

Pastoral Response To Female Survivors Of Intimate Partner Violence: A Study Of  
The Kenya Assemblies Of God Pastors, Nairobi County And Its Environs

by

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PASTORAL RESPONSE TO FEMALE SURVIVORS OF INTIMATE PARTNER  
VIOLENCE: A STUDY OF THE KENYA ASSEMBLIES OF GOD PASTORS,  
NAIROBI COUNTY AND ITS ENVIRONS

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## DECLARATION

PASTORAL RESPONSE TO FEMALE SURVIVORS OF INTIMATE PARTNER  
VIOLENCE: A STUDY OF THE KENYA ASSEMBLIES OF GOD PASTORS,  
NAIROBI COUNTY AND ITS ENVIRONS

I declare that this thesis is my original work and has not been submitted to any other college or university for academic credit.

Signed: \_\_\_\_\_

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Esther Waheto Kihara  
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## LIST OF ABBREVIATIONS AND ACRONYMS

IMA – Interchurch Medical Assistance

IPV – Intimate Partner Violence

KAG – Kenya Assemblies of God

PTSD- Post Traumatic Stress Disorder

UNICEF- United Nations Children’s Fund

WHO- World Health Organisation

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## ABSTRACT

Previous studies on Intimate Partner Violence (IPV) indicated that survivors, male or female, may find it a challenge to talk about their situation with friends and family members. It is noteworthy that women suffer violence more in the hands of their intimate partners than men do. Women often seek help from pastors and consider the church a safe place for them and their children. This research was done among senior pastors of Kenya Assemblies of God (KAG) in Nairobi. It sought to establish the prevalence of Intimate Partner Violence (IPV) as observed by pastors within the KAG church, their views, and how Christian teachings and culture influenced how they respond to IPV. This research adopted survey research design and used purposive sampling to recruit the targeted 147 senior pastors. Questionnaires were distributed to the senior pastors and analysed. The researcher received valid responses from 89 respondents. It was found that 98.8% of the pastors acknowledged that IPV existed among KAG congregations. It further revealed that the pastors were aware of the dynamics and manifestations of IPV and were willing to assist survivors to find healing. The pastors' main focus towards IPV intervention was fostering reconciliation using scriptural teachings as the basis for intervention. The researcher recommended that the church in Kenya may need to organise seminars where IPV can be discussed freely with the facilitation and assistance of trauma therapists or trained marital counsellors.

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## CHAPTER ONE

### INTRODUCTION AND BACKGROUND TO THE STUDY

#### Introduction

Intimate Partner Violence was defined by Josephs (2006) as any acts aimed at controlling, dominating or terrorising an intimate partner. Kennedy (2007, p. 6) defined it as “actual or threatened physical, sexual, psychological or economic abuse of an individual by someone with whom they have had an intimate relationship”. United States Centres for Disease Control and Prevention (2014) termed IPV as physical, sexual or psychological harm by a current or former partner or spouse.

Intimate partners may or may not be married. Prager (1995) characterised intimate relationship as where partners share enduring affection, have mutual trust and enjoy partner cohesiveness. This means that the partners have confidence that none will cause harm to the other and that there will not be exploitation. Intimate partners share time and activities, and experience togetherness. Pastors may have moral challenges working with intimate partners who are not, in the Christian sense, married even though they live together.

To achieve relevance, pastors need to understand the challenges that people go through as well as develop interventions to meet those needs. Pastoral care and counselling is a valuable instrument that pastors can use to reach out to people and minister to them. IPV is one of the various issues that they are confronted with because they are in a more strategic position to do family care and counselling than any other profession.

### Background of the Study

The World Health Organisation (WHO, 2014) statistics indicated that 30% of women worldwide reported to have experienced IPV and 38% of the murders of women are committed by their partners. It also cited violence against women as a major public health problem and a gross violation of human rights. Donnelly and Ward (2015) referring to a global IPV prevalence report by Devries et al. (2013) indicated that IPV was highest in Southeast Asia (37.7%), followed by Eastern Mediterranean (37%). Africa was third with a prevalence rate of 36.6% whereas the reported global rate was 26.4%.

The realities of the extent and prevalence are known when the cases were discussed on social channels as news (Kiplangat, 2008). This does not capture the underlying challenges that many survivors of IPV go through because most of the cases go unreported. Kenya Demographic and Health Survey (2008-09) indicated that of all the women who reported being abused, two thirds of them were survivors of IPV of current or former husband or partner. Similarly, according to a report by the Maendeleo ya Wanaume Kenya (2009), over 1.5 million men suffered regular physical, emotional and economic abuse in the hands of their intimate partners.

Owing to the Kenyan statistics women report the highest number of cases of being violated by their partners. Health survey reports indicated that of all cases of violence against women 47% were a result of partner abuse. The survivors of IPV live within the community and may be affiliated to different religious groups. The religious leaders need to respond to the vice of IPV.

### Causes of IPV

The United Nations Children's Fund (UNICEF, 2002) underpinned various causes of IPV. These included beliefs that males are inherently superior to females, lack of or inaccessible legislations and cultural sanctions, socioeconomic forces between males and females, poverty, alcohol and substance abuse, and early childhood experiences of violence. It observed that male violence increases when women grow economically and become independent. This is because the males may feel threatened by the women.

WHO (2012) discussed the ecological model of understanding possible causes of IPV. These factors were obtained from studies in different countries and communities. The model had individual, relationship, community and societal factors. Individual factors that described abusive males included being of a young age, having low levels of education, substance abuse and observing or experiencing violence at a young age. The women on the other hand were more vulnerable to abuse when they had had past exposure or experience of violence, had accepted violence as a way of life or had low levels of education.

From observation, relationship challenges were observed where there was conflict and discord, economic difficulties, where the woman was more educated than the partner, or male dominance. In the community and society it was observed that women had a generally low social and economic status, there existed gender-inequitable social norms, increasing poverty, social acceptance of violence as the way to resolve conflict, and weak legal sanctions against IPV.

Bylerly (2013) posited that the Kenyan challenge of IPV was fuelled by the societal attitudes towards superiority of men and domestication of women. She further

observed that IPV was acceptable in certain circumstances by both men and women. Chitando and Chirongoma (2013) stated that most African cultural practices may have precipitated violence by silencing the survivors of IPV, especially women, who are culturally not expected to voice their opinions and frustrations. Uwayo (2014) further agreed that IPV, though regarded as a private family matter, it has deeply engrained cultural and traditional considerations.

Quite a large number of women believe that the success of the marriage is a reflection of their individual success (Martin, 1987). Further, according to Miles (2002) this may be the main reason why abused women stay in their marriages and are perpetually silent about the abuse. Frieze (2005) suggested that the survivors of IPV stay in the relationships because they love their partners; they believe that the perpetrators of violence need them and that they would make the effort to change. Some fear being alone especially when they have low self-esteem, are not able to fend for themselves and are financially dependent on their partners. The fear that the perpetrators of violence may become more violent is often another reason why the women stay. Their abusive partners threaten that they would retaliate more severely if they left. These women are trapped in a secret place of silence.

#### Nature of IPV

McClennen (2010) stated that most relationships with IPV seem 'normal' and that the difficulties within the relationships are masked and may be difficult to identify. Referring to married women, McClennen observed that they strive to fulfil the traditional roles of marriage since the roles of motherhood and being wives dictate their self-image.

Walker (1979) categorised the pattern into three phases: Tension-building-anxiety phase, Violence phase and the Honeymoon/Remorse phase. In the tension phase the partners are anxious and uptight. The woman does everything possible to please the partner and minimise the stress levels. The partner on the other hand is pensive and unpredictable. The second phase is where the violence happens. It only requires a trivial issue to push the abuser to aggression. From the researcher's observation, the abuser is often in full command of his actions and targets the areas where the woman values the most, especially the face. In the honeymoon phase the abuser is remorseful and very apologetic and may offer to attend counselling. The family life may improve until a new cycle begins.

The cycle of violence was outlined by Frieze (2005). She said that a highly emotional and romantic relationship can end up violent due to stress and jealousy. Perpetrators of violence are initially apologetic and promise never to repeat the abuse. These women accept the apologies and express love and care for their abusive partners. The problem with this scenario is that the women may not know that they are reinforcing the violence. Their partners would repeat the behaviour then be apologetic and seek forgiveness. With time the violence becomes frequent and more severe with fewer or no apologies. The perpetrators of violence may eventually psychologically and sexually abuse the survivors of IPV and blame them for the violence. The violence becomes routine and the survivors of IPV are in constant fear. The children (if any) suffer especially since the males often attack both mother and the children.

#### Effects of IPV

IPV has devastating effects on the woman and her children. McCue (2008) posited that the abused women presenting with economic hardship and dependency may lose

their homes, possessions, employment and children. The women may also experience isolation from family and friends, learned helplessness, low self-esteem, low self-worth, extreme fear, anxiety, little self-confidence, shock, anger and nightmares. Some develop post-traumatic stress disorder (PTSD), personality disorders, acute stress disorder and major depressive disorder. From observation some women report their cases when they have severe injuries; they have contracted sexually transmitted diseases and HIV/AIDS or have physical illnesses. Some of the illnesses include diabetes, high blood pressure, headaches, stomach pains and chronic physical pain. Suicidal ideation and attempts, and ideations of homicide are also common.

McGee (2000) said that children, in general, develop fear, powerlessness, depression or sadness, impaired social and family relations, aggressive behaviour and anger. They may also present with eating disorders, sleeping disorders, identity crisis due to stigma, humiliation and shame when people know what is happening in their family. They often feel betrayed and may have suicidal or homicide thoughts. Similarly, effects of IPV on adolescents may be observed in their violent romantic relationships, they may skip or entirely drop out from school or get involved in substance abuse and criminal activity (Geffner, Igelman, & Zellner, 2013).

#### Pastoral Response to IPV

Adams (1970) said that pastors work as representatives of religious communities and are the specific religious leaders that people identify with. Further Oates (1974) indicated that pastors are responsible for caring for the weary and the discouraged members of the congregations and community. Dittes (1999) posited that the term 'pastoral' denotes selfless commitment to the intent of a caring and healing

relationship between a pastor and a counselee. This special self-giving quality is a symbol of a pastor's response to God's call to serve and minister to humanity.

The United States Conference for Catholic Bishops (2002) stated that women seek help from the church because they believe it is a safe place. They made a call for pastors to see themselves as first respondents to IPV crisis. However, according to Nason-Clark, Fisher-Townsend, and Fahlberg (2013), a majority of pastors are not specifically trained on issues of domestic violence. They argue that most pastors provide misinformed and unhelpful information. They lack the knowledge of prevalence or the dynamics of family violence. They are eager to protect the institution of marriage and keep families together.

Martin (2015) urged that the goals for intervention are securing safety for the survivors of IPV, seeking accountability from the abuser, and restoration of the relationship where possible. This can only be achieved through diligent care and understanding of how to deal with underlying issues. The researcher however observed that IPV was not discussed much in the Kenyan religious circles. The result of this was that there existed minimal literature on this subject and hence no clear discussion on the views and responses of religious leaders on the same.

#### KAG Church in Nairobi County and Environs

This research was carried out in KAG Church, a denomination that was registered in October 1973 under the Societies Act of the laws of Kenya. It is a member of the National Council of Churches of Kenya and the Evangelical Alliance of Kenya. KAG has over four thousand churches in different parts of the country and is under the leadership of a General Superintendent. The national dispersion is divided into twenty nine districts, commonly known as diocese. For the purpose of this study the

research was focused on Nairobi County and its environs as the recognised geographical area. The area is further subdivided into thirteen sections (also known as parish) namely Ruiru, Kasarani, Kariobangi, Dandora, Huruma, Ngongu, Kayole, Outering, Central, Langata, Ngong South, Dagoretti and Kabete. The total number churches were one hundred and forty seven and each had one senior pastor and at least two or more assistant pastors.

KAG is led by the General Presbytery, the National Executive, District Executive Committees, Sectional Presbyters and assembly senior pastors. The senior pastors are responsible for the affairs of the congregations though there exists a predetermined denominational organisational structure and a constitution that ensures homogeneity of the assemblies.

