. The Vhavenda teach each other to hold a knife at its sharp point as they express it as, “U fara lufhanga nga vhuhalini.”

These expressions, however, do not mean that pain is always easily accepted. The expressions mentioned above are meant to resolve and cope with pain. The prevention of pain remains a priority. When pain persists, it is believed that someone has caused it. Vhavenda believe that pain and sickness are not just the results of bacteria and psychological imbalance as the Western worldview envisaged, but also of the witchcrafts that fly during the night and bite people at the back. When people suffer from the Vhavenda point of view, it is suspected that witchcraft has been practised and is bringing on the chronic pain. Pain turns everything upside down. It does not affect only the individual, but the whole extended family and the community. An individual is linked to the whole society through the family. The pain of an individual is the pain of the whole community.

Prevention of pain is important. Life stage initiation rituals in childbirth, adolescence stage, marriage, death, widowhood, and harvest are good examples of prevention. Good health is a most important thing in Vhavenda culture. Daily greetings are asking

---

6 Cf. “at critical moments of life as birth, illness, grave misfortunes of death, there was a return to traditional observances.” Larney Emmanuel Yartekwei, Pastoral Counselling in Inter-Cultural Perspective (Franfurt am Main. Bern. New York: Verlag Peter Lang, 1987) 12.
and wishing good health to one another. When a child is born the parent should abstain from sex. There are rituals and taboos to be observed to keep the parents and the baby in good health. People observe their cultural rituals to prevent pain. If they are to take the risk of having sex, a traditional healer is called in to give some rituals. In these rituals the father's sperm and mother's milk are smeared on the child's body.

“U bvisa nwana,” translated as, “to take out a child,” is the ritual of taking out the child and it includes several rituals. It was believed that outside the fence of the home there are many people who practise witchcraft. It is believed that there is a guarantee of safety of human life by divine intervention. Rituals are inviting divine intervention. Rites are done to the child and to a mother to prevent pain. It is also believed that if these rituals are skipped then a child will not become a normal person. Traditionally when a child is born it is confined to the hut and in the village for some weeks. The child will only go out after the ceremony of “u bvisa nwana” which means to bring the child outside. The ceremony is done to prevent danger or pain that a child may encounter in life. It is done according to the gender of a child. If the child is a boy, the mother will go out with an axe and cut some bushes as a way of clearing the land to symbolise the responsibility of a man. If the child is a girl, the mother will take a

---

7 Cf. “Until a child is properly named he is not considered a person, and is sometimes referred to simply as an ‘it’ or as a ‘thing’. If he dies before naming it is just as though he had never been born or had been stillborn. As there is so much infantile mortality in Africa, this is a belief that helps the parents to overcome their sadness.” In Colin M. Turnbull, *Tradition and Change in African Tribal Life* (Cleveland and New York : The World Publishing Company, 1966) 53. It should be noted that rites serve to include a child into society or community. Cf. Claudia Nolte-Schamm, “The African Traditional Ritual of Cleansing the Chest of Grudges as a Ritual of Reconciliation, *Religion and Theology*, 13/1 (2006) 90 - 106.

8 Cf Stayt Hugh A, *Bavenda* (London : Oxford University Press 1931) 89. There are variations on the actual practice of the *Au bvisa nwana* ceremony. Stayt recorded one example which was narrated to him.
hoe and some seeds and dig a small place and plant them to symbolise the work of women.

“These rites are symbolic of the child's future activities. As the mother approaches her hut the people in the kraal pour water on the roof and call her to run inside as the rain is falling; she runs quickly into the hut, the water falling upon her and her child. This whole ceremony is an appeal to the spirits for protection, so that the growing child may wax strong and healthy, able to hoe and plant or to clean the land and may be blessed with successful crops and plentiful rains.”

One who has not gone through the normal rituals in the family is expected to be in pain.

These rites fall under the Vhavenda laws, if looked at deeply. Van Warmelo and Phophi say that Vhavenda law was “made by primitive man struggling to survive.” They confirm that rites and Vhavenda law were to prevent and heal pain by saying:

In those days the Zoutpansberg mountains were covered from end to end with dense bush and high rain forest, threaded only by narrow footpaths along which danger lurked at every turn. The tiny gardens, which had to be guarded against wild animals all through summer, supported a small population broken up into tribes which fought one another at intervals in a desultory way. The stockaded and fortified villages, crammed with people (nobody dared to live alone), lay carefully concealed in dense bush. At sunset the single narrow entrance was barred and hedged with thorn branches, and they lay down to sleep with their arms at hand, never certain of what the night would bring.

The individual life and communal life is illustrated in this picture. Life without protection, in this land of dense bush populated with dangerous animals was unthinkable. Rituals, to protect the people, were important. Vhavenda law came into

---

9 Ibid. 89.
11 Ibid.
being partially from this situation. People were living in a dangerous world. Nature was good for people’s lives, but in it there were also many things that threaten people’s lives. There were dangerous animals that were connected to the spirits. Another danger came from other tribes or communities. Neighbouring communities usually fought. Thus the threat came from other people around them.

Pain did not only come from outside the village and family. There was a big chance of pain coming from within the village and family. This was confirmed by Van Warmelo and Phophi when they went on with their argument: “Not only was there no security without, there was very little within. Inside the village, even within one’s own family, there might be envy, jealousy, hatred, and witchcraft, besides the universal enemies: famine, sickness and death.”

Van Warmelo and Phophi conclude their argument by saying that living in that condition there was no other way than to introduce the Vhavenda law. “Struggling man beset by many perils and hostile forces, sought security in social organisation, first in the primordial unit of the blood group, then in the community groups forming a tribal unity.” The issue of trust had levels. “If anyone was to be trusted it was the brother, the sister, the close kinsman, and so we find that the family and the kinship are the basic facts of Venda life.”

---

12 I say partially because Venda people did not originate from this situation. They had laws inherited from their ancestors who were in other parts of the country. They came to this area with their culture and one might believe that they adapted it to suit the new environment.


14 Ibid.

15 Ibid.
5.3 PAIN IS BROADER THAN BODILY SUFFERING

The Vhavenda, like some African cultures, did not entertain the analysis of words like pain. Pain was simply felt. There was no time to talk about it as the Western cultures do. To them, pain is not an abstract thing, but a concrete feeling. It is associated with an event like “Thoho yanga i a rema,” which is literally translated as, “My head is chopping,” meaning that “I have a headache.” Stomach ache is “Nowa yanga i a luma,” which can be translated as “My snake is biting.” An injury that they can explain how it takes place, can also express what they mean by pain. The same applies when they talk about death of their loved ones. It tells what pain is and how they feel about it. It is said that “Vhulwadze ho bala,” translated as the disease had defeated medication or healers. When they hear it for the first time they spit on the ground.

One can understand pain in their stories. As a story is told, fears of pain may show in the face or the change of face may occur. Crying loudly is not permitted to avoid invoking other people to crying. The explanation of pain is read in these fears, tone of voice and facial expressions.

The Vhavenda’s view of pain is from the perspective of the whole person. Pain embraces both the physical and spiritual sides of life. The Vhavenda believe that suffering of the body also affects the soul of the person. By way of extension, suffering of one person is the suffering of the whole family and community. The suffering of the community is the suffering of all creation.
The concept of pain from the Vhavenda worldview indicates that there is disorder and disharmony of things in the cosmos.\textsuperscript{16} Any disorder of things that brings disharmony brings pain according to the Vhavenda worldview. This understanding also flows from the understanding that all of life is connected and nothing happens in isolation. There is nothing that goes alone. The soul is connected to the body, the individual is connected to the group of people and people are connected to the whole of creation. Thus things in the universe complement each other to bring healing. Everything works together for the welfare of the other. Once the connection or working together fails, the result is pain and suffering. When the body is injured by bodily hurt or sickness then there is disorder in the body and pain results. Personal, family, community and social disorder cause pain. When people are not at peace with each other, it is regarded as being like the injury of a body. Spiritual disorder particularly causes pain. When people do not have peace with God or gods, and spirits or ancestors, they experience pain.

5.4 MAJOR SOURCES OF PAIN IN THE VHAVENDA WORLDVIEW

Beside the above conditions, which cause pain, there are three major sources of pain, which the Vhavenda reflect upon constantly. The first source is the bad spirits or people who are regarded as witches. The second is spirits called ancestors. The third source is broken human and community relationships.

5.4.1 Witchcraft

The traditional Vhavenda do not believe that sickness is just caused by a virus. The diviner is thus consulted to diagnose “who” is behind the particular pain. “One of the main functions of religion is to explain the origin and meaning of evil and suffering.”\textsuperscript{17} Vhavenda as Africans, believe that there are “the hidden powers.”\textsuperscript{18} Witchcraft is also responsible for the sickness in people’s lives.\textsuperscript{19} They believe that there are “vhaloi” who bewitch people.\textsuperscript{20} These are the anti-social people who are believed to destroy property, cause disease and misfortune and death. There are different types of “vhaloi”:\textsuperscript{21} (i). There are those who can use words that curse people. These “vhaloi” use magical power. They are believed to harm their victim or target without physically being there. (ii). There are those who use medical drugs from the nanga (traditional diviner). The nanga gives them medicines and instructions of how to use them to harm other people, especially their enemies. They actually buy “vhuloi” (witchery). (iii). There are those who use owls and stripped mongooses at night. These small animals are believed to have some power, which “vhaloi” use as they ride to their victims. (v). There are those who are used by evil or who bewitch

\begin{itemize}
\item \textsuperscript{17} G. Schwa, \textit{The Relationship between Belief, Religious Orientation and Existential Meaning} (Pretoria: Vista University, Dissertation, 2001) 98.
\item \textsuperscript{20} Moeti Samuel Edwin, \textit{Death in Indigenous Venda Culture} (a paper submitted in accordance with the requirements for the degree of Honours Bachelor of Arts in the Subject Anthropology at the University of South Africa: Pretoria, 1987) 20 – 21.
\end{itemize}
intentionally or unintentionally. People believe that the spirit of witchery possesses these people. It is believed that they have the instinct to bewitch in their blood.

Hence “every illness is, according to their belief, caused by the ill-will of some man, who in the shape of a cat has entered the house, or, as a snake run across the road, or even as an evil spirit found its way unnoticed into the house where it caused the mischief.” This belief leads to the search of who is that person who does such an evil thing. Many family and tribal fights were around the issue of witchcraft. When a family member is accused of witchcraft he or she might have to break away from the family and close members like brothers and sisters.

Belief in witchcraft thus instils fear in the life of the people. “With such view the young Bavenda are inoculated and they adhere to them in spite of better instruction. Throughout life they remain convinced that only revenge of another man causes illness and death.” Hence the Vhavenda concept of illness is not necessarily connected to bacteria, viruses or infection. It is still believed that one's enemies might bewitch one's family members. Suspicion can be the order of the day. Witches then are the most feared and hated people in the community. The Vhavenda look for something supernatural to protect themselves and their families or businesses from “vhaloi”. Hence, “the diviners are held in high esteem since they are the ones who

---


23 Ibid.
divine those who are and those who are not vhailo.” 24 They also disclose the witchcrafts.25

5.4.2 Ancestor spirits can cause pain

The Vhavenda believe that if the ancestors are not satisfied or they are disturbed by some actions of the family, they may respond by sending illness to the member of the family.26 When a person is sick they call a diviner who will diagnose the cause of sickness by using bones. After the diagnosis, instructions are given. Among the instructions a diviner may instruct a family to slaughter a cow or goat or brew beer for the ancestors to restore peace and order in the family. Relationship27 with the living dead is important. In the case of death the results of diviner diagnosis may be, “Rovhuya na mudzimu washu” which means that “We came back with our god and our god was displeased with some of our actions and punished us.” Families usually accept the result collectively and take corrective measures collectively.

5.4.3 Communal disorder can cause illness

People and environment need to be in equilibrium for good health to prevail.28 The degree of illness is determined by the concept of order, balance and harmony. In

---

25 Moeti Samuel Edwin, *Death in Indigenous Venda Culture* (a paper submitted in accordance with the requirements for the degree of Honours Bachelor of Arts in the Subject Anthropology at the University of South Africa: Pretoria, 1987) 20.
27 Moeti Samuel Edwin, *Death in Indigenous Venda Culture* (a paper submitted in accordance with the requirements for the degree of Honours Bachelor of Arts in the Subject Anthropology at the University of South Africa: Pretoria, 1987) 20.
illness the demand is not for precise diagnosis. The more important question is, “Who disturbed the societal order and why?” The question here is not “what?” but “who?” which means that the diagnosis is searching for a person and not an object like a tree or changes in the weather. It is believed that people can get ill if the community or society or environment is disturbed. Violation of taboos such as incestuous marriage can disturb the communal life and environment. Hence in breaking taboos, illnesses and conflict in the community may be the result.

5.5 DEATH AS PART OF PAIN IN VHAVENDA CULTURE

Death is central to the understanding of pain in Vhavenda culture. The Vhavenda say that “vhulwadze ho kunda” or “vhulwadze ho bala” when someone has died. It means “illness has conquered.” They do everything in their power to heal illness. Hence they accept that illness was too strong for them. “While spending money and property to alleviate pain and prevent death, the Vhavenda say that the illness was too strong for

29 Moeti Samuel Edwin, *Death in Indigenous Venda Culture* (a paper submitted in accordance with the requirements for the degree of Honours Bachelor of Arts in the Subject Anthropology at the University of South Africa: Pretoria, 1987) 20.

30 I once took some youth from Europe to a chemist of one of our local traditional healers. I was shocked to see the alarming prices of consultations. There was a list of prices of services rendered. There is a separated price for opening the bag of the doctor (luputulula thevhela). It is like opening a (bag) file—this is done several times during a person’s visit to a doctor. There is also a price for the service a patient needs.
them. There are few words to say at death and no notion of healing the pain of death and the families must accept this finality. The Vhavenda say, “Madi a tevhuwa o tevhuwa” which means the “Once water is spilt, it is spilt.” No one can gather the water that has been spilt.

A problem for the Vhavenda remains that many people believe that death has been caused by someone, usually a member of the family. This can cause conflict after the funeral when people even want to kill someone as suspecting that they have practised witchcraft that led to the death.

The Vhavenda can, however, also regard the funeral as a healing process. A good funeral is usually a comfort to them. A good death leads to the deceased going to join the ancestors. They make a grand funeral to bury the deceased in a dignified manner. Hence the funeral service is often very expensive. Funeral undertakers and burial societies are flourishing. Much money is spent on the graveyard and the tombstone is regarded as very important.

These funerals, although they are a healing event, they are very expensive for poor communities. There is an unwillingness to expose one's poverty which is also associated with pain and shame and perhaps even a curse from the ancestors. As a communal people the Vhavenda attend the funerals in large numbers and see whether the family has been able to keep up with the best standards for a funeral. There is thus competition between families at these events and the Vhavenda would feel pain if people say, “They buried him or her like a dog.” They want people to say good things about the funeral and they fear bad comments, which might be communicated to the ancestors.

The concern for the deceased to become an ancestor is another reason for such fear and respect which result in expense. Thus the deceased can become a source of
blessing or pain depending on how the person left the world and the standard of the funeral and dignity given to this crucial event by the family and community. Hence poor people are buried like rich people to please the community and the ancestors. Thus many poor people live with little food, poor housing, little clothing and blankets to keep them warm but when they die there will be plenty of food that is even dumped away after funeral if it is too much. They do not worry about this because it is also believed that the dumped food is given to the ancestors. They say, “U nea vha fhasi” which means, “giving to those in the ground”. Ancestors are also believed to be part of the funeral and so they must also have something to eat.

5.6 MEDICINE AND HEALING PAIN AMONG THE VHAVENDA

Vhavenda healing, like the healing of any people, is not done in a cultural vacuum. African indigenous healing heals the whole person and community. 31 Care in Vhavenda culture is physical and spiritual. 32 Health is not something in isolation from the whole creation and the creator. 33 There are people who know the medicines that prevent and heal different illnesses. 34 They are, however, not separated from the spirits, as it is believed that their knowledge of medicines comes from the ancestors. I

would like to briefly explain this fact in describing the types of indigenous healers as medico-magician-herbalist, the divination, and the medicine as a magic.

5.6.1 The medico-magician-herbalist

It is difficult to find a person who only uses medicine without other powers being invoked to add to the medicine. Hence we speak here of medico-magician healers. They are usually of two types. They are the “nanga” and the “mungome”. Some differentiate these types as:

“By far the greatest number of practitioners are dzinganga, and they are consulted on practically every occasion when an event occurs outside the natural order of things. Although nearly every nganga posses his set of divinatory dice, he is not generally credited with the occult powers of his more powerful colleagues the mungoma, who must always be consulted after death, as he can actually reconstruct the whole scene of tragedy and disclose the identity of the evil-doer.”

The “nanga” is the medicine person proper who uses herbs and medicines to cure diseases. The “mungome” is a diviner who uses their diviner skills to detect more spiritual cures, which can affect the body.

5.6.2 Divination

The Vhavenda have a divination system that helps them to diagnose the problems or diseases and can also tell them what the future holds for them. The divination system plays an important role in the life of the traditional “muvenda.” Divination is the gaining of the insight of the future or of the unknown by using supernatural power.

37 Ibid.
The Vhavenda diviners throw bones down and interpret the way they have fallen to reveal the future or what is hidden. Divination among the Vhavenda is practised by a professional “nanga” or traditional diviner. The “nanga” uses “thangu” or divine dice, which is a set of four ivory or wooden dice, oblong tablets which are marked on one face and which can therefore fall and give sixteen different combinations.\textsuperscript{38} Traditionally divination was also thought of as part of the prayer life of the people as indicated in this passage.

“... not a single matter of moment can be undertaken unless the departed ancestors of the family, ‘vhadzimu’, have been consulted, lest they visit the offenders with disease and affliction. Now the only way in which their wishes can be ascertained, or the reason for their displeasure revealed, is means of divination. This is therefore resorted to before any tribal or religious rite is performed and under many other circumstances of ill omen or uncertainty, as after lightning, visits of snake, polecat or antbear, in cases of theft, when cattle have strayed, before going on a journey or when someone has died, in matters connected with witchcraft and magic the oracles are also continually being consulted.”\textsuperscript{39}

\textbf{5.6.3 Medicine and Magic}

The Vhavenda believe that there are people who can use medical and herbal treatments for healing and that they are of real therapeutical value. Most of the people who use this treatment also depend upon the efficacy with the inclusion of a magical element. In this way it is proper to talk about medicine, which is also attached to magic. The term “magico-medicine” will be used. An example of this “mufara-litsha” (touch and leave) for protection is the following use.

“For example, on inquiring minutely into the history of a small piece of wood, worn as a charm around the neck of Muvenda for protection when travelling, it transpired that this wood was taken from a bough of a tree overhanging a difficult climb in a well-frequented path. This


\textsuperscript{39} Ibid. 197.
bough was grasped by every passer-by in order to assist over the difficult place. In this way
the power of that particular bough was inordinately increased by helping the wayfarer, and it
became the obvious source from which effective charms for the timid traveller could be
obtained.”

Beside these magical and kinetic powers for good or evil, there are the pure medicines
of herbs which effect cures. There are simple herbs, which can stop headaches,
stomachaches and other diseases. These “nanga” are more like African indigenous
herbalists than the diviners mentioned above. Every sickness then needs to be
understood from a spiritual and physical point of view. Every illness also needs to be
understood to include family and community aspects as well. Visits to the Western
hospital are regarded as focusing too much on the body and not accommodating the
spirits, family or ancestors in illness and healing. Hence in Western hospitals health
can be obtained, but it will be missing something equally important. They often feel
that holistic healing is not obtained and only half of the job is done when leaving a
Western hospital.

There is also another type of healing called the restoration of order, which uses a
“nendila” or mediator. As mentioned previously, pain is caused by any disorder in a
person's life. Disorder can disrupt the person, family and community. Beside personal,
family and communal disorder and environmental disorder, there is also religious or
spiritual disorder. Here in spiritual order again, a person is not at peace until the
ancestors have been appeased. Healing then requires respect for bringing back of
order in a person's life. Reconciliation is an important process in Vhavenda tradition.
When you have done something wrong to one member of the community, you will be
advised to ask someone to be your mediator or “nendila”. Reconciliation is done
through an intermediary system. The guilty person is represented by a person who is

on good terms with the wronged person. This is how conflicts are settled. The “nendila” will be carefully sought out with the help of the community members. The wronged person may be very angry but will sit with his mediator when trying to reconcile persons. The term used for the process is “ufarelwa lufhanga”, literally it means “holding a knife for me” Here the anger of the wronged person is being held so that it will not lead to violence and the “nendila” will take and absorb the anger or pain. Traditionally people say, “Thunwa a I vulahwi”, which means, “A messenger should not be killed”. The “nendila” travels from one shady area to another shady area until all parties agree.

