“CHILD DEFILEMENT” IN ECCLESIAL CONTEXTS IN ZAMBIA:

A PASTORAL PERSPECTIVE.

BY

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DECLARATION

I declare that the dissertation/thesis hereby submitted to the University of Pretoria for the degree in PhD (Practical Theology) has not previously been submitted by me for a degree at this or any other University that it is my own work in design and execution and that all material contained herein has been duly acknowledged.

Signed (student): ________________________________

Date: ________________________________

Signed (supervisor): ________________________________

Date: ________________________________
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Firstly I would like to express my deepest gratitude to the almighty God for enabling me to complete this work.

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I am thankful to all the mothers who are affected by child defilement by a church leader that I interviewed in this research. Thank you very much for the information.

Finally, I would like to thank my partner and my wife Eunice and my four children; Precious, Mthunzi, Wanzi and Tionge for supporting and sacrificing for me to travel from Zambia to South Africa to accomplish this work. For their encouragement I shall forever be indebted.
DEDICATION

This thesis is dedicated to all those mothers and their families who have suffered from pain and hurt following disclosure of defilement of their daughter by a church leader and

To all those who are dedicated to loving and caring for mothers and their families who are traumatized as a result of their children (daughters) being defiled by a church leader and

In memory of my father, Mr. Wilfred Musumba Banda who was called by the lord on the 17th of February, 2016. Father, in the words of my supervisor Prof. Maake Masango, you were indeed going to be the first one to congratulate me for this work. May Your Soul Rest in Peace.
## ABREVIATION

<table>
<thead>
<tr>
<th>Abbr.</th>
<th>Description</th>
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<tbody>
<tr>
<td>AFP</td>
<td>Agency France Press</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>CPE</td>
<td>Clinical Pastoral Education</td>
</tr>
<tr>
<td>CRC</td>
<td>Co-ordinated Response Center</td>
</tr>
<tr>
<td>CSA</td>
<td>Child Sexual Abuse</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>PEP</td>
<td>Post Exposure Prophylaxis</td>
</tr>
<tr>
<td>RCC</td>
<td>Roman Catholic Church</td>
</tr>
<tr>
<td>STD</td>
<td>Sexually Transmitted Diseases</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNCRC</td>
<td>United Nations Convention on the Rights of Children</td>
</tr>
<tr>
<td>USA</td>
<td>United States of Africa</td>
</tr>
<tr>
<td>UTH</td>
<td>University Teaching Hospital</td>
</tr>
<tr>
<td>VCT</td>
<td>Voluntary Counselling and Testing</td>
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<td>VOCAL</td>
<td>Victims of Child Abuse Law</td>
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SUMMARY

This study is an explorative, qualitative study on how mothers experience the defilement of their own children by a church leader in the Zambian context. The aim of the study is to get some insight into how the defilement affect the mothers, and the challenges that occur in their lives regarding their relationships with their defiled children and other people who are around them. The researcher also looks at how the role of motherhood has been affected by the defilement.

Qualitative research methodology was employed in this research study. This enabled the researcher to understand the social constructions of mothers and how they experience the disclosure of defilement of their children by a church leader. The researcher used semi-structured interview to collect data from the eight mothers affected by child defilement who were selected from within Lusaka, the capital city of Zambia. Thematic Analysis as a method of data analysis was employed in this research study. In employing this form of analysis, the researcher identified major concepts or themes that came up during the discussions with the interviewed mothers. The following are the themes that came out of the data that was provided by the affected mothers: Loss of religious faith, less trust in the church leaders, dissatisfaction of their parenting role, Feelings of anger towards the perpetrator, feelings of guilt, feelings of shame, marital problems, relationship problems with their daughters, concerned that their children might have contracted HIV and AIDS, and worried that their children have lost their virginity.

In this research study, the researcher has used Gerkin’s shepherding method of pastoral care to address the emotional experiences of the mothers following disclosure of defilement of their children by a church leader. This methodology is helpful because it provides an integrated approach to healing that is enculturated in the African belief system and culture,
which views healing as taking place within the community and not in isolation. Gerkin’s shepherding methodology is augmented by Waruta and Kinoti’s work, *Pastoral Care in African Christianity* and Pollard’s evangelism method of positive deconstruction. These three methodologies have been employed to help in empowering the mothers to come to terms with the effects of child defilement by a church leader.
KEY TERMS

Defilement
Child
Child defilement
Mothers affected by child defilement
Church leaders
Qualitative research
Pastor
Pastoral care
Hermeneutical model.
Shepherding method
Constructivist approach
Ecclesial context
Thematic Analysis
CHAPTER ONE

1.1 INTRODUCTION.

This study is about child defilement in ecclesial contexts in Zambia. By ecclesial contexts, the researcher basically refers to those contexts where one finds the church’s organizations and services. These can be parishes/congregations and institutions owned by churches such as schools, hospitals, training centres etc. The perpetrators of child defilement in these contexts can be anyone ranging from a church leader to a non-church leader. In this research study, the focus on perpetrators of child defilement will mainly be on the church leaders. Child defilement by a church leader is explained in detail later in this chapter.

Child defilement, in the Zambian context, is when a man has sexual intercourse with a girl who is under the age of sixteen years. Based on this definition, it is a criminal offence under the Zambian law for a man to carnally know a girl under sixteen years because it is assumed that a girl below this age should not engage in sexual intercourse. Having sexual intercourse with a girl who is under the age of sixteen years is a violation of human rights. This is because the incidence exploits the minor.

The Zambian law on child defilement states that:

- Any person who unlawfully and carnally knows any child commits a felony and is liable upon conviction to a term of imprisonment of not less than fifteen years and may be liable to imprisonment for life.
- Any person who attempts to have carnal knowledge of any child commits a felony and is liable upon conviction to imprisonment to a term of not less than fifteen years under the age of sixteen years is guilty of a felony and is and not exceeding twenty years.
Any person who prescribes the defilement of a child as a cure for an ailment commits a felony and is liable, upon conviction to imprisonment for a term of not less than fifteen years and may be liable to imprisonment for life.

A child above the age of twelve years who commits an offence under subsection (1) and (2) is liable, to such community service or counselling as the court may determine in the best interest of the child. (Penal code, chapter 87 and section 138).

A child under the Act is defined as a person who is below the age of sixteen. There is no specific sex mentioned, so it cuts across both sexes i.e. boy and girl.

The researcher would like to point out from the outset that in this study, the term “child defilement” has been used to mean the same thing as “child sexual abuse”. This is because the two terms are synonymous. Therefore, these two terms will be used interchangeably in this study. The term ‘defilement’ is discussed in details later in chapter four of this research study.

1.2 Background of the study.

A starting point in talking about child defilement in ecclesial contexts is to understand the levels of child defilement within the community as revealed by both the printed and electronic media. Below are the descriptions of child defilement within the community and in the ecclesial contexts.

1.2.1 Child defilement within the community.

The subject of child defilement has in the recent years become a topical issue in Zambia. A day hardly passes without hearing of news from the Zambian media (printed and electronic) that a child has been defiled somewhere. For example, the daily mail of January 30, 2015 reported a defilement case of a 16 year old girl who was defiled by her father while nursing
her in the hospital. Details of the report were that a 47 year old man was arrested by police in Lusaka for defiling his 16 year old daughter whilst she was being nursed at Lusaka’s University Teaching Hospital (UTH). The Police spokesperson of the Zambia Police Service said the man took advantage of his ailing daughter who had not been talking for close to two months by defiling her each time he took her to the bathroom. “My father used to lift me and we would sleep under the hospital bed together”, revealed the 16 year old girl. The man has since been arrested after his daughter revealed to the nurses that her father used to defile her each time he took her to the bathroom.

The girl while in shock revealed that her father had inflicted pain on her. “My body is in pain. Everything is paining, especially the legs and my private parts,” she said. Asked what she could remember from the incident, the girl said “All I can remember is that my father at times used to lift me from the bed and we would sleep under the bed together. Sometimes he used to put me on his lap and would also at times take me to the bathroom. He used to touch and squeeze my body. I don’t know what he was trying to do but he used to put his ‘thing’ here (her private part),” she said. She said the only reason her father was taking care of her was because her mother had died.

Mwebantu New Media of July 19th, 2015 reported another defilement case of a two year old girl from the Chibombo district of Zambia by unknown people. The details of the report were that a two year old girl of Chipembele in Chief Liteta’s chiefdom in Chibombo district was defiled and murdered by unknown people. The incident happened at 21:00 hrs in the evening. The Central Province Commissioner of Police said the girl was sleeping in her mother’s house when unknown people sneaked in and snatched her. She explained that the mother of the girl had left home and was at her relative’s house located within the same neighbourhood when the girl was snatched out of the house. The commissioner said that the body of the child was
discovered in the morning in the nearby bush about 200 meters from the house where she had slept.

Another reported defilement case was that of a 12 year old girl by a taxi driver which was reported by the Zambia Post newspaper of October 12, 2015. During trial at the court, the girl testified how the man (the taxi driver) defiled her in his taxi.

“On the material day, my mother came home with a taxi after she went to buy chicken feed. My Mother gave me K20 (USD 2.00) and said I must go with the taxi driver to get change at the filling station. To my surprise, the man sped on. I asked him where he was going. He drove beyond and reached a bushy place where he stopped and put the car radio on full blast and locked the doors,” she said in court.

“I started pleading with him not to do anything. He then pulled up my dress and ripped my pants. I was shouting but no one came to rescue me. He then unzipped his trousers… He made me lie face up, then he put my legs apart and had sex with me. It was painful and itchy. When he finished having sex, he threw me out of the taxi and threw my pant and K10 (USD 1.00), my mother’s change.” The girl told the court.

Passing judgement, Kitwe High Court Judge Isaac Kamwendo said cases of defilement were on the rise.

“These crimes are on the increase and I want to send a message to others. I will sentence you to 25 years imprisonment with hard labour,” pronounced judge Kamwendo.

These are some of the examples of child defilement cases that have been reported by the Zambian media. With the reports on defilement cases, are the numbers of girls and boys who have been defiled in a particular period. For example, the Zambia daily mail of March 8, 2013
reported that 6,277 Zambian girls had been defiled between 2010 and 2013. Of this total figure, 2,419 cases were recorded in 2010, while 2011 and 2012 had 1,339 and 2,369 respectively. Out of these, 2,839 cases were prosecuted and 789 convictions were secured (http://www.dailymail.co.zm). This came in the wake of Home Affairs deputy minister Hon. Stephen Kampyongo’s revelation in the Parliament of Zambia when he gave a ministerial statement that over 6000 girls had been defiled in the past three years i.e. between 2011 and 2013.

The ministerial statement was echoed by the revelation made by Chief Justice Ernest Sakala at the official opening of the High Court Criminal Sessions for 2012 in Lusaka on 10th of January 2012. The Chief Justice revealed that sexual offences such as defilement topped the list of convicted persons in Zambian prisons despite the stiff laws in place. He pointed out that offences of defilement had continued to rank amongst the highest, with police records showing that 1,089 defilement and 75 rape cases were recorded in 2011 in Lusaka alone. Justice Sakala expressed concern that despite the enactment of the Sexual Offences Minimum Act, which prescribed a mandatory minimum sentence of 15 years to life imprisonment for sexual offences, perpetrators had continued to defile the children. Justice Sakala called for a holistic approach to seeking a lasting solution.

The daily mail of 5th October, 2015 also reported that incidences of child defilement had continued to rise with the child sexual abuse One-Stop-Centre at the University Teaching Hospital (UTH) recording 146 cases in September, 2015. A paediatrician at the UTH, Dr. Lalick Banda, in an interview, noted that the increase in defilement cases was despite the continuous campaigns against the vice and the deterrent jail sentences. Dr. Banda noted that most of the defilement victims were between ages 11 and 15, and that there were 108 cases recorded in September 2014. “We have recorded 146 cases in September alone. This is the
highest we have ever recorded in a month and we anticipate the figures to be higher this year (2015) because we have not got any number lower than 90 from January to September this year (2015),” he said. He explained that victims of defilement at UTH’s Child Sexual Abuse One-Stop-Centre are tested for HIV and are provided with post – exposure preventive medication and emergency contraceptive in the case of adolescents. Dr. Banda further said it is unfortunate that some children contract the virus after the sexual assault, and that some mothers stop their children from taking preventive anti-retroviral drugs, especially when they experience side effects.

Dr. Banda said between January and August 2015, 56 girls got pregnant after the ordeal; 19 boys were sexually abused; and that 170 children aged between zero and five years were sexually abused. He said the One-Stop-Centre at the paediatric centre of excellence at UTH is working to ensure that children are protected from acquiring HIV, while providing care to those infected and support to the victim’s families. He said the one-stop-centre had counsellors, health personnel, social workers and police officers to provide the children and their parents with all the services they need at one point. Dr. Banda noted that some cases of defilement reported to the police in Lusaka did not get the medical attention needed because those involved discontinue cases. Usually cases are discontinued when the parents of the defiled child agree with the perpetrator to settle the matter outside the court.

Despite the high prevalence of incidences of child defilement as described above, the researcher has observed that some incidences of child defilement are not disclosed and reported to police. Several reasons have been advanced for not doing so. Some include the following:

- **Economic reasons:** In cases were the culprit is a bread winner, the wife or relatives would rather keep quiet because it will be them who will lose out in case the husband
is imprisoned. For instance a 15 year old girl who was defiled by her biological father was told to shut up and not to disclose to anyone by her mother. This was because of the fear that if the father was going to be jailed there was going to be no one to provide for the family (Times of Zambia: August 30, 2003).

- **Threats from the abuser:** The abuser can threaten to kill or stop supporting the child’s education if he is the guardian. Sometimes the child is an orphan and has no one to stay with. If he/she discloses, he/she might be chased out of the house and be left in the streets. In order to continue staying there he/she will not disclose the incident of sexual abuse to anyone.

- **Society finds it hard to talk about it:** It is embarrassing to the family to let people know about such an occurrence. They may even lose friends when they disclose that a child was defiled in their family.

- **Medical purposes:** If the defilement was for medical purposes, for example a belief for the cure of impotency, then it will not be disclosed.

- **Not willing to testify:** In some cases people are just not willing to testify about the child sexual abuse. For instance in Ndola (one of the Copperbelt towns of Zambia), there were two men who married their own biological daughters in full view of their relatives. One is said to have started abusing his daughter after the mother died and the two of them remained in the house. As time went by, the girl got pregnant and gave birth to their first child. She had another child from her own father. In another incident which happened in the same town, after the man impregnated his first daughter, his wife could not take the shame and left the matrimonial home. The man is said to have continued sleeping with his daughter and they now have three children. In another incident in the same town, a man impregnated the daughter of his elder
brother and went on to sexually abuse other nieces as well. The man who was said to be living with his mother, seemed to have the full support of his mother (Sunday Times of Zambia: November 9, 2003).

- **Attackers make it seem normal**: attackers make it seem normal in some situations. For instance, in an incident involving the teacher, he grabbed a 13 year old girl who was at the bus station waiting for the bus to go to Petauke (a town in the Eastern province of Zambia). The girl narrated her ordeal as follows:

  “It was dark and I was frightened. Everything happened so quickly. I did not know how to react. Besides I was too small to force my way from him. He reached his home and pushed me inside and locked the door. He told me to undress, but I resisted. In the struggle he tore my underwear. I struggled for 2 days to free myself from him, but to no avail. He tried to have sex with me but my space was too small. On the second day he came back with a bottle of Vaseline and put it on my small space. He forced himself into me. It was painful. I stayed indoors for a week. I could not walk. He kept me for a month at his place. My parents came to the house. He paid dowry and price for abduction and kept me as his wife. After three years and eight months we divorced. By then I was 16 year old.” Asked as to why they divorced, she replied “he started having sex with my young sister who not yet turned 14 years old.”

The case ended without going to court. The parents again just asked for money. This is an example where the attacker just makes it all seem normal by ending it all in a marriage.

- **Traditionally a woman should feel wanted**: Traditionally a woman should feel wanted and so has a duty to give in when a man wants her. It is said you are valued, by society generally, according to what is between your legs. Most of this knowledge is passed
on during initiation ceremonies. That is why in the village settings most of the young ones are given in marriage at a tender age because it is believed that they are ready to have sexual intercourse with any man. Under the customary law, the age of puberty provides the minimum conditions for parents to give consent. As with many customs in Zambia, one consequence that flows from this development is the uncertainty of the law, which in many cases can give rise to unsatisfactory results.

- The victims in some cases cannot disclose the sexual abuse because the abuser has given them some money.

It is due to these and other reasons that child defilement in the past was rarely heard of. But one notes that society is dynamic, it’s not static and so with mechanism such as the Victim Support Units which are established in most of the police stations in Zambia, cases of child defilement can now be brought out in the open (Milambo, 2015). Some families in Zambia prefer not to disclose and report incidences of child sexual abuse. Probably this is because of poverty or lack of knowledge of the law against child sexual abuse. What can help such people to be positive about disclosing and reporting cases of child sexual abuse is to establish very stringent measures regarding punishment for both the perpetrators and those concealing such acts on the innocent child who might have become aware of the defilement (Nundwe, 2003).

It is evident from the foregoing that the problem of child defilement in Zambia is indeed a serious one which needs a solution and which calls upon everyone to work together if the children are to be protected from any further sexual abuses.
1.2.2  Child defilement within the church settings.

The researcher has observed that most of the churches in Zambia avoid the topic of child defilement. This is probably because of the sexual issues that the topic comes with. In Zambia, just like in any other African country, there is a belief that talking about sexual matters in public is a taboo. Different cultural contexts have different taboos around sexuality especially in Africa. In the Zambian cultural context discussions pertaining to human sexuality are considered a very sensitive subject. As a result parents cannot directly discuss sexual matters with their children. In most African countries, both rural and urban, parents and even the professional community, feel that sexuality can only be discussed through a third party. It might be an aunt, an uncle or grandparent. With this cultural context, it has been difficult to discuss issues of sexuality in many churches in Zambia. This may have contributed to the defilement of many children by church leaders. The silence on the issues of child defilement by the churches may also have contributed to the perpetrators not being implicated.

Although child defilement is a topic that has been avoided by most churches in Zambia, there have been reports of child defilement cases involving church leaders of different denominations in the Zambian media. For example, a pastor of one of the churches in the Mazabuka district of Zambia defiled a 14 year old girl entrusted to his care for healing prayers. The girl’s parents suspected that she needed spiritual help and as concerned parents, they sought guidance from their pastor, who then offered to pray for the minor for a week. The pastor requested to keep the girl at his house during the healing and prayer sessions and her parents agreed, as they had no reason to doubt their pastor’s intentions since they held him in high esteem. The mother of the girl would visit her daughter regularly to assess the level of progress and had no cause to worry about her daughter’s welfare until one particular day
when she went to the pastor’s house, she asked one of the pastor’s children to call her daughter and was directed to a bedroom where the pastor was supposedly praying for her 14 year old daughter. Upon reaching the bedroom, she did not hear any sound indicating that anyone was praying. The bedroom was quiet, with no indication of a prayer session taking place. When she knocked, the mother could not help noticing the pastor’s flustered face as he opened the door and struggled to explain how stubborn the demons tormenting her daughter were. The pastor said he had had difficulty casting them out but had finally managed to get a breakthrough that day. In his flustered state, the pastor even mentioned that the demons he had cast out would no longer harm the girl as they had now moved to Kafue (one of the districts of Zambia which is about 45 Kms north of Mazabuka). But the girl’s mother got suspicious and was not convinced with the pastor’s explanation. She went back home to tell her husband what had happened and the girl was subsequently interviewed and she revealed that the pastor had defiled her. She was taken to Mazabuka government hospital and a medical examination indicated that she had been defiled. The pastor was arrested and appeared in court. (Zambian Watchdog, December 23, 2009).

Another example was the defilement of a three year old girl by her 41 year old Sunday school teacher during the Sunday worship service in Kitwe, one of the Copperbelt towns of Zambia. The child was attending Sunday school lessons outside the church when the incident happened. The man lured the girl into one of the empty rooms at the church and defiled her repeatedly on the bench while her mother was attending prayers. When her mother walked out of the church around 12:00 hours, she found her daughter crying terribly, failing to walk and she was pointing her fingers at the teacher. The girl told her mother that the teacher had taken her into a room and did bad things to her. The mother took her child to the toilet to check her up and she discovered that the girl was bleeding and had semen on her private parts. The worshippers apprehended the man when he attempted to run away. They alerted the police
who apprehended him and took him to the police station while the little girl was rushed to the hospital. The man was charged with one count of defilement contrary to the laws of Zambia (post newspaper Zambia, 18 June 2013).

Another example was the defiling of a girl under the age of 17 years without her consent in Mansa which was reported by the new Vision of May 21, 2015. The details of the report are that a popular and well respected Pastor unzipped and laid his hands on a minor who had an epileptic seizure. Appearing before the judge, particulars of the offence were that the pastor on 17\textsuperscript{th} September, 2014 had carnal knowledge of a girl under 17 without her consent. This was after the girl had an epileptic attack and was taken to the pastor for prayers who then forced himself on the helpless minor. The pastor was convicted by the Magistrate court for the offence but committed to the high court for sentencing. “I plead with this honourable court for lenience because I am a first offender and also a bread winner taking care of a big family. Please don’t send me to jail because I have learnt a big lesson from my actions,” the pastor said in a touching mitigation. This attracted murmurrs from the public gallery. Before he could be sentenced, the judge said he took the pastor’s mitigation into consideration and he deserved leniency as he was a first offender by which time the pastor thought he would be let off the hook, but little did he know that the worst was yet to come. The judge, however, said as a diviner sent by God to deliver his people, he broke the trust and confidence of the girl and the church and the society at large through his act. The judge noted that the rate at which pastors were taking advantage of their flock was alarming and the sentence would send a clear message to would be offenders that rape is an offence that does not pay. He reminded the pastor that the core business of any church was worshiping and not sleeping with underage girls worse of all those that approach him to seek divine intervention. He said pastors should not use vulnerability of their flock for their own personal benefits and ordered that he be sent to jail for 20 years from the date of arrest. Congregants also told the new vision newspaper the
pastor had a habit of soliciting sex from female congregants and threatening to cast evil spells on them if they exposed him or refused to give in to his demands.

Another example was a defilement case of a 15 year old girl by a 43 year old pastor of Ndola, one of the copperbelt towns of Zambia. During trail the girl told the court that on May 24, 2015 she went to church around 13:00 hrs for prayers. The girl told the court that the church usually conducted prayer clinics for people believed to be demon-possessed. She told the court that she was given a card to allow her entry into the pastor’s office and that she was number nine on the list. The girl narrated that the pastor did not attend to her when her time to enter his office came but that he instead allegedly asked her to go to his plot where he would find her. The court heard that she obeyed and when she went to the plot, the pastor opened the door to the toilet and allegedly asked her to enter. The girl said the pastor allegedly followed her into the toilet, locked the door and had sex with her. On the second occasion, the girl narrated that she was at the church for a youth meeting when the same pastor allegedly told her to go and wait for him at Alpha and Omega guest house within Kabushi, one of the townships of Ndola. She recalled him picking her up in his motor vehicle and driving to a place called Dola Hill on the Ndola-Mufulira road where he again had sex with her. The girl told the court that when she asked the pastor what he would do if she became pregnant because he was not using a condom, he responded that he would take her to the clinic for an abortion and all would be well because it was a secret. She narrated that she decided to confide in one of the church members because she was uncomfortable with the whole issue with the pastor. She was advised to tell her mother about it.

Defence lawyer Derrick Mulenga told the judge that the pastor would give evidence on oath and summon ten witnesses. The matter came up on October 27, 2015 for defence.
The above examples are some of the cases that caused the researcher to conduct research on this issue of child defilement in ecclesial contexts in Zambia.

The examples given above testify to the fact that churches are as vulnerable to the problem of child sexual abuse as any other group in society. They may even be more vulnerable, because of the extent to which the church is involved in working with children and the young people. There are Sunday Schools, youth groups, church camps and other such activities. These institutions and activities make children to be vulnerable to defilement. The church is therefore a community which is likely to attract people with a strong sexual interest in children (Parkinson, 2013).

As already mentioned earlier in this chapter, the perpetrators of child sexual abuse in church settings range from non church leaders to church leaders. This research study will concentrate on church leaders as the perpetrators of child defilement in churches. What motivates a church leader to defile a child is discussed in detail in chapter two of this research study. At this point it is important for the reader to know what child sexual abuse by a church leader refers to in this research study.

Heather states that, “child sexual abuse by a church leader refers to any sexualized behaviour that occurs within the church context and where one party has more power than the other. The perpetrator can be anyone in a leadership position, either paid or a volunteer. It could be a pastor, Christian counsellor, youth leader, deacon or Sunday school teacher. The sexualized behaviour includes any physical contact, bodily movement, or verbalization that uses sexual expression to control or intimidate the less powerful person in the relationship. The acts involved may be overt, involving actual physical contact of a sexualized nature or covert, as in pornography, sexual innuendo, or inappropriate disclosures of a personal nature regarding
sexual matters. The person victimized may be an adult or a child, female or male, and the same or the opposite sex as the offender.” (Heather, 2003:12).

In this study, the victims are children especially a girl child and the sexual behaviour that is referred to is that of physical contact, i.e. having penetrative sex by an adult person in this case a church leader with a young girl who is below the age of sixteen years.

The researcher has observed that when a church leader is implicated in a case of child defilement, there is more often than not denial that he or she could be involved in such a vice. ‘It does not happen and it cannot happen’, has been stated by some members of the churches where sexual abuse by church leaders has allegedly occurred. For example, a 14 year old girl of one of the churches of Lusaka told her mother about her being sexually abused by a church elder of their section. The mother replied “how can you say that about the respected people who lead God’s flock”. The girl was beaten severely by the mother and told not to say such things again. The fate of so many children who have disclosed sexual abuse is that they haven’t been believed and have often been accused of trying to tarnish the name of the accused church leader and the church. This has also contributed to the children being continually sexually abused by church leaders in the churches.

The researcher has also observed that child defilement cases involving church leaders have been covered-up by superiors who have chosen not to involve the police or to act protectively towards the children. When complaints of abuse are made, implicated church leaders are allowed to move from one congregation or parish to another or to resign quietly from the church. This action has left other children at risk of being defiled by the church leader who has been transferred. The researcher is of the opinion that church leaders who defile children should not be transferred from one parish to another but should be reported to the police and relieved of their pastoral duties.
1.3 PROBLEM STATEMENT.

Heather states that, “Sexual abuse by a church leader has many long-term consequences. The abuse affects one’s whole life, including feelings, relationships and spirituality. Common effects include overwhelming feelings of fear, guilt and anger. Betrayal by someone who should be trustworthy often shatters one’s ability to trust and leaves victims feeling unsafe. Persons who have experienced abuse often blame themselves and feel dirty, ashamed and devalued. They often experience depression, anxiety and physical difficulties, such as sleeplessness, eating disorders and fatigue. The abuse may affect relationships, causing difficulty with intimacy and sexual relations, work, parenting and friendships. It may also result in future abusive relationships. The person who has experienced abuse may turn to alcohol or drugs to lessen the pain or may show suicidal or self-destructive tendencies.” (Heather, 2003:18).

Heather further states that “There are also spiritual effects. People who were abused often experienced a loss of trust in church leadership and separation from their congregation. They may feel betrayed by God and the church. Or they may feel sinful and question God’s love for them.” (Heather, 2003:18).

In agreeing with Heather, the researcher in this study will endeavour to understand the pain, brought about by the defilement of a child by a church leader, experienced by the mothers of the defiled children in the Zambian context. The focus is on the mothers for several reasons:

- First, if mothers do indeed suffer significantly from their children's disclosures, they should be acknowledged as victims and given appropriate psychiatric care (Billings and Moos, 1983).
Second, because of the well-documented association between parental psychopathology and children's mental health, it is possible that maternal distress may impede children's recovery following disclosure (Billings and Moos, 1983).

Children of depressed mothers have been noted to demonstrate higher levels of psychological symptomatology than children in normative samples (Downey and Coyne, 1990).

The recovery of sexually abused children may similarly be influenced by their mothers' emotional responses (Newberger & De Vos, 1988).

In the Zambian society, just like in many other societies in Africa, a mother is expected to preserve and to protect children. She is expected to be the primary parent, despite a plea to fathers to share responsibility in the home and the multiple roles that women play. It is socially expected for mothers to be aware of what is happening to the child and whether the child is safe and healthy. When a child is abused mothers might feel guilty, angry or depressed, but they will be expected still to care for the abused child and other siblings. It becomes important to consider and address the feelings that mothers have about sexual abuse of their children.

Mothers are faced with the task of caring physically and emotionally, loving their children and teaching socially accepted norms so that children may be accepted by society (Schaefer and Lamn, 1992).

Researchers that have conducted research on child sexual abuse have documented that mothers are more affected by the child’s sexual abuse than fathers (Manion et al., 1996). This is attributed to the ongoing relationship that mothers have with the child from birth. In most societies, across different cultures in Africa, mothers assume responsibility for their children as part of their caregiving role. They care for, protect, nurture, and comfort their children from birth.
Calder (2000:155), points out that the mother is a key figure in the aftermath of the disclosure of the child’s sexual abuse. Her role, reaction and functioning before, during and after sexual abuse will have considerable influence on the child. Her behaviour and attitudes will also influence decisions made by professionals about therapeutic intervention, safety and the future of the child in question.

The researcher has observed that despite the important roles that mothers have on their children’s upbringing, as described above, little has been done to determine mothers’ emotional functioning following disclosures of their children’s sexual abuse especially by a church leader.

This study, therefore, has attempted to explore the mothers’ emotions following the disclosure of defilement of their children by a church leader in the Zambian context. This is in order to empower them pastorally to come to terms with the defilement. These emotional experiences of the mothers are discussed in detail in chapter four of this research study. The researcher has also illustrated some of these experiences as case studies in chapter five of this study:

In the first experience (case study one), he illustrates the experience of the mother whose daughter was defiled by her pastor. The matter was brought before the church council of her church. During the hearing, the church elders of the council gave witness in support of the pastor who had defiled her daughter. The elders provided the mother and her daughter no support and did not seek to comfort them. They were all on the side of the one who had done horrible things to her daughter. She and her daughter were accused of making up the story and damaging the reputation of the church. This devastated her even more.

In the second experience (case study two), the researcher illustrates the experience of the mother whose daughter was defiled by their section church elder while attending extra lessons for mathematics and science subjects in the study room of his house. When the matter was
brought before the church council, the elder was just suspended from all church activities for a period of twelve months. During this period, the elder was allowed to come to church on Sundays to worship. He was told that, after the suspension period was over he would resume his church duties as before. The mother was traumatized by this ruling because she had expected the elder to be expelled from the church completely.

In the third experience (case study three), the researcher illustrates the experiences of the mother whose daughter was defiled by their pastor in his bedroom when he asked her to go and sweep in his house. When the matter was brought before the church council meeting, the pastor denied having defiled her daughter. He told the meeting that he was being implicated in something which he didn’t know anything about. He swore that he had never seen her daughter and that this was his first time that he was seeing her. The meeting believed the pastor and blamed her daughter of trying to destroy his reputation. The meeting advised her and her family not to go to the police as doing so was just going to tarnish the image of the church. The mother was very hurt and traumatized by this ruling.

It becomes important to empower the mothers pastorally to come to terms with the defilement of their children because of several reasons:

- The mother is a key figures in the aftermath of the disclosure of the child’s defilement. Her role, reaction and function before, during and after child defilement will have considerable influence on the child. Her behaviour and attitudes will also influence decisions made by professionals about therapeutic intervention, safety and the future of the child in question (Smit, 2007).

- The recovery of sexually abused children is influenced by their mothers’ emotional responses (Davies, 1995).
- Roesler (2000) states that the reaction of the person to whom disclosure is made has an important impact on the psychological sequela of the child after childhood sexual abuse.

- Dey and Print are of the opinion that carrying out only therapeutic work with a child who has been abused is rarely sufficient to effect significant change and that the influences, attitudes and behaviours of caregivers on the child’s behaviour are always likely to have great significance. It is, therefore, essential to involve the caregivers in therapy or to keep them informed during the process (Bannister, 1997:135).

This research study was done within the context of pastoral care. The following specific research questions were explored:

- What is it that causes the church leaders to violate and overlook their own work of pastoral care by defiling children?
- How can they be helpful with pastoral situations when they themselves cause trauma?
- How do the mothers deal with the impact and the trauma caused by the people who they trust and regard to be custodians of morality?

It is hoped that the answers to these questions will help in addressing and understanding the pain that is experienced by mothers affected by child defilement which is perpetrated by a church leader.
1.4 AIMS, OBJECTIVES AND RELEVANCE OF THE STUDY.

Aims

Aims in a research study are statements that broadly point out what you hope to accomplish and your desired outcomes from the research. Aims focus on long-term intended outcomes - your aspirations in reference to the research (Emily Pate, Demand Media). The Pocket Oxford Dictionary (2002) describes “goal” as “aim or desired result.” “Purpose” is described as the “reason for which something is done.” Fouché (2002) concludes that the purpose or goal is the end result towards which the effort and the ambition are directed. Vithal (1997) states that the purpose of the study is also the focus of the research. According to Mouton (1996) the research purpose or objective gives a broad indication of what researchers wish to achieve in their efforts.

In agreeing with the above explanation of what the aim is in a research study, the researcher has formulated the following aim as the outcome of this study:

To empower the mothers who are affected by child defilement by a church leader to come to terms with the effects of the defilement. This will be done through the methodology of pastoral care, which takes into account the African realities very seriously. The importance of mothers continuing to love their children and care for them in different situations is a central reality in an African society. This research thus contributes towards making pastoral care possible by helping to understand the experiences of mothers affected by child defilement by a church leader. It contributes to the body of literature that approaches pastoral care from an African perspective as well as contributing to the existing body of knowledge that positions pastoral care as relevant, contextual and liberating. It also makes a significant contribution in
terms of the challenges of culture that must be addressed by theology in general and pastoral care in particular.

Objectives

Objectives lay out how you plan to accomplish your aims. While aims are broad in nature, objectives are focused and practical. They tend to pinpoint your research's more immediate effects. They include a list of practical steps and tasks you're going to take to meet your aims. Objectives are typically numbered, so each one stands alone. Each objective must have a concrete method set out. If you're having trouble developing this, writing out a research timeline before defining your objectives may help (Emily Pate, Demand Media). Fouché states that objectives in research are the basic steps one has to take in a specific time to attain the goal. It appears that after describing the purpose or goal of a study, it is important to divide the goal of the study into manageable and smaller objectives to be researched. In this research study, the following objectives were identified:

To do a literature study on the following aspects to form a knowledge base for the research:

- Definition of child defilement, forms of child defilement, types of child defilement, indicators of child defilement
- Causes of child defilement in general, Causes of child defilement by church leaders.

To do an empirical study:

- To explore the mothers’ experiences following disclosure of defilement of their children by a church leader. This will help the researcher to get some insight into how the defilement affects the mothers, and the changes that occur in their lives regarding their relationships with other people and with their defiled children.
1.5 **RESEARCH GAP.**

The existing literature on child sexual abuse contains valuable information relating to the course, consequences and adjustments to child sexual abuse. The focus of most of this literature is mainly on children as primary victims. This research study addresses a research gap by focusing on the emotional experiences of the mothers following disclosure of defilement of their children by a church leader in the Zambian context. The final challenge is the contextual one. The researcher needs to address the emotional experiences of the mothers following disclosure of sexual abuse of their children by a church leader in an African way using Gerkin’s shepherding method of pastoral care. This caring method of shepherding is helpful because it provides an integrated approach to healing that is enculturated in the African belief system and culture, which views healing as taking place within the community and not in isolation.

1.6 **SIGNIFICANCE OF THE STUDY.**

- The researcher was prompted to choose this area of study in view of the persistence of defilement cases by church leaders in Zambia. This is happening despite most of the churches in Zambia being silent about it and not addressing it. And also despite the law on child defilement being amended and the punishment being stiffened. Child defilement causes damage not only to the victim, but also to the rest of the victim’s family who can be thought of as co-victims (Doyle, 1995). Although mothers suffer significantly from their children’s disclosure of defilement (Billings and Moos, 1983), little has been done to determine the effects that they experience. As already mentioned earlier in this chapter, much has been done on the severe and enduring effects of sexual abuse on children (Finkelhor and Browne, 1985). Since mothers have got influence in the recovery of sexually abused children (Davies, 1995), it becomes
imperative to find out their emotional responses following their children’s sexual abuse. This should assist in empowering them pastoraly to come to terms with the effects of child defilement and be able to help in the recovery of their defiled children.

- Further, the results of this study will significantly contribute to the understanding of the various issues relating to child defilement by church leaders. Specifically, it will be possible to analytically understand and appreciate, with an aim of reducing, the various causes and effects of child defilement by church leaders.
- The study will seek to create awareness of child defilement and the effects brought about by child defilement by church leaders on mothers.

1.7 GERKIN’S SHEPHERDING METHOD OF PASTORAL CARE.

This research study will be guided by Gerkin’s shepherding method of pastoral care. Gerkin’s biblical traditional method of shepherding involves the trialogical structure of priests, prophets, wise men and women and is based on an understanding of the way in which these individuals collectively took authority for shepherding God’s people in the Old Testament.

Gerkin’s approach focusses both on individual and family needs. He points out that pastoral care involves both the care of the Christian community and the care of persons: individually, in families, and in larger group relationships (1997:113). This is in contrast to the psychotherapeutic pastoral care model that was dominant and common in America and Western pastoral care. Gerkin’s approach to pastoral care has been advanced by many African scholars. For example, Tapiwa Mucherera, has argued that therapy or counselling as taught in the West will not always suffice in indigenous contexts since these theories tend to promote and focus on individuality, autonomy, and independence (Mucherera, 2009: ix).
This caring method of shepherding is helpful because it provides an integrated approach to healing that is enculturated in the African belief system and culture, which views healing as taking place within the community and not in isolation. Gerkin (1997) illustrated his point by stating that “the depiction of Jesus as the good shepherd who knows his sheep and is known by his sheep, has painted a meaningful, normative portrait of the pastor of God’s people” (p. 80).

Gerkin’s method of pastoral care will be applied as the methodology for this research study because it is all encompassing. It aims to address individual and family problems within the context of lived experiences. This is an ideal method of helping people who are in need of pastoral care/therapy and this includes mothers affected by child defilement by a church leader.

Gerkin’s method of pastoral care is explained in details in chapter three of this research study.

1.8 THE DATA COLLECTION METHOD.

Qualitative research methodology was employed in this research study. This was in order to enable the researcher to understand the social constructions of mothers and how they experienced the disclosure of the defilement of their children by a church leader.

The use of qualitative methodology also allowed the researcher to establish rapport with the participants and created an atmosphere conducive to the sharing of sensitive and emotional material. The methodological approach allowed participants to relate their experiences in their own words and from their own perspectives. This enabled them to offer new ways of understanding and interpreting the world. The qualitative approach also allowed the participants to relate their process and together with the researcher, reconstruct their realities. The methodology therefore, provides participants with the space in which to explore the social constructed meanings applied to the encountered experiences of child defilement.
The choice of the qualitative research was based on the researcher’s interest in the depth of the phenomenon of child defilement. The qualitative method is pivotal for this research because it helped reveal “knowledge of the other, knowledge of phenomenon, and reflexive knowing” (McLeod, 2001:3). This research study focuses on mothers and thus allows in-depth exploration of the ways in which the mothers view child defilement and interact with the society.

The aim of the study was to investigate the experiences of the mothers affected by child defilement and in keeping with this aim, eight (8) participants were chosen based on their diverse backgrounds. The criteria of choosing the eight participants is explained in chapter three of this research study.

The eight mothers were drawn from around Lusaka, Zambia. The study was carried out in Lusaka, Zambia. The reason for conducting this research study in Lusaka is also explained in chapter three of this research study.

A one-to-one semi-structured interview was employed to collect data from the mothers affected by child defilement in this research study. Questions which were used were largely open ended to allow the mothers as much freedom of expression as possible within the limits of the goal of the interview. (See appendix A for the interview guide used by the researcher).

A pilot study for this research study was undertaken. Three mothers were selected for the pilot study. These mothers were not included as subjects in the actual sample. The semi-structured interview schedule was tested and discussed with the three mothers to ensure that the best results were obtained.

The research participants’ anonymity was protected throughout the research. This was done by not publishing or linking their names or identifying their details to specific outcomes in the study.
The data collection method together with the Thematic Analysis which is employed in this research study as a method of data analysis are explained in detail in chapter three of this research study.

1.9 INTRODUCTION OF RESPONDENTS.

The eight respondents used in this research study are discussed in brief according to their background and experience as they related to the disclosure of their children’s defilement by a church leader.

1.9.1. Respondent one.

Respondent one is a 40 year old mother of three children, one girl and two boys. She is married to a husband who works in the ministry of health as a clinical officer. She is not in formal employment; she sells vegetables in one of the markets in Lusaka. Her 16 year old daughter was defiled by her pastor when they left her in his care when she and her husband went on transfer to Chipata. They left their daughter in Lusaka in the care of their pastor because she was writing her final grade 12 examinations. Taking advantage of the absence of his wife, who had gone to Chambeshi to attend to her ailing mother, one night the pastor sexually abused her daughter in his bedroom. In the midst of writing her examination, the girl went to Chipata and disclosed to her mother what the pastor had done to her.

1.9.2. Respondent two.

Respondent two is a 37 year old mother of five children, three boys and two girls. She is a house wife and married to a business man. Her 14 year old daughter was defiled by her section church elder while attending extra lessons for mathematics and science subjects in his house. Her daughter had written her grade 9 examination the previous year. Out of the 9 subjects that she had written she didn’t do well in mathematics and science subjects. These two subjects made her not to qualify to go to grade 10. She together with her husband
decided to have her repeat grade 9 instead of letting her go into grade 10 without qualifying. It was while attending these lessons that the elder repeatedly defiled her daughter. She narrated to her mother that the first time that the church elder defiled her; he told her that if she agreed to have sex with him, she was going to be intelligent and know mathematics and science without any problems.

1.9.3. Respondent Three.

Respondent three is a 39 year old mother of three children; one boy and two girls. She is a pre-school teacher by profession. Her 13 years old daughter was defiled by her pastor in his bedroom when he asked her to go and sweep in his house. She revealed to her mother that when they had finished church choir singing practices, the pastor who was at that time within the church premises, asked her to go to his house and sweep. When she had finished sweeping in the living room, the pastor asked her to also sweep his bedroom. After her daughter had entered his bedroom, he followed her then locked the door and forced himself on her. He covered her face with his hands so that she did not know what he was doing. Her daughter revealed to her that she just felt pain on her private parts. After she had started crying, the pastor stopped what he was doing and her daughter walked out of the pastor’s house and went home.

1.9.4. Respondent four.

Respondent four is a 43 year old mother. She is a widow and has two daughters. She is a cross border business woman. One of her daughters, who is 14 years old, was defiled by the Bishop of a renowned church in Lusaka upon joining sisterhood in this church. She revealed to her mother that within a few days of joining sisterhood, the bishop sent another girl who had also gone there for sisterhood to call her whilst he was in the house. She found the bishop sitting on the bed with his trousers below his waist. As she was taught to be obedient as a sister she
knelt down and asked why he called for her. He told her that he wanted her to search for his
shoes but to her surprise he grabbed her from the back and pulled her on the bed. The bishop
forced himself on her, leaving her to bleed profusely.

1.9.5. Respondent five.

Respondent five is a 34 year old mother. She is married and has 3 children; two boys and one
daughter. She is a nurse by profession. Her 15 year old daughter was defiled by a 41 year old
Pastor of a renowned church in Lusaka. The girl was invited by the Pastor to his house to
wash some plates for him. As she entered into his sitting room, the Pastor started praying for
her and after praying he gave her some plates to wash for him. After washing the plates, the
Pastor said since it was late, she could sleep at the church in a small room. She entered the
room and there was a bed already prepared. While she was asleep, the Pastor entered her room around midnight and sat on her lap.
He told her not to tell anyone about what he would do to her. He said he had eyes in front and
back, meaning that if she was to reveal anything, he would know about it.
The girl told her mother that the Pastor then defiled her.

1.9.6. Respondent six.

Respondent six is a 28 year old mother. She is a single parent with one child (a four years old
girl). She sells vegetables in one of the markets of Lusaka. Her daughter was defiled by a
church elder of one of the renowned churches in Lusaka. The church elder was the landlord.
He enticed the child to enter the house and locked himself in the bedroom with the child.
When the mother returned home from the market around 18:00 hrs, her daughter ran after her
and told her that papa (as the church elder is commonly referred to) had given her money and
told her not to tell anyone. The mother explained that the child was crying when she touched
her private parts. A grand child to the church elder said he had found him locked in his
bedroom with the girl. The University Teaching Hospital confirmed that the child had been defiled.

1.9.7. Respondent seven.

Respondent seven is a 30 year old mother. She is also a single parent with two children; a boy and a girl. She is a cross border business women. Her 13 year old daughter was defiled by a church deacon of a renowned church in Lusaka and infected her with a sexually transmitted disease. The church deacon was her neighbour who had been assisting her by taking care of her children each time she went out of Zambia for her business errands. It was only discovered one Saturday when she returned from Tanzania and found her daughter crying saying that she was experiencing severe pain when urinating and that her private parts were swollen. When she checked her, she found that there were sores all over her daughter’s private parts. The medical report showed that she had syphilis.

1.9.8. Respondent eight.

Respondent eight is a 47 year old mother. She is married with six children; four girls and two boys. She is a business woman who sells second hand clothes. Her 15 year old girl was defiled by a 40 year old Pastor of a renowned church in Lusaka and his 18 year old nephew. She then became pregnant. The two had sex with the girl, while she was living with them from February to May this year. The girl was taken to the Pastor for prayers because she suffered from persistent fits. When her mother took her there she thought that the matter was severe and required the spiritual services of the Pastor. The Pastor told her that he could only conduct the healing prayer sessions in the night and suggested that the girl remains in his home until she was healed. The Pastor was living with his nephew at the time. It is then that he and his nephew started having sex with the girl. The girl became pregnant and it was not
known between the two who the father was. They were both arrested for defilement. The mother only knew what had happened after she found out that the girl was pregnant.

1.10 DEFINITION OF TERMS AND CONCEPTS.

This section of the chapter presents the conceptual, operational definitions and theories that underpin this study. The particular concepts and operational definitions have been derived from the themes under discussion in the study owing to the direct linkage that they have with it. Below are some of the definitions of the terms and concepts used in the study.:

**Church leader.**

A church leader in this research study refers to a Pastor, church elder or deacon, Sunday school teacher, youth leader etc.

**Child sexual abuse by a church leader.**

Child sexual abuse by a church leader refers to any sexualized behaviour that occurs within the church context and where one party has more power than the other. The perpetrator can be anyone in a leadership position, either paid or a volunteer. It can be a Pastor, elder, deacon, or youth leader.

**Child.**

A Child according to the National Child Policy (2006) is any person below the age of 18 years. In this research study, the researcher used the word “child” to cover and refer to all children below the age of 16 years whether they were in or outside the school establishment.