#### Problem Statement

Dittes (1999) stated that pastors, being representatives of religious entities, serve the people and help them to grow and nurture their relationships with God and with others. He further stated that consistent service over a period time may increase the pastors understanding of the welfare of the congregants. Pastors often receive survivors of IPV during their times of service. Such people may or may not seek help from family and friends, and from more formal avenues like the police and counsellors (Frieze, 2005).

Despite the statistics showing an increase in the prevalence of IPV, pastors, especially those who follow certain conservative Christian traditions, may not consider this violence as a serious vice or may condone it especially where women are the victims (Furr, 1997). The general characteristic of IPV is that most women suffer in silence (Miles, 2002). It may be that the pastors make assumptions that IPV does not exist

because congregants do not often talk about it. If they would take a stand against the violence and openly condemn it then perhaps more women would come out and speak about it, as a first step towards stopping violence. This may result in more elaborate strategies to respond effectively to the survivors of IPV.

The researcher observed that IPV exists within the KAG church congregations. The pastors may be the leaders of the congregations but are not always the first respondents to IPV cases. The abused women approach their relatives, friends, fellow women and respected members of the church before they approach the pastors. This is often a result of pastors' busy schedules and the overwhelming number of cases they attend to each day. In most congregations pastors do not discuss IPV unless in marriage enrichment sessions, where it is mentioned in passing. Sometimes the Christian values and teachings are the barriers that the abused women face while seeking help.

In addition, some survivors of IPV seek the pastors' help when they believe the violence would cost them their lives or where the friends and relatives are unable to offer help, often done as a last resort. Unfortunately, some of the perpetrators of violence happen to be members of the church. They threaten their partners with severe punishment if the information gets to the church. Thus the women are left to continually suffer in silence. The other consideration was that African traditional beliefs, worldviews and cultural practices may be precipitators of IPV. Chitando and Chirongoma (2013) posited that violence may be ignored or condoned in the name of culture especially in patriarchal societies where women have inferior social status.

Different Kenyan cultures teach that the man is the head of the home. The KAG church doctrine demonstrates how, in a marital relationship, the man is the head of the

woman. The researcher observed that some men use biblical teachings and culture as an excuse for violence against women. Some do not differentiate between cultural teachings and the biblical meaning of the man being the head. Similarly, some pastors often oscillate between their cultural understanding of family and the biblical teachings on the same when intervening in IPV cases. This creates confusion and further victimization of the women.

This study sought to document pastoral responses towards women survivors of IPV in the Nairobi county KAG churches. This was because the pastors, though not always the first respondents to IPV, are often faced with severe cases, where the survivors of IPV feel they have nowhere else to go. These women are at a breaking point where they are willing to bear the shame of other congregants knowing that they are being violated. Often they present with, among others, HIV/AIDS, physical illnesses, PTSD, depression and suicidal ideations.

#### Purpose of the Study

The purpose of this study was to analyse the pastors' response to female survivors of IPV, within the Kenya Assemblies of God, Nairobi County and its environs.

#### Objectives of the Study

The objectives of this study were

1. To establish the extent to which IPV was prevalent within the KAG church in Nairobi.
2. To find out the pastoral view of IPV among women.
3. To assess how Christian teachings influenced pastoral response to IPV among women.

4. To determine how African Cultural practices influenced pastoral responses to IPV among women.

### Research Questions

This study focused on answering the following questions:

1. What was the extent of IPV prevalence within KAG church in Nairobi?
2. What was the pastoral view of IPV among women?
3. How did Christian teachings influence pastoral response to IPV among women?
4. How did African cultural practices influence pastoral response to IPV among women?

### Justification of the Study

McClennen (2010) referring to Healey, Smith and O'Sullivan (1998) indicated that any act of physical, sexual, psychological and economic violence against an intimate partner is often used to control and abuse the victim. The abuser may isolate a victim from family and friends or restrict access to information and assistance. It was noted that the number of Kenyan female survivors of IPV seeking help had been on the rise in the recent past (Gender Violence Recovery Centre, 2011-2012).

Mugambi and Wasike (2003) had the perspective that the cultural upbringing of males and females is predominantly different. Females are taught to be submissive, humble, to think of themselves as weak, vulnerable and in need of protection. On the other hand, men are expected to be above every form of weakness. Women are taught that they are not expected to express their anger and frustrations. Rather they are to uphold the feelings and wishes of men. They further posed the questions "how are women cases presented and understood in our marriage tribunals? Why so very often are

women counselled when they are survivors of domestic violence to go back into violent situations and be better wives as if the violence is their fault?”

The statistics painted a picture of the need for intervention. Miles (2002) was of the opinion that pastors may be challenged whenever religious survivors of IPV and perpetrators of violence use the Scriptures to rationalise and justify abuse. Nason-Clark et al. (2013) discussed that pastors teach women to be submissive to their husbands in marriage and men are to exercise headship over their wives. They do this to fulfil the expectation to uphold scriptural teachings and may not realise that some congregants may be going through IPV. They added that pastors are expected to protect the institution of marriage. They could easily find themselves in a dilemma and may not be able to adequately respond to IPV cases, especially where it is clear that separation is inevitable.

The researcher was of the opinion that the KAG pastors have a part to play in responding to IPV. The dynamics of IPV paint a picture of the difficulties that most women face in opening up about being abused in their intimate partner relationships. The statistics continued to show that IPV is an issue that needs to be addressed by all stakeholders. It is paramount, therefore, that pastors too should partner with health care providers, counsellors and physicians in familiarising themselves with issues of IPV. They ought to intentionally participate in policy and law making in a bid to stop IPV. In addition, the KAG pastors need to acknowledge that the cultural view of women makes them (women) vulnerable. They seek help from church because they believe it is safe for them. For this reason pastors need to equip themselves to be effective responders

### Significance of the Study

The research findings would be useful to pastors in giving them an in-depth analysis of their awareness and view of IPV. The medical practitioners might benefit from the findings as they may expose areas that they might work with the pastors to assist the women. Counsellors might benefit from these findings as they may expound on the intricacies and the different phases and manifestations of IPV, as they work with the survivors of IPV. The findings might also help Bible colleges and seminaries to determine what training needs exist for pastors in the area of IPV and hopefully incorporate it in the syllabus.

### Assumptions of the Study

To form a basis for the need to undertake this research the researcher assumed that:

1. There existed IPV among women in KAG churches in Nairobi.
2. The respondents gave truthful and honest responses.
3. There existed homogeneity within the larger KAG church and thus the results would be generalizable.

### Scope of Study

This research sought to examine the prevalence, views, and responses of pastors when dealing with cases of IPV. The study was focused on KAG pastors in Nairobi County and its environs. The area is further subdivided into thirteen sections namely Ruiru, Kasarani, Kariobangi, Dandora, Huruma, Ngongu, Kayole, Outering, Central, Langata, Ngong South, Dagoretti and Kabete. There were one hundred and forty seven churches in this area with each having one senior pastor.

### Limitations and Delimitations of the Study

The researcher was concerned whether the respondents would be accessible owing to their busy schedules. This was addressed by attending their monthly meetings where most of the pastors were. During the meetings, the Presbyters (Sectional leaders) made an introduction and created time for the respondents to fill the questionnaires. A majority of the questionnaires were collected on the same day. Some respondents asked to be allowed to avail the questionnaires to a central location and were allowed to take them away.

The researcher was also aware of the challenge of the geographical dispersion of the different pastors and assemblies and the amount of traveling time required to reach them. To deal with this challenge the researcher sought authority from the KAG Nairobi secretariat to distribute the questionnaires during the thirteen meetings, in order to meet them in a more centralised location. The researcher then travelled to thirteen locations instead of meeting all the one hundred and forty seven pastors individually.

The researcher faced a limitation in regard to the respondents' subjective view on cultural perspectives. The researcher had no control over these views since they could not be validated.

### Definition of Terms

The following terms were used and operationalised in this study as defined below.

*Intimate Partner Violence*: This is any act of commission or omission against an intimate partner using a complex pattern of physical, sexual, psychological, and/or economic behaviours devised and carried out to control and abuse a partner (Hattery, 2009).

*Physical violence:* Crowell and Burgess (1996) define physical violence as actions that threaten or actually cause physical harm or injury to a partner. Examples include scratching, pushing, shoving, striking with objects, striking with fists, punching, kicking, cutting by curving into the skin, burning, choking, suffocating, threatening with a weapon, shooting, stabbing, spitting upon, driven recklessly to scare

*Psychological abuse:* Chang (1996) defined psychological abuse as “the misuse of power by one person in order to create submission in the other person”. These acts cause emotional pain. It can be being made fun of and demeaned publicly or privately, isolated from friends and family, being blamed for the abuse, humiliated or being accused of having extramarital affairs unfairly.

*Sexual violence:* A victim may be forced to have sex, watch pornographic material, denied protection against sexually transmitted diseases, penetrated with objects against their will or being forced to have unnatural sex (oral or anal) against their will (Strong & Cohen, 2014).

*Economic violence:* The survivors of IPV may be kept from becoming financially independent, being prevented from getting or keeping a job, forced to ask the abuser for money, left in debt with no way to pay or forced to support the abuser (Strong & Cohen, 2014).

*Survivors:* Murray and Graves (2013) defined survivors of IPV as those not in a current situation of victimisation. They underpinned the need to avert further stigmatisation of women who suffer violence. For the purpose of this study the term is used to discuss the partner being physically, sexually, psychologically or economically abused currently or in the past.

*Perpetrator:* This is the abusive partner who perpetrates physical, sexual, psychological or economic abuse to achieve control over their partner (WHO, 2012).

*Violence:* The term is used to denote the physical, sexual, psychological and emotional abuse (DeKeseredy, 2011).

*Church:* A community of Christian believers who meet regularly under a denominational banner that subscribes to the Christian faith and way of life (Schmiechen, 2012).

*Pastor:* The term pastor is used among Christian communities to denote a shepherd. This is the leader of a church whose mandate is to give spiritual care and nourishment as well as leadership (Hauder, 2015).

*Pastoral counselling:* According to Clinebell (1984) pastoral counselling is utilising different therapeutic strategies to help people to solve their cases. Pastors integrate theology, spirituality, behavioural science and systemic theories. The goal of pastoral counselling is to achieve healing for brokenness, to encourage growth of the affected individual, develop coping skills and to find holistic healing for their psycho-socio-spiritual wellbeing.

*Woman:* According to the Macmillan Dictionary (2009-2015) the term means an adult female and in this study is used to denote a wife, a girlfriend or a female lover.

*Culture:* Traditional beliefs, practices, values, meanings and constructs that define a specific community or group of people and is passed on through generations and is learnt through enculturation (Smith, 1992).

### Summary

IPV cases are mostly reported by women and are worse when perpetrated by men towards their female partners. Pastors are some of the people that survivors of IPV seek help from. Often there are congregants or members of the community who believe they can be helped by spiritual leaders. This research was aimed at discussing pastoral response to cases of IPV, explaining intimate partners, the definition and statistics of IPV, and the need for pastors to respond appropriately to the cases.

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## CHAPTER TWO

### LITERATURE REVIEW

#### Introduction

According to Kombo and Tromp (2006), literature review is an account of what is published on a topic by accredited scholars and researchers. In this study the researcher used books, journals and publications to derive research material. This chapter provides a foundation for understanding the pastoral view of IPV among women and the subsequent responses. Theoretical and conceptual frameworks that inform the study were also discussed.

#### Theoretical Framework

Kombo and Tromp (2006, p. 56) referred to a theoretical framework as “a collection of interrelated ideas based on theories”. To explain the causative and perpetuating factors of IPV and to develop a theoretical framework, specific theories were considered. This research sought to find out the prevalence of IPV within the church from a pastoral viewpoint, scriptural and cultural challenges in solving IPV cases and the responses of pastors to IPV. Social learning theory, Bowen’s family of origin theory and object relations theory formed the theoretical framework for this study.