There is healing, which comes from reconciliation with the ancestors. This type of healing practice includes sacrifices in the form of water spilling on the ground and snuff put on the ground and special beer (tshikoko) is poured out, a goat or a cow is killed. These rituals are all intended to appease the anger of the ancestors and to restore reconciliation and balance in health and life. The financial costs of such reconciliation and amongst poor people lead towards a strong desire to cooperate with the traditional beliefs concerning the ancestors.

5.7 VHAVENDA COMMUNAL CARE

5.7.1 Communal cultures are about caring

“Culture, broadly defined, is the way of life of a particular group of people. Cultural groups are distinguished by many characteristics, including mode of dress, language, values, rules or norms for behavior, economics, politics, law and social control, artefacts, technology, dietary practices, and health care. Health preservation, sickness preservation, causes of sickness,
treatment, coping, caring, dying, and death are part of the health component of every culture.” ⁴¹

As mentioned earlier in the thesis culture contains worldviews, which lead to a certain way of life. It includes characteristics like: “the beliefs, behaviour, language, and entire way of life of a particular group of people at a particular time.” ⁴² As noted above, culture is also concerned with health preservation, reasons for illness, ways of coping and treatment and deep caring for the sick people.

5.7.2 Care among the Vhavenda is holistic:

Health is the well-being of the visible and invisible: The above definition of culture is from medical point of view. It tells that every culture has an aspect of health care. Health care in African context is holistic. Health is the well-being or the good order of the visible and the invisible. The wellbeing of community includes, among other things, both physical and spiritual features. “It is fairly correct to say that dichotomy between sacred and secular, between spiritual and material, separation between the state and the cultic is an alien concept to Africa, probably introduced at the time of colonialism.” ⁴³

Health in this holistic concept is the wellbeing or good order of both body and soul—the invisible. The disorder of one aspect of life brings pain to the whole person.

**Personhood (vhumuthu)** is described in holistic care: A person is someone who cares holistically. God cares for his creation. Communal pastoral care and counselling in Vhavenda community should be seen in this light. A person who does not care for others is not a person in Vhavenda philosophy. A person is more than a physical structure—more than what one sees and touches. Vhavenda has an expression that says “A si muthu” (He or she is not a person), referring to a person who does not care for others. Hence to be a person is to care for others.

Culture is a way of life, and as a result it is also a way of caring for life—oneself and others including all of creation. Hence to understand the way in which people live and go about caring for those in pain, people’s culture and their cosmology in particular should be taken into consideration.

This section should be understood in this light—it is not an anthropological study of the Vhavenda.

**Healing is cultural:** Healing is not just scientific but it is also cultural. As stated above, healing is not done in a cultural vacuum. Culture plays an important role in bringing health and care for others. There are many cultural aspects of people in context contributing to that effect. Turnbull referring to African cultures in general says that a traditional African doctor’s job is to heal the whole person and community.45 On the other hand, the Western notion is that the doctor heals only the body. The African notion is that the doctors simply have the power to heal, and they heal wherever they can and however they can without discrimination. They use their

---


knowledge of herbal medicines to heal bodies, but equally important is their power to
heal minds and to heal society itself. Sickness is a problem in a society. Even when a
thief gets injured it is the doctor’s job to cure the sickness and repair the injury.
Community care in Venda cultures is holistic as illustrated here. Healing is not just
curing the physical body. The mind or soul and spirit need to be dealt with during a
healing process. It is not a question of either or. It is a question of both because once
one part experiences pain the other one feels it too. Hence healing of body and soul
should be done simultaneously.

**Consulting a diviner:** Traditionally, when the Vhavenda visit a doctor, it is not only
the physical aspect that is treated. The spirit, the soul and social aspects are also
treated because they are as important as the body. The relationships are as important
as a person. Every sickness needs to be understood from a spiritual-social-economic
point of view. The ancestors need to be consulted before you are given, medicine;
divination bones need to be used to detect the right medicine and cause of disease.
Normally you are not just given medicine and go. There is that process of reconciling
you with yourself and the community or environment. It is not just like taking the
blood pressure and temperature of a patient as in a Western hospital.

Counsellors and medical practitioners who are crying for holistic healing should learn
a great deal from the African approach. The African notion is that people are not just
ill physically. Their soul or spirit is sick too— it is their “being there” that is
important. They may have medicine to cure the body, but if the spirit and social
aspects are neglected the job that has been done is half a job.

Thus it does not surprise when some of the Vhavenda visit a hospital and conclude by
visiting a traditional doctor when discharged. Some say that there are some parts of
healing that the Europeans are good at, but their machines cannot see the work of the
witchcraft or the spirits of the forefathers. Thus they end their medical treatment at an
African indigenous doctor.

Healing and care in Vhavenda culture is not one person’s effort but the effort of the
whole community—the living and the dead. This chapter wants to look at this
culturally gifted care-giving in times of family pain. Culturally gifted care-giving is
done intentionally or unintentionally—consciously or unconsciously.

Vhavenda philosophy has the following concepts on what a human being should be:

- Muthu ndi muthu nga munwe (A person is a person through another person)
- Muthu u bebeblwa munwe (A person is born for another)
- A u tsukisi ndila u wothe (You cannot tread open the footpath on your own)
- Munwe muthihi a u tusi mathuthu (One finger cannot take samp from the pot)
- Matanzu maswa a tikwa nga malala (New branches are held intact by the old ones.)

Thus personhood (vhumuthu) is central to holistic care for people in pain. Culture is
thus a way of caring for life, for oneself and others including the whole environment
and God’s creation. Hence to understand the way in which people live and go about
caring for those in pain, people’s culture and their cosmology, as also noted in the
previous chapter, should be taken into consideration.

A person who lives alone and does not care for others is always suspected of
practising witchcraft. This is based on the belief that people should stay together and
share life together. Once a person is detached from the community or family, a
principle of Vhavenda worldview is broken to such a degree that that person is
suspected of being dangerous for the community. It is dangerous because it may
disunite the people or it may disturb the equilibrium. There is no concept for a person

---
46 N.L.Khorommbi, *Echoes from Beyond a Pass Between two Mountains* (Pretoria: UNISA,
living alone. Life and the worldview are an integrated whole.\textsuperscript{47} All aspects of life and the world are bound together into a circle of unity, harmony, continuity and equilibrium. The people’s being is determined by this concept of totality by means of which all internal and external dimensions of their existence are fused together into the purposeful relationships of God, other people and nature.\textsuperscript{48}

5.7.3 Care in Vhavenda culture is culturally gifted.

5.7.3.1 Mutual care

Mutual and communal care among the Vhavenda are culturally gifted. Care is not a highly structured institution, but has its own communal rituals and traditions. Everything possible is done to prevent illness and support healing of personal or community hurt. Communal life is geared toward care. Culturally gifted care is a care that is part of the people's culture. People learn about community care from when they are born and grow up in their culture.

There is no special school for cultural caregivers where people learn caring for others but life in community teaches people to care for others. Culturally gifted caring suggests that beyond traditional healers and mediators the community has the resources to care for one another. Hence “Tsiwana i laiwa ndilani” which is translated as, “An orphan gets counselled along the way.” The teaching suggests that one should love and follow good guidance from other people. Another saying is, “Hu laiwaho vhadzwale ndi hune tsiwana ya laiwa hone,” which is translated as, “Where the

\textsuperscript{47} In Van Deventer W. V, Poverty and Practical Ministry of Liberation and Development within the Context of the Traditional Venda Concept of Man (Pietersburg: University of the North, Dissertation 1989) 47.

\textsuperscript{48} Ibid. 47 - 48.
cousins get advice is where orphans get advice”. Repetition in Vhavenda culture is a way of teaching communal teaching and practice. There are also important traditions handed down in the indigenous Vhavenda initiation schools. Culturally gifted care thus manifests itself daily in proverbs, songs and traditional sayings of the people. It is not written down but communicated orally to all within the community.

The Vhavenda have a proverb that says, “A dzimana u la malombe mukosi a a phalalana,” which can be translated as, “Relatives stingy to one another, when in danger they unite.” Hence blood is thicker than water.49 People become united in times of danger or when someone is in pain. At death too, all differences are put behind and speech after speech puts emphasis on the families and relatives and being united and supportive in times of hardship. Ideally Vhavenda community does not promote stinginess, but generosity to every member of the community. People are encouraged to share the little they have with other people. When they eat together it is always said, “Vhana vha khotsi vha thukukana thoho ya nzie”, which can be translated as, “Children of the same father share a locust's head.” This stresses again that the little people have should be shared. However, some proverbs stress two-way-traffic like “Ndi madanda a pfene.” Its literal translation is, “It is the hands of a baboon.” The meaning is that you help a person who helps you.

5.7.3.2 Unity in community:

Finally then, one important element of Vhavenda community is unity. It is also stressed in many proverbs such as, “Hu na wau a hu pfelwi,” which means that relatives need to visit each other in all circumstances. The Vhavenda have many

49 Asnath E Khuba, The Proverbs as Mirror of the Venda Culture and Philosophy (Pietersburg: University of the North, Dissertatation, 1985) 144.
proverbs that encourage unity. Cooperation is also stressed by, “U lata ngoma hu a langanwa,” which means, “To do away with initiation school is agreed upon,” which stresses that there should be unity in all undertakings. A sense of communality prevails in many proverbs. Proverbs also discourage the spirit of being inconsiderate and encourage good relationships. Hence a person of Vhavenda culture should not eat without inviting other people to be present. Hence, “Tamba ri le ndi mulayo vhuswa ha mudini a vhu liwi,” which means, “Wash your hands so that we eat common food.” The wider message carried is that people should eat together in all circumstances.

5.8 CONCLUSION

The present chapter has highlighted the manner in which Vhavenda people understand pain, indigenous medicine and ways of healing with a special emphasis upon communal healing. Men and women learn how to live and serve one another as imparted in their lives by Vhavenda culture and traditions or indigenous ways of life. Family and communal poverty is not only material but is more serious when it becomes selfishness. Communal poverty is when a person does not want to be there for other people. A person who does not have others in his or her heart is poor. The Vhavenda word for poverty is “musiwana”. It highlights both material poverty and communal poverty. The word is intended to convey the strong meaning that the community should not finally accept poverty in all its forms.

The next chapter discusses a report of the project done for this thesis. It analyses the qualitative research showing some of its benefits.
CHAPTER 6

QUALITATIVE EMPIRICAL RESEARCH ON

PAIN IN VHAVENDA COMMUNITY

6.1 INTRODUCTION

The introduction of this thesis made it clear that the empirical research will be done qualitatively and not quantitative. The interest of this thesis is on communal endeavour in healing pain. It does not want to establish the number of people who practise communal pastoral care. The goal is to find how people practise communal pastoral care and counselling. Thus it needs communities’ responses to the deep issues of their lives to formulate a well-founded theory.

The present chapter will discuss the difference between a “qualitative approach” and a quantitative approach”. The author will define the two approaches comparatively. The idea is to explain why qualitative approach was chosen for this thesis. The author will then discuss the reports of the interviews undertaken. He will formulate some pastoral care and counselling models from communal settings.

6.2 WHAT IS “QUALITATIVE RESEARCH”?

6.2.1 What is “qualitative research” and how does it differ from “quantitative research”?

This section will qualify what the researcher means by qualitative research as introduction to the empirical report. It will do this by comparing it with the quantitative research method.
6.2.1.1 Characteristics of qualitative research

Many researchers on qualitative approach agree that it is difficult to define qualitative research in a simple statement. There are, however, simple general characteristics that they agree that they describe what is meant by qualitative research. Most qualitative researchers agree that qualitative research has these general characteristics: (i). The participant is a researcher. (ii). The emphasis is on the participants’ interpretation. (iii). It is descriptive. (iv). The context in which research is undertaken is important. (v). Its attention is on the dynamic nature of life. (vii). It is flexible and open, (vii). Individual cases are not generalised.¹

6.2.1.2 The participant’s perspective and interpretation

The participant’s perspective plays a role in qualitative research method. People or persons engaged in this research have their perspectives. The researcher’s worldview or beliefs play a role in qualitative research. The researcher is not neutral. Unlike quantitative research where the researcher adopts the posture of an outsider, in qualitative research the research adopts the posture of the insider.² The researcher gets closer to the subject under investigation. The danger is that the participants may manipulate the research and the results. The participants and researchers in particular, have to guard against the manipulative syndrome.

The participants are also responsible to interpret the results of the research. A person who is responsible for interpreting the responses is the participant. Both the researcher and the person being interviewed can and should interpret the responses. Participants

have the right to ask questions or clarification. “The narrative unfolds as storytellers or research participants recount their life ‘stories’ to a listener and interpretive measures are applied, through teller and listener together, to gain a holistic understanding.”³ There are no other people to interpret the interviews session in better way than the participants.⁴

6.2.1.3 The descriptive nature of this method and individual cases

The descriptive nature of this method: The questions are formulated in descriptive form—they do not need short answers like, “yes” or “no”. Qualitative research questions guide the discussions and stories. Questions should be formulated in such a way that the interviewees narrate their lives’ stories. Thus their experience and the development of their pains are unfolded. The narrative will also give the interviewees’ experience of how other people like family, friends, church and community are affected by their pain. The narrative becomes clear as storytellers or research participants tell their life stories to a researcher who is a listener and interpretive measures are applied through teller and listener together to gain a holistic understanding.⁵ The author will do this by asking interviewees some clarification questions like “What does that mean?” or “Does that mean . . .?”

Descriptions of individual cases: Individual cases are described to explain the existence of phenomena. The two researches (quantitative and qualitative) also differ

---

⁴ Cf. “. . . a good informant should be thoroughly enculturalised (hence fully aware, deeply involved and informed in their particular cultural world) currently involved (their account is hence not simply a reinterpretation of the past experiences but a statement of current practices) and non-analytic . . .” In Kenneth Plummer, Documents of Life: An Introduction to the Problems and literature of a Humanistic Method (London: George Allen and Unwin, 1983) 89 – 90.
⁵ Ibid.
in describing individual cases. Quantitative is identified with “nomothetic”
description. “A nomothetic approach seeks to establish general law-like findings
which can be deemed to hold irrespective of time and place.”6 One case is viewed as
the representative of the wider population. Nomothetic approach generalises its
findings. Qualitative approach, on the other hand, is identified with “ideographic”
description of individual cases. An ideographic approach “located its findings in
specific time periods and locales.”7 A case should be looked at in its context. “The
qualitative researcher frequently conducts research in specific milieu (a case study)
whose representativeness is unknown and probably unknowable, so that the
generalizability of such findings is also unknown.”8

6.2.1.4 The importance of the context in which the qualitative research is
undertaken
The context in which the research is undertaken has influence on the outcome of the
research. The qualitative researcher believes that the context is dynamic and not static.
Hence it is important to look at it. This is different from the quantitative researcher
who “conveys a view of social reality which is static in that it tends to neglect the
impact and role of change in social life.”9 Thus “the qualitative researcher is in a
better position to view the linkage between events and activities and to explore
people’s interpretations of the factors which produce such connections.”10

6 Alan Bryman, “The Debate about Quantitative and Qualitative Research,” in Qualitative Research
Volume 1, eds. Alan Bryman and Robert G. Burgess (London: Sage, 1999) 41
7 Ibid.
8 Ibid. 42
9 Ibid.
10 Ibid. 43.
6.2.1.5 Attention to the dynamic nature of life by focusing on processes rather than single events

The focus of qualitative research is on what is happening in life in general. This point is clear when looked at from the notion of qualitative research. The starting point in quantitative research concerns the standing theories and concepts. The research in quantitative form is also to test a theory, not mainly to discover what is out there. It uses theory as a precursor to an investigation. “Quantitative research is often depicted as a routine practice whereby theories and their concepts are simply operationalized with a view to verify their validity.”11 Qualitative, on the other hand is concerned with the discovery of theory rather than verification of theory.12

6.2.1.6 The flexible and open approach: The hallmark of qualitative approach

Qualitative approach works according to the circumstances. It is not rigid. Comparison with quantitative research can help to capture what is meant by the view that qualitative research is not rigid. “Quantitative research tends to adopt a structured approach to the study of society. To a large extent, this tendency is a product of the methods with which it is associated; both surveys and experiments require that issues to be focused upon be decided at the outset.”13 Qualitative research, in contrast, is flexible and open. Flexibility and openness of this research is in the sense that everything the researcher observed is potentially data. It is open in such a way that

11 Ibid. 40
12 Ibid. 39
13 Ibid. 40
there is a warning to the researcher that he or she should limit research to the scope of his or her projects.\textsuperscript{14}

### 6.2.1.7 Quantification and measurement are minor in qualitative approach

Qualitative research differs from quantitative research in that quantification and measurement\textsuperscript{15} are the main features of quantitative research while they are minor features in qualitative research. Due to these features, in general, quantitative research has less room for flexibility and heavily relies on statistic methods for analysing research data. “Some researchers argue that there are creative and imaginative ways of scientific study to understand human interaction, such as narrative perspective.”\textsuperscript{16} At first narrative research was considered with suspicion, but has since gained increasing importance in the social sciences. “Narrative is now understood as a way of constructing reality.”\textsuperscript{17} It is accepted as equivalent to what one finds in other research traditions like “positivist / post-positivist, critical theory, interpretive and post-modern.” Qualitative research is preferred in this study then because it has characteristics that are essential for understanding pastoral care and counselling to people who are burdened by pains. A research of this kind is exploratory, flexible, data-driven or text-driven and also context conscious, which are the characteristic of qualitative approach discussed above.

\textsuperscript{14} Ibid.


\textsuperscript{16} Ibid.

\textsuperscript{17} Ibid.
6.2.2 Why should we use Qualitative Research methods in Practical Theology?

Practical theology deals with the lives of people. People’s lives are complex issues. Thus they cannot be analysed in a single rigid method. Statistical analysis is important because it gives the figures of the issues in communities. It, however, lacks the closer contact and warm touch which is an important component of pastoral care and counselling. Quantitative research does not necessarily need the close contact and warmth between the researcher and the interviewee.

Finally, quantitative and qualitative research methods need each other. The preference of qualitative, in this thesis, does not mean that quantitative research cannot contribute to theology. “An important advantage of qualitative research is that it builds on skills that theologians generally possess, such as interpersonal skills, interviewing and text analysis skills.”18

Many quantitative researchers do not deny the utility of qualitative research. They see “it as an essentially exploratory way of conducting social investigations . . . Precisely because of its exploratory and unstructured approach, qualitative research is often depicted as useful as a means of throwing up hunches and hypotheses which can be tested more rigorously by quantitative research.”19 This argument does not mean that qualitative research method is a second rate activity and cannot stand on its own right.20

18 Ibid.
20 Ibid. p. 37.
The contact of the researcher with the people being studied does not exist sufficiently in quantitative research. There is a closer contact between the researcher and the people being studied in qualitative research. It should be clear that qualitative research fits this thesis well. Hence, empirical research is done through the qualitative research. The interview is not only numerical but an in-depth one.

Here it digs down to the roots of pain for research purposes and for care purposes. This research is not about “corrigible” questionnaires. Corrigible means “capable of being corrected” 21 Corrigible questionnaires are those questionnaires, “which in principle, could be verified as matter of fact, like, ‘How many cigarettes someone smoked in a week?”’ 22 This type of questionnaires does not need a story. They need calculation of the cigarettes smoked by a particular person in a given week.

Questionnaires of this research are “incorrigible” because the idea is not to find the right and wrong answers but life as a person is living it. Thus the incorrigible questionnaires are those questionnaires “which in principle, are unverifiable because they are matters of self-knowledge. These include opinion, attitude, beliefs, understandings and so on.” 23 This thesis is about the life of people—their suffering and the way they cope and help each other in that suffering. Qualitative research is thus a suitable method for this thesis. It allows the life stories to be narrated and heard. Thereafter the stories are interpreted. Pain and suffering among the Africans are not verifiable matters of fact. They are there and people are living with them. The number of people interviewed still plays a role in qualitative research. It is the nature

---

23 Ibid.
of the theme that necessitates the qualitative approach. The issue is not how many people but how helpful communal care is. Quantitative and qualitative researches do not oppose each other but support each other.24

In this interview protocol the researcher will be testing the presuppositions held by his literature and potential theories that arise from it. Bryman25 talks of verifying the validity of the theories held by the researcher. The communal pastoral care is a voluntary action that comes from the depth of people’s hearts with or without their full knowledge of it. The interview will follow the following principles: (i). the people’s worldview is important in care-giving;26 (ii). closeness to the people, which entails that the researcher becomes an insider not an outsider.27 (iii). The interviews will be alive and open.28 (iv). The interview ensured that there is quality.29

6.3 STEPS OF PLANNING THE INTERVIEWS

6.3.1 The Pilot Interviews

Four interviews are conducted as pilot interviews. This is in order to prepare for the main interviews.