**Child defilement.**

Child Defilement according to Muyongo (2004) is when a man has sexual intercourse with a girl under the age of sixteen years. Based on this definition, it is a criminal offence under the
Zambian law for a man to carnally know a girl under sixteen years because it is assumed that a girl below this age should not engage in sexual intercourse. So the Zambian law under the Penal Code, Chapter 87, and Section 138(1) states that: Any person who unlawfully and carnally knows a girl under the age of sixteen years is guilty of a felony and is liable to imprisonment for life. Section 138(2) further states that: Any person who attempts to have carnal knowledge of any girl under the age of sixteen years is guilty of a felony and is liable to imprisonment for life. Church leader.

As already mentioned earlier in this chapter, the researcher used the term “child defilement” to refer to an adult or person having penetrative sex with a girl who is below the age of sixteen.

**Child protection.**

Child Protection refers to deliberate efforts made by governments to provide a conducive environment in which the rights of children are protected and acknowledged (UNICEF, 2005). However, the researcher used the term to refer to all policies, rules and regulations such as the National Child Policy (NCP), Convention on the Rights of the Child (CRC) and the Anti Child Trafficking Policy that protect children from all forms of abuse. Furthermore, child protection was used to mean the measures that were put in place by the Department of Child Development to protect children from sexual exploitation and abuse, including prostitution, defilement and involvement in pornography.

**Ecclesial context.**

Ecclesial contexts basically refer to those contexts where one finds the church’s organizations and services. These can be parishes or congregations and institutions owned by churches such as schools, hospitals, training centres etc.
Gerkin’s narrative hermeneutical model.

This model was developed in response to the popular psychotherapeutic pastoral care model. The model has since become part of both the Western and African pastoral care. This model recognizes and appreciates the importance of human needs in pastoral care. To Gerkin “the living human documents” (1997:97) were as important as the biblical and historical tests and then could thus also be read and interpreted.

Grounded theory.

Grounded theory is a qualitative research method that was developed during the 1960’s by two sociologists called Grazer and Strauss. In this method theory is developed based on the data which is collected. The data from which theory emerges is obtained in a systematic manner based on social research (Grazer and Strauss, 2001:1-2).

Pastoral care.

This is a sub-discipline of practical theology and is also referred to as shepherding and soul care (Van der Ven, 1993). Pastoral care deals with Christians caring for one another. Pastoral care was confined to pastors and priests based on the assumption that they were the only individuals able to take care of others. However, the discipline has developed to the extent that it is now liberated from individualism to clericalism and instead refers to the caring ministry of all the people of God (Buffel, 2004:41). Hulme provided a broad understanding of pastoral care and defined it as being “synonymous with the entire ministry of the church” (1970:10).

Pastor

People ordained for religious service in the Christian church throughout this research study.

Caregiver
Is a person who has skills of caring and management of other people’s lives on a daily basis.  

**Shepherd.**

Somebody who provides guidance: Somebody who is responsible for caring and guiding a group of people, especially a Christian minister.

**Taboo.**

Socially and culturally prohibited: forbidden to be used, mentioned, or approached because of social or cultural rather than legal prohibitions.

**Pedophilia.**

Pedophiles are individuals who have a sexual interest in children. Although some incestuous fathers may be pedophiles in their orientation, the term is mostly reserved for the abuser whose victim is outside the family.

**Pederasty.**

Geiser speaks of pederasts as “eternal adolescents in their erotic life. They become fixated upon the youth and sexual vitality of the adolescent boy...Pederasts love the boy in themselves and themselves in the boy” (Geiser, 997:83). Rossman (1976) describes pederasts as males over age 18 who are sexually attracted to and involved with young boys who are between ages 12 and 16 years.

**Technophilia.**

The term Technophilia, coined by New Hampshire police detective Jim McLaughlin, refers to those who use the computer to engage in sexual deviance involving children (McLaughlin, 1998).
1.11. OVERVIEW OF CHAPTERS.

Chapter Two.

This chapter deals with literature surrounding the subject of child defilement.

Chapter Three.

This chapter outlines the research method that was followed. It deals with epistemology, data collection and analysis. It also describes the participants and touches on the ethical issues.

Chapter Four.

This chapter explores the reality of child defilement as experienced by mothers of the defiled children. This chapter is divided into two sections. The first section describes what defilement is in accordance with the understanding of the Zambian context and law. In this section, forms and types of child defilement are also discussed in reference to the available literature.

The second section reflects upon the empirical data of the interviews which were conducted with the mothers affected by child defilement. This includes their different responses and attitudes after disclosure of child defilement by a church leader.

Chapter Five.

In this chapter three case studies are shared and discussed. Case studies are stories which help present realistic, complex, and contextually rich situations and often involve a dilemma, conflict, or problem that one or more of the characters in the case must negotiate.

The experiences of the mothers, as reflected in the case studies, enabled the researcher to understand what they go through after the revelation of defilement of their children by a church leader. After each story the researcher shares some of his reflection on them.
Chapter Six.

This chapter focuses specifically on pastoral care in relation to counseling traumatized people, in this case mothers affected by child defilement by a church leader. This chapter carries the main solution to the problem as regards to the role of pastoral care in addressing the effects, on the mothers, of child defilement which is perpetrated by church leaders.

Chapter Seven.

In this chapter, the findings and final reflections regarding the research are presented. This chapter includes recommendations for further research on the phenomenon of child defilement in ecclesial contexts which is perpetrated by church leaders and includes concluding comments as well.

1.12. PRELIMINARY CONCLUSION.

This chapter gave an introduction to the topic being researched. The statement of the problem was set out in this chapter. Further, the chapter laid out the research gap, aim, objectives and significance of the research study. The chapter also highlighted the methodology which has been used in this research study.

The next chapter deals with a literature review surrounding the phenomenon of child defilement. Several themes will be discussed, namely,

- The historical overview of child defilement focusing on the mediaeval period.
- The global situation of child defilement.
- The African and the Zambian scenarios of child defilement are also considered.
- Child sexual abuse in the church focusing on the Catholic Church.
- Causes of child defilement.
- Causes of child defilement by church leaders.
CHAPTER TWO

THE LITERATURE REVIEW

2.1 INTRODUCTION.

This chapter explores the literature surrounding the phenomenon of child defilement. As mentioned in the conclusion of the foregoing chapter, several themes will be discussed in this chapter namely, the historical overview of child defilement focusing on the mediaeval period, the global situation of child defilement, and the African and the Zambian scenarios of child defilement are also considered. Child sexual abuse in the church focusing on the Catholic Church is also considered in this chapter. The focus is on the Catholic Church because almost all of the research on child sexual abuse in churches has focused on abuse by priests and members of religious orders in the Catholic Church (Parkinson, 2013). In this chapter, the causes and the effects of child defilement on children as victims are also unpacked.

2.2 HISTORICAL OVERVIEW OF CHILD DEFILEMENT.

Child defilement is in fact an old phenomenon. Research of the original Byzantine literature by John Lascaratos (2000) disclosed many instances of child sexual abuse in all social classes even in the mediaeval Byzantine society which was characterized by strict legal and religious prohibitions. The most celebrated instance of child sexual abuse is referred to in the case of Princess Simonis, the only daughter of Emperor Andronicus II, Palaeologus (1282-1328). At the age of 5 she was given in marriage to the 40-year-old Sovereign of the Serbs Stephan Milutin, for reasons of state alliance. Under age marriage of both spouses were then customary mainly among aristocratic families, who by such means arranged political alliances and pacts. The Roman law which was applied in Byzantium had an addition which stated that the husband who married an under-aged wife should wait for her to reach 12 years old before entering into sexual relations. Stephan, however, did not abide by the legal requirement for
Princess Simonis to reach the legal age of 12 years old. He raped her at the age of 8, causing injuries of the womb, which prevented her from bearing children, and mental suffering which obliged her to return in tears to her homeland to be a nun.

In ancient Rome, boys were castrated to make them more pleasing partners to rich Romans (Conte, 1991:4). Among the Eskimos (Sari and Buyukunal, 1991), sexual abuse of children was reported to be common. The daughters of the Eskimos were presented to their guests as an act of hospitality, and the death of those children during their first sexual experience was not a rare event.

Wikipedia (2006) provides the following information on the history of child defilement: In the middle ages, the age of consent to sexual intercourse for a girl was when she reached menarche, around ten to twelve years of age. Sexual intercourse between a girl and an adult before that age was considered deviant. The official age of consent to sexual intercourse concurred firstly in England in the year 1275. During the reformation in the 16th century, formal marriages were established. Young girls that were sexually abused in the 16th century were seen as adulterers and only very young children were seen as victims. In the early 1900s, the status of children was no more than that of domesticated animals, and children were still not protected and sometimes even punished after sexual abuse. Only later in the 19th century, a movement was started that moved away from punishment after sexual abuse and progressed towards the protection of children. During 1948 in the United States of America, the first estimation was made of the number of sexual abuse cases.

In bringing out the above historical overview of child defilement, the researcher wants to show that the defilement that the children are facing today is a humankind problem and is old and global. Having laid the historical overview of child defilement, we now move on to the Global, African and Zambian situations of child defilement.
2.3 GLOBAL SITUATION OF CHILD DEFILEMENT.

The 2009 Meta study from the University of Barcelona published in Clinical Psychology Review, “Prevalence of Child Sexual Abuse in Community and Student Samples: A Meta-Analysis,” analyzed 65 research studies across 22 countries to estimate “an overall international figure” for sexual abuse of children. The study’s findings include:

- An estimated 7.9% of men and 19.7% of women globally experienced sexual abuse prior to the age of 18.

- U.S. rates were 7.5% for males and 25.3% for females.

- The highest prevalence rate of child sexual abuse geographically was found in Africa (34.4%). Europe showed the lowest prevalence rate (9.2%).

- South Africa has the highest prevalence rates for both men (60.9%) and women (43.7%). Jordan presents the second highest prevalence rate for men (27%), followed by Tanzania (25%). Rates between 10% and 20% are reported for males in Israel (15.7%), Spain (13.4%), Australia (13%) and Costa Rica (12.8%), while the remaining countries all have prevalence rates below 10%.

- For women, seven countries reported prevalence rates above 20%: Australia (37.8%), Costa Rica (32.2%), Tanzania (31.0%), Israel (30.7%), Sweden (28.1%), the United States (25.3%) and Switzerland (24.2%).

- The generally much lower rate for males may be partially inaccurate; under reporting may be particularly prevalent because of the “possibility of greater shame and the fear that they will be labeled as homosexual (if the aggressor was another man) or weak (if the aggressor was a woman), which may combine with the fact that they are more often accused of having provoked the abuse.” (Wihbey, 2011.)
The first United Nations study of global violence against children of October, 2006 estimates that some 150 million girls, which is fourteen per cent (14%) of the planet’s child population, are sexually abused each year. The report further says that such violence can leave serious long term psychological scars which result in increased risky sexual behaviour, substance abuse and violence towards others in adulthood (http://news.bbc.co.uk).

According to Finkelhor (1994), approximately 20 per cent of adult women worldwide have been sexually abused as children. The age of vulnerability to sexual abuse is between seven and thirteen years of age, but children older or much younger have also been abused.

Paulo Sergio Pinheiro indicates that a study of 21 mainly developed countries, for example, found that up to 36 percent of women as compared to 29 per cent of men reported being sexually victimised during childhood (http://news.bbc.co.uk). This goes to show how serious the issue actually is. Mennen (1994) found that Latina girls whose abuse included penetration were more anxious and depressed than African- American or white girls who experienced penetration. The author explains these findings in part as due to the emphasis on purity and virginity in Latino communities. When virginity is lost, the trauma of sexual abuse is compounded because the Latina girls feel that they are no longer suitable marriage partners. Another ethnic-group difference appeared in rates of re-victimisation. In a sample drawn from a community college, black women who were sexually abused in childhood were more likely to be raped as adults than their white, Latina or Asian counterparts (Urquiza and Goodlin-Jones (1994).

From the preceding discussion, it is quite evident that the issue of child sexual abuse is a serious problem globally and affects many women, girls and boys who have to face the daily consequences of such gruesome acts perpetuated against them at one point in their lives. One
disturbing thing to the researcher is the defilement of children in the age range of 7 to 13 years old. Unfortunately these are the most vulnerable groups to sexual abuse.

2.4 The African Situation.

In many African countries, child sexual abuse has often been ignored or denied as a result of people’s acceptance of violence in a given culture or due to their belief that the culture must focus on preserving the family. In this way, culture may be seen as one of the factors that help to perpetuate violence of all kinds against children. There are scenarios in some tribes in Africa including Zambia where a husband is known to be sexually abusing his daughter, but because his wife would rather preserve her marriage and consequently the so called family harmony and integrity, she would prefer to keep quiet about the whole issue. This has caused many children to be vulnerable to rape and sexual assault in many families in Africa (Milambo, 2015).

Literature from countries surrounding Zambia documents the existence of a Child Sexual Abuse (CSA) epidemic in the region. Prevalence studies rely on cross-sectional study design, most often surveying children about their experiences of sexual abuse. In a review article of child sexual abuse in Sub Saharan Africa, Lalor et al. report that between 3.2 and 7.1% of all respondents report unwanted or forced sexual intercourse before the age of 18 years (Lalor, 2004). Jewkes et al. surveyed 735 South African women between the ages of 15 and 49 years about their history of rape during childhood. Overall, 1.6% reported unwanted sexual intercourse before the age of 15 years of age. 85% of child rape occurred between the age of 10 and 14 years and 15% between the ages of 5 and 9 years (Jewkes, 2002). In a study in Zimbabwe, Birdthistle reports that among unmarried, sexually active adolescents, 52.2% had experienced forced intercourse at least one time. 37.4% of first sexual intercourse acts were forced (Birdthistle, 2008).
According to Heise (1993), 40 – 47 percent of sexual assaults were perpetrated against girls aged 15 or younger in Africa. In a study in a South African hospital of children under age 15 in whom a diagnosis of child abuse was considered, 41 percent of the children reported having been the target of sexual abuse. Thirty one percent reported being physically abused, and sexual abuse was suspected but not confirmed in another 14 percent of the children (Argent; Bass; Lachman, 1995). A study in Uganda revealed that 49 percent of sexually active primary school girls say they had been forced to have sexual intercourse (Noble, Cover, Yanagishita, 1996).

Abuse takes place in both urban and rural environments. A study in a rural population of South Africa found that 51 percent of children between six months and 15 years of age receiving medical treatment for sexual abuse had been abused by a neighbour, an acquaintance, a lodger or a stranger (Larsen; chapman; Armstrong, 1996).

Studies conducted in a city in Zimbabwe found that half of the reported rape cases involved girls less than 15 years of age and the girls were most vulnerable to sexual abuse by male relatives, neighbours and school teachers (Njovana & Watts, 1996).

Both boys and girls can be targets for sexual abuse. In a district in Uganda, 31 percent of school girls and 15 percent of boys reported having been sexually abused, mainly by teachers (Sebunya, 1996).

The threat of social stigma prevents young women from speaking out about rape and abuse. In Zimbabwe, rape cases are sometimes settled out of court when the perpetrator either pays compensation to the girl’s father or pays a bride price and marries the girl to avoid bringing public attention and shame to the girl and her family (Njovana & Watts, 1996.)
All Anglophone countries have enacted laws which directly address sexual offences against minors. The age at which young people are protected by statutory rape laws varies in these countries, from under 13 years in Nigeria to under 16 years in Zimbabwe, Burundi, Cameroon, Ghana, Kenya, Lesotho, Mozambique, Mauritius, Swaziland, and Zambia. Other countries where the sexual consent age has been fixed at 14 years include Chad, Malawi, Democratic Republic of Congo and Madagascar, while in Guinea it is at 15 years. Others such as Gabon, Gambia, Mali, Morocco, Nigeria, Somalia, Rwanda and Uganda have it all fixed at 18 years. The Country Reports on Human Rights Practices for 2012 further indicates that the age for sexual consent in the Comoros and Burkina Faso is 13 years while in Cape Verde it is 14 years. (http://www.state.gov).

The above disparities in the age range of sexual consent across Africa can only mean that in the absence of strict and universal laws that protect children, such as the United Nations Convention on the Rights of the Child (UNCRC), there can be little hope for children. In any case, even if such laws existed and were to be ratified by all the sovereign states across Africa, there still exists a problem when it comes to the actual domestication of these laws by individual member states so that they may become effective and binding. For example, Zambia became a signatory to the UNCRC in 1989 but is yet to domesticate this convention (National Child Policy, 2006). This, therefore, means that Zambia is under no legal obligation under the Zambian statutes to protect its children as required by this convention (Milambo, 2015).

The belief that younger girls might be in less danger of contracting HIV and AIDS has escalated the infection rates across the African continent. This has helped to further complicate the already delicate situation of the children. According to the World Health Organization, statistics for the year 2004 indicate that the catastrophe of HIV and AIDS
(human immune deficiency virus and acquired immune deficiency syndrome) in Africa has already claimed over 18 million lives on the continent and has hit girls and women harder than boys and men. In many countries of eastern and southern Africa, HIV prevalence among girls under the age of eighteen is four to seven times higher than among boys of the same age, an unusual disparity that means more deaths occur among women than men. Abuses of the human rights of girls, especially sexual violence and other sexual abuse, contribute directly to this disparity in infection and mortality. (www.http://hdl.handle.net).

The discussion above gives a vivid impression that child defilement has become a devastating problem in many countries in Africa. Therefore, the need to address this problem in order to protect the children’s integrity and future.

2.5 The Zambia situation with respect to child defilement.

In Zambia, the past five years have seen an increase in child defilement cases. According to the media report of 8th March, 2013, 6,277 Zambian girls had been defiled between 2010 and 2013. Of this total figure, 2,419 cases were recorded in 2010, while 2011 and 2012 had 1,339 and 2,369 respectively. Out of these, 2,839 cases were prosecuted and 789 convictions were secured (http://www.daily mail.co.zm).

Although epidemiology data for the prevalence of child sexual abuse (CSA) in Zambia is not available, Murray et al, found that CSA is a significant concern in the community, especially in Lusaka where he conducted a study on child sexual abuse. Defilement was mentioned by 40% of women and 30% of children asked to list problems affecting children in the community (Murray, 2006). Among the children interviewed, this was the most frequently mentioned problem. In 2007, Sonim-Nevo and Mukuka surveyed 3,360 adolescents (defined as age 10 to 19 years) and found that 9% of adolescents reported a family member touching
their breasts or genitals, 3% reported sexual intercourse, 2% reported oral sex, and 1% reported anal sex by a family member. Females were more likely to have been touched sexually than their male counterparts, but males were more likely than females to have had sexual intercourse or oral sex with a family member.

In Zambia, most reported Child Sexual Abuse (CSA) cases come to the attention of medical personnel because of symptomatic Sexually Transmitted Diseases (STDs). Limited services were offered for sexually abused youth and no Post Exposure Prophylaxis (PEP) was available in the public sector. In 2003, a pilot study was conducted at the University Teaching Hospital (UTH) to investigate the feasibility of giving PEP to sexually abused children in Zambia. The study was done within the department of Obstetrics and Gynaecology. In this study, 23% of eligible children were able to complete a 28-day course of PEP (Chomba, 2006). Prior to this study, there was a lack of awareness of child sexual abuse and a lack of recognition of child sexual abuse cases. No specific points of services for child sexual abuse were available. There were no protocols for how to address the needs of victims, and there was poor or no coordination between the various professionals involved in the management of sexually abused children. It was, therefore, important that a One Stop Centre with a multidisciplinary approach be established in Lusaka. The One Stop Centre would then act as a centre for developing appropriate protocols for the management of child sexual abuse in Zambia as well as becoming a training institution for the rest of the country.

Having looked at child defilement at Global, African and Zambian situations, we now move on to child defilement in the church situation as this is the focus of this research study.
2.6 CHILD DEFILEMENT IN THE CHURCH SITUATION.

While it is clear from all the evidence that sex offenders are found in all denominations and in people of many different theological persuasions, there is almost no research evidence concerning child sexual abuse by priests or ministers in faith communities other than the Catholic Church (Parkinson, 2013). The Catholic Church sexual abuse cases are a series of 20th-21st century cases of child sexual abuse crimes (and subsequent cover-ups) committed by Catholic priests, nuns and members of the Roman Catholic orders. The numerous allegations, investigations, trials and convictions included crimes against boys and girls, some as young as 3 years old, with the majority between the ages of 11 and 14 (Scot, 2011). The accusations began to receive wide publicity in the late 1980s. Many related to cases in which a figure was accused of abuse for decades; such allegations were frequently made by adults or older youths years after the abuse occurred. Cases have also been brought against members of the Catholic hierarchy who covered up sex abuse allegations, moving allegedly abusive priests to other parishes, where abuse sometimes continued (Frank, 2002).

The cases received significant international media and public attention, especially in the United States (where they were first investigated and reported), Canada, and Ireland. Members of the Church's hierarchy have argued that media coverage was excessive and disproportionate, and that such abuse takes place in other religions and institutions (Riazat, 2009). A critical investigation by The Boston Globe in 2002 led to widespread media coverage of the issue in the United States. By 2010, much of the reporting focused on abuse in Europe (Marino, 1995).
From 2001 to 2010 the Holy See, the central governing body of the Catholic Church, considered sex abuse allegations concerning about 3,000 priests dating back up to fifty years (Wan, 2010). Cases worldwide reflect patterns of long-term abuse, and the church hierarchy regularly covering up reports of alleged abuse. Diocesan officials and academics knowledgeable about the Roman Catholic Church say that sexual abuse by clergy is generally not discussed, and thus is difficult to measure (Aidan, 2010). In the Philippines, where, as of 2002, at least 85% of the population is Catholic, revelations of child sexual abuse by priests followed the United States' reporting in 2002 (BBC News, 2002).

The sexual abuse of children under the age of consent by priests has received significant media and public attention in the United States, Canada, Ireland, the United Kingdom, Mexico, Belgium, France, Germany and Australia. Cases have also been reported in other nations throughout the world (Aidan, 2010). Many of the cases span several decades and are brought forward years after the abuse occurred.

Although nationwide inquiries have been conducted only in the United States and Ireland, cases of clerical sexual abuse of minors have been reported and prosecuted in Australia, New Zealand, Canada and other countries. In 1994, allegations of sexual abuse of 47 young seminarians surfaced in Argentina (USA Today, Associated Press, 2004). In 1995, Cardinal Hans Herman Groer resigned from his post as Archbishop of Vienna, Austria over allegations of sexual abuse, although he remained a Cardinal (Boston.com. Retrieved 27 April 2010). Since 1995, more than 100 priests from various parts of Australia were convicted of sexual abuse (BBC News, 14 April 1998).

In Ireland, the Commission to Inquire into Child Abuse issued a report that covered six decades (from the 1950s). It noted "endemic" sexual abuse in Catholic boys' institutions, saying that church leaders were aware of abuses and that government inspectors failed to

In Australia, according to Broken Rites, a support and advocacy group for church-related sex abuse victims, as of 2011 there have been over one hundred cases where Catholic priests have been charged for child sex offences (Broken Rites. 28 August, 2011). A 2012 police report detailed 40 suicide deaths directly related to abuse by Catholic clergy in the state of Victoria (Campbell, 2011). In January 2013, an Australian Royal Commission into Institutional Response to Child Sexual Abuse was called to investigate institutional sexual abuse of minors related, but not exclusive, to matters concerning clergy of the Catholic Church (Hall and Ireland, 2013).

Of the Catholic sexual abuse cases in Latin America, the most widely known is the sexual scandal of Father Marchial Maciel, the leader of the Legion of Christ, a Roman Catholic congregation of pontifical right made up of priests and seminarians studying for the priesthood (Hall & Ireland, 2013). The revelations took place after the Legion spent more than a decade denying allegations and criticizing the victims who claimed abuse (legionariesofchrist.org. Retrieved 14 September 2014).

In Tanzania, Father Kit Cunningham and three other priests were exposed as paedophiles after Cunningham's death (Stanford, Peter, 2011). The abuse took place in the 1960s but was only publicly revealed in 2011, largely through a BBC documentary (BBC. 21 June 2011).

Church officials and academics knowledgeable about the Third World Roman Catholic Church say that sexual abuse by clergy is generally not discussed, and thus is difficult to
measure (Aidan, 2010). This may be due in part to the more hierarchical structure of the Church in Third World countries, the "psychological health" of clergy in those regions, and because third world media, legal systems and public culture are not as apt to thoroughly discuss sexual abuse (Aidan, 2010).

Academic Mathew N. Schmalz notes India as an example: "you would have gossip and rumours, but it never reached the level of formal charges or controversies." (Aidan, 2010). Traditionally, the Roman Catholic Church has held tight control over many aspects of church life around the globe, including "the words used in prayer", but it left sex abuse cases to be handled locally (Aidan, 2010). In 2001, the church first required that sex abuse cases be reported to Rome (Aidan, 2010). In July 2010, the Vatican doubled the length of time after the 18th birthday of the victim in which clergymen can be tried in a church court. It also streamlined the processes for removing "pedophile priests". (Hooper and Siddique, 2010).

The Augustin Cardinal Bea, S.J. specializes in abuse counseling and is considered an expert on clerical abuse; he states "approximately 4% of priests during the past half century (and mostly in the 1960s and 1970s) have had a sexual experience with a minor." (Thomas, 2002). According to Newsweek magazine, this figure is similar to the rate of frequency in the rest of the adult population (Thomas, 2004).

Allegations of and convictions for sexual abuse by clergy have occurred in many countries. There are no accurate figures available on the number of sexual abuse cases in different regions. But, in 2002 The Boston Globe reported, "Clearly the issue has been most prominent in the United States."(Aidan, 2010). The US is the country with the highest number of reported Catholic sex abuse cases (Newsweek. Retrieved 11 April 2010). Plante wrote, the "crisis in the United States reached epidemic proportions within the Church, the likes of which haven't been witnessed before." (Plante, 2002).
After the United States, the country with the next highest number of reported cases is Ireland (BBC News, 20 May 2009). A significant number of cases have also been reported in Australia, New Zealand, Canada, and countries in Europe, Latin America, Africa, and Asia (Gray, Mark M. article 49.4(2008)457–460). In 2004, the John Jay report tabulated a total of 4,392 priests and deacons in the U.S. against whom allegations of sexual abuse had been made.

In response to the attention, members of the church hierarchy have argued that media coverage has been unfair, excessive, and disproportionate (Riazat, 2009). According to a Pew Research Center study, in 2002 the media coverage was focused on the US, where a Boston Globe series initiated widespread coverage in the region. However, by 2010 the focus had shifted to Europe (Pew Research Centre, 11 June 2010).

In September 2011, a submission was lodged with the International Criminal Court alleging that the Pope, Cardinal Angelo Sodano (Dean of the College of Cardinals), Cardinal Tarcisio Bertone (Cardinal Secretary of State), and Cardinal William Levada (then-current Prefect of the Congregation for the Doctrine of the faith) had committed a crime against humanity by failing to prevent or punish perpetrators of rape and sexual violence in a "systematic and widespread" concealment which included failure to co-operate with relevant law enforcement agencies(Paulson, Michael 8 April 2002). In a statement to the Association Press, the Vatican described this as a "ludicrous publicity stunt and a misuse of international judicial processes." Lawyers and law professors emphasized that the case is likely to fall outside the court's jurisdiction (McVeigh, Karen, 13 September 2011).

The United Nations Committee on the Rights of the Child, in early 2014, issued a report asserting that the pope and the Roman Catholic Church have not done enough and protect their reputation rather than protect children (Dispenza, 2014). The panel of the committee
wants all known or suspected child molesters removed, archives on abusers and Bishop who covered up abuse opened, and instances of abuse handed to law enforcement agencies to be investigated and prosecuted. A joint statement of the panel said,

The committee is gravely concerned that the Holy See has not acknowledged the extent of the crimes committed, has not taken the necessary measures to address cases of child sexual abuse and to protect children, and has adopted policies and practices which have led to the continuation of the abuse by, and the impunity of, the perpetrators (New York Daily News, 5 February 2014).

Due to a code of silence imposed on all members of the clergy under penalty of excommunication, cases of child sexual abuse have hardly ever been reported to the law enforcement authorities in the countries where such crimes occurred (Independent.co.uk).

Committee chair, Kirsten Sandberg enumerated some major findings, that pedophile priests were sent to new parishes or other countries without police being informed, that the Vatican never insisted on bishops reporting abuse to police, and that known abusers still have access to children. Barbara Blaine of SNAP said,

This report gives hope to the hundreds of thousands of deeply wounded and still suffering victims of clergy sex abuse across the world. Now it's up to secular officials to follow the U.N.'s lead and step in to safeguard the vulnerable because Catholic officials are either incapable or unwilling to do so (New York Daily News, 5 February 2014).

The UN report prompted discussions of specific areas of controversy, including secrecy among bishops and Vatican statements denying responsibility which in canon law they have. or and Catholic social activist Paul Valley wrote that he felt the UN report had been hurt by the Commission having gone well beyond the issue of child abuse to issues such as contraception. However, he also felt the report did bring important pressure on the Vatican on important issues like reporting cases to police (Euro news, 5 February 2014).
However, in spite of all the above accusations, Pope Francis has since his election appeared to offer new hope to victims, with a call for action on sex abuse in the Catholic Church. Under his papacy, a Vatican committee has been set up to fight sexual abuse and help victims. In a report by Vatican Radio, the pope asked for forgiveness for the evil damage to children caused by sexual abusers in the clergy and said “sanctions” would be imposed (BBC News, 11 April, 2014).

Although there is almost no research evidence concerning child sexual abuse by priests or ministers in other faith communities other than the Catholic Church, child sexual abuse occurs in these faith communities. Some limited evidence has come from two leading insurers of Protestant Churches in the United States. They indicated that they received around 260 reports per year of alleged abuse of minors by clergy, church staff or volunteers. These insurance companies cover not only churches but also religious schools, camps and other Christian organisations (Parkinson, 2013).

The researcher agrees with Parkinson when he says that child sexual abuse also occurs in other faith communities other than the Catholic Church. He has observed that most of the reported cases of child defilement which occur in church settings in Zambia are from other faith communities especially the Charismatic churches. Cases of child defilement in some of the church settings in Zambia are shown in chapter one of this research study.

We now move on to the causes and effects of child defilement on the children as the victims of defilement. Effects of child defilement on mothers which is the focus of this research study are discussed later in chapter four of this research study.
2.7. CAUSES OF CHILD DEFILEMENT.

In this section, the researcher discusses some of the causes and effects of child defilement in Zambia. Since the focus of this research study is on the child defilement perpetuated by a church leader, this section will also discuss the causes of child defilement by church leaders.

As already mentioned earlier in this research study, there has been a rampant increase of cases of child defilement in Zambia. Before the year 2002, most people attributed the increase of defilement cases to the weak law at the time. But despite the amendment of the law to impose a minimum sentence of fifteen years imprisonment for those convicted of the offence of defilement, defilement cases have continued to be perpetrated at alarming levels. For example, the Zambia daily mail of March 8, 2013 reported that 6,277 Zambian girls had been defiled between 2010 and 2013. This leaves one to wonder as to what causes men to defile innocent young girls. Defilement cases are on the increase in Zambia because of a number of reasons. Some of the reasons are cited below.

2.7.1 Sexual perversity.

Sexual perversity is a situation where those that are involved have no control over their sexual desires and therefore, take advantage of young children left in their care. In Zambia the lack of adequate institutional day care centres for children and the prohibitive fees tend to create a situation where children, especially those with working mothers, are left in the care of relatives or others who tend to abuse them. Some perpetrators are known to be “paedophiles” which is a form of sexual perversion in which children are the preferred sexual objects for reasons they may not even comprehend (WILDAF). There is no denying that some of the defilement cases that have been witnessed in Zambia are as a result of this abnormality (Milambo, 2015).
2.7.2 Belief that having sex with minors cures HIV and AIDS.

Many men who were diagnosed to have HIV and AIDS have developed an irrational belief that having sex with a minor would bring them healing. Therefore, in the search for healing, such people would find an opportune time to convert this belief into practice. This belief could be seen in the mushrooming of messages on billboards, radio and TV programmes by HIV and AIDS activists to reject this kind of thinking (Milambo, 2015).

The above kind of thinking is wrongfully advised by witchdoctors in Zambia. In an article dated 25 September 2003, posted on (http://www.allafrica.com), a pastor of one of the churches in Ndola, one of the towns in the Copperbelt province of Zambia, complained that witchdoctors were wrongfully advising HIV and AIDS patients to have sex with minors in order to be cured, adding that this was the worst form of immorality and cruelty against children (Milambo, 2015). Nundwe (2003) also confirmed this and stated that with the prevalence of HIV and AIDS, there are superstitions and beliefs that sex with a child cures HIV and AIDS, boosts business potential, increases chances of promotions at places of work, or enhances other powers such as witchcraft. This is usually done on the advice of witchdoctors and traditional healers.

2.7.3 Lack of parental care.

Other causes of child defilement may be attributed to lack of parental care. It is argued that the inability of most parents to provide adequately for their children due to poverty forces girls into sexual relations with taxi-drivers, bus drivers and others so that they raise some money to afford them to eat something or go to school. Parental support is, thus, lacking in many households today where it is found that parents spend less time with their families. Some parents leave home early, leaving their children asleep and come back very late when
the children have already gone to bed (Nundwe, 2003). It is true that lack of parental care and poverty can actually motivate some children to engage in child prostitution in order to make ends meet and thereby escalate incidences of child defilement.

2.7.4 Inadequacy in housing.

Inadequacy in housing could also cause a volatile situation that is likely to promote strange behavioural patterns among members of a particular household. It is very common in Africa, and Zambia is no exception, for a family and relatives (those mainly of extended family setups) to live together in a house which does not have enough or adequate space. For example, a family of eight or so members could be housed in a one bed roomed house. The husband and wife who are the owners of the house could occupy the one bedroom, the rest of the family share different corners, and may be the boys in one corner and the girls in the other. This creates a vulnerable state/environment (Milambo, 2015). Sometimes, it has been taken for granted that a youngster of 3 years or so can sleep with the elderly believing that nothing would happen to the child since she/he is in the care of the elderly person (Shinkanga, 1996).

2.7.5 Watching of pornographic videos.

Child defilement cases could also be escalated if watching of pornographic videos in the home is allowed. With the coming of the internet, pornography is more common than it used to be. These depict scenes of heterosexuality, rape, oral, anal and group sex, incest, bestiality and other loathsome out-pourings of perversions. As already mentioned somewhere in this chapter, Lusaka based consultant psychiatrist Professor Alan Haworth cites watching of pornographic movies and explicit movies as a major motivation behind the spate of defilement cases. Researchers say that the repeated use of pornography can interfere with the
ability to enjoy and participate in normal marital intimacy (Milambo, 2015). Another consultant, Doctor Victor Cline, a specialist in treating sex addiction, states that what starts as casual viewing of pornography can eventually lead to deviant sexual acts. He argues that any type of sexual deviation can be acquired this way and cannot be eliminated even by massive feelings of guilt. Like a cancer, it keeps growing and spreading. It rarely reverses itself and it is also very difficult to treat and heal (Times of Zambia, August 30, 2003).

2.7.6 Customary marriages.

Zulu observe that, customary law marriages play a big role when examining the offence of defilement in Zambia. This is so because the girl under such a marriage is married off provided she has attained puberty. Therefore, a man having sexual intercourse with a girl below the age of sixteen to whom he is married does so legally as long as such a girl is of age and he is married to her according to custom (2011:13). Under section 138 (1) of the penal code as amended, the section does not prohibit sexual intercourse with a minor if it is done under customary law. The section states as follows:

Any person who unlawfully and carnally knows any child commits a felony is liable upon conviction to a term of imprisonment of not less than fifteen years and maybe liable to imprisonment for life.

It is a complete defence for any person to engage into sexual intercourse with a girl below sixteen years if they are legally married. This was considered in a case of defilement of a village headman who was married to a girl under sixteen years and lived with her as man and wife. He was charged with having carnal knowledge of a girl under sixteen years of age and convicted. It was held by the high court that:
It is not unlawful for a man to have carnal knowledge of a girl to whom he is lawfully married, despite the fact that the girl is under sixteen years of age (1949, 5 N.R.L.R).

From the above case we can deduce that sex with a girl who is under the age of sixteen years to whom a man is married to can be lawful when her parents or guardians give permission for her to marry. As seen above, consent of the girl alone cannot make the marriage lawful. If the parents do not give the consent, then such a marriage is not valid and should fail (1963, R and N law reports 143).

The researcher has observed that customary marriage laws have encouraged early marriages which have become a big problem in Zambia. Although some survey not too long ago showed Eastern Province to have the highest rate of girls married off before the age of 18, at 50 per cent, the practice takes place throughout the country, although it is true it is rife in the rural areas. In some of these places, once a girl comes of age, the first thing parents think of is that she is now ready for marriage even if she has not reached the age of consent. In one remote part of Northern Province, parents withdrew their 14-year-old daughter from a nearby primary school after she reached puberty, saying she should be at her home village waiting for a suitor. One reason for this action was that the girl might be impregnated by a teacher; especially that she was one of those young females rotating to sweep the head teacher’s office every morning. Of course, teachers having affairs with their pupils are another embarrassing incidence in Zambia. As of today, however, the subject matter is strictly child marriage. In Zambia, the minimum legal age for marriage is 18 years. However, parental consent is required if a girl or boy is 16 to 17 years old, and this very often happens in rural areas of Zambia. This then means that anyone under 16 years is a minor and if she is forced into marriage, the case of defilement comes in. As already mentioned earlier in this research study, this is a serious offence punishable by imprisonment of a minimum of 15 years. Sadly, even after having hosted a symposium on ‘Ending child marriages’ which attracted the United
Kingdom’s Secretary of State for International Development Justine Greening and Zambia’s Chiefs and Traditional Affairs Minister Nkandu Luo, among other high-profile delegates, child marriages are being solemnized in many parts of the country. On several occasions, traditional leaders, and even teachers, have rescued girl-children from such early marriages. But this has not ended the practice, with deepening poverty being cited as one of the major reasons why some parents force their children into early marriages. The argument is that some parents do not have financial resources to support their children’s education, thus the only option they have is to marry them off. Unfortunately, this tendency deprives these young persons of the opportunities for education. And this becomes a vicious cycle because it does not only affect the young couple but, as Ms. Greening hinted, also their children whose chances to attend school equally become bleak. Child rights activists and other well-meaning members of the public have further said that child marriage is a violation of human rights, whether it happens to a girl or a boy. This is because the incidence represents yet another form of sexual abuse and exploitation of the minor – anyone below the age of 16 is a minor, according to the Zambian laws. The worst scenario is where such marriages lead to commercial sexual exploitation and violence against the victims, and these vices largely affect girl-children. Human rights activists have also rightly said that child marriage can and usually does result in bonded labour or enslavement, besides an early passage to the grave by either the young mother or her baby or both. Other harmful consequences of this phenomenon are children’s separation from their families and friends, a lack of freedom to interact with peers and participate in community activities, all of which do not augur well for the socio-economic development of the country. Perhaps Dr. Kaseba, wife of the late President of Zambia, Mr. Micheal Chilufya Sata, was right to call for the criminalization of early marriage because an end to this practice is not only good for the future of affected young persons, but its long-term benefits are for the betterment of the country as a whole.
2.7.7 Sex boosters.

Some people say the senseless behaviour of defilers comes from taking an overdose of sex boosters which is commonly known as mtototo. If you see someone walking like he is hiding an empty bottle of beer in his underwear, it is likely that he had been to see a medicine man in the neighbourhood recently. Yes, there is a long history to sex boosters, but when it comes to defilements, we are facing a changed landscape (Zambia Sunday mail, July 19, 2015).

2.7.8 Psychiatric disorders.

It has been shown that at least about 10% of the people who sexually abuse children may have psychiatric problems (Gelles, 2009). Conditions like Bipolar 1, where the patient shows episodes of depression and mania, may increase one’s sexual drive and thus lead to even abusing minors. Substance misuse can also increase a person’s sexual drive such that, if not controlled properly, that person may end up abusing children. Such substances include alcohol, cocaine, and marijuana.

2.7.9 Indecent dressing.

As already mentioned earlier in this chapter, some people have attributed acts of child abuse to indecent dressing, an occurrence that has grown considerably in Zambia. However, this does not explain cases of abusing babies who are as young as eighteen months old.

2.7.10 Lonely lives and opportunistic contact with children.

In recent years, the sexual abuse of minors by members of the clergy has become an issue of major concern in some European countries as well as in the United States. Some clergy men and pastors who have regular contact with children can be tempted in their lonely lives to
abuse them. Moreover, depending on their ages, the fact that girl children may not become pregnant has increased the danger.

2.7.11 Reduced parental guidance.

With the increase in pornographic materials on the internet, there is need for parents to offer parental guidance to their children especially the minors. Some defilers are just paedophilic, that is, persons who are somehow by nature inclined to indulge in having sexual relationships with children.

2.7.12 Quest for wealth.

Some traditional healers may sometimes advise their clients to sleep with a minor in quest for riches. In such cases, they may try by all means to encourage their clients to become involved in such practices whether verbally or with the use of charms.

Having discussed some of the general causes of child defilement, we now move on to the causes of child defilement by church leaders.

2.8. CAUSES OF CHILD DEFILEMENT BY CHURCH LEADERS.

Crosson-Tower, (2005) postulates that the only way to understand what motivates a priest, minister, or other religious leaders to sexually abuse children is to consider what religious life offers and how this fits into the needs of a perpetrator. First and foremost, church leadership brings with it respect and often unquestioned authority. Ministers and priests and other church leaders are usually held up as people who are trustworthy, loyal, and who want the best for those to whom they minister. For an insecure individual, which perpetrators appear to be (Flora, 2001), this lauded position would hold great appeal. Further, the trust with which a church leader is surrounded, offers an opportunity to be alone with children, often in a close
or nurturing role. Until recently, when abuse by clergy has come under scrutiny, being a religious leader also offered one some degree of protection. The church community would often go to great lengths to deny that their leader was guilty of any deviance (Kearney, 2001; Gerdes, 2003). Most parishioners find abuse by their priest or minister unbelievable. Some feel the media is just inventing a panic each time it reports a case of child sexual abuse by a church leader (Cozzens, 2002).

Cooper-White (2013:70-73) mentions educational gaps, situational stress and characterological factors resulting from psychological woundedness in many clergy as contributing factors to clergy sexual misconduct.

On educational gaps, she argues that until recently, the training of seminarians in professional ethics has been woefully lacking in most minister’s education. Only in the last decade or so has the issue of professional boundaries been included in clergy training in most institutions, or in books for clergy. Earlier mentions of sexual ethics tended to be exclusively on sexual morality, not power and responsibility and schools with more conservative theological frameworks traditional roles of men and women still tend to follow this model. In some cases, training has emphasized overcoming temptation and learning to resist feminine wiles. Lack of training has been, in some cases, compounded by confusion, beginning especially in the latter part of the 20th century, concerning sexual norms. Many clergy practising today either received their initial training or passed through continuing education experiences during the late 1960s and early 1970s, when the helping professions in general were in the state of flux and experimentation. The clergy profession was giving increasing attention to the field of psychotherapy just at a time when the more abstinent methodology of psychoanalysis was being challenged on both professional and more popular fronts. The development of encounter groups, transactional analysis and group marathons, sex therapy, as well as
vehement debates among psychotherapists about the possibility of touching clients filtered into popular literature and had a formative influence on many clergy. Especially in liberal mainline denominations, such discussions gave tacit permission, and even supplied a rationale, for loosening traditional standards of sexual morality in the practice of ministry. Such discussions focused on the freeing effects of shedding repressive sexual conventions. Issues of the clergy’s power as a professional and fiduciary responsibility were overlooked in the desire to seem modern and non-judgemental.

On situational factors, Cooper-White states that one situational factor, and the one most often cited as the cause of clergy sexual misconduct, is clergy stress. In particular, marital discord, workaholism, emotional enmeshment with the congregation, social isolation, loneliness, and lack of significant relationships, or loss of parent or child, are cited as pushing vulnerable clergy over the edge into misconduct. The decline of public esteem of the clergy role has also been cited. Burnout and over commitment to work are frequently mentioned in connection with clergy dysfunction, although some have questioned whether clergy stress has actually been overrated.

Other external factors include the absence of supervision and accountability within the church setting, and the minister’s unique access to vulnerable parishioners, including visits to their homes and bedsides, are further situational factors.

Alcohol or other addictions are sometimes cited in cases of misconduct. As in cases of rape or domestic violence, it is important to recognize that drinking, drug use, or even “sex and love addiction” is not the cause of the abuse, although it is often used as an excuse. The common myth, often held by the wife and by the parish and the denomination is: “once he admits and deals with his alcohol problem, the sexual misconduct will stop.” This can lead to
unproductive treatment plans for the abuser, because the power dynamic of the abuse is deep-seated and independent of any substance abuse.

There is another situational factor as well, which is less often cited. An institutional culture of subordination and devaluation of women’s experience, combined with a tolerance for sexual harassment and patriarchal sexual prerogative, also creates a powerful, if largely unspoken, situational factor. The relative social powerlessness of women to define their own boundaries and protest boundary invasions creates a climate where sexual abuse can thrive unspoken and unseen. To the extent that the institution fails to convey or enforce a message that sexual abuse will have consequences, offenders will read an opposite message of tacit permission.

On the characterological factors resulting from psychological woundedness in many clergy, Cooper-White states that a number of health problems have been cited in cases of clergy abuse, from chronic depression and dependency, compulsive/addictive personality, narcissism, “borderline” personality, to sociopathy and, in rare instances, psychosis. Some studies even suggest that the clergy profession may attract individuals at risk.

And yet, even with this range of problems, not all neurotic or even disturbed clergy cross sexual boundaries, although they are supposedly at great risk. For this reason, I also see a strong thread of narcissistic problems running through the entire range of clergy offenders. Narcissism has its origins in the first years of life, and is, therefore, difficult to heal. It impairs the minister’s professional judgement in a way that puts him particularly at risk for crossing boundaries, because it damages his capacity for empathy and causes him to seek gratification of his own needs first, regardless of the cost to others. Even a “wonderer” or “neurotic” pastor may show narcissistic wounding through manipulative behaviour, externalization of blame, and a tendency to use others especially in times of stress to meet personal needs.
Narcissism begins with early childhood wounding-sometimes quite subtle-in which the normal grandiosity of the very small child is crushed, leaving a great hole to be filled. A mass of unconscious defendedness, like scar tissue, conceals this early wound, sometimes resulting in behaviour that in turn victimizes others. Wants are seen through a distorted lens as needs. The narcissistically wounded professional tends to conceal his insecurities and cravings for attention under a behavioural style of entitlement and specialness-a style often condoned and even reinforced by the clergy role. At the mild end of the narcissism spectrum, a particular priest may become impatient because he does not feel he should have to stand in line at the bank, or make his own bed at a retreat center. At the extreme end is sociopathic behaviour—an inability to feel empathy resulting in an absence of conscience. Because manipulation and the projection of a star image are common to narcissistically wounded people, empathy and conscience are often convincingly feigned. But deep in the person’s soul is overwhelming despair, emptiness, and fear. For this reason, such individuals often have great difficulty establishing appropriate intimate relationship and friendships with male peers-often resulting in a “lone ranger” style of ministry. Other people are used compulsively and heedlessly in a desperate attempt to keep the demons of worthlessness at bay.