The social learning theory emphasized that human beings learn from observation of behaviour and through a personal direct experience, with or without reinforcements (Bandura, 1971). Some people learn aggression and result to violence through observing other people doing it. Fine and Fincham (2013) indicated that children learn violent behaviour from observing IPV from their guardians, experience child abuse or from growing up in a violent cultural environment. Accordingly, people model the

behaviour of someone who gets rewarded. The motivation of perpetrators of violence may be that they observed violent behaviour being rewarded and consequently chose to do the same. On the other hand, perpetrators of violence may be violent as a result of a violent childhood. They may have learnt from formative years that violence and aggression was the only way to solve conflict.

Bowen's family of origin theory was used to further explain social learning as a way individuals acquire violent behaviour. Goldenberg and Goldenberg (2008) explained that chronic anxiety can be passed on from one generation to the next and can result to severe dysfunction in an intimate partner relationship. They also quoted McGoldrick and Gerson (1985) as saying that similar unresolved emotional and family issues tend to be replayed from one generation to another. Some aggressive behaviour may be passed on from one generation to the next as part of enculturation. The children in a family learn culture, worldviews and expected behaviour through observation and listening. If violence was part of a family's behavioural patterns the perpetrators of violence may find themselves violent towards their partners as their normal way of life. Pastors may find genograms useful in helping the partners identify unresolved emotional and family issues from their families of origin.

Hamel (2008), in discussing object relations theory, indicated that IPV often happens in relationships that have familiar patterns of a person's childhood abuse and exposure to violence. He explained that the theory is about intra-psycho relationships with significant persons. The individual forms specific attachments to specific significant persons. The persons may be the parents, siblings and caregivers. These attachments may signify love or security and may be affected when separation occurs. Separation may result in loss of trust that whoever comes to their lives will stay. They panic at the thought of being abandoned even when there is no threat of abandonment.

McClennen (2010) further stated that an abuser may be dealing with such anxieties and may come into a relationship with a history of insecurities. Such a person becomes violent to their partner when their wishes are not met. Often they panic at the thought of being abandoned. They tend to think that the reason why their wishes are not met is because the partner does not care for them any longer. They react with aggression, violence and threats. They become remorseful and beg for forgiveness especially when they fear that the violence may drive the partner away.

The social learning theory explained how perpetrators of violence and survivors of IPV all learn from the environment they grow up in. Bowen's family of origin theory further supported that children learn violent culture from generation to generation. The object relations theory expounded how violent childhood experiences can be re-enacted and expressed in adult relationships. These three theories illustrated the cause of violence and the precipitators of the same within any IPV case.

#### General Literature Review

##### Prevalence of IPV Within the Church

Religious leaders struggle with how to respond to IPV. McClennen (2010, p. 146) inferred to St. Louis Post-Dispatch (2008) where the authors stated that religious leaders "can be a powerful authority in challenging perpetrators of violence, who sometimes falsely use religion to justify their abuse". Nason-Clark et al. (2013) added that pastors need to familiarise themselves with the dynamics of family violence. It is paramount that pastors acknowledge that the survivors of IPV could be part of the religious community in which they serve.

Adams and Fortune (1998) pointed out that for a long period pastors actually believed that IPV did not exist within their churches. They were resistant to seeking

information and were consequently ill-prepared to respond to cases that came their way. This research sought to find out if pastors were aware of any existence of IPV amongst their congregations.

### The Pastoral View of IPV

The research aimed to find out how pastors view IPV since their views greatly influence their responses to IPV. Carter and Narramore (1979) expected that since theological seminaries now offer various courses in counselling, Psychology and mental health, pastoral response and views on IPV have largely improved. However, the syllabus does not adequately cover IPV and the possible interventions in its entirety.

Most recently, the Uganda Episcopal Conference termed IPV as a vice (Odi, 2013). They urged all faithful that families should be where the dignity of everyone is respected. Some Kenyan Christian leaders have also come out to condemn violence against women. Kithuure (2014) discussed the recent incidences of gender based violence and the views of Kenyan bishops toward the same. He highlighted Bishop Mark Kariuki (of the Deliverance Church) calling upon all church leaders to stop underestimating the pervasiveness of sexual and domestic violence in their congregations. Kithuure added that Pastor Murungi Igweta (of Trinity Baptist Church) viewed violence against women as a limit to their contribution to the wellbeing of the family and community. He regretted that it was unfortunate that the church segregates women who seek separation or divorce on the basis of IPV, and called on the church and pastoral teams to consider violence against women as a matter of great concern.

### The Pastoral Response to IPV in View of Christian Teachings

The conservative members of the Christian community largely agree that the biblical teaching of marriage being a covenant should be upheld. The Bible does indeed refer to marriage as a covenant (Malachi 2:14). Peterson (1984) added that from this covenant a family is built where godly children are raised, who in turn bring blessings to human kind. This is the model of family and marriage that the pastors are tasked to uphold. In addition, man and woman were created to become a union, in husband-wife relationship (Genesis 2:24). Peterson further alluded to the belief that though man and woman are different they are meant to come into this union where their diversity is lived out harmoniously. They are to live together and love each other in godly harmony that is a perfect “mirror of the unity in diversity of the godhead” (Peterson, 1984, p. 222).

Responding to IPV, the Roman Catholic Bishops of Northern Canada (1996) took a stand against the vice. The bishops termed the violence as wrong and unworthy of human beings. They termed it as a serious social problem, a crime, a sin and that it breaks the fifth commandment. They added that some perpetrators take passages from the Bible and use them to support violent behaviour towards their female partners. This message was passed across all the churches the bishops represent and was being preached from the pulpit. Their statement further stated that abused women were increasingly able to come forward with their cases and that the church was able to facilitate them to find help.

Pastors are distinguished members of society by virtue of the religious settings where they work (Oates, 1974). Their position facilitates them to come up with programs for

intervention and advocacy against this vice. Pastors can create more awareness of the reality and effects of the vice and hopefully achieve less tolerance of the perpetrators.

Similarly, pastoral counselling may be a useful tool in preventing IPV. This can be done through premarital counselling and marriage therapy where partners are taught relationship-nurturing, communication and conflict resolution skills. The overall goal of counselling partners in crisis is to help them learn how to make their relationship more mutually need satisfying (Clinebell, 1984). Being one of the first people the survivors of IPV contact it is paramount that pastors are available and have the capacity to assist their counselees.

Uganda's Catholic Church organised a national campaign against domestic violence where it called on all parishes to have liturgical services where the subject would be discussed in all its forms (Odii, 2013). The goal of this campaign was to create awareness and to bring out behaviour change in the families. The Kenyan pastors can come together and rally their congregations to talk about IPV from the pulpit.

#### The Pastoral Responses to IPV in View of African Cultural Practices

According to Mugambi and Magesa (2003) the African culture is rich and diverse. When Christianity was first introduced to Africans, they had their own practices, worship and worldviews. They gave Taylor's (1871) definition of culture as "that complex whole which includes knowledge, beliefs, morals, law, customs and any other capabilities and habits acquired by man as a member of society" (Mugambi & Magesa, 2003, p. 6).

Worldview was defined by Smith (1992) as the core of culture. It is a community's values and beliefs. It is the culture's idea about the nature of reality, of God, of

humankind, of the universe and of the relationship between God, the universe and human beings. He added that worldview is learnt from childhood through the process of enculturation; through observation and listening and through rewards and punishment for behaviour.

Our cultural practices, similarly, do not always go hand in hand with biblical teachings. Different people have cultural upbringing where they were taught different worldviews, values, norms and practices. These teaching may or may not be similar to Christianity. For such persons they were first and foremost Africans, or Americans, or whichever culture they represent before they became Christians.

When two people come together from different backgrounds and upbringing to form a union, the diversity of the cultures may be the dominant factor in most relationship conflicts. Every single individual involved in one particular case of IPV represents different worldviews and methods of solving conflicts. Pastors need to know how far one can invoke the client's cultural beliefs and practices when responding to cases of IPV. Similarly, it is important that pastors acknowledge and appreciate the diverse cultural beliefs that the clients hold on to. As such, it is paramount that they consider how to use the diversity as a resource and to find a balance between cultural practices and scriptural teachings.

#### The Effectiveness of Pastoral Response to IPV against Women

Wilson (2006) said that pastors have the potential to be a source of support to survivors of IPV. Effective response to IPV was only attributable to pastors accepting responsibility to prevent, recognise and come up with modes of intervention. She noted that pastors must, together with their churches, work together to evaluate their attitudes, acknowledge the existence of and learn more about the problem of IPV,

speak boldly against it, and acknowledge and work with secular resources in the process of intervention.

Miles (2002) raised concern over how some pastors admit that they have little or no training and yet they endeavour to counsel the partners involved in violence. This, he said, hampers the efforts of effective response to IPV and leaves the victim in danger. Miles further noted that it was unfortunate that pastors tend to blame the abused women for the violence. Kroeger and Nason-Clark (2010) gave a report by Lee Bouker (1988) highlighting that a third of the women surveyed reported that pastoral assistance was less helpful compared to other sources of support. This was after attending pastoral counselling. They argued that lack of training, lack of confidence, limited awareness about IPV, and limited awareness of available resources makes pastoral response less effective and almost impossible. According to Franklin and Fong (2011) some pastors, unfortunately, often seek to keep the families together sometimes in the face of eminent danger. Miles (2015) observed that pastors do so even though they should first ensure that the survivors of IPV find safety and assistance.

#### Empirical Literature Review

According to Donnelly and Ward (2015) global prevalence indicated that approximately 37% of all women who have ever had a partner reported having experienced IPV at least once in their lifetime. As of 2013 Americas had approximately 30% reported cases whereas Africa had a higher prevalence rate of 36.6%. The Kenyan statistics on the prevalence of domestic violence indicated that the women were the most affected by IPV and all forms of domestic violence. Kiplangat (2008) referring to the 1999 national census stated that 60.9% of women reported to have been physically abused, 40.6% were sexually abused, 70% were

verbally abused and 65% were emotionally abused. Though the statistics were based on gender based violence, most of the women said that their husbands, in-laws and other male relatives were the perpetrators of violence. The Kenya Demographics and Health Survey (2008-09) indicated that 47% of the female respondents suffered violence from their partners.

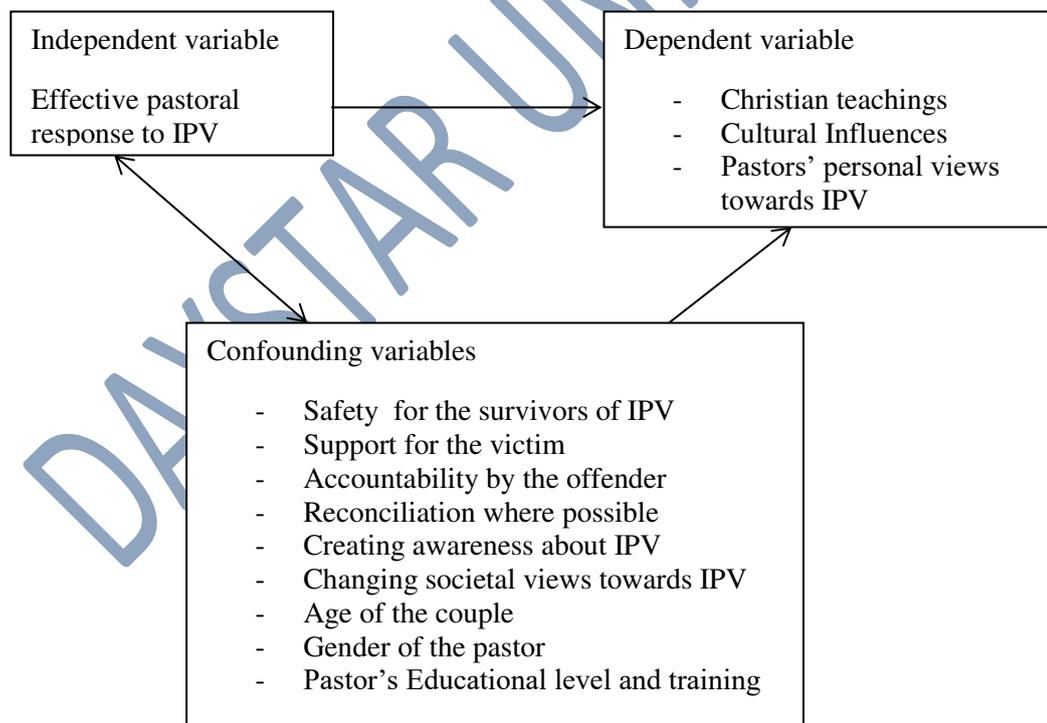
An annual report from Gender Violence Recovery Centre (2012), whose mandate is to develop programs for prevention and early reporting of gender based violence, indicated that there were significantly more women than men seeking treatment. This was not to say that men were not being violated. The difference was cited that there is fear of stigmatisation associated with the violence among men. Agutu (2012) indicated that due to ideals of social masculinity, communities and organisations were not well equipped to deal with male survivors of IPV.