The purposes of pilot interviews are the following:

The questionnaire is tested: The first purpose of the pilot interviews is to test the

26 Ibid. 38.
27 Ibid.
28 Ibid. 40.
questionnaires. As indicated above, the questionnaires designed for qualitative research should give enough space for people to tell their life stories. After the evaluation of the pilot interviews, the researcher decided whether the questions should be used as they are or need to be reformulated.

It is important to control the questionnaire because they are the vehicles of the whole process. Therefore there should be the right question asked in the right social set-up of the interviewees. This is to allow for a free flow of information. The style of qualitative research “is conversational, flexible and fluid.” The information and even healing comes out “through active engagement by interviewer and interviewee around relevant issues, topics, and experiences during interview itself.” Data is collected through the “interactive, situational and generative approach.” It contradicts “the more structured composition and uniform style of survey interview.”

Questionnaires, which are not in the interest of the social setting of the interviewee, tend to block the free flow of the information. The “asking” and “listening” should allow for the lively conversation, which are flexible and fluid. Mason shares her experience in this type of problems as a warning in the empirical project. To conclude the reason why the questionnaire needs to be tested Mason’s experience is relevant:

“In fact, my own research into family and kinship suggest that interviewees often ask for clarification of abstract and generalized questions because these kinds of questions do not make immediate sense and people find it difficult to formulate an answer . . . This is a problem, because if further clarification and possible contextualization is required for the question to make sense and for an answer to seem possible, then it seems likely that there is no

---

31 Ibid.
32 Ibid.
33 Ibid.
The choice of the interviewees: A second purpose of pilot interviews is to make a choice of who shall be studied. The thesis wants to look at communal care for the people in pain in Vhavenda culture. There are various types of pain and there are different classes of people in the same culture. In a culture one normally finds there are three classes of people. These are the marginalized people, the high class people and the common people. The outcome of the pilot study helps to make a choice of people to be studied.

Identify the people: The third purpose of pilot interviews is to identify people who are deep in Venda culture. This is done under the impression that a good informant should be thoroughly “enculturalised.” An “enculturalised” informant means a person who is fully aware, deeply involved and informed in their particular cultural world. That person should not be out of touch with that culture but should be currently deeply involved in the culture. This means that the informant’s account is simply to reinterpret the past experiences but also with a statement of current practices. The “enculturalised” informant should be non-analytic. This means that that person should not be overly intellectual and overly abstract. The selection of such a person is important because not every person is like that today. The media and television introduce people to different cultures. But there are people in certain places who are fully aware of their culture and are in one way or another deeply involved in it. In a

---

34 Ibid. 228.


word, they are more traditional.

The relationship between the researcher and the subject: The fourth purpose of pilot interviews is, to establish a relationship between the researcher and the subject. A research about life drives the researcher into the subject. “Life history research, perhaps more than any other, involves the establishment and maintenance of a close and intimate relationship with the subject often for a number of years meeting regularly each week.” The researcher has been serving the people in pain for seventeen years as a minister of the church. He served in Venda culture for fifteen years. The researcher was surprised by what people do while in pain and their communal healing practices coming from the culture.

The need to find an easily accessible place and time: The fifth purpose of the pilot interview is to find an easily accessible place and time for the researcher and participant. The research needs to identify an accessible place and time in order to collect good data. The researcher has chosen villages in which it was easy for him to reach and it does not take much time to reach.

6.3.2 Gathering data

There are mainly three means of data collection. Data collection has undergone different developments.

Writing: At first people were asked or encouraged to write down their life history. There was a guideline to help them know what they must write. This type of data collection was impossible for the people who cannot read and write in the Western

\[37\] Ibid. 90.
\[38\] Ibid. 89.
sense. This interview is conducted with illiterate communities. Some who are referred to as literate do not read and write accurately—they struggle to do it.

**Tape-recorder:** The advent of a tape-recorder shifted this approach tremendously. The tape recorder is handy because the normal discussion can be recorded. People need to be assured that the machine is just taking the discussion alive. The information is for the study and it will help their communities.

**Taking notes:** The third way of data collection is taking notes while discussions are in process. It should be done in such a way that it should not block the flow of information. In using the tape recorder, the notes will be on the non-verbal communication, like smiling, shaking the head and hands, tears and other manifestations of emotion.

The researcher has opted to use a tape recorder. The interviews took place in the interviewees’ home. The researcher suspects that there may be many things going around in the home. They are not viewed negatively because they are part of life. The tape recorder lets the information flow without disturbance. The discussions are made lively and are not artificial.

The participants were told the purpose of the interview. The stories from the interviews are transcribed in a short form and interpreted.

### 6.3.3 The Language of the Interview

The language of the interview will be Tshivenda. It will be translated in English. The English translation will focus on the theme. Many things can disturb the interviews in a communal setting. However it will be done at the participant’s home. One family member may come home unawares of what is taking place in which case a participant
may answer back, a dog or a hen may come in and disturb the participants does not want. There can be many sounds of cocks, cows, dogs, etc that will not be transcribed. This does not mean that they are not important, but the participants must remain focused on the main theme of the interview.

6.3.4 Interview setting

The author wants to use the picture of people sitting down after walking a thorny path and help each other to take out the thorns. In Tshivenda it is called *u vangulana mipfa* (taking out thorns from each other). Thorns here are used as a symbol of pain. It hurt if not handled well.

The author wants to support this concept because the theme of this thesis is healing pain by communal pastoral care. Mutual support is the theme of the traditional Africa. Hence also in Vhavenda community they are daily helping each other.

6.3.5 Qualitative approach renders a service to participants

The qualitative interview approach is not just a survey, it is a service. The people the researcher talked to are touched and they also touched the researcher’s life. After the interview no one is the same. This is the scenario when people travelling the thorny path, have to sit down and take out thorns from each other. After taking out thorns they walk better than before.

The researcher will follow a thematic approach within the broader approach of qualitative. The themes will come from the candidates of the interview, not from the
researcher. This means that discussions in the interview will uncover themes of pain people are struggling with in their lives. This will be done live as the candidates of the interview are relating their stories; the author will be uncovering themes in their narrative and stories. In the report researcher will analyse these themes. The author will look at how each theme comes in the discussions and the feelings or body language of the candidate in speaking on each theme. The interest of the researcher is on how the themes are or will be handled communally.

6.4 REPORT ON PILOT QUALITATIVE RESEARCH

6.4.1 Introduction

The verbatim reports of the pilot interviews are in appendix 1. Four persons were interviewed testing the interview instrument. The initial idea of the pilot interview was to find out whether the questions are understood by the people in such a way that they will serve the people. It is called the pilot research because the author thought that those questions, which mislead or are not clear to the people, could be altered or removed.

The pilot study was necessary because the author formulated the questions with the theme of the thesis in mind. Those questions were not adopted from other interviews nor were handed to some experts for testing them. They were simple questions using the simple language and concepts of the Vhavenda. They were to be formulated in such a way that people can talk freely within the theme. The idea of the pilot research was also to test whether people would talk freely.
6.4.2 The interview questionnaire

The author calls the questionnaire tool, “Kha ri vangulane”. The translation is, “Let us take out thorns from each other.” It means that life is a journey in a jungle. The Vhavenda used to walk in the jungle and accidentally trample on the thorns. Being communal a person rarely walked alone. They usually walked in groups. So when someone trampled on thorns, they sat down and used thorns to take out the thorn from each other. It is hard to do it for yourself, though it is possible. You need someone to do it because it is not easy to see under your foot. It is painful, but after it is done, the pain is released.

The author is amazed by these powerful communal experiences. Today people walk on the paved ways or use strong shoes on their paths. However, there are still emotional thorns to cope with in life. They hurt in many ways. Physically, people do get sick in their lives. There are serious sicknesses without cure. Like the thorn in the foot they need someone or other people to have time to sit down and take out the thorn. The instrument to take out these thorns of life is to live the life of “ubuntu,” which is to visit and talk to each other.

The “ubuntu” implies to have time together. The “kha ri vangulane” instrument is not a professional visit and talk. It is the way people visit each other and talk about their pain and feel the same pain together. It is interesting to note that as a patient relates the painful story, the counsellor (visitor) becomes a healer by listening and commenting on the sickness. The Vhavenda’s principle is that “U nembelela ha shamba a si u wa halo,” translated as, “The hanging on air of a pumpkin is not its downfall.” It means that “your sickness and pain does not mean that it is the end of your life—you will be healed”. There after the counsellor relates his or her story too
and the patient by listening, nodding, looking at the counsellor becomes a healer. It is a two-way traffic.

**6.4.2.1. Kha ri vangulane (The interview guide)**

The interview was done in Tshivenda. In between the set questions there might have been some questions to clarify the explanation. It was made as lively as possible. The time of the interview may run from 20 minutes to 45 minutes. The difference depended on the participation of the participants in the form of question and comment or story telling. There was no time to prepare the answer. Interviewees heard the question for the first time and shared promptly what they knew. (See questionnaire in appendix 1)

**6.4.2.2 Grouping the interview questions**

There are five groups of data contained in these interview questions. Each group has a special task, all revolving around the theme of communal pastoral care and counselling to people suffering from pain. The ideal is that the interviewee should respond to the questions from different angles. The tools indicated above can be grouped into: (i). Questions 1 and 2, (ii). Question 3 – 6, (iii). Questions 7 and 8, (iv). Questions 9 – 13, (v). Question 14.

Group 1: Questions 1 and 2 focus on the main theme of pain in the interviewee’s life. They wanted the interviewees to tell their experiences of pain. There was no preparation of the questions for the interviewees. It was expected that any pain that struck his or her memory could be shared. Question 2 wanted to test whether the interviewees knew what pain and suffering caused in their lives.

Group 2: Question 3 – 6 focused on the theme of self and communal care. These questions wanted the interviewees to share their struggle to cope with their pain and how the family, which is the basic unit of communal care, helped to cure the pain.
Question 3 wanted to know what mechanism the interviewees used to help themselves to cope with the pain. Question 4 wanted to get the general feeling of other people helping in pain. Question 5 focused on one particular group of people around the interviewees, their neighbours. The Vhavenda used to say: “Thonga ya kule a i vhulahi nowa,” translated as “A club (knob kier) that is far away cannot kill a snake.” It means that your relative can help you but when they are far away they can’t help you, even if they want to, because when you are in trouble they will hear it when it is over. The neighbours are people who can hear the shout of help and jump in to help. This question wanted to test how the interviewees are related to their neighbours. If they helped in time of trouble they have good relationships but if they did not it is a sign of a distance of that relationship. The question wanted to test whether the interviewees knew what distanced them. There are many of these walls in communal life like the historical background or tribalism, the differences of the ancestors, the mistrust or suspicion of witchcraft and others. Question 6 wanted to test the family links of the interviewees. The family has no boundary in times of pain. The Vhavenda say, “Kule ndi hu si na wau”, translated as, “You view a place to be far when you have no family member.” They mean that no matter how far it is, where you have your family member you will reach. They also say that “Hu na wau a hu pfelwi,” translated as, “People should not hear for you matters concerning your family member.” They mean that with matters related to your family members you must get first hand information. The pastoral communal care focused on this group of questions was that performed by people close by, either locally or in relationships. Group 3: Questions 7 and 8 focused on the church community’s pastoral communal care in the healing process. These questions wanted to test whether the interviewees knew about the church community in their area and what the church is doing to heal
the pain of the people. Question 7 wanted to test what the church community did to help the interviewees while in pain. If they did nothing, it went on to ask the reason why the church community did not help. The parable of the Good Samaritan displays the action of the church community (Luke 10: 25 -37). It cares even when the priests and Levites do not act. The cry of pain is their being called to serve regardless. The ideal is that the church community is a new family and new community. In the case of broken ties of communal life, it should serve as a uniting force that puts pieces together. The same implies for question 8. In communal settings pastors do not serve as separatists. They serve the community as a whole, even the untouchable or the marginalised community.

Group 4: Questions 9 – 13 focused on the traditional resources of healing, which are common to Vhavenda tradition. The ideal was that they should share, without shame, how their culture helped to bring healing. Question 9 assumed that in the Vhavenda community there are traditional healers. It also wanted to know the interviewees’ reasons for either consulting or not consulting them. There are different arguments for either consulting or not. This question wanted to test whether people use those arguments. Consulting the traditional healers goes with rituals (question 10) depending on the type of pain. Vhavenda rituals range from personal security (ndinda mvhili) to home security where the fence of the home is treated to prevent evil spirits or witchcraft from getting in the home and consequently in the house or bedroom while people are asleep. Some people did perform traditional rituals but had no peace about it. They hide it. Question 11 wanted to test the feeling of interviewees when visited and helped by ordinary people who are not attached to them as neighbours or family members. They may not have a high position in the community. The ideal is that the communal healing resources are not only vested in structures but also in
informal services of the community. Questions 12 and 13 wanted to test whether the interviewees were able to judge what beliefs and actions should be kept and what should not.

The ideal these questions wanted to promote was that people need not throw away all their cultural inheritance. This is a big question. Some cultural elements need to be kept in the new era or situation. There are good things in cultures which need to be altered to fit the new culture because culture moves with the time, it is never static. Having said that, it does not mean that every thing needs to be adopted or forced onto the new culture. Some cultural elements get a total replacement, so that they die a natural death. Some can be judged as being the negative part of the culture on humanitarian grounds, like cannibalism or ritual killing and the like. Others can be taken away as people learn and come to the point that they say that they do not need them.

Group 5: Question 14 focused on the views of the interviewees as they were sharing in their stories. It wanted to test whether the interviewees had a way to deal with pain, and if they could, whether they were able to teach others. It is probable that the advice you give others in normal cases is the advice you give yourself.

### 6.5 REPORT ON THE PILOT INTERVIEW

Four people were interviewed to test the tools (See sample in Appendix 2). The author chose a poor village, which is situated about seventy kilometres from the town. The idea of choosing this village was to find how people without much of the modern resources like hospital, social workers, police station, but having other people and their culture coped with life and pain in particular. It is touching to see people living
in a poor condition. If you take one person from the town, the first comment would be
that he could not live in these conditions.

The author reflected that these people have mechanism to help them cope with life.
They call their village their home. It is a small village of two hundred people.
The name of the village was not mentioned for the sake of confidentiality. The
appendix will not reveal or give clues of the village. The names of the people were
not mentioned for the same reason.

The four people in the pilot interview will be referred to as Mrs A, Mrs B, Mrs C and
Mr D. This is done to hide their real names. The author thanked them for allowing and
giving time for talks of their painful experience. They believed him and shared things
from the depth of their hearts.

### 6.5.2 The personalities and characteristics of the pilot interview participants

Here are the short descriptions of the participants.

**Mrs A:**

At the time of interview, Mrs A was a widow in her mid fifties. She explained that her
church was one of those churches that play drums. The author understood this church
to be one of the African Independent Churches. During the interview she was staying
with her mother-in-law who was old. She was happily assisting her, as she was too
old to cook and even to washing herself. Her husband had married a second wife
while in Johannesburg. This second marriage turned her life upside down because her
husband abandoned her. He stayed with his new wife in town. He did not send money
to her as he used to do before the second marriage. She was committed to her
husband. She struggled to remain in her marriage, which turned into out to be
polygamy, as she confessed, but she endured. The second wife left her husband to go to her parents, which in effect was divorce. However, Mrs A remained until the death of her husband. Mrs A did not have a good education but at least she could read and write Tshivenda.

**Mrs B:**
When interviewed, Mrs B was a single mother in her late twenties. She was staying with her parents. She was not employed. Her parents supported her together with her child. Her father was migrant labourer. She stayed with her mother at her parents’ home. She was not a member of a particular church but attended different churches at times. During the discussion she looked weak. She complained of her health. Her mother was at home during the interview, but at a distance (because she was not sitting with us but was busy with something) commented about her illness thinking that the interviewer could help. Mrs B can read and write Tshivenda.

**Mrs C:**
Mrs C was an old granny in her seventies. Her only income was her old-age pension grant. She was not a member of the church, though she respected the church and ministers of the churches. Her husband died some years ago. She remained with her children hoping that they would bury her one day. Her worry in life was that she buried her daughter. Children were dying, who will bury their parents. She was still active. She was able to walk and do some work at home. She cannot read and write.

**Mr D:**
Mr D was in his late thirties. He was getting a social disability grant. He had been employed by a road construction company and got injured on the job. A car knocked him down while at work. He could not walk properly due to a spinal cord injury during that accident. His marriage was not stable. Sometimes he hired people to help him at home. He had been a member of the church but left it. He could read and write Tshivenda.

6.5.3 The main themes from the pilot interview

The questions in general evoked a deeply felt response from the participants. The interviewer was also shocked to note some of the problems caused by pain in people’s lives. Some could list many events where they experienced pains, as an indication that pain was real in their lives here and now. Some of these surprises will come up in the main interview.

6.5.3.1 Pain is real in people’s lives.

The stories of these four participants reveal that there is real pain in people’s lives. The interviewer did not visit the people whose narrative or stories he already knew. He interviewed the people about whom he had no knowledge regarding whether they had pain or not. It was clear to him that everyone has pain in one way or another. Life in this world is full of pain as the story of the fall of humanity into sin suggests in Genesis 3.

Mrs A had a marriage problem, which gave birth to an economic problem. She was pained throughout the whole process.

Mrs B and Mr D had health problems. Their sickness brought other kinds of pain like social and economic, as they could not work due to their poor health.
Mrs C suffered from the pain of losing her daughter. She wanted to be buried by her daughter and that did not happen. Instead she buried her daughter. And that pain was still lingering around her when she spoke to date. One could see that pain had taught her to care.  

6.5.3.2 A desire for healing

Mrs B’s mother intervened in the interview. She thought that the interviewer might know of someone who could heal her daughter. The medication she was using was not effective. She wanted to try the other one. People in pain will do anything they are told if it can heal their pains. Mrs C visited the people of the church (African Independent Church) and a diviner was called for other things. She wanted holistic healing. Mr D heard stories that people dancing “malombo” and becoming better or even healed. He believed these stories.

6.5.4 Changes of questions for the major qualitative interview

The interviewer was of the opinion that he could use many pilot questions in the major interviews. Some questions needed to be clarified and qualified to let participants know exactly what was expected of them.

Question 1, question 2 and question 3 were not changed. Question 4 was confusing in this position. The question was placed in another position and became question 8 in the revised version. Question 6, about the extended family, was brought nearer to the section of talking about self and communal care. If the responses indicated that there was no help interviewees were asked to give what they thought was the reason. The new question 4 was thus formulated as: “Muta kana mashaka vho thusa hani kha u fhedza vhutungu havho? Arali hu si na we a thusa, zwi nga vha zwo vhangwa nga

“mini?” It is translated as, “How did the extended family heal the pain? If no one helped, what could be the reason?”

Question 5 was not changed. Question 6 was moved to another group as mentioned above. Question 7 became question 6. Question 7 became question 8. The concept of the question 4 was included in question 8. Question 8 would thus now be formulated as: “Ndi zwifhio zwe vhanwe vhathu kana tshitshavha nga u angaredza tsha ita u thusa kha vhutungu havho?” Its translated is, How did other people or the whole community help during that time of pain?

Question 9 and question 10 were not changed. Question 11 needed to be clarified as indicated and more explanation could be given when necessary. “Vhone vho pfa mini vho dalelwa nga vhathu zwavho? Vhathu zwavho ndi khou amba vha si vhafunzi kana nanga / mungome wa Tshivenda.” (Ndi khou amba vha songo vhetselwaho mushom wa u londa tshitshavha, hone vha thusa ngauri muthu ndi muthu nga vhanwe). It is translated as: “How did you feel when ordinary people visit you? By ordinary people I mean those who are not pastors or a traditional healer?” These are people who are entitled to help not by their profession but because they are human beings or “ubuntu”. Question 12, 13 and 14 were not changed.

After the changes the grouping were now as follows:

Group 1: Questions 1 and 2 focus on the experience of the major theme of pain.

Group 2: Questions 3 – 5 focus on the major theme of self and communal care during pain.

Group 3: Questions 6 and 7 focus on church in its communal and pastoral role in healing pain.

Group 4: Questions 8 – 13 focus on the traditional healing in the traditional setting.
6.5.5 Conclusion

This pilot study forms the basis of the main interview. The author analysed, critiqued and interpreted several major themes as they emerged from the interviewees. These key themes also provided a framework and a starting point for the major study although other unexpected themes might appear from the large sample of the participants.

The main interview used ten participants using the revised tools indicated above. This served the purpose of this thesis. The reason for only ten participants is that the empirical study in this thesis is meant to be exploratory and serves to illustrate the key theme or concepts deliberated in this thesis.40

6.6 REPORT ON THE MAJOR QUALITATIVE RESEARCH

6.6.2 Introduction

The major qualitative research follows the tested and modified questionnaire born from the pilot research. The pilot research was a trial of the questions of the interview, while the major research used the modified version of questionnaire. This does not mean that the pilot research is insignificant but it was an important step in the research process. The formulation of the major questionnaire includes revisions

intended to make questions clearer and the instrument more effective. The focus and
the purpose of finding out about pain and community resources did not shift.