The narcissistic clergy’s personal craving for recognition combines explosively with the power of the clergy role and a social climate of masculine privilege. This helps to explain why clergy sexual abuse is, at its foundation, an abuse of power and not sex.

Some might also argue that celibacy especially in the Catholic Church provides the perpetrator, who is not interested in adult women, with an acceptable alternative. The Catholic Church has been reluctant to accept any such connection. The issue of celibacy was considered in Towards Understanding, a discussion paper prepared for Catholic Church leaders in Australia and published in 1999. The authors noted that there is no evidence of a causal link between lack of sexual outlet and sexual abuse. Furthermore, celibacy itself cannot
explain choice of partner or form of sexual expression. They raised the issue whether sexual dysfunction might be a reason why people decide to enter into a religious vocation involving celibacy. Finally they observed that an active and satisfying sexual life is not a guarantee against abusive behaviour (Parkinson, 2013).

A further study by the John Jay College of Criminal Justice sought to argue that there was no connection with celibacy based on the available empirical evidence. That research team noted that the pattern of complaints indicated a concentration of allegations coming to light concerning abuse in the 1960s and 70s with a decline from the mid-1980s. They pointed out that given celibacy was a constant throughout this period, it cannot explain the differences in reported abuse from different decades, and cannot, therefore, be treated as a causal factor. Rather, they pointed to societal factors, arguing that the increase in child sexual abuse in the 1960s and 70s is consistent with increases in drug use, crime, premarital sexual behaviour and divorce.

There are problems with this argument, however. First, it may confuse the incidence of child sexual abuse with the incidence of its disclosure. Secondly, it may confuse propensity with opportunity. The propensity to abuse children may be constant while the opportunity to do so diminishes (Parkinson, 2013).

Perpetrators seek out, whether consciously or unconsciously, situations and positions which give them opportunities to be with children. The position of a church leader, like numerous other positions, provides that vehicle (Crosson-Tower, 2005).

Comparison of the Offerings of an Ecclesiastical Career and the Needs of Perpetrators.

<table>
<thead>
<tr>
<th>What is offered by religious life</th>
<th>What an offender searches for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect as priest or member of clergy due to faith of parishioners, usually unquestioned</td>
<td>Unquestioned acceptance/respect</td>
</tr>
<tr>
<td>Due to profession, is elevated in status</td>
<td>Respect in the community</td>
</tr>
<tr>
<td>Held apart from general community in minds of most</td>
<td>Some isolation from general community</td>
</tr>
<tr>
<td>Authority based on a higher power, an association that makes him powerful</td>
<td>Power</td>
</tr>
<tr>
<td>Head of the congregation</td>
<td>Control</td>
</tr>
<tr>
<td>Contact with youth in a variety of ways, often unsupervised, with the trust of both parents and youth</td>
<td>Opportunity with children</td>
</tr>
<tr>
<td>Under the protection of the “Mother Church,” also nurtured by parishioners</td>
<td>An all-loving parent or nurturance</td>
</tr>
<tr>
<td>Provided with housing and structure in daily tasks</td>
<td>Limited self-care responsibility</td>
</tr>
<tr>
<td>Celibacy in some denominations. Ethical concern for not becoming romantically involved with congregation in others</td>
<td>Threatened by adult relationships and prefers not to have them on an intimate level</td>
</tr>
</tbody>
</table>

In agreeing with Crosson-Tower, the researcher regards the use of respect and authority by the church leaders to sexually abuse children as misuse of power. This is because they use these (respect and authority) to meet their own needs rather than to minister to those in their care. As persons with enormous power, because they are perceived by some to be God’s representatives, the church leaders misuse their power for their own benefit and to the detriment of another (Heather, 2011).

It should be made clear that despite the fact that the perpetrator may find a haven in the church for the above reasons, there are many church leaders who have never and will never be abusive to children. We now move on to the effects of child defilement on children.

### 2.9. EFFECTS OF CHILD DEFILEMENT ON CHILDREN.

Child Sexual Abuse has psychological, sociological and spiritual effects on the children irrespective of who the perpetrator is. Below are the effects as discussed by Smit (2007).
2.9.1. Psychological effects.

South Eastern Centre against Sexual Assault (secasa.com.au) describes nine psychological effects of child sexual abuse. These include fear, helplessness/powerlessness, guilt and shame, responsibility, isolation, betrayal, anger, sadness, and flashbacks. These are described in details below.

2.9.1.1 Fear.

The offender may swear the child to secrecy and say that if they tell something bad will happen. Sexual abuse is usually accompanied by coercion, bribery or threats. The child is afraid to tell because of what the consequences might be. e.g. punishment, blame, abandonment or not being believed.

2.9.1.2 Helplessness/powerlessness.

Children in this situation often feel that they have no control over their own lives or even over their own bodies. They feel that they have no choices available to them.

2.9.1.3 Guilt and shame.

The child knows something is wrong and blames him or herself not others. The offender will often encourage the child to feel that the abuse is his or her fault and sometimes s/he will feel that s/he is a “bad” person.

2.9.1.4 Responsibility.

The offender often makes the child feel responsible for keeping the abuse a secret. Sometimes the child also feels responsible for keeping the family together and the burden of this responsibility interferes with experiencing a normal childhood.
2.9.1.5 Isolation.

Incest victims feel different from other children. They must usually be secretive. This even isolates them from non-offending parents and brothers and sisters.

2.9.1.6 Betrayal.

Children feel betrayed because they are dependent upon adults for nurturing and protection and the offender is someone who they should be able to love and trust. They may feel betrayed by a non-offending parent who they feel has failed to protect them.

2.9.1.7 Anger.

Not surprisingly this is one of the strongest feelings which many children have about their sexual assault. Children may feel anger against the perpetrator and also against others who they feel failed to protect them.

2.9.1.8 Sadness.

Children may feel grief due to a sense of loss, especially if the perpetrator was loved and trusted by the child.

2.9.1.9 Flashbacks.

These can be like nightmares which happen while the child is awake. They are a re-experience of the sexual assault and the child may experience all the feelings again which they felt at the time.

Doyle (1995) agree with the above mentioned psychological effects and add the following experiences that children have as a result of sexual abuse:
- Damaged-goods syndrome. The victim feels damaged by his or her experience. This results in a low self-esteem and poor self-image.
- Inability to trust people. Abuse is unpredictable and the victim feels unsafe and insecure after the abuse.
- Frozen fright that disables the child to disclose about the sexual abuse and to protect the self after the abuse.
- Doubt, as victims doubt that they are worth the effort of help.

2.9.2. Sociological effects.

Child sexual abuse has sociological effects on the abused children. According to Hartman (1995), out-reacting of children who are sexually abused includes substance abuse and suicidal behaviour. Clinical reports by Glaser and Frosh (1993), show that sexual abuse in children is also associated with the following out-reacting behaviour:

- Bedwetting.
- School refusal.
- Adolescent pregnancies.
- Suicidal attempts.
- Psychological difficulties.

Muller (1998), also describes long-term effects of child sexual abuse from a medical point of view which are effective disorders:

- Preoccupation with sexual matters.
- Excessive masterbation.
- Early interest in sexual relationships.
- Lack of control of sexual impulses.
- Unwanted pregnancies.
- Sexual identification difficulties.
- Promiscuity.
- Homosexuality.
- Sexual abuse of other children.

2.9.3. Spiritual effects.

Child sexual abuse by a church leader also has spiritual effects on the sexually abused children. Contributing to a book titled “When Pastors Prey”, Mary Fortune has this to say about spiritual effects as a result of sexual contact between religious leaders and their congregants:

“Spiritually, the consequences are also profound; the psychological pain is magnified and takes on cosmic proportions. The congregants are not only betrayed by someone representing God but also feel betrayed by God and their faith community.” (Fortune, 2013:16).

This is agreed by Heather as he says the following about people who were sexually abused by church leaders:

“There are also spiritual effects. People who were abused often experience a loss of trust in church leadership and separation from their congregation. They may feel betrayed by God and the church. Or they may feel sinful and question God’s love for them.” (Heather, 2011:18).

The researcher is writing as a Reverend in the Reformed Church in Zambia (RCZ) and has observed that when a church leader sexually abuses a congregant, the congregant loses trust in him and stops participating in any church activities. This is in agreement with what Heather
and Fortune are saying regarding loss of trust in the church leader when he sexually abuses a child.

For an adult to be sexual with a child or teen is a betrayal of trust, a misuse of adult authority, taking advantage of a child’s vulnerability, sexual activity in the absence of meaningful consent; it is, in other words, rape. When an ordained member of the clergy has been sexual with a child, it is also a betrayal of the role of the pastor. The job of the clergy is to nurture the flock, to protect them when they are vulnerable, and to empower them in their lives-especially children and youth. The people assume they can trust the clergy not to harm them, because they are clergy. Sexual abuse betrays that trust (Fortune, 2013:18).

To sexually abuse a child is to steal the child’s innocence and future, often with profound and tragic consequences. When an acknowledged pedophile priest can say that he didn’t see what was wrong with his behaviour with a child because he had been taught not to have sex with adult women, we can begin to see the inadequacy of the ethical analysis. The sexual abuse of a child or teen is about the misuse of power by the adult. It is about theft: taking advantage of a child’s naiveté, stealing his or her future.

The responses and reactions of the children as described by the discussions above are a sign of the severe impact of sexual abuse on children. This indicates the seriousness of sexual abuse on children by church leaders and, therefore, the need for this research study to help in addressing the problem.

2.10 PRELIMINARY CONCLUSION.

This chapter has explored the literature surrounding the phenomenon of child defilement. Several themes have been discussed namely, the historical overview of child defilement focusing on the mediaeval period, the global situation of child defilement and the African and
the Zambian scenarios of child defilement. The chapter has also discussed child sexual abuse in the church focusing on the Catholic Church. The causes and the effects of child defilement on children as victims have also been highlighted.

The next chapter deals with the methodology of this research study focusing on the qualitative research methodology and Gerken’s shepherding method of pastoral care.
CHAPTER THREE

RESEARCH METHOD AND DESIGN

3.1 INTRODUCTION.

This chapter provides the methodology of this research study. Many text books on research methods suggest that methodology is about your ‘research stance’. By research stance, researchers mean your core beliefs about the nature of things in the world (‘how things are in the world’) that lie behind the key choices in your research (NG and Coakes, 2014). Different researchers have different views of the nature of people and their activities, and of social organizations and culture in which activities are organized and enacted. The view that a researcher has of the nature of the world governs the way that the research is designed, and its findings are analyzed and reported (NG and Coakes, 2014). Scholars call an individual’s view of the nature of the world her/his ontology.

There are a number of different views (social ontologies) that researchers may hold of the world in which they conduct their research. For the sake of this research study, two popular social ontologies will be looked at i.e. objectivism and Social constructionism or constructivism (same meaning for both words, and we will henceforth call this phenomenon ‘constructivism’).

The differences of the two social ontologies are highlighted in the table below as described by NG and Coakes, (2014).

<table>
<thead>
<tr>
<th>Objectivists</th>
<th>Constructivists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Believes that most if not all objects we see around us have a given existence that cannot be significantly influenced by social activity,</td>
<td>Believes that society is constructed, everything that is seen and experienced in every society in the world is constructed,</td>
</tr>
<tr>
<td>Original Text</td>
<td>Natural Text</td>
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<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
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<tr>
<td>actors or any form of human intervention.</td>
<td>either mostly or completely depending on the extent of an individual researcher’s beliefs in ‘constructed’ social reality by individuals and groups of people.</td>
</tr>
<tr>
<td>Research should be about developing and testing hypotheses, and that researchers may collect facts and figures from the society as concrete entities – in other words, entities that have some verifiable measure of ‘truth’ about their existence.</td>
<td>Researcher should immerse her/himself in every part of the research as a core element of its research design. This means that the researcher’s personal views of elements of her/his research-for example, her/his choice of literature, data collection and analysis, take center stage in some or all parts of her/his research.</td>
</tr>
<tr>
<td>Results are deduced. The art of deducing outcomes from testing factual data is known as deductive approach. Deductive approach is where researchers begin with abstract ideas and principals then work towards empirical evidence to test the ideas (Laurence, 2012: 33-34).</td>
<td>Findings are interpreted by relating data with literature. The approach to interpreting the findings by seeking to closely relate the data with the literature constitutes what is known as an ‘inductive’ process. Inductive process is where hermeneutic researchers make inferences from their knowledge of their research data and literature in presenting a convincing interpretation of their phenomenon. In this approach data is collected and an attempt is made to identify a pattern or recurring uniformities within the data.</td>
</tr>
</tbody>
</table>
Research which is about developing and testing hypothesis is compatible with quantitative research methodology.

Research which is about interpreting the findings by seeking to closely relate the data with the literature is compatible with qualitative research methodology.

The major difference between the two ontologies is that the objectivists will seek to confirm or reject the hypothesis which they have tested, while the constructivists will be interested in exploring elements of the chosen phenomena, some of which may have emerged from the research.

### 3.2 EPISTEMOLOGY.

Epistemology is about “how we know what we know” (Crotty, 1998:8). It is the basis of our knowledge about society, organizations, culture etc. (NG and Coakes, 2014). Epistemology is concerned with providing a philosophical grounding for deciding what kinds of knowledge are possible and we ensure it is adequate and legitimate (Maynard, 1994). Epistemology is related to ontology “the study of being” (Crotty, 1998:10). Crotty notes that an ontological stance implies a particular epistemological stance and vice versa. NG and Coakes (2014), point out that recognizing your epistemology – which is shorthand for ‘where you got your facts from’ – before you embark on your research will guide how you collect and analyze your data, most importantly how you will interpret your findings. Two possible sources of your knowledge are either positivism or interpretivism.

Positivism is the epistemology of objectivism. Where objectivists believe that most, if not all, objects we see around us have a given existence that cannot be significantly influenced by
social activity, actors or any form of human intervention. The basis of this belief in positivism suggests that research should be about developing and testing hypothesis, and that researchers may collect facts and figures from the objects of research that exist as concrete entities – in other words, entities that have some verifiable measure of ‘truth’ about their existence.

Interpretivism is the epistemology of constructivism. In social research, an interpretivist epistemology requires the researcher to immerse him/herself in every part of his/her project as a core element of its research design. By ‘immerse’ we mean that the researcher’s personal views of elements of his/her project – for example, her/his choice of literature, data collection and analysis – take centre stage in some or all parts of his/her project. Instead of studiously omitting the researcher (him/herself) from his or her research, as an interpretivist, the researcher has a critical role in interpreting and presenting his/her data in his/her own way, being well-informed and telling an original, interesting story (NG and Coakes, 2014).

As already mentioned above, a key difference between the two epistemologies is that in a positivist study the researcher will wish to seek confirmation or rejection of the hypothesis which he/she has tested, while interpretivist researchers will be interested in exploring elements of the chosen phenomenon, some of which may have emerged from the research.

In light of the above, a social constructivist stance is adopted in this research study. This stance is in line with what this study is all about, i.e. exploring the mothers’ emotional experiences of child defilement by a church leader. This requires the researcher to actively participate in the whole process of the research study. In this study, the role of the researcher was active and participatory. The researcher interacted with the mothers affected by child defilement and interviewed them within their setting. The researcher attempted to develop a close relationship with the affected mothers, since the existence of such relationship was key to successful data collection. The social constructivist stance also afforded the affected mothers an opportunity to construct their own reality as they each viewed it. Social
constructivism maintains that meaning is not discovered but constructed (Clotty, 1998). The mothers were able to construct the meaning that they had about child defilement. The social constructive stance helped the affected mothers to deconstruct their negative perception on child defilement and replaced it with a positive perception (Pollard, 1997:44).

NG and Coakes (2014), point out that a research stance will determine a research methodology to be employed in a research study. As highlighted in the table above, an objectivist research stance is compatible with a quantitative methodology, while a constructivist research stance is compatible with a qualitative research methodology. Since a constructivist research stance had been adopted in this research study, a qualitative research methodology was employed. This methodology is expanded upon in the section below.

3.3 RESEARCH DESIGN.

A research design can be regarded as an arrangement of conditions for collection and analysis of data in a manner that aims to combine relevance with the research purpose. It is a conceptual structure within which research is conducted (Kombo & Tromp, 2013). It constitutes the blue print for the collection, measurement and analysis of data (Kothari, 2003). It also discusses the research sample and ethical issues pertaining to the research to be conducted.

3.4 QUALITATIVE RESEARCH.

As mentioned above, qualitative research methodology is employed in this research study. This is in order to enable the researcher to understand the social constructions of mothers and how they experienced the disclosure of defilement of their children by a church leader.

Qualitative research seeks to describe and analyze the culture and behaviour of humans and their groups from the point of view of those being studied (Kombo and Tromp, 2013). Qualitative research uses the natural setting, for instance, a community setting. Qualitative
research relies on a research strategy that is flexible and interactive. This includes interviewing, focus group discussions and questionnaires. In qualitative research, feelings and insights are considered important (Orodho and Kombo, 2002). Sometimes qualitative research is called naturalistic inquiry or field studies (Kombo and Tromp, 2013).

Neuman, (2000), points out that qualitative research is focused more on authenticity than validity. ‘Authenticity means giving a fair, honest and balanced account of social life from the point view of someone who lives it every day’. Neuman continues to say that qualitative research is more concerned with giving a candid portrayal of social life that is true to the experience of people being studied. To be faithful, qualitative researchers adhere to the core principal of validity (in other words to avoid false or distorted accounts). Qualitative researchers want to be consistent in how they make observations, which is similar to the idea of stability and reliability (2000: 171).

Neuman’s theory is in line with the focus of the Phenomenological research method which emphasizes the interpreting of an experience or fact, by listening to the different stories of the participants. The method examines the phenomena through the subjective eyes of the participants. “Phenomenology (is) focused on the subjectivity of reality, continually pointing out the need to understand how humans view themselves and the world around them” (Willis, 2007:53). Willis further points out that research conclusions do not investigate, for example, the holocaust as a phenomenon, but rather the experiences of the participants as they participated in that phenomenon, which in turn allows a deeper understanding of the phenomenon through examination of those experiences. “The focus is thus on understanding from the perspective of the person or persons being studied” (Willis, 2007:107).

The above mentioned was helpful to this research because it aimed at entering into the world of the mothers affected by child defilement with the aim of understanding child defilement
from their perspective. The research also aimed at understanding the mother’s experiences and feelings following disclosure of defilement of their children by church leaders.

Qualitative research always begins with the theory on the ground. This is referred to as ‘Grounded Theory’. Grounded theory is a qualitative research method that was originally developed in the 1960s by two leading sociologists, Glazer and Strauss (Creswell, 1998; Trochim, 2001). According to Grove, ‘grounded theory is an inductive research technique. It means that the theory developed from the research is based on, or has its roots in, the data from which it was derived’ (2005:57). This mode of inductive analysis can be thought of as a theory that is derived from or ‘grounded in’ daily experiences.

Grounded theory aims to conceptualize understanding through using empirical data. In a way, grounded theory involves the process of retrospectively formulating new hypotheses to fit the data. This theory, or mode of analysis, attempts to create a new understanding based on the actual experience and perceptions of the participants on the ground. The evolving theory hopes to both add to the existing body of knowledge and practice, and serve as a basis for further research.

Strauss and Corbon (1996) point out that in grounded theory the researcher does not begin a project with a preconceived theory in mind, the researcher begins with an area of study that allows theory to emerge from available data. Creswell, (2007), calls it a researcher’s bias when the researcher begins a project with a preconceived theory in mind. A researcher’s bias regarding the phenomenon being studied could lead to a misinterpretation of the data and erroneous conclusions, regardless of the detail and thoroughness of the research. As difficult as it may be, researchers must attempt to limit their personal bias and approach the phenomenon with an open mind (Creswell, 2007: 59-60).
In line with the above, the researcher in this study attempted to approach the question of child defilement with an open mind. The reality of child defilement as experienced by mothers was seen as the source of theory formulation, where the theory was generated from data or evidence collected from the participants or interviewees, rather than from preconceived theories or hypotheses.

Neuman, (2000), points out that the difficulty with qualitative research is that it often studies processes that are not stable over time and there is an emphasis on the value of changing or developing interaction between the researcher and what he or she studies. In qualitative research the subject matter and a researcher’s relationship to the subject matter is a growing, evolving process. Different researchers or researchers using alternative measures will get distinctive results, and this is because data collection is seen as an interactive process. Data collection occurs in an evolving setting and the setting’s context dictates using a unique mix of measures that cannot be repeated. The various measures and interactions with different researchers are beneficial because they highlight different facets or dimensions of subject matter.

According to Mason, (2006), the methods of data generation used in qualitative research are flexible and sensitive to the social context in which data is produced. Qualitative research locates the observer in the world. It consists of a set of interpretive material practices that make the world visible (Denzin & Lincoln, 2000). Qualitative research offers opportunities to develop an analytical perspective that speaks directly to the practical circumstances and processes of everyday life (Miller, 1997).

The above mentioned makes qualitative research appropriate in this study as it supports the constructivist stance discussed earlier in this chapter. The flexibility and sensitivity with which data is collected in qualitative research makes it important in this study as the topic of
child defilement by a church leader is a sensitive issue for the affected mothers and the church at large.

An exploratory research design was used in this research study. Babbie, (2007), points out that exploratory research is used when problems are in a preliminary stage. Exploratory research is used when the topic or issue is new and when data is difficult to collect. Exploratory research is flexible and can address research questions of all types (what, why, how). Exploratory research is often used to generate formal hypotheses. An exploratory research project is an attempt to lay ground work that will lead to future studies, or to determine if what is being observed might be explained by a currently existing theory. Most often, exploratory research lays the initial ground work for future research (education-portal.com/academy). According to Babbie, (2007), explorative studies are most typically done for three purposes: firstly, to satisfy the researcher’s curiosity and desire for better understanding; secondly, to test the feasibility of undertaking a more extensive study. Lastly, to develop the methods to be employed in any subsequent study. Bless and Higson-Smith, (2000) state that the purpose of explorative research is to gain a broad understanding of a situation, phenomenon, community or person. In this research study, the researcher was interested in understanding the experiences and difficulties that mothers went through following disclosure of defilement of their children by church leaders.

The study was guided by Gerkin’s methodology of shepherding, and augmented by Waruta and Kinoti’s work, Pastoral Care in African Christianity and the work of Pollard as explained in his evangelism method of positive deconstruction. These are discussed later in this study. The researcher uses these sources complementarily to buttress each other and enhance the researcher’s understanding of the type of pastoral care which is needed by mothers affected by child defilement. However, Gerkin’s work is central given that with generative wisdom,
Gerkin moves beyond the predominance of the psychotherapeutic paradigm in pastoral care to a dynamic, interactive process which balances faith, culture, community, and individual well-being. Furthermore, Gerkin comes across as deeply sensitive to both individual and community dimensions through his quadrilateral nexus of tradition, individuals and family, community, and the cultural context. In terms of pastoral care, Gerkin offers a solid bridge to the 21st century in his work, An Introduction to Pastoral Care.

3.5 DATA COLLECTION.

In research, the term ‘data collection’ refers to gathering specific information aimed at proving or refuting some facts. In data collection, the researcher must have a clear understanding of what he hopes to obtain and how he hopes to obtain it. In data collection, the researcher must have a clear vision of the instruments to be used, the respondents and the selected area. Data collection is important in research as it allows dissemination of accurate information and the development of meaningful programs (Kombo & Tromp, 2013).

In this research study, the researcher used semi-structured interviews to collect data from the respondents, in this case the mothers affected by child defilement. Semi-structured interviews ensure that some consistency is maintained between interviews, as a number of pre-formulated open questions are asked, usually in a set order (NG and Coakes, 2014). Berg, (2001), states that in the semi-structured interviews, the questions are typically asked of each participant in a systematic and consistent order. The interviewer is allowed freedom or is permitted to probe far beyond the answers to their prepared questions. According to Bless & Higson-Smith, (1995), semi-structured interviews are considered helpful in exploratory research and pilot surveys as they allow for the discovery of new aspects of the problem by investigating in detail some explanations given by participants. They further state that ‘the semi-structured interviews allow for the discovery of new aspects of the phenomenon and for the investigation of the detail given by the respondents’. (1995:110).
A one-to-one semi-structured interview was employed to collect data from the mothers affected by child defilement. Questions used were largely open ended to allow the mothers as much freedom of expression as possible within the limits of the goal of the interview. (See appendix A for the interview guide used by the researcher). The following advantages of an interview as mentioned by Bailey (1994:175) were important in this study:

- The interview had to be flexible. Although an interview schedule had to be used for this study, the researcher could probe the respondent for the correct answer, could repeat or explain questions if they were not understood, could change the order of the questions to allow the respondent the most possible freedom of expression and could decide, during the interview, whether the questions were appropriate in the specific context.

- The interviewer had control over the completeness of the answers and was able during the interview, to evaluate whether the data collected was sufficient.

- Spontaneous answers or the relation of experiences were accommodated and contributed to the richness of the data.

Individual interviews were conducted at the Co-ordinated Response Center (CRC) in Lusaka the capital city of Zambia. This centre, which deals with cases of gender based violence and child defilement, was established to provide under one roof the psychosocial counsellor, social welfare personnel, police victim support unit and paralegal assistance. This has an advantage to the victims as it does not just reduce the movements that they have to undertake but also reduces the stress as they are able to obtain requisite services within one location. It was easy to access the mothers affected by child defilement through the centre due to the fact that it had case records of child defilement perpetuated by church leaders. The social welfare officer at the center arranged appointments for the researcher with the mothers affected by
child defilement by a church leader. The officer was able and willing to identify the mothers and make arrangements for interviews because the researcher had informed her of the purpose and the aim of the intended study. The identified mothers also had no problems with coming to the CRC to be interviewed by the researcher due to the fact that letters of invitation were written to them, detailing the purpose of the study and requesting their voluntary participation. The letter also addressed the ethical issues of confidentiality and anonymity, assuring them that both will be upheld in the final data report.

The letter contained the following information:

- The topic of the research
- The aims and objectives of the study
- The guarantee that the researcher would maintain confidentiality and anonymity

Before commencement of the interview, this letter of invitation was signed by each identified mother and the researcher. (See appendix C for the invitation letter used).

The interviews commenced with the researcher reminding the respondents (mothers) about the topic of the study. The interview was about the mother’s experience following disclosure of child defilement by a church leader. The researcher did not use an audio tape recorder to capture data during the interview. This was because all the respondents refused when the researcher requested for permission to use it before starting the interview. In view of this, data was just collected by taking notes during the interview. To confirm the accuracy and understanding of the feedback, the researcher reframed the respondents’ answers. Care was taken not to change the meaning to the answers given by the respondents.
3.5.1 Sampling.

Sampling is the procedure a researcher uses to gather people, places or things to study. It is a process of selecting a number of individuals or objects from a population such that the selected group contains elements representative of the characteristics found in the entire group (Orodho and Kombo, 2002). Webster, (1985), states that a sample is a finite part of a statistical population whose properties are studied to gain information about the whole. While Kombo and Tromp, (2013), indicate that when dealing with people, it can be defined as a set of respondents (people) selected from a larger population for the purpose of a survey.

In this study, purposive sampling was employed as a way of selecting respondents to the study. In purposive sampling, the researcher purposely targets a group of people believed to be reliable for the study (Kombo and Tromp, 2013). Neuman, (1997), states that purposive sampling is appropriate in the following three situations:

1. Firstly, when the researcher uses it to select unique situations that are especially informative;
2. Secondly, purposive sampling may be used by a researcher when he/she wants to select members of a difficult-to-reach specialized population, and
3. Thirdly, purposive sampling may also be used when the researcher wants to identify particular types of cases for in-depth investigation. The researcher uses his/her judgment to select the participants.

In this study, mothers affected by child defilement were selected by the researcher in conjunction with the social welfare officer of the Co-ordinated Response Center. The officer played a key role in identifying the mothers and making arrangements for interviews with the researcher. The criteria for selecting the mothers was as follows:

- the biological mother of a defiled child
- the mother’s age must be between 20 to 55 years
- the mother must have known of the defilement for one year
- the defilement was reported to them by their defiled child
- the child must have been defiled by a church leader (pastor, church elder, Sunday school teacher, catechumen class teacher)
- the defiled child should be aged between 0-16 years.
- a mother who has the intellectual, emotional and physical ability to talk about her experiences.

Eight (8) respondents were selected and interviewed until the saturation point of new information was reached. A saturation point is the point in data collection when no new or relevant information emerges with respect to the newly constructed theory. Hence, the researcher looks at this as the point at which no more data needed to be collected (Saumure & Given, 2008).

The defiled children and the church leaders as perpetrators were not part of the sample because of the following reasons:

- The interviews aimed at establishing how mothers experienced the defilement of their child by a church leader.
- Interviewing the defiled children was going to bring back memories of the abuse to them. This would have re-traumatized them.
- The area of child defilement by church leaders is very sensitive for the church and the church leaders. The church leaders who are perpetrators may refuse to be interviewed and to respond to the questions.
3.5.2 Pilot Study.

Kombo and Tromp, (2013), state that before collecting data, the researcher should pre-test the research instruments. A pre-test is a pilot study. The researcher should pilot the questionnaire with a small representative sample. A pre-test of the questionnaire and field procedures is the only way the research can find out if everything ‘works’ particularly the research instruments. This is because it is rarely possible for the researcher to foresee all the potential misunderstandings or biasing effects of different questions and procedures. A pilot study helps test the feasibility of the study techniques and to perfect the questionnaire concepts and wording. They further state that, ‘While piloting the researcher should address the following issues:

- Are the questions measuring what they are supposed to measure-the researcher should analyze each answer and see if it is supplying the appropriate information.

- Is the wording clear? The researcher should analyze the responses to find out if there was any confusion in the way questions were interpreted by all the respondents.

- Do the questions provoke a response? If some questions have been omitted, the researcher should find out why.

- Is there researcher bias? The researcher will analyze whether the questions asked were skewed towards certain issues more than others.’ (2013:90).

Strydom and Delport also point out that, ‘the function of a pilot study in a qualitative study is mainly to:

- Ascertain certain trends in a proposed study.

- Determine if a study is feasible and data can be obtained.

- Test correctness of concepts.
- Focus on areas in order to redefine the interview schedule.
- Improve the reliability of the study.
- Foresee problems in data collection.
- Estimate the time and costs of the study. (2002:337).

With the above in mind, a pilot study for this research study was undertaken at the same center where the interviews of the actual sample for this study were conducted. The officer at the Co-ordinated Response Center helped in identifying the mothers for the pilot study. Three mothers were selected for the pilot study. These mothers were not included as subjects in the actual sample. The semi-structured interview schedule was tested and discussed with the three mothers to ensure that the best results would be obtained. During the interview, the researcher noticed that some answers from all the three mothers were not supplying the appropriate information. This was because some words in the sentences were difficult for the mothers to understand. The following were the words which were difficult for the mothers to understand: defilement, trauma, impact and survey. When these words were simplified or translated into the local chewa language, the researcher noticed that the mothers gave answers which were supplying appropriate information required for this study. The interview schedule was revised into a simple English language which was easy to understand. A translated chewa version was also developed without losing the meaning of the English version for the sake of the respondents who may not have understood even the simple English language. (See appendix B for the translated interview schedule).

3.5.3 Research site.

The selection of a research site is essential. It influences the usefulness of the information produced. The idea is to start with a larger population and through progressive elimination, end up with the actual site where data is collected (Orodho and Kombo, 2002).
The study was carried out in Lusaka, Zambia. Purposive sampling was used to select the Lusaka district as the study site since it has the highest number of defilement cases in Zambia. For example, the University Teaching Hospital (UTH), the biggest hospital in Zambia reported recently that the number of cases of defilement being recorded has been on the increase and that now it’s an everyday situation especially among girls between the ages of 12 and 14 years. Between January and August 2014 the hospital recorded 796 defilement cases (Daily Mail, Nov 7, 2014). This report is in line with the researchers finding during interviews with the UTH and the police who both said that they see at least three victims of defilement every day, which would bring the total to 1,095 cases in a year.

3.5.4 Population.

A population is a group of individuals, objects or items from which samples are taken for measurement. Population refers to an entire group of persons or elements that have at least one thing in common. Population also refers to the larger group from which the sample is taken. It is important for the researcher to find out as much as possible about the study population. This includes some of the overall demographics such as age, gender and class of the population. The greater the diversity and differences that exist in the population, the larger the researcher’s sample size should be (Kombo and Tromp, 2013).

The subjects of this study were drawn from around Lusaka, Zambia. They were identified by the researcher in conjunction with the social welfare officer of the Co-ordinated Response Center. The subjects were mothers with the following properties:

- Mothers in the age group of between 20 to 55 years
- Formally employment and small scale business women.
- Devoted Christians belonging to different denominations (Roman Catholic Church, Reformed Church in Zambia, United Church of Zambia and Pentecost Assemblies of God).

- Married and single mothers. This is because both the married and single mothers were affected by child defilement perpetuated by a church leader.

3.5.5 Ethical Issues.

In this study, certain ethical issues were of particular importance given the sensitive nature of the research topic. It was very important that the research participants’ anonymity was protected throughout the research. This was done by not publishing or linking their names or identifying their details to specific outcomes in the study. The researcher ensured that interview notes were kept in his office. The Information which was recorded in writing and presented in this study was recorded in writing after obtaining permission from the respondents. This information was according to the content of the information and was not linked to the specific mothers or to the places where they came from or where they were interviewed. This ensured their anonymity. All the interviews were done in private. The researcher was sensitive to the welfare of the respondents, the community to which they belonged and their voluntary participation and confidentiality. The nature of this study was to research real and honest experiences of respondents. Therefore, the researcher endeavored to provide a true reflection of the data.

3.5.6 Data Analysis.

Data analysis refers to examining what has been collected in a survey or experiment and making deductions and inferences. It involves uncovering underlying structures, extracting important variables, detecting any anomalies and testing any underlying assumptions. It
involves scrutinizing the acquired information and making inferences (Kombo and Tromp, 2013).

In qualitative research, analysis of data varies from simple descriptive analysis to more elaborate reduction and multivariate associate techniques. The analysis will vary with the purposes of the research, the complexity of the research design and the extent to which conclusions can be reached easily (Orodho and Kombo, 2002:116).

In qualitative research designs, the researcher should decide before going to the field, how he/she will analyze the data. The analytical technique will determine the recording style that will be used during data collection exercise (Kombo and Tromp, 2013). The following are some of the analytical techniques used in qualitative research:

- A Quick Impression Summary
- Thematic Analysis
- Content Analysis

Analytical techniques are explained below as described by Kombo and Tromp, (2013).

3.5.6.1 Analytical Impression Summary.

In qualitative research, data can be analyzed by a quick impression summary. This involves the following:

- Summarizing key findings. For example in focus group discussions the researcher notes down the frequent responses of the participants on various issues.
- Explanation.
- Interpretation and conclusion.
This rapid data analysis technique is mainly used in situations that require urgent information to make decisions for a programme, for example, in places where there is an outbreak such as cholera and vital information is needed for intervention. The technique can also be used when the results already generated are obvious, making further analysis of data unwarranted. For example if a researcher finds out that 80% of respondents give similar answers to what caused a fire outbreak doing further analysis may be unwarranted. This form of analysis does not require data transcription. The researcher records key issues of the discussion with respondents. A narrative report is written which is enriched with quotations from key informants and other respondents.

3.5.6.2 Thematic Analysis.

In qualitative research, data can also be analyzed thematically. Themes refer to topics or major subjects that come up in discussions. This form of analysis categorizes related topics. In using this form of analysis major concepts or themes are identified. In this form of data analysis, the researcher does the following:

- Peruses the collected data and identifies information that is relevant to the research questions and objectives.

- Develops a coding system based on samples of collected data.

- Classifies major issues or topics covered.

- Reads the text and highlights key quotations/insights and interpretations.

- Indicates the major themes in the margins.

- Places the coded materials under the major themes or topics identified. All materials relevant to a certain topic are placed together.
- Develops a summary report identifying major themes and the association between them.

- Uses graphics and direct quotations to present the findings.

- Reports the intensity, which refers to the number of times certain words or phrases or descriptions are used in the discussion. The frequency with which an idea or word or description appears is used to interpret the importance, attention or emphasis.

3.5.6.3 Content Analysis.

Content analysis examines the intensity with which certain words have been used. Content analysis systematically describes the form or content of written and/or spoken material. In content analysis a classification system is developed to record the information. In interpreting results, the frequency with which a symbol or idea appears maybe interpreted as a measure of importance, attention or emphasis. The relative balance of favorable attributes regarding a symbol or an idea may be interpreted as a measure of direction or bias. In content analysis, a researcher can be assisted by a trained researcher or a computer programme can be used to sort the data to increase the reliability of the process. Content analysis is a tedious process due to the requirement that each data source be analyzed along a number of dimensions. It may also be inductive (identifies themes and patterns) or deductive (quantifies frequencies of data). The results are descriptive, but will also indicate trends or issues of interest. In content analysis, the first step is to select the data source to be studied and then develop a classification system to record the information. There are various forms of content analysis. These are as follows as described by Orodho and Kombo:

- Pragmatic Content Analysis: Classifies signs according to their probable causes and effects. The emphasis is on why something is said. This could be used to understand people’s perceptions and beliefs.
- *Systematic Content Analysis:* Classifies signs according to meaning.

- *Designation analysis:* determines the frequency with which certain objects or persons, institutions or concepts are mentioned. This is a simple counting exercise.

- *Assertion analysis:* provides the frequency with which certain objectives (persons, institutions) are characterized in a particular way. Such an analysis often takes the form of a matrix with objects as columns and descriptors as rows. (Orodho and Kombo, 2002:119).

In this study, the researcher employed Thematic Analysis as a method of data analysis. In employing this form of analysis, the researcher identified major concepts or themes that came up during the discussions. The themes that were identified came out of the data and were not imposed on the data (Marshall and Rossman, 1995). In this form of data analysis, the researcher did the following as pointed out above.

- Perused the collected data and identified information that was relevant to the research questions and objectives. To make sure that the themes that were identified were derived from the data, the researcher had a second interview with each respondent. The themes identified in the initial interview were revisited with the respondents and they were asked as to whether the themes correlated with what they were expressing in the initial interview.

- Classified major issues or topics covered.

- Reread the text and highlighted key quotations/insights and interpretations.

- Indicated the major themes in the margins.

- Placed the coded materials under the major themes or topics identified. All materials relevant to a certain topic were placed together.
- Developed a summary report identifying major themes and the associations between them.

- Reported the intensity, which refers to the number of times certain words or phrases or descriptions were used in the discussion. The frequency with which an idea or word or description appeared was used to interpret the importance, attention or emphasis.

3.6 **GERKIN’S SHEPHERDING METHOD.**

The data collection technique alone, which has been described above, did not suffice in this research study. This was because it left out the pastoral care element.

This is where Gerkin comes in with his shepherding method of pastoral care. This method is augmented by Waruta and Kinoti’s work, *Pastoral Care in African Christianity* and Pollard with his evangelism method of positive deconstruction. These three methodologies helped the researcher to enter into the lives of the mothers affected by child defilement in Lusaka.

The shepherding motif of pastoral care is captured in the imagery of Psalm 23 where the lord God is depicted as the good shepherd who leads the people in paths of righteousness, restores the souls of the people, and walks with the people among their enemies, and even into the valley of the shadow of death. The way God is depicted as a shepherd in this imagery contrasts with the use of this concept in the Ancient East. There, the title of the shepherd was an honorary title for an Eastern ruler and denoted authority (Beyreuther 1978:565). The Sumerian and Babylonian kings were shepherds, but they exercised this function in a context of status and authority. God was a shepherd too, but in the context of grace, love and faithfulness. The people of the Old Testament knew that they were safe and secure within God’s shepherding care. God’s covenental grace made this care manifest and directed it at Israel, the people belonging to Yahweh’s flock. The covenental congregation becomes God’s flock. (Cf Is 40:11 ‘He tends his flock like a shepherd; He gathers the lamb in his arms and
carries them close to his heart; he gently leads those that have young.’ In the history of Israel, God proved through his pastoral care that He was their God and that He remained faithful to his covenantal promise. ‘You are my sheep, the sheep of my pasture, you are my people and I am your God, declares the Sovereign Lord’ (Ezk 34:31).

During the course of Israel’s history, the shepherd metaphor was also used to describe the Messiah, who acted as God’s Shepherd. The Shepherd metaphor thus fostered the messianic hope and kept it alive: ‘I will place over them one shepherd, my servant David, and he will tend them; he will tend them and be their shepherd’ (Ezk 34:23).

During the New Testament era, Shepherds were regarded with contempt, yet Christ chose this metaphor to express God’s love for sinners. Jesus is the messianic Shepherd who gathers the lost sheep of the house of Israel (Mt 10:6). His compassionate love and mercy are expressed in Mathew 9:36. In order to demonstrate his mercy and love, Jesus had to lay down his life for the sheep (Mt 26:31; Jn 10:11).

Gerkin uses this metaphor (shepherd metaphor) to refer to the pastor in the context of care for the flock of Christ. In his book, An Introduction to Pastoral Care, he says, “more than any other image, we need to have written on our hearts the image most clearly and powerfully given to us by Jesus, of the pastor as the shepherd of the flock of Christ. Admittedly, this image originated in a time and place in which the shepherd was a common place figure, and we live in a social situation in which shepherding is a scarcely known, even marginalized vocation. Nevertheless, the New Testament depiction of Jesus as the good shepherd who knows his sheep and is known by his sheep (John 10:14) has painted a meaningful, normative portrait of the pastor of God’s people. Reflection on the actions and words of Jesus as he related to people at all levels of social life gives us the model sine qua non for pastoral
relationships with those immediately within our care and those strangers we meet along the

In this model, care is viewed as a central metaphor of life in the Christian community. The
pastor is regarded as the shepherd and the Christians as the flock that needs to be cared for.
This methodology needs to be located in the lives of the African people, in this case the
mothers affected by child defilement by a church leader. The researcher, as the shepherd,
needs to utilize this method to help the mothers affected by child defilement cope with any
emotions. These include, feelings of pain and anger, which they may experience as a result of
participation in this research study.

Gerkin draws from Luther’s pastoral care model which concerned itself with the care and
protection of those who were victims of the uncaring practices of their society. Gerkin cites
one of the writings of Luther which highlights the responsibility of the church as entrusted by
the Lord. In one of his writings, Luther states:

Our lord and savior Jesus hath left us a commandment, which concerns all Christian alike,-that we
should render the duties of humanity, or (as the Scripture call them) the works of mercy, to such as are
afflicted and under calamity; that we should visit the sick, endeavor to set free the prisoners, and
perform other like acts of kindness to our neighbor, whereby the evils of this present time may in some
measure be lightened (1997:42).

In the above quote, Gerkin highlights the responsibility of the church, in the light of the
Lord’s commandment, to render duties of humanity to those afflicted and under calamity.

According to Gerkin, Luther’s conception of pastoral care involved a primary concern or
special need, including the victims of ‘the evils of the present time’. Gerkin further states that
pastoral concern has suffered due to the shift to individualism thus left solely to clergy
persons. This is a shift from the emphasis on the priesthood of all believers. The primary
concern for those in need was ‘the responsibility of all Christians and not only the clergy’ (Gerkin, 1997:42).

Gerkin’s approach focusses both on individual and family needs. He points out that pastoral care involves both the care of the Christian community and the care of persons individually, in families, and in larger group relationships (1997:113). Waruta and Kinoti highlight the essence of the communal element while acknowledging the importance and place of the individual counselling. “Counseling in the traditional society takes a communal approach where …the immediate family community is deeply involved. Individual counselling although it has its place, ignores the communal element which is necessary in particularly mediating forgiveness and reconciliation”. (Waruta and Kinoti, 2005:93).

The researcher finds the communal approach to pastoral care to be helpful in African situations which are characterized by strong social structures and shared cultural values. For life and healing in African cultural traditions, the importance of community is seen in the statement made by John Mbiti:

Whatever happens to the individual happens to the whole group, and whatever happens to the whole group happens to the individual. The individual can only say: ‘I am, because we are; and since we are, therefore I am.’ This is the cardinal point in the understanding of the African view of man (Mbiti, 1996: 108).

A key aspect in the African perspective is, therefore, to see every person as a person in a relationship. As a consequence both pain and healing are related to community.

The quote underlines the fact that the individuals’ problems are seen as problems within the family or community group, and any problem is regarded as less important than the security and welfare of the whole community. This means that the sickness of one person affects
everyone in the community and in the family. Effective pastoral care in such a setting should, therefore, not be individually oriented, but should be more of a community oriented activity (Couture & Hunter, 1995). Louw puts it in this way:

For recovery, a pastoral care approach must move away from a one-to-one pastor-patient relationship. An individual approach must be supplemented by group counselling, which must include the family, the social group, and other important figures in the community as part of the therapeutic process. The network of relationships from the sick bed to the family and from the hospital to the community is even more important than the traditional bed side talk with patients (Louw, 1994:27).

A communal approach to pastoral care has been advanced by many African scholars. Tapiwa Mucherera, has argued that therapy or counselling, as taught in the West, will not always suffice in indigenous contexts since these theories tend to promote and focus on individuality, autonomy, and independence. He continues to say that the training of counsellors in indigenous contexts needs to encourage counsellors who will “get off their couch or chair” and into the neighbourhood (Mucherera, 2009: ix). Kyomo, (1997), emphasizes the need to approach pastoral care from the communal perspective and think in line with the people in order to understand their questions and fears. His focus is on developing pastoral competence through affirming cultural identity, African communal understanding and world view. Jackson Anaseli Malewo, (2002), advocates for a dialogical model for pre-marital counselling, based in part, upon the findings of behavioural science and on a contemporary Lutheran theology of marriage. He talks not of the tension between traditional claims and modernity which is creating confusion in the patterns of family life. He also notes a number of vital communal values and caring elements from his own ethnic group. Laurent Magesa, (1997), has a keen appreciation of African traditions’ social support system. In the area of pastoral care and counselling, his knowledge of the African values of promoting life has been applied, particularly in relation to marriage. He, as many of his colleagues, is critical of the
individualism of western Christianity. In line with his ‘inculturation’ program he struggles to
develop workable models for pastoral care. His approach is inductive, a theology ‘from
below’, which makes African culture the subject of pastoral care and counselling. The work
of Makumira professor Madafa Mathias Mndeme fits into an emphasis on culture. He
underlines that deep knowledge of the culture is a pre-condition for any viable attempt to
attune pastoral care to the ear of the people. Counselling ought to be moved from the office to
the family, thereby utilising and empowering the support system of the family community.