Nason-Clark et al. (2013) indicated that pastors do not understand the dynamics of family violence. Part of their challenge is that they do not consider IPV to be central to the larger themes of peaceful society, living in pursuit of holiness and social justice. To this end a telephone survey of 1000 senior pastors of protestant churches by Interchurch Medical Assistance Inc (IMA- World Health, 2014) indicated that 42% of pastors rarely or never spoke about IPV, 22% spoke to their church about IPV once a year and for those who spoke about it, about 29% of them believed that it was not a problem within their church. Rather, it was a problem in the community. Smietana (2014), in response to these statistics, posited that pastors ignore and downplay the seriousness of the issues presented to them as well as downplay the possibility that IPV can affect their church.

From the researcher's observation it suffices to state that many IPV cases in Kenya are reported to religious leaders. However, the survivors of IPV do not always get the necessary assistance. Often the pastors will advise them to go back home and submit to their partners. The survivors of IPV then experience more violence and live at the mercy of their abusive partners. In addition, there are no available statistical reports on IPV that indicated the response of pastors or other religious leaders in Kenya.

### Conceptual Framework

A conceptual framework is a set of ideas or an abstract that the researcher uses to aid in awareness and understanding of the problem situation (Reinchel & Ramney, 1987). The research concept was about the need to have stable, non-violent intimate partner relationships.



*Figure 2. 2: Conceptual Framework*

Source: Author (2015)

To achieve effective pastoral response to IPV it was paramount to understand how Christianity and culture affects the views of pastors and their subsequent responses to IPV. The function of pastoral interventions is geared towards their ability to facilitate safety for the survivors of IPV, offer support to the survivors of IPV, seek accountability from the abusive partner, pursue reconciliation of the partners, create awareness about IPV, and work with other stakeholders towards changing societal views towards IPV. Research findings informed the conclusions that the age of the pastors, level of education, specific training in couple counselling, and period of time served were all factors necessary for the assessment of the capacity of the pastors to respond to IPV effectively.

#### Summary

This chapter gave an in-depth look at the dynamics of IPV, the different views that pastors have towards IPV and their responses. Even though they may face many challenges in effectively responding to IPV, pastors are at a strategic position to assist the survivors of IPV that present themselves to them.

## CHAPTER THREE

### RESEARCH METHODOLOGY

#### Introduction

This chapter gave details about the research design, data collection procedures and the process of data analysis applicable for this study. This section was an outline of the steps that were used in carrying out the research. This included the research design, study population, sample size, sampling techniques, data collection instruments and pre-testing of the research instrument. It also discussed the type of data to be collected, data collection techniques, data analysis and ethical issues in social research.

#### Research Design

Kombo and Tromp (2006) indicated that research design is the structure of research. It is an action plan that indicates the sequence and specific steps that are followed to provide answers to research questions so as to achieve the necessary solutions to a problem (Leedy & Ormrod, 2005). This research utilized both qualitative and quantitative approaches, and aimed at facilitating the understanding of the research problems comprehensively (Creswell, 2003; Thomas, 2003). The researcher used survey design where all one hundred and forty seven senior pastors were approached. Rea and Parker (2005) posited that survey research was about seeking and obtaining self-reported verbal information from respondents about themselves. They added that it is useful for when the researcher intends to generalize findings to a larger population.

To achieve the research objectives the researcher used sample survey design to obtain personal information about views and opinions towards IPV among Nairobi KAG senior pastors. The design assisted in establishing how Christian teachings and culture influences the different senior pastors in responding to IPV. Their personal views and attitudes were a determinant of how they respond to IPV.

#### Target Population

A population is a group of people or items that bear specific characteristics that identify each member of the group. Target population is the total group of people or objects to which the research findings will be generalized, as indicated by Cohen and Manion (1996). A target population has common features or elements which enable the researcher to generalize the finding of research.

The KAG Nairobi County Secretariat (2015) indicated that there were one hundred and forty seven churches with each having one senior pastor and about two or more associate pastors. The general population therefore was of four hundred and fifty pastors. These pastors serve in different KAG assemblies where their operations were overseen by the KAG Nairobi secretariat. The specific population was the 147 senior pastors from each of the 147 KAG assemblies in Nairobi County.

## Sample Size

*Table 3.1: The distribution of the 147 Senior Pastors of KAG Nairobi County and its environs*

Location	No. of respondents
Ruiru Section	7
Kasarani Section	11
Kariobangi Section	10
Dandora Section	11
Huruma Section	3
Ngóndu Section	11
Kayole Section	10
Outering Section	24
Central Section	15
Langata Section	11
Ngóng' South Section	9
Dagorreti Section	12
Kabete Section	13
Total	147

Source: KAG Nairobi County Secretariat (2015)

The population under study was largely homogeneous due to the resemblance in local church practices. Though autonomous, local pastors subscribe to the KAG national church's constitution that guides the affairs of specific congregations. Each KAG church, though it may have had many pastors, had one senior pastor. The research had a sample size of 147 senior pastors derived from all Nairobi county KAG assemblies, which was 32.7% of the general population.

## Sampling Method

The researcher used purposive sampling to recruit all the 147 senior pastors for a survey. This was because they are the authority figureheads in the churches and often set the course on which the church will go. Even though they may not always be the

first respondents, the KAG senior pastors are often sought after for assistance in IPV cases. From observation, they tend to receive difficult cases that require their urgent intervention by virtue of their authority as spiritual leaders. To achieve this, the researcher made a list of all the names of the senior pastors and sought an introduction from the secretariat before the distribution of the data collection instruments.

#### Data Collection Instruments

According to Mugenda and Mugenda (2003), a research instrument is a tool with which data is collected. They said that, a researcher needs to develop instruments that will be able to get the information required. For purposes of this study questionnaires were most appropriate. This is because survey research uses questionnaires to obtain both qualitative and quantitative data (Rea & Parker, 2005). The questionnaires were researcher developed targeting KAG Nairobi senior pastors as key informants. The questions were developed in a bid to answer the specific research objectives. The questionnaires targeted specific individual responses and information. The key areas of interest where: whether the pastors have observed IPV in their congregations, what their views towards IPV are and how Christian teachings and African culture influences how they respond to IPV.

#### Data Collection Procedures

The researcher contacted the Nairobi secretariat for introduction and was authorized to attend pastors' monthly sectional meetings. Subsequently the researcher explained to the respondents the subject of discussion, that they would receive questionnaires to facilitate them in giving their responses and that they were free to decline participation. The sectional leaders (Presbyters) made a request that all pastors should participate in the exercise.

Of the one hundred and forty seven questionnaires distributed, eighty nine were filled and returned to the researcher at the end of the meetings. Forty seven respondents verbally declined to participate in the exercise citing that they did not want to comment on IPV. However, eleven respondents, took the questionnaires, filled up some of their demographic information or left them blank and returned them incomplete. These questionnaires were marked as invalid and were therefore not used for analysis.

### Pretesting

The researcher carried out a pre-test so as to help refine and confirm validity and reliability of the questionnaire. A representative sample of 20 people was purposefully selected from the Living Word Mathare North Church to bring together church leaders who are involved in counseling. This group comprised of the senior pastor, two associate pastors, the men and women departmental committee members, the leader of the missions team and home fellowship leaders. This group participated in the pretest. The average time taken to fill up a questionnaire was 45 minutes. The group indicated that they understood the questions and they were satisfied with the tool. Validity and reliability of the instrument was confirmed as the respondents answered the questions as asked.

### Data Analysis Plan

Kombo and Tromp (2006) refer to analysis as examining data critically and making inferences. The responses from the questionnaires were both qualitative and quantitative. The analysis process involved data cleaning, data entry and developing a database structure to facilitate analysis. This process was done by use of spreadsheets where quantitative data was coded and presented in charts and tables. The qualitative data was also coded and organised into themes for thematic analysis. This was

developed to denote importance or emphasis on a particular theme.

### Ethical Considerations

According to the APA (2010), the ethical standard for carrying out research requires the researcher to ensure that institutional approval is sought before commencing data collection. In this regard the researcher sought authority from Daystar University and from the KAG Nairobi secretariat to contact the pastors for research. Before undertaking the exercise the researcher sought the informed consent of the participants by giving a brief introduction on the topic, the purpose of the study, procedures for data collection, and the right to decline or withdraw participation. The researcher assured them of confidentiality and anonymity and ensured that the information obtained was only conveyed to the researcher. In addition, the questionnaires administered did not require the respondents to indicate their names.

### Summary

This chapter discussed the structure of the research and every detail of how the study was conducted. The research design employed was a key aspect of the structure. The use of questionnaires facilitated the researcher to obtain useful in-depth information.

## CHAPTER FOUR

### DATA PRESENTATION, ANALYSIS AND INTERPRETATION

#### Introduction

This chapter presents the findings on the research done. The study set out to analyse pastoral response to IPV among women within the KAG church in Nairobi County and its environs. The focus of the study was to establish the extent to which IPV was prevalent within the KAG church in Nairobi, establish pastoral views of IPV among women, and to assess how Christian teachings and African Cultural practices influence how pastors respond to women undergoing IPV. To answer the research questions and meet the objectives of the study, semi-structured questionnaires were used to generate data.

The sample population was of 147 senior pastors from KAG church in Nairobi. From these, 89 respondents (61%) filled and returned valid questionnaires. 47 respondents (32%) declined to participate in the survey while 11 respondents (7%) returned incomplete questionnaires which were invalid for this research. This information is outlined in table 4.1 below.

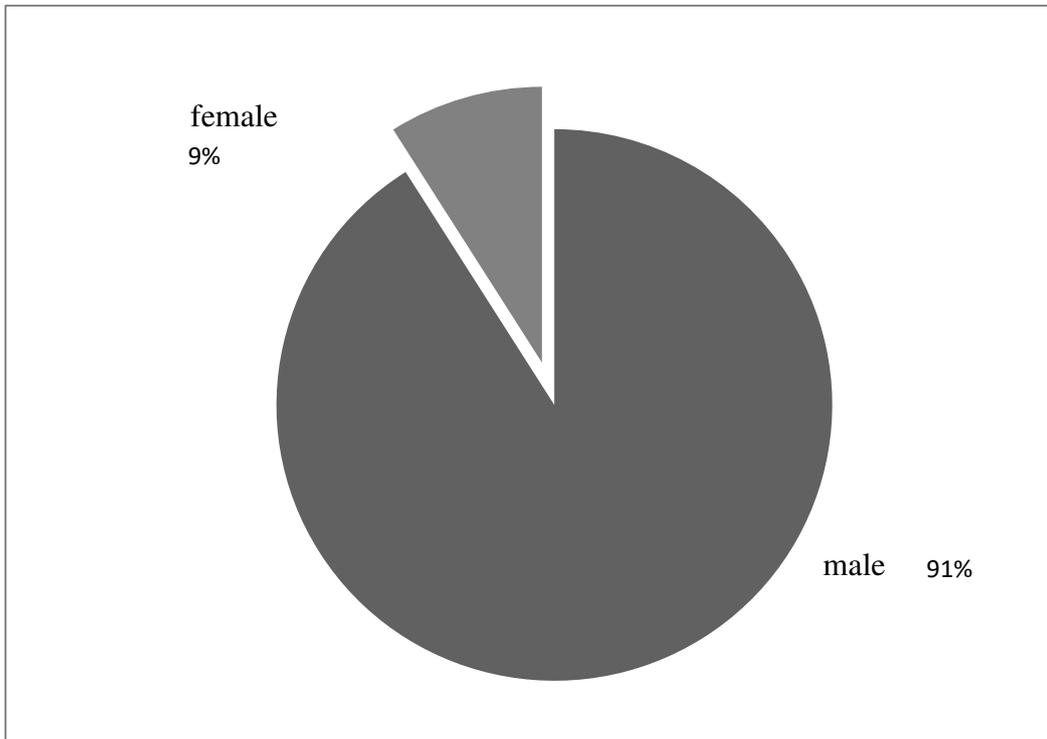
*Table 4.1: Sample Population and Rate of Valid Response*

Location	No. of respondents	Valid Response
Ruiru Section	7	4
Kasarani Section	11	5
Kariobangi Section	10	6
Dandora Section	11	8
Huruma Section	3	1
Ngóndu Section	11	5
Kayole Section	10	6
Outering Section	24	16
Central Section	15	11
Langata Section	11	6
Ngóng' South Section	9	7
Dagorreti Section	12	6
Kabete Section	13	8
Total	147	89

The first part of the findings had the socio-demographic characteristics of the respondents. Thereafter, the findings were presented in key thematic areas.