6.6.3 The personalities and characteristics of the interviewees

The author interviewed ten people from four different villages in the Venda
gеographical area. These villages are Vuvha on top of the mountain south of
Nzhelele, Thononda on top of the mountain north of Nzhelele valley, Mphaila and
Tshikuwi which are in the Nzhelele valley.

The participants were five females and five males. Four were pensioners and six were
between thirty-three and forty-five years old. They are thus representative of mature
adults.

For confidentiality I used a number for their names in the interviews. The first one’s
name is Mrs 1 and the last person’s is Mrs 10.

The sample included the following persons:

1. Mrs 1 is an old lady of about seventy-five years old. She stays at Vuvha a
village on top of the mountains south of Nzhelele valley. She is illiterate,
who blames this fact on her upbringing on the farms. Her husband died
some years ago. She lives with her married son, her daughter-in-law and
her grandchildren. She gets her old-age pension grant. She can do a few
chores at home because she moves with difficulty complaining of her legs.
She is a member of one of the African Independent Churches.

2. Mrs 2 is a female in her late sixties. She was able to read but cannot now
because her eyes are losing their sight. She stays at Vuvha (as Mrs 1). Her
husband died some years ago. She stays alone in her house. Her son, who
works in a distant city supports her financially. She is still active working in the house, cooking, and ploughing the field, although she complains of her legs. She is a member of one of the mainline protestant churches.

3. Mr 3 is a male of seventy years old. He stays at Vuvha. He can read though he complains of his eyes which are losing vision. He walks with difficulty due to an injury some years ago. He is not very active, as he cannot walk well. He is a pensioner. During the interview he was staying with his children while his wife was staying with one of the older children. He is a member of one of the mainline protestant churches. He cannot go to the church anymore due to his health condition.

4. Mr 4 is a male of about seventy years old. He stays at Vuvha village. He can read with difficulty because he did not practise it having had only little schooling. He is still very strong because he works in his field and at home. He is a pensioner. He stays with his wife and children. He was a member of one of the African Independent Churches. At the time of the interview he was not attending a church.

5. Mrs 5 is a female of forty-five years old. She stays at Tshikuwi, a village in Nzhelele valley. She is illiterate. Her partner, (they were not properly married culturally, or legally), died three years ago (at the time of the interview). She stays with her children and grandchildren in a small rondavel house (hut). She was living on the children grants of some of her children and grand children. She was not a member of the church but did attend some churches around the area.

6. Mr 6 is a male of sixty-nine years old. He stays at Thononda which is on top of the mountain north-east of Nzhelele valley. He can read and write.
He worked as an unqualified teacher some years ago. He is a pensioner. He was married culturally but his wife went to her parents about ten years ago. He has been staying alone at the time of the interview for more than ten years. He hires people to help him using his pension grant to pay them.

He was not attending his church at the time of the interview.

7. Mrs 7 is a female of thirty-three years old. She stays at Thononda (as Mr 6). She can read and write. She is married, staying with her husband who works in one of the Gauteng cities. She works at home but feels unemployed. The support of the family comes from the husband. She attends one of the charismatic churches.

8. Mr 8 is a male of thirty-nine years old. He stays at Thononda. He can read and write. He is unemployed. He is married culturally but it is shaky, as he is not employed. He depends on the pension grants of her parents. He is not a member of the church.

9. Mr 9 is a male of thirty-three years. He stays at Ha-Mphaila, a village down in Nzhelele valley. He is literate. He is employed as a security guard and works in the Nzhelele valley. He is married. He stays with his mother, wife and a child. He is a member of one of the mainline protestant churches.

10. Mrs 10 is a female of thirty-seven years. She stays at Ha-Mphaila (as Mr 9). She can read and write. She is not employed. Her husband works and is the one supporting the family. She, however, does some work in the garden next to the river where she plants some vegetables to help at home. She attends one of the mainline protestant churches.
6.6.4 Themes that came out from the interviews

These are the main themes that came from the main project. Ten people were interviewed. They shared their painful stories as guided by questions of this project. Some themes that came from the pilot interviews were confirmed again in the main interviews.

6.6.4.1 Pain is part of life

Pain comes and goes away. Mrs 1 said it in a simple way responding to the question of her most painful experience. In her seventies she does not recall how many times she was in pain in her life. Pain came in her life on several occasions and healed. Vhavenda say that, “Vhulwadze ndi mueni,” literal they are saying, “Sickness is a visitor.” Visitors in traditional Vhavenda culture come without appointment. “Mueni” comes and goes. Likewise sickness comes without appointment. “Mueni” (a visitor) is part of their lives. When traditional Vhavenda cook, they make sure that there should be leftovers for the visitor. Pain rotates in a person’s life in such a way that life becomes a cycle of pain and less pain. People say that they are in good health meaning that they have less pain. Thus pain is part of life in such a way that even in good health there is a pain, which is less. In Africa there is no one hundred percent health or happiness. At the same time there is no hundred percent pain. The Vhavenda have an expression that carries this idea, when they say “Dakalo li tula u lila, u lila ha tula dakalo,” translated as, “Happiness calls mourning and mourning calls happiness.” The meaning is simply that one cannot be in joy forever and also in pain forever. There is a time for happiness and also a time for pain. It is the custom that when people greet each other start by showing that they are feeling good, but as the
conversation goes they would point some pains in their lives in one way or another:
physical, social, economical, spiritual and others.
The ten people I interviewed experienced different types of pain. Each one’s problem was to choose one experience among many experiences. I was not shocked to observe this. The shock would be to talk to a person who has no experience of pain. The Vhavenda expression “Muthu a si tshitanda,” translated as, “A person is not a stick,” means that every human being, unlike a stick, feels a pain. The stick has no blood, but a person has. There were some sicknesses of children that were regarded as stages of growing. Though they treated them medically, they used to comfort each other by saying the child was growing. Some refer to coughing as the chest exercise. Another expression referring to pain is, “Tsho bebwaho tsho fa,” translated as, “That which is born is dead.” It means that once one is born he / she is to have pains and die in one way or another. Pain is closely related to death. Hence the fact that every person suffers pain indicates that every person is going to die one day.

This experience, I hope, is found in every culture and nation. Some are more aware and some less aware when they come to the point of pain.

All ten participants had pain experiences in their lives. Experiences of pains differ from person to person and situation to situation. Some have a pool of painful events in such a way that it was not easy to choose a good event for this project. It was not easy to explain one’s painful experience. Some of the pains were in the people’s lives for a long time. It was difficult to open and share them. The fact that the interviewer was a stranger to them might have contributed to this effect. One reason why it was not easy to open up those closed wounds may be the fact that it is still painful even after long time. Hence they put something to cover it from foreign winds and dust.
6.6.4.2  Pains occurs beyond people’s control

Traditional Africans looked at pains and tried to understand the background of their source. It was believed that the source of pain was more powerful than a person suffering in that pain. Hence there was a feeling that “You can’t do anything about it”. On the same note “other people can’t help you.” People do not have mechanism to defeat it. From this understanding comes an understanding that there are people who have been empowered with extra ordinary power. In interviewing Mr 4, there was a belief that some traditional healers have power to an extent that they can bring back the dead or people whom people believe are zombies. Mr 4 lost money trying to relive his father who was suspected to be a zombie. He needed someone with that supernatural power in order to be healed from that pain. He used his money but his father did not come back from the dead. Mr 8 also said that his father is using money to take him to all types (Western and African) of medication. He too could not see the healing anticipated.

Today there are prophets who use more or less the same divining methods. They are called prophets because they pray in order to relieve pain. Some of them claim to have communion with God the Creator. On the other hand some claim to have contact with the Creator and the ancestors at the same time. They pray both God and ancestors for healing. (Mudzimu na vhadzimu).

Hence even today’s prophets claim that they have been enshrined with extraordinary power. The fact is that it is generally believed that ordinary people do not have the power to deal with pain. Thus people in pain visit people clothed with extra-powerful powers because it is believed that they are the people who can handle people’s pain. This belief has its own frustrations. People do not always find what they were expecting.
The interviewees said that pain is powerful. Hence it needs powerful means to cure it. According to people’s beliefs there are people who are given such power by God the creator or a Supreme Being. Every community has people with these powers to heal the community in all sickness or disasters.

This belief prevents ordinary people from doing much in the healing process because people with healing powers serve on the behalf of the community. The community could help by co-operating with the instructions of those with healing powers.

Thus in the interviews the communal help is minimal. This came out in a few interviewees. In the case of the death of Mr 9’s father the community came to contribute gifts for the funeral, though Mr 9 was critical in that they are forced gifts by village agreements.

It must be clear that this understanding of community is also supernatural, in the sense that it has the strength to heal and to kill. If it supports someone in pain, it makes it easy for that person to carry the pain. It can kill or cause a severe pain when it does not support a person in pain. There can be the case when a person has caused shame to the community or is suspected of practising witchcraft. Once the community rejects a person, it is equals to death because in communal societies a person lives for other people. Hence when all people withdraw, a person is left alone which is equal to death.

6.6.4.3 The family support

In interviewing Mrs 1, it was made clear that without family support, a person in pain can’t survive. Mrs 7 could not forget the efforts of her old aged father in support of her daughter. When someone in the family is sick family members are expected to visit. Failing to do that a member is suspected of witchcraft. In most of the interviews family support was not recalled. In some cases, only a few family members are
singed out to have done something. This is an indication of the fading away of family bonds. People are moving away from traditional family bonds, to individualism. The communal pastoral care is becoming an exercise of the past.

6.6.4.4 **The neighbour support**

Neighbours are part of the family. Vhavenda have an expression that says: “Mutsinda ndi kwine, shaka ndi muvuhulahi,” translated as, “A stranger is better, the relative is a murderer.” It means that a stranger can help while a relative ignores. This expression motivated Vhavenda to work with their neighbours. Another expression that congratulates and invites other people to help is: “A dzimana u la malombe, mukosi a a phalalana,” translated as, “‘Malombe’ or the dancers of malombo relatives are too stingy with regard to food but in danger they help each other.” Vhavenda believe that there may be some problems or enmity in human relationships, but in time of pain they help each other. The influence of individualism could be traced in some people who did not see neighbours supporting them while in pain. Traditionally, there was no invitation to come and help when someone is in pain. The cry or yelling of pain (mukosi) was an invitation. Neighbours were regarded as the first people to hear that yelling of pain and the first people to come and rescue. This was difficult for people staying far away even though they are related. Hence it is said that “Thonga ya kule a I vhulahi nowa,” translated as “A club (knob kier) that is far away can not kill a snake.” It means that a person who is far away cannot solve the problem.

Pain is the dark side of a person. It exists. It comes and goes. The following diagram illustrates this point.
6.7 CONCLUSION

This project has opened many themes that need to be looked at in pastoral care and counselling to people in pain. The way traditional healers performed their work needed to be reviewed from a Christian perspective including Christians living in that context. Instant healing is one thing that people desire while in pain which needs a closer look. One issue that deeply concerns this study is the fading away of communal life. People do not care for each other as it once was. The other question that needs to be studied is whether there is a middle way between individual and community responsibility for care.
The communal gathering with the view to mutual counselling is part of communal pastoral care and counselling. Communal pastoral counselling should be the endeavour of the whole community. People come together to speak an issue as a way of healing. Vhavenda say, “Tsiwana I laiwa ndilani,” translated as, “An orphan gets his or her instruction on the way.” The meaning is that many people or even strangers do give good advice to any child. The saying that says, “It takes the whole village to raise a child,” is a reality. The next chapter deals with this reality as it discusses communal meetings as communal pastoral care and counselling.
CHAPTER 7

VHAVENDA CHRISTIANS: CULTURALLY GIFTED COMMUNAL AND FAMILY CARE MODELS

7.1 INTRODUCTION

The author will use certain findings and trends of the empirical project to formulate key themes, concerns, theories and models of African communal pastoral care. These themes, concerns, theories and models serve as “bridges”,¹ to use Msomi’s term for African communal pastoral care. The empirical project has opened the eyes of the researcher to reflect more deeply on what is happening in several small African communal settings with regard to care. Besides some indigenous and Christian communal care, there is also the trend toward the withdrawal from this communal life and care caused by impoverished rural life and rapid urbanisation in South Africa. Individualism is present, but it has not totally swallowed up all communal care. The researcher has begun to realise that there has been and is a new context developing which indicated adjustments to the communal life and care practices of the past and present.

The theories and models in this chapter are complete list. Many models can be developed in communal pastoral care in the new setting(s) of communal communities.

¹ Vivian V. Msomi, Pastoral Counselling in South Africa with Special Reference to the Zulu (Cape Town: University of Cape, Dissertation, 1992) 220.
However, at the centre remains the researcher’s concern for a Christian culturally gifted communal pastoral care and counselling.

7.2 CHRISTIAN CULTURALLY GIFTED COMMUNAL PASTORAL CARE-GIVERS MODEL

It has been shown in this thesis that being a Christian does not mean to take off one’s “Africanness” or culture. What must be taken off, are sins and evil things as revealed in the Bible like worshipping or communicating with the dead (Deut. 18: 9 – 13).

Cultures have abominations (נַגְּנֵם tô-ēḇā). Even the nation of Israel has to cast out the gods their forefathers served beyond the River” and the gods of the Amorites in whose land” they were living. (Joshua 24: 14 – 15). However, this does not mean everything in the culture is abomination. Hence, there are Christian culturally gifted communal pastoral caregivers. These are the people who serve each other as Christ has commanded (Matthew 25: 31 – 40) but in cultural context, in this thesis it will be in an African sensitive way.

Communal pastoral care is pastoral care and counselling in its broader sense. It covers “both old and new understanding of pastoral care”. It covers the old “in that it is based on the biblical tradition’s presentation of a God who cares and who forms those who

---


3 R. I. Harris, R. I. Harris, G.L. Archer, & B. K Waltke, 1999, c1980. Theological Wordbook of the Old Testament (electronic ed.). Chicago: Moody Press. Note that, “Whereas tô-ēḇā includes that which is aesthetically and morally repulsive, its synonym šeqeš denotes that which is cultically unclean, especially idolatry.”
have been claimed as God’s own into a community celebrating that care and extending it to others”. The biblical tradition has the confession that there is only one God who reveals Himself as the Father, the Son, and Holy Spirits. Other, human created gods, are not God and hence cannot care for the people and environment.

It covers the new “in that it emphasizes the caring community and the various contexts for care rather than focusing on pastoral care as the work of the ordained pastor”. It is under this revised and revived understanding of pastoral care and counselling that this research has been done. Communal pastoral care and counselling is not one person’s show or concern; neither is it the concern of the few in faith community but the concern of the whole community.

African communal pastoral care takes a person, family and community in an equally serious vein. Communal pastoral care views the problem of an individual as the problem of the whole community. They carry an individual’s burden as members of the body carry the problem of a member in the body. Pastoral care is concerned with the growth of the persons in a community.

The African context is also unavoidable in communal pastoral care. The fact that a person is nurtured in the context of community suggests that context is important.

The African context is well-echoed in this quote:

> “Throughout sub-Saharan Africa today, the most dynamic forms of religion are those born of the interaction between traditional religion and Christianity or Islam. The value placed on the mystical union between the human and the divine has not diminished. Faith in the spiritual healing, in the protective power of the ancestors, and in the mystical power to

---


5 Ibid.

6 Ibid.
avenge wrongdoing is also held with tenacity and conviction, while it is simultaneously shaped by its interaction with African Christian and African Muslim faith and practice.”

The interaction between traditional religion and Christianity or Islam is found throughout Southern Africa. The researcher speaks of correlation of perspectives in this regard which is very dynamic. The person is seen from the biblical point of view and from the African view with its strong emphasis upon holistic relationships with people and the cosmos.

Given the above emphasis the researcher would like to highlight several features that are essential in the desire to develop and encourage Christian culturally sensitive caregivers on African soil. Pastoral care and counselling should recognise that there are communal culturally gifted people in every community.

### 7.2.1 There are always people with gifts of care

The researcher argues that there are always people with gifts of care. The communal pastoral care and counselling teaches that there are people who have the gifts of caring in each community. In the interviews it was clear from the stories that there were people who were ministering to other people free of charge. These were members of the family, the neighbours, friends of the family, and members of the church who regularly visit the interviewees when they are in pain.

One could see the bond of love in these people. People in most communal settings know each other by name and relationship. They do not know each other by number and street. Communal people have a passion of staying in one place from generation to generation. Their home is where their ancestors are buried. In the Vhavenda world,

---

they identify themselves with the mountains and ruins. This identification builds the
strong bonds of love because apart from their blood relationship, their children are
also exchanged in marriage.

The culturally gifted people are gifted people who have not generally had training in
such caring. They see people caring in their communities and learn something from
the model set by gifted care-givers who care so well that others wish to do the same.
They also give care and counselling in the presence of their elders who also show by
example how such care can be given.

Besides learning to care in the family and the village setting to some extent, the
Vhavenda learn to practice this care and counselling in initiation schools or by the use
of rituals (ngoma). Hence people are also given care and counselling according to
their ages. When a girl is to be married, women come together and give her care and
counselling. The same applies to a boy in that men come together and give him care
and counselling. Though all of the women and men talk, usually there is one who
finally leads them in caring and counselling according to the cultural gifts and
wisdom which all acknowledge in that person.

A care-giver who is sensitive to communal care should include these gifted people in
his or her ministry. Hence this model of the Vhavenda-Christian gifted care-givers
invites ministers or care-givers to recognise these culturally gifted people.

7.2.2 The communally gifted pastoral care as mutual care

The researcher asserts that communally gifted care is mutual. The above paragraphs
indicated that the culturally gifted person does not serve alone. He or she cares and /
or is being cared for by others. Hence a key characteristic of communal care is that it
is mutual care. A good example of such communal care as mutual care takes place at a Vhavenda funeral. It is the custom to visit a deceased’s family for the whole week before the weekend of funeral. The bereaved family has a chance to explain to visitors the story of the deceased while the visitors listen to them. Mrs C, Mr 4 and Mr 9 testified that there were many people who supported them at the funerals of their family members. Even a person who is regarded as a gifted care-giver when affected by death in his or her own family would need and accept other people to give care and counselling to the whole family. The Vhavenda have a saying, “Mudengu ha didenguli,” meaning that a medical examiner does not examine himself or herself.

To repeat then the earlier point, the lesson a Christian church should learn is that the church ministry should minister through Christian community to let culturally gifted members serve the community rather than claiming to know and be able to do everything. Such care should be mutual. The rapid growth of the African Independent Churches and the Roman Catholics is attached to this kind of care. “Their focus has not been individualistic but communal. The needs of persons are met in a community.”

Finally, though this model is not just based on Vhavenda traditional care, it is also based on correlation with biblical family and communal care. We speak of the church as the body of Christ (1 Corinthians 12: 27 and Ephesians 4: 12), the house of Christ (Ephesians 2: 19 – 22 and 1 Peter 2: 4 – 5), the family of God (1 Peter 4: 17), the army of Christ (Revelation 19: 19) and the people of (1 Peter 2: 9). These pictures of the church teach that a church should balance the individual and the community. The

---

creation story is the story of cooperating and re-cooperating of the individual in the community. The creation story of the people also stresses this understanding.

Then God said, “Let us make man in our image, in our likeness, and let them rule over the fish of the sea and the birds of the air, over the livestock, over all the earth, and over all the creatures that move along the ground.” 27 So God created man in his own image, in the image of God he created him; male and female he created them. (bold and italic are mine) (Genesis 1: 26 – 27 NIV).

This translation shows how the individual and the community form a dynamic unity in a balanced way.

One can see how easy it is to compare the African family to the biblical family. The biblical family starts with an affirmation of God. It starts “in the beginning God”. The history of the indigenous African starts similarly with statements like, “Before I was born. . .” or “Long, long ago . . . “, with the dead and the unborn being included in that family. 9 In the Garden there were just two people, but the unborn are also counted. The unborn, living and dead are part of the community in African understanding. The biblical and African families are always extended families.10

It should be noted that people, though created individually and uniquely, are made for communal life.11 They bear the image of God, who Father, Son and Holy Spirit, which is community or communion / communal. Communal life in the Bible and among African people is viewed as a part of a divine or spiritual community.12
7.2.3 Every member of the Christian community has special gifts

The assertion that every member of the Christian community has special gifts is a deepening of the two assertions mentioned above. This culturally gifted model of Vhavenda communal pastoral care stresses that there are not only one or a few caregivers, but many. This should be echoed by the Church community. The whole community is also a care-giver because each community member is given a gift or gifts. The experienced care-givers have to implant that knowledge to the coming generation and they to the next. Christian community therefore needs to have an attitude of protectiveness towards others and supportiveness of the worthiness and integrity of the other as a person in his or her own right.\(^{13}\) A care-giver should build relationships full of empathy, humility and respect and affirmation. It should be clear that within one ministry there are many gifts, as within one body there are many members each bestowed with gifts to serve the whole body (Romans 12: 2 – 8) in love (Romans 12: 9 – 21). There is no member that has no function in the body. As the ministry continues, each should discover and rediscover his or her gifts. These care-givers need not be strongly westernised in order to give Christian care.