The advancement of a communal approach to pastoral care has led to the development of a
pastoral care approach known as a contextual pastoral care approach. This approach draws on
a number of sources, the most important being the family, community and culture surrounding
a person. Listening into the recorded conversation between the parishioner and her/his
counsellor we are listening into the way the counselee and the counsellor perceive the world,
values and meaning. World view, values and meaning are all grounded in the cultural context.
A contextual approach creates new perspectives on pastoral care as an integrated part of
community life. Restoring a person to wholeness would mean to restore the person in
emotional, social and spiritual community (Eide, 2008).

A communal pastoral care approach is in line with the African ways in that people take care
of their fellow members in the community. African societies take care of the members in their
community. Caring for one another in these societies is far more than the work of a single
individual or a professional practitioner. It is a manifestation of Africans’ understanding of
life and living as well as their belief in a morality of good neighborhood (Eide, 2008:35).

In African culture, life is conceived as sacred because of the integrity of the spiritual and
mystical nature of creation. Because of the sanctity of life, the human being, family and
community are defined in terms of solidarity and participation values. The later emphasizes
the central virtues constitutive of unity, that is, pro-creation and sharing in life, friendship, healing and hospitality as one whole (Magesa, 1997). In such cases assisting the poor is a responsibility for all regardless of age, gender and rank, with sanctions from God, divinities, spirits and ancestors. Usually in the African context, assistance, charity and generosity are not a free handout because both the beneficiary and the benefactor observe a sanctioned role to preserve the human dignity of each other in the process.

The corporate mentality of the African world-view is also very elaborate on the issues of health, sickness and healing in society. If one person is sick, the whole kinship is sick because ‘...health is not just about pain, but about mental and spiritual pain of the whole group to which the sick person belongs’. When a person falls sick it is the responsibility of the family, together with the whole community, to take care of the patient. In this way even the healing process is holistic in approach, involving the living and dead relatives through herbal treatment and reconciliation.

Death is a crisis that calls for the participation of all people in society. Sharing the grief by the whole community with the family members is the principal way of caring in Africa. Such caring prevents the loss ‘wounds from becoming more painful and deadly. The bereaved are saved from being crushed by the experience of having lost the beloved one’ (Moila, 2000).

The presence of old people is understood as security in the family because they are believed to be a blessing for their children. Children consider it a privilege and a pride to express their gratitude by caring for their ageing parents. The latter are provided with all the necessities of life and respected by their children.

The researcher needs to utilize the communal approach to pastoral care and the solidarity and participation values which people are identified with in this study, to help the mothers
affected by child defilement and their families to come to terms with any emotions which they may experience as a result of this research study.

However, Gerkin’s shepherding method and Waruta and Kínoti’s communal approach to pastoral care concentrate more on caring and lack a way of therapeutically working with the mothers who are in pain following the disclosure of defilement of their children by a church leader. This is where Pollard helps through the adoption of his method of positive deconstruction. Pollard helps people to deconstruct (that is, take apart) what they believe in order to look carefully at the belief and analyse it. The process is ‘positive’ because this deconstruction is done in a positive way in order to replace it with something better. In his book ‘evangelism made slightly less difficult’, Pollard states that, “The process of positive deconstruction recognizes and affirms the elements of truth to which individuals already hold, but also helps them to discover for themselves the inadequacies of the underlying world view they have absorbed. The aim is to awaken a heart response that says, ‘I am not so sure that what I believe is right after all. I want to find out more about Jesus.’ At last they are taking their first steps along the road towards faith in Christ.” (1997:44).

The researcher believes that this method of evangelism can be helpful to the mothers affected by the disclosure of child defilement by a church leader to positively deconstruct their perception of child defilement and find healing. However, Pollard’s method of deconstruction was used to support Gerkin’s method of shepherding.

Gerkin brings to our attention models of pastoral care practices from times gone by. Pastoral counselling, as a ministry of the church, illustrates the contours of the paradigm for the field of pastoral care. This has been evident in the prophetic, priestly and wisdom models of pastoral care. While the focus may be somewhat different, the underlying common factor in the three models is such that we are called to care not only in a Christian way but also
pastorally. “The prophetic, priestly, and wisdom caring ministry we inherit from the Israel community are not, to be sure, the only biblical images with which we pastors have to identify. Another, in certain ways more significant model, is that of the caring leaders as shepherds”. (Gerkin, 1997:27). The shepherding model of Gerkin, which is central to this research, speaks of the care of God to Israel, God’s chosen people. As already mentioned earlier in this chapter, this motif is most clearly captured in the imagery of Psalm 23. Here the Lord God is depicted as the good shepherd who leads the people in paths of righteousness, restores the souls of the people, and walks with the people among their enemies, and even into the valley of the shadow of death (Gerkin, 1997:27). In this imagery, the psalmist highlights the goodness of the Lord God. This goodness is elaborated upon in psalms 23:2, “He lets me rest in green meadows; he leads me beside peaceful streams.” This goodness of the lord is also seen in the book of Revelation, “They will never again be hungry or thirsty; they will never be scorched by the heat of the sun. For the lamb on the throne will be their shepherd. He will lead them to springs of life-giving water. And God will wipe every tear from their eyes.” (Rev. 7:16-17). (Again covering ground previously covered)

Both the Old Testament and the New Testament make reference to the role of the shepherd. In Ezekiel 34:11-16, the Sovereign Lord says, “I myself will search and find my sheep. I will be like a shepherd looking for his scattered flock. I will find my sheep and rescue them from all the places where they were scattered on that dark and cloudy day. I will bring them back home to their own land of Israel from among the peoples and the nations. I will feed them on the mountains of Israel and by the rivers and in all the places where people live. Yes, I will give them good pasture land on the high hills of Israel. There they will lie down in pleasant places and feed in the lush pastures of the hills. I myself will tend my sheep and give them a place to lie down in peace, says the Sovereign Lord. I will search for my lost ones who stray away, and I will bring them safely home again. I will bandage the injured and strengthen the
weak. But I will destroy those who are fat and powerful. I will feed them, yes-feed them justice!” (34:11-16).

Isaiah points out that, “He will feed his flock like a shepherd. He will carry the lambs in his arms, holding them close to his heart. He will gently lead the mother sheep with their young.” (Isaiah, 40:11).

The above quote challenges the church leaders to love, care and guide the mothers affected by child defilement in their churches and surrounding communities.

In the New Testament, the shepherd metaphor is depicted in what Jesus says about himself,

“I am the good shepherd. The good shepherd sacrifices his life for the sheep. A hired hand will run away when he sees the wolf coming. He will abandon the sheep because they don’t belong to him and he isn’t their shepherd. And so the wolf attacks them and scatters the flock. The hired hand runs away because he is working only for the money and doesn’t really care about the sheep. I am the good shepherd; I know my own sheep, and they know me, just as my father knows me and I know the father. So I sacrifice my life for the sheep. I have other sheep, too, that are not in this shepherd. I must bring them also. They will listen to my voice, and there will be one flock with one shepherd.” (John 10:11-16).

The shepherd tends the flock, not only by feeding, but also offering the care, guidance, and protection which a shepherd extends to the flock. It is the responsibility of the pastor to care, guide and protect the flock which is entrusted to him/her.

The above quotes provide a great challenge to pastors who have mothers affected by the disclosure of child defilement by church leaders in their congregations. The question to ask is: how do they, themselves, relate to these women the fact that the perpetrators are their fellow
church leaders? How do they help them to overcome the pain and anger caused by the defilement of their children? How do they connect their ministry to that of Jesus Christ?

Gerkin’s shepherding model emphasizes the role of the pastor in addressing the emotions which include feelings of pain, anger and hate which are experienced by mothers affected by the disclosure of child defilement. Gerkin points out that, “Although the emphasis has fluctuated from time to time, the ordained pastor’s care for individuals has usually been given a dominant emphasis. Furthermore, in the recent history of pastoral care, in large part because of the influence of individualism and psychotherapeutic psychology, the organizing conceptualization of pastoral care has focused on the individual care of the pastor for the individual person.” (Gerkin 1997:92).

The above quote opens up a way of caring by challenging the pastors to emphasize caring for individuals experiencing emotional pain and anger in their pastoral ministry. It shows that it is the responsibility of the pastors to care for individuals, in this case mothers, affected by child defilement as an important component of their ministry.

Gerkin’s model of shepherding connects well with the ministry of Jesus Christ which was characterized with compassion. Repeatedly Jesus sensed compassion in the face of ignorance, hunger, sickness, and even death. He was gripped by compassion when he saw the aimlessness of the common people as “sheep without a shepherd” (Mt 9:36; Mk 6:34), the sick and the blind among the multitude (Mt 14:14; 20:34), and the sorrow of those who had lost the loved ones (Lk 7:13; Jn 11:35). Jesus Christ’s compassion also expressed itself in practical ministry. Out of compassion, he raised the dead (Lk 7:14), taught the multitudes (Mark 6:34), and healed the sick (Mt 14:14; 4:23; 9:35; 19:2). In ministering to the needy, Jesus Christ was not afraid to make physical contact. He took the hands of the sick (Mk 1:31; Mt 9:29), and the demon possessed (Mk 9:27). His fingers touched the blind eyes (Mt 20:34),
deaf ears (Mark 7:33), and silent tongues (Mark 7:33). Most astonishing of all Jesus touched the lepers – the outcasts of his day (Mt 8:3); (Lk 5:12-13).

The above examples present a potent model to be followed by pastors. The manner in which the pastors respond to the challenge of child defilement is an indication of the seriousness with which they follow the example of Jesus Christ. A response of love and compassion is demanded of God’s people. It is a mandate, expressly of Jesus Christ, as shown in the above examples. Compassion is, indeed, a first call of God’s people in the crisis created by child defilement.

Gerkin draws to our attention that “we need to have written on our hearts the image most clearly and powerfully given to us by Jesus, of the pastor as the shepherd of the flock of Christ. The New Testament depiction of Jesus as the good shepherd who knows his sheep and is known by his sheep (John 10:14) has painted a meaningful, normative portrait of a pastor of God’s people. Reflection of the actions and words of Jesus as he related to people at all levels of social life gives us the model sine qua non for pastoral relationships with those immediately within our care and those strangers we meet along the way.” (Gerkin, 1997:80).

In light of the above quotes, and employing the shepherding model, the researcher aimed at helping the mothers to come to terms with the effects of disclosure of the defilement of their children by church leaders.

3.7 PRELIMINARY CONCLUSION.

The reader would realize by now how important Gerkin’s pastoral care model is in empowering the mothers affecting by child defilement to come to terms with the effects of the defilement. The stories of three mothers which are shared in chapter five of this research study will help us in exploring the effects on mothers of child defilement by a church leader.
The love and the care contained in Gerkin’s pastoral care model will help in responding to these effects and thereby bring healing to the affected mothers. In the next chapter, the researcher will analyze the issue of child defilement, its impact on the mothers affected by child defilement by a church leader. The chapter will finally share how child defilement affects the community at large as Mbiti has shared in this chapter “I am because we are, and since we are, therefore I am.” (Mbiti, 1996: 108).
CHAPTER FOUR

Exploring the reality of defilement

This chapter is divided into two sections. The first section describes what defilement is in accordance with the understanding of the Zambian context and law. In this section, forms and types of child defilement are also discussed in reference to the available literature.

The second section reflects upon the empirical data of the interviews which were conducted with the mothers affected by child defilement. This includes their different responses and attitudes after disclosure of child defilement by a church leader. Notes were taken as the mothers narrated their experiences. To confirm the accuracy and understanding of these experiences, the researcher reframed what the mothers narrated. An interview guide was utilized, and is attached as appendix ‘A’.

4.1 DEFINITION OF DEFILEMENT.

Child sexual abuse is called ‘defilement’ in the laws of Zambia. To defile is to make dirt, to physically soil, to figuratively tarnish, to morally corrupt, to deprive of chastity (Garner, 1968). As regards the noun defilement, it is defined as an act of defiling, a condition of being defiled (Garner, 1968). It is to damage or make unclean (Fowler H. W. and Fowler F.G., 1995), to take away something (Matakala, 2012). The connotation thereof is that a defiled child is impure, damaged and unclean. The effect of using the term ‘defilement’ in law is that the child is punished twice: first by being sexually abused and second by being labelled unclean (Matakala, 2012). Thus the physical violation of the child’s body and human rights is actually kept alive by its name in law. Article 39 of the Convention on the Rights of the Child (CRC) provides that,
State parties shall take all appropriate measures to promote physical and psychological recovery and social reintegration of a child victim of …any form of neglect, exploitation, or abuse; torture or any other form of cruel, inhuman or degrading treatment or punishment … Such recovery and reintegration shall take place in an environment which fosters the health, self-respect and dignity of the child.

The term ‘defilement’ and its effect goes against Article 39 of the CRC as it flies in the face of the child’s psychological recovery and social reintegration in society. In order for Zambia to abide by this obligation and avoid the negative effect described above, Zambia will have to amend her laws and use the term ‘child sexual abuse’ as opposed to ‘defilement’.

The researcher is in agreement with Matakala when she says that if the term ‘defilement’ is removed from the law and replaced with sexual abuse, it is highly likely that the stigmatization that the sexually abused children are currently facing will be reduced, and more cases of child defilement will be reported and therefore filter into the formal system which better protects the rights of the children (Matakala, 2012).

Defilement is a very serious and common offence in Zambia as has been seen from the many reports on child defilement from the media in chapter one of this research study. The law that creates the offence of defilement was first enacted in 1931 in the then Northern Rhodesia when the penal code was enacted for the first time (An act to establish a code of criminal law, November 1931). Since its enactment, the law of defilement in Zambia has undergone several amendments. In 1933, there was an amendment which changed the age limit of defilement from twelve to sixteen. This was effected by amendment No. 26 of 1933 (section 119 (1) of the penal code). Sixteen has remained the age limit to date. Further amendments were effected in 1941 by amendment No. 25 of 1941 which provided for a sufficient defence to a charge of defilement if a person charged believed the girl was of or above the age of sixteen. The penal code as amended by act No. 15 of 2005 imposes severe penalties for defilement and other
offences that fall under it, for example, a person who has unlawful carnal knowledge of an underage child is liable upon conviction to a term not less than fifteen years and may be liable to imprisonment for life (section 138 of the penal code as amended).

Defilement is a felony. Felonies are treated as serious offences (Kulusika, 2006). This felony according to section 138 of the penal code as amended provides:

- Any person who unlawfully and carnally knows any child commits a felony and is liable upon conviction to a term of imprisonment of not less than fifteen years and may be liable to imprisonment for life.

- Any person who attempts to have carnal knowledge of any child commits a felony and is liable upon conviction to imprisonment to a term of not less than fifteen years under the age of sixteen years is guilty of a felony and is and not exceeding twenty years.

- Any person who prescribes the defilement of a child as a cure for an ailment commits a felony and is liable, upon conviction to imprisonment for a term of not less than fifteen years and may be liable to imprisonment for life.

- A child above the age of twelve years who commits an offence under subsection (1) and (2) is liable, to such community service or counselling as the court may determine in the best interest of the child.

Defilement is applicable to both boys and girls under the age of sixteen years. In the repealed section 138 of the penal code, defilement only applied to girls below the age of sixteen, this was the position. A child under the Act means a person below the age of sixteen years. There is no specific sex mentioned, so it cuts across both sexes.
As seen from the above amended law, a victim of defilement is a child below the age of sixteen. These victims are the people who best understand the real effect of defilement. Therefore, we can deduce that defilement has a direct and potentially permanent impact on the victim’s self-esteem. The impact is even greater when the offender is someone trusted and respected by the victim.

As seen from the law above, a victim of defilement can either be a boy or girl. This means that a male child can indeed be a victim of defilement at the hands of an adult. But it is important to note that the violence is more common against a girl child.

Defilement of a child does not exist in isolation but is usually accompanied by force, which leaves painful cuts on the child’s private parts. Often defilement involves relatives, married men or professional people in the community. Worse still, some men defile their own daughters. Defilement can lead to infertility, trauma, contraction of HIV and AIDS, terminal illness or even death. Defilement also affects the child’s future development, unwanted illegitimate children, promiscuity, prostitution, seductive behaviour directed towards members of the opposite sex (Chulu, 2001). Defilement also leads to school dropouts, this means that their lives could be disrupted (especially school life) making the whole idea of women’s emancipation a fallacy (Chulu, 2001).

As mentioned earlier in chapter one of this research study, the term ‘defilement’ is not unique to Zambian law. Uganda and Ireland are some of the countries that also have it in their statute books. Defilement under the laws of Uganda is defined as having sexual intercourse with a girl who is below the age of eighteen years. Anybody below 18 years is a child under the law and, therefore, it does not matter whether the girl agreed to have sex or not (http://www.greenstone.org/greenstone). It was felt that defilement had become a very big problem in Uganda and had continued to be one of those incessant forms of child abuse.
Because of the prevalence of the problem, and in conformity with more modern methods of child care and protection, the Ugandan Parliament amended the law relating to defilement in 1990 (by Statute No. 4 A of 1990) that had the effect of:

- Raising the defilement age from 14 years to 18 years.
- Raising the maximum punishment to death.

Section 129 of the Penal Code (Amendment) Act No. 1 of 2007 states that “Any person who performs a sexual act with another person who is below the age of eighteen years, commits a felony known as defilement and is, on conviction, liable to life imprisonment”. In Uganda defilement is a capital offence in cases where the victim has been infected with the HIV/Aids virus or is very young and has been defiled by a relative — categorised as aggravated defilement. Those defiling children aged between 14-18 get prison sentences if convicted.

The amendment to the law came against the background of serious concerns for the physiological and emotional health of children who were increasingly falling prey to lustful men especially because of the AIDS pandemic that was spreading like a bush fire in the late eighties. Many men had tended to go to young girls for sex in the belief that the younger the girl, the less the danger of catching AIDS.

In Ireland, the law on sexual offences Act, No. 15 of 2006 states that “Any person who engages in a sexual act with a child who is under the age of 17 years shall be guilty of an offence and shall be liable, on conviction, on indictment to imprisonment for a term not exceeding 5 years, or if he or she is a person in authority, to imprisonment for a term not exceeding 10 years”. The Act further states that “Any person who attempts to engage in a sexual act with a child who is under the age of 17 years shall be guilty of an offence and shall
be liable, on conviction, on indictment to imprisonment for a term not exceeding 2 years, or if he or she is a person in authority, to imprisonment for a term not exceeding 4 years”.

The term ‘defilement’ is synonymous with the term ‘sexual abuse’. As already mentioned in chapter one of this research study, these two terms are used interchangeably in this research study as we engage on the issue of child defilement by a church leader.

4.2 FORMS OF CHILD DEFILEMENT.

There are several forms of child defilement which perpetrators use. Although some of these forms of child defilement may appear to be foreign in the Zambia context, perpetrators know how to use them when defiling children. The researcher is of the view that they learn how to use them from both the printed and electronic media. The following are some of the forms of child defilement which are used by perpetrators in Zambia:

- Pressuring a child to engage in sexual activities.
- Indecent exposure of adult genitals, female nipples, etc.
- Intimidate or grooming the child.
- Physical sexual contact with a child.
- Using a child to produce child pornography.

The forms of child defilement are explained in details below:

4.2.1 Pressuring a child to engage in sexual activities.

Wikipedia, the free encyclopedia (2016), provides the following information on sexual activities:
Human sexual activity, human sexual practice or human sexual behavior is the manner in which humans experience and express their sexuality. People engage in a variety of sexual acts, ranging from activities done alone (e.g., masturbation) to acts with another person (e.g., sexual intercourse, non-penetrative sex, oral sex, etc.) in varying patterns of frequency, for a wide variety of reasons. Sexual activity normally results in sexual arousal and physiological changes in the aroused person, some of which are pronounced while others are more subtle. Sexual activity may also include conduct and activities which are intended to arouse the sexual interest of another or enhance the sex life of another, such as strategies to find or attract partners (courtship and display behavior), or personal interactions between individuals (for instance, foreplay). Sexual activity may follow sexual arousal.

In some cultures, sexual activity is considered acceptable only within marriage, while premarital and extramarital activities are taboo. Some sexual activities are illegal either universally or in some countries or subnational jurisdictions, while some are considered contrary to the norms of certain societies or cultures. Two examples that are criminal offenses in most jurisdiction are sexual assault and sexual activity with a person below the local age of consent. ([https://en.wikipedia.org/wiki/Human_sexual_activity](https://en.wikipedia.org/wiki/Human_sexual_activity)).

In agreeing with the above information, the researcher would like to point out that the most common sexual act which perpetrators use in defiling children in Zambia is that of sexual intercourse (penetrative sex). This can be proved from a number of reports from the media on children who have had their private parts damaged after being defiled. An example of a child whose private parts were damaged after being defiled is given in chapter one of this research study in a story where a forty one years old Sunday school teacher defiled a three year old girl during Sunday school lessons.
The researcher wants to affirm that the other sexual acts which are mentioned in the Wikipedia information above are also used by some perpetrators in Zambia when sexually abusing children. However, these acts are done in secret such that there is a scarcity of reports about them.

We now move on to another form of child defilement which most perpetrators use to easily defile children known as grooming the child.

4.2.2 Intimidating or grooming the child.

Child grooming is befriending and establishing an emotional connection with a child, and sometimes the family, to lower the child's inhibitions for child sexual abuse (Kate, 2009).

Grooming is a word used to describe how people who want to sexually harm children and young people get close to them, and often their families, and gain their trust. Grooming in the real world can take place in all kinds of places-in the home or local neighbourhood, the child’s school, youth and sports club or the church (parentsprotect.co.uk).

Grooming of children also occurs on the Internet. Some abusers will pose as children online and make arrangements to meet with them in person. Facebook has been involved in controversy as to whether or not it takes enough precautions. Sexual grooming of children over the internet is most prevalent (99% of cases) amongst the 13–17 age group, particularly the 13–14 years old children (48%). The majority of them are girls. The majority of the victimization occurs over the mobile phone. Children and teenagers with behavioural issues such as higher attention seekers have a much higher risk than others (Munro, 2011).

There is also what is known as Localised grooming which is a form of sexual exploitation – previously referred to as ‘on street grooming’ in the media - where children have been
groomed and sexually exploited by an offender, having initially met in a location outside their home. This location is usually in public, such as a park, cinema, on the street or at a friend’s house. Offenders often act together, establishing a relationship with a child or children before sexually exploiting them. Some victims of ‘street grooming’ may believe that the offender is in fact an older ‘boyfriend’; these victims introduce their peers to the offender group who might then go on to be sexually exploited as well. Abuse may occur at a number of locations within a region and on several occasions. In the case of sexual grooming, child pornography images are often shown to the child as part of the grooming process (Crosson-Tower, 2005).

Child grooming is done in order to gain the child's trust as well as the trust of those responsible for the child's well-being. Additionally, a trusting relationship with the family means the child's parents are less likely to believe potential accusations.

To establish a good relationship with the child and the child's family, child groomers might do several things. For example, they might take an undue interest in someone else’s child, to be the child's "special" friend to gain the child's trust (Tanner and Brake, 2013). They might give gifts or money to the child for no apparent reason (toys, dolls, etc.). They may show pornography—videos or pictures—to the child, hoping to make it easy for the child to accept such acts, thus normalizing the behaviour. They may simply talk about sexual topics. These are just some of the methods a child groomer might use to gain a child's trust and affection to allow them to do what they want. Hugging and kissing or other physical contact, even when the child does not want it, can happen. To the groomer, this is a way to get close. They might talk about problems normally discussed between adults, or at least people of the same age. Topics might include marital problems and other conflicts. They may try to gain the child’s parents’ trust by befriending them, with the goal of gaining easy access to the child. The child groomer might look for opportunities to have time alone with the child. This can be done by
offering to babysit. The groomer may invite the child for sleepovers. This gives them the opportunity to sleep in the same room or even the same bed with the child.

The researcher wants to believe that this is the practice in the church leader-child sexual abuse situation under review. The abusive relationship is characterised by the grooming of all the protectors of the child, such as the parents and their colleagues, long before the offending church leader begins any abuse of the targeted child. Once the child’s protectors develop trust in the church leader, the offending church leader befriends the targeted child using gifts and attention. In addition, the church leader is in a position of spiritual authority, recognized by the child’s family and friends as being trustworthy, honest and faithful to Christian values. The child once victimized, has no one to turn to, to report the evil they are experiencing.

In the case of child pornography, which is discussed in the next section, images are often shown to the child as part of the grooming process (Crosson-Tower, 2005).

4.2.3 Child Pornography.

Child pornography is pornography that exploits children for sexual stimulation (Milner and O’Donnel, 2007).

Sexual stimulation is any stimulus (including, but not limited to, bodily contact) that leads to, enhances and maintains sexual arousal, and may lead to orgasm. Although sexual arousal may arise without physical stimulation, achieving orgasm usually requires physical sexual stimulation.

The term sexual stimulation often implies stimulation of the genitals, but may also include stimulation of other areas of the body, stimulation of the senses (such as sight or hearing) and mental stimulation (i.e. from reading or fantasizing). Sufficient stimulation of the penis in
males and the clitoris in females usually results in an orgasm (Kammerer-Doak, et al., 2008). Stimulation can be by self (e.g., masturbation) or by a sexual partner (sexual intercourse or other sexual activity), by use of objects or tools, or by some combination of these methods (Webster, 2003).

Child pornography may be produced with the direct involvement or sexual assault of a child (also known as child sexual abuse images (Yaman, 2008) or it may be simulated child pornography. Abuse of the child occurs during the sexual acts or lascivious exhibitions of genitals or pubic areas which are recorded in the production of child pornography (Milner and O’Donnel, 2007).

Child pornography may use a variety of media, including writings, magazines, photos, sculpture, drawing, cartoon, painting, animation, sound recording, film, video, and video games (Yaman, 2008 and Baker, 2011).

Child pornography is the consequence of the exploitation or sexual abuse perpetrated against a child. It can be defined as any means of depicting or promoting sexual abuse of a child, including print and/or audio, centred on sex acts or the genital organs of children (Agnes Fournier de Saint Maur, January 1999).

In line with the above discussion, a psychiatrist consultant based in Lusaka-Zambia, Professor Alan Haworth cites watching of pornographic movies and explicit movies as a major motivation behind the spate of defilement cases in Zambia. Researchers say that the repeated use of pornography can interfere with the ability to enjoy and participate in normal marital intimacy. Another consultant, Doctor Victor Cline, a specialist in treating sex addiction, states that what starts as casual viewing of pornography can eventually lead to deviant sexual acts. He argues that any type of sexual deviation can be acquired this way and cannot be eliminated.
even by massive feelings of guilt. Like a cancer, it keeps growing and spreading. It rarely reverses itself and it is also very difficult to treat and heal (Times of Zambia, August 30, 2003).

The researcher has observed that many young people in Zambia are now able to access internet using their cell phones. The possibility that most of them are able to view pornographic materials on the web sites on their own is high. This poses a danger to them of being enticed to indulge themselves in sexual activities even before they are ready to do so.

The researcher cannot deny the fact that there could be child defilers who use child pornography to defile children, but this is rarely reported as it is done in secret. This brings us to another form of child defilement known as indecent exposure.

4.2.4 Indecent exposure.

In its further work, Wikipedia, the free encycropedia (2016) has the following information on indecent exposure:

Indecent exposure is the deliberate exposure in public or in view of the general public by a person of a portion or portions of his or her body, in circumstances where the exposure is contrary to local moral or other standards of appropriate behaviour. Social and community attitudes to the exposing of various body parts and laws covering what is referred to as indecent exposure vary significantly in different countries. It ranges from prohibition of exposure of genital areas, buttocks and female breasts. In some conservative countries, especially in the Middle East, the exposure of any part of the female body is considered indecent. Not all countries have indecent exposure laws.
The applicable standard of decency is generally that of the local community, which is sometimes codified in law, but may also be based on religion, morality, or, in some justifications, on the basis of “necessary to public order.” Indecent exposure sometimes refers to exhibitionism or to public nudity and does not require a sexual act to be performed. If sexual acts are performed, with or without an element of nudity, this can be considered public indecency, which may be a more serious criminal offence. In some countries, exposure of the body in breach of community standards of modesty is also considered to be public indecency.

The legal and community standards of what states of undress constitute indecent exposure vary considerably, and depend on the context in which the exposure takes place. These standards have also varied over time, making the definition of indecent exposure itself a complex topic. (https://en.m.wikipedia.org/wiki/inde...).

In Zambia there is no indecent dressing law, the standard of decency in dressing is generally that of the local community, which is based on religion and morality. The absence of the indecent dressing law has led to many young people especially young girls dressing indecently. For example, some young girls put on tight trousers known as leggings. These show the shape of the body of the girls which is somehow tempting to men who see them on the streets. Some people have attributed acts of child defilement to such dressing. However, the researcher is quick to point out that this does not explain the case of defiling babies as young as eighteen months old.

4.2.5 Physical sexual contact with a child.

Physical sexual contact with a child involves touching, kissing, fondling, rubbing, or forced penetration of the vagina, anus or mouth of a child with a penis. Physical sexual contact with
a child also involves what is called ‘assault by penetration’ (sexual penetration of vagina or anus of a child with a part of the body or an object.

Physical sexual contact with a child is the most common form of child defilement. Many perpetrators of child sexual abuse use this form of sexual abuse on children in Zambia. Although other forms of Child defilement are not reported, the researcher is of the conviction that some perpetrators use them when defiling children. Therefore, in this research study, child defilement is referred to as including all the forms of defilement which are described above. Having discussed the forms of defilement, we now move on to the types of child defilement.

4.3 TYPES OF CHILD DEFILEMENT.

Child sexual abuse is classified into categories according to the identity of the perpetrator (Crosso-Tower, 2002). In line with Crosson-Tower’s opinion, child sexual abuse is traditionally discussed under the headings of incest and extra familial abuse. As a result theories explaining the phenomenon often describe it from the perspective of the offender’s motivations (Smit, 2007). Bolen (2001) adds to this thinking by saying that classification of child sexual abuse is made according to the abuser’s modus operandi and is the reason for the lack of knowledge about victims. Bolen states that:

This lack of knowledge of an adequate base of extra familial abuse is one of the most striking witness of the literature base and is profoundly related to society’s inability to adequately identify, assess and treat victims of extra familial abuse (Bolen, 2001:111).

This is true of children who have been sexually abused by perpetrators outside the family structure, because very little research has been conducted on this form of child sexual abuse (Bolen, 2001:111).
Bolen further observes that theories on family incest generally concentrate on the dynamics of family relationships (Bolen, 2001). The observation of Bolen is true in that classifying sexually abused child according to the *modus operand* of perpetrators makes it difficult to establish a profile of the sexually abused child.

There has been debate among authors as to which are the most prevalent types of child sexual abuse found in communities. Bolen (2001), postulates that non relatives are involved in 71% to 89% of all child sexual abuse and this is, therefore, the most common type of sexual abuse. This would imply that extra familial child sexual abuse is the most prevalent form of abuse. On the other hand, Wiehe (1996) reasons that 75% to 80% of all offenders are related to or known to the victim. This would place the emphasis on incest.

In this research study, both types of child sexual abuse are discussed. This is in order to distinguish the difference between the two. Child sexual abuse is divided into two categories according to the relationship context in which the abuse took place. The two categories are: Familial child sexual abuse or incest and extra familial child sexual abuse. The two categories of child sexual abuse are discussed in detail below:

### 4.3.1 Intra Familial child sexual abuse or incest.

Intra familial child sexual abuse or incest is a defilement case where the perpetrator is related to the child, either by blood or marriage (Fridell, 1990). Sholevar (2003), describes incest as ‘the intimate sexual or anal contact between close relatives’. While Mather and Debye (2004), state that incest is “sexual abuse of a child by a person who is a member of a child’s family or has some type of kinship role in the child’s life”. In this study, reference to incest includes incest in families perpetrated by family members within the nuclear family and the extended
family. The perpetrators could be the father, mother, grandfather, uncle, stepfamily, or brother to the child.

There are many forms of incest which can occur. These are: father-daughter, mother-daughter, father-son, mother-son, stepfather-daughter, and grandfather-granddaughter and sibling incest. In this research study, the researcher only discusses the most-often reported forms of incest which occur in most Zambian families. These are: father-daughter, stepfather-daughter, sibling incest and grandfather-granddaughter incest.

These forms of incest are explained in details below:

4.3.1.1 Father-daughter incest.

Examples of incidences of father and daughter incest are mentioned and described in chapter one of this research study.

In describing the families in which father-daughter incest took place, the early family therapists (e.g. Machotka et al, 1967) pointed out that incest had to be considered a “family affair.” By this reframing, they hoped to blame no one person, and at the same time, to spread the blame around among other family members, especially the mother. Furthermore, they wanted to create a reality in which all members were also victims, not just the abused child (Kirschner et. al., 1993).

Father-daughter incest is a family affair in that it affects all members and occurs because there have been break downs in the structure and processes in the normal family life. In every case that has been seen of father-daughter incest, there is a highly dysfunctional marital relationship. The spouses often have few shared interests or friends in common. Courtois (1988) has observed that the spouses may have been incompatible from the outset. The lack of
commonality is also mirrored in their emotional distance. The spouses are unable to meet each other’s needs for companionship, affection and nurturance (Kirschner et al., 1993).

The spouses also have very poor communication and conflict resolution skills. They carry with them long lists of grievances about each other that fester and impede the possibility of intimacy. The spouses will often communicate these grievances to the children or use the children as go-betweens or messengers. This type of triangulation is characteristic of very disturbed marriages and helps to create a foundation for other, more serious problems (Kirschner et. al., 1993). The inability to communicate directly with each other prevents the partners from functioning as an effective parental team. As a result, consistent discipline, nurturance, and guidance are lacking. Children are often inappropriately put into adult roles. At times, they are asked to be parental caretakers; that is, they are expected to meet their parents’ emotional needs while their own needs are ignored. At other times, children are put in the role of parental children; that is, they are expected to take care of their siblings, the household, and themselves because the parents are absent, are intoxicated, or simply have abdicated responsibility.

All the three elements - the distance in the marriage, the poor communication skills and destructive triangulation of children, and the divided parental team with children inappropriately cast as parental figures – are features of families with father-daughter incest. Against the back drop of these elements, the spouses are also unable to share power equally in the family. As a result, one or the other partner becomes the dominant one. In father-daughter incest, we have seen three types of family hierarchies: the father dominant type, the mother dominant type and a third type in which both spouses abdicate authority and put the children in charge. Each of these family types has its own unique features in terms of both individual and systemic dynamics.
The researcher discusses the three types of family hierarchies in details below:

**The father-dominant family.**

The first type of family is the one that received the most scrutiny. The husbands tended to be more authoritarian and to dominate the family’s decision making. The authoritarian perpetrators are the ones who have traditionally been viewed as more emotionally disturbed than most patients, or simply as “evil.”

The psychopathology of these men, however, may appear in two areas: alcoholism and sexual dysfunction. There is ample research that shows that possibly up to 50% of all incest fathers can be considered alcoholics (Kirschner et. al., 1993). For the dominant male, drinking may trigger episodes in which he both physically abuses his wife and sexually abuses his daughter. In these alcoholic systems the women serve as co-dependents and enable the perpetrator through their silence, fear, and distance to sexually abuse their daughters. In the male-dominant family, the women are more distant from their spouses primarily because they are devalued in the relationship. In almost all cases we have seen that these women grew up in families in which they and their mothers were denigrated and were not in a position of power. In some instances, these women were reliving their own sexual abuse at the hands of the violent father. The traumatic consequences of having been sexually abused as children and then physically abused as adults became too much to bear. They would become physically ill, severely depressed, or even suicidal. At times, the mothers may have left by escaping to a psychiatric facility where they could be left alone.

Because they themselves either are survivors or have been severely beaten down, mothers in the father-dominant families are unable to guide or serve as effective role models for their
daughters. They often put their daughters in charge of the household and the other siblings, or asked them to be parental caretakers.

It is in the latter role that daughters become victimized by their fathers. Because their mothers lacked the power and the energy to function appropriately, the daughters were asked to fulfil the fathers’ emotional needs. In this way, they functioned as substitutes for their mothers, as companions at night, and eventually as lovers. While many of these situations did begin simply out of a need for companionship, some perpetrators did not develop a warm or affectionate relationship with their daughters and would simply molest them.

Many therapists believe that the spouses in father-dominant families do not have sex with their husbands and that is why the fathers turn to their daughters. While it has been found that where fathers-daughter incest occurs, there is almost always marital sexual dysfunction the particular sexual problems vary from family to family. There may be disorders of desire, impotence, or premature ejaculation (Kirschner et. al., 1993).

Another sexual problem seen in a male-dominant family is that of the sex addict. These men have sex with their wives frequently, have sex with their daughters, and even conduct affairs with other women. Many of these sex addicts were themselves victims of child abuse. Carnes (1991) has found that 81% of his male sex addicts were sexually abused as children. Of these, 33% of the men had been abused by their fathers or mothers (Kirshner et. al., 1993).

**The mother-dominant family.**

The second kind of father-daughter incest family is one in which the mother is dominant. In these families, most financial and child rearing decisions are made unilaterally by the woman. In many cases, the man would come home on pay day and give his wife the entire check. She would then allot him a certain amount of spending money, much as she would with the
children’s allowances. When we assessed these families, the hierarchical map showed the wife on top and the husband at the same level as the kids. Often the incest that occurred was similar to that between siblings.

The mother-dominant family type is characterised by women who are narcissistic and men who are devalued and impotent. The fathers functioned at more or less the sibling level and sought their sexual gratification there. The daughters could not communicate their secrets to their mothers because the women were disinterested. The fathers and daughters were bonded as emotionally neglected children.

The chaotic family

The third type of family incest is the more chaotic kind in which the parents have abdicated authority to children. These families are the ones that often come to the attention of the authorities or child protective service agencies. The children are often found living in squalor, frequently abandoned and neglected, and victims of sexual abuse. They often have sex with each other, and they are also victimized by parents and re victimized by neighbours. These disorganized families are often present with parents who are alcoholics and or drug abusers (Kirschner et. al., 1993).

In Zambia, the most common family hierarchy which is found in most families is that of father-dominant family. This is because of the traditional belief that the father is the head of the family. As a result of this belief most fathers tend to lead their families in a dictatorial way. Besides this belief, fathers are the only bread winners in most families in Zambia. As already mentioned in chapter one of this research study, when the father as a bread winner is implicated in a defilement case with his daughter, the wife or relatives would rather keep quiet because it will be them who will lose out in case he is imprisoned.
4.3.1.2 Sibling incest.

Sibling incest involves sexual activities between children in a family. To distinguish between incest and appropriate sexual behaviour between children, appropriate and problematic sexual contact between children must be defined. Professionals distinguish between appropriate and problematic sexual behaviour among children on a broad base of criteria. Those criteria should include an evaluation of the normal physical, psychological, moral and cognitive development of the child (Gil, in Gil & Johnson, 1993:38). Johnson discusses the different types of sexual behaviour found in children. He found that, if sexual behaviour in children is classified according to the level of sexual disturbance, a continuum arising from four basic groups could be identified to distinguish between appropriate and problematic sexual behaviour in children (Gil, in Gil & Johnson, 1993: 41-51).

In group one; children are involved in natural childhood sexual exploration with siblings or friends. The sexual interaction takes place on a voluntary, spontaneous, light hearted and ‘giggly’ way. If discovered by adults, this sexual behaviour ceases. Group two is composed of sexually reactive children. Children in this group have often been either exposed to sexual behaviour in pornography or stimulated by too much sexual activity. They are not able to integrate the sexual knowledge in a meaningful way and are preoccupied with the sexuality of their own body by masturbating, exposing themselves or inserting objects in themselves. If other children are involved in their sexual play, they are not coerced or violated into doing so. Those children respond easily to therapy and as age appropriate activities increase, the sexual behaviour usually decreases.

A Support Program for Abusive Reactive Children (SPARC) was developed by MacFarlane in 1985. It focuses on children falling in this category. Group three is comprised of children involved in adult sexual activities. They display pervasive and
focused sexual behaviour and do not respond easily to treatment. Sexual activity lacks effect and becomes a way of communicating. These children live in highly chaotic sexually charged environments and are usually emotionally, physically and sexually abused. Because of this, they expect rejection and abandonment by adults. Group four involves children who molest other children. They will fool, bribe or force other children into sexual behaviour. They seldom express empathy with their victims and justify their abuse of other children by referring to the victim’s disobedience or the fact that they are irritating them. Group four children express anger and aggression, have little impulse control and display a variety of problematic behaviour in their interaction with other people.

Mutual exploration among same age children is seen by society as psycho-sexual development. Adult survivors often experience trauma as a result of sexual abuse by siblings. This confirms that not all sexual exploration between siblings is acceptable (Spies, 2006:7-8). Spies identified the following factors that determine the difference between exploration and incest:

- Age difference between siblings.
- Unbalanced emotional and physical power between siblings.
- Unequal sexual knowledge in incestuous siblings.
- The type of sexual interaction.

Spies (2006:8) emphasizes that minimizing sibling incest after disclosure and disbelief on the part of parents and professionals adds to the damaging effect of sibling incest. Sexually gratifying acts between siblings can be extremely harmful and must be taken seriously,
especially if the victim and perpetrator of sibling incest are of different gender and if there is a considerable age difference between them.

Doyle (1994) highlights another aspect of sibling incest when she points out that in some families not only one but all the children are sexually abused. Should siblings not be aware of each other’s abuse and are made to believe that they are the only ones experiencing this, it is possible for them to become envious of each other. They are often made to believe that their own behaviour was the reason for the assault.

Doyle (1994) further observed that the victim sometimes believes that his or her submission to the abuse is going to save the other siblings from the same fate. In some instances, children in the same family are abused together and the abuse takes the form of a ritual. Those children have no sense of appropriate family boundaries, so the distinction between adult and child is blurred. Children like this have no sense of appropriate sexual and physical contact in a family and consequently might abuse each other.

Gil (in Gil & Johnson, 1993) argues that in some sexually abusive families the victim changes from a passive to an active role, from helpless victim to aggressive dominant perpetrator. Breer (in Gil & Johnson, 1993:59) proposes that sexually aggressive behaviour in children could be an attempt to re-enact or recreate the abuse in order to develop mastery and control over feelings. Johnson (in Gil & Johnson, 1993:62) found that girls who were abused by family members re-enacted the abuse with their siblings. Those girls identified their victim-siblings as their rivals.

4.3.1.3 Stepfather-daughter incest.

This type of incest occurs infrequently in step families in which the mother is the custodial parent and also the dominant parent. The overwhelming majority of step family incest cases
reflect an authoritarian or dominant father pattern in which the custodial, the mother, is devalued.

In these families, the mothers have usually been left economically disadvantaged after their divorces, and even more importantly, they lack interpersonal support. The children have little contact with their biological fathers and are emotionally starved. Into this family, comes the saviour who appears to rescue the mother and her children. But often he is only a predator looking for a vulnerable woman with defenceless children. Some step fathers actually marry into certain families so that they can have access to the female children. In the researcher’s experience of counselling the victims of stepfather-daughter incest, he has come to learn that some step fathers see it to be normal to have sex with their step daughters. This is simply because they are not their biological fathers.

4.3.1.4 Grandfather-granddaughter incest.

The dynamics of grandfather-granddaughter incest are similar to those of father-daughter incest, particularly when the grandfather is young. However, when the grandfather is older, the incestuous relationship is more often perpetrated to bolster the molester’s ego and help him reassert his manhood and self-esteem which have decreased due to his natural physical deterioration. There is no evidence to indicate that much incest is trigenerational-that is, the grandfather may have molested his daughter, followed by the granddaughter. The grandfather himself may have been himself sexually molested during childhood.

Grandfather-granddaughter incest has devastating effects on the grandmother especially when she and her husband do not often have sex. The relationship between the grandmother and her husband and her granddaughter becomes broken. She feels cheated and unloved by her husband. The researcher’s experience in counselling grandmothers whose husbands were
involved in granddaughter incest confirms that the grandmother develops hate and anger towards both her husband and her granddaughter. We move on to another type of child sexual abuse which is known as extra familial child sexual abuse.

4.3.2 Extra Familial child sexual abuse.

In extra-familial child sexual abuse, the perpetrator is someone outside the family circle (Crosson-Tower, 2002:125). Perpetrators outside the family might be neighbours, friends of the family or people with a professional capacity like teachers, caregivers, medical professionals, church leaders etc. Only a small number of sexually abused children are abused by complete strangers (Faller, 1990:50).

Crosson-Tower (Crosson-Tower, 2005: 181-183) states that the perpetrator’s ability to molest in an extra familial situation often depends on lack of parental judgment or inadequate parental supervision. This statement seems to imply blame, but parents allow access to their children for different reasons, some unrelated to intent or irresponsibility. Parents may not perceive potential harm from a perpetrator because of the trust that they have in the would-be perpetrator.

First, the perpetrator may have an emotional bond with the parent. The individual may be a family friend who has gained the trust of the parent, or the abuser may be a babysitter who is assumed to be reliable. Or abuse is not within the parents’ frame of reference. Parents who have had no experience with abuse, or who have blocked the memory of their own experiences, do not expect other adults to sexually abuse children. Native American families, for example, give children a great deal of freedom on the reservation, not expecting that they will come to any harm. Parents whose children use the Internet may not recognize how potentially dangerous unmonitored use can be for children. Because of current media attention, parents may be more cautious, but even cautious parents often tell themselves their
fears are groundless. Some parents need the services of the potential abuser. The increased reports of abuse in day-care settings, in schools, and by babysitters point out that parents are not always discerning about the providers of those services. Even with thorough checking of references, it is not possible to know that these individuals are reliable. Financial constraints may necessitate using whatever facility or person is available. And finally, the parent may trust the potential abuser.

Parents may not provide adequate supervision for several reasons: They may feel their children can care for themselves. Parents who allow children freedom in walking home from school or playing in the neighbourhood may not even consider the danger of potential abuse or may feel that the children can take care of themselves. Some parents have unrealistic expectations about their children’s ability to care for themselves. In this era of the Internet, some parents may not realize that children need supervision when they are online. Today, the Internet provides an opportunity for children to be seduced into future abuse while they are on the computer in their own homes. Parents may feel unable to provide supervision. Latchkey children, who come home to an empty house and remain alone until the parents return from work, are becoming the trademark of two-career families. Child care is expensive, and some parents feel financially unable to provide an alternative. In addition, the parents may not be able to find a program or a sitter to supervise. Or parents may be unaware of unsupervised periods. The child who misses a ride, or for some reason is left unsupervised, is vulnerable despite the parents’ good intentions. Some parents may be otherwise occupied. Caring for a child is a demanding and full-time job. For some parents the responsibility is sometimes overwhelming. Others may be so involved in their own crises or conflicts that they are not able to concern themselves with their children’s whereabouts. And finally, the child may initiate the separation. Children who wander off, run away, or become distracted sometimes separate themselves from supervising caregivers.
The above presupposes that a perpetrator meets a child and begins his/her seduction. But over the last decade, the complexion of seduction by non-familial perpetrators has changed. Today, the easiest way for an abuser to meet and engage a child for abuse, pornography, or prostitution is over the Internet. So parents may now have difficulty with supervision while the child is in his/her own home.