### Gender Distribution of the Respondents

The figure below was of the gender distribution of the respondents.



*Figure 4.1: Gender Distribution of the Respondents*

From figure 4.1 above the sample population of the respondents was 91% (81) male and 9% (8) female. It showed that there were generally more male pastors holding the position of senior pastor than their female colleagues. These findings agreed with Chitando and Chirongoma (2013) that African women have inferior social status and do not assume positions of authority.

### Formal Training in Couple Counseling

The respondents were asked if they had specific training in couple counselling. The results were as follows.

*Table 4.2: Formal Training in Couple Counseling*

Response	Qualification	Respondents	Percentage	
Yes	Academic training in Pastoral Counselling, Psychology, Family Therapy, Marriage Enrichment	39	43.8%	
	As a subject in theology class	3	3.4%	
	Guidance and Counselling	2	2.2%	
	Seminars	1	1.1%	
	Trained but not certified	1	1.1%	
	No	-	36	40.4%
	No response	-	7	7.9%
Total		89	100%	

Whereas more than half of the respondents, 51.7% (46) reported to have had training, 40.4% (36) respondents had not. The remaining 7.9% (7) respondents did not give a response. For those who indicated having had formal training 43.8% (39) had academic training in Pastoral Counseling, Psychology, Family Therapy and Marriage Enrichment. A further 3.4 % (3) stated that their training was a subject in a theology class, 2.2% (2) had training in Guidance and Counseling, 1.1% (1) had acquired training by attending seminars, while 1.1% (1) respondent reported to have been trained but not certified.

The research findings demonstrated that a good number of the respondents had specific training in Pastoral Counselling, Psychology, Family Therapy and Marriage

Enrichment. The respondents also said that though trained they had no specific training in issues of IPV. These findings confirm Nason-Clark et al. (2013) statement that majority of pastors had no specific training in issues of violence.

The first objective of this study was to establish the extent of IPV within KAG churches in Nairobi County. To understand the prevalence a set of questions were asked and the findings were presented.

#### Frequency of IPV Cases among Members of the Congregation

Respondents were asked to state how often they had cases of IPV among members of their congregations. Table 4.3 below presents the frequency of reported IPV within the KAG congregations in Nairobi.

*Table 4.3: Frequency of IPV Cases Among Members of the Congregation*

Frequency of cases among members	No. of respondents	Percentage
Very often	40	44.9%
Rarely	48	53.9%
Never	1	1.1%
Total	89	100%

Nearly half of the respondents, 44.9% (40) had received complaints of IPV very often, to 53.9% (48) cases were rarely reported while 1.1% (1) reported to have never received a case from a congregant. Adams and Fortune (1998) said that pastors often did not accept the reality that IPV actually existed in their churches. The research findings diverged from this view and showed that there was indeed IPV among members of the congregation, a reality that requires pastors to come up with substantial measures to deal with the cases.

### Incidences of IPV Cases

The respondents were asked to mark from a list when they had last received survivors of IPV. The indications from all the respondents were tabulated below.

*Table 4.4: Incidences of IPV Cases*

Last episode reported	No. of responses	Percentage
This week	6	6.7%
Last week	22	24.7%
A month ago	26	29.2%
3 month ago	17	19.1%
1 year ago	11	12.4%
More than 1 year	7	7.9%
Total	89	100%

On when the respondents had an IPV case reported, 6.7% (6) said they had heard cases as recently as within the week the study was carried out. A quarter of the respondents 24.7% (22) reported to have heard cases the previous week and 29.2% (26) a month before the research was done. Further 19.1% (17) reported that it was three months since a case was reported to them, 12.4% (11) reported 1 year, while 7.9% (7) reported that it was more than one year since they heard a case. These cases could also be from abused women who are not members of the congregation.

The research findings support Oates' (1974) conclusions that pastors' responsibility includes caring for members of the congregation and the community. This was demonstrated by more than half of the respondents saying they had received survivors of IPV within a period of three months

### Reporting of IPV Incidences

The respondents were asked to report where else abused women sought help before approaching them. Their responses are outlined in table 4.5 below.

*Table 4.5: Avenues for Assistance*

Other sources of help	Times mentioned	Percentage
Friends	64	71.9%
Family	31	34.8%
Chief	15	16.9%
Police	8	9.0%
Other churches	5	5.6%

More than two thirds of the respondents 71.9% (64) indicated that survivors of IPV seek help from their friends. A further 34.8% (31) responded that the women would seek the assistance of their family members. In addition, 16.9% (15) reported that some women report IPV to chiefs, 9.0% (8) said to the police while 5.6% (5) said that help was sought from other churches. The findings agree with Frieze (2005) that abused women may or may not consider assistance from family members, friends, the police, professional and church counsellors.

The second objective of the study was to find out the pastoral view of IPV among women. This objective was informed by the need for pastors to build their awareness of dynamics of IPV in order to build capacity to handle the same.

#### Actions that Constitute IPV

The respondents were asked to discuss what in their opinion constituted IPV from a list as shown in table 4.6. The actions in the list had equal chance to be mentioned by all 89 respondents and the findings were as outlined as follows.

*Table 4.6: Actions that Constitute IPV*

Actions that constitute IPV	No. of responses	Percentage
Not involving a partner in decision making	49	55.0%
Jealous suspicions of infidelity without proof	44	49.4%
Beating	43	48.3%
Not being allowed to handle money in the relationship	42	47.2%
Threats of physical harm	37	41.6%
Slapping	37	41.6%
Throwing items at partner	30	33.7%
Kicking and punching	30	33.7%
Not giving partner time to be with friends and family	28	31.5%
Not being interested in a relationship with partner's family	26	29.2%
Forceful sexual relations	25	28.1%
Attacking with weapon	25	28.1%
Pushing/shaking	23	25.8%
Causing anxiety to a partner	22	24.7%
Twisting of the arm	20	22.5%
Inflicting burns	19	21.3%
Pulling of hair	17	19.1%
Choking	17	19.1%
Making fun of a partner in the presence of other people	15	16.9%

From the table 4.6, not involving a partner in decision making emerged the commonest feature of IPV at 55% (49). Jealous suspicions of infidelity without proof was mentioned by 49.4% (44) respondents. Beating was mentioned by 48.3% (43) followed by not being allowed to handle money in the relationship by 47.2% (42). Threats of physical harm was indicated by 41.6% (37) similar to slapping by 41.6% (37) respondents. Kicking and punching and throwing items at partner had an equal

33.7% (30) response while not giving time to be with friends and family had 31.5% (28) response.

Further, 29.2% (26) response was that IPV constituted not being interested in in a relationship with a partner's family whereas 28.1% (25) said that both forceful sexual relations and attacking with weapon were actions of violence. Pushing and shaking was highlighted by 25.8% (23) respondents, causing anxiety to partner had 24.7% (22) responses and twisting of the arm by 22.5% (20) respondents. Inflicting burns was cited by 21.3% (19) respondents, choking and pulling of hair by 19.1% (17) respondents each and making fun of a partner in the presence of other people cited by 16.9% (15) respondents.

As was discussed by Kroeger and Nason-Clark (2010), after attending Pastoral Counselling, some surveyed women said that pastors' assistance was less helpful. This was further attributed to lack of training and limited awareness of dynamics of IPV. The research findings, on the other hand, point to an awareness that would assist the pastors to set specific goals for counselling or refer the cases appropriately to more experienced people.

#### Complaints Observed by Pastors Among Survivors of IPV

The respondents were asked to express some of the complaints that they commonly observed among survivors of IPV. This was a follow up question of what they considered as IPV. Twenty one different themes were derived from the various responses as tabulated below.

Table 4.7: Complaints Observed by Pastors

Complaints observed by pastors	No. of responses	Percentage
Management of family finances	21	23.6%
Physical abuse	14	15.7%
Infidelity	13	14.6%
No sexual intimacy	7	7.9%
Irresponsibility	7	7.9%
Misunderstanding	6	6.7%
Threats	5	5.6%
Verbal abuse	5	5.6%
In-laws & friends	5	5.6%
Suspicious of infidelity	3	3.4%
Poor communication	3	3.4%
Not involved in decision making	3	3.4%
Loveless relationship	3	3.4%
Emotional abuse	3	3.4%
Denied social activities	2	2.2%
Polygamy	2	2.2%
Mistrust	2	2.2%
Poor conflict management	1	1.1%
Attacking with weapon	1	1.1%
Rejection	1	1.1%
Alcohol intoxication	1	1.1%

From the findings the highest form of IPV mentioned was management of family finances. One respondent had observed that:

*There were matters of being secretive in handling cash.*

One respondent said that he had observed families where women had no financial support from their spouses. This form of IPV was mentioned by 23.6% (21) of the respondents and emerged the most prevalent among all others.

Physical abuse was the second highest form of IPV mentioned by 15.7% (14). Some respondents said that they had received many survivors of physical abuse. Another closely mentioned form of IPV was infidelity by 14.6% (13). One reported that:

*The wife complains of her husband's relationship with another woman outside their marriage and vice versa.*

These, and many more statements suggested that infidelity were present among members of the congregation and may be rampant than congregants may want to admit.

Lack of sexual intimacy, mentioned by 7.9% (7) respondents, may be related to infidelity. One respondent reported that in some cases:

*One partner boycotts the marital bed.*

Another implied that women deny men their conjugal rights. As a result the spouses seek sexual gratification from other relationships.

Some respondents reported that survivors complained that their partners were irresponsible in running the affairs of the home (7.9%). Men were reportedly neglecting their duties and responsibilities in all areas of the home. Another concern was that some men were not interested in the well-fare of their wives and children. Consequently the women would feel neglected and rejected. This would then generate into other forms of violence, like infidelity and physical abuse. Examples of some respondents' comments include:

*Failure of men taking responsibility of their children and wife,*

*Lack of concern for the other partner's well-being.*

*Neglect of roles.*

*Rejection from the spouse.*

Misunderstandings about money, friends and in-laws were mentioned by 6.7% (6) respondents. One respondent indicated that some families had:

*Interference from in-laws in family matters.*

There were indications that many families had conflict management challenges and had frequent quarrels that end up aggravating the IPV.

Some respondents said that abused women would seek help because they had been verbally abused and threatened (5.6%, 5 respondents each). Such women would be living in fear not sure when the threats would be actualised. One respondent stated that:

*Survivors face threats of physical harm. Their perpetrators of IPV threaten to divorce or kill them while using abusive language.*

Suspicion of infidelity was also mentioned by 3.4% (3). One respondent stated that:

*This is manifested when a partner forcefully grabs the spouse's phone, reads his/her messages, destroys the phone, beats up the partner and threatens the partner not to have phone conversations again.*

Poor communication and not being involved in decision making was mentioned by 3.4% (3) respondents each. Respondents indicated that there was evidence of male dominance in the relationships and most women voicing their opinion would be inviting a fight. In the process the partners did not get to understand each other's thoughts and hence would not make decisions together.