7.3 “KHORO” OR “DZULO” AS A MODEL OF VHAVENTA CHRISTIAN COMMUNAL CARE

The author would like to give an example of communal pastoral care and counselling. This is in the form of communal gathering called “khoro” or “dzulo” in Vhavenda communities.

Vhavenda have many occasions of care and counselling. In the big “khoro” there is also a “khoro tshitumbe”, “a small council” that cares for and counsels an individual or family, even a group of people on behalf of the khoro. Usually elderly and wise people are tasked for this job. They are expected to give a report after they have completed their mandate.

The initiation schools have education and counselling purposes. There is also “malombo” where people come together singing with the purpose of inviting the ancestor spirits. It is called “u wa mudzimu”, when a person is believed to be possessed by the spirits. People, especially women, are invited to gather and sing for the patient as she or he goes around.

This section will not venture to describe all these models that are communal pastoral care and counselling. The space would not allow the author to go into all these and others. The “khoro” or “dzulo” will serve as an example of these communal care and counselling models.

7.3.1 The meaning and the purpose of the “khoro” or “dzulo” model

The Vhavenda family and communal gatherings are to enhance the good health and stability of the family and community. These gatherings are called “khoro” (council
in English; and legkotla in Sotho and Tswana languages), “tshivhidzo” (imbizo in Zulu and Xhosa languages), or “dzulo” (seating). Literally, the original name of “khoro” is the gate or the entrance. Traditionally men make fire next to the gate and spend their evenings there discussing some issues. In the chief’s kraal it was used as the public court. Today “khoro” is used replacing court. These gatherings have different purposes. The “khoro” is a broad gathering where the representatives of the community come together to discusses issues relating to their community or individuals. The “tshivhidzo” (another name of “khoro”) is the gathering of the whole community called by community leaders to pass on some resolutions and / or to discuss some issues with the community.

The “dzulo” is the family gathering called by the extended family leader or head to discuss some issues relating to family life. The author is using this term to distinguish this gathering from other communal gatherings. This chapter will look at the “dzulo” gathering because it is the foundation of other community gatherings. Here people learn how to discuss issues and express their views and feelings. The family uses this gathering to instruct its members, especially children. Issues that are discussed in “khoro” and “tshivhidzo” usually have passed the family meetings without good resolution. For example, a problem of a child who does not listen to the parents to stop fighting other people at home and to the community is first raised at the family “dzulo.” The family will first sit down with him or her to find the resolution like sending a “nendila” (a man or woman whose function is reconciliation) to ask for forgiveness and restitution where possible. If there is no cooperation from the child the issue can go to the “khoro” or “tshivhidzo”. The aim of these gatherings is reconciliation, harmony and healing of the community. It is believed that these
functions are not fulfilled by an individual. Many people need to be there talking and witnessing. The environment too is part of these functions.

7.3.2 The “kboro” or “dzulo” and the African palaver

The author of this thesis wishes to show that Vhavenda communal gatherings can become African Christian communal gatherings. The “kboro”, “tshivhidzo” and “dzulo” gatherings can be enriched by the Christian message and practices of reconciliation and forgiveness and new beginnings. In fact many of these traditional gatherings nowadays start by a word of prayer. The author is still surprised when he hears from a traditional healer that they too start their meetings with a word of prayer. Such African traditional gatherings for conflict resolution are found throughout Africa. A noted African scholar, Kasonga, wrote a thesis with the focal point on the use of the traditional “palavra” (Portuguese form of palaver) approach to conflict resolution in Western Africa. Kasonga shows the possibility of moving towards an African Christian “palavra”. The African palaver brings the unity among people and among the whole environment and so should the Christian faith. Communal

---


15 Cf. Armstrong’s findings “. . . all authorities agree that the English word ‘palaver’ is from the Portuguese ‘palavra’ and French ‘palabre’ is from Spanish ‘palabra’. The Spanish and Portuguese words are cognates and synonymous in meaning, to wit: ‘word’ or ‘act of speaking’. . . It is quite clear . . . that although both the English and French words are derived from Portuguese and Spanish respectively, they are not borrowed directly from the standard forms of these languages”. In, Robert G. Armstrong, The public meeting as a means of participation in political and social activities in Africa, in Socio-political aspects of the palaver in some African countries, ed. Robert G. Armstrong (Paris: UNSCO, 1979) 11 – 12.
gatherings give people time to heal each other by words and expressions of strong emotions. The way the palaver meeting is conducted is not in Western fashion. Some Western scholars understand palaver as the conversation of the people who are confused or who do not understand what they are doing.¹⁶ In the African meaning, however, there is purpose and procedure in a palaver. Vhavenda have an expression that says, “Munwe muthihi a u tusi mathuthu.” The literal translation is, “One finger cannot take out samp from the dish.” The meaning of this expression is that a person needs others to do even simple tasks. They also say that, “Zwanda zwi a tanzwana”, literal translation is “Hands wash each other”. The meaning is that it is difficult for a hand to wash itself. Hence a person needs others for simple things like washing.

The prolonged African traditional meetings where people are allowed to speak without limitations is viewed by the foreigners as idle talk with no good results. But to the African it is searching for the truth and healing the wounds. In these gatherings Vhavenda do not worry about what people say, because to them, “U kungulusa tombo ndi u li isa vhudzuloni halo”, translated as “to roll a stone is to take it to its proper place”. It means that whatever is said or done it will bring happiness and healing. The other expression related to the abovementioned says, “U amba livhi ndi uri livhuya li wane vhudzulo,” translated as, "To speak the evil or bad advice is to let the good advice have its proper place.” The meaning of this expression is that bad ideas also drive the meeting in the right direction. In a palaver no participant should be afraid to say anything, because if it is bad or nonsense it will be taken to its proper place as the discussion continues.

A palaver as a meeting has its own structure. There are different forms of palaver in accordance with the purpose and nature of the meeting and culture. There is a palaver or meeting on social issues, political issues, economic issues to mention but a few.

The example of a palaver is the process Mrs A went through according to the pilot interviews, though it was not done well because her husband took the decision alone. She had been happily married but things turned against her when her husband married a second wife. Mrs A was dumped at her traditional home while the second wife enjoyed the company of her husband in the town home. The counselling in this Vhavenda scenario is not individualistic but communal or palaver. A marriage problem is not just the problem of two people but of the whole extended family and the whole village. A marriage problem is the problem of customs and the whole culture. Hence the elderly of the extended family in Tshivenda tradition would be called to discuss the problem.

Hence palaver or rather “khoro” (council) or “dzulo” (seating) is used and understood as a conference that wants to come out with a statement or resolution. Meetings like “lekgotla” in Sotho and Tswana, or “imbizo” in Zulu and Ndebele fall under this type of palaver. Palaver in this context is in line with a traditional meeting (“khoro” or “dzulo”). This is a gathering of close relatives (“mashaka”) or the whole village, where talks and discussions are held as means of bringing reconciliation (solving conflicts and differences, setting aside transgressions); organising happy or sad events (e.g. marriages or funerals) or the healing of some social diseases, with the goal of rebuilding or re-establishing a new order, security and protection in the family and

---

village or community. Palaver, in this section means, a meeting or a big gathering (the whole extended family or the whole community), the family or community involves itself in bad, sad or happy situations in which people find themselves.\textsuperscript{18}

Another dictionary has some positive picture of conference and discussion within a broad view. Palaver is defined as, “1 a : a long parley usually between persons of different cultures or levels of sophistication. b: CONFERENCE, DISCUSSION. 2 a: idle talk. b: misleading or beguiling speech. 3: to talk profusely or idly.”\textsuperscript{19} Among the synonyms of palaver conference is listed. The communal gathering is a form of conference because at the end a resolution is reached and a patient and community are healed. In the communal gathering people are free to talk as a way of sharing their experience on the problem brought to that meeting. Due to this freedom to speak, the gathering takes a long time and there may be some irrelevant issues. This does not make the gathering useless or unprofitable.

The model of communal pastoral care as palaver from an African view and reworked in a Christian context leads to an African Christian palaver, as Kasonga discusses.\textsuperscript{20} Kasonga uses Groome’s “shared Christian praxis” in dialogue with the palavra process to reconstruct the palaver in the light of the Christian faith focusing on African values.\textsuperscript{21} The village gatherings are done to heal an individual and the whole

\textsuperscript{18} Ibid. 69.


\textsuperscript{21} Ibid. 195 – 196.
village from African perspective, without putting Christ the Healer at the centre. An African Christian palaver changes the picture as it puts the risen Christ at the centre.22 Pastoral care and counselling in the African Christian palaver is effective because the whole family and community are involved. The illness of an individual affects the whole community and environment. Therefore it is not only the task of few to heal, restore, reconcile, and solve the problem. Personal problems are also social in one way or another because a person’s existence is not totally isolated from other people. African Christian palaver in pastoral care and counselling, thus, means that a group of people or the whole community gather to initiate healing. In palaver everyone speaks freely.23 It can be best understood “as a privileged form of speech. It is a communal speech uttered on community affairs.”24 Everyone has the privilege to speak. It is believed that words are powerful in giving healing. The involvement of everyone implies reconciliation with community and environment. The confrontation in African palaver is not conflict oriented, but positive. It should be understood in Augsburger’s term as, “care-fronting.”25 This means that there is caring in the process of this type of confronting. It is part of the care that a person is giving to other person. This brings holistic healing.

Kasonga is right in envisaging that African palaver needs to be translated into Christian faith. The indigenous village gatherings are not religiously neutral.

---

22 Ibid. 244.
The example of family “dzulo” model of care

The following is an example of the “dzulo” or “khoro” meeting with the purpose of healing family problems. These days these meetings have been Christianised. The Christian aspect needs to be deepened because in some instances it is superficial. It needs to be an African Christian Palaver—using Kasonga’s term.

See appendix 3 for the programme of “dzulo”.

Like in the interviews done for this thesis the African Christian gatherings should be done with the purpose of healing. The participants of the gathering can be family, Church community and the whole community. When there are marriage problems, the family gatherings can bring healing and reconciliation. Marriage problems open social veins, and hence it is painful. Mrs A in the pilot interview had difficulty of resolving her problem because the family meeting was not called. In Vhavenda family gathering the whole extended family gather excluding children. Every member in that meeting is given a chance to speak out after hearing the whole problem. The elders speak at the conclusion giving the direction of the whole problem. Usually that would cover all the views the participants have disclosed in their discussions. Among the elders the “makhadzi” (aunt) or “khotsimuhulu” (uncle) have the listening ear and wise mind.

The author would like to give an example26 of the family gathering (dzulo) focusing on healing family pain of the shame of a daughter who does not live as expected in her marriage (with the in-laws).

Leader: We are going to start our meeting. Let’s ask Rev. Nembanani to lead us in a word of prayer.

---

26 I have used my experience in these meeting as a member of the family.
**Rev. Nembanani:** Our Father who is in heaven! We thank you for your love and protection this day and all days that have gone by. We pray that you be with us as we discuss the issue before us. We ask that everyone’s heart be open to discuss issues throughout this whole meeting. We pray all these in the name of our Lord Jesus Christ. Amen!

**Leader:** Thank you Rev. Nembanani for leading us in prayer. We shall now ask Mr Thavha (he is one of the khotsimunene, the brother of the the daughter’s father) to welcome us all and tell us why we are here.

**Mr Thavha (one of khotsimunene):** Thank you Master of Ceremony. I welcome you all in this meeting. We have come here because our child has come back from her in-laws. We want to talk about it and find out what we must do as a family.

**Leader:** We have called upon you people because we have a problem in our family as indicated by Mr. Thavha. We are in pain! We are ashamed as we walk in the community. Our daughter has been sent back from her in-laws (vhuhadzi). Vho-Nyamasindi has the full story.

**Family member 1:** (As Interruption): Before Vho-Nyamasindi can explain we have to call our daughter in. She must hear everything we say. (Some family members show agreement by nodding their heads and some voice that it is the right thing to do because she is the owner of these matters (mafhungo) or problem).

**Leader:** You are right she must be here to hear. The good thing is that we are many here to advise each other. Our ancestors said, “Munwe muthihi a u tusi mathuthu” (One finger cannot take samp from the bowl). (He appoints another family member to go and call her).
(When she comes in she lies down on her side [o losha] as a way of respect. People respond by accepting her lying down [“u losha”] and answer it [losha], though not necessarily by lying down).

**Vho-Nyamasindi:** Aa! (as she brings her hands respectfully together [as in losha]) and people respond by saying Aa (females) and Ndaa! (males). I was at home when our daughter was brought home by her in-laws’ mediator (nendila). I called Vho-Nyadzanga and Vho-Nyaphophi so that they could also witness this. We then called in our mediator, Vho-Muvhulawa. Fortunately she was at home. Vho-Muvhulawa sat down with our daughter’s mediator. Vho-Muvhulawa told us that our daughter’s in-laws are complaining that our daughter is not handling the family well and she is lazy in doing her chores. (Everyone shakes the head to show that their daughter has disappointed them.) Aa! (The people respond by saying Aa! / Ndaa!).

**Leader:** Let us hear from our daughter.

**The daughter:** Those people expect me to do everything alone. I fetch water which is far away, collect wood from the mountain and cook with a big pot because the family is very big. I feel I am treated unfairly. I left some chores for other family members because I am not their slave.

(From here people responded.)

**Family member 2:** My daughter! Didn’t we sit with you here before your marriage and instruct you to go and behave like a fully grown-up woman? But instead you behave like a little girl. “No konyolela matanda ndevheni”. (Translated as “You put sticks into your ears,” which means that you did not listen.) Now you brought shame to this family…..

**Family member 3:** (Interrupting family member 2 really finished). I told you that you are lazy in handling the family affairs and you did not listen. This is the result……
Family member 4: (Interrupting family member 3). You should have worked hard to shame them. They were testing you as a newly wed…..

Family member 5: The problem with you young people is that you do not want to learn from us. Our families are big too. We also use big pots to cook food. You should learn from this…..

Family member 6: Marriage needs endurance. “Vhuhadzi ndi nama ya thole, ya fhufhuma ri a fhunzhela.” (Translation: At the in-laws it is like when cooking veal, which forms froth, we keep the froth from boiling over with a spoon. It means that marriage needs commitment and endurance). Now what you did is a sign that you are not ready to endure hardship…..

Family member 7: Look at us your mothers: In staying here we have to endure hardship. “Ri fara lufhanga nga vuhalini.” (Translation: We hold the knife by its sharp point). “Itali vha tshi ri muhulwane u kanda mupfa a tshi zwi vhona.” (Translation: They even say that an adult walk on thorns being aware. It means that an adult endures difficulties).

Family member 8: Family principles are not the same. You should have known that because before your marriage that was made clear to you. (Before marriage it is Vhavenda coustom to give instruction to a girl, which is called “ u laya”, “to give instructions”).

Family member 9: My daughter! They say, “Wa sa li pfa u vhudzwani, u do li pfela vhulaloni.” (Translation: If you do not understand the instruction when it is being told to you, you will understand it while you are in your bed). I want to tell you that, “Muthu kha a pf e zwi no amba vhanwe”. (Translation: A person should listen to what others are advising).
Family member 10: We are saying this because we love you. We want you to have a good family. Now we are saying, “Ni songo konyolela matanda ndevheni”. (Translation: Do not put sticks into your ears).

After short speeches and utterances by different family members, the leader asks their daughter to respond, who is touched by some words and as a result tears are rolling down her cheeks.

The daughter: Aa! (lying on her side again). Vhokhotsimunene (my father’s brothers, vhommane (my father’s and his brothers’ wives) and vhomakhadzi (my father’s sister), I am sorry for the problem I cause in this family. I have heard what you have said. I promise to do what you are saying. Aa! (lying on her side again and the whole family responds in recognition).

Vhomakhadzi 1: My daughter, you have done well to accept these instructions from your family. These people know about the family as our ancestors say, “Mulala a sa fì, tсимu ya shubi u do i lima. (Translation: An old person who does not die will plough a fertile field). They also say that, “Maano a vhambwa nga luvhadzi”. (Translation: A scar causes people to plan properly).

Makhadzi 2: We come here to help you and your marriage as they say, “A dzimana u la malombe mukosi a a phalalana.” (Translation: Malombe may not give each other something to eat but they help each other when one calls for help). We want you to know that you are going to a new setting, but that should not frustrate you because “Mulomo ndi khaladzi a ndila”. (Translation: The mouth is the brother or sister of the way).

Makhadzi 3: (the eldest of the father’s sisters): You hear our daughter we are sending you to your in-laws. We hope this time you have heard us clearly. We are also going to tell our in-laws that we have given you instructions (u laya) for womanhood.
The daughter: Aa! (lying on her side and the whole gathering respond by saying, Aa! / Ndaa!).

Leader: I want to thank you our daughter for your response to our instruction (ndayo). I also want to thank you all for your contributions. We will ask Rev. Nembanani to close our “dzulo” in prayer.

Rev. Nembanani: Our Father in heaven we thank you for this family gathering. We have talked through your help and come to this satisfactory conclusion. We pray that you will be with our daughter as she has recommitted herself to her in-laws. We pray that you bless her family. Please bring peace and understanding in her family. We pray this in the name of our Lord Jesus Christ. Amen.

People are happy and hopeful for better behaviour of their daughter. The meeting is over. People are greeting each other again. Life continues as normal.

While the meeting is on some of the family members, especially the young ones are preparing a big meal and some are sent to buy some drinks or / and beer. People are invited to eat by giving them water to wash their hands.

7.4 INDIGENOUS GATHERINGS AND THEIR CONTRIBUTION TO COMMUNAL PASTORAL CARE

The contribution of indigenous gatherings is that they give a sense that a person is not alone in his or her struggle. The whole community is crying in prayer for the healing. The author would like to show how Christian pastoral care and counselling should not be satisfied by healing an individual, leaving the community around him or her unattended.
7.4.1 Indigenous gatherings can promote the priesthood

Christian community members

The indigenous gathering as illustrated above give family and community members a chance to serve each other. This is what Christian community wants to achieve. Christian community is composed of people who care for each other. It is both Christian and a deeply African understanding of family and community. Christian community is called to be “others-oriented” as Christ is (Philippians 2: 3 – 4). People who are geared to individualistic thinking may read other things in this passage and be unhappy with it, but people who are geared to communal life and thinking may understand this passage as it is. The self is not the end, it has to reach others. The mutual removing of each other’s pain is based on this sacrificial love of Christ. One foundation of mutual care is the office God has given to His Church. The Church as the gathering of Christians is anointed to be a prophet, priest and king. Every believer is a carer for others. A communal setting can teach the church to understand this. There is a way of informing people about the life and morality of the community. People talk about events of that day and that night. In traditional communal setting this was done orally. The talking was the prophetic way as it gave hope to face the future. It had the forth telling. Christians need to have time together in order to occupy their caring role. Mutual care tells that every one can make a difference. This communal khorox model suggests that the elderly should share their stories so that the

young would also tell their story. Many people are to be involved in sharing the news in such a way that all know the story and share it as they know it. The priesthood of believers has been a cry of the church for many years. It is built on the image of the church as the body of Christ where every member is called to serve. This is what God has called every believer to do and to be.

The ministry of Christ started with ordinary people of his time. The Christian community can provide a powerful healing climate. When “two or three are gathered” the Holy Spirit’s power is made manifest, just as Jesus promised (Matthew 18: 20).

Healing has been made a specialised medical ministry in our communities. Healing is not, however, provided only by the specialised few. “We are priests, called into each others’ lives to be agents of all kinds of healing—emotional, relational, physical, mental, vocational.” The example is that “. . . early in this century, there was no cure for alcoholism. It was not until two untrained laymen discovered the Twelve Steps of Alcoholics Anonymous that there was any concrete program for recovery.”

These people in the case above used their culturally gifted talents. Christian community is empowered by the Holy Spirit and the Word of God.

Christian communities need re-education or re-training after the over-emphasis of professionalisation. The individualist thinking has taught them, instilling in their

29 Cf. “At least three were fishermen, and one was a government employee, but none were clergy (rabbis).” In Ibid. 128.
30 Ibid.129.
31 Ibid.
32 Cf. The study was done to determine which school of counselling—Rogerian, Freudian, Jungian, and so on—produced the best results. The results were shocking. It was found that the most effective counselling was provided not by the disciples of any of these professional schools, but by the control groups used in the study. Ordinary people—airline pilots, secretaries, housewives, businesspersons—with no therapy training, who simply spent time listening, produced better results than the professionals. Ibid. 130.
lives that they can do nothing. It suggested that they should step back and let the ministers and pastors do the service for them. People were reduced to mere spectators in the caring for the communities. The result is chaos. The re-education does not suggest that training for ministers and pastors should stop. It will be needed more than before because people need to be empowered by the word.