In view of what Crosson-Tower states, we are forced to recognize that, whether a perpetrator has access to a child initially met in person or initially met on the Internet, children are vulnerable to abuse. Children may be exposed to one or more of the variety of types of abuse, misuse, or exploitation. The following are some of the forms of sexual deviation that the children are exposed to:

4.3.2.1 Pedophilia.

Pedophiles are individuals who have a sexual interest in children. Although some incestuous fathers may be pedophiles in their orientation, the term is mostly reserved for the abuser whose victim is outside the family.

Pedophilia is related to the individual pathology of the abuser. A pedophile may be either fixated or regressed and his choice of victim may reflect his particular type of pathology. Pedophiles seek a relationship with a child because they see children as non-conflictual partners who can satisfy their unmet emotional needs. The fixated perpetrator has probably nurtured his interest in children for some time. He has become expert at engaging children. He becomes emotionally involved with these children and sees himself at their level. Outside of his relationship with children, the fixated pedophile views himself as helpless and ineffective (Flora, 2001). Fantasy is an important part of this individual’s life. He may fantasize sexual and emotional involvement with children and often acts out his fantasies. Interestingly, the perpetrator projects his feelings of powerlessness and often perceives that it is the child who
initiates the relationship (McLaughlin, 2000 and Flora, 2001). The victim is usually vulnerable to the advances of the pedophile.

The fixated pedophile suffers from a “temporary or permanent arrestment of psychosocial maturation resulting from unresolved formative issues that persist and underlie the organization of subsequent phases of development” (Groth, 1978: 6). This molester has failed to develop normally; he sees himself as a child and finds no gratification in the accomplishment of adult tasks. As children, these perpetrators’ needs were unmet, and having lost faith in adults they now look to children to meet their dependency and nurturing needs. They find themselves at ease with children and become “sexually addicted” to them (Groth and Birnbaum, 2001; Flora, 2001).

The regressed pedophile usually does not demonstrate his interest in children until his relationship with adults breaks down. He is often married, and, in fact, may prefer an adult partner if she validates his need to feel adequate. When relationships with peers are too conflictual, he chooses children. Frequently the onset of his molestation behaviour can be traced to a crisis in his life. His relationship with a child becomes an impulsive act that underlies his desperate need to cope.

Regressed pedophiles may abuse less frequently than fixated pedophiles because the assaults are usually triggered by some event. If their lives are relatively conflict free, the abusers may act only infrequently.

Both fixated and regressed pedophiles approach children in a variety of ways. Some pressure their victims and others threaten or physically force them. The pedophile who pressures does so without using physical force. He may use enticement in which he cajoles the victim with gifts, treats, and affection. Or he may convince the child of how important he or she is to him. Entrapment is also used by abusers who try to make the child feel indebted or obligated to
them in some manner. The pressuring pedophile hopes to gain the child’s “consent” in the relationship and thus convince himself that the union is mutual rather than abusive or exploitative. If the child refuses, the perpetrator may intensify his efforts to cajole or entrap, but will rarely force the child (van Dam, 2001).

The abusers who force their victims use either intimidation or physical aggression. Children are in awe of adults. The perpetrator who intimidates uses his power as an adult to commit the abusive act.

The motivation of abusers who force themselves on their victims is to complete the sexual act. Force is used when the abuser perceives it necessary. Most likely, he intends no injury to the child, but sees her or him as an object to be exploited and manipulated to his own satisfaction. He is not concerned about the trauma for the victim and he will usually not take no for an answer (van Dam, 2001).

Other abusers actually prefer physical aggression. They, too, are exploiting and plan to do so without the child’s consent. This type of abuser is often called a child rapist because of the likelihood that his assault includes penetration. Any type of pedophile may reach the point of intercourse with his victim, but this individual’s act more closely approximates the rape of an adult female. Two motivations seem to play a role in child rape— anger and the need for power (Bolen, 2001). Anger toward a child or something that the child symbolizes may cause the perpetrator to use sex as a weapon. His purpose is to hurt the victim and he often combines physical battering with the sexual assault. Often he does not anticipate abuse, but acts instead on impulse or emotion (Groth and Birnbaum, 2001).

The power rapist sees the child as weak, vulnerable, and unable to resist. The child once again is seen as an object that he uses and discards. Some rapists who have unsuccessfully tried to
take their aggression out on adults may make children their targets (Groth and Birnbaum, 2001).

A small minority of child molesters are sadistic in their assaults. They are sexually stimulated by hurting the child. Their act is totally premeditated, often taking on an almost ritualistic pattern. The sadistic abuser uses more force than necessary to overcome the child and sometimes kills the child. The child sometimes symbolizes something the abuser hates in himself or perhaps evokes a memory of his disturbed childhood (van Dam, 2001; Groth and Birnbaum, 2001).

4.3.2.2 Pederasty.

Geiser speaks of pederasts as “eternal adolescents in their erotic life. They become fixated upon the youth and sexual vitality of the adolescent boy….Pederasts love the boy in themselves and themselves in the boy” (Geiser, 1979:83). Rossman (1976) describes pederasts as males over age 18 who are sexually attracted to and involved with young boys who are between ages 12 and 16 years.

Are pederasts considered pedophiles? Geiser (1979) differentiates by saying that pedophiles exploit children, whereas pederasts prey on “willing children.” Many might disagree with this premise and the semantics, but most agree that pederasty is the abuse of boys, especially those between 12 and 16 years old.

Although illegal in many societies, pederasty may still be practiced through underground movements. Several organizations currently exist that are only half-hidden from the public. The North American Man Boy Love Association, known as NAMBLA, was created in 1979 in response to the break-up of the “Revere Ring” outside of Boston. The ring had operated for many years and included numerous professional men and more than 60 boys. After several of the men were charged with illegal sexual acts with boys, 32 men and 2 teenage boys
organized to protect these kinds of sexual relationships and to defend the “rights” of these youths (deYoung, 1982). NAMBLA publishes newsletters and now has a Website. Through these, the organization provides a network for pederasts.

The René Guyon Society believes that sexuality between men and boys is a natural type of education. Based in Los Angeles, the group argues that the age of consent should be lowered, as reflected in their motto, “Sex by eight is too late” (Freeman-Longo and Blanchard, 1998). The Childhood Sexuality Circle, founded in 1974, argues that children are inherently sexual beings and that sexual relations between children and adults should be encouraged.

Victims of Child Abuse Law (VOCAL), an organization which was started in the 1980s by several individuals who asserted that they had been falsely accused of child sexual abuse, dedicates itself to protesting many of the child abuse laws, often arguing that agencies have no right to interfere in family life (Freeman-Longo and Blanchard, 1998). Such groups sometimes appear on TV talk shows to argue for a lower age of consent or the importance of such sexual education for children.

Should pederasty be considered abusive? Since there is so little research available on male sexual victimization, it is only possible to speculate. Organizations of pederasts argue that their proponents neither abuse nor exploit boys. Some say that, unlike the fixated pedophile, the pederast is not reliving the trauma of a sexual assault in his own youth but rather is seeking a reciprocal relationship of sexual pleasure with a boy (Rossman, 1976).

Because of this difference in motivation, the pederasts interviewed by researchers indicate that they see themselves as guided by a particular code of ethics. This ethical code suggests that the boys are not merely sexual objects, but have feelings and interests of their own. Pederasts are admonished to keep photos taken of boys to themselves, a practice that appears
to have changed. Further, the pederast is encouraged to protect the best interests of the boy by discouraging drugs and alcohol and encouraging him to stay in school (Rossman, 1976; Freeman-Longo and Blanchard, 1998). There is some question as to whether the ethical code first discovered by Rossman’s study still operates. On the other hand, many argue that a child under age 18, by virtue of his insufficient knowledge and lack of authority, cannot consent, and that to ask consent is taking an unfair advantage. Another issue for consideration is that of harm to the child. It is known that many boys involved with pederasts do not see themselves as exploited or harmed. The possibility of trauma increases when a boy has been forced. If he agrees to the alliance and is treated gently and with respect, is trauma precluded? While organizations as vocal as NAMBLA might argue for the sexual education of boys, survivor groups insist that, for some, trauma is still the result (Freeman-Longo and Blanchard, 1998; Gartner, 1999).

4.3.2.3 Technophilia.

The term Technophilia, coined by New Hampshire police detective Jim McLaughlin, refers to those who use the computer to engage in sexual deviance involving children (McLaughlin, 1998). After an extensive 3-year study of sexual exploitation of children over the Internet, McLaughlin and his colleagues, funded by a grant from the Justice Department’s Office for Juvenile Justice and Delinquency Prevention, uncovered over 200 perpetrators of sexual solicitation and abuse via the Internet in 40 states and 12 foreign countries. McLaughlin (1998) suggests that there is no real profile for offenders who engage in technophilia, but he suggests what might be a typical scenario.

A 35-year-old man anxiously watches the clock on his office wall in anticipation of ending his workday. His co-workers would describe him as a person who tends to isolate himself from others. He really doesn't have a friend, just acquaintances, and these relationships are shallow at best. He has withdrawn over the years from his extended family and often turns to Extra familial Sexual Abuse,
Misuse, and Exploitation (187 ch08.qxd 5/17/2004 3:56 PM Page 187). He spends considerable time alone. He leaves work as soon as the clock strikes four. Without any delay he heads straight home. If waylaid in any manner he experiences anxiety. He has a compulsion to follow through with his daily routine of leaving work at the same time and going straight home to his computer. He arrives home and doesn’t even take his coat off before turning on his computer. After a few key strikes he has his modem logging on to the Internet. Around his computer is evidence of his long hours in front of the monitor. The last microwave meals he has eaten are stacked nearby. The rest of the apartment appears unlived in. The computer, which he has set up in his bedroom, is the central feature of the residence. He double clicks on the special icon he has set up as a shortcut to his favourite chat system. He selects one of his many fictional characters, deciding on this day to be a 14-year-old boy, “Donny14.” He enters a chat room called “littleboysex” and joins a cyber-community of persons with similar interests. The hunt begins (McLaughlin, 1998:1). The author adds that this offender might be married or not, have his own children or not, or be involved in any type of profession.

A list of offenders who have been investigated includes activities and professions such as college or high school students, computer tech operators, teachers, labourers, nurses, engineers, self-employed, and all manner of other work related areas (McLaughlin, 1998). In short, the individual who uses the Internet to lure children might be anyone fitting any of the offender typologies mentioned above. The relative anonymity of the computer world offers him/her a chance to groom a child before he/she ever has to take the risk of meeting that child. And this seduction can be done under the seemingly watchful eyes of parents.

McLaughlin and his colleagues did identify several categories of perpetrators depending on how he/she used the Internet and pornography. The identified categories include:

- **The collector:** is what McLaughlin calls an “entry level offender,” who begins by pulling up and possibly later printing pornographic pictures for his own use as well as by chatting with children online. Perhaps the anonymity of the Internet allows these
offenders to overcome both the internal (“It’s okay, no one will know”) and external (in the safety of the home) inhibitions mentioned by Finkelhor in his pre-condition model. They are often involved with children already and find that their sexual interest increases as they become desensitized by pornographic stimuli.

- **Travelers:** may chat with children with the goal of using manipulation to get these children to meet them for sexual purposes. Most of them also collect child pornography. Many of these offenders present themselves on the Internet as peers to the child with whom they converse electronically. Unsuspectingly, the child ends up giving the perpetrator personal information about him/herself that allows the technophile to push toward a more intimate relationship and eventually a meeting (McLaughlin, 2000).

- **Manufacturers:** produce their own pornography and scan it onto the Internet for others to access. They may photograph children in public areas such as bathrooms or they may lure children into being photographed or into taking sexual or nude photographs of themselves. They may simultaneously be involved in molesting children (McLaughlin, 2000).

- **Finally, chatters:** are usually not involved with child pornography and may actually warn children against those who might be involved with pornography on the Internet. Their goal is to chat with children and to present themselves as the only adults in cyberspace who can be trusted. They present themselves as teachers and encourage children to ask them questions about sex, getting their own stimulation from this activity. This chatting may escalate to sexual talk over the Internet and possibly to phone sex with children. Once these offenders find a method of luring children in this way, they will usually stick to it, becoming quite ritualistic (McLaughlin, 2000).
McLaughlin cautions that these categories are merely an attempt to understand online perpetrators more fully as the exact nature of this type of paraphilia continues to be studied.

In view of the above discussion on the types of child defilement, the researcher would like to point out that both types are prevalent in the churches in Zambia although familial sexual abuse is under reported due to reasons which are given in chapter one of this research study.

Having described what defilement is and discussed the forms and the types of child defilement, we now move on to the effects of child defilement on mothers by church leaders which is central in this research study.

4.4 DATA PRESENTATION AND DATA ANALYSIS.

In this section the researcher presents the mothers’ experiences following disclosure of defilement of their children by a church leader. This is done by discussing various themes that came out of the data that was provided by the affected mothers during the interviews.

As already mentioned in chapter one of this research study, the researcher has not focused on the devastating effects of defilement experienced by the children as victims (Heather 2011) and the fathers as co-victims (Manion el al. 1996). This is because this research is about the effects experienced by mothers following disclosure of defilement of their children by a church leader. The devastating effects of defilement by a church leader experienced by the children and the fathers are gaps that can be looked into in any future research. The following are the themes that came out of the data that was provided by the affected mothers:

- Loss of religious faith.
- Less trust in the church leaders.
- Dissatisfaction of their parenting role.
- Feelings of anger towards the perpetrator.
- Marital relationship problems
- Relationship problems with their daughter.
- Having feelings of stress
- Having feelings of shame
- Feelings of guilt.
- Worried that their child might have contracted HIV.
- Worried that their child has lost her virginity.

These themes are explained in details below:

4.4.1. Loss of religious faith.

The theme of loss of religious faith came through and was prominent amongst all the interviewed mothers. Loss of religious faith is to lose trust in one’s relationship with God. Mostly this came about as a result of being disappointed with the bad behaviour of a person who holds a position of trust in the church. For example, a priest in the Roman Catholic Church holds a position of sacred trust and is generally viewed by Catholics as God’s representative on earth. Sexual abuse by such a trusted figure could lead to a victim’s loss of self-esteem and disillusionment.

The participants in this study reported feeling disillusioned by the bad behaviour of the church leaders for having defiled their children. They all reported having their faith in God temporarily lost. They expressed confusion and ambivalence about the existence of God. Four of the mothers described God as cruel, hostile, angry, and filled with revenge. One of the participants (mothers) explained:

As a result of our section church elder defiling my only daughter, I have lost trust in God and the whole entire church leadership in my church. This has made me to stop going to church or even
interacting with my fellow church members. Each time I go to church I feel disgusted when I see any church leader.

Another mother had this to say:

The defilement of my daughter by our Pastor has made me to believe that God does not exist. If he existed, my daughter was not going to be defiled, he was going to protect her. The defilement of my daughter by our pastor has really pained me such that I have vowed never to set my foot in any church.

When asked to describe how they felt about being separated from God and their fellow church members who they interacted with always, individually and collectively the mothers responded by saying that they felt as if they had lost a family relative. This is because they were used to worshiping God and interacting with other church members. One of the mothers who is a Catholic by religion had this to say:

God and the church have been important to me and my entire family. We don’t think of the church as a religion anymore, it is more or less our way of life. To be separated from God and the church, is to me like losing something which belongs to me. It is so hurtful to me.

The above sentiments are in line with what Winell says in an article which was published in the British journal, *Cognitive Behaviour Therapy Today, November 2011*: RTS in CBT Today, Part 3. In this article Winell states that “losing one’s faith, or leaving one’s religion, is an analogous event because it essentially means the death of one’s previous life – the end of reality as it was understood. It is a huge shock to the system, and one that needs to be recognized as trauma. Winell further states that the challenges of leaving one’s religion are daunting. For most people, the religious environment was a one-stop-shop for meeting all their major needs – social support, a coherent worldview, meaning and direction in life, structured activities, and emotional/spiritual satisfaction. Leaving the fold means multiple losses, including the loss of friends and family support at a crucial time of personal
transition. For many people who leave their faith, it is like a death or divorce. Their ‘relationship’ with God was a central assumption, such that giving it up feels like a genuine loss to be grieved. It can be like losing a lover, a parent, or best friend who has always been there.” (Winell, 2011).

Most of the participants in this study share these experiences. The trauma that they experience is that of loss of fellowship with God and their friends at church.

Caregivers with the help of scriptures must encourage the mothers to continue attending worship services and being involved in other church activities despite what happened to their daughters. This will assist them in overcoming the trauma of loss of fellowship with God and friends that they are experiencing.

4.4.2 Loss of trust in the church leaders.

The theme of loss of trust in the church leaders emerged and was prominent amongst most of the participants (the mothers). This came about as a result of the church leaders violating their pastoral role by defiling their daughters. In his article ‘Trust in Church Leadership’ which was published in 2012, Tim Woodroof states that a failure in character results in loss of trust. Character is a sufficient basis for trust. In friendship, for example, it is enough to know you are in a relationship with a person of good character, someone who will tell you the truth and demonstrate fidelity, someone who is genuinely interested in your well-being. He further states that there is no level of trust possible without some level of confidence in the integrity, humility, honesty, and faithfulness of the person with whom we are in relationship. He illustrates this point in the table below:

<table>
<thead>
<tr>
<th>Basis for Trust</th>
<th>Definition</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Character</td>
<td>Integrity, humility, honesty, and fidelity consistently</td>
<td>Friendship</td>
</tr>
</tbody>
</table>

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In the same article, Woodroof goes on to say that trust in someone’s character relies on more than seeing occasional flashes of good qualities, trustable qualities, in another. It grows and strengthens when those qualities are seen consistently, persistently, across time and under various circumstances. Character is the term which is used to describe people who have good characteristics and live them out characteristically. And trust is the response which is gladly given to charactered people.

The researcher agrees with Woodroof and wants to reiterate the importance of having good character on the part of church leaders in and outside the church in order to be trusted. It is only their good character that will motivate the people that they lead to trust them. The importance of character on the part of church leaders is also emphasized in the New Testament. Repeatedly the New Testament emphasizes on character when choosing an overseer. In Timothy 3:1-7, Paul says, “Here is a trustworthy saying: Whoever aspires to be an overseer desires a noble task. Now the overseer is to be above reproach, faithful to his wife, temperate, self-controlled, respectable, hospitable, able to teach, not given to drunkenness, not violent but gentle, not quarrelsome, not a lover of money. He must manage his own family well and see that his children obey him, and he must do so in a manner worthy of full respect. He must not be a recent convert, or he may become conceited and fall under the same judgment as the devil. He must also have a good reputation with outsiders, so that he will not fall into disgrace and into the devil’s trap. In the same way, deacons are to be worthy of respect, sincere, not indulging in much wine, and not pursuing dishonest gain. They must keep hold of the deep truths of the faith with a clear conscience. They must first be tested; and then if there is nothing against them, let them serve as deacons.” In Titus 1:6-9, he says, “An elder must be blameless, faithful to his wife, a man whose children believe and are not open to the charge of being wild and disobedient. Since an overseer manages God’s household, he must be blameless—not overbearing, not quick-tempered, not given to drunkenness, not violent, not pursuing
dishonest gain. Rather, he must be hospitable, one who loves what is good, and who is self-controlled, upright, holy and disciplined. He must hold firmly to the trustworthy message as it has been taught, so that he can encourage others by sound doctrine and refute those who oppose it.”

The participants in this research study developed less trust in the church leaders because of some church leaders who exhibited a failure of character when defiling their children. When asked how they felt about developing less trust in the church leaders, they all responded by saying that they felt bad. This is because they all depended on them (church leaders) for their spiritual guidance. The participants in this research had a problem of lacking someone to guide them spiritually and to protect them since they had developed less trust in the church leaders for defiling their children. As a result of the church leaders defiling their children, the mothers lived with fear of all the church leaders, and this fear generated isolation, loneliness, and self-imposed silence.

The caregivers can do several things to restore the mothers’ trust in the church leaders. To understand the mothers’ experiences and emotions, the caregivers need to listen carefully. The mothers urgently need someone to hear them out, to respect and to accept them unconditionally. To trust the church leaders after the abuse of their daughters may be too difficult. As they share their pain, they can move out of the emotional isolation into genuine fellowship with other caring church members. In this way they can experience the return of the trust in the church leaders.

Since trust can be re-established even in the wake of serious blunders caregivers should assist the mothers to forgive and continue trusting the church leaders despite what happened to their children. This they can do by telling the mothers that all of us have momentary lapses and failures of judgment. None of us live up to our principles perfectly. Character defects can be healed. Trust can be re-established even in the wake of serious blunders (Woodroof, 2012).
4.4.3 Feeling of anger towards the perpetrator.

There is a theme of “feeling of anger towards the perpetrator” that came out of the data. Anger is a reaction to a displeasing situation or event (Graham, 2002). According to Carter (1993) in his book ‘the anger work book’, the term anger is used to describe a number of expressions such as frustration, irritability, annoyance, blowing off steam. Anger develops as a result of unfulfilled wishes, and manifests itself in a desire to change, contest or destroy the situation, coupled with negative behaviour and a loss of self-control. There is a link between anger and frustration: a desire is thwarted leaving a person with a feeling of powerlessness and unattainability. In many cases, anger is ignited when the person perceives rejection or invalidation. The angry person feels that his or her dignity has been demeaned. Anger is excessive or uncontrolled if it leads to outbursts of temper or bad language, bitterness or hostility. Anger can also cause harm to other people.

Davies (1995:404) found that all parents whose children were sexually abused, reported feelings of anger towards the perpetrator and sometimes to his /her family. This anger could become a serious preoccupation and may prevent parents from effective functioning in the family system. There could also be accompanying feelings of guilt if the parents feel they have not sought revenge for the sake of the child. Unresolved parental anger relating to the abuse and the abuser, diminish the ability to cope with the sexual abuse of the child.

It is natural for parents to be angry with the perpetrator. In the researcher’s opinion, fathers in particular would often like to strike out physically at them. They need to recognise that this is the result of a sense of powerlessness, so they should be assisted in exploring their anger in a positive way.
The participants in this research study have developed anger towards some church leaders for defiling their children. They projected the feelings of frustration, anger and hatred towards the perpetrators of child defilement. They considered these people to be bad people who are destroying the future of their children by defiling them. One of the mothers had this to say in expressing her anger towards the deacon of her church who defiled her daughter:

I feel like killing him each time I see him. To me, he is no longer a person, he is an animal.

As people who have been angered by the defilement of their children, the mothers need to go through a process of healing similar to their children who directly experienced the abuse. It is helpful to see this process from the perspective of the familiar phases of grief as outlined by Elizabeth Kübler-Ross (1969). This grief model will help the mothers deal with the feelings, reactions and ways of coping with the abuse. The phases as outlined by Kübler-Ross are:

- **Denial or emotional numbness** - This is a natural defense to protect the person from reality. It is a normal reaction to rationalize overwhelming emotions. Otherwise, the grief may overwhelm the mother, and normal function would be impossible. Over a period of time, however, she can face the reality and recognize that nothing can undo the loss. Denial is a temporary response that carries people through the first wave of pain.

- **Anger** - Anger can be directed at everyone involved in a situation. Grief is an emotional state, and a person is vulnerable to illogical thought processes and a lack of objectivity and clarity of thought. Anyone can become the focus of the anger. Mothers may be angry at perpetrators, themselves, victims and anyone else involved in the process.

- **Guilt** - Guilt is inevitable with any grief. In this case, mothers are vulnerable to intense and long-term guilt as they blame themselves for not protecting their children.
rethink situations, events, or lifetimes, looking for clues to how they may have known or should have known. Guilt can change to depression and even despair unless processed through.

- **Depression** - Depression is a normal grief reaction and may feel like a heavy cloud hanging over your life. Depression is paralyzing and can sap energy, motivation, and hope. Left untreated, depression can affect jobs and other responsibilities and destroy relationships. When depressed, mothers may seek unhealthy solutions, such as alcohol or drugs, or isolate from the support desperately needed at this time. If mothers are depressed following the disclosure of a child's abuse, it is important to get professional help.

- **Acceptance** - Eventually acceptance of the loss occurs. However, this does not mean that life goes back to what it was before. True acceptance is accepting life on life's terms, which means life as it is, in reality, incorporating positives and negatives.

According to Kubler-Ross, anger is important as a process of healing in trauma counseling. Pastoral caregivers should accommodate people with feelings of anger in order to be helpful caregivers.

Pastoral caregivers should encourage mothers affected by child defilement to admit feelings of anger and helplessness; abandon methods of revenge; confess destructive behavior; change use of language; try to identify the cause and origin of frustration; make a decision about more constructive behaviour and set a goal to find how to communicate about what triggers the frustration (Louw, 1998).

The caregivers should help the mothers to deal with their own feelings of guilt, blame, inability resentment and anger before they are able to assist the abused child during the healing process.
4.4.4 Feelings of stress.

A theme of feeling of stress also arose. Some of the mothers reported experiencing stress since the disclosure of defilement of their children. Stress affects brain and neurochemical processes, body and immune system function (Segerstrom, 2004). When stress is chronic, a mother lives in a state of anxiety, resulting in additional changes in biochemical processes. Chronic stress, affects memory, mood, and ability to be attentive. As a result of chronic stress, the immune system is deregulated, resulting in increased risk of physical illness (www.mosac.net). Four mothers reported increased illness following disclosure of their children’s defilement, experiencing more colds, viruses, and other infectious illnesses. This is in accordance with some authors such as Manion, Firestone, Wells, and McIntryre (1996) who have stated that parents may display various symptoms in response to the child’s sexual abuse. Sgroi (1978) listed job disruption, physical illness, eating disturbances, sleep disturbances and sexual problems between partners. Manion et al. (1996) stated that mothers experience greater overall distress, poorer family functioning and lower satisfaction in the parenting role. One of the mothers had this to say as a result of having stress:

Since the defilement of my daughter was revealed to me my blood pressure has not come down completely.

Another mother said the following:

I have lost weight because I have been failing to eat since I learnt of my daughter’s sexual abuse by our own pastor.

Pastoral caregivers must assist the mothers to deal with stress. This can be done by assuring them that despite being sexually abused, their daughters still have a future. The caregivers
should assure the mothers that their daughters can still continue with their education and find a good job in future.

4.4.5 Feeling of guilt.

There is a theme of feeling guilt that came through. Some mothers felt guilt for not having done something to protect their daughters from being defiled. They believe that they are responsible for their daughters’ defilement and that they are bad persons. The following are the words of one of the mothers:

I wish I was there when my daughter was being molested by this evil man. I would have stopped him by shouting for help.

Another mother had this to say:

I wish I had not left my daughter to the care of our pastor’s family. My daughter was not going to be defiled by our pastor.

The guilt feelings expressed above by the two mothers are in line with what Coleman says about guilt in his book ‘Guilt’. Coleman states that “the second type of guilt is a result of society’s teachings, expectations and demands. Most of us have an inbuilt concept of right and wrong and if we trespass according to that inbuilt concept then we feel guilt.” (1982:11).

The mothers in this study felt guilty because there is a shared understanding of the mother’s responsibility towards her child in society. A mother is expected to protect and care for the child and to a certain extent know the whereabouts of the child (Poggenpoel & Myburg, 2003). When a child is defiled the blame tends to fall on parents particularly the mother because of the responsibility bestowed on her. This is the more reason why the mothers in this
research study feel guilt and think that they could have done something to protect their children from being defiled.

The belief that mothers have of being responsible for the defilement of their daughters by a church leader lies at the root of much emotional disturbances in them, and they can carry these feelings throughout their lives if therapeutical intervention is not initiated. Therefore, pastoral caregivers should help the mothers to deal with the guilt feelings as they care for them. This can be done by assuring them that what happened to their children is similar to what happens to people whose houses are broken into and their goods stolen at gun point. There was nothing, or little, they could do about it. Similarly someone broke into their children’s lives and stole something precious from them. It does not matter whether the perpetrators used force or trickery; the point to bear in mind is that they have stolen from the children. There is, therefore, no reason why they (the mothers) should blame themselves for the sinful action of another person. The pastoral caregivers can also remind the mothers to always remember that a lot of abusers will want to make them feel guilty. Their spiritual enemy, the devil will also want them to feel guilty as this will serve his purpose well. The caregivers should also assure the mothers that it is not their fault that their children were defiled but that it was the fault of the perpetrators who were irresponsible by abusing the power that had been bestowed on them by the church. Further, they should make the mothers understand that even though their daughters have lost their sexual innocence by being defiled, they are still valued as human persons, image bearers of God. The caregivers should affirm and emphasize that their defiled daughters are still God’s children, members of the “chosen people, a royal priesthood, a holy nation, a people belonging to God.” (1 Peter 2:9).
4.4.6 Worried that their children have lost their virginity.

The theme of loss of their children’s virginity also arose. All the mothers were devastated that their children had lost their virginity as a result of being sexually abused. A virgin is a girl who has not had sexual intercourse with a man. Loss of virginity from a physical point of view, therefore, speaks of the virgin sleeping with a man. This is normally marked by the breaking of the hymen which is a covering membrane found at the entrance to the vagina. However, the researcher must point out that the hymen can be broken biologically and not necessary through sexual intercourse. For instance this may happen after a fall or jump or even riding a bicycle and so forth. If the hymen is broken by means other than sexual intercourse, this must not be interpreted to mean virginity has been lost.

Loss of virginity has also got a moral and spiritual connotation. God’s law and any good society require that a girl keep herself pure by not indulging in sex before marriage. The spiritual and moral connotation of virginity should, therefore, be understood to mean the virgin is one who has not willingly given up her virginity in clear defiance to God’s law. There are indeed many girls who will willingly give in to illicit sex. This is where pastoral caregivers should make mothers clearly understand that their children’s case did not involve a willing indulgence in the act of sex. As already stated, defilement involves forcing or tricking one into sexual intercourse. It is an act of robbery. This means that from God’s perspective, He does not hold the sexually abused children accountable for losing virginity if they were genuinely sexually abused. Deuteronomy 22:25-27 says, “But if out in the country a man happens to meet a young woman pledged to be married and rapes her, only the man who has done this shall die. Do nothing to the woman; she has committed no sin deserving death. This case is like that of someone who attacks and murders a neighbour, for the man found the
young woman out in the country, and though the betrothed woman screamed, there was no one to rescue her.”

In the same vein, any normal society should not blame the sexually abused children for the loss of virginity arising from a genuine case of sexual abuse. God will look at the abused children and treat them just as if they have not lost their virginity because they have not disobeyed His command regarding sex outside marriage. They did not willingly give in to sex before marriage. Meaning there is no need to feel dirty, sinful and condemned before God and society.

Pastoral caregivers should also encourage the mothers to freely talk about the experiences of their sexually abused children and no one will point fingers at them. Any responsible man who is thinking of marrying their children will treat them just as if they were virgins and they will not have any doubts about their morality on account of their past experiences of sexual abuse.

4.4.7 Worried that their children might have contracted HIV.

A theme of being worried that their children might have contracted HIV also came through. Almost all the mothers expressed worry that their children might have contracted HIV as a result of being defiled. This worry came about as a result of the wide spread belief which is among many black African men that having sex with a virgin will cure HIV and AIDS. In Zambia this mis-information is being spread by local traditional healers. This belief has led to many children who were sexually abused to test positive later on. HIV is a virus spread through body fluids that affects specific cells of the immune system, called CD4 cells, or T cells. Over time, HIV can destroy so many of these cells that the body can’t fight off infections and diseases. When this happens, HIV infection leads to AIDS.
Pastoral caregivers must help the mothers to deal with the worry that their children might have contracted HIV and AIDS as a result of being defiled by encouraging them to take their children for a Voluntary Counselling and Testing (VCT) for HIV. VCT is when a person chooses to undergo HIV/AIDS counselling so that they can make an informed decision about whether to be tested for HIV. Many governments are encouraging their people to go for VCT for HIV. They believe that if many of the people get tested, even though they may not be sick, this will help to lessen the amount of stigma associated with the HIV test. Also, if the people find out at an early stage that they are infected with HIV, they can:

- Learn more about the virus and how it effects their body.

- Look after their health so that they stay as healthy as possible for as long as possible.

- Get information and counselling around how to live positively with the virus. This means learning to accept the fact that they are HIV-infected, seeking emotional support, eating a healthy diet, learning how to control the amount of stress in their life, making sure they don’t become re-infected, and planning for the future.

- Learn to recognize the signs of opportunistic infections so that they can get them treated promptly.

- Find out what resources are available within their community to help them manage their HIV status.

- Find out about prophylatic drugs. These drugs do not cure HIV/AIDS, but can prevent them from getting some opportunistic infections that are common with people living with HIV/AIDS eg. T.B and some kinds of Pneumonia.

- Access Nevirapne. This is a drug available at a number of hospitals and clinics that lessens the chance of a pregnant mother passing the virus onto her baby.
- Get emotional support by seeking counselling and joining support groups.

- Make sure that they don't infect anyone else or get re-infected themselves.

- Learn how to manage the stress in their lives.

Voluntary Counselling and Testing for HIV usually involves two counselling sessions: one prior to taking the test known as "pre-test counselling" and one following the HIV test when the results are given, often referred to as "post-test counselling".

4.4.8 Having a feeling of shame.

The theme of having a feeling of shame also arose. Almost all the mothers reported having the feeling of shame as a result of their children having sex with a church leader whom everyone respected and looked up to in the society. They felt that everyone was blaming their children for having given in to the church leaders and having sex with them. This made the mothers to have a feeling of shame such that they could not interact freely with people surrounding them. The action displayed by the mothers after having a feeling of shame is in line with how Mc Clintock (2001) defines shame. In his book ‘sexual shame’ Mc Clintock defines shame as the feeling of unworthiness and the tendency to avert the eyes, to hang the head. Shame made the mothers to withdraw from the society, they could not look into the eyes of people around them and they could not walk around with their heads high. As a result of their children having sex with a church leader, they felt unlovable by the society. In his book ‘Moving from shame to self-worth’ Wimberly defines shame as a feeling of being unlovable and that one’s life has a basic flaw in it (Wimberly 1999:11).

The researcher agrees with Wimberly that a feeling of being unlovable is caused by a flaw that one has in his or her life. People can be ashamed of many things such as mental illness, alcoholism, suicide in the home, homosexuality or HIV. All these are flaws which can make
one feel shame and unlovable in society. In the case of the mothers, the basic flaw was the sex encounter that their children had with a church leader. This made them to have a feeling of shame and unloved by the society in which they lived.

Shame makes one to feel that he or she is wrong and reprehensible. The surrounding society adds fuel to this feeling. If one is depressive, if one’s mother or father drinks, if one’s brother is gay or one’s sister is lesbian, or if one’s daughter or son is HIV positive, then the danger is there that society and the social network will make one to feel ashamed and unlovable. Despite the fact that their children were just forced into having sex by the church leaders, the gossip and the scorn from the society made the mothers to feel that their children were wrong for having sex with a church leader. Shame is more than embarrassment, more than humiliation, more than an offended modesty, more than hiding one’s face and wishing that he or she could sink through the floor. Shame is an attack on the individual’s self-respect and human dignity. In this case the mothers’ self-respect and human dignity were attacked and eroded.

Pastoral caregivers should help the mothers to deal with the feelings of shame and being unloved by letting them know that in the life and death of Jesus Christ, God has reconciled people with their own humanity. This means that people can be what they are-for better for worse. Whoever people are, whatever happens in their lives, God is with them and loves them. They have a dignity and a worth that is God given.

Pastoral caregivers should also encourage the mothers not to shrink in shame; they must straighten up and look their neighbours in the face. They must not close in on themselves; they must dare to be open. They must not let themselves be broken down; they must build themselves up with confidence in life and in the living.
Pastoral caregivers should also help the church leaders (perpetrators) to refrain from defiling children as this makes church members especially the mothers of the defiled children to be broken, to lose trust in them and consequently stop worshiping God. The pastoral caregivers must help the church leaders to live exemplary lives worth their calling. This they can do by respecting every member of their congregations irrespective of their age.

**4.4.9 Dissatisfied with their parenting role.**

Parenting roles entail that parents are able to provide some of the following needs to their children:

- Physical care to fulfil the needs of the child. This implies proper food, fresh air, good lighting, enough sleep, recreation time, etc.
- A safe, nurturing and supportive environment that allows the children to grow healthy. For an optimal development, children need: an adequate physical home environment; a tolerant and positive atmosphere; conditions for positive changes and improvements; opportunities to explore and experiment in this environment; consistent routine; etc.
- Protection of their children, to warn them by telling them what is safe to do and what isn’t, before they venture out on their own. They should teach their children the difference between right and wrong, and that wrong may be harmful both for him/her and for others. Their goal is to protect their children from dangers to which they may be vulnerable and to keep them safe.

As a result of their children being defiled, all the interviewed mothers felt that they failed as parents to teach their children on how to care and protect themselves from harm which can come their way. They also blamed themselves for not having been there to protect their children when they were being defiled. One of the mothers had this to say,
I don’t deserve to be a mother because I have failed to teach my children on how to run away from danger. If I had taught them enough, my daughter was not going to be defiled by that evil man.

From the discussion, the researcher observed that all the mothers were living in pain because they felt that their daughters were defiled because of their failure to teach them how to look after themselves and run away or scream whenever there was something bad happening in their lives.

Pastoral caregivers should help the mothers to deal with the feeling of pain and inadequacy in their parenting roles by assuring them that their daughters were defiled not because they failed to teach them how to protect themselves, but because the perpetrators tricked their daughters and forced their way onto them.

4.4.10 Marital relationship problems.

The theme of marital relationship problems also came through. Cross-tower (2002:335) points out that some parents blame each other for their child’s sexual abuse. Such arguments between spouses about the degree of responsibility for the child’s abuse could lead to conflict in their relationship. Davies (1995: 403) suggests that all parents seem to experience problems at least in the period immediately following child sexual abuse, but some of them are able to make adjustments and function well after this. In this research study, all the mothers reported having marital problems with their husbands as a result of their daughters being defiled by the church leader. Their husbands blamed them (the mothers) for not being responsible enough to protect their daughters from being defiled. This brought some quarrels and even fighting in their families. The mothers experienced added stress and were less likely to cope with this. Agencies involved in providing service after child sexual abuse have attended to the child and, to some extent, to the mother, especially if she had been abused by the same offender. However, they rarely attended to the marital or family relationship problems.
Pastoral caregivers should attend to the family relationship problems and help them understand that it was not the fault of the mother nor the father that their daughter was defiled. They should make them understand that their daughter was defiled because she was just tricked and forced by the greedy and uncaring church elder. The caregivers should also assure the family that although their daughter was defiled, she was still a human being and had a bright future.

4.4.11 Relationship problems with their daughters.

The theme of relationship problems between the mothers and their daughters also arose. The mothers blamed their daughters for the abuse. They asked them why they did not fight or run away when they were being defiled. Manion, McIntyre, Firestone, Ligesinka, Ensom and Wells (1996:1096), state that parents may direct the anger they feel for the perpetrator at the child. Some parents may ask their children why she did not fight or run away. In doing so, they are indirectly blaming children for their own abuse.

As a result of their daughter’s experience of defilement, the mothers also blame them for losing their virginity. The mothers perceive their daughters to have lost their innocence because of the defilement. There has been a change from an innocent child to a knowing adult.

The pastoral caregivers should help the mothers to still perceive their daughters as innocent persons. They should help them understand that their daughters did not consent to be defiled, they were just forced by the perpetrators. The caregivers should assure the mothers that despite losing their virginity, their daughters still have a bright future of completing their education, being employed and getting married.
4.5 PRELIMINARY CONCLUSION.

In this chapter, the researcher explored some of the effects and the consequences of child defilement by a church leader which were experienced by mothers. He was shocked to learn about the devastating effects that the mothers go through as a result of the disclosure of defilement of their children by a church leader. What is surprising is the fact that this problem of child defilement by church leaders is continuing and the church and the society at large are not voicing against it.

In the next chapter, the researcher is going to explore real stories which are attached to unreal names. From these stories, the readers will find the trauma caused by child defilement experienced by mothers. In the following chapter, readers should also expect to see dialogues between the researcher and co-researchers. The chapter also explores the reflections of the researcher on all the stories of the mothers affected by child defilement by church leaders.
CHAPTER FIVE

SHARING STORIES OF MOTHERS AFFECTED BY CHILD DEFILEMENT.

In this chapter, the researcher is going to share three stories of three mothers who have experienced the trauma of child defilement. The story of Mkhani for example (not real name); when it was revealed to her that her daughter was repeatedly defiled by her pastor she became devastated. The matter was brought before the church council of her church. During the hearing, the church elders of the council gave witness in support of the pastor who had defiled her daughter. The elders provided her and her daughter no support and did not seek to comfort them. They were all on the side of the one who had done horrible things to her daughter. Mkhani and her daughter were accused of making up the story and damaging the reputation of the church. This devastated her even more. This was the beginning of the journey of trauma.

5.2 CASE STUDIES.

In this chapter three case studies will be shared and discussed. Case studies are stories which help present realistic, complex, and contextually rich situations and often involve a dilemma, conflict, or problem that one or more of the characters in the case must negotiate. A good case study, according to Professor Paul Lawrence is:

“The vehicle by which a chunk of reality is brought into the classroom to be worked over by the class and the instructor. A good case keeps the class discussion grounded upon some of the stubborn facts that must be faced in real life situations.” (Christensen, 1981).

Although case studies have been used most extensively in the teaching of medicine, law and business, case studies can be an effective teaching tool in any number of disciplines. As an instructional strategy, case studies have a number of virtues. They bridge the gap between theory and practice and between the academy and the workplace (Barkley et al., 2005). They
also give students practice identifying the parameters of a problem, recognizing and articulating positions, evaluating courses of action, and arguing different points of view.

In this research study, the experiences of the mothers enabled the researcher to understand what they went through after the revelation of the defilement of their children by a church leader. After each story the researcher will share some of his reflection on them. These stories narrated by the mothers affected by child defilement, exposed the researcher to the pain that they suffered. In all the three case studies, the researcher used the first person singular as the three mothers shared their stories detailed below:

5.2.1 Story from Mkhani.

This is the story of Mkhani (not real name). She was one of the mothers who experienced the pain when it was revealed to her that her child was repeatedly defiled by their congregational pastor. When she narrated what exactly happened, she related her story in the following way:

It all started when my husband was transferred at his place of work from Lusaka to go and work in Chipata in the Eastern province of Zambia. My husband works in the ministry of health as a clinical officer and was transferred to go and work at one of the clinics in Chipata district. The time we were relocating to Chipata, our 14 year old daughter was about to write her grade 9 final examinations. We could not relocate with her to Chipata as this could have meant disturbing her from writing her examination. So we decided to leave her in the care of our congregational pastor’s family with the idea that after writing her examination she was going to join us in Chipata. The house the pastor and his family were living in was two bedroomed. The pastor and his wife slept in one bedroom, the pastor’s mother whom they were staying with was using the spare bedroom. The pastor’s two daughters were sleeping in the living room. The time that we left our daughter in the care of the pastor’s family, his wife was not at home. She had gone to Chambeshi one of the towns on the copper belt of Zambia.
to take care of her mother who had suffered a severe stroke. Her mother was being kept by her immediate young brother who was working at Chambeshi mine. It was difficult for him and his wife to care for their ailing mother and so they summoned the pastor’s wife who was the eldest in their family to come and take of her. In the absence of his wife, the pastor slept alone in the bedroom. It so happened that in the middle of writing her examination, my daughter ran away from the pastor’s wife to join us in Chipata. The reason was because the pastor was sexually abusing her in the night in his house. My daughter narrated to us that one night around 02:00 hrs, the pastor went over to the living room where she was sleeping with his two daughters. He woke her up and immediately covered her mouth. He lifted her into his bedroom and told her that he wanted to pray for her so that when she goes to school in the morning to write her examinations she was going to do well. He threatened her he would beat her if she cried out. He started touching her body and finally stripped her off all the clothes she was wearing. He took off the pants he was wearing and got on top of her. The pain was excruciating and she started bleeding. She had not yet started having her periods, but this abuse triggered them off. She cried uncontrollably until day break. The two daughters of the pastor asked her why she was crying, she could not answer them because the pastor had threatened to kill her if she ever told anyone about what had happened. In the morning, instead of going to School to write the examination, she decided to come to us in Chipata. She missed the examination that day and the following day because on this day we traveled back to Lusaka, an event of hurt and trauma in my life. When we arrived in Lusaka we went to see our church secretary who assured us that he was going to convene the church executive committee meeting to look into the matter. This meeting was chaired by a pastor of another congregation of the same church from within Lusaka. What happened during the discussions was heart breaking to me. The pastor and all the members of the executive committee were all on the side of our pastor who had defiled my daughter. They all blamed my daughter of
falsely accusing the pastor and tarnishing his name and that of the congregation, another event of hurt and trauma in my life. The pastor was found not guilty and I was ordered not to leave my daughter in his care lest my daughter would accuse him falsely again. We were dismissed and went to the school were my daughter was writing her examinations. I explained to the head teacher what had happened to my daughter which made her to miss the examinations for two days. The head teacher was hurt and very sorry for my daughter. He anyway allowed her to write the remaining three examination papers. He suggested I leave my daughter in the care of the deputy head teacher. She was a widow and was living with her three daughters. After completing her examinations, my daughter joined us in Chipata. I took her to the hospital because she was complaining of stomach pains. We asked for a full medical checkup. She was diagnosed with a sexually transmitted disease called gonorrhea, another event of hurt and trauma in my life. The clinical officer told us that our daughter was lack that she did not conceive when was sexually abused. I cannot hide you up until now I am hurt such that I have even stopped going to church. I tried to change churches, that did not help because each time I saw the pastor and the church elders in that new church memories of how I and my daughter were treated in my congregation are relived. No one from my congregation has bothered to follow us up to come and give us comfort or find out as to why we do not go to church.

Example of therapy skills that the researcher used when debating with Mkhani.

After narrating the story, Mkhani started crying. The hurt of her daughter’s defilement by her pastor and the unfair handling of the case by the congregation’s executive committee was relived. She sought for help from the researcher. Therapy was handled in the following way:
Researcher: I am very sorry for what happened to your daughter and the treatment that you received from the congregational executive committee (handing her the handkerchief to wipe out her tears).

Mkhani: Silent (uncontrollably shedding her tears).

Researcher: Silent (waiting for Mkhani to stop crying).

Mkhani: I am sorry pastor for my behavior, it is just that each time I am asked to talk about my daughter’s defilement the hurt comes back to me and I can’t control myself, I always cry. I don’t know what I should do in order to forget about this painful incident.

Researcher: I understanding what you are going through Mkhani and I share your pain. Is it fine with you if we talked about this issue now and see how we can be helped together?

Mkhani: Yes pastor, it is fine with me, we can talk.

Researcher: I know how you feel about the pastor who defiled your daughter and the pastor who sided with him when the issue was brought before the congregational executive committee meeting, have you thought of approaching the two pastors and share with them about your feelings?

Mkhani: No I haven’t, I don’t think I can do that. They have really injured me and I don’t think I want to face them.

Researcher: Shouldn’t you try to approach them and share with them about your situation?

Mkhani: Pastor, I can’t see myself doing that. Do you really think I should go to them and share my pain and my hurtful feelings with them?