Emotional abuse was mentioned by 3.4% (3) respondents. One respondent said that:

*Emotional abuse resulting in physical abuse of the partner was a common occurrence.*

Being in a loveless relationship (3.4%), having feelings of rejection (1.1%), being denied social activities (2.2%), polygamy (2.2%), mistrust (2.2%), and attacking with weapon (1.1%) were also mentioned as common complaints amongst survivors of IPV, poor conflict management (1.1%).

As implied by Adams and Fortune (1998) for a long time pastors were resistant to seeking information and were consequently ill-prepared to respond to cases. Further, a personal view of violence would greatly influence how one responds to the same. The concern was for pastors to build their awareness on issues and dynamics of IPV to a point that they were able to recognise it when it was presented to them. The respondents in this study demonstrated that they had received and identified a variety of cases though they might not have demonstrated how well prepared they were in addressing the same.

#### Steps Taken Towards IPV Intervention

Respondents were asked to outline the initial steps they would take towards intervention for IPV. Different themes emerged from this discussion as illustrated in the table below.

Table 4.8: Initial Steps Towards Intervention

Covariate	No. of responses	Percentage
Pastoral counselling	55	62%
Prayer with and for couples	16	18%
Refer to professional counsellor		
Medical doctor, police, chief	3	3%
Ensure safety	2	2%
Share scripture	2	2%
No response	11	12%
Total	89	100%

More than half of the respondents 62% (55) stated that they would provide counseling intervention. Most of them said that they would consider inviting the accused person and having a session with both. Other responded that they would have a separate session with each then invite both to a joint session. One respondent said that:

*I would first need to confirm the accusation from the accused person.*

Another respondent said:

*I will seek to listen to hear the other side of the story from the other partner.*

As an initial step, the pastors sought to encourage reconciliation by meeting with the two partners and solving their issues.

Besides offering counseling, 18% (16) respondents also said that they would seek God's wisdom through prayer. Some said that they would pray with the couple while others said that they would just pray for the couple. As one respondent stated:

*I pray before I say anything.*

Three respondents (3%) said that they would refer to a professional counselor, a medical practitioner or the police. This was shown to be preferred only when there were cases were difficult to handle.

The least mentioned steps were sharing Scripture at 2% (2) and ensuring safety of survivors at 2% (2). One respondent said:

*I share a Bible verse that addresses the issue.*

Another respondent stated that:

*I listen carefully and find a Scripture relevant to the case. This should be the initial stage.*

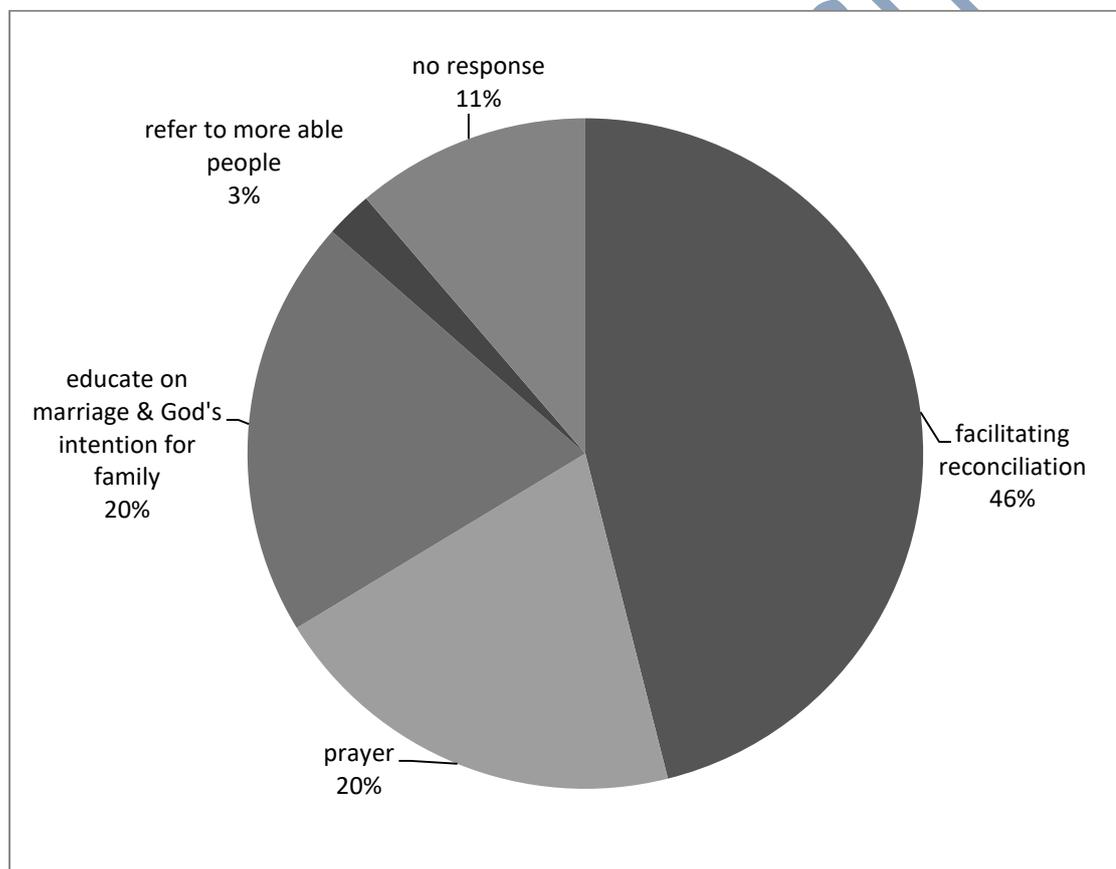
The discussion about pastoral response is anchored on the various pastoral views on IPV. The respondents outlined that as spiritual leaders they took up pastoral counseling as an important response. Praying with the couple and sharing Scripture were actions geared towards encouraging reconciliation. They also acknowledged that they may have cases that were beyond their capacity to intervene and might refer the same to medical doctors, professional counselors or the police.

The literature review supports these findings by demonstrating how the pastors' role was to foster reconciliation. It was important to note that though they demonstrated their willingness to assist survivors of IPV they require to be more equipped to handle the same. Carter and Narramore (1979) expressed their expectation of how pastoral views and responses to IPV had improved over time. They, however, noted that the syllabus did not adequately cover issues of IPV. The research findings equally indicated that most pastors had no specific training in marital counselling or IPV.

The third objective was to assess how Christian teachings influenced pastoral response to IPV among women. This objective aimed at analyzing how pastors, being spiritual leaders, assist victims of IPV and how they use their positions to stop the vice.

#### Respondents' Role as Spiritual Leaders in Assisting Survivors of IPV

The respondents were asked to discuss their role as spiritual leaders in assisting IPV survivors. The various roles were presented in figure 4.2 below.



*Figure 4.2: Roles of Spiritual Leaders in Assisting IPV Survivors*

According to the respondents spiritual leaders have several roles in assisting survivors of IPV. Almost a half of the respondents 46% (41) mentioned facilitating reconciliation as one of their roles. One vividly described it as:

*Accommodating them irrespective of the nature of violence to make them understand that there was hope.*

Another respondent said:

*My role is to be concerned with what my members experience both at home and in church.*

Another commonly featured role was prayer, 20% (18). Most of the respondents said that they would pray for and with the couple. One such respondent said:

*I pray for them then advise them to keep on praying for their family.*

A further 20% (18) said that their role involved educating couples on marriage & God's intention for family. Most stated that they use Scriptures to teach the couple what God says about marriage. One responded that:

*My counseling is Bible based but somewhat tailor made to the problem at hand. I try to give practical solutions relevant to the problem.*

Another respondent said that his role included:

*Creating awareness of what violence is, what it means and why it must be stopped –to the perpetrators- because some might be having a vague idea of what it is.*

Only 3% (2) stated that their role was to facilitate the survivors to seek help from 'more able people'. The respondents did not specify who they meant by 'more able people'. In this regard one respondent said that he would involve the help of others where necessary. One respondent said that he would:

*Give advice in a Godly way i.e. not to make hasty decisions, involve the chief, and refer to more able people.*

However, 11% (10) did not give a response.

Facilitating reconciliation by providing hope, praying with the couples, providing education on how Christian marriages should be, ensuring that the survivors were safe and referring them for specialized were all indications of pastors' willingness to help their congregants. This was in line with Dittes (1999) that pastors' responsibility was to help people to grow and have more fulfilling relationships with God and with other people.

#### Cases Handled by Pastors as Spiritual Leaders

Asked to discuss cases they couldn't handle due to their position as spiritual leaders the respondents gave different responses, as tabulated below.

*Table 4.9: Cases Pastors Would not Handle*

Response	No. of responses	Percentage
Yes	39	44%
No	22	25%
No response	28	31%
Total	89	100%

When the respondents were asked if there were cases they could not handle because of their pastoral position 44% (39) reported that there were such cases while 25% (22) said that there were no cases they couldn't handle. Of all the respondents 31% (28) did not give their response, as in table 4.9 above.

When asked how they responded to cases they were not able to handle, the respondents gave various actions, as indicated in table 4.10 below.

*Table 4.10: Action Taken for Cases Pastors would not Handle*

Action taken	No. of respondents	Percentage
Attempting to counsel	26	29.2%
Prayer, seeking God's direction	17	19.1%
Refer to professional counsellors	12	13.5%
Refer to older, more experienced pastors and couples	10	11.2%
Refer to the authorities	6	6.7%
Applying Biblical teachings	4	4.5%
Involve the family	1	1.1%
Invite couple to seminar	1	1.1%
No response	12	13.5%
Total	89	100%

From table 4.10 above, attempting to counsel, 29.2% (26) was mentioned as the most common action the pastors would take even though they acknowledged their difficulties. As mentioned before, prayer, which was a common action among the respondents, was mentioned by 19.1% (17). This was referred to as a way of seeking God's wisdom and direction for the difficult cases.

Compared to responses given in previous sections, referring cases to professional counsellors seemed to be a useful option especially in difficult cases. This was mentioned by 15.6% (12) respondents. Referring cases to more experienced pastors and older couples was also a preferred option among 11.2% (10) respondents. Involving the local police and chief was mentioned by 6.7% (6) respondents whereas 4.5% (4) respondents said that they teach scripture. Involving family and inviting the

couples to seminars were also mentioned by 1.1% (1) respondents each but did not appear to be popular options.

From the findings some respondents said that they had difficulties with cases where there was extreme violence or needing legal action. This acknowledgement was only useful if they will then choose to refer the cases to the relevant professionals. In this case some respondents highlighted that they still offered counseling whereas referral to other professional counsellors or involving family were not highly preferred options. This confirms a concern that was raised by Miles (2002) that attempting to counsel may endanger these women and causes them more harm. Wilson (2006) posited that pastors need to identify and join hands with other stakeholders who can be of service to people needing help. Being involved with other interested parties may help in building networks that may prove important for referral purposes.

#### Pastors' Response on Divorce/Separation as Mitigation on IPV Cases

The discussion on divorce and separation is a sensitive one especially among clergy. The respondents were asked if they could advice separation or divorce to partners experiencing IPV. The different explanations given for or against advising separation/divorce as mitigation of IPV are tabulated in table 4.11.

*Table 4.11: Views on Separation or Divorce*

Advise for separation and divorce		No. of responses	Percentage
Yes	If there is risk to life	27	30.3%
	Separation and working towards reconciliation	7	7.8%
No	God hates divorce	29	32.6%
	It's a personal decision	13	14.6%
	Encourage reconciliation	10	11.2%

About a third of the respondents 30.3% (27) said that they would advise for separation or divorce only if there was risk to life. Most of these respondents would advise divorce if the violence resulted to severe bodily harm and death. Some respondents 7.8% (7) said they would advise separation if only to seek safety for the survivors as they work towards reconciliation. One respondent said that:

*I would advise for separation maybe to let the temper to come down and then readdress the issue.*

One responded that:

*Usually after fighting and separating couples find a space in their hearts to forgive and make up.*

In similar circumstances, one third of the respondents 32.9% (29) stated that they would not advice for separation or divorce. Some responded that:

*God hates divorce.*

One respondent echoed these sentiments by adding that:

*It is against God's will for those who God joined together to divorce. Only death can separate.*

Referring to how this was a personal decision, one respondent said that:

*It is dangerous to give advice to IPV victims.*

These were shared sentiments by a further 14.6% (13) that said that they would not give advice for divorce or separation because it was a personal decision for the complainant/couple to make. However, 11.2% (10) would strictly focus the couple towards reconciliation.