### 7.4.2 Indigenous gatherings teach embracement and acceptance

Communal life has to do with embracement and acceptance. The theme of embracement and acceptance contributes to the value in communal pastoral care. The opposite of embracement is estrangement. Communal pastoral care should directly deal with the problem of being a stranger. It should embrace and accept the other people who are different in language, colour, culture, etc. The Vhavenda have an expression related to strangers, “Kholomo ya ndila a i fhedzi hatsi.” translated as “a traveller’s cow does not finish the grazing land”. They accept the cow of a stranger in their grazing fields.

Embracement is necessary in people’s lives. Exclusion is not healthy for a community.  

African communal pastoral care needs to embrace not exclude. The true embrace is the embrace of heart. Open arms are open heart. The open heart is the heart that has created a space for other people and invites them to come in. It is the heart that is discontent in an empty space and is pleased when people occupy the space so that it creates more space. It does this without losing identity or without

---

being assimilated. Embrace ment is not assimilation.\textsuperscript{34} Assimilation is another way of exclusion. Hence embracement should have boundaries. Domination over other cultures does not fall under the concept of embracement and acceptance as discussed in this section. Domination is exclusion at its best. Embrace ment gives room for mutual influence for the better life of all.

Another form of exclusion is abandonment. There is a danger of seeing other people in pain and avoiding taking action. The biblical examples are the priest and Levite in the story of the Good Samaritan (Luke 10). They crossed by at the other side of the minding, their own business. The poverty of Africa with its offspring like wars, diseases, etc. cause some countries to abandon Africa arguing that they are being involved in own problems and their resources are only meant for them not for other people.

Embrace ment is also a biblical concern. The stranger also played an important role in the Bible from Abraham to Ruth, from the Exodus to David and Solomon.\textsuperscript{35} Communal pastoral care reminds people to care for the strangers in their midst. There are members of community who are strangers because of their characters, backgrounds, sickness, etc. Christ is the stranger who is sick, naked, prisoner, hungry, thirsty and in all unpleasant conditions and in need of embrace (Matthew 25: 31 – 46). The challenge of pastoral caregivers is to love strangers. “Loving the stranger in the present becomes an opportunity to heal yourselves, heal your history, and also heal


others through the existential meeting with and moral care for the other who live across a clear cultural economic or political boundary.’’ Embrace includes self-giving and even sacrifice. God illustrated this self-giving in giving his Son. This cost God His only Son Jesus Christ. The way God opened His hands to make space for humanity was on the cross. “The open arms of Christ on the cross are a sign that God does not want to be a God without humanity; God suffers humanity’s violence in order to embrace it.”

7.4.3 Indigenous gatherings promote inclusiveness

Inclusiveness is the deeper sense of embracement. Here the situation may allow free fusion of two parties for the purpose of caring. The theme of inclusiveness can be illustrated best by the characteristic of the African family. The West has a narrow view of the family. The Vhavenda use the words, “mudi” (a compound) or “muta” (a living court) to translate what the West mean by the family. African family can be described as inclusive because many people are included in the African traditional family concept. “Africans understood the family from a far larger content of its collective significance. They saw it within the framework of the oneness of being.” (Mungazi’s italic). The “oneness of being,” made the family so strong that the colonists could not easily break it. Family includes other people of the community who would choose to build within the same compound. A person cannot be excluded

36 Ibid.
on the basis of not being a blood relative. “In traditional African society the family took into consideration every member of the community.”39

The inclusive model of care goes on to the dead (ancestors) and the unborn. A living person is in the centre of the relationships. These three, the unborn, the living and the ancestors, regardless of the level, have an important place in society. It is against this background that today the Africans totally reject the Western concept that a foetus is not a human being. They operate by the principles that the foetus is a form of a human life, just as the living and the ancestors are two forms of it and like the living they have a big role to play.40 The inclusion covers people who are no more or not yet in this world. It is healing before birth.

The point is clear here that one stronghold of African communal pastoral care is inclusiveness not exclusiveness. Many gifts are collected, as many people are included into the family. The inclusiveness makes more people belong to one family. In this context the family structure plays a continuous role in strengthening the community. As it continues to grow and to expand it becomes more embracing and all-inclusive.41

The inclusiveness theme reminds one of Jesus. He instructed his church to be “Christ” to those who are hungry by feeding them, who are sick by visiting them, who are thirsty by giving them water and others (Matthew 25: 31 – 46). He continues to illustrate that those in pain also represent Christ himself. This teaching instructs a church community to care for those in pain. Serving these people, a caregiver is serving Christ.

39 Ibid.
40 Ibid. 28 – 29.
41 Ibid.
7.4.4 Indigenous gatherings promote remembrance

Vhavenda have amazing figurative speech they use for remembering. The inside ear itching (u luma ndevhe) tells them that someone far away is talking about them. They are pleased when it happens because someone is remembering them. They do not know yet who that person is, but they are resting assured by this itching that not all people hate them. Someone far away is talking about them and is willing to see them. They try to put the ear at ease but calling out who could be that person who wants to see them and talk good news to them.

Another figurative expression that has to do with expectation and acceptance of visitors is mentioning automatic the movement of the upper eyelid (u fula ito la nthha). They interpret the automatic moving of the upper eyelid as meeting someone they really love and enjoy being with. It is associated with laughter. It is to be remembered by someone who really cares. They do not like that movement in the lower eyelid. The automatic movement of the lower eyelid (u fula ito la fhasi) is associated with pain. Pain makes tears flowing forth and rolling down, wetting the lower eyelid. It does not mean to meet a pleasant person or situation. The person feels bad because he or she is expecting to cry. It is not to be remembered in a negative sense.

The Vhavenda also associate cock fighting with the coming of a visitor. The cock fighting makes them prepare for the visitor. The visitors in this situation can be anyone. Vhavenda do not discriminate between visitors. Strangers are also welcome. The sign of welcome is not just words but actions like water to drink and food to eat. People have a vision of being remembered. They are positive about other people coming to visit them. The inside itching of an ear (u thothona ndevhe), the top eyelids
moving involuntarily (u fula ito la ntha) and cock fighting happen daily and make people expect other people to remember them in a special way like talking about how they long to see them, thinking about them and coming to visit. Traditionally Vhavenda cook every meal with visitors in mind.

Remembering one another has been the custom of the Africans. After harvests they usually take some gifts from the fields to their friends and relatives. In the “Nwali” cult where the concept of Vhavenda is concentrated, “Nwali” is Vhavenda’s God who visits his people. The chapter on Vhavenda cosmology has explained this concept of the remembering God. God is not addressed as a distant entity but as the “One with us”. Nwali sounds like a name. The other name of Nwali is Raluvhimba, that some do not totally connect with Nwali Mudzimu wa Vhavenda (Nwali the God of Vhavenda). These names do not suggest a distant God. He is also referred to as Grandparent. In ancestor worship Vhavenda address Gole (Goko) as the creator of human beings, the grandparent. The concept of God visiting as a sign of remembering his people is clear in this cosmology. No one should therefore wonder why the Vhavenda have this belief of visiting each other as a way of remembering each other. This visiting should not be confused with visiting the sick, but it was the normal part of the African life among people and their God.

The communal pastoral care of God is identified with God remembering His people. In reviewing the book of Patton, “Pastoral care in Context: An Introduction to Pastoral Care,” the author indicated the concept of communal pastoral care as being kept in God’s memory. In this process God makes Himself one with His people. Patton hyphenates the word “remember” following Luepnitz to “re-member” which
unites God and His people. It is the same when people or families remember each other they re-member each other as joining each other. People who visit each other in a positive way become one family.

7.5 U VANGULANA (TAKING OUT EACH OTHER’S THORNS) OF CHRISTIAN COMMUNITY

Another model of Vhavenda Christian communal care can be illustrated by the metaphor and proverb among the Vhavenda people when they take out the thorns from each other’s feet (kha ri vangulane). Example of few proverbs can serve to illustrate this point. Proverbs were used every day as part of communication and/or instruction. It should be said that they were strong expressions that passed the message strongly and deeply. These expressions were also used to heal pain and suffering.

The expression, “Let us take out each other’s thorns” is built on the expression, “Mipfa i a vangulana,” translated as “Thorns take out each other from the human flesh.” Communal people use the available and relevant natural resources to heal each other. The Christian community should adapt this to their pastoral ministry. In the author’s interviews with the participants, he came to the conclusion that this metaphorical proverb could be used to aid people in caring for each other in a community. He thus names the model that he uses “kha ri vangulane”.

In his interviews with the participants, he came to the conclusion that this metaphorical proverb could be used to aid people in caring for each other in a

---


community. He thus named the method and now the model he uses as “kha ri vangulane.” The overlapping of the method by the model can help to build up a deeper understanding of unique aspects of Vhavenda communal care and Vhavenda views of sickness and healing. Hence the method builds up the model and the model leads toward further possibilities of using these methods or instruments in future research.

The expression, “kha ri vangulane”, pictures people walking barefoot in the thorny bush. They step on thorns that pierce the flesh causing pain. Sometimes such a big thorn pierces the foot that a person cannot move on. Then they have to sit down and prepare another strong thorn with which they can take out the thorn from the flesh. Another person can help to take out some small or deeply embedded thorns from the foot where the injured person’s eyes cannot see and it is too deep to handle with his or her own hands. When the thorn is out the trip can continue.

Life is such a journey. In some instances people have to take turns for taking out thorns. Hence let us in this way take out each other’s problematic or emotional thorns. The barefoot people walking in the thorny bush of life, are likely to be victims at any time. None is immune from being pierced and pained. In Vhavenda culture people are not encouraged to walk in the bush alone. They usually travel being two by two or more. This helps when they encounter this problem. They can sit down and take out the thorns in the bush.

Two are always better than one. In the bush a wild animal may also be found and several people need to hunt it for meat and take it back home. They may also come across a beehive, which needs two people or more to support each other to take out
the honey. A person represents the community or the family. They help each other not just as individuals but a community or family.

The model of people taking each other’s thorns out is encouraging. The model tells us about Vhavenda’s expressions like love, empathy, compassion, genuineness, respect, hope and therapy in an indigenous manner. These concepts are important in communal pastoral care and counselling.

**Love (Lufuno):** First, this model fleshes out traditional views of love explicitly. Love is not just emotion but service and commitment to one another. It is more than falling in love. It is also a decision that a person has to make there in the bush. It is more than the words “I love you”. In this setting love is sitting next to a victim, touched by dust and supporting one another to take out the pain (thorn).

**Empathy (U pfela vhutungu):** Second, empathy is important. Again, in this setting, empathy is more than feeling. One Christian author explains empathy in general when he writes,

> “The capacity to feel empathy is the capacity to take an interest in another’s situation, to appreciate the range and nuance of the other’s feelings in the situation, and to desire to understand both the situation and the feelings fully and caringly. Empathetic regard is acknowledging and validating another’s feelings and cherishing the other in the situations to which the feelings are the reaction and the response. It is listening and dwelling with the other, making oneself present and not merely there. Empathy helps us to affirm others as God has created them, no matter how they may be reacting in whatever situation, and to overcome our tendency to urge them to be different for the sake of our own comfort level.”

Though written from another culture and context, it applies directly to the model of “kha ri vangulane.” People walking in the bush take an interest in another’s situation in a special way. The silence while they are separated is not always welcome. They

---

call each other and ask about what is over on that side. The shout is not taken for
granted. The thorn in another’s flesh is not a simple thing. They deal with it right
there, in the bush, whenever they have a place to sit down.

Empathy forces the two people to sit down and solve the problem. It teaches them to
appreciate the range and nuances of the other’s feeling in the situation. The caregiver
in this thorny bush would like to fully understand both the situation and feelings and
be empathetic. He or she would like to know how deep the thorn is embedded, how
far the victim can walk or even if they need to be carried to a place where they can sit
down and other options. The information is sought with empathy. Empathy is thus the
acknowledging and validating another’s feelings in the situation. Being present is felt
without and within. It is the connection between the hearts. This is what happens
when listening to and dwelling with others. The empathetic attitude is to affirm others
as God has created them. Some people are careless in the bush in the sense that they
do not take precautions as to where they step. Empathy does not impose self-interest
upon another person.

**Compassion (Khathutshelo):** Third, compassion in taking out each other’s thorns
becomes a motive. Compassion is a conscious feeling of “compassionate” with the
other person. A person enters voluntarily and sympathetically into other people’s
pain. To feel “compassionate” for the other person is the willingness to be open in
one’s heart for that person and share in the pain he or she has.

“Kha ri vangulane” is compassion in taking out the thorn and to possess grace and
charm and to be gracious in that action. Compassion is crying and feeling pain with
a person in pain. Compassion does not end at the emotional level. “It is more than

\[\text{Ibid.}\]
emotion. It includes a will to change the situation.”

Compassion carries the meaning of love. It is expressed in the Hebrew word “racham” which “is related to the Hebrew word for ‘womb’ and expresses a mother's (Isa. 49:15) or father's (Ps. 103:13) love and compassion, a feeling of pity and devotion to a helpless child.”

**Genuineness (U vha vhathu vhukuma):** Fourthly, taking out the thorns expresses genuineness of purpose. The genuineness means being ourselves, in care giving. It is to be true to one self and others. What hinders genuineness is low self-esteem and pretence. The taking out of thorns expresses genuineness in being true to each other. Genuineness invites humility. The primary mandate is to relieve pain. Jesus has shown us this way. He did not pretend to be a human being, He became one of the lower class in the people where He incarnated himself. A care-giver is in the bush, sitting at the wayside, using the thorn to take out another’s thorn, shows humility. Humility also accepts being served as a victim.

**Respect (Thonifho):** Fifth, taking thorns from each other demands respect. Respect expresses the concept of acceptance of a human being as he or she is created. God respects a person so much that he makes him a little lower than the heavenly beings (Psalm. 8: 4 – 5). People learn respect in their relationship with God. God also serves people with respect. It does not matter how important a person is in a community, it is imperative that he or she should respect other people.

---

46 Ibid
47 Ibid.
Respect is more than politeness. One Christian source explains:

“Deep within each of us, as part of the divine image we bear, lies a capacity for respecting every human being and not just those who can do something for us. How do we strengthen that capacity so that it becomes a guiding principle for our lives? . . . is to cultivate what we might call manners. . . every culture has rules and rituals for expressing simple courtesy, for maintaining proper etiquette.”

Respect does not discriminate between people but it includes all human beings. In many African cultures people are respected even when they are dead. Hence even when someone is dead there remain instructions “Ipfi la mufu a li pfukwi”, (the instruction of the deceased must not be overruled). If it can be known what the wishes of the deceased are, no one should act contrary to them. They also respect the unborn children as human beings. A living person is related to the ancestors and the unborn as human beings who deserve respect. Respecting others goes with respecting oneself. A person who does not respect him- or herself will find it difficult to respect others.

**Hope (Fulufhelo):** Sixth, taking out of thorns is undertaken with the hope of continuing the journey. Thorns are not the end of the journey. It is amazing that when the thorn is out a person can walk without pain again. The concept of hope in the removing of thorns is the “unshakable conviction that things can and will turn for the better” (Italics are mine). There is no false hope in this conviction. There are many

---

49 Ibid. 37.


52 Ibid. 42 – 43.
signs that give the opposite picture: things can get worse and worse. Hope stands against those facts. It says that the thorns will be out and soon we will be home.

**Therapy (Dzilafho):** Seventh, removing of thorns is the core of therapy. The word therapy is used here in its simple meaning which indicates healing. Therapy is fixing what is wrong, which promotes the healed state. The therapy in this model covers the body, mind and spirit. It is a holistic activity. Thorns in this model and the taking out of thorns from the foot are the metaphors of all pains in people’s lives. A thorn in one’s flesh, as Paul mentioned, expresses that there is something that is constantly annoying him or her. We say more traditionally that someone is sitting on thorns when he or she is continuously uneasy because of what he or she has done. People also have pains and they are running away from their situations thinking that there is no help.

The seven natural instruments to take out thorns reveal that there are many resources to bring healing. These are the talents entrusted to every individual. They need to be developed as they are being used. The “kha ri vangulane” model of communal care suggests that people are gifted in caring for each other and that there are local instruments and gifts and resources that are there to care for people. Thorns are problems to barefoot travellers but other thorns can be used to bring solutions of the problem. God has planted a tree with thorns for different reasons, one of which is for protection of the tree from people and animals. God has not left the people. He is in their midst. He gives them gifts to care for each other. People need to acknowledge their gifts and how they can be utilised for the benefit of the whole community. The principle of the communal model of taking out each other’s thorns is that the problem

---

may also bring the solution. In Vhavenda culture the expressions, “U amba livhi ndi uri livhiuya li wane vhudzulo,” (to speak an evil word is to let the good word find its place), and “U sudzulusa tombo ndi u li isa vhudzuloni halo” (to roll away the stone is to take it to its rightful position) suggest that there is a potential solution of the problem within the problem.

These days we have instruments and medication from the West to take out thorns. They are available at a cost, being the norm of the West. The people in the thorny bush use the natural thorns to solve their problems at no cost. This is the norm of Vhavenda -Christian communal pastoral care.

“Kha ri vangulane” is a communal model that can be looked at in many African cultures. Similar narratives can be found in many cultures of Africa. The taking out of thorns model indicates a communal caring model. We do not walk alone.

### 7.6 SOME GENERAL IMPLICATIONS OF THESE MODELS

The models suggested here are indicating a need for further study and implementation and are not complete or final. They serve to open the way for further observation and revision. The gifts of the “un-ordained” should not be ignored. They should be utilised. The Christian community in this fashion is not the pastor-centred but community-centred. The concept of recognition suggests that the gifts of every member should not be undermined. Here the mutual pastoral care becomes the order of the day. The work of caregivers becomes simple because people are caring for each other.
In communal pastoral care pain is reality. There are many supportive people in every community. The minor pains come and pass without notice. In an individualistic community a person feels every pain because there is not a supportive community around him or her. Hence when a person expresses that he or she feels pain it means the communal shock absorbers could not contain it. The pain in that person is a reality. It should not be pushed aside as being superstitions or misconceptions.

Pastoral care without healing did not accomplish its work. Healing in a communal setting is not narrow, it is holistic. Everything is connected to each other. Nothing is in isolation. Healing includes the wellbeing of the body, soul, spirit, psycho-social, environment, etc.

People are connected in such a way that the ancestors are also related to Christians. Their fear of the spirits becomes a reality each day. Pastoral care that ignores the fear of ancestor spirits is irrelevant in an African communal setting. Christians live with them, serve them, and are part of them in many instances. If you ask a person whether he or she is a witch you will get no one admitting to be a witch. People do not believe that they are witches, but they believe that there are other people who are witches. Pastoral care should not disregard this in the name of science and technology. If it does that in an African communal setting it is being irrelevant. Christians who find no answers and assurance of their victory over fear for witchcraft sneak to diviners or prophets to remove their fears.

Pain in an African communal setting is like a virus that can be transmitted to other members (like sexually transmitted infections). The effective treatment of those diseases or viruses is to treat the whole family (or husband and wife). Pain in a communal setting affects the whole family. Hence family should be taken seriously in communal pastoral care. Pastoral care that would help the patient and let him or her
go back to the untreated family is like sending him or her to be re-infected. The family condition and key people need to be treated to enable them to support the patient. Communal pastoral care is not one person’s show. It is the whole community’s show on the basis that everyone is his or her brother / sister’s shepherd. The ministry of the ordained office is to train the community to do the ministry of service (Eph. 4: 11 – 12). The ordained office should teach the body of Christ by word and deed the works or service.

The three models developed in this chapter are the climax of this thesis. The model of the culturally gifted caregiver has been outlined as it is practised at communal meetings as illustrated in the “Khoro” and “Dzulo” models. The “Khoro” or “Dzulo” model can be used in Christian communal care based on traditional communal and family gatherings. Finally the “Kha ri vangulane” model of taking out the thorns is a model that indicates that the cultural resources should not be undermined. Like thorns they are available and cheaper to be found. All are indicative of further research and experimentation.

The next chapter contains the conclusion and recommendations. It concludes the whole thesis and also gives some remaining themes that need to be followed by some researchers who are interested in communal care.

7.7 CONCLUSION
The three models developed in this chapter are the climax of this thesis. The model of the culturally gifted caregiver has been outlined as it is practised at communal meetings as illustrated in the “Khoro” and “Dzulo” models. The “Khoro” and “Dzulo” models can be used in Christian communal care based on traditional communal and
family gathering. This is against the perception that says that only the Western models or cultures can be used in Christian care and counselling or healing. Finally, the “Khari vangulane” model is the model of taking out the thorns. It indicates that the cultural resources should not be undermined. Like thorns they are available and cheaper to be found. Thorns need to be handle with care in order to be useful, if not they hurt. All these are indicative of further research and experimentation.