Researcher: I think perhaps you should try to go to them and share with them. Disclosing your situation to them may help you to pour out the anger that you have towards them. This will help you to avoid going into depression. Your
approaching them may also help them to realize that to sexually abuse a child is painful and hurtful to both the victim and the parent. They may also realize that to sexually abuse a child is to betray the role of the pastor. The job of the church leaders is to nurture the flock, to protect them when they are vulnerable, and to empower them in their lives-especially children. The people assume they can trust the church leaders not to harm them, because they are church leaders. Sexual abuse betrays that trust.

Mkhani: I see sense in what you are saying, I will make an appointment with them. I hope they will listen to what I will say.

Researcher: Of course they will listen. They are pastors and they are trained to listen to everyone’s problems regardless of who the person is.

Mkhani: Thank you for your advice and encouragement.

Researcher: You are welcome.

5.2.1.1 The researcher’s reflection on Mkhani’s story.

After Mkhani had explained the whole story on how her daughter was defiled by their pastor and how she was treated when the issue was brought before the congregational executive committee meeting, the researcher reflected on what she had said and what it meant to him as a pastoral caregiver. Firstly, Mkhani’s trauma experience started when she heard that her daughter was defiled by their congregation’s pastor. She blamed herself and her husband for having left their daughter in the care of the pastor. She felt hurt because her daughter had lost her virginity and experienced sexual intercourse when she was still young and not ready for it.

Secondly, Mkhani experienced trauma when she heard from her daughter that she had missed writing examinations on the day that she traveled to Chipata. She felt that that was the end of her daughter’s future. Finally, the siding of everyone, during the congregational executive
meeting, with their pastor who had done a bad thing to her daughter broke her. She had confidence that the meeting was going to help by implicating the pastor for defiling her daughter. To her surprise, the meeting sided with the pastor and blamed her daughter for having falsely accused the congregational pastor. This made her feel unloved, uncared for and abandoned together with her daughter. This also made her feel unsupported and unprotected.

The researcher realizes, through Mkhani’s story, that mothers affected by child defilement needed trauma counselling in order to heal and come to terms with the defilement experienced by their children. The researcher detected a lack of love and caring on the part of the pastor who chaired the congregational executive committee meeting. This made Mkhani feel rejected and lonely without anyone to run to and help her with her daughter.

The researcher realized that there was no pastoral care from the pastor and the members of the congregational executive committee meeting which made Mkhani to feel rejected and unprotected. It was more painful to her to see that the pastor and the members of the committee were all on the side of the pastor who had defiled her daughter. This action was more traumatizing to her. This was because the church leaders were regarded to be spiritual fathers who should identify themselves with those whose lives have been broken in society.

The researcher is of the opinion that a response of support and compassion and a willingness to hold the pastor who had defiled her daughter accountable could have helped Mkhani to heal from the abuse. Mkhani’s story connected well with Mtambe’s story in case study two.
5.2.2 Story from Mtambe.

This is a verbatim story of Mtambe, she related it in the following way:

My daughter was defiled by our section church elder while attending lessons for mathematics and science subjects in his house. She had written her grade 9 examination the previous year. Out of the 9 subjects that she had written, she didn’t do well in mathematics and science subjects. These two subjects made her not to qualify to go to grade 10. She was 14 years old at the time she wrote her examinations. I and my husband decided to have her repeat grade 9 instead of letting her go into grade 10 without qualifying. To help her with mathematics and science, we decided to put her on extra lessons. We contacted our section church elder who is a secondary school teacher at a school which is not far from where we stay. He agreed to be teaching her on Saturdays and Sundays in the afternoon at his house in his study room. We agreed to pay him K500 every month up to the time that my daughter wrote her examinations. It was while attending these lessons that the elder repeatedly defiled my daughter. We discovered this when my daughter started refusing going for extra lessons. One Saturday afternoon she revealed to me why she didn’t want to go for extra lessons any more. She revealed that when no one was at home, the elder was always forcing her to have sex with him instead of teaching her. She told me that the elder started having sex with her barely two weeks into her extra lessons. She narrated that the first time that he defiled her, he told her that if she agreed to have sex with him, she was going to be intelligent and know mathematics and science without any problems. When my daughter gave in, he undressed her and made her to lie down. He also undressed, slept on top of her and inserted his penis into her vagina. Being the first encounter, it was painful and she screamed for help. Since there was no one in the house, no one came. When the elder had finished having sex with her, my daughter rose up from the floor and put on her clothes and walked out of the study room and came home. According to her, she had cuts on her private parts which took three days to heal. The elder
continued to have sex with my daughter the weeks that followed. Sometimes even when his wife and children were around in the house, he locked the study room door and pretended to be busy teaching her when in fact he was having sex with her. He threatened to kill her once she told anyone about what he was doing to her and so my daughter could not tell his wife nor me. When she revealed all this on this Saturday afternoon, I felt hurt and cried unceasingly. An event of trauma experience in my life. My husband came back from where he had gone and found me crying. He asked me why I was crying. I could not respond to him because I was still crying. He asked my daughter why I was crying. My daughter also could not respond to him. After I cooled down and had stopped crying I told him all what my daughter had narrated to me. It was like telling him that your father has passed on. He sat down and buried his head in his hands and remained quiet for almost 45 minutes. After he had gained some strength, he suggested that we immediately go to the hospital with our daughter to have her tested for HIV and pregnancy. After diagnosing her, we were told that our daughter had not contracted any sexually transmitted disease but that she had conceived. This message was shocking, painful and hurtful to both I and my husband such that I cried uncontrollably in the doctor’s office. Another event of trauma in my life. From the hospital, we went straight to the elder’s house to see him and his wife. When he saw us coming to his house with our daughter, he must have known that we had knowledge of what he was doing to our daughter. He wanted to run away but my husband was too quick and strong for him. He caught him and dragged him inside his house. Together with his wife we followed and sat in the living room. I narrated my daughter’s ordeal with him and about the results of the diagnosis from the hospital. His wife could not hold her tears, she cried uncontrollably while beating her husband in the head with her fist. My husband calmed her down and asked the elder whether what my daughter had narrated was true. In response, the elder just said please forgive me I didn’t know what I was doing. He pleaded with us to settle the matter between the two families and
not to take the matter to police nor to church. He offered to give us K50 000 and to take care of the pregnancy of our daughter and the baby. We said nothing on this offer. My husband concluded the discussion by saying that he was going to take the matter to church and thereafter to police. When the matter was brought before the church council, the elder was just suspended from all church activities for a period of 12 months. During this period, the elder was allowed to come to church on Sundays to worship. He was told that, after the suspension period was over he was going to resume his church duties as before. Another event of trauma in my life. I had expected the elder to be expelled from the church completely. Our congregational pastor pleaded with my husband not to take the matter to police but to settle it between the two families. Unwillingly and with pain in our hearts, we agreed. When the school where the elder was teaching heard what he had done to my daughter, they transferred him to another school in the Eastern province of Zambia. My daughter gave birth to a baby girl and we are keeping both of them here at home. I am still leaving in pain and hurt because my daughter has stopped going to school. This has even made me to continue hating the elder even if he lives far away in the Eastern province.

Some of the therapy skills in the case of Mtambe.

Like Mkhani, when Mtambe finished narrating her story, she sought help from the researcher.

Therapy was handled in the following way:

Researcher: I am sorry for what happened to your daughter.
Mtambe: Silent.
Researcher: I really feel for you and share your pain and hurt.
Mtambe: Thank you pastor (wiping out her tears from her face).
Researcher: Is it fine with you if we can talk about this issue?
Mtambe: It is fine pastor. In fact it will be helpful if my husband and my mother are also
included in the discussion. Their hearts have been broken as a result of what had happened to my daughter.

Researcher: Where are they?

Mtambe: My husband is in his study room and my mother is in her bedroom.

Researcher: Will they be willing to discuss this issue?

Mtambe: Yes they will, let me call them. (She goes to call them).

The husband to Mtambe and her mother entered into the living room where the researcher and Mtambe were having a conversation. After exchanging greetings, therapy continued in the following way:

Researcher: I am sorry for what happened to our daughter, Mtambe has narrated everything to me.

Mtambe’s husband: Thank you pastor. To tell you the truth, I haven’t been well since knowing that my daughter was a victim of sexual abuse while attending extra lessons. To make matters worse, instead of the church expelling the elder from the church, they just suspended him and assured him his position of eldership after 12 months suspension period. As a family we feel we have been treated unfairly.

Mtambe’s mother: What is hurtful to me is the fact that my granddaughter is no longer in School and has a baby without a father nearby to take care of her. It is really painful and hurtful pastor.

Mtambe’s husband: Also the school where this unfaithful elder was teaching, how can they just transfer him to another school instead of terminating his teaching service? Don’t they realize that they have transferred a problem to another school?
Mtambe: Pastor, I feel that we have not been helped in this matter. The church council and the school have both sided with the elder. How can they just let him go scot free? May be we should consider going to police.

Researcher: Once more, I would like to say I am very sorry for what happened to your daughter. It is really painful and I share your feelings over this matter.

Mtambe’s mother: It is really painful pastor and the church has not been helpful to us. even if we have all stopped going to church because of what no one has bothered to follow us up, not even the pastor.

Researcher: I know how you feel about the elder who sexually abused your daughter and the pastor who chaired the meeting which suspended the elder instead of expelling from the church, have you thought of approaching the pastor and share with him about your feelings?

Mtambe: No we haven’t, I don’t think we can do that. He has disappointed us and I don’t think we want to face them.

Mtambe’s husband: I don’t think I want to discuss this issue with him again. He will still side with the elder.

Researcher: Shouldn’t you try to approach him and share with him about your situation?

Mtambe: We can’t see ourselves doing that. Do you really think we should go to him and share our feelings with him?

Researcher: I think perhaps you should approach him and share with him. Disclosing your situation to him may help you to pour out the anger that you have towards him and the church elder. He may also be helped to realize that child sexual abuse is hurtful not only to children as
victims but also to their parents. This realization may also make him to reconsider the decision that they made when the matter was brought before the church council meeting.

Mtambe’s husband: I see sense in what you are saying, we will try to approach him.

Mtambe: I agree with my husband, we will see the pastor. As you have put it pastor, this may be helpful to us and to him.

Researcher: Please see him as soon as possible. As for your daughter, have you considered taking her back to School?

Mtambe’s mother: But she has a baby and they cannot accept her. She is now a mother.

Researcher: Your daughter is still very young and eligible to be at School. She can be allowed to be back at School. The law in Zambia allows such young girls to go back to School after giving birth. She is very lack that you, the grandmother are around. You will be looking after the baby while she is at School.

Mtambe’s husband: Thank you pastor for your advice. We will take our daughter back to School. Your coming has really helped us, thank you very much for your care.

Researcher: You are welcome.

5.2.2.1 The researcher’s reflection on Mtambe’s story.

After Mtambe had explained the whole story about how her daughter was defiled by their sectional church elder and the decision of the church council, the researcher reflected on what she had said and what it meant to him as a pastoral caregiver. Firstly, Mtambe’s trauma experience started when her daughter revealed to her that their section church elder was sexually abusing her while attending extra lessons. She blamed herself and her husband for having entrusted their daughter to the church elder. Like in the case of Mkhani, she felt hurt
because her daughter had lost her virginity and experienced sexual intercourse when she was still young and not ready for it. Secondly, Mtambe experienced trauma when the church council suspended the church elder instead of expelling him out of the church. Transferring the church elder to another School was another traumatic event for Mtambe. She expected the School to terminate the teaching service of the church elder. Finally, the conceiving of her daughter. To Mtambe, this meant stopping School. What traumatized her most was the fact that the teacher was already married and there was no way he was going to marry her daughter. This meant that they were going to shoulder the burden of raising the child themselves as a family.

The researcher realized, through Mtambe’s story, that mothers affected by child defilement needed trauma counselling in order to heal and come to terms with the defilement experienced by their children. The researcher detected a lack of love and caring on the part of the pastor who chaired the congregational church council meeting. This made Mtambe and her family feel unfairly treated. It was more painful to her to see that the church elder who had sexually abused her daughter was just suspended and assured of retaining his position after serving the suspension. The researcher is of the opinion that a response of support and compassion and a willingness to hold the pastor who had sexually abused her daughter accountable could have helped Mtambe to heal from the abuse. He is also of the opinion that teachers with unquestionable moral standards should be removed from schools in Zambia and have their contracts terminated. There have been numerous reports of such teachers impregnating pupils when they are expected to be the protectors of the children. This has turned schools into unsafe places, and this is causing parents of female pupils to have sleepless nights. They are not sure how safe their daughter will be in the hands of randy male teachers. The situation is even worse for those whose daughters are at boarding schools. For example, there was a report from Kazungula district of a teacher who had married and impregnated a girl whose
age was below 16 years. It was alleged that the teacher lured the girl into the marriage by promising her that he would be teaching her at home. In Kabwe there was a teacher who impregnated a girl and connived with school authorities to persuade the poor child not to report the defilement to police but settle it at home. The parents, probably driven by abject poverty, charged the defiler K7,000 and ordered him to meet the cost of the girl’s education.

If the relatives of the parents had not alerted the media about the conspiracy, the teacher would have got away with the heinous crime.

These are just some of the examples of the extent to which the teaching profession’s image has suffered. Then there is the issue of extra lessons. Teachers laze about during teaching hours but settle down to serious work after their official shift because they are doing it at a fee. Parents were being forced to pay for the so-called extra lessons during which teachers were teaching the children what they should have taught during the official periods. This practice posed a formidable barrier to education, especially at primary level as many poor parents could not afford the extra fees and the teachers did not feel any sense of guilt for depriving the children of these poor parents of their right to education. The ministry had intervened against this bad practice. It banned the extra lessons in Zambia. Then there is the issue of examination malpractices. Many teachers have been arrested for helping pupils to cheat during examinations through leaked question papers. Some of them were still appearing in court for being involved in examination malpractices. The bad teachers have unfairly tarnished the image of even the professional and hard-working teachers. At national level the harmful activities of some teachers have led to a fall in the standards of education. Year in, year out the Government of Zambia has lamented the poor grade seven, nine and 12 results in public schools, and experts have partly blamed the issues that the researcher has highlighted above.
In bringing out the above issues, the researcher wants to point out that child defilement by teachers is a big problem in Zambia which needs to be addressed in order to stop it from growing.

5.2.3 Story from Mfusha.

This is a verbatim story of Mfusha, she narrated it in the following way:

My 13 year old daughter was defiled by our pastor in his bedroom when he asked her to go and sweep in his house. On this fateful Saturday afternoon, I just saw my daughter washing her private parts and underwear when she returned from church where she had gone for choir singing practice. When I asked her why she was doing that, she told me that it was because of sweat. I was not satisfied with that response. I pressed on demanding for the truth. After sometime my daughter opened up and told me what had happened to her when they had finished their singing practice. She narrated to me that when they had finished practicing, our pastor who was at that time within the church premises asked her to go to his house and sweep. When she had finished sweeping in the living room, the pastor asked her to also sweep his bedroom. After my daughter had entered his bedroom, he followed her then locked the door and forced himself on her. He covered her face with his hands so that she did not know what he was doing. My daughter told to me that she just felt pain on her private parts. After she had started crying, the pastor stopped what he was doing and my daughter came home. She entered into her bedroomed and discovered that her underwear was stained with blood. She went into the bathroom and washed her private parts and the underwear because she didn’t want anyone to see it. During the time that the pastor was defiling my daughter, there was no one in the house. The pastor is not married, he stays with his mother and his brother who I think were out of the church premises to visit friends. When my daughter narrated the story to me it pained me and I started crying. An event of trauma in my life. My daughter also started crying. After I pulled myself together, I shared the story to my husband and to our
eldest daughter who had come to visit us from Kabwe. When they heard the story, they were both shocked and hurt. My husband suggested that we share the story to our church secretary before reporting to the police. We agreed and we went to see the church secretary. He suggested that the matter should be brought before the church council meeting before it is reported to the police. In the meeting, my daughter narrated the story exactly the way she had told me. The pastor was asked to exculpate himself from the allegations that my daughter had leveled against him. He denied having defiled my daughter. He told the meeting that he was being imprecated into something which he didn’t know about. He swore that he has never seen my daughter and that this was his first time that he was seeing her. To our surprise, the meeting believed him and blamed my daughter of trying to destroy his reputation. The meeting advised us not to go to the police as doing so was just going to tarnish the image of the church. Another event of trauma in my life. We went out of the meeting very disappointed and hurt. At home we had a discussion on the matter within our family, we noted that the meeting had unfairly treated us as a family. We decided to report the matter to the police. At the police station, we were referred to the victim support unit to which the pastor and the church secretary were summoned. After my daughter had narrated her story, the victim support unit police officer asked the pastor as to whether what my daughter had said was true. Like in the church council meeting, he denied having touched my daughter. He told the officer that he does not know my daughter and that she was imprecating him into something which he did not know about. The police referred the matter back to the church saying that this was a pastoral issue which needed to be resolve pastorally by pastors. We told the officer that we had already been to church and that the church was unfair in the way they handled the issue. It was like what we were saying was falling in deaf ears, he still insisted that we still go back to the church and ask the leaders who presided on the matter to readdress it. This was really painful and hurtful to us because we had thought that by going to the
police, justice was going to be done. Another event of trauma in my life. We went home again disappointed and hurt. We decided not to go back to the church council because we thought that it was going to be just a waste of time. The pastor was going to say the same thing that he does not know my daughter and that she had just imprecated him into something he didn’t know about. From that time, as a family, we have not set our feet in any church. We are still disappointed and hurt with what the pastor did to our daughter and the way the church handled the case.

Some of the therapy skills used in the case of Mfusha and her family.

Mfusha and her family sought help from the researcher, therapy was handled in the following way:

Researcher: I am very sorry for what happened to your daughter and the treatment that you have received from the church council committee.

Mfusha: Thank you pastor, it has really been difficult for us to cope with what has happened to our daughter.

Husband to Mfusha: We thought that by going to the police we were going to be helped. But instead of helping, they have added more pain to us. Now we feel there is nowhere where we can run to.

Researcher: I am very sorry to hear that and I share your pain and hurt. Did you say that the police advised you to go back to church and seek for the redress of the matter?

Mfusha: Yes pastor that is what I said.

Researcher: Have you thought of doing that?

Husband to Mfusha: No pastor, we can’t do that. They have injured us and I don’t think we want to face them.
Mfusha: Besides that they have already taken sides. They have already chosen to listen to the pastor than our daughter. Even if we went back there, are they going to listen to us?

Researcher: Shouldn’t you try to go back there and share with them about your situation?

Husband to Mfusha: Pastor, we can’t see ourselves doing that. Do you really think we should go back to them and share our pain and our hurtful feelings with them?

Researcher: I think maybe you should try to go to them and share your pain with them. Disclosing your situation to them may help you to pour out the anger that you have towards them. This will help to avoid going into depression. Even if the pastor has denied that he is not responsible for the defilement of your daughter, when the issue is readdressed they may be helped to realize that to sexually abuse a child is painful and hurtful to both the victim and the parent. They may also realize that to sexually abuse a child is to betray the role of the pastor. The job of the church leaders is to nurture the flock, to protect them when they are vulnerable, and to empower them in their lives-especially children. The people assume they can trust the church leaders not to harm them, because they are church leaders. Sexual abuse betrays that trust.

Mfusha: With what you have just said, I think it will be a sensible thing to do if we went back to the church and seek for the redress of the whole issue. I hope they will listen to what we will say.

Researcher: Of course they will listen. The church is there to listen to everyone’s problems regardless of who the person is.
Mfusha: Thank you for your advice and encouragement.

Researcher: You are welcome.

5.2.3.1 Reflection of the researcher on the experience of Mfusha.

The above case study of Mfusha made the researcher realise that some churches side with church leaders who have been involved in a child defilement case. They blame the children as victims for falsely accusing the accused church leader. This action traumatizes both the victim of defilement and the parents. They feel unsupported and unprotected by the church.

Like in the case of Mkhani and Mtambe, the church in the case of Mfusha also played a role in rejecting and isolating her and her family. By not listening and taking what her daughter was saying, the pastor and the church elders who presided over the case violated the nature and teachings of the church. The church by its very nature and teachings is a representative of Jesus Christ in ways of encouraging care, love, for the oppressed and victimized in society. In the same way that Jesus Christ identified himself with those whose lives were most broken, in the same way the church is called upon to identify itself with people whose hearts are broken and are traumatized. Mfusha and her family would have been helped if the church council meeting had believed what Mfusha’s daughter had said. Like in the case of Mkhani and Mtambe, Mfusha and her family would have been helped if the pastor who had defiled their daughter was held accountable for what he did. What Mfusha needed from the church council meeting was support, protection and justice.
5.3 TELLING AND LISTENING TO STORIES.

African culture is, in many ways, a culture of storytelling. Proverbs and metaphorical sayings, together with the art of storytelling, are an important part of the cultural tradition (Engedal, 2008). According to pastoral theologian, Abraham Adu Berinyuu, storytelling is part of the “psychodrama of everyday life in Africa.” (Berinyuu, 1989:72). We learn to know our own history through stories told in our family, in our clan or social group and in our national fellowship. Through these stories important elements in the formation of our worldview, moral values, social behavior and self-understanding are created (Engedal, 2008).

Story telling plays a vital role in people’s lives. This is because people live their lives sharing stories. Through stories of experiences people are able to interpret problems facing human beings, in this case mothers affected by child defilement by church leaders, and discuss possible alternatives to their problems. Through telling stories the social realities are found. A story communicates a moral, a broad message, or a set of core beliefs (Rubin, 1995).

Stories or testimonies are game-changers in that stories put faces to abstract concepts, they teach and inspire and they encourage and motivate. One of the most effective ways of changing people’s perceptions and mindsets is through the adoption and deployment of storytelling or testimonies by victims.

In his book, “Meet me at the Palaver”, Mucherera states that “Narrative pastoral counselling has always been present in indigenous contexts, since story is the way of life. Problems are shared in family, community, or group settings called the “palaver.” A palaver (padare) is an informal gathering usually for the purpose of providing counsel and support for those facing personal, family, and/or community crisis problems, and sometimes for the purpose of education and to share joys. In most cases, the problems, education, or joys are shared in the
form of stories (Mucherera, 2009: ix). The Shona word for palaver is *padare* or *kudare*. A palaver can occur in many different forms. It can happen at family, extended family, and community levels as a formal or informal gathering (open or closed) to resolve a crisis or a problem, or at times just to meet. Traditionally it was led by a family elder or community chief; however, everyone who sits at the palaver has a voice.

Geffner et al. postulate that story telling is a deeply rooted human phenomenon. “Individually and collectively, stories make a way to ‘to make sense’ of our experiences. By telling stories, we do more than simply relate a sequence of events, but convey information about the context in which those events occur and meanings they hold for the story tellers, offering insight into larger cultural ideas and values.” (Geffner et al. 2000:109). Stories in the context of personal experiences are appropriate for making complicated subjects comprehensible to others. Stories and the context in which they are told frequently lead to a richer output and to more profound insights as compared to answers to specific questions.

Kerby argues that Story telling is deeply appealing and richly satisfying to the human soul, with an allure that transcends cultures, ideologies, creed, and academic disciplines. Story telling is a fundamental structure of human meaning making. The events and actions of one’s life are understood and experienced as fitting into narrative episodes or stories. Accordingly, identity formation and development can be understood in terms of narrative structure and process. In this view, “the self is given content, is delineated and embodied, primarily in narrative construction of stories” (Kerby 1991:1).

Jackson adds by saying that stories have a potential of being instruments of transformation, as well as information (Jackson 1995:2-23). The fact that stories lead from the familiar to the unfamiliar, they provide an entryway into personal growth and change (Jackson, 1995:2-23). As Clark notes, “it is when one can identify with a character who has changed that one can
envision and embrace the possibility of change for oneself.” (2001:83-91). Stories of achievement and transformation can function as motivators, pathfinders and sources of encouragement. In short, stories enable us to engage with new knowledge, broader perspectives, and expanded possibilities because we encounter them in the familiar territory of human experience. As Hopkins has it, “our narratives are the means through which we imagine ourselves into the persons we become.” (1994: xvii). The transformative dynamic of the self-story lies in the profoundly empowering recognition that one is not only the main character but the author of that story.

Story telling is a way of sharing knowledge, insights and feelings with others. Stories and the context in which they are told frequently lead to a richer output and to more profound insights. It is the particularity of the story—the specific situation, the small details, the vivid images of human experience that evoke a fuller response than does a simple statement of fact. This detail provides the raw material for both cognitive appreciation and effective response to the experience of another person. Stories invite and demand active meaning making. Bruner (1986:9) explains that the story develops the “landscape of action” and the “landscape of consciousness” – the element of human intention.

In agreeing with the above discussion, the researcher needs to highlight that the Western concept misses certain approaches in sharing stories. To them this is an entering point in the lives of others, while for Africans it is a way of life which is lived through sharing their stories—it does not matter how painful that story is. In other words, stories are part and parcel of their lives. This process leads to people understanding pains and joys that are expressed through story telling. It does not matter how painful the exercise is, someone has to listen to those people that are experiencing pain. This is how healing begins as people share and others listen to the person’s traumatic and painful stories. By way of analysis of the pain and the hurt
that the mothers were going through as a result of unfair treatment in their daughters’
defilement cases, the researcher questions the role of the church towards people who are
victimized in society. Pastoral care needs to address the painful and hurtful experiences faced
by mothers affected by child defilement.

For traumatized mothers affected by child defilement to know that they are believed and
supported makes a difference in their healing process. One of the things that becomes
apparent when one works with people who have been victimized is that they have a story to
tell. The process of telling stories empowers the victimized persons, broadens perspective, and
enlarges threads of hope and positive meaning. It further opens up avenues of refreshing
possibilities and potential. Change then seems possible. In addition, people who have been
victimized and have shared that story do better than those who have not shared. In his
engagement with the mothers affected by child defilement by church leaders, the researcher
came to realize that the nature of the stories of these mothers changed over the course of their
journey towards recovery and towards healing and restoration.

Telling stories goes together with listening. The goal of listening is understanding. Sharing
your understanding with your clients can help them understand themselves more fully and put
themselves in a better position to act constructively (Egan 1986:79).

In this research study, the researcher discovered that listening to the stories of the mothers
affected by child defilement by church leaders and sharing with them the understanding of
these stories, helped in making them take the lead in the healing process.

Listening to the three stories shared in this chapter became a way of therapeutically working
with the mothers who were hurt by the defilement of their children by the church leaders. As a
shepherd the researcher was able to walk with them in their journey of pain and hurt by
listening to their stories and sharing the understanding of these stories with them. Gerkin says without listening, the affected people will not give out their feelings about how they are traumatized by what they have gone through. A shepherd should know his flock and work with them in such a way that healing occurs. Listening is one of the most important aspects which has to be taken into more serious consideration by all counsellors when they need to attain healing or therapy. Gerkin emphasizes the importance of the art of listening for the pastor who is involved in day-to-day relationships with persons at all levels of social life as he says:

Listening involves more than simply hearing the words that people say. It means being attentive to the emotional communication that accompany the words. It means listening to the nuances that may give clues to the particular, private meanings that govern a person’s inner life. It means listening for the hidden conflicts, unspoken desires, unspeakable fears, and faint hopes. First and foremost, pastors must be listeners who invite self-disclosure and thus communicates acceptance and nonjudgmental care (Gerkin 1997:91).

In agreeing with the above quote, the researcher was able to learn and to know the emotional pain and hurt of the mothers by listening to their stories. Without listening, he was not going to get this information from them. Readers, more especially those with a passion of helping people who are vulnerable and victimized in the society, should take note of the importance of listening to the stories that these people have. This helped in understanding their emotional feelings and thereby helped them in their healing process.

Having looked at the importance of telling and listening to stories, we now move on to the trauma which was experienced by mothers as a result of their children being defiled by church leaders.
5.4 TRAUMA AND SEXUAL ABUSE.

Trauma is often the result of an overwhelming amount of stress that exceeds one’s ability to cope or integrate the emotions involved with that experience (Substance abuse and mental health services administration. Archived from the original, August 5, 2014).

“If clinicians fail to look through a trauma lens and to conceptualize client problems as related possibly to current or past trauma, they may fail to see that trauma victims, young and old, organize much of their lives around repetitive patterns of reliving and warding off traumatic memories, reminders, and affects.” (Moroz, Kathleen J., 2005).

Trauma can be caused by a wide variety of events, but there are a few common aspects. There is frequently a violation of the person’s familiar ideas about the world and of their human rights, putting a person in a state of extreme confusion and insecurity. This is also seen when institutions that are depended upon for survival, violate, betray or disillusion the person in some unforeseen way (DePrince and Freyd, 2002).

There is Psychological trauma. This is a type of damage to the psyche that occurs as a result of a severely distressing event. Psychologically traumatic experiences often involve physical trauma that threatens one’s survival and sense of security (Helpguide.org. Archived, 2014). Typical causes and dangers of psychological trauma include harassment, embarrassment, sexual abuse, employment discrimination, police brutality, bullying, domestic violence, indoctrination, and being a victim of an alcoholic parent (Whitefield and Charles, 2010).

Mothers affected by child defilement experience psychological trauma or Post-Traumatic Stress Disorder (PTSD) following disclosure of their child’s defilement by a church leader. As already mentioned in chapter four of this research study, the entire family was profoundly affected when a family member experienced psychological trauma or PTSD. Although the
symptoms of PTSD are not directly contagious for family members, they might share and experience the shock, fear, anger and pain simply because they care for and are connected to the survivor. This point of view is confirmed by Calder (2000:183) when he states that the emotional stress and shock experienced by mothers after disclosure of child sexual abuse, resembles the symptoms found in Post-Traumatic Stress Disorder of a sexually abused child.

From the above discussion, we can thus conclude that the mothers in the three stories which have been shared in this chapter experienced Post-Traumatic Stress Disorder following the disclosure of their children’s defilement by a church leader. This experience was compounded by the unfair treatment which they received from the Pastors and church elders when they brought child defilement before the church council meetings.

5.5. UNDERSTANDING POWER.

In order to understand sexual abuse by a church leader, it is important to understand power.

*Webster’s Dictionary* defines power as the “possession of control, authority, or influence over others; the ability to act or produce an effect.” Most people have several sources of power due to a number of factors: class, education, knowledge or information, employment position, creativity, relationships, finances, personal charisma, gender, race, physical size, church role or spirituality. Having power gives one the means of making changes in one’s life and in society.

Mary Kate Morse states the following about power:

Power is less like a tool we use to make something happen and more like the water we drink to stay alive. Personal power is essential. It means knowing that I am an individual and can make decisions about my life. Personal power is key to emotional health and well-being (2008:41).
This recognizes that all people need some power in their lives. Without power, a person feels inadequate, out of control and lost.

Kretzschmar (2002:50) raises the issue of power in leadership and ministry in the African context, characterised by many instances of abuse and corruption. She explains these to be partly as a result of the destructive effects of colonialism and the loss of some of the African models of collaborative leadership, as well as human sinfulness and immaturity (200:43-45). Her call is for the formation of ‘authentic Christian leaders’ who will be able to address the myriad of social problems of the continent (200:40).

She proposes an investigation of the nature of power starting with the biblical use of the words power (dunamis) and authority (exousia) where the former refers to force, strength and ability over people and things; and the latter means exercising freedom of choice, right of action and ruling with (or bearing) authority. To understand power as derivative of God is one way to prevent its abuse; the other is to see it as accountable to those who have conferred it – in the New Testament church leaders were called by their communities to lead and were accountable to them (200:50); the third way is to reinterpret the word ‘power’. She suggests that we understand power in two ways – as power over someone which is understood as a commodity that some people have over others, or alternatively as gifts to be shared. Power can also be seen as personal (gift) and as social (in organisations or groups). This concept of reciprocal power sharing is consistent with a partnership model (Whitehead & Whitehead 1993:209) where God is understood to be in partnership with creation and with us. Whitehead & Whitehead use the image of creation as the fruits of God’s ‘playfulness’ in partnership with Wisdom Sophia (as in Proverbs 8:27, 29-30) (200:208). Christian ministers within this scheme are drawn in as partners, in which we ‘act not only out of duty but with pleasure’. ‘If rational control is important, so is the heart’s desire’. We act out this playfulness in different
roles within the community. The partnership model suggests shared power, and the celebration of differences that enrich. Partnership ‘depends on mutuality – where giving and receiving go both ways’ (200:8).

Kretzschmar (200:51) suggests that Christians either abuse their power or deny its importance – both with problematic outcomes. Referring to the contribution of Whitehead and Whitehead, she argues for an understanding of the different ‘faces of personal power’ (200:52-53).

Whitehead and Whitehead (1993:116-122) describe the research of psychologist David McClelland and his four orientations in the acquisition of power to become ‘strong’ adults. The orientations represent a progression from being totally receptive, towards greater autonomy and achieving interdependence; the ‘we’ of power.

What has been discussed so far is an understanding of power from the perspective of those who have access to it through their positions as leaders. But power is not only to be understood in terms of the personal – it is an aspect of systems and embedded in structures, institutions and practices which can be oppressive and exploitative. In such cases Foucault’s understanding of power as discourse is helpful for avoiding the victim paradigm of the oppressed. Foucault (1982) suggests a way of looking at power as a set of relationships or a discourse within which the protagonists occupy different subject positions in relation to one another. The exercise of power within the relationship, is defined as:

the way in which certain actions act upon another’s actions where the “other” (the one over whom power is exercised) is recognized and maintained to the very end as a person who acts … and that faced with a relationship of power, a whole field of responses, reactions, results, and possible interventions may open up (1982:220).
He analyses the features of all power relations in the following way: They all entail ‘a system of differentiations’ which must be maintained for a number of reasons, e.g. to maintain privilege, to accumulate profits etc. The ‘differentiation’ is enforced in different ways, for example by consent, coercion, by maintaining economic disparities, through systems of surveillance (monitoring), or through rules etc. These mechanisms for maintaining the ‘differentiations’ are institutionalized either legally, or by custom, or via defined structures, e.g. the family, educational institutions, the legal system. And then finally they are validated and rationalised (1982:223). According to Foucault, the exercise of power is reified and acquires its meaning through these constructions so that it is accepted as the way things are.

The exercise of power is not a naked fact, an institutional right, nor is it a structure which holds out or is smashed: it is elaborated, transformed, organized; it endows itself with processes which are more or less adjusted to the situation (1982:224).

Foucault suggests that people resist within power relationships where attempts are made to deny their identity and impose an identity and subject them to this. This is done by establishing ‘regimes of truth’ which regulate what is true and what is untrue, and trying to normalise, categorise, measure and generally regulate. But Foucault contends that there can be no power relationship without ‘freedom’ and there is always potential to resist the action of power of the other (1982:221).

James Scott in his book *Domination and the Arts of Resistance* (1990) describes the way that subjugated people develop their modes of resistance in relation to the power of the oppressor. He suggests that both the oppressor and the oppressed operate out of transcripts – a public transcript and a hidden transcript. The public transcript is what is spoken and displayed or freely expressed. It is in the space of the hidden transcript that subjugated people can express
their hurts and angry feelings about their situation, to practise, as if in a dress rehearsal, their
different acts of resistance that they may or may not express in the public transcript.

With reference to experiences of domination and subjection through history, Scott describes
three forms of domination: material appropriation, e.g. exacting of taxes, enforced labour,
extraction of grain etc; public mastery and subordination which is expressed in rituals of
hierarchy, deference, speech, punishment and humiliation; and a domain of ideological
justification for inequalities, e.g. the public religious and political worldview of the dominant
elite (1990:111). He suggests that it is not enough to know what form this domination takes,
but it is important to know how this domination is experienced by the subordinated, and how
it affects his/her life and dignity, and in relation to his fellow-subordinates. These factors will
shape the extent of the person’s anger and motivation to resist (1990:113).

Scott describes the crucial role of the social circle of the hidden transcript. He stresses that
there has to be a social form behind any act of resistance, describing ‘the individual resisting
subject as an abstract fiction’ (1990:118) i.e. that behind every act of resistance is a group of
fellow subordinates who are complicit; that there is ‘an offstage subculture in which the
negation can be formed and articulated’ (1990:118).

Within this restricted social circle the subordinate is afforded a partial refuge from the humiliations of
domination, and it is from this circle that the audience (one might say “the public”) for the hidden
transcript is drawn. Suffering from the same humiliations or, worse, subject to the same terms of
subordination, they have a shared interest in jointly creating a discourse of dignity, of negation, and of
justice. They have, in addition, a shared interest in concealing a social site apart from domination
where such a hidden transcript can be elaborated in comparative safety (1990:114).

In the safety of the hidden transcript, the subordinate group may publicly perform acts of
negation of the dominant culture through alternative rituals and practices and outright
challenges to what is spoken and believed in the dominant culture. Scott (1990:19) refers to the ‘infrapolitics’ of subordinate groups which are small and ‘low-profile’ forms of resistance that dare not speak in their own name’. Acts of resistance can include revolt or other subversive actions, e.g. gossip, rumours, stories, linguistic tricks, disguises, metaphors, euphemisms, ritual gestures, anonymity (1990:137), and spirit possession (1990:141); also the creation of autonomous social space for the assertion of dignity, and the development of a dissident subculture (1990:198). This is an ‘unobtrusive realm of political struggle’ (1990:183), often communicating one thing to those in the hidden transcript, and something else to those outsiders and authorities (1990:184):

Infrapolitics, then, is essentially the strategic form that the resistance of subjects must assume under conditions of great peril.

Infrapolitics happens in a relatively anonymous way, in small groups, without evidence like documents, identifiable leaders or public activities and so may escape notice (1990:200). The moment when the hidden transcript is made public is the moment of ‘breaking the silence’ (1990:206) and Scott comments on the degree of freedom that is experienced when this moment occurs:

The sense of personal release, satisfaction, pride and elation – despite the actual risks often run – is an unmistakable part of how this first open declaration is experienced….it is all too apparent that the open declaration of the hidden transcript in the teeth of power is typically experienced, both by speaker and by those who share his or her condition, as a moment in which truth is finally spoken in the places of equivocation and lies (1990:208).

Scott’s discussion of the infrapolitics of the hidden transcript is helpful for understanding the way women mount resistance to their experiences of patriarchy in the church. ‘Breaking the silence’ is a key metaphor for describing the public articulation of women’s private suffering.
of abuse and violation. Women claiming their voice is also a significant milestone in women’s claiming of moral agency.

One may question why Jesus chose to speak of leadership – his own and his disciples’ – in terms of *doulos* and *diakonos*? If this is understood in the context of power relations of dominant and oppressed groups, and of resistance, then, in choosing to be a servant leader, Jesus was making clear his option to side with those who were oppressed, as opposed to those in power in Jewish and Roman society. In so doing he entered the discourse of power on the side of, and at the service of those who were on the margins.

Whilst he did not take the military option, nor play an overtly political role, his leadership and vision supported their struggle for more human lives, expressed through their hidden transcripts. Jesus’ challenge to his disciples to be ‘servant leaders’ was a challenge to take this option. Understanding servant leadership in the light of its role on behalf of the oppressed makes it subversive and ultimately powerful. It also prevents it from being appropriated into the discourse of those in power, where it is juxtaposed against overt power and domination and is ultimately disempowered.

In this section the researcher has indicated that caring is intrinsic to people’s notion of God and to the Christian’s response to the other. Caring is also a defining feature of ministry. The researcher has also drawn attention to the biblical understanding of compassion in which mercy and caring cannot be separated from justice. The imperative to love is a call to put right relationships and structures that are uncaring of others.

But behind the ethical ideal of caring is the potential for its distortion and the oppression of those who care. Words like ‘partnership’, ‘reciprocity’, ‘mutuality’, and ‘interdependence’, when incorporated into notions of caring, can help to balance the total self-giving of the one
who cares by situating caring in the context of mutual relationships. Also, the idea of choice raised by Foster is central to countering imposed servitude. Witness Jesus’ injunction to ‘go the second mile’ (Matthew 5:41): the first mile is imposed, but the Christian goes the second mile voluntarily which opens spaces for extending care, love and mercy to the ‘other’ and ‘the enemy’.

The crucial distinction is whether one uses power creatively or destructively (Heather, 2011). Creative and destructive power are explained in detail below:

5.5.1 Creative power.

Richard Foster speaks of creative power as

“... the power that creates, gives life and joy and peace. It is freedom and not bondage, life and not death, transformation and not coercion. The power that creates restores relationship and gives the gift of wholeness to all.” (Harper and Row, 1985:196).

Dr. Sarah Mitchell elaborates on that,

“We need to learn a new way of understanding power. When we understand power not in terms of domination but in terms of mobilizing resources, releasing creativity and enabling community, then real transformation can occur.” (http://www.redcross.ca/RespectED).

When power is used creatively, it restores relationships, liberates those who are oppressed, brings inner and outer healing, nurtures confidence, enhances communication and inspires faith.
5.5.2 Destructive power.

Power can also be used to hurt. Peter Rutter speaks of the impact of male power on a woman’s well-being, influencing “whether she experiences her femininity as a force to be valued and respected or as a commodity to be exploited.” (1989:30).

Sexual abuse by a church leader is one of the ways in which power becomes destructive. Abuse occurs when there is an imbalance of power and persons with greater power misuse their power for their own benefit and to the detriment of another. In situations of sexual abuse within the church, the abusing leader has greater power than the victim, often in several areas such as gender, physical size, leadership position and education. In addition, church leaders have enormous power because they are perceived by some to be God’s representatives. The perpetrator may also have the power of information because church leaders often possess information that is not available to others.

5.5.3 Acknowledging power.

While perpetrators of abuse have more power than their victims, they sometimes do not feel powerful, and most refuse to acknowledge their power. In fact, they frequently feel inadequate, overworked, unsupported, ineffective, powerless, and as though they are not in control. Therefore, the notion of pastoral power may not be something with which they readily identify. Additionally, within churches that emphasize the “priesthood of all believers” there is less willingness to recognize power differentials within the congregation. The appearance of humility may in fact silence any criticism and increase a leader’s power (Bechtel, 1996).

Inability to identify power differences is dangerous. When church leaders have difficulty acknowledging their power, they stand in greater danger of abusing it. As Carolyn Shrock-
Shenk explains, “Power is ambiguous, slippery and intoxicating and will control me if I am not conscious of its role in my life. I cannot control or manage something I deny having.” (September, 1999).

5.5.4 Power eroticized.

A power imbalance is easily sexualized or eroticised. Carolyn Holderread Heggen notes that:

The imbalance of power between men and women has become eroticised in our culture. Many persons find male power and female powerlessness sexually arousing. In general, men are sexually attracted to females who are younger, smaller, and less powerful than themselves. Women tend to be attracted to males who are older, larger, and more powerful. Male clergy have a great imbalance of power over their congregations, which are often predominately women, therefore, the stage is set for a sexually inappropriate expression of this power differential (2006:111).

In some instances, misuses of power can be sexual in situations that begin as mentoring. This could happen in the case of an older man or woman taking an interest in a younger person of either gender for the purpose of encouraging that youth’s development. Youth activities that begin as play can become a context of power and authority when youth leaders do not understand the power they possess simply by virtue of their age, authority and gender. Because they have greater power, the leader always bears primary responsibility to protect the boundaries of the relationship. The person with the greater power must act in the best interests of the person with lesser power (Rutter, 1989:24). This holds true even when the person with less power makes sexual advances. A leader is the keeper of a trust and, as such, is responsible to ensure that no sexual behaviour occurs.
5.6 MISUSE OF THE PASTORAL ROLE.

Fortune (1995) states that when church leaders exploit those who seek their help they betray both a helping relationship and a spiritual relationship which can carry heavy consequences for the victims.

Sexual contact by religious leaders and pastoral counsellors with congregants/clients undercuts an otherwise effective pastoral relationship and violates the trust necessary for that relationship. It is not the sexual contact per se that is problematic but the fact that the sexual activity takes place within the pastoral relationship. The violation of this particular boundary changes the nature of the relationship and has enormous potential to cause harm. The behaviours that occur in sexual violation of boundaries include but are not limited to sexual comments or suggestions such as jokes, innuendoes, or invitations, touching, fondling, seduction, kissing, intercourse, molestation, and rape. There may be only one incident or series of incidents or an ongoing intimate relationship.

Sexual behaviour in pastoral relationships is an instance of professional misconduct that is often minimized or ignored. This not just an affair, although it may involve an ongoing sexual relationship with a client or congregant. It is not merely adultery, although adultery may be a consequence if the religious leader/counsellor or congregant/client is in a committed relationship. And it is not just a momentary lapse of judgement by the religious leader or counsellor; often there is a recurring pattern of misuse of the pastoral role by a cleric who seems neither to comprehend nor to care about the damaging effects it may have on the congregation/client.

When an ordained member of the clergy has been sexual with a child, it is also a betrayal of the role of the pastor. The job of the clergy is to nurture the flock, to protect them when they
are vulnerable, and to empower them in their lives—especially children and youth. The people assume they can trust the clergy not to harm them, because they are clergy. Sexual abuse betrays that trust.

To sexually abuse a child is to steal the child’s innocence and future, often with profound and tragic consequences. The sexual abuse of a child or teen is about the misuse of power by the adult. It is about theft: taking advantage of a child’s naiveté, stealing his or her future.

It is a violation of professional ethics for any person in a pastoral role of leadership or pastoral counselling (clergy or lay) to engage in sexual contact or sexualized behaviour with a congregant, client, employee, or student, whether adult, teen, or child, within the professional pastoral or supervisory relationship. It is wrong because sexual activity in this context is exploitative and abusive.

5.6.1 Role violation.

The pastoral relationship involves certain role expectations. The religious leader/counsellor is expected to make available certain resources, talents, knowledge, and expertise that will serve the best interests of the congregant, client, staff member, or student. Sexual contact is not part of the pastoral professional role. Important boundaries within the pastoral or counselling relationship are crossed and as a result trust is betrayed. The sexual nature of this boundary violation is significant only in that the sexual context is one of great vulnerability for most people. However, the essential harm is that of betrayal of trust (Fortune, 1995).

5.6.2 Misuse of authority and power.

The role of a religious leader/counsellor carries with it authority and power, and the attendant responsibility to see this power benefits the people who call on the religious leader/counsellor
for service. This power can easily be misused, as is the case when a member of the clergy uses (intentionally or unintentionally) his or her authority to initiate or pursue sexual contact with a congregant or client. Even if it is the congregant who sexualizes the relationship, it is still the religious leader’s responsibility to maintain the boundaries of the pastoral relationship and not to pursue a sexual relationship (Fortune, 1995).

5.6.3 Taking advantage of vulnerability.

The congregant, client, employee, or student is by definition vulnerable to the religious leader/counsellor. She or he has fewer resources and less power, and when a member of the clergy takes advantage of this vulnerability to gain access to sex, the clergy member violates the mandate to protect the vulnerable from harm (Fortune, 1995)

5.6.4 Absence of meaningful consent.

In order to consent fully to sexual activity, an individual must have a choice and the relationship must be one of mutuality and equality; hence, meaningful consent requires the absence of fear or of even the subtlest coercion. There is always an imbalance of power and thus inequality between a person in the pastoral role and those whom he or she serves or supervises. Even in a relationship between two persons who see themselves as consenting adults, the difference in role precludes the possibility of meaningful consent (Fortune, 1995).