The research findings show that pastors are increasingly viewed as respondents for IPV cases and that cases with varying severity are presented to them. Furr (1997) said that the pastors who follow certain conservative Christian traditions may not consider IPV a serious vice or may condone it all together. Divorce and separation are condemned in some of the conservative teachings. These findings illustrate the difficult position the pastors may find themselves in especially when they have to consider the severity of a case and yet uphold the teachings against divorce.

#### Discussion of IPV from the Pulpit

The respondents were asked whether they would discuss IPV from the pulpit.

*Table 4.12: IPV Discussion from the Pulpit*

Response	Reason	Responses	Percentage
Yes	Avenue for creating awareness	33	37%
No	Personal issues	39	44%
	Against pastoral ethics	3	3%
No response		14	16%
Total		89	100%

Some respondents 37% (33) said they could have the discussion from the pulpit because it is an avenue for creating awareness. Examples of the statements made include:

*I can do it if as form of advice or empowerment to the congregation,*

*When IPV happens it affects everybody young and old,*

Another observation was that:

*The church is established on family values.*

A further 44% (39) reported that they could not discuss IPV from the pulpit since to them it constituted personal issues and would not discuss it for fear of injuring the affected people. One respondent said that:

*These were personal cases.*

This means that the pastor should not have these conversations on the pulpit. Another respondent clearly stated that:

*It would hurt some survivors and they would sense betrayal...*

One responded that:

*If discussed people will not be bringing issues to you for fear of humiliation when discussed in public.*

A few 3% (3) said that discussing IPV from the pulpit was against pastoral ethics but did not expound on the subject further while 16% (14) did not give their response.

Having conversations on IPV from the pulpit demonstrates the pastor's and the church intentions to be involved in stopping the violence in the community. More people would then seek assistance from the church with much more confidence. However, it is paramount that the pastors be careful not to discuss or injure those who may have shared their cases with them.

The fourth objective of this study was to determine how African Cultural practices influenced pastoral responses to IPV among women.

### Cultural View of Intimate Partner Relationships

Respondents were asked to discuss their cultural views of intimate partner relationships. This was meant to bring to light the different cultural descriptions of relationships. The responses were presented in the table below.

*Table 4.13: Cultural View of Intimate Partner Relationships*

Cultural view of intimate partner Relationships	No. of responses	Percentage
Male superiority	16	18%
Mutual respect	14	16%
Recognized marriage	12	13%
Conflicts with Scripture	10	11%
Respect cultural roles	6	7%
Gender equality	3	3%
No response	28	31%
Total	89	100%

Table 4.13 above reported different cultural views the respondents had on intimate partner relationships. To this question the respondents based their responses on their cultural beliefs practices, both positive and negative attributes of such cultural beliefs. Male dominance ranked highest at 18% (16) indicating the respondents' view of men in a relationship. One respondent regrettably expressed his thoughts that:

*A wife must submit to the husband always, because she is as good as property.*

Women being degraded by men and being looked down upon as though they were children were a few examples of sentiments expressed by the respondents.

Mutual respect was mentioned at 16% (14) as a positive attribute of some respondents' cultural beliefs. To 13% (12) intimate partner relationship means a

marriage recognized by law, church or cultural beliefs, whereas to 11% (10) their cultural view of relationships conflicts with biblical teachings. A further 7% (6) stated that in an intimate relationship it is important for partners to respect their culturally recognized roles, while 3% (3) stated that they viewed such a relationship as one where gender equality is upheld.

According to the reviewed literature, prevalence of IPV in Kenya is sustained by the societal attitude towards superiority of men and domestication of women (Bylerly, 2013). The findings bring out male superiority and having cultural roles as aspects of African cultural views of relationships. The findings further demonstrated the conflict in the respondents who chose to abandon their cultural views and embraced the biblical teachings. This was shown by indications of views of gender equality and mutual respect, which are not necessarily embedded in African traditions.

#### Cases of IPV Due to Cultural Differences

Respondents were asked to outline their observations on cases of IPV resulting from cultural differences.

*Table 4.14: IPV Due to Cultural Differences*

IPV due to cultural differences	Responses	Percentage
Yes	66	74%
No	15	17%
No response	8	9%
Total	89	100%

Table 4.14 shows the observations of the respondents on whether there were cases of IPV that resulted from cultural differences. From the table above 74% (66) indicated

that they had observed IPV caused by cultural differences. A further 17% (15) were of the view that IPV does not result from cultural differences.

#### Reasons for Different Views on IPV due to Cultural Differences

Table 4.15 below further showed the reasons for their divergent views. The literature reviewed indicated the diversity and dynamism in cultural beliefs. Following one's cultural view at the expense of a partner's view can breed discord.

*Table 4.15: Divergent Views on Culture-Based IPV*

Views	No. of responses	Percentage
Cultural differences breed		
Misunderstanding	48	54%
Cultural beliefs of male		
dominance	12	13%
Cultural propagation of		
violence	5	6%
Anything can cause IPV,		
not just cultural differences	8	9%
No response	16	18%
Total	89	100%

More than half of the respondents 54% (48) stated that cultural differences breed misunderstanding among couples. They said that when a couple does not share similar cultural beliefs then they face challenges of blending the two beliefs or choosing one. Sometimes both are firmly rooted in their cultures and would not give their partner a chance to express theirs.

Several respondents 13% (12) stated that some cultural beliefs propagate male dominance and present women as assets, as children and voiceless. Victims of partners from such cultural beliefs have difficulties in expressing their opinion and

their concerns go unheard. A few 6% (5) stated that some cultural beliefs propagate violence against women. This may go hand in hand with the culture of male dominance. One such response was given by a respondent who said that

*In one situation the man comes from a community that believes it is normal or okay to beat a wife.*

However, some respondents said that there were cultural beliefs that made violence seem normal in any relationship. Perpetrators of IPV who grow up in such cultures of violence may have learnt it from their everyday way of life and taken it as a normal behavior. Further 18% (16) respondents did not give a response.

Chitando and Chirongoma (2013) discussed how all people were products of culture. They illustrated how cultural beliefs maybe a precipitator of violence. The findings further expressed these issues and confirmed that different cultural practices may actually cause conflict and subsequent IPV between two partners.

#### Extent to Which to Embrace Cultural Practices in Responding to IPV

The respondents were asked to discuss the extent to which it was acceptable to use cultural beliefs to assist survivors of IPV. The different views were presented in the table below.

*Table 4.16: Extent to Embrace Cultural Practices in IPV Intervention*

Extent to use Cultural beliefs	No. of responses	Percentage
Only if in line with scripture	37	42%
As much as necessary	15	17%
None	7	8%
Rarely	5	6%
No response	25	28%
Total	89	100%

When the respondents were asked to what extent pastors should embrace cultural practices in attending to survivors of IPV 42% (37) stated that cultural beliefs should be embraced only to the extent that it was in line with Scripture. A further 17% (15) said that it would be used as much as was necessary for them to find a lasting solution.

A further 8% (7) said that cultural beliefs should not be used at any time. One respondent said:

*Pastors should not embrace these practices since they are not in line with the Word of God.*

Similarly 6% (5) would rarely embrace cultural beliefs for solving IPV cases. As indicated above, 28% (25) did not give their feedback on the question.

It was worth noting that pastors embraced the use of cultural beliefs but they ought to consider that they do not create confusion in the minds of the people seeking help (Chitando & Chirongoma, 2013). For those who agreed that culture was a resource they insisted that interventions needed to be Scripture-based. The research findings agreed with the reviewed literature in that cultural beliefs could be a resource in solving IPV.

### Possibility of Using Cultural Beliefs and Scripture Together

As a follow up to the previous questions, the respondents were asked if they would consider using Scripture and culture together.

*Table 4.17: Possibility of Using Cultural Beliefs and Scripture Together*

Response	No. of responses	Percentage
Yes if only the Bible is the Principal basis for intervention	61	69%
No because cultural beliefs are Unscriptural	9	10%
No response	19	21%
<b>Total</b>	<b>89</b>	<b>100%</b>

Table 4.17 shows the respondents' views on whether biblical teachings could be used with cultural beliefs for responding to IPV. To this question 69% (61) responded that it was possible to combine the two only if the Bible was used as the principal basis for intervention. To them Scripture encompassed all cultural beliefs but must be upheld as the standard for all pastoral interventions.

Different responses are indicated below:

*The bible was written within a culture. Combine scripture by using biblical culture that is relevant to the particular African culture,*

*Culture has been there even before the Bible. The Bible does not hinder Christians to practice their cultural beliefs.*

*Certain cultures agree with the word of God. For example the husband is the head of the family both culturally and biblically.*

These sentiments were shared by those that agreed that culture and scripture could be used together.

A further 10% (9) responded that it was not possible because cultural beliefs are out rightly unscriptural. Some termed it as “matching light with darkness”. To express why cultural beliefs may not be used together with scripture one respondent was of the opinion that:

*Bible teachings tend to bring together all people to their maker i.e. God Almighty but cultural beliefs tend to separate people from their maker hence dividing the community along lines of tribalism and tradition. Cultural beliefs mostly tend to take people to idol worship which is an abomination before the Almighty God who said that we should worship nobody else or anything else besides Him.*

The remaining 21% (19) did not give their opinion on this issue.

The researcher observed the different views presented by the respondents and noted the passion with which they expressed themselves. Those who stated that they could not combine cultural beliefs and Scripture gave long explanations for their stand. It emerged that they had taken the position of defending scriptural teachings at all costs.

Miles (2015) discussed the importance of seeking the best possible intervention for IPV. A majority of the respondents view using both Scripture and cultural beliefs as a way of fostering better interventions for IPV.

### Summary of Key Findings

The findings of the research revealed that IPV was present and frequent among congregants and that pastors were aware of the different manifestations of the same. One major key finding was that 98.9% of the respondents reported to have had cases of IPV in the congregation. As a result the pastors were expected to have the capacity to respond effectively to facilitate healing of the survivors of IPV. The respondents demonstrated their awareness and willingness to assist these women but indicated that their lack of specific training in IPV limits their interventions.

The findings further revealed that the pastoral goals for IPV intervention were geared towards facilitating reconciliation. Both cultural beliefs and Scriptural teachings provided the foundations on which intimate relationships were built. Some aspects of IPV emanated from conflicting beliefs or differences in cultures of the partners involved. However they upheld scriptural teachings as the basis of counselling and teaching for family life. They acknowledged culture as a resource but considered it secondary to Christian teachings.

## CHAPTER FIVE

### DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

#### Introduction

This chapter presents the final discussions, conclusions and recommendations from the findings of the research work.

#### Discussions

Dittes (1999) describes pastors as representatives of religious entities and adds that consistent long term service helps them to gain experience relevant to the congregations in which they serve. The respondents' demographic information demonstrated the respondents' gender and training in couple counselling. This information was important in that it created a larger picture about each respondent' background information by describing some of the outcomes that were used as a basis for analyses as it provided a starting point for many studies.

The findings indicated that 91% of the pastors were male whereas their female counterparts were 9%. It may appear that religious communities have borrowed some of its practices from the African culture as indicated by Mugambi and Magesa (2003) or that the women themselves were not interested in taking higher positions of service. This was similar to a finding by Chitando and Chirongoma (2013) who indicated that in Africa, women have inferior social status; they have no voice and do not assume positions of authority. The significance of this finding is that it is possible for female survivors of IPV to view pastors in the same light they view their male partners. This may hamper their ability to express themselves for fear of

victimization. Sometimes it may be the pastor seeing a victim through the eyes of his culture. The gender issue then becomes a challenge to the steps towards intervention.

The researcher noted that more than half of the respondents had training in couple counselling (57.3%, 51 respondents). They mainly had academic training in Pastoral Counselling, Family Therapy, Marriage Enrichment and Psychology, or had attended marriage seminars. However, most said that they did not have specific skills and training to handle IPV. Those without formal training made up 43.8%. These findings imply that more and more pastors are getting trained to handle family conflict. However there is still a need to increasingly build their capacity. These findings affirm Nason-Clark et al. (2013) observations that a majority of pastors were not specifically trained in issues of IPV or couple counselling. It can be established that a lot more training on IPV is required, especially to boost the confidence and competence of the pastors in their interventions.

The first objective of this study was to establish the extent to which IPV was prevalent within the KAG church in Nairobi. The researcher sought to find out the frequency of reported cases among congregants bearing in mind there were no comparative studies discussing statistics of IPV in the church. According to the findings a high number of respondents (44.9%, 40 respondents) indicated IPV was often reported to them whereas 53.9% (48) said these cases were rare. Only 1.1% (1) of them said they had never had these cases reported to them from within their congregations. These findings conclusively indicate that IPV did indeed exist in the church and might mirror the statistics of reported cases of violence globally, regionally and in the country.

The findings confirm the statistics that the prevalence of IPV was high and has been on the rise. Donnelly and Ward (2015) when referring to a global IPV prevalence report by Devries et al. (2013) indicated that global rate for IPV was 26.4% whereas the rate in Africa was 36.6%. According to WHO (2014) report, the global rate for IPV among women had increased to 30%. The Kenya Demographic and Health Survey (2008-09) reported that 47% of female respondents were survivors of IPV. These statistics show that the prevalence of IPV in Kenya is higher than the global and regional rate.

To understand IPV, it was paramount to establish the specific causative factors that predispose and perpetuate IPV in different relationships amongst Christians. Martin (1987) stated that Christian teachings about marriage and female submission to the headship of their male partners may, in fact be a perpetuating factor for violence. This is especially so among abusive males who justified their actions using both Scripture and culture. This is however not based on a correct interpretation of Scripture regarding intimate partner relationships. UNICEF (2002) posited that different social economic factors, childhood experiences of violence, male superiority, poverty, alcohol and substance abuse, among others, are common causes of IPV. These factors are embedded in the African culture.

It was important to note that IPV was a vice covered in silence. Miles (2002) stated that most abused women stay silent and spend time working towards mending their relationships. Frieze (2005) discussed several aspects of IPV. She stated that a majority of abused women seek help when it is too late. Their reasons for staying in abusive relationships range from financial dependency to fear of retaliation, low self-esteem and so on. She added that they may or may not opt to seek help from anyone.

The United States Conference for Catholic Bishops (2002) said that the reason survivors seek pastoral care is because they consider the church safe for them.

The findings indicated that survivors of IPV were indeed seeking for help. Majority (79.7%) of the respondents had been approached for IPV cases on the week the research was carried out and as recently as within three months. They had also observed that the assistance of friends (71.9%) was the most preferred when survivors of IPV sought help. Other avenues included family (34.8%), chiefs (16.9%), police (9%) and other churches (5.6%). Though silence, low self-esteem and shame might still be experienced, it was noteworthy that the findings denoted possible increased confidence in the capacity of the church and pastors to address IPV, increased boldness in the women to speak out about their sufferings or that IPV had increased in frequency and severity.

The second objective of this study was to find out the pastoral view of IPV among women. This discussion also aimed at bringing out the understanding and views that pastors had towards issues of IPV. Kennedy (2007. p. 6) defined IPV as “actual or threatened physical, sexual, psychological or economic abuse of an individual by someone with whom they have had an intimate relationship”. The research findings were in line with this definition. The respondents indicated that not involving a partner in decision making, jealous suspicions of infidelity without proof, beating and not being allowed to handle money in the relationship were some manifestations of IPV. Further, the five most common complaints that the respondents had received in their service were difficulties in managing family finance, physical abuse, infidelity, lack of sexual intimacy and irresponsibility in running the home.

Adams and Fortune (1998) said that pastors were of the opinion that IPV did not exist within their congregations. For this reason, they were resistant to seeking information and were thus ill prepared to respond appropriately to survivors of IPV. The findings diverge from this view by bringing out the pastors' awareness of the different presentations of IPV. This dispelled the thoughts that pastors were not able to recognise IPV when presented to them and that they denied the existence of the vice within the church.

The views of the respondents about IPV form the basis for their steps towards intervention. According to Carter and Narramore (1979) theoretical seminaries have been teaching Counselling and Psychology as a subject, and hence they assume that pastoral views and response to IPV have improved. Furr (1997) was of the view that conservative Christians may not consider IPV as a vice and may even condone it where women were the victims.

The research findings disagreed with this view by illustrating the willingness of the pastors to assist these abused women. More than half of the respondents suggested that they would do counselling as an initial step towards intervention. They would also pray for wisdom or refer the case to a professional counsellor or a medical practitioner where necessary. All actions that the pastors undertook as a form of response were geared towards reconciling the couple. The respondents' awareness of IPV led to a further discussion on how their interventions might be influenced by their understanding of Scripture and culture.

The third objective of this study was to establish how Christian teachings influenced pastoral response to IPV among women. Pastors are distinguished members of the society and are considered as spiritual leaders by members of communities (Oates,

1974). Their position exposes them to many people in need of their assistance for diverse issues. Their calling is towards selfless commitment to caring and assisting people to find healing and have fulfilling relationships (Dittes, 1999). The research findings outlined the specific roles that the pastors had taken as spiritual leaders in regards to IPV. They included facilitating reconciliation, prayer and offering education on God's plan for family. These roles were based on Scriptural teachings and agree with Wilson (2006) position that pastors have potential to be a source of support to survivors of IPV.

The findings show that there are certain cases that pastors may consider difficult to handle. Some examples included cases that require legal action or where one partner or both are injured almost to the point of death. Asked what action they took when such cases were brought to their attention the most mentioned step was offering counselling and prayers. Referral of these cases was the third most preferred step. The findings confirmed the concern raised by Miles (2002) over the admission by pastors that they do not have the necessary training and competence to assist in severe cases and yet they still offer counseling to survivors of IPV. Wilson (2006) suggested that it is important to build networks with other stakeholders in order to provide optimum assistance to survivors of IPV, which may at times require that the pastors refer certain difficult cases.

The discussion about separation and divorce may be inevitable especially where violence is severe and life threatening. Most of the respondents in this research distanced themselves from the issue of divorce. This appeared to be a common factor in pastoral counseling. The researcher noted that the respondents who did not advocate for divorce also said that divorce was a personal decision and they would prefer to focus the couple towards reconciliation. Separation was regarded as a safer

option for many but only on condition that the couple later reconciles. The positions may end up being challenging especially when some difficult cases require the pastor to give explicit directives on steps to be taken.

Peterson (1984) referred to marriage relationship as a covenant. This is the biblical view that pastors are tasked to uphold. Conservative religious leaders may advise women to follow scriptural teachings, be submissive and be sexually available for their partners at all times. This only serves to make the situation worse. The issue of divorce is sometimes viewed as the last resort. As the respondents indicated, separation is more preferred to divorce. They emphasized that their task is to encourage reconciliation and uphold the biblical view of marriage as a covenant.

More than half of the respondents (54%) in this research said that they would rather not discuss IPV from the pulpit. They termed it as professionally unethical and a private matter that should be treated with confidence. They also said that it was possible for the survivors to be injured by a public discussion. A group of respondents (39%), however, said that they would discuss IPV from the pulpit. They termed it as an important avenue to create awareness on the subject. They said that every congregant needs to learn God's intentions for family and the best way to do so was to teach and preach from the pulpit.

These findings are in line with a study that was carried out among one thousand senior pastors by Interchurch Medical Assistance (IMA- World health, 2014). The statistics indicated that 42% of pastors rarely or never spoke about IPV. The reasons behind these statistics are not discussed in the report. However, it suffices to conclude that IPV is a sensitive matter that may make people uncomfortable, especially in church. This is so because there are assumptions that IPV does not exist in church. It

is worthy to note though that pastors can use their positions to influence change in their congregations as well as in the community.

The fourth objective was to establish how African Cultural practices influenced pastoral responses to IPV among women. Social learning theory (Bandura, 1971) brought this out by demonstrating how people were a product of culture and how children learn by observation. Aspects of violence can be learnt through social learning where an adult may in time find themselves being abusive or expecting to be abused. Some people may not even consider it a vice. Bylerly (2013) said that IPV in Kenya is a product of societal attitudes towards male superiority, domestication of women and acceptance of violence in certain circumstances.

The findings illustrated that different people express their cultural beliefs differently. For example, most of the respondents said that in their cultures men were deemed superior to women (18%), women were at the same level with children or can be termed as property, and that there exist specific cultural roles for each gender (7%). Another group of respondents said that they did not consider their cultural beliefs because they conflict with Scripture (11%). Still there was another group that indicated their departure from cultural beliefs and had embraced a modern approach to relationships. They said that intimate partner relationships meant having mutual respect (16%) and gender equality (3%). These divergent views formed the basis for the respondents' cultural understanding and interventions for IPV.

The research findings also confirm that indeed some IPV cases were as a result of partners' different cultural backgrounds. This may imply that it would only be prudent for the pastors to use the specific beliefs to understand the root cause of violence and find a culturally relevant intervention. The findings further agree with Chitando and

Chirongoma (2013) that many African cultural practices and beliefs may precipitate violence. This is so especially where cultural beliefs dictate that women must not voice their opinions and frustrations. Sometimes the violence is because the two parties are from two conflicting cultures.

According to the KAG Secretariat (2015) the doctrinal teachings of intimate relationships are that in a marriage the man is the head of the home. These teachings are based on Ephesians 5:25-28 where Scripture places the responsibility of self-giving love on the headship of a man. It further teaches that a man is to care for his wife as he cares for his own body. The African culture also places the man as the head of the home. The respondents portrayed a man as dominant, superior to a woman. As Uwayo (2014) says IPV may be condoned in certain cultures and though regarded as a private family matter, it has deeply engrained cultural and traditional considerations.

From the findings, pastors acknowledged that cultural beliefs and practices were resourceful to the extent that they did not conflict with Scripture. Some (69%) said that they might use scripture and culture together only on the basis that Scripture was the basis for intervention. A few termed cultural beliefs as unscriptural and said that they would not use the two together (10%). This finding underpins a conflict in the pastors on how much they can use culture as a resource to respond to IPV cases. This is because they viewed themselves as custodians of the responsibility to uphold Christian teachings. The pastors were unanimous that Scripture was the standard of all their reconciliation interventions.

### Conclusion

The research findings presented were an indication that IPV existed within the congregations as it was in the larger community. Pastors were aware of the violence

and its dynamics since IPV cases were frequently reported to them. They however acknowledged that they did not have the necessary training in counselling for IPV but were willing to assist the affected couples to reconcile and find healing. In addition, pastors considered cultural beliefs and practices to be resourceful but had a conflict on how much they could use them for IPV intervention. This was because they considered Scripture to be the sole basis for pastoral care and response.

### Recommendations

Recommendations from the findings of this research are as follows:

1. The church in Kenya may need to organise seminars and forums to discuss issues of IPV. These seminars would be best facilitated by trauma therapist or a trained marital counsellor.
2. The church may need to encourage all people entering into marriage to attend pre-marital counselling. As a preventative measure for IPV the pastors may develop curriculums that include discussions on IPV and how to avoid it.
3. Various departments within the church may plan topics and sessions that give a platform for open learning and discussions about family life. This may assist the church in raising the congregations' awareness and participation in eradicating IPV.
4. The Ministry of Culture and Social services may arrange community forums to discuss issues of IPV. These forums may be facilitated on experts on issues of violence and counsellors as part of community sensitization on matters of IPV

5. The researcher recommends that issues of IPV in particular and basics of counselling may be incorporated into the theological seminaries curriculum in Kenya.

#### Recommendations for Further Research

Further research on the circumstances surrounding the cases where couples seek help together even when there is evidence of severe violence.

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## APPENDICES

## Appendix I Questionnaire

This is a list of questions to assist the researcher in assessing and understanding pastoral views and responses to intimate partner violence (IPV). The findings of this study may be useful to pastors and other stakeholders in giving them an in-depth analysis of their awareness and view of IPV.

Instructions: For each item, answer the question as specified

Date: ...../...../.....

Day/ month/ year

## Section A: Demographic information

1. Gender