The next chapter contains the recommendations and conclusions of this research project. It thus concludes the whole thesis and also highlights some remaining themes that can be followed by future researchers who are interested in furthering the research and practice of communal pastoral care in this genre.
CHAPTER 8

RECOMMENDATIONS

8.1 INTRODUCTION

In this chapter the author wants to indicate that his thesis has shown how a Vhavenda-Christian communal model for healing that can help to care for people and heal pain. The author will review and highlight several important themes that have emerged from this thesis. The author will also indicate some themes that could be studied by other researchers as a way forward for enriching African-Christian communal care. Hence in this chapter the author will conclude by recommending some themes to be studied to develop this research field further. The study calls upon Christian communities to deepen their Christian faith by incarnating and contextualising the gospel to the people’s lives.

8.2 MODELS OF COMMUNAL PASTORAL CARE AND COUNSELLING TO PEOPLE IN PAIN

One problem this thesis addressed is that if pastoral care is done by trying to change people’s culture or way of life it will not address the real problem people are facing. Part of the reason why Christianity and Christian care in Africa is complex is that it has often been seen to be addressing Western problems as the real issues of African people. African issues like witchcraft and the ancestors were viewed as superficial or
superstitions and have been largely ignored. Christianity is thus made to appear like a foreign religion and foreign way of life. People live in two worlds, their own world which they truly believe in and the Western world which they are finally not really at home in. Contextualisation and incarnation are combined to present the gospel to people in such a way that they identify themselves with it. The contextualised, incarnated and inculturated gospel becomes part of people’s lives.

The author has indicated, as part of contextualisation and incarnation, that there are ways of ministering to people using communal gifted people without compromising the gospel. The “khoro” or “dzulo” gathering is one model of communal pastoral care with great potential for the Christian community. People gather around a person who has problem in trying to combine their heads to solve the patient’s problem. This usually also happens in a family context initially but can be expanded to become more communal and public. There is one to one care or counselling as indicated in the “kharivarugulane” model. This one person however does not act alone but should be seen as a representative of the family or the community.

The researcher of this thesis would invite other scholars to study these models and test them and improve on them in future research projects.

8.3 ALLIED RESEARCH AND THE NEED FOR MORE RESEARCH ON VHAVENDE COMMUNAL CARE MODELS

African cultures are dynamic and constantly evolving in interaction with other local and global cultures. Today there are more voices crying for a renaissance of African cultural renewal that highlights the need for re-emphasising the possibilities of
contextual communal care as well. As Christian communities in Africa we must not be ashamed to be called Africans, who will think like Africans and proclaim the link between African culture and religion which is also under God’s grace through Jesus Christ.

The communal pastoral care and counselling book reviews have indicated that people are still crying out for a deeper understanding and renewal of practice of the communal pastoral theology. The author invites people who live in African cultures to write down their personal narrative about their experiences of pain and healing. A danger for Christianity in African context is to become shallow when not taking African culture seriously but dealing with it superficially.

More new models need to be developed in this field. A good example of such a model is the recent research by Manala.¹ His Afro-Christian model notes that the Reformed tradition has stressed preaching but has been vague about the church’s ministry of healing. He correlates the powerful messages and practices of Jesus with African healing culture toward a creative and lively balance of a new model of a healing ministry for his Reformed denomination. More research theses of this type need to be encouraged and undertaken. More Afro-Christian healing models need to be developed and tested.

The following paragraphs list some of the themes that need a deeper research to realise a true communal pastoral care in practical theology.

**8.3.1 Pastoral care and counselling is for the whole community**

A major theme that came out of this thesis is the need for the development of a more communal emphasis in pastoral care and counselling. One theme that needs research

---

Pastoral counselling is not for the few but for the whole community. This is clearly an underdeveloped field both in the West and in African literature and practice. A person in pain needs the family and community support. A person in pain also needs Christian family and Christian community support. In the Christian community there remains the tendency for the minister or pastor to be expected to do it alone because of his or her profession. This model of the ministry needs to be challenged and reworked radically. Many congregations do not have fulltime pastors at present. How does the Christian community care without the pastor present? The whole area of communal care with and apart from the pastor needs to be researched carefully. This is a very rich research field which impinges greatly on the future of church communal care in Africa.

8.3.2 The culturally gifted people should do caring and counselling

As noted above, the Christian minister cannot do it alone without help from the Christian or church community. A second theme to be researched is: The culturally gifted people should be given a chance to care and counsel. The minister or pastor in a Christian community should learn what it means to be a facilitator, a servant leader and a community leader in enabling a mutual ministry of communal care to develop. In echoing the New Testament and African thinking in a community setting people must use their different gifts for serving the community. They need to be given a chance to do these services.

8.3.3 Counselling people who fear ancestral spirits and witchcraft

The third theme that needs research is: Pastoral counselling to people who fear ancestral spirits and witchcraft. This is an area for further research in Africa and among the Vhavenda people, including the Vhavenda Christians. In Vhavenda
culture, there are events which happened and lead to a person being possessed by ancestral spirits. The event is called “malombo” in Tshivenda. Originally the “malombo” dance invites the whole village. People were invited to come and sing as people who are possessed dance as part of acknowledging the ancestral spirits. A person who is possessed by the ancestral spirits and who fears witchcraft needs other people to accompany him or her in their life and current crisis. It immediately becomes communal care in the sense that many people are involved in the healing process. This type of communal care and healing needs deeper study by other researchers. It is also highly urgent as it affects people in Africa almost every day. There is a danger in the church of ignoring this type of problem and discouraging people from facing these questions head on. Pastoral care and counselling needs to be deepened for example regarding what spirits possession actually means, and methods which may be used to enable healing in such situations. A Christian “malombo” dance and the exorcism of the evil spirits may need to be developed to be compatible with these complex situations needing healing.

8.3.4 “Khoro” or “dzulo”: A model of communal pastoral care

The fourth theme that needs to be studied to enrich this thesis is: The “khoro” or “dzulo” model as a way of doing communal care. The community gatherings that are directed to solve the problem of an individual or the whole community should be seen as the way Vhavenda care and heal pain in the family or community. The smaller gathering which usually begins with the family is usually called “dzulo”. Even sickness associated with witchcraft is dealt with in these intimate gatherings. In such gathering around a sick member, people practising witchcraft (as suspected) are called to un-witch the sick member.
The “khoror” is broader than “dzulo” and involves the whole community. The community leader may call “khoror” to deal with issues of the community. According to the nature of the issue, a sub-committee (khorwana) may be appointed to deal with the person involved more closely so that a person is restored to the community and peace may be maintained. It is clear to the author that these models have great potential for the church and need to be explored further and refined further for greater use.

### 8.3.5 Communal pastoral counselling in indigenous African healers

The fifth theme to be researched is: *Communal pastoral care and counselling and instructions of indigenous initiation schools*. Some South Africans combine hospital scientific medicine with faith healing and indigenous healing to get the maximum results in the healing spheres. There are tension and conflict in the Christian healer’s procedures and African indigenous healer. These tension and conflict are not new because they can be traced in the Bible (Acts 8: 9 – 25). Further research needs to be undertaken to understand better the actual practices of these healers and should include interviews with both healers and those healed if possible. How these practices can or should be incorporated into Christian communal healing practices remains a great challenge for this researcher. The closest example of such integration is currently found in the African Independent Churches which is another area for future research by a new generation of African and not just European scholars.

### 8.3.6 Communal pastoral counselling in indigenous initiation schools

The sixth theme to be researched is: *Communal pastoral care and counselling and instructions in indigenous initiation schools*. The researcher suggests finally another more radical area of research involving communal pastoral care and healing in
indigenous initiation school. It would be useful to study in depth initiation schools and reflect more deeply on how many of their key ideas could be incorporated into the church communal care approach. The researcher is initiating this research to avoid throwing the child out with the bath water. Initiation schools are examples of communal pastoral care and counselling to people according to their age groups. There are schools strictly for males and those strictly for females. There are some that combine males and females.

The main objective of these schools is instruction or teaching and community building. Teaching and community building are part of pastoral care and counselling. The importance of teaching or instruction is the building up of a person’s maturity. A mature person is able to handle problems. The researcher, therefore, would like to recommend that a study on this theme be conducted. It may help pastoral care and counselling tremendously to connect teaching and care in a more contextual and more innovative manner than simply referring to educational counselling in Western textbooks.

8.4 CONCLUSION

The author would like to conclude this thesis by pointing out that pain can be healed by communal care and counselling. The communal care and counselling, uses the resources in the community. Each community member is given gifts of service to the community. This principle should be applied in a Christian community. Christ has given each member the gifts to serve the body of Christ. The special offices of the Church are to equip the community for “works of service” (Ephesians 4: 11 – 13). The service of a minister should, therefore, be to empower members to serve the
whole body. The minister, in this manner, gives church members enough room to serve each other. There are no spectators, all members are service providers.

Pastoral care is finally done to people in their specific settings. Communal pastoral care and counselling is a field with rich potential which needs to be explored further. This thesis has revealed many new dimensions for encouraging Afro-Christian communal care and particularly for such care of people in real pain. Further urgent research needs to be undertaken to test other models and enrich this growing field of research.


AUGSBURGER, DAVID. *Caring Enough to Confront* California: Regal Reading 1973.


LARTEY, EMMANUEL Y. In Living Colour: An Inter-Cultural Approach to Pastoral Care and Counselling (London: Biddles Ltd, Guildford and King’s Lynn, 1997).

LARTEY, EMMANUEL YARTEKWEI. Pastoral Counselling in Inter-Cultural Perspective (Franfurt am Main, Bern, New York: Verlag Peter Lang, 1987).


LORE-KELLY, CHRISTIN. Caring Community Chicago: Loyola University, 1983.

LOUW, DANIEL J. *Meaning in Suffering: A Theological Reflection on the Cross and the Resurrection for the Pastoral Care and Counselling* (Frankfurt am Main: Peter Lang, 2000).


MASON, JENNIFER. *Qualitative Research.* London: Sage, 1996.


MOETI, SAMUEL EDWIN. *Death in Indigenous Venda Culture.* (a paper submitted in accordance with the requirements for the degree of Honours Bachelor of Arts in the Subject Anthropology at the University of South Africa: Pretoria, 1987.

MSOMI, VIVIAN V. *Pastoral Counselling in South with Special Reference to the Zulu.* Cape Town: University of Cape, Dissertation, 1992.


NOLTE-SCHAMM, CLAUDIA. “Approaches to inter-religious and cultural dialogue.” *Practical Theology in South Africa, 2005, 20 (2).*


ODEN, THOMAS C. “Pastoral Care and Unity of Theological Education.” *Theology Today - Vl. 42, No. 1 - April 1985, p. 35.*


*STRONG’S HEBREW AND GREEK DICTIONARIES*, taken from Strong’s Exhaustive Concordance by James Strong, STD., LL.D. 1890.


This we Believe thus we Confess. Johannesburg: The Andrew Murray Congregation of the Dutch Reformed Church.


WOMAN’S VALUE (Monthly Magazine) January 2000 (Cape Town).


APPENDICES

APPENDIX 1: INTERVIEW QUESTIONNAIRE

KHA RI VANGULANE QUESTIONNAIRE

1. What is the most painful experience in your life?
   Ndi ngafhi he vha pfesa vhutungu kha vhutshilo havho?
2. What did your pain bring to you?
   Vhutungu havho ho vha disela mini?
3. What did you do to cope with your pain?
   Vho ita mini uri vha kone u kondelela na vhutungu havho?
4. How did the extended family heal the pain? If no one helped, what could be the reason?
   Muta kana mashaka vho thusa hani kha u fhedza vhutungu havho? Arali hu si na we a thusa, zwi nga vha zwo vhangwa nga mini?
5. How did your neighbour help in healing your pain? If they did not help, what are the possible reasons?
   Vhahura vhavho vho vha thusa hani u fhedza vhutungu? Arali vha songo vha thusa zwi nga vha zwo itiswa nga mini?
6. How did the Church community heal your pain? If they did not help in healing your pain, what could be the reasons?
   Tshitshavha tsha kerekeni tsho thusa hani u fhedza vhutungu havho? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
7. Can you explain the pastors’ role in the healing process? If they did not help in healing your pain, what could be the reasons?
   Vhafunzi vha vho ita mini kha u fhelisa hovhu vhutungu? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
8. What did other people or the whole community help during that time of pains?
   Ndi zwifhio zwi vhanwe vhathu kana tshitshavha nga u angaredza tsha ita u thusa kha vhutungu havho?
9. Did you visit a traditional healer to get a cure of your pain? Why did you deem it necessary? If not, why did you deem it unnecessary?
   Kha vhutungu havho vho vhuya vha dalela nanga kana mungome wa Tshivenda u ri vha wane phodzo? Ndi ngani vho vhona zwi tshi todea?
   Arali vha songo mu dalela ndi nga mini vho vhona zwi sa todei?
10. Which Tshivenda rituals did you perform to heal you? Why did you think they were necessary? If you did not enter into traditional rituals can you tell me why? Did you have some guilt feelings about using those rituals?
    Ndi ifhio misho ya Tshivenda ye vha dzhena khayo vha tshi toda u fhelisa hovhu vhutungu? Ndi nga mini vho vhona zwo fanela? Arali zwi siho kha vha talutshedze uri ndi nga mini vho songo dzhena khadzo. Arali vho dzhena khadzo kha vha talutshedze uri vho dipfa mulandu kana vho vhona hu sina zwo khakheaho naa?
11. How did you feel when ordinary people visit you? By ordinary people I mean those who are not pastors or traditional healer? (People who are entitled to help, not by their profession but because they are human beings or “vhathu vha vhathu” in the “bunt” understanding).

261
APPENDIX 2: QUALITATIVE INTERVIEWS (FOUR SAMPLES)

(The interview will be done in Tshivenda. In between the set questions there may be some question to clarify the explanation. It will be made as live as possible. The time of the interview may run from 20 minutes to 45 minutes)

Samples of pilot interviews:

Mrs A
The first person I interviewed was Mrs A (Not the real name). She is now widow. She is in her mid-fifties. She is a member of a Church that plays African Drums (as she described it)—I think it is one of the African Independent Churches.

Question 1
Rev. Phaswana: Mrs A, what is the most painful experience in your life?
(Vho-Mme A, ndi ngafhi he vha pfesa vhutungu kha vhutshilo havho?)
Mrs A: Mukalaha vha tshi mala musadzi wa Musuthu. Mukalaha vha tshi wana tshelede vha sa tsha nnea.
It is when my husband married a second wife, a Sotho woman. My husband did not give me money when he was paid.
Mrs A’s most painful experience is the second wife in their marriage. She told a story of her husband marrying a second wife while in Johannesburg. He took this decision by himself—without involving the family. She was surprise that he was no longer sending money to support the family as he was used to do. She went to Johannesburg and found that there is another wife. And she was not welcomed but she stayed. She started to sell African bear (mahafhe) to make money and send it to her children back home. That is her story.

Comments:
Mrs A’s main worry was not her husband’s second wife. As she might be in her mid-fifties, that was the common practice of the day. In the discussion her mother-in-law told her husband that he should have not have done that because he saw her suffering
in a polygamous marriage. But from Mrs A the main worry was the support of the family. The second wife was a Sotho—one felt here tribalism, like the woman of another tribe took her husband. Mrs A suspected that the money was being sent to this second wife’s parents. Her story shows that she worked hard for her children. Her husband was retrenched and got a little lump sum. Her husband and the second wife came back home (Venda). She remained in Johannesburg working until the end of the year. When she came back they have finished money. She looked for job in a local shop. The family was depending on her income. Her husband found a job in nearby town called Louis Trichatdt (Now Makhado). He worked in military. He arranged a place to stay in the town. The second wife followed. He did come back and did not send money back home. Things were hard because the mother-in-law moved which means the pension grant is gone. Anna told her elderly son (she had daughter who were married), who was in standard 8 (grade 10) to look after the end of the year. Her son told her to struggle for food because they have a house, which his father left for them. If he could manage to pass standard 10 he may look for a job. She followed her son’s advice. He passed standard 10 and went to Johannesburg and found a job. Her husband found that second wife had an affair with another man. So she was sent back home (Johannesburg). Her husband was retrenched again. He came back and depended on her again. She gave him money to go back to Johannesburg to look for a job. Things came back to normal. But that did not go long because he became sick and died. Now she feels relieved because her two sons are working. She does some traditional necklaces and sells them. If she needs anything she could call one of her son to send her money.

This happened more than twenty years ago. It is still painful up to this day. Family pain is durable—can last for long time in a person’s life. Mrs A felt deserted by her own husband because he was no longer standing by her and the children. She is saying that he should have supported his family even in this polygamous marriage. Now she has her community back—her children. They are keen to support her.

Question 2
Rev. Phaswana: Are there some other consequences of this pain?
(Hu na masiandaitwa o daho nga uvhu vhutungu?)
Mrs A: (Ndo rengisa halwa u thusa kha vhushai hanga. Huna duvha le ra semaine na muhadzinga wanga.)
I sold bear to help the family to get out from the poverty. One day we had a quarrel.

Comments:
She has a house and children but no food. That was to be in real poverty. The peace was gone from her marriage she had quarrel with her rival. It is not easy for two wives to share one man.

Question 3
Rev. Phaswana: How did you cope by yourself?
(Vho kona hani u ima nga vhone mune vhe vhothe?)
Mrs A: (Ndo tou kondelela)
I endure.

Comment:
In Mrs A’s story you can read endurance. She worked hard to raise her children. She could have moved out but she remained. Her son told her that their main worry is food because hey have a place to stay. She said that gave her courage to work hard.
Question 4
Rev. Phaswana: In what way did other people help during that time of pain?
(Vhanwe vhathu vho vha thusa nga zwifhio musi vha kha hovho vhutungu?)
Mrs A: (A hu na o nthusaho).
No one helped me.

Comments:
The word help might be suggesting financial help. In that sense there was no help, as she had to struggle on her own. This means that I must qualify help in things like finance, advices, moral support etc.

Question 5
Rev. Phaswana: How did your neighbours help in healing your pain? If they did not help, what are the possible reasons?
(Vhahura vhavho vho vha thusa hani u fhedza vhutungu? Arali vha songo vha thusa zwi nga vha zwo itswa nga mini?)
Mrs A: (Kha vhahura ndi muthihi we a nkoloda zwiliwa.)
From the neighbours one gave me maze meal (flour) for food when she saw that things are very difficult.

Question 6
Rev. Phaswana: How did the extended family heal the pain?
(Muta kana mashaka vho thusa hani kha u fhedza vhutungu havho?)
Mrs A: A vho ngo nthusa na luthihi.
They did not help me at all.

Comments:
The word help her might have financial connotation. It needs to be qualified as commented above.

Question 7
Rev. Phaswana: How did the Church community heal your pain? If they did not help in healing your pain, what could be the reasons?
(Tshitshavha tsha kerekeni tsho thusa hani u fhedza vhutungu havho? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?)
Mrs A: (Kereke a yo ngo nthusa. Kereke ya hashu a I thogomeli zwisiwana.)
The church did not help me. Our church does not have programme for the poor. We belong to a church that played drums.

Comments:
The word help and heal need to be qualified. Mrs A knows that in other churches (mainline) there is collection for the poor. Her son is the member of the church I was serving.

Question 8
Rev. Phaswana: Can you explain the pastors’ role in the healing process? If they did not help in healing your pain, what could be the reasons?
(Vhafunzi vha vho ita mini kha u fhelisa hovhu vhutungu? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?)
Mrs A: (Ndo tou ya kha mufunzi we a nkhuthadza.)
I went to another pastor who comforted me.
Comments:
The word “help” needs to be qualified in the main interviews

Question 9
Rev. Phaswana: Did you visit a traditional healer to get a cure of your pain? Why did you deem it necessary? If not, why did you deem it unnecessary?
Kha vhutungu havho vho vhuya vha dalela nanga kana mungome wa Tshivenda u ri vha wane phodzo? Ndi ngani vho vhona zwi tshi todea? Arali vha songo mu dalela ndi nga mini vho vhona zwi sa todei?
Mrs A: (A thongo ya ngauri ho vha hu sin a vhulwadze. Ndo vhona zwi sa todei.)
I did not consult because it was not sickness. I found it unnecessary.
Comments:
She felt that she could not visit a traditional healer because she was not sick.

Question 10
Rev. Phaswana: Which Venda rituals did you perform to heal you? Why did you think they were necessary? If you did not enter into traditional rituals can you tell me why? Did you have some guilt feelings about using those rituals?
(Ndi ifhio misho ya Tshivenda ye vha dzhena khayo vha tshi toda u fhelisa hovhu vhutungu? Ndi nga mini vho vhona zwo fanela? Arali zwi siho kha vha talutschedze uri ndi nga mini vha songo dzhena khadzo. Arali vho dzhena khadzo kha vha talutschedze uri vho dipfa mulandu kana vho vhona hu sina zwo khakheaho naa?)
Mrs A: (A huna)
None.
Comments:
She might have not done because she did not visit a traditional healer

Question 11
Rev. Phaswana: How did you feel when ordinary people visit you? By ordinary people I mean those who are neither pastors nor traditional healers?
(Vhone vho pfa mini vho dalelwa nga vhathu zwavho? Vhathu zwavho ndi khou amba vha si vhafunzi kana nanga / mungome wa Tshivenda.)
Mrs A: Ndo pfa ndo thusea.
I felt relieved.
Comments:
By the word visit I meant to be concerned with the problem. But she understood visit in the ordinary way. In communal community people have time to be together. Those simple visits comforted her.

Question 12
Rev. Phaswana: From Venda tradition what can be kept in healing process? Can you explain why it should be kept?
(Kha zwa sialala la Vhavenda vha vhona uri ndi zwifhio zwine vha tea u zwi khetha kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?)
Mrs A: A hu na. Muthu u tea u rabela Muthemba.
Nothing. One should pray God.
Comments:
She does not believe that there are traditional things that can help in healing. People should pray God for healing.

265
Question 13
Rev. Phaswana: From Venda tradition what do you think should not be kept in healing pains? Can you explain why it should not be kept?
(Ndi zwifhio, zwa Tshivenda, zwine vha sa tea u zwi dzhenisa kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?)
Mrs A: U ya dzinangani. A songo ya thanguni ngauri thangu dzi a lutanya.
One may visit the doctors. He or she should not use divination (throwing bones to diagnose the problem) because it will cause conflict.

Comments:
People, who diagnose the problem by throwing bones, according to Anna, are causing conflicts in people’s lives.

Question 14
Rev. Phaswana: What can you advise to someone in pain for speedy recovery?
(Vha nga eletshedza mini kha muthu a re vhutunguni uri vhu fhele nga u tavhanya?)
Mrs A: Kha ye kerekeni. Hu na munwe we a vha e kha thaidzo nda mu eletshedza uri kha ye kerekeni uri thaidzo yawe I fhele. Zwino thaidzo yawe yo no fhungudzea.
He or she should go to church. There was someone who had a problem, I advised her to attend church. Now her problem is reduced.

Comments:
Mrs A has a trust in church community.

Mrs C
Mrs C is an old granny at her about seventies.

Question 1
Rev. Phaswana: What is the most painful experience in your life?
(Ndi ngafhi he vha pfesa vhutungu kha vhutshilo havho?)
Mrs C: (A huna. Malwadze a divha hone. Lufu ndo tangana na lwa nwana’nga wa mufumakadzi. Lwo mbavha.)
I had no pain. Yes there are some sicknesses in my life. My daughter died. Her death did hurt me.

Comments:
Mrs C was not sure of the question. At first she denied any experience of pain in her life. But she went on to say her body is on and off with regard to health. The death of her daughter pained her. She felt pain because she was thinking that he daughter was going to bury her. Her daughter was still young and she was expecting that she will bury her. But now things happen in reverse (another round). Due to Aids pandemic this is becoming common that parents are arranging burials of their children. The argument of the elderly is who is going to bury them as the youth are dying.

Question 2
Rev. Phaswana: Are there some other consequences of this pain?
(Huna masiandaitwa o daho nga uvhu vhutungu?)
Mrs C: (A hu na.)
There is nothing.

Comments:
The word needs a serious qualification or simplification. One can read that she has to look after her grandchildren.

Question 3
Rev. Phaswana: How did you cope by yourself?
(Vho kona hani u ima nga vhone mune vhe vhothe?)
Mrs C: (Ndo kondelela. A ho ngo vha na khakhathi.)
I endure. There was no problem.

Comments:
Endurance is the message to the bereaved. One has to take in the pain. The bereaved are not expected to cry openly in Venda culture.

Question 4
Rev. Phaswana: In what way did other people help during that time of pains?
(Vhanwe vhathu vho vha thusa nga zwifhio musi vha kha hovho vhutungu?)
Mrs C: (Society yo thusa.)
Burial Society helped me.

Comments:
She is a member of a Burial Society. There are many societies focusing on burial. In case of death these societies play an important role in their members. The problem with many of them is that they are only focusing on death or funeral. They are not worried with alleviation of poverty or medication when a member is ill. I cannot forget the experience of the death of a mother of man who was attending our church. He told me that she was sick. There was no cent in the house. He loan some money to hire a car to take his mother to hospital. She died on the way. I attended the evening devotions during the week. Things were contrary to what I was told. There was plenty of food. On the day of funeral it was as like a burial of a queen. On the way to cemetery, her casket was led by women with the flag of the burial society. When I inquire, I found that she was leading a branch of one burial society. People in African communities today may look poor, unable to pay tuition fee for their children, unable to have medication, but when they die there is money saved in burial society. There is a joke that says “They may fail to take you to university but they may not fail to bury you.” There is something wrong with this picture. The present should be looked as important as the future.

Question 5
Rev. Phaswana: How did your neighbour help in healing your pain? If they did not help, what are the possible reasons?
(“Vhahura vhavho vho vha thusa hani u fhedza vhutungu? Arali vha songo vha thusa zwi nga vha zwo itiswa nga mini?)
Mrs C: (A vho ngo thusa, hu shuma society)
They did not help. The Burial Society served.

Comments:
She told me that in other communities the whole community contribute to the deceased family. But here it was the work of Burial Society.

Question 6
Rev. Phaswana: How did the extended family heal the pain?
(Muta kana mashaka vho thusa hani kha u fhedza vhutungu havho?)
Mrs C: (Vho thusa nga masheleni.)
They help with money.

Comments:
There were some contributions from family member and relatives to help the funeral service.

Question 7
Rev. Phaswana: How did the Church community heal your pain? If they did not help in healing your pain, what could be the reasons?
(Tshitshavha tsha kerekeni tsho thusa hani u f hedza vhutungu havho? Arali vha songo thusa vha humbula uri zwo vh angwa nga mini?)
Mrs C: (Nga u ita thabelo madekwana manwe na manwe)
They came here for prayer every evening.

Comments:
It has become a culture that people come together for the reading of Scriptures and prayer a week of burial. This does not matter whether a person is a Christian or not. They come in their great numbers to stand by the side of the bereaved.

Question 8
Rev. Phaswana: Can you explain the pastors’ role in the healing process? If they did not help in healing your pain, what could be the reasons?
(Vhafunzi vha vho ita mini kha u fhelisa hovhu vhutungu? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?)
Mrs C: (Ho vha na vhafunzi vhe vha thusa. A tshi tsha divha dzina lavho.)
There was a pastor who helped. I forgot his name.

Comments:
Pastors and church members are important people in case of death. They support a bereaved family in singing, reading the Bible and prayer. In this case to be a pastor is to serve. The important issue is not position or to be ordained and trained.

Question 9
Rev. Phaswana: Did you visit a traditional healer to get a cure of your pain? Why did you deem it necessary? If not, why did you deem it unnecessary?
(Kha vhutungu havho vho vhuya vha dalela nanga kana mungome wa Tshivenda u ri vha wane phodzo? Ndi ngani vho vhona zwi tshi todea? Arali vha songo mu dalela ndi nga mini vho vhona zwi sa todei?)
Mrs C: (Vhafunzi nga vha ri ndi vha vhudze ngo ho kale-kale ndo vhuya nda ya nangani. Hone zwin o a thi tsha ya. A thongo ya mungomeni kha hovhu vhutungu.)
Reverend let me tell you the truth: Sometimes ago I used to go to diviners. Now I am no more consulting the diviners. In this case I did not go to the diviner to heal the pain.

Comments:
It is difficult to understand what she is saying by this because when someone dies though the church is involved, family members visit a diviner.

Question 10
Rev. Phaswana: Which Venda rituals did you perform to heal you? Why did you think they were necessary? If you did not enter into traditional rituals can you tell me why? Did you have some guilt feelings about using those rituals?
I did not do any Venda rituals. I visited Church people who use ropes. We also visited a traditional diviner to diagnose the cause of death.

**Comments:**
These contradictions are not problems because things are combined to supplement each other. Church people do visit the diviner to find out who caused the death. In that case a diviner was called in. The question is: Why can’t they do one thing rather than mixing? The answer is that one is weak in one thing in which the other is strong at.

**Question 11**
Rev. Phaswana: How did you feel when ordinary people visit you? By ordinary people I mean those who are not pastors, nor traditional healer?

Mrs C: (I felt relieved. Because I wanted my daughter to be the one who buried me.)

**Comments:**
Her problem was that this should have been her funeral. So when people came in her house they relieved her. They were discussing other things in their community to take her away from thinking about death of her daughter.

**Question 12**
Rev. Phaswana: From Venda tradition what can be kept in healing process? Can you explain why it should be kept?

Mrs C: (A person should comfort he-/herself.)

**Comments:**
Self-comfort has to do with self-teaching. In this world people come and go. Death is reality—one has to look at the great-grandparents who have gone. We are also going the same way.

**Question 13**
Rev. Phaswana: From Venda tradition what do you think should not be kept in healing pains? Can you explain why it should not be kept?

Mrs C: (One should not gossip. If she gossips she will be in conflict with the people. People come and go in this world. Where are those who created my great-great grandparents?)

**Comments:**
The message is that even if people put in their traditional belief they will die. So they should not fight people by gossiping. My hunch of gossip is to tell stories of being bewitched by someone. This will not help but will create enmity with other people.

Question 14
Rev. Phaswana: What can you advise to someone in pain for speedy recovery?
Mrs C: (Arali muthu o welwa nga lufu rine vhaahuwa ri ya khac ram u vusela uri o lala hani. Hunwe vha mbilu thukhu ri wana vha tshi khou lila. Ri a vha khuthadza nga la uri a zwo ngo thoma nga ene. Ri mu tutuwedza u kondelela uri a sa lile. Muthu u rindidzwa nga vhathu.)
If one’s family member dies we the elderly should visit her and ask how he / she is feeling. In other cases we find people with small heart crying. We comfort them by saying death is not starting with their family. We encourage him / her to endure and stop crying. A person is comforted by other people.

Major Qualitative interviews:

The Tshivenda version in answers was not used here. The researcher saw that using Tshivenda (which is original version) will make the sample too long. The English is the researcher’s translation.

11 April 2006
Mr 4
He is about seventy years.
1. Tell me, when and where did you experience pain, in your life?
Vha vha talutshedze uri vho pfa vhutungu lini kana ngafhi kha vhutshilo havho.
He was involved in car accident. The car was in flame. His conductor help to open the door and he jumped into the dam full of crocodiles. Likely they run away. He heard the people shouting crocodiles. He went out immediately. He was taken to hospital for burns wounds. The other painful was that none of his relatives knew about it while he was in hospital. They heard it while he was out of hospital. He also related to me about the painful experience about his father’s death. He suspected that his father was poisoned. He spent a lot of money going to diviners looking for who killed him and found out that he was not dead but was changed to zomby.
2. What did your pain or suffering bring to you?
Vhutungu kana u tambula havho ho vha disela mini?
He spent a lot of money going to diviners to find out the cause of his father’s death. There was confusion in the family because it was suspected that his father was poisoned.
3. What did you do to cope with your pain?
Vho ita mini uri vha kone u kondelela na vhutungu havho?
It was difficult. Even today when he thinks about it is painful. He sometimes thinks he will die like his father.
4. How did the extended family heal the pain? If no one helped, what could be the reason?
5. How did your neighbour help in healing your pain? If they did not help, what are the possible reasons?
Vhahura vhavho vho vha thusa hani u fhedza vhutungu? Arali vha songo vha thusa zwi nga vha zwo itiswa nga mini?
They were not of help. They also inflame roamers about poisoning. Some said his mother killed his father.

6. How did the Church community heal your pain? If they did not help in healing your pain, what could be the reasons?
Tshitshavha tsha kerekeni tsho thusa hani u fhedza vhutungu havho? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
While at work he was attending a church. Going back to work in Groblesdal, members of the church visited him and prayed for him. He identified the church he was attending as Full Gospel.

7. Can you explain the pastors’ role in the healing process? If they did not help in healing your pain, what could be the reasons?
Vhafunzi vha vho ita mini kha u fhelisa hovhu vhutungu? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
The pastor of his church in Groblesdal visited him. He identified his pastor as Mangaya

8. What did other people or the whole community help during that time of pains?
Ndi zwifhio zwe vhanwe vhathu kana tshitshavha nga u angaredza tsha ita u thusa kha vhutungu havho?
They did not help him. The communities were not yet arranged as it is today that when one dies people contribute to help in the funeral. He was given a car from his work to use for the funeral. It was painful to him.

9. Did you visit a traditional healer to get a cure of your pain? Why did you deem it necessary? If not, why did you deem it unnecessary?
Kha vhutungu havho vho vhuya vha dalela nanga kana mungome wa Tshivenda u ri vha wane phodzo? Ndi ngani vho vhona zwi tshi todea?
Arali vha songo mu dalela ndi nga mini vho vhona zwi sa todei?
He visited traditional healers in order to know the cause of his father’s death. There roamers that he is a zombie. But he did not believe in zombies.

10. Which Tshivenda rituals did you perform to heal you? Why did you think they were necessary? If you did not enter into traditional rituals can you tell me why? Did you have some guilt feelings about using those rituals?
Ndi ifhio misho ya Tshivenda ye vha dzhena khayo vha tshi toda u fhelisa hovhu vhutungu? Ndi nga mini vho vhona zwo fanela? Arali zwi siho kha vha talutshedze uri ndi nga mini vha songo dzhena khadzo. Arali vho dzhena khadzo kha vha talutshedze uri vho dipfa mulandu kana vho vhona hu sina zwo khakhheaho naa?
All rituals involved death was performed. The rituals included purification by sprinkling water on palms inside and outside, neck back and front; feet under and top. All seeds were burnt and made into a powder and people ate it.
11. How did you feel when ordinary people visit you? By ordinary people I mean those who are not pastors or traditional healer?
   Vhone vho pfa mini vho dalelwa nga vhathu zwavho? Vhathu zwavho ndi khou amba vha si vhafunzi kana nanga / mungome wa Tshivenda.
   Church people used to visit him. That helps him because he did believe there are zombies. But he suffered in dreams. He dreamed his father telling him to wake up and see. When he woke up going around the house he found his sister and her husband and doctor performing some rituals. He was disturbed and wanting to fight them.

12. From Vhavenda tradition what can be kept in healing process? Can you explain why it should be kept?
   Kha zwa sialala la Vhavenda vha vhona uri ndi zwifhio zwine vha tea u zwi khetha kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?
   There must be communication. The family should sit down and discuss the issues.

13. From Vhavenda tradition what do you think should not be kept in healing pains? Can you explain why it should not be kept?
   Ndi zwifhio, zwa Tshivenda, zwine vha sa tea u zwi dzhenisa kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?
   He does not want traditional diviners and the prophets because they tell lies.

14. What can you advise to someone in pain for speedy recovery?
   Vha nga eletshedza mini kha muthu a re vhutunguni uri vhu fhele nga u tavhanya?
   He should just trust in the Lord.

04 May 2006
Mrs 6
45 years
1. Tell me, when and where did you experience pain, in your life?
   Kha vha talutshedze uri vho pfa vhutungu lini kana ngafhi kha vhutshilo havho.
   She suffered pain in 2002 when her husband decided not to come home. When she followed him and she heard that he had an affair another woman. He spent a lot of money with another woman. He came back home with a bag of maze meal. There was no money and no soap. He was injured while fighting for bear—he was stabbed by something sharp in the spinal cord. This instance added her pain.

2. What did your pain or suffering bring to you?
   Vhutungu kana u tambula havho ho vha disela mini?
   There are good things. She thought of connecting to the church. There was no food at home. The church is helping her.

3. What did you do to cope with your pain?
   Vho ita mini uri vha kone u kondelela na vhutungu havho?
   God helped her to cope with the pain. She consoled herself by saying that she will survive. She clings to a Tshivenda proverb that says: “A hu na vhinda la ndala”; translated —there is no grave of hunger.
4. How did the extended family heal the pain? If no one helped, what could be the reason?
   Muta kana mashaka vho thusa hani kha u fhedza vhutungu havho? Arali hu si na we a thusa, zwi nga vha zwo vhangwa nga mini?
   No relative helped her. But her children who were working helped by giving some food.

5. How did your neighbour help in healing your pain? If they did not help, what are the possible reasons?
   Vhahura vhavho vho vha thusa hani u fhedza vhutungu? Arali vha songo vha thusa zwi nga vha zwo itiswa nga mini?
   They did not help.

6. How did the Church community heal your pain? If they did not help in healing your pain, what could be the reasons?
   Tshitshavha tsha kerekeni tsho thusa hani u fhedza vhutungu havho? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
   The church community help her by food and clothes and building a shelter for her and the family.

7. Can you explain the pastors’ role in the healing process? If they did not help in healing your pain, what could be the reasons?
   Vhafunzi vha vho ita mini kha u fhelisa hovhu vhutungu? Arali vha songo thusa vha humbula uri zwo vhangwa nga mini?
   Pastor came in and prayed for her and helped with the church providing materials for her family.

8. What did other people or the whole community help during that time of pains?
   Ndi zwifhio zwe vhanwe vhathu kana tshitshavha nga u angaredza tsha ita u thusa kha vhutungu havho?
   They did not help her.

9. Did you visit a traditional healer to get a cure of your pain? Why did you deem it necessary? If not, why did you deem it unnecessary?
   Kha vhutungu havho vho vhuya vha dalela nanga kana mungome wa Tshivenda u ri vha wane phodzo? Ndí ngani vho vhona zwi tshi todei?
   Arali vha songo mu dalela ndi nga mini vho vhona zwi sa todei?
   She did not visit a traditional healer. She attended church some years ago. So she did not think it proper to visit the traditional healer.

10. Which Tshivenda rituals did you perform to heal you? Why did you think they were necessary? If you did not enter into traditional rituals can you tell me why? Did you have some guilt feelings about using those rituals?
    Ndi ifhio misho ya Tshivenda ye vha dzhena khayo vha tshi toda u fhelisa hovhu vhutungu? Ndi nga mini vho vhona zwo fanela? Arali zwi siho kha vha talutshedze uri ndi nga mini vha songo dzhena khadzo. Arali vho dzhena khadzo kha vha talutshedze uri vho dipfa mulandu kana vho vhona hu sina zwo khakheaho nna?
    None.

11. How did you feel when ordinary people visit you? By ordinary people I mean those who are not pastors or traditional healer?
    Vhone vho pfa mini vho dalelwanga vhathu zwavho? Vhathu zwavho ndi khou amba vha si vhafunzi kana nanga / mungome wa Tshivenda.
    She felt relieved.
From Vhavenda tradition what can be kept in healing process? Can you explain why it should be kept?

Kha zwa sialala la Vhavenda vha vhona uri ndi zwifhio zwine vha tea u zwi khetha kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?

There is nothing. People should trust in God.

From Vhavenda tradition what do you think should not be kept in healing pains? Can you explain why it should not be kept?

Ndi zwifhio, zwa Tshivenda, zwine vha sa tea u zwi dzhenisa kha u fhelisa vhutungu? Ndi nga mini vha tshi ralo?

People should not visit traditional healers.

What can you advise to someone in pain for speedy recovery?

Vha nga eletshedza mini kha muthu a re vhutunguni uri vhu fhele nga u tavhanya?

She would advise a person in pain to pray.

APPENDIX 3: DZULO OR KHORO PROGRAMME (A SAMPLE)

DZULO PROGRAMME

The steps of African Christian palaver can be:

(1). Opening prayer: It is calling upon the name of God through Jesus Christ asking his intervention in the deliberation and that the gathering should bring healing and peace in the community, which a minister of a Christian church may lead;

(2). Welcome and introducing the purpose of the meeting: The family or community leader is responsible for this task to let every person free and know why people are called;

(3). Expanding the problem by a patient: The person with the problem explains his or her problem to the participants of the gathering added by some people who know that problem;

(4). Other participants taking turns in sharing their experience and advices: People come with different experience of the problem and minister may a relevant passage and explain it to the participants;

(5). Concluding remarks and directions: Elders or family / church / community leaders come in giving the directions of the matter. Usually they are silence during the previous steps but listening inventively for this step;

(6). Closing prayer: The gathering end by a word of prayer of gratitude and requests for true implementation of the decision arrived at the gathering, which a minister of the church may lead with the reading of the Bible;

(7). Celebrations by joining in sharing food or socialization: As the gathering is on there are other people preparing food. Vhavenda say, “Ri senga ri tshi la”, translated as “we speak while eating”. The meaning is that meeting should not be celebrated from food. This is not just food, it is the celebration. Thus it is accompanied by dancing. This model can fit in well with the Christian-Vhavenda gatherings following a similar pattern.