The researcher agrees with Fortune and reiterates by saying that as people who are chosen by God to represent Him, church leaders should lead exemplary lives and refrain from indulging themselves into immoral activities such as abusing children sexually. He is of the opinion that by doing so, the church leaders embarrass and anger Him who called them into the service.
5.7 PRELIMINARY CONCLUSION.

In this chapter, the researcher has shared three stories from three mothers who were affected by child defilement by a church leader. These stories helped the researcher to journey together with the affected mothers and have exposed him to the pains that they experienced following disclosure of defilement of their children by a church leader. The stories have also exposed a lack of understanding and care on the part of the pastors. The researcher has come to realise that lack of understanding and care on the part of pastors is as a result of lack of pastoral care and counselling skills.

In the next chapter, the researcher explores the pastoral and counselling skills and applies them to the painful experiences of the mothers affected by child defilement. The skills will help the pastors, other church leaders and the church members to care, nurture and heal the mothers affected by the defilement of their child by a church leader.
CHAPTER SIX

PASTORAL CARE OF MOTHERS AFFECTED BY CHILD DEFILEMENT.

In this chapter, the researcher looks at pastoral care in relation to caring for mothers affected by child defilement by a church leader. The chapter will look at the effects of child defilement on mothers described in chapter four of this research study. Gerkin’s pastoral care method, augmented by Waruta and Kinot’s African method of pastoral care will be applied to these effects as a way of helping mothers affected by child defilement to come to terms with the effects of child defilement. This chapter carries the main solution to the problem as regards to the role of the Pastors and their churches in addressing child defilement by a church leader in the church setting.

6.1. PASTORAL CARE.

The word pastor is related to the Greek word for ‘shepherd’ and carries that association. In the Hebrew Scriptures there is a reference to pastoral ministry (Jeremiah 3:15) and in the New Testament Jesus calls Peter ‘to care for and feed his sheep’ (John 21:16-17). In Ephesians 4:11 there is reference to local ministers who lived among the people and exercised a local ministry of support and care.

Clebsch and Jaekle (1967) describe four functions in the ministry of pastoral care: healing, sustaining, guiding and reconciling. Below is the description of these functions.

*Healing* refers not only to curing ills, but also to helping people to a condition of wholeness. When speaking about healing as a basic function of pastoral care, our concern is how to make whole what is broken and thus open up the future for possibilities (Engedal, 2008).
Jesus Christ was deeply concerned about healing. In his healing ministry he addressed the physical, social, relationship, moral and spiritual dimensions of human life. Preaching the Gospel and healing the sick and needy go together in the proclamation of the Kingdom of God. The healings by Jesus are proclaimed as signs of the presence of the Kingdom of God. In and through those signs God demonstrates his graceful healing power by restoring broken human life (Lk. 4:16; Lk. 7:18). In this way various healing practices became an integral element in the life and service of the followers of Christ (Mt. 10:5; Lk. 9:1). Body, mind, and spirit were understood to comprise a dynamic unity. Accordingly, the ministry of healing was interpreted as holistic care for the whole person.

Healing, as an integral part of God’s calling, has played a significant role in the history of pastoral care and counselling in the church. As we often find ourselves in situations of physical, emotional, or spiritual distress, the role of the Christian counsellor will often be to facilitate and promote restoration of what is broken through the process of healing (Engedal, 2008).

Historically, methods used for healing have included anointing, praying, the use of healers, exorcism, and in some churches, the sacramental system. Among certain African Independent Churches elements such as ash, water, blood from a sacrificial animal and candles are used in healing both physical and spiritual diseases.

*Sustaining* means supporting someone who has experienced a loss or trauma, e.g. bereavement, divorce, and irreversible injury. The aim is to help the person cope with the hurt. Clebsch and Jackle define sustaining sustaining as,

Helping a hurting person to endure and to transcend a circumstance in which restoration to his former condition or recuperation from his malady is either impossible or so remote as to seem improbable (Clebsch and Jackle, 1987:33).
In his daily ministry, the counsellor will often meet situations as described above by Clebsch and Jackle. In cases where what is broken is beyond reach of restoration and healing, the sustaining and comforting abilities of the counsellor are called upon. At the same time this is not only the responsibility of the individual counsellor. Perhaps even more the caring and comforting resources of the Christian community are called upon to help the person in need to find a viable way towards a meaningful future. Therefore, in such cases the collaboration between the counsellor and the community is of vital importance. Together we are called upon to carry one another’s burden. We have to realize that restoration in Christ is community-based and relies on the power and possibilities given to the people of God (Engedal, 2008).

A telling example of this kind of sustaining is given in the Gospel when Jesus Christ asked his disciples to stay with him in the garden of Gethsemane when he was overwhelmed by grief and anxiety. Jesus reviewed his vulnerability, and he asked his closest friends to share with him the sustaining comfort of their presence (Mk. 14:32). Seen in this perspective, the pastoral counsellor is understood as a person who shares the burden of the other, and through this enables the other person to find a viable way of life. This is the kind of Christian practice the apostle Paul portrays when he says, “carry each other’s burdens, and in this way you will fulfil the law of Christ.” (Gal. 6:2).

Guiding means helping people to make choices either as educative guidance which is a form of moral formation which tries to avoid moralism; or deductive guidance which aims to help people derive their own guidelines and decisions, drawing on their experiences and what is consistent with their value system (Clebsch and Jaekle, 1967).

There are different ways of understanding and practicing the art of guidance. The way it is practiced will vary considerably due to different social and cultural contexts. To illustrate this we
can think of a parent-child relationship. Under normal circumstances there will be important and legitimate room for normative guidance and advice here. The adult person uses his or her experience in order to protect and help the child, and thus exercises a certain authority in the capacity of an older and wiser person.

In a relationship between two equally experienced adults this will be different. The process of guidance will take on a more open and dialogical dynamic. One will discuss different options and try to find the best solutions in a process of mutual collaboration. Likewise, if the guiding activity takes place within the cultural context of a traditional society with strong social structures and shared cultural values, guidance will undoubtedly take on different forms compared to a cultural context shaped by a modern, urban society with looser social bonds, fragmented moral traditions and deep cultural pluralism. For this and several other reasons it is important to ask, “What is the function of guidance in the specific context of pastoral care and counselling?” (Engedal, 2008).

The following points can serve as guidelines of more responsible ways of guidance:

- The counsellor should always cultivate an attitude of humility and respect when confronted with the complexities of another person’s or family’s life situation. To present superficial solutions to complex problems means to betray the basic trust that the care-seeker demonstrates in seeking help and guidance.

- A presupposition for good guidance is always careful listening and attentiveness to the care-seeker’s story. It is necessary to give attention to the relational network involved (people involved in the situation), and to the resources and vulnerabilities that shape the care-seeker’s situation.

- In order to make a wise choice, one should always try to figure out what kind of alternatives there actually are in the situation, and what possible consequences the different alternatives imply.
- The counsellor should help the care-seeker clarify relevant biblical texts and normative values from Christian faith and tradition that can give direction to and guide the choices to be taken.

- The counsellor should always respect and make clear the care-seeker’s own responsibility for his or her life. The conclusion or decisions that come out of the actual counselling process will, therefore, always be the care-seeker’s own responsibility.

In accordance with the guidelines mentioned above, the counselling process should aim at deepening the care-seeker’s understanding of the actual situation, enabling him or her to identify and use their own values and resources, and through such a process, strengthening the capacity for making well-argued, appropriate and responsible choices. A counsellor who moves the process in this direction, could be a most valuable and wise guide (Engedal, 2008).

Reconciling, or the ministry of reconciliation, helps people to establish or renew their relationships with God and other people. Forgiveness has normally been associated with confession, the assurance of forgiveness (absolution) and reconciliation with God and the church, often through some form of symbolic self-denial showing penitence. This practice is still followed in Catholic and Anglican churches.

The aim of a counselling process is where reconciliation is focused on the re-establishment of broken relationships. Thus, reconciliation involves bringing together, in open and confirming interactions, persons or groups that, for various reasons, have come to live in destructive conflicts and have been estranged from each other. Perhaps no other challenge presents itself more often in the pastoral counsellor’s office than issues of reconciliation. For the pastoral counsellor challenges related to reconciliation will perhaps most often occur in the form of family members in difficult and uncompromising conflicts—be it between parents and children, conflicts in marriage, strife between wife and mother-in-law, opposing groups and opinions within the congregation, and conflicts between members of different clans or ethnic groups.
On the other hand, Mageza identifies seven functions of pastoral care namely; healing, sustaining, guiding, reconciling, nurturing, liberating and empowering (Mageza, 2005:137). He includes liberating and empowering which are also vital functions of pastoral care.

In defining pastoral care, White (1998:99-103), elaborates pastoral care as having five critical tasks namely; spiritual nourishment, herding (i.e. to collect and put together), protecting, healing, and leading God’s people to their eternal destiny. The pastoral responsibility of spiritual nourishment relates to teaching, preaching and explicating scripture in the life of experiences and challenges. The pastoral task of herding alludes to the preservation of the family and community of believers. Protecting the flock is closely implied in the spiritual nourishment motif, but vitally points to checking destruction which flawed teaching brings in the lives of the faithful. The healing task of “pastoral care is that it follows up distress with practical mercy and kindness.” (White, 1998:102).

Quoting the dictionary of pastoral care and counselling, Gerkin defines pastoral care of the congregation as, “the ministry of oversight and nature offered by a religious community to its members, including acts of discipline, support, comfort and celebration” (Gerkin, 1997:126).

According to Gerkin, Pastoral care is the “caring task of the pastor in relation to individuals and communities.” (1997:11). “Communities” in this usage alludes to families living together, especially communities of faith, who have a common fellowship and want to be faithful disciples of Jesus Christ in the world. Gerkin further asserts that pastoral care has application to the broadest range of pastoral and communal practices in the life of the church and the world. Gerkin’s view of pastoral care is not limited to person to person encounters only, but is also applicable to caring for the church family and its community, the environment for the community of faith. Pastoral care to the environment of the community of faith entails the fulfilment of the church’s evangelistic task to the world at large (Gerkin, 1997).
The researcher agrees with the above definitions of pastoral care and concludes that pastoral care is a composite process of caring for individuals and the communities with the goal of meeting a need which has emanated such as the need for healing, sustaining, guiding, reconciling, nurturing, liberating or empowering. In a community where mothers affected by child defilement by a church leader, pastoral care has a significant role to play in healing, sustaining, guiding, reconciling, nurturing, liberating or empowering them. It is especially the healing task of pastoral care that takes centre stage in the care of mothers affected by child defilement by a church leader. These mothers need to be healed from the pain, hurt and anger that they have experienced as a result of their children being defiled by a church leader. The mothers in the three stories which were shared in chapter five of this research study need healing from two traumatic events namely: pain and hurt following disclosure of their children’s defilement by a church leader and the unfair treatment which they experienced when the matter was brought before the church council meeting. They needed care from the pastors whom they shared their stories with. Gerkin describes the caring task of the pastor in the following way:

Although emphases have fluctuated from time to time, the ordained pastor’s care for individuals has usually been given a dominant emphasis. Furthermore, in the recent history of pastoral care, in large part because of the influence of individualism and psychotherapeutic psychology, the organising conceptualization of pastoral care has focused on the individual care of the pastor for individual persons (Gerkin, 1997:92).

It is the task of the pastor to care for the individuals who are afflicted by pain and hurt in the church and the community. The pastor being the leader in the church should take a leading role in caring for people in pain in this case the mothers affected by child defilement by a church leader. By siding with the perpetrators of child defilement as shared in the three
stories, the pastors violated their pastoral role of caring and protecting the vulnerable groups of people in society.

6.2 PASTORAL THEOLOGY AND CARE.

This section explores the theology of pastoral work concentrating specifically on the notion of compassion as found in the work of Nouwen and Pembroke. Houting (2007) argues that compassion appears to be the basis for engaging in pastoral healing, hence the need for this exploration. Before this exploration is done, the foundational material for the pastoral theology/pastoral care paradigm is looked at first.

6.2.1 Foundation of pastoral theology and care.

Gerkin (1997:63-71) traces the development of pastoral care, noting that the beginning of its modern manifestation can be traced back to with Boisen. In 1936 Boisen published a work based on his own experiences as a person with psychiatric illness and calling into question therapeutic practices which did not take account of his religious identity. The work of Carl Rogers emerged shortly after. His non-directive method of counselling was based on the idea that the solutions to a person’s own self-care lay within themselves. Rogers approach was to emphasise the importance of empathy with a client, which included attenuation to the bodily as well as the cognitive expression of the person. In the 60’s Clinebell, finding the Rogerian approach too passive, instead developed a toolbox approach to the classic range of issues encountered in pastoral care. His method was based on the idea that a pastor could utilise the skills provided to encourage growth in a person. These early and mainly clinically focussed methods led to the understanding of pastoral theology as:

The theory of ordained ministry in general, including a definition of its functions and duties (or offices), underlying theological principles, moral and spiritual requirements, methods of actual
practice, and related disciplines of training and education…the theory of the cure or care of souls (pastoral care and counselling), distinguished ambiguously from other pastoral functions by its primary focus on individual need and the personal character of the pastor’s involvement with the parishioner.

However, this definition would no longer appear to be acceptable. Gerkin after tracing his journey as a pastor and theological lecturer over several decades concludes the introduction to his book on Pastoral Care, by moving to a position beyond the ordained psychotherapeutic paradigms. For him, pastoral theology has moved beyond the concept of the “caring ministry of the pastor” and includes “the broadest range of pastoral and communal practices in the life of the church and the world.”

Henderson also rejecting the narrower definition writes:

“Pastoral theology is the study of those questions posed for Trinitarian theology by the experience of being self-consciously human in specific cultural, social and ecological structures. It is also the quest for theological insight which can shape practice that brings about healthy development of community and an individual, both outside and inside the church.” (Henderson, 2003:107).

Lyall (2001) refines the idea of how theology might be done in this context, noting that the exploration is an activity of the church as a community in the light of its own praxis, and scripture and theological traditions. He concludes that practical theology does not exist for its own sake but ultimately to bring about a transformation in practice more congruent with an interpretation of the nature of discipleship.

Moore, in promoting the concept of pastoral theology as a hermeneutic, argues that an “applied model” for pastoral theology will not sustain a Christian community. Approaching it
as a hermeneutic, however, includes the community in the continued development of theology through reflection on their own practices, as well as using the wisdom gained through an applied approach (Moore, 2001:7-18).

The development of any theology must necessarily include the life of community, and the contextual location in which theology is developed and engaged (Houting, 2007). Cahalan writes that the telos of theology is to guide community in its faithful life (2005:63-94). Gerkin as we have seen takes the implications of developing a theology of care beyond “the identifying Christian tradition, the contemporary community of Christians and the particular needs of individuals within the community… (to give) attention to the issues and concerns of the contemporary cultural context.” (1997:71-73).

Inevitably, therefore, one can no longer work within the paradigm of pastoral care as a clinically based process, without understanding that pastoral theology draws the attention of the pastor beyond the immediacy of personal or local community needs. The nature of theology itself will be to locate any pastoral work within its broad communal and contextual framework (Houting, 2007).

Also helpful is Gerkin’s approach to the historical notions of pastoral ministry as he identifies the roles of priest, prophet and wise sage. In relating one particular pastoral encounter with a woman working through her anguish and grief he revisits the concept of “care and cure of the soul”. He writes “I found myself as I suffered along with Margaret…very much identifying with my mediaeval priestly ancestors … the pastor as physician of the soul.” (1997:84).

Gerkin later explains that this concept is not only associated with “competent psychologists and therapeutic counsellors” but also with “helping people make connections between their
lives of faith in the community and tradition that identifies us as people of God, and the day to
day individual, social and cultural realities of our lives.” (1997:84).

The researcher agrees with Gerkin’s community oriented pastoral theology as this is applicable to the African context which is characterized by strong social structures and shared cultural values. As already mentioned in chapter three of this research study, individuals’ problems in the African context are seen as problems within the family or community group, and any problem is regarded as less important than the security and welfare of the whole community. This means that the sickness of one person affects everyone in the community and in the family. Effective pastoral care in such a setting should, therefore, not be individually oriented, but should be more of a community oriented activity (Couture & Hunter, 1995).

Waruta and Kinoti highlight the essence of the communal element while acknowledging the importance and place of individual counselling. “Counseling in the traditional society takes a communal approach where …the immediate family community is deeply involved. Individual counselling although it has its place, ignores the communal element which is necessary in particularly mediating forgiveness and reconciliation”. (Waruta and Kinoti, 2005:93).

In this research study, the researcher has, together with Gerkin’s shepherding method of pastoral care, used the community oriented pastoral care models to care for mothers affected by child defilement which was perpetrated by a church leader.

Having discussed the foundation of pastoral theology and care, we now move on to the biblical notion of compassion as explored, in particular by Nouwen, and developed to some extent by Pembroke.
6.2.2 Compassion.

Nouwen’s concept of compassion is grounded in the belief of a compassionate God. “God is a God-with-us, a God who came to share our lives in solidarity. It does not mean that God solves our problems, shows us the way out of our confusion, or offers answers for our many questions. He might do all of that, but his solidarity consists in the fact that he is willing to enter with us into our problems, confusions and questions.” (Nouwen, 1979).

Nouwen writes that the ‘compassionate way’ involves patience, prayer and action. He describes:

- patience as entering “actively into the thick of life and to fully bear the suffering in and around us…(it) is an extremely difficult discipline precisely because it counteracts our unreflective impulse to flee or fight”;
- prayer as the “discipline that strengthens and deepens discipleship … the effort to remove everything that might prevent the spirit of God, given to us by Jesus Christ, from speaking freely to us and in us”; and
- action as “the discipline of compassion (that) requires the willingness to respond to the very concrete needs of the moment.”

In addition Nouwen has also explored the concepts of self-awareness. He notes that, “no minister can offer a service without a constant and vital acknowledgement of his own experiences…Making one’s own wounds a source of healing, therefore, does not call for a sharing of superficial personal pains but for a constant willingness to see one’s own pain and suffering as rising from the depth of the human condition which all men (sic) share.” (Nouwen, 1979).
Pembroke (2002) develops this sense of compassion as “central” and as “presence” through the work of Marcel and Buber by exploring the themes of availability and confirmation. In doing so he notes that the work of Marcel, in particular, is strongly linked to the notion of compassion. Compassion, he argues goes beyond the Rogerian notion of acceptance and empathy. Instead he uses the concept of receiving the other into one’s “home space.” This deep level of receptivity is illustrated by Paul’s use of the Greek word splanchnon.

From this framework, Pembroke explores the Marcellian notion of presence, summarising the notions of grace, fidelity, belonging and availability in the statement “in Christ we come to realise that we cease to belong to ourselves and so we transcend one another in the very heart of our love.” (Pembroke, 2002).

Pembroke’s thesis is developed as he works through the place of compassionate availability as the foundation for pastoral care and counselling. He argues that the therapeutic process is compromised if the virtue of receptivity is not available to the pastor. He notes that while techniques must be developed, they are only useful in the hands of the ‘available’ pastor.

Pembroke also cautions against equating splanchnon with sacrifice. He notes that the feminist critique of theological language has promoted the idea of “equal regard” beyond that of “sacrifice”. He argues that it is this concept, namely the valuing of oneself and equally valuing the other, which creates a paradigm of presence where exploitation can be avoided.

A pastor who develops such disciplines might, therefore, be well placed to encounter those with whom they are called to work with compassionate availability. While this does not mean that no clinical pastoral skills are required, it appears to be the basis for engaging in pastoral healing. Rose has written that:
“Researchers generally agree that the most significant healing factor does not lie in particular techniques or theories, but in the quality of relationship between the counsellor and client.” (Rose, 2002).

In agreeing with the above discussion, the researcher has used a combination of Gerkin’s shepherding method of pastoral care, Waruta and Kinoti’s work, *Pastoral Care in African Christianity* and Pollard’s evangelism method of positive deconstruction to enter into the lives and problems of the mothers affected by child defilement which was perpetrated by church leaders.

The discussion on compassion leads us into the discussion of biblical perspectives on pastoral care.

6.3 **BIBLICAL PERSPECTIVES ON PASTORAL CARE.**

Deborah Broome (2005) points out that the pastoral care offered within and by the Church is grounded on the life and ministry of Jesus. His ministry provides the pattern on which we can model our own pastoring, and the standard by which we (gently) judge ourselves. Yet the Gospels are not our only biblical source for models of pastoral care: we can discover something of the practice of the early Church in the epistles and in the book of Acts and there are lessons we can learn from the same place that Jesus learned i.e. from the Hebrew Scriptures, which we commonly refer to as the Old Testament.

The Hebrew Scriptures give us a number of basic perspectives relating to the context within which pastoral care may be offered (Lyall, 2001). First among these is the theocentric character of biblical thought. The presence of a God who is active in the affairs of humanity is everywhere assumed. This God acts towards people and towards all of creation with *hesed*, usually translated as ‘loving kindness.’ The care of human beings for each other is, therefore,
always within this larger context of God’s care for us and all the world (Tidball, 1986). In addition, biblical care is communal and corporate, not individualistic. For the ancient Hebrews the individual was never separate from the community: if one person suffered, the impact was felt throughout their community. This is explicit in the covenant, where God says to the Hebrews ‘I will be your God and you will be my people’: God related to Israel as a people, not as individuals. Pastoral care, even of individuals who are suffering, is corporate. The pastoral ministry that we exercise is offered on behalf of the community to which we belong. Not only that, but we need to recognise the support and healing that is extended by the community or congregation acting together. (Broome, 2005).

Care within the world of the ancient Hebrews was not abstract, general or merely ‘spiritual’ – indeed they did not recognise a distinction between ‘spiritual’ and ‘physical’, between the ‘religious’ and the secular. Care was practical: food for the hungry, welcome for strangers and aliens, comfort for the bereaved, justice for the oppressed.

It is a reminder to us not to spiritualise pastoral care, caring for the souls of people while leaving their basic physical needs (for warmth, food, shelter) untouched. It is important to recognise and affirm the link between pastoral care and the search for justice and freedom. In addition, just as there is no distinction in the Hebrew Scriptures between religious and secular spheres of life, so we find no categorisation of emotions into those acceptable and unacceptable for expression within our relationship with God. Especially in the psalms, but also in accounts of human suffering elsewhere, we find the full and free expression of feelings, negative as well as positive. This demonstrates a valuing of honesty and openness: people are free to be themselves, to be real (and not simply ‘nice’). So too in our own practice of pastoral care: we must beware of giving out (sometimes unspoken) signals that only some emotions are acceptable (Broome, 2005).
Finally, we find within the Hebrew Scriptures a rich diversity. There is no single pattern of care: prophets were concerned about justice and mercy, priests conducted rituals, sages gave instruction and advice, and all of these were available to people who needed it. There are examples of good pastoral care, and also some that clearly come under the heading ‘what not to do’ – as anyone who remembers ‘Job’s comforters’ will recall. People cared for each other and allowed God to care for them all – and there was no ‘one way’ or systematic method which fitted all circumstances.

In the Gospels, images of Jesus show even more clearly the pastoral concern of God for the whole person, physical, social and spiritual. The Gospels show Jesus curing sickness or disability, bringing healing to relationships and pronouncing forgiveness of sins. His ministry was inclusive, treating women with dignity and respect and drawing in those on the margins of his society: ‘sinners’, Samaritans, tax collectors and prostitutes. In many instances it is clear that Jesus’ care not only restored a person to physical health but also led them to being included again within the social and the worshipping community. Thus our pastoral care should not aim solely at deepening a person’s relationship with God (although of course that is important in itself): it should also help them to deepen their relationships within their community. These two aspects are linked: one cannot really deepen a relationship with God without that also affecting one’s relationships with others; we need both the horizontal and vertical dimensions.

The pastoral care we offer is grounded in the life and ministry of Jesus, and we can take as our model not only what he did but the manner in which he went about caring for others. It is clear that he saw each person he encountered as immensely valuable in God’s eyes. He took time for each one, and listened for the particular needs of each person: sometimes we see him not assuming, but asking the question ‘what do you want?’ Jesus did not coerce: he left
people free to enter or leave a relationship with him. He was also willing to let the process of growth in an individual take its own time, without rushing things, and yet he often stimulated decisive change in those he encountered.

Broome (2005) further states that, one of the most notable features of Jesus’ life and ministry is the compassion he had for those around him. There is an expression that appears only 12 times in the Gospels and is used exclusively of Jesus and his Father-to be moved with compassion. In Greek the phrase derives from the word for entrails of the body (or as we might say today, ‘in the guts’). This is the locus for our most intimate and intense emotions. The good news we share and that we are called to embody is that God is not a distant God, a God to be feared and avoided, a God of revenge, but a God who is moved by our pains and participates in the fullness of the human struggle. Jesus healed people for one major reason: because their pain created such an ache within his own heart that he suffered with them. Without this sort of compassion our care will have a hollow ring to it. Our helping will, at best, come across as a duty. It will lack sensitivity, and at worst, it can seem cruel and brash.

Perhaps most important of all, it is clear that the pastoral care exercised by Jesus was grounded in, and sustained by, his personal private prayer. He cared for others out of his own close relationship with the Father, which gave him strength and kept him whole.

Within the rest of the New Testament, the book of Acts and the Epistles, we see two patterns of pastoral care. There were the specialists – the orders of deacons and of widows, providing social support and caring – and there was the ordinary care of Christians for one another. ‘Pastors’ are listed amongst other areas of ministry (the others, in Ephesians, are apostles, prophets, teachers and evangelists), for which Christ gave gifts to the Church ‘to equip the saints for the work of ministry, for building up of the body of Christ’. We see the early
Church setting up ways in which Jesus’ farewell command to Simon Peter to ‘feed my sheep’ (John 21:15-17) could be carried out.

6.3.1. THEOLOGICAL FOUNDATIONS.

Any theology of pastoral care-giving must start from what we understand about God, this God whom we worship and in whose name we minister. Our pastoral care must be grounded in what we believe about God and what we believe about what it is to be human (Broome, 2005).

6.3.1.1. Trinity.

We worship a Triune God; we believe there is a relational dynamic to the being of God, in whom there are three persons. What we see in the Trinity is a sort of continuous and indivisible community: the concept of God is for us inseparable from the concept of communion, of a relationship of love between the three Persons. Being centred in love, this relationship is, therefore, vulnerable, open, self-giving and self-revealing. That is a good image on which to model our own practice of pastoral care-giving. The Trinity which is at the heart of our worship reminds us that we are made for responsible dependency on one another. Just as community is at the heart of God, community should be the basis of our Christian lives, a community within which difference is valued and everyone is welcomed.

6.3.1.2. Imago Dei.

Humanity is created in the image of God, *imago Dei*, and thus human beings have intrinsic worth, with a value in and of themselves, not based on what they may have achieved in the workplace or in public life. Our caring for others is therefore based on the value they have because they were created – like ourselves – in the image and likeness of God.
6.3. I.3. Incarnation

A central belief of Christianity is that in Jesus God has become embodied in a human being: ‘The Word became flesh and dwelt among us’. Here is a God who loved humanity enough to become human. Just as God cares for the whole of life, pastors too should express that concern for the whole person and for all people. God in Christ identifies with and enters into the suffering of human beings. This is the theological foundation for empathy, that when we attempt to enter into the suffering of another, and to communicate that to them in a way that is helpful, we are following in the footsteps of Christ who took on our human frailty and in the midst of that very frailty revealed his glory. After all, ‘empathy’ is walking long enough in another’s shoes so that we know where it rubs, and incarnation is the ultimate expression of empathy – God’s empathy with humankind. Moreover it is the Word in flesh, the incarnate word that we serve. We communicate by who and what we are, as well as, and even more than, by the words we say. Saying the right thing at the right time is an important part of our pastoral caring for others, but we should never underestimate the simple value of our presence, for in that too we are following in the footsteps of Christ (Lyall, 2001:96-97).

6.3.1.4. Crucifixion and suffering.

The cross is a reminder to us (if we were ever likely to forget it) of the destructiveness of human nature, of the evil that people can do to each other and to themselves. But it also tells us that pain and suffering can have meaning, can even be salvific. The knowledge that wisdom, healing and yes, good, can come out of pain and suffering can help us not to fear it when it happens to us and to those for whom we care. The remembrance of the ‘godforsakenness of God’ at the heart of the cross can help us to be alongside and to speak into the loneliness of those whose suffering we are invited to share. To offer pastoral care in
the light of the cross, as David Lyall notes, is to do so ‘in a context in which human vulnerability and brokenness can be expressed, contained and transformed.’ (2001:101).

6.3.1.5. Resurrection.

The resurrection of Christ proclaims new life and new hope for a damaged world and for suffering people. This possibility is always present during our encounters with those for whom we care, yet we should be wary of rushing too quickly towards ‘Easter Sunday’: sometimes we need to sit with people in the darkness and the emptiness of Holy Saturday while the signs of transformation are as yet unseen. Our belief in the resurrection provides both content and context for our pastoral relationships. Speaking sensitively of the defeat of suffering and death, and the dawn of new life, can bring hope in the midst of despair to those who are suffering, and our journey alongside people is always in the context of the new life of Christ and the new life we share in Christ.

6.3.1.6. Ascension and Pentecost.

The Christ in whose name we minister is the ascended Christ. As St Teresa reminded us, Christ has no body now on earth but ours, no hands or feet but ours, and ours are the eyes through which Christ’s compassion cares for the people of the world. And so when we offer pastoral care, it is our privilege to be Christ to others. We care as ourselves – the words of healing and peace are incarnate in us – but we care not only as ourselves but as Christ also. And when we minister we have the guidance and the power of the Holy Spirit: learning to open ourselves to the Spirit’s promptings and remembering that we do not rely solely on our own energy and strength are important aspects of the ministry we offer.

The researcher finds the above theological foundations of pastoral care relevant and helpful in the African context where the belief system and culture views healing as taking place within
the community. In such a setting, everyone is valuable in the eyes of everybody. Caring for others is, therefore, based on the value they have because of being created – like everyone else – in the image and likeness of God. When one is in pain everyone shares that pain and they walk together with that pain.

6.3.2 IMAGES FOR PASTORAL CARE.

6.3.2.1 Shepherd.

Perhaps the central image of pastoral care-giving is that of the relationship between a shepherd (Latin, *pastor*) and the sheep under his (and in the literature, biblical and otherwise, it usually is ‘his’) protection. Jesus described himself as the Good Shepherd (John 10:1-18); and pastoral imagery appears throughout the Hebrew Scriptures, not least at Psalm 23. There are, however, some problems with this image for the urban, industrial environment which is the setting for much of today's pastoral care and where most people have no acquaintance with shepherds (and in any case the modern high country farm worker has little in common with the biblical figure): their experience with sheep is likely to focus on roast lamb or woolly jerseys. The model is also inherently hierarchical: the brave and wise shepherd who knows best and the silly sheep, spending their lives eating, drinking and wandering off. There are two things which save this image for us, however. The first is that it is the example of Christ that we who pastor are called to follow: Christ was the shepherd with an intimate knowledge of the sheep, who guides them and looks out for their welfare. The good shepherd too is one who does not, like the thief, climb into the pen but who enters properly by the gate, being fully authorised to do so (Oden, 1983). The second thing that saves the image is the knowledge that we and all who ‘pastor’ are fellow sheep who follow Christ, the shepherd of us all.
6.3.2.2 Wounded Healer.

This is a model of the pastor not as professional expert (with the level of emotional detachment thus implied), but as wounded healer, aware of the areas of pain in his or her own life. The pastoral caregiver is not a being set apart from the pain of ordinary human existence: ‘If you prick us, do we not bleed? If you tickle us, do we not laugh?’ (William Shakespeare, *The Merchant of Venice*, III.1).

There is a mutuality here, between the carer and the one who is being cared for, and an acknowledgement that only those who have experienced suffering themselves can be of help to others. This element of mutuality prevents a one up / one down dynamic occurring, i.e. ‘I’m more powerful/stronger than you, therefore I’m better than you’. Healing can begin when the wound, and the weakness, is acknowledged, and the wounded healer can then go on to bring healing to others: ‘For a deep understanding of his own pain makes it possible for him to convert his weakness into strength and to offer his own experience as a source of healing to those who are often lost in the darkness of their own misunderstood sufferings.’ (Nouwen, 1990).

There are two cautions inherent in this image. The first is that the fact that carers have come through suffering themselves should not lead to a simplistic sharing of experience (‘I know exactly how you feel: I have been there too and this is what helped me’). The second is that those who would offer care to others can really only do so when their own wounds have healed – or in Nouwen’s words ‘open wounds stink and do not heal’. (Ibid., 88). It is worth remembering that Christ was perhaps the original ‘Wounded Healer’. He is the one who ‘was wounded for our transgressions, crushed for our iniquities; upon him was the punishment that made us whole, and by his bruises we are healed.’ (Isaiah 53:5) Through Christ, and ‘the blood of his cross’ (Colossians 1:20) God and everything else were reconciled. Christ himself
suffered on the cross, and ‘by his wounds you have been healed’ (1 Peter 2:24) It is in this weakness and vulnerability that the power of God is found – just as it is in our own vulnerability. Making one’s own wounds a source of healing implies a willingness to see one’s own suffering as rising from the depth of the human condition itself, which is shared by all people: we too are human, we too suffer – but out of this mutual humanity we need not judge.

6.3.2.3 Searching.

Something else which could be drawn on in constructing a theology of pastoral care-giving for today is the image of searching: from God walking in the garden in the cool of the evening and calling to Adam ‘where are you?’ (Genesis 3:8-9), to Jesus as the Son of Man who ‘came to seek out and to save the lost’ (Luke 19:10). It is always God who takes the initiative to restore the relationship with humanity, but we humans are left free to respond in our own way, or to hide if we wish. So too, the pastor can be one who takes the initiative, who seeks out the person and is focused on them, not distracted by other things (including the pastor’s own needs), while still leaving the person for whom we care the freedom to walk away. Thus we may express both the divine concern for humanity and the autonomy we have been given to make our own choices and to live by them.

6.3.2.4 Midwifery.

This is an image of pastoral ministry as a process of co-labouring with people to bring forth new life (Billman, 1996:10-38). The midwife does not do the work herself; she does not take over the birthing process but offers guidance and assistance to the mother as she brings forth her child. The midwife, like the pastor, creates the environment within which the process can take place. She can provide the security needed for the one for whom she cares to go through the pain and out into the joy of new life.
6.3.2.5 Friendship, hospitality and the Eucharistic community.

Just as Christ's body broken on the cross made us whole, so too does his body broken again in the Eucharist bring healing. Thus any theology of pastoral care-giving must incorporate this liturgical dimension and take account of the role of the church, as the ‘body of Christ’, ministering to one another. As we know, pastoral care is not given only by an ordained pastor to parishioners, but from any Christian to any other Christian (Galatians 6:2), or indeed, to any other person made in the image of that same God whom we worship and serve. Images (in the Scriptures and elsewhere) which best express this are those relating to friendship.

God, we are told, was accustomed to speaking to Moses ‘face to face, as one speaks to a friend’ (Exodus 33:11), and Abraham is described as God's friend (2 Chronicles 20:7). Jesus calls his disciples not servants but friends (John 15:13). Moreover, Jesus' inclusive friendship with the outcasts of society was a source of scandal: ‘the Son of Man came eating and drinking, and they say, "Look, a glutton and a drunkard, a friend of tax collectors and sinners!" ’ (Matthew 11:19) In these shared meals, and particularly in the post-Resurrection appearances at Emmaus (Luke 24:28-35) and on the beach of Tiberias (John 21:4-14), Jesus was taking part in the oldest ritual of friendship, the shared meal (McFague, 1987), one that is continued today in the Eucharist.

In our worship we nurture the bond of friendship, between God and humanity, and between men and women and children who share meals together. Sallie McFague suggests ‘friend’ as a model of the sustaining activity of God, and points to the inclusiveness of the friendship bond and of the shared meal in particular. It is from this friendship that the giving and receiving of pastoral care between members of the body of Christ proceeds, with an inclusiveness that takes in those outside the church.
And so we remember that the God who ministers to us is a God interested in all aspects of our lives. Pastoral care, or ‘the cure of souls’ as it is traditionally called, should not be understood as care for disembodied souls, quite apart from their physical and emotional needs. Pastoral care-giving is the means by which we express that concern for the freedom, integrity and health of the whole person which we have ourselves experienced from God. ‘Beloved, since God loved us so much, we also ought to love one another.’ (1 John 4:11).

The researcher agrees with the above discussion especially on the point that the pastoral care that is offered is grounded in the life and ministry of Jesus, and that it can be taken as a model to follow, not only what he did but the manner in which he went about caring for others. The researcher fully agrees that Jesus saw each person he encountered as immensely valuable in God’s eyes. With this model, pastoral caregivers are encouraged to administer pastoral care to any one in need of care despite their status.

6.4 SHEPHERDING: THE ROLE OF THE PASTOR IN THE CONGREGATION.

Louw (1998:39-41) states that the way in which God is depicted as a shepherd contrasts with the use of this concept in the Ancient East. There, the title of shepherd was an honorary title for an Eastern ruler and denoted authority. The Sumerian and Babylonian kings were shepherds, but they exercised this function in a context of status and authority. God was a shepherd too, but in the context of grace, love and faithfulness. The people of the Old Testament knew that they were safe and secure within God’s shepherding care. God’s covenantal grace made this care manifest and directed it at Israel, the people belonging to Yahweh’s flock. The covenant congregation becomes God’s flock. (Is 40:11 ‘He tends his flock like a shepherd: He gathers the lambs in his arms and carries them close to his heart; he gently leads those that have young’; see also Ezk. 34:31; Mi 7:14; Ps 100:3). In the history of Israel, God proved, through his pastoral care, that He was their God and that He remained
faithful to his covenantal promise. ‘You are my sheep, the sheep of my pasture, are people, and I am your God, declares the sovereign Lord’ (Ezk 34:31).

During the course of Israel’s history, the shepherd metaphor was also used to describe the Messiah, who would act as God’s Shepherd. The Shepherd metaphor thus fostered the messianic hope and kept it arrive: ‘I will place over them one Shepherd, my servant David, and he will tend them; he will tend them and be their Shepherd’ (Ezk 34:23).

During the New Testament era, shepherds were regarded with contempt, Christ chose this metaphor to express God’s love for sinners. In contrast to the hardheartedness of the Pharisees (LK 15:4-6), Jesus is the messianic Shepherd who gathers the lost sheep of the house of Israel (Mt 10:6). His compassionate love and mercy are expressed in Mathew 9:36. In order to demonstrate his mercy and love, Jesus had to lay down his life for the sheep (Mt 26:31; Jn 10:11). The good Shepherd lays down his life for the redemption of his flock. Jesus will judge the nations: ‘All the nations will gather before him, and he will separate the people one from another as a shepherd separates the sheep from the goats’ (Mt 25:32). Members of the lord’s flock were expected to minister to those in distress. The criterion for belonging to the flock is not worship, but ministry to the needy fellow-man.

For I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I was a stranger and you invited me in, I needed clothes and you clothed me, I was sick and you looked after me, I was in prison and you came to visit me (Mt 25:35-36).

This verse expresses the spirit of charity which should be manifest in daily social contact. The caring which the Shepherd displays towards his flock should also be reflected in the behaviour of the members of the flock towards those within (and outside) the flock. In this way, the shepherd function attains a social, as well as a welfare function.
The responsibilities for shepherding are also transferred to the officials in the congregation: ‘Guard yourselves and all the flock of which the Holy Spirit has made you overseers’ (Act. 20:28). The connection between Jesus’ crucifixion and his task as Shepherd is confirmed by 1 Peter 2:24-25. Jesus becomes the Shepherd of the human soul (psyche, in the sense of total revelation of the human life before God) because of his mediation: the blood of the everlasting covenant. The epistle to the Hebrews especially emphasizes this aspect (Heb 13:20). Jesus, as the Shepherd, brings reconciliation with God for all mankind.

The meaning of *poimainein* in the New Testament is clearly linked to God’s covenantal care of Israel. This care is also expressed in the charity and love revealed by Jesus’ ministry and fulfilled in his sacrificial death. When this term is conferred on the pastoral carer and his office (Ezk. 34; 1 Pt 5:2-4; Act. 20:28; Jn 21:15-17), then the pastoral mode becomes an instrument through which God’s care is displayed: Salvation. The significance of the shepherd metaphor for pastoral care lies in the fact that it connects what pastoral care involves-compassionate and loving charity- to Jesus Christ’s sacrificial and redeeming love for humankind. The shepherding function of pastoral care represents the way in which God cares and supports people in distress.

This means that the mode of pastoral care is not limited to human sympathy alone, but also includes the compassion of God Himself. The defenceless sheep of God’s flock need to be guided, cherished and protected. These ministering functions clearly apply automatically to the congregation and flock.

As already mentioned in chapter three of this research study, Gerkin uses this metaphor (shepherd metaphor) to refer to the pastor in the context of care for the flock of Christ. In his book, *An Introduction to Pastoral Care*, he says, “more than any other image, we need to have written on our hearts the image most clearly and powerfully given to us by Jesus, of the
pastor as the shepherd of the flock of Christ. Admittedly, this image originated at a time and place in which the shepherd was a common place figure, and we live in a social situation in which shepherding is a scarcely known, even marginalized vocation. Nevertheless, the New Testament depiction of Jesus as the good shepherd who knows his sheep and is known by his sheep (John 10:14) has painted a meaningful, normative portrait of the pastor of God’s people. Reflection on the actions and words of Jesus, as he related to people at all levels of social life, gives us the model sine qua non for pastoral relationships with those immediately within our care and those strangers we meet along the way.” (1997:80).

Repeatedly Jesus Christ embodied compassion in the face of ignorance, hunger, sickness, and even death. He was gripped by compassion when he saw the aimlessness of the common people as “sheep without a shepherd” (Mathew 9:36; Mark 6:34), the sick and the blind among multitudes (Mathews 14:14; 2034), and the sorrow of those who had lost the loved ones (Luke 7:13; John11:35). Jesus Christ’s compassion also expressed itself in practical ministry. Out of compassion, he raised the dead (John 11; Luke 7:14), taught the multitudes (Mark 6:34), and healed the sick (Mathew 14:14; 4:23; 9:35; 19:2). In ministering to the needy, Jesus Christ was not afraid to make physical contact. He took the hands of the sick (Mark 1:31; Mathew9:29) and the demon-possessed (Mark 9:27). His fingers touched and healed blind eyes (Mathew 20:34), deaf ears (Mark 7:33) and silent tongues (Mathews 7:33). Most astonishing of all Jesus touched the lepers-the outcast of his day (Mathew 8:3; Luke 5:12-13). In assuming this role of Jesus Christ, pastors must actively show compassion to the mothers affected by child defilement by walking with them in their problems.

This shepherding motif is captured in the imagery of Psalms 23 where the Lord God is depicted as the good Shepherd who leads the people in paths of righteousness restores the souls of the people, and walks with the people among their enemies and even into the valley of the shadow of death.
From this motif one can say that shepherding is a biblical model of pastoral care which aims at leading, nurturing, healing and protecting people. This is the model which is needed to be used in caring for mothers affected by child defilement by a church leader. The effects experienced by mothers following disclosure of defilement of their children by a church leader are explained in details in chapter four of this research study.

In view of the effects which are experienced by mothers, the pastor must be able to lead as a shepherd and carry all the pastoral duties in order to bring about healing and restoration in the mothers. Pastors must help the child defilement affected mothers to work through the problems associated with child defilement and come to terms with its effects through shepherding.

The shepherd model of pastoral care also accentuates the role of a pastor in addressing the problems experienced by African people both in the church and broader society, including that of child defilement. Gerkin’s model recognises that human experience is essential in that it helps the pastoral caregiver to have as his starting point, the area of human experience (1987:13). In other words, it is a caring method that begins where people are emotionally. It responds to human experiences such as child defilement in this case.

According to Townsend, “pastoral care incarnates God’s loving initiative toward humans in the diversity of their life circumstances” (2000:148). It is God’s habit to meet people where they live and intervene in the circumstances of their lives. It meets people at their unique point of need. Traditionally, pastoral care has been guided by a metaphor of a Shephard who moves away from the comfort of the familiar and into the unknown to respond to another’s distress without guarantee of certain outcome.
“all forms of therapeutic practice, whether psychiatry, social work, counselling or pastoral care, seek to alleviate human suffering and deprivation and seek to promote human well-being” (Lynch, 2002, p.9)

Lynch continues to say that “therapeutic practices are ideas about what constitute human suffering and wellbeing, and these ideas are essential value-statements about what is important about life” (Ibid). Pastoral practitioners working in the context of African culture will be likely to witness the involvement in the extended family and the wider community as an integral part of an individual’s well-being. This is another essential sign that shepherding is not only carried out by pastors alone, but by the larger number of individuals. It is, therefore, the responsibility of a pastor, to educate members of their congregation to care for one another as an integral part of ministry of God.

The above statement is supported by Gerkin when he says that pastoral care is the “caring task of the pastor in relation to individuals and communities” (1997:11). “Communities” in this usage alludes to families living together, especially communities of faith, who have a common fellowship and want to be faithful disciples of Jesus Christ in the world. Gerkin further asserts that pastoral care has application to the broadest range of pastoral and communal practices in the life of the church and the world. Gerkin’s view of pastoral care is not limited to person to person encounters only, but is also applicable to caring for the church family and its community, the environment of the community of faith. Pastoral care to the environment of community of faith entails the fulfilment of the church’s evangelistic task to the world at large (Gerkin, 1997).

According to Waruta & Kinoti “the human being is not a fragment but a complete entity, needing healing for his or her whole being; spiritually, socially psychologically and in relationship with his or her environment” (2005:78).
Pastoral care has the potential to bring healing and hope to the mothers affected by child defilement through pastors and shepherds. Pastoral care and counselling is historically concerned with healing the broken and liberating people of God to develop self-esteem. An important feature of the hermeneutical model of Gerkin is the “recognition of the care not only of the individuals but of the whole family” (1987:118). Gerkin’s methodology connotes the African belief of healing the whole family when one individual in the family is sick. In Africa the sickness of one person affects everyone in the community and in the family. Effective pastoral care in such a setting should, therefore, not be individual oriented, but should be more of a community oriented activity (Couture and Hunter 1995).

In this regard, the inclusive shepherding model of Gerkin has a lot in common with the African view, which is also inclusive. African pastoral care is not person-centred as is Western care and counselling. Louw describes the defining trait of African pastoral care as follows:

One of the remarkable and tangible dimensions of African spirituality relates to the unique union of community and collective solidarity that the African society exhibits in all spheres of life. There is a profound sense of interdependence from the extended family to the entire community. In the real sense, everybody is interrelated, including relations between living and those who have departed (Louw, 1997:401).

The researcher is of the view that pastors and their churches should harness this characteristically African life view of community in fellowship and integrate it with the metaphor of the church as a family of God’s people where authentic fellowship translates into care for the traumatized mothers affected by child defilement by a church leader. In the next section, the researcher distinguishes three approaches to pastoral care in order to show the one which is better suited to the African view which is also inclusive.
6.5 THREE APPROACHES TO PASTORAL CARE AND COUNSELLING.

The three approaches are: the classical, the clinical and the contextual. These are explained in detail below:

6.5.1 The classical approach.

Eide (2008) argues that the pastoral care of missionaries has been done from the so-called classical perspective. This is the model taught at most of the theological seminaries in Africa. It has, therefore, had a powerful influence on the preaching and pastoral care practices in African churches. The classical pastoral care perspective was enforced by thinking and practice related to pastoral authority (Thurneysen, 1962). This approach had and still has a strained relationship with culture. Man’s sin and rebellion against God has opened a chasm between the creator and the created and made all true knowledge about God impossible. Only God can bridge the gap. That is what took place in Jesus Christ. On the basis of this theological position a distinct theology of pastoral care has been developed. It underlines the sole authority of the Word of God and focuses on the relationship between God and the individual. The position can be summarized in the sentence “the word of God preached to the individual” (Adams, 1975). The focus in pastoral care is, therefore, on sin, man’s deepest and most fundamental problem. This position acknowledges man’s social, relational and emotional problems. A lot of counselling seeks to help people to deal with these aspects of life, but all the time the counsellor should look for the root causes of the problem, man’s relationship to God. The most central concern of the counsellor is, therefore, that of confessional father.

In the researcher’s opinion this approach to pastoral care leaves out the aspects of love and mercy which are the client’s essential aspects of life.
6.5.2 The clinical approach.

This approach developed in the United States as a reaction to the narrow focus of the classical approach. It grew from a need to understand the client (for example a victim or a widow in mourning). (Holifield, 1983). The new direction in pastoral care coincided with the new scientifically based understanding of the mind, seen in the sciences of psychiatry and psychology. The program of the clinical pastoral education (CPE) movement was that pastors should not only learn to read old documents, but also need proficiency in reading the living human document (Gerkin, 1984). The movement voiced a strong critique of the classical approach for being authoritarian, focused on sin and not being willing or able to listen to the problems of the experienced parishioners.

The clinical approach focuses on both the client and the counsellor as persons, the relationship they establish and the dialogue between them. The life and faith story of the client is a first priority. The person in need decides the agenda for the dialogue. This approach demands that the counsellor has a degree of understanding of how he or she is experienced by the other. An arrogant person with an urge to exercise pastoral cleverness and authority will easily destroy the relational dynamic of the meeting. Life crises, traumatic experiences, family conflicts and intra-psychic tensions are in focus.

The focus on the person and the therapeutic relationship between confidant and counsellor in the clinical approach has enriched pastoral care. This focus at the same time reveals a weakness in the sense that knowledge of psychology and psychotherapy is almost a pre-condition. The perspective is tightly knit to western culture. Pastoral care as a theological discipline is endangered when directed by psychological thought and practice (Preuser and Browning, 1976). The focus on inner emotional conflicts does not give proper attention to
man in community. Pastoral care tends to live a life of its own and is not seen as part of the congregation’s diaconal service together with the sacramental fellowship of the congregation.

6.5.3 Contextual approach.

Gunther Kohler, in his major study ‘seelsorge im Kontext Ostafrikas’, presents and discusses both traditional systems of care and advice giving as well as academic contributions by African scholars in the field (Kohler, 2002). African scholars present creative reflections, discussions and assessments with a relevant and genuine intent to make a vital contribution toward the reconstruction of pastoral care and counselling in the African context.

As already noted in chapter three of this research study, Sebastian K. Lutahoiire underlines the importance of community for life in Africa. The individual’s identity is derived from and nurtured throughout the life cycle by the social network of the extended family and clan, with all the rich traditions and practices associated with this vital network (Lutahoiire, 1974). Andrew A. Kyomo (1997), emphasizes the need to approach pastoral care from the communal perspective and think in line with the people in order to understand their questions and fears. His focus is on developing pastoral competence through affirming cultural identity, African communal understanding and world view. Jackson Anaseli Malewo, (2002), advocates for a dialogical model for pre-marital counselling based, in part, upon the findings of behavioural science and on a contemporary Lutheran theology of marriage. He talks not of the tension between traditional claims and modernity which is creating confusion in the patterns of family life. He also notes a number of vital communal values and caring elements from his own ethnic group. Laurent Magesa, (1997), has a keen appreciation of the African traditional social support system. In the area of pastoral care and counselling, his knowledge of the African values of promoting life has been applied, particularly in relation to marriage. He, as are many of his colleagues, is critical of the individualism of western Christianity. In line with
his ‘inculturation’ program he struggles to develop workable models for pastoral care. His approach is inductive, a theology ‘from below’, which makes African culture the subject of pastoral care and counselling. The work of Makumira professor Madafa Mathias Mndeme fits into an emphasis on culture. He underlines that deep knowledge of the culture is a pre-condition for any viable attempt to attune pastoral care to the ear of the people. Counselling ought to be moved from the office to the family, thereby utilising and empowering the support system of the family community.

Because of the fundamental critique of the clinical approach, together with the efforts of the African scholars, the contextual approach has been developed (Patton, 1993). As already mentioned in chapter three of this research study, this approach draws on a number of resources, the most important being the family, community, and culture surrounding a person. Listening into the recorded conversation between the parishioner and his/her counsellor we are listening into the way the counselee perceives the world, values and meaning. World view, values and meaning are all grounded in the cultural context. A contextual approach creates new perspectives on pastoral care as an integrated part of community life. Restoring a person to wholeness would mean restoring the person into an emotional, social and spiritual community.

A contextual approach emphasises the importance of creating a space where mothers’, who are affected by child defilement, fearful hearts could feel safe. The counsellor listens carefully to their stories and how this involves their families. The restoration of these mothers has to be seen as a family issue, involving them and their families. Then the counsellor must create an opportunity to talk with God. There would have to be space for confession and forgiveness. Lastly there is the issue of her relationship to her Christian community. The point is that the counsellor deals with her crisis in context.
The counsellor can learn important lessons on sin and forgiveness from the classical approach. The counsellor can learn to see the abused victim from the clinical approach. But working in Africa, with the holistic interpretation of life and communal identity, the communal perspective will help overcome some of the limitation of the classical and the clinical paradigms. An African perspective on pastoral care and counselling, therefore, must have a strong basis in a theology of the church (ecclesiology) as community. As we see the situation the contextual approach takes into account the African sense of community and wholeness and it opens opportunities for a dialogue between traditional cultural values and Christian theology (Eide, 2008).

From the above approaches, we can conclude that the contextual approach is the most suitable approach in the African world view as it is not individually oriented, but more of a community oriented activity.

Since shepherding is not only carried out by pastors alone, but by the larger number of individuals, in the next section, the researcher discusses the different roles that other different groups of people can play in bringing healing to the mothers affected by child defilement which was perpetrated by a church leader. In this research study, by healing, the researcher is referring to a situation in which traumatized mothers who are affected by child defilement come to terms with their problem of feeling hurt, anger, shame and guilt as a result of their children being defiled by a church leader. It is when these mothers reach a stage when they have accepted the defilement of their children and no longer feel the problems of hurt, anger, shame and guilt that one can say healing has been attained.
6.6 THE ROLE OF THE EXTENDED FAMILY AND CHURCH COMMUNITY IN COUNSELLING MOTHERS AFFECTED BY CHILD DEFILEMENT.

6.6.1 The role of the extended family.

Through this research study, the researcher has come to realize that relatives of the mothers affected by child defilement have a critical role to play in the issue of child defilement which is a serious global problem. As already mentioned earlier in this chapter of this research study, shepherding is not only carried out by pastors, but by a large number of people. This includes the extended family of the mothers affected by child defilement. Therefore, child defilement education has to be a shared responsibility by both relatives at home and pastors and their church members at church. This will help in equipping everyone with information and enable them to care for those that are affected by child defilement.

Relatives have the responsibility of walking together with the mothers affected by child defilement and letting them know that they share their problems. They also need to assure them that despite being defiled, their children still have a bright future. They can still continue with their education and can still get married.

The relatives should listen to the mothers affected by child defilement, believe them and reassure them that the abuse was not their fault or responsibility. They should acknowledge the harm that was done to the mothers by their reactions and have their responses validated. They need to let the mothers know that they will not be judged for the behaviour of their children. They should befriend the affected mothers and walk with them through the healing process. They need to let the affected mothers know that an official or institutional response is available to them which will make them experience a sense of justice and restoration.
6.6.2 The role of the Christian community.

As already mentioned in chapter one of this research study, when child defilement occurs, there is great brokenness. This extends to the victim, the victim’s family and friends, the congregation and wider church community, the perpetrator’s family and friends, and the perpetrator. As the body of Christ, the Christian community is called to be an instrument of healing in this situation. The community is called to stand with those who are hurting and oppressed, in this case mothers affected by child defilement, and to seek justice within the church and in society.

Historically, moral or ethical obligations have not been enough of a motivating factor for the Christian community to respond in a helpful manner. Until there were legal or financial ramifications, allegations of child sexual abuse within the church often resulted in the conference or denomination moving the perpetrator to another parish or congregation. As this did not address the deeper issues, perpetrators would be enabled by the church structure to continue to abuse in new congregations. Sometimes the original congregations hired others who were also perpetrators. In this regard, society has recognized the damaging effects of professional sexual misconduct more quickly than the church.

While churches have often been hesitant to intervene out of a fear that the abuser will either sue or leave the church, no one is helped by remaining silent. In order for healing to occur, for the victims in this case are mothers affected by child defilement, the church must respond. Both congregations and individual leaders within the church are liable for damages resulting from child sexual misconduct by a church leader.

It is important that church members as a Christian community, to which mothers affected by child defilement belong, are encouraged to give moral support to the mothers affected by child defilement. They should tell them that despite their children being defiled by a church
leader, God loves them and that they are still His children. The community should assure the affected mothers that no one blames them for the defilement of their daughters and that it was not their fault that their daughters were defiled.

In this research study, mothers who have been blamed by the church members and their pastors for having allowed their children to be defiled, suffer from the trauma of shame and guilt. Most of the co-researchers indicated that when mothers were blamed for their daughters’ defilement they felt ashamed and guilty such that they even stopped attending church services.

Healing is facilitated if they are told that the defilement of their daughters is not their fault and that everyone understands that.

The church as a Christian community should not blame and isolate mothers affected by child defilement as a way of resolving the problem of child defilement in the church. They should instead denounce the evils of child defilement that are affecting the lives of children and their families. Another role that the church as a Christian community should play is that, they need to create an atmosphere where mothers affected by child defilement are involved in church activities. Involving them in church activities such as singing in choir groups, teaching Sunday school and catechumen classes and occupying decision making positions will make them feel accepted and valued. This will also help them to overcome the pain of defilement of their children by church leaders.
6.7 INTERVENTION NEEDED FROM PASTORAL CARE BY THE CHURCHES.

Other than playing the roles as described above, the church as a Christian community can also do the following as a way of caring for the mothers affected by child defilement by a church leader:

6.7.1 Providing leadership.

The church through its governing bodies should take up a leading role in breaking the silence on the issues surrounding child defilement which are both in the church and the surrounding communities. This will help to end the effects of child defilement which are experienced by the defiled children and their families.

6.7.2 Formation of Trauma Counselling Committees.

Trauma Counselling Committees must be formed in all the parishes/congregations of the churches. People from the surrounding communities should be included in these committees. This is one way of opening doors whereby the communities can access the services of the newly formed Trauma Counselling Committees. Experts such as psychosocial counsellors, sociologists, and pastors must be used in these committees to help the traumatized mothers, who are affected by child defilement, and other people who may be traumatized by problems other than child defilement. The traumatized individuals need to be helped through counselling and pastoral care. The pastors of the congregation are to avail themselves to help in these Trauma Counselling Committees.
6.7.3 Formation of Peer Support Groups of mothers affected by child defilement.

Peer support groups are groups of people who come together because they share a common situation. In peer support groups, members help each other to improve and better manage their situation, share challenges and discuss solutions. Members support each other to implement decisions made to meet their psychological, social and physical needs.

As noted in chapter of four of this research study, mothers affected by child defilement suffer from among other effects, shame, guilt, and anger as a result of their children being defiled by a church leader. Meeting with other mothers with similar problems can encourage them to live more fully and positively. Congregations/parishes should form these committees to help mothers affected by child defilement come together and help one another to improve and better manage their situation, share challenges and discuss solutions. This will help them to lead a meaningful and positive life.

6.7.4 Training church leaders at all levels about child defilement.

The training of parish/congregational church leaders (pastors, elders, deacons, youth leaders etc.) on child defilement can help to end the defilement of children in the church and the surrounding communities. This training can be organized by church governing bodies such as The Synod, The Presbytery and The Church Council in the case of the Reformed Church in Zambia. The objectives of the training will be to break the silence on issues surrounding child defilement by a church leader.

6.7.5 Developing a non-condemnatory attitude towards mothers affected by child defilement.

The pastors and church members should not have a condemnatory attitude towards the mothers affected by child defilement. Even if some of the mothers who were interviewed in
this research study had played a role in the defilement of their children, the emphasis should not be on condemnation but should rather be placed on acceptance, forgiveness and reconciliation to God and his people.

6.7.6 Accompanying the mothers affected by child defilement on their journey.

The pastors and the church members should accompany the mothers affected by child defilement in their journey of being traumatized as a result of their children being defiled by a church leader. It is not sufficient to show acceptance and compassion to the mothers affected by child defilement. There will always be a need to console and practically help them as they grapple with a lot of uncertainties. In all the three stories which were shared in this research study, the church council meetings sided with the church leaders who had defiled the children.

This traumatized the mothers of the children. They felt sidelined and ignored despite their daughters being defiled. They expected the church leaders to accompany them in their struggles and suffering, but instead they were abandoned on the lonely journey leading them to even stopping going to church. Pastors and church members should walk alongside the mothers affected by child defilement by accepting them and listening to their problems. This will help them come to terms with the effects of child defilement.
6.8 DIFFERENT PASTORAL CARE DIMENSIONS USED IN DEALING WITH CHILD DEFILEMENT.

In this section the researcher adopts and proposes pastoral care dimensions that can be used in dealing with child defilement. These dimensions are explained below:


The terms pastoral care and Pastoral counselling are often used interchangeably, although a distinction can be made. In talking about pastoral care, pastoral counselling is implied or assumed. In this sense then a person cannot be a pastoral caregiver without being a pastoral counsellor. It is the researcher’s view that these activities constitute what in theological terms is called the ‘cura animarum’ or ‘cure of souls’.

Maldonado et al., also assert to the fact that pastoral care implies pastoral counselling with a view to enabling the counselee to tackle his or her challenges more effectively. It must be noted that counselling is the salient manifestation of pastoral care especially as it relates to the mothers affected by child defilement (Maldnado et al., 1990).

Collins differentiates and defines in a broad way what pastoral care and pastoral counselling are. He writes:

“Some have found it useful to make a distinction between pastoral care, pastoral counselling and pastoral psychotherapy. Of the three terms, pastoral care is the broadest. It refers to the churches over all ministries of healing, sustaining and reconciling people to God and to one another. Sometimes called ‘the care of souls’ this includes the ministries of preaching, teaching, discipline, administering the sacraments nurturing people and caring in times of need “(Collins 1998:16).

The major concern of this research is to enhance the love and care of souls. The research narrows it down to the specific individuals who are directly affected by child defilement. The
reliance on pastoral care theology is to engage it in healing, supporting, and allowing the concerned person to face up to what has happened to them. There are other African theologians who have also effectively explored this facet of the need for a multidisciplinary approach. In describing pastoral care Waruta puts it in this way:

“All along this tedious journey of life, we need other persons just as they too need us. The whole profession of counselling responds to the fact that human beings need each other and look for physical, emotion and spiritual support from one another, beginning with those whom we consider most significant and helpful in our own lives. Counselling is the art and skill of helping individuals and groups to understand themselves better and relate to fellow human beings in a mature and healthy manner. As a profession, counselling facilitates the health and meaningful survival of individuals and groups. It involves the art and skill of enabling others to live hopefully, considering that none of us can rely entirely on ourselves and survive without the support from other persons. From a pastoral perspective, the challenge is to discern the kind of help that would be effective and helpful to those that need it.” (Waruta, 2000:1).

The researcher agrees with the above descriptions of pastoral counselling which complement each other and in this research, pastoral counselling will be explored as part of the solution to the problem of child defilement.

Clinebell says counselling can allow us to discover a fresh dimension of our humanity. It can release our potentialities for authenticity and aliveness. It can help to release out trapped creativity – the potential creativity present in every person. By renewing us as a person, counselling helps empower us to become renewal agents in a church and in society that desperately need renewing. (Clinebell 1984:15).
The following definitions help to give the broader view of this subject of counselling as a means of healing the mothers who are afflicted by pain and hurt as a result of their children being defiled by a church leader.

Another facet of the solution is pastoral counselling. Collins continues as follows:

“This is a more specialized part of pastoral care that involves helping individuals, families, or groups as they cope with the pressure and crises of life. Pastoral counselling use a variety of healing methods to help people, deal with problems in ways that are consistent with biblical teaching. The ultimate goal is to help counselee’s experience healing, learning and personal spiritual growth. As defined traditionally, pastoral counselling is the work of an ordained pastor. In views of the scriptural teaching that all believers are to bear the burdens of one another, pastoral counselling can and should be a ministry of sensitive and caring Christians, whether or not they are ordained as clergy.” (Collins 1988:16).

While scripture allows that pastoral counselling is the responsibility of every Christian and not only the clergy, there is a need to be sensitive and secretive in dealing with certain problems which confront people. For example, in dealing with child defilement by a church leader, there is a need to be sensitive. This is because church leaders are respected in the church and in society. There is a need for confidentiality when counselling them. Disclosure of the abuse has a significant impact on the perpetrators’ lives. They may feel shame and guilt, and fear further disclosures. There is a disruption of relationships with family members, the victim and the congregation. They may lose their reputation and their job. Legal liability, criminal charges and incarceration are also possibilities. Pastoral care will focus on helping the individual (church leader) heal from feelings of shame and guilt that have torn everyone’s lives apart.
6.8.2. The Word.

The word of God is an important tool in counselling people afflicted by pain and hurt in society. It not only provides a true understanding of peoples’ basic needs, but also gives the answer to these needs. The word of God reaches out to people in their present problem situations. As we read, meditate upon, and apply this written word to our lives today, God’s presence and activity becomes real to us. Taylor had this to say about the importance of the word of God in counselling:

The scriptures themselves provide the evidence of their importance in counselling. For example: they bring light to our human situation (ps. 119:105), they show the mind of God, and encourage us to bring our own thoughts into line with his (Isaiah 55:6-9), they show us how to believe in Jesus Christ, and find new life in him (John 20:30-31), they offer us encouragement, comfort and hope in times of distress and difficulty (Rom 15:4)’ they offer correction, instruction and true teaching and show us the right way to live and they enter deeply into our inner lives, and help us to recognise and understand our own inward thoughts and desires (Taylor 1983:143).

When applied appropriately the word of God can encourage, comfort and give hope to the mothers affected by child defilement even as they pass through the pain of being blamed and isolated in society. The word of God can also give assurance to the mothers that they are not forsaken but that God is with them.

The word of God can also be used to articulate a particular emotion, condition, or feeling. The fact that scripture understands a certain emotional condition enables people to realise that they can use scripture to interpret and communicate their most profound needs accurately before God. For example, in the light of Psalm 42:11 the person discovers that the psalmist was also subjected to tremendous emotional pressure; he too experienced doubt, psychic instability and depression; this experience generated the psalmist’s advice to: ‘put your hope in God’. In this
way, the person afflicted by pain’s needs and emotional disruption has been articulated, and
the person’s faith has been nurtured. Scripture thus comforts and allows this to take effect
organically at all levels of human existence (Louw 1998:384-385).

The word of God can help the mothers affected by child defilement to put their hope in God
and depend on him for their needs.

The word of God also unmasks human behaviour and frequently generates radical change.
Timothy says that scripture is inspired by God ‘for teaching, rebuking, correcting and training
in righteousness’. (2 Timothy 3:16). Confronting and admonishing are frequently used in
pastoral care when guilt is being addressed. Confrontation strives to change sinful behaviour,
and not to reject the person as a sinner. Thus it should always be accompanied by an attitude
of love.

The researcher has discovered in this research that the mothers affected by child defilement
are isolated because of being blamed for having caused the defilement of their daughters. The
word of God can help in teaching, rebuking and correcting the family and church members to
change their negative behaviour towards the mothers. It can help them to love them and
embrace them despite of what happened to their daughters. The word of God can also help in
impacting reassurance and hope in the mothers especially those who are suffering from pain,
hurt, and depression and would like to commit suicide.

6.8.3 Sacraments.

Christians directly experience God’s sustaining love and grace through the sacraments of the
church. Through the sacraments Christians are incorporated in Christ, and through Him are
united to one another despite their status. Taylor in his book “Tend my sheep” had this to say
about the Lord’s Supper (Holy Communion):
Churches see the Lord’s Supper as the visible reminder of the historic fact of Christ’s death in the past, the promise and assurance of the final gathering together of all Christ’s people with Him in future and in the present. The reality of fellowship in which all believers are made one bread, one body (Taylor 1983:158).

The researcher agrees with above quotation. The Lord’s Supper indeed gives a reality of fellowship in which all Christians are made one bread and one body. This one bread, one body includes mothers affected by child defilement. By being part of the Holy Communion these mothers can feel embraced and loved by other church members. They can also feel that they are part of the body of Christ despite what happened to their daughters.

Pastoral caregivers should help the pastors and the church members, especially the pastors, not to deny the mothers affected by child defilement from partaking the Lord’s Supper as they too are part of the body of Christ. The Lord’s supper can help the these mothers to open themselves up to receive from God the grace and strength they need in order to amend their lives or find a solution to their problems. The Lord’s Supper can also help the mothers to experience God’s sustaining love and grace.

The researcher has discovered in this research that some mothers who are affected by child defilement by a church leader are denied Holy Communion by some pastors in some of the areas where this research was conducted. One of the co researchers confided in the researcher after being by-passed by the pastor as he was giving out the bread and the wine to the church members during the partaking of Holy Communion. The reason given was that her daughter had accused one of the church leaders in the church of having defiled her. Mothers affected by child defilement are part of the body of Christ who should not be denied the Holy Communion.
6.8.4  Fellowship of believers.

People in trouble find help in the knowledge that they are not alone, that others have come through the same sort of experience. An old English proverb says: “A trouble shared is a trouble halved’. This is true of everyone, not only Christians.

Christian fellowship means more than just telling people that others have trouble too. It means actually sharing the trouble; helping and supporting those in need, not just with words of sympathy, but in a practical way.

Christian fellowship as a resource for helping those in need is the responsibility of the whole congregation-the whole household of the faith as Paul called it (Galatians 6:10). This fellowship is part of the ministry of every Christian. A ministry of love and action which concern every member of the church who also has a contribution to make.

The New Testament provides us with a clear pattern of the church as a caring community which individuals, families and household groups, while keeping their many differences and personalities, all belong together in one fellowship, because all are joined to Jesus Christ in the Communion of the Holy spirit.

Gerkin had this to say about the church as a caring community:

“A primary function of the Christian community is that of creating and maintaining a climate of relationship within which all members of the community are understood and cared for. To experience such a community is to overcome the loneliness that pervades the contemporary culture.” (Gerkin 1997:126).

The researcher aligns himself with Gerkin because he shows the significant part of the relationship within the community which demonstrated love and care to the mothers affected.
by child defilement as they are an integral part of the Christians community in which God also wants to use them to extend his kingdom.

As mentioned earlier in this chapter, the church as a Christian community should not reject and isolate mothers affected by child defilement as a way of resolving the problem of child defilement in the church and the community. They should instead denounce the evils of child defilement that are affecting the lives of the mothers.

The church, as a fellowship of believers, can be a resource for understanding and caring for the mothers affected by child defilement. As a fellowship of believers it can also be a resource of sharing the difficult life situation of these mothers. By doing so these mothers will feel encouraged and their loneliness will be overcome.

6.8.5. Prayer.

Prayer is important in the ministry of counselling because it is a man’s or woman’s chief way of keeping close to God. The following is what prayer does in the lives of people:

- It opens up people’s living situation and enables them to draw on the deep resources of God’s strength and wisdom.

- It brings people into touch with the mind of God, so that they begin to see the problem in a new and clear way.

- It also enables them to draw upon more than their own wisdom to meet the problem.

- Prayer reminds people that their own understanding and strength is limited, and that they can find the true meaning of life and of all their relationship in the teachings and examples of Jesus Christ.
- Prayer helps people to find and experience God’s forgiveness and His sustaining love in the midst of their failures and problems.

Louw in his book ‘a Pastoral Hermeneutics of Care and Encounter’ discusses four therapeutic dimensions of prayer namely; prayer as meditation, prayer as remorse and confession of guilt, prayer as gratitude and prayer as healing (Louw 1998:436-438). He discusses these dimensions in the following way:

**6.8.5.1 Prayer as meditation.**

Meditation signifies a way of living and doing in which people seek to link God and the purpose of their lives to their daily actions, thoughts and words. Meditation is thus more than seclusion, pondering and quietude. Meditation becomes a way of dealing with life in which life is viewed as more than merely a bio-physical process within a material reality. Meditation in prayer thus becomes an attitude to life, subject to God’s discipline and sovereignty over all aspects of life (Louw, 1998:436).

The researcher agrees with Louw and recommends that pastoral caregivers must help mothers affected by child defilement to engage in the prayer of meditation. This will help them to link God and the purpose of their lives to their painful experiences. Being in union with God will help them have a feeling of belonging to someone who they can speak to, who can listen to them and who can care for them. This feeling will make the mothers to be encouraged and comforted. Prayers of meditation can help them depend on God for their comfort and encouragement.
6.8.5.2 Prayer is remorse and confession of guilt.

Louw states the following about Prayer as remorse and confession of guilt:

“Prayer, as remorse and confession of guilt, brings the therapeutic effect of relief, liberation and salvation. In psalms 32, the supplicant knows that all will be well only if a person’s sins are forgiven (v.1). The therapeutic issue of forgiveness of sins is appropriates and coupled with true remorse and confession of guilt (Psalms 51). For example, in Psalms 32:3 the supplicant knows that if he remains silent about his sins, his body will waste away. The therapeutic moment of liberation breaks through: ‘Then i acknowledge my sins to you and did not cover up my iniquity. I said, “I will confess my transgressions to the Lord” and you forgave the guilt of my sin’ (Psalms 32:5).

Prayer, as a therapeutic medium to communicate guilt, is more than an emotional catharsis. Prayer should not merely express regret and sadness. Confession of guilt which communicates only the trauma of psychic pain may degenerate into masochistic self-torture. Confession of guilt is free from masochism when it is addressed to the Lord. This ‘to’ imply that guilt is transformed by God’s mercy. This immediately results in forgiveness and liberation as God’s gift to the supplicant. Peace and gratitude flood the supplicant’s heart: this may be described as the therapeutic effect of reconciliation (Louw 1998:437).

With the above understanding of prayer, the mothers affected by child defilement can be helped to feel relieved, liberated and saved when they are helped to engage in prayers of remorse and confession. As indicated in chapter four of this research study, one of the effects of child defilement experienced by the mothers was feeling guilt. The researcher has discovered through this research that even those that have not caused their daughters to be defiled by a church leader suffer from the feeling of being guilty. This is because of being blamed that they are the ones who caused the defilement of their daughters. The researcher is of the view that helping them to engage themselves in prayers of confession can help them to
feel relieved, liberated and saved. As noted above prayers of confession of guilt, bring the therapeutic effect of relief, liberation and salvation in the people.

Prayers of confession of guilt addressed to the Lord can help in making the mothers be assured that their sins have been transformed by God’s mercy. Being assured that their guilt has been transformed by God’s mercy will help in giving the mothers a feeling of relief and liberation.

6.8.5.3. Prayer is gratitude.

Gratitude is the most immediate criterion which indicates the quality of the new person’s maturity in faith and the supplicants true motive before God. In gratitude the believer embraces the gift of grace which the spirit has instilled in order that the new person can live victoriously. The therapeutic issue of gratitude is a positive attitude of joy and a future vision of hope. The believer anticipates with gratitude God’s faithfulness; hope is evoked. Hope is essentially the therapeutic effect of prayer in faith (Louw 1998:437-438).

With the above understanding of prayer as gratitude mothers affected by child defilement can be helped to have a positive attitude of joy and a future vision of hope when they engage themselves in prayers of gratitude. The researcher has discovered in this research that some of the mothers are troubled by a question of why God allowed that their daughters should be defiled by a church leader. This has caused them to lead a negative life and lose hope. The pastoral caregivers must help the mothers to accept what happened and thank God for everything. This will help them to lead a positive life of joy and hope. Prayers of gratitude can be an important tool to help the mothers accept what happened to their daughters and live in peace and joy with hope.
6.8.5.4 Healing is the fourth dimension of prayer.

Prayer cannot be separated from the dimensions of recovery and healing. In pastoral practice a prayer for healing is often coupled with the important formula: ‘If it is God’s will’. The will of God is an appropriate formula for the prayer of healing if said in complete dependence upon God and confirming God’s faithfulness to his promises. The supplicant depends wholly on God’s faithfulness for the outcome of the prayer, whatever the outcome might be. If healing does not take place, God’s reliability is not nullified because his faithfulness was the presupposition from which the supplicant departed. Nor does the outcome of prayers become the final criterion for the prayer’s quality of life. It is meaningful in pastoral care of the ill to pray for God’s will to be done, provided that the focus in the prayers for healing is faith and trust in the healing God, and not the healing asked of God.

God’s will is salvation, God’s will is human salvation, humanity and justice. Within this salvation and enjoyment of life there is room for healing. The prime focus in pastoral care for the ill is not the healing God can bring but directing attention to the God of healing. ‘God’s will’ then becomes what happens in the supplicant’s heart while praying for healing (Louw 1998:438).

The researcher aligns himself with the above understanding of prayer for healing and recommends that pastoral caregivers should help the mothers affected by child defilement to engage themselves in prayer for healing and depend on the will of God to be done. This will help them to depend on God and feel that despite their problems, there is someone who cares for them and loves them.

In this research study, by healing, the researcher is referring to a situation in which traumatized mothers who are affected by child defilement come to terms with their problem
of being hurt, rejected and isolated. It is when these mothers reach a stage when they feel accepted, loved and embraced that one can say healing has been attained. space

6.9 PRELIMINARY CONCLUSION.

This chapter has described what pastoral care and counselling are. The Biblical perspective and theological foundations of pastoral care have been explored. The chapter has also highlighted the effects which the mothers experience as a result of their children being defiled by church leaders. Gerkin’s pastoral care method of shepherding, augmented by Waruta and Kinot’s African method of pastoral care have been applied as a way of helping mothers affected by child defilement to come to terms with the effects of child defilement. The researcher is of the view that when this method of shepherding is correctly applied, the church leaders and the church members can help to care, nurture, heal and protect the mothers affected by child defilement by a church leader. This method can also help the affected mothers to overcome the effects of child defilement by a church leader.
CHAPTER SEVEN

EVALUATION, RECOMMENDATION AND CONCLUSION

7.1 Introduction.

The whole purpose of this research was to explore how mothers experienced the defilement of their own children by a church leader in the Zambian context. The research aimed at getting some insights into how the defilement affected the mothers, and the changes that occurred in their lives regarding their relationships with other people and with their defiled children. The research also looked at how the role of motherhood had changed. The research looked at what caused the church leaders to violate and overlook their own work of pastoral care by defiling children.

The issue of child defilement was introduced as being a global phenomenon with a focus in Zambia particularly in Lusaka. The researcher gave his motivation in how to tackle the problem and show why the study was necessary.

7.2 METHOD OF DATA COLLECTION.

The study employed qualitative research methodology. This was in order to enable the researcher to understand the social constructions of mothers and how they experienced the disclosure of defilement of their children by a church leader. A one-to-one semi-structured interview was employed to collect data from the mothers affected by child defilement. Questions used were largely open ended to allow the mothers as much freedom of expression as possible within the limits of the goal of the interview. The research questions were designed to study the participants’ experience from their point of view and was immersed in their ideas, motives, beliefs and feelings. During the interviews, the researcher ensured that there were no distractions by anybody during the process of interviewing. Data was collected
by taking notes during the interview. To confirm the accuracy and understanding of the
feedback, the researcher reframed the respondents’ answers. Data was analyzed using the
thematic analysis method. In employing this form of analysis, the researcher identified major
concepts or themes that came up during the discussions with mothers affected by child
defilement. The themes that were identified came out of the data and were not imposed on the
data. In this form of data analysis, the researcher did the following:

- Perused through the collected data and identified information that was relevant to the
  research questions and objectives. To make sure that the themes that were identified
  were derived from the data, the researcher had a second interview with each mother.
  The themes identified in the initial interview were revisited with the mothers affected
  by child defilement and they were asked as to whether the themes correlated with what
  they were expressing in the initial interview.

- Classified major issues or topics covered.

- Reread the text and highlighted key quotations/insights and interpretations.

- Indicated the major themes in the margins.

- Placed the coded materials under the major themes or topics identified. All materials
  relevant to a certain topic were placed together.

- Developed a summary report identifying major themes and the associations between
  them.

- Reported the intensity, which refered to the number of times certain words or phrases
  or descriptions were used in the discussion. The frequency with which an idea or word
  or description appeared was used to interpret the importance, attention or emphasis.
7.3 PARTICIPANTS.

Eight (8) participants were interviewed in this research study. The participants were selected by the researcher in conjunction with the social welfare officer of the Co-ordinated Response Center. The officer played a key role in identifying the mothers and making arrangements for interviews with the researcher. The criteria for selecting the participants was as follows:

- the biological mother of a defiled child
- the mother’s age must be between 20 to 55 years
- the mother must have known of the defilement for one year
- the defilement was reported to them by their defiled child
- the child must have been defiled by a church leader (pastor, church elder, Sunday school teacher, catechumen class teacher)
- the defiled child should be aged between 0-16 years.
- the mother who has the intellectual, emotional and physical ability to talk about her experiences.

The research questions explored the participants different experiences of child defilement and focussed specifically on their unique points of view, ideas, motives, beliefs and feelings on the phenomenon of child defilement. The participants were thus allowed to tell their stories in their own way, since they were viewed as experts in their own journey and experiences. In this regard, the aim was to remain congruent with each participant’s context and continually refer to the text of each written story whilst making interpretations. The interpretations dealt with individual themes and through the processes of the use of language, personal identities and exchange of dialogue, new meanings were created with the participants. These were recorded in chapter four of this research study.
The defiled children and the church leaders as perpetrators were not part of the participants who were interviewed because of the following reasons:

- The interviews aimed at establishing how mothers experienced the defilement of their child by a church leader.

- Interviewing the defiled children was going to bring back memories of the abuse to them. This was going to re-traumatize them.

- The area of child defilement by church leaders is very sensitive for the church and the church leaders. The church leaders who are perpetrators may refuse to be interviewed and to respond to the questions.

7.4 **BRIEF OVERVIEW OF THE STUDY.**

In chapter two, several themes namely, the historical overview of child defilement focusing on the mediaeval period, the global situation of child defilement, the African and the Zambia scenario of child defilement were dealt with. Child sexual abuse in the church focusing on the Catholic Church and the causes and the effects of child defilement on children as victims were also dealt with. The aim was to have a broader knowledge of the subject of child defilement both locally and globally. Chapter three focused on the research method and design utilized for this study, and outlined the epistemological basis, sample, and data collection analysis methods. Chapter four explored the reality of child defilement with eight (8) main participants drawn from around Lusaka the capital city of Zambia. In this chapter, the description of child defilement in accordance with the understanding of the Zambian context and law, the forms and types of child defilement were also dealt with in reference to the available literature. The aim was to have an in depth and broader understanding of child defilement. Chapter five focused on three painful stories told by three mothers whose daughters were defiled by a church leader. These stories helped the researcher to journey together with the mothers and
exposed him to the pains that they experienced following disclosure of defilement of their children. The following were the pains that they experienced as revealed by the research:

- The church siding with the perpetrator.

- Blaming their daughters for having caused the church leaders to defile them.

- The church not listening to what they were saying.

- Blaming them for not teaching their daughters good morals which could be able to prevent them from being defiled by the church leaders and losing fellowship with God and friends.

Finally, chapter six focused on the role of pastoral care and counselling in traumatized mothers affected by child defilement by a church leader. This included how pastoral care could help in setting a new paradigm to enable appropriate counselling to the affected mothers.

The roles that the pastor, the extended family of the mothers affected by child defilement, and the church community could play in order to bring healing to the mothers based on the problem of child defilement by a church leader were dealt with. The study showed how pastoral care and counselling could bring healing to the mothers affected by child defilement and their families who were traumatized by child defilement.
7.5 SUMMARY OF FINDINGS.

7.5.1 Causes of child defilement by a church leader.

Research through literature review has shown the following to be what motivated the church leaders to defile children:

- Respect and unquestionable authority.
- Trust which a church leader is surrounded with.
- Educational gaps, situational stress.
- Celibacy.

The above are explained in detail in chapter two of this research study.

7.5.2 Effects of child defilement on mothers by a church leader.

The research has shown the distressing emotions in the mothers affected by child defilement by a church leader which included the following:

- Loss of religious faith,
- Loss of trust in the church leader,
- Feelings of anger towards the perpetrator,
- Dissatisfaction of their parenting role.
- Marital relationship problems
- Relationship problems with their daughter.
- Having feelings of stress
- Having feelings of shame
- Feelings of guilt.
- Worried that their child might have contracted HIV.
- Worried that their child has lost her virginity.

The above distressing emotions are also explained in detail in chapter four of this research study.

In view of these distressing emotions, this research study showed in chapter six the role of pastoral care and counselling of the mothers affected by child defilement. This included how pastoral care could help in healing them. The roles that the pastor, church community and family members of the mothers affected by child defilement could play in order to bring healing to the affected mothers based on the problem of child defilement were highlighted. The research study also showed how pastoral care and counselling could bring healing to the mothers affected by child defilement by a church leader and their families traumatized by child defilement.

7.6 LIMITATIONS OF THE STUDY.

As already mentioned in chapter three of this research study, a social constructivist stance was adopted in this study. This stance is in line with what this study is all about, i.e. exploring the mothers’ emotional experiences of child defilement by a church leader. This required the researcher to actively participate in the whole process of the research study. Due to the extensive time and labour intensive nature of the study only eight participants were interviewed. This small sample only represented a small proportion of mothers who were affected by child defilement and, therefore, cannot be generalised to a large population of mothers who are affected following disclosure of defilement of their children by a church leader. Although the researcher knew that interviewing more mothers affected by child defilement would have elicited more information and assumptions about the research topic, the aim was only to focus on the selected participants in the context of Zambia.
7.7 SUGGESTIONS TO LESSEN THE POSSIBILITY OF CHILD DEFILEMENT BY CHURCH LEADERS OCCURING.

The church in Zambia, just like any other church around the world, is called to protect the children from being defiled be it by church leaders or non church leaders. As chapter one of this research study has shown, it is widely accepted that child defilement is endemic in Zambia. About one quarter or one third of Zambians suffer some kind of child defilement, creating long lasting scars of every kind. These scars will need to be healed as part of a growing relationship with God. Protecting the children from being defiled will help the mothers not to suffer from the trauma of child defilement.

The researcher is here suggesting some of the following ways which the church can use to protect children from being defiled by church leaders occurring:

- Training the church leaders on issues surrounding child defilement: As already mentioned earlier in this chapter, Cooper-White mentions the educational gap as one of the contributing factors to clergy misconduct. He argues that until recently, the training of seminarians in professional ethics has been woefully lacking in most minister’s education. Only in the last decade or so has the issue of professional boundaries been included in clergy training in most institutions, or in books for clergy. Earlier mention of sexual ethics tended to be exclusively on sexual morality, not power and responsibility and schools with more conservative theological frameworks traditional roles of men and women still tend to follow this model. (Cooper-White, 2013:70-73).

In agreeing with Cooper-White, the researcher would like to say that it is important for the church leaders, especially the pastors, to be trained on issues surrounding child
defilement. This will not only help in opening up discussions on issues of child
defilement in churches, but it will also help in protecting the children from being
defiled by church leaders. There is a great need to seek out the education which will be
needed to best provide care. Churches and theological colleges and Universities
should take advantage of institutions which are involved in training communities on
issues surrounding child defilement. Theological colleges and Universities should also
include child sexual abuse in their curriculum in order to make sure that all those who
graduate are well equipped in issues of child defilement. The course should include an
understanding of ethical guidelines regarding boundaries, power and authority, and
sexual conduct. With the knowledge gained they will be able to help
parishes/congregations to advocate against child defilement and other forms of child
abuse.

- Policies and procedures for responding to allegations of leader sexual misconduct
should be developed by church governing bodies. The researcher has observed that
most of the churches in Zambia have no policies on child protection and procedures
for responding to allegations of leader sexual conduct. For example, the Reformed
Church in Zambia to which he belongs, despite being in existence in Zambia for over
a hundred years, has no such documents.

- Continuing education for all pastors regarding professional ethics is required. As
already mentioned above, this should be part of the curriculum in theological colleges
and lay training centres.

- Consultation and supervision should be available to all pastors. Although in some
churches e.g. the Reformed Church in Zambia there is some kind of supervision of
church leaders especially pastors, the researcher has observed that this supervision is
more on the welfare of the pastor and his family and not on his moral conduct.
- The child protection policies and procedures to be put in place in the church should include some of the following elements:

- Safe meeting places, with windows in all interior doors.
- Two adults present when meeting with children and youth.
- Screening for all volunteers and staff.
- Requiring all volunteers to attend the church at least six months prior to working with children and youth.
- Regular training for parents, Sunday school teachers and youth workers about harassment and abuse.
- Education for children and youth on safe touch and healthy sexuality.
- Procedures for reporting disclosures or allegations of child sexual abuse.
- Guidelines for relating to a sex offender in the parish/congregation.

7.8 RECOMMENDATION FOR FURTHER RESEARCH.

The researcher hopes that there will be other fellow researchers who would further venture into this issue of child defilement in order to reveal and explore more hidden issues about this phenomenon.

The following are some of the suggested areas to be researched:

- Effects of child defilement by a church leader experienced by fathers.
- Effects of child defilement by pastors experienced by their wives.
- Effects of child defilement experienced by the church.
- Effects of child defilement experienced by the church leaders as perpetrators.
7.9 CONCLUSION.

The focus of this research study was to find out the effects which were experienced by mothers as a result of defilement of their children by a church leader. Qualitative research methodology was employed in this research study to enable the researcher to understand the social constructions of mothers and how they experienced the disclosure of defilement of their children by a church leader. Semi-structured interviews were used to collect data from the eight mothers affected by child defilement who were selected from within Lusaka, the capital city of Zambia. Thematic Analysis, as a method of data analysis, was employed to identify major concepts or themes that came up during the discussions with the interviewed mothers. The following are the themes that came out of the data that was provided by the affected mothers: Loss of religious faith, less trust in the church leaders, dissatisfaction of their parenting role, feelings of anger towards the perpetrator, feelings of guilt, suffering from depression and anxiety, concerned that their children might have contracted HIV and AIDS and worried that their children have lost their virginity. Gerkin’s shepherding methodology which is augmented by Waruta and Kinoti’s work, Pastoral Care in African Christianity and Pollard’s evangelism method of positive deconstruction were applied to these themes to help to empower the mothers to come to terms with the effects of child defilement by a church leader. As already mentioned earlier in this chapter, the researcher is of the view that when this methodology is applied correctly it can help the church leaders and the church members to care, nurture, and heal the mothers who are affected by child defilement by a church leader.
Appendix A

“CHILD DEFILEMENT” IN ECCLESIAL CONTEXTS IN ZAMBIA - A PASTORAL PERSPECTIVE

QUESTIONNAIRE

Thank you very much for willing to take part in this survey. I would like to assure you that you will remain completely anonymous; no records of the interview will be kept with your name on them. Above all this survey is solely being done for academic and research purposes. Please kindly answer the following questions that I am going to ask you.

1. What is your occupation?
2. Are you married?
3. What is the age of the child who was defiled?
4. When was your child defiled?
5. Do you know the church leader who defiled your child?
6. Can you explain how your child was defiled?
7. When and how did you find out about the defilement?
8. What was your reaction following the discovery that your child was defiled?
9. What were your feelings and thoughts after you discovered that your child was defiled by your church leader?
10. How did the defilement impact your relationship with your child?
11. What were your feelings towards the church leader who defiled your child and your other family members?
12. What did the church leader say when he was asked why he defiled your child?
13. What have you done to help your child deal with the trauma of being raped?
Appendix B

“CHILD DEFILEMENT” IN ECCLESIAL CONTEXTS IN ZAMBIA - A PASTORAL PERSPECTIVE

CHICEWA TRANSLATED VERSION OF THE QUESTIONNAIRE


1. Kodi mugwila nchito yanji?
2. Kodi ndinu okwatiwa?
3. Anazaka zingati zobadwa mwana amene anagonedwa?
4. Niliti pomwe mwana anagonedwa?
5. Kodi muwadziwa akulu ba mpingo amene anagona mwana wanu?
6. Fotokozelani bwino umo mwana wana anagonedwela.
7. Niliti komanso munadziwa bwanji za kugonedwa kwa mwana wanu?
8. Muna cita ciyani mutadziwa kuti mwana wanu anagodedwa?
9. Maganizo anu anali otani mutadziwa kuti mwana wanu anagonedwa ndi akulu ba mpingo?
10. Kugonedwa kwa mwana wanu, kunacita ciyani pakukhalilana ndimwana wanu?
11. Maganizo anu ali otani ndi m’kulu wampingo amene anagona mwana wanu?
12. Ananena ciyani m’kulu wampingo mutamufunsa kuti niciyani cimene anagonela mwana wanu?
13. Munacitapo ciyani kuthandiza mwana wanu kupyola muzowawa zakugonedwa?
Appendix C

Plot A. 1699, Phase Two
Kwamwena Valley
Lusaka
Zambia

Dear Madam

REF: REQUEST TO PARTICIPATE IN A RESEARCH PROJECT FOR A PHD (DOCTOR OF PHILOSOPHY).

Receive greetings in Jesus’s name.

In reference to the above mentioned subject, you are being requested to participate in a research project that is undertaken as a requirement for PhD with the University of Pretoria.


It aims at exploring the mothers’ experiences following disclosure of defilement of their children by a church leader in the Zambian context. The objective of the study is to interview the mothers in order to get some insight into how the defilement affects them, and the changes that occur in their lives regarding their relationships with other people and with their defiled children.

You are being requested to participate in the empirical research which will be done by way of in-depth interviews. These in-depth interviews will be involved with you.

The duration of the interview is estimated to be between 40 to 60 minutes. You are assured that all your personal experience or inputs obtained will be treated with utmost care to maintain confidentiality. In the final report, your name will not be divulged to ensure anonymity. You are also assured that efforts will be taken to ensure that all ethical obligations and consideration will be adhered to. Participation in this study is voluntary. Should you in due course decide to withdraw your participation at any time, you are free to do so.

In His Love and Service

Pearson Banda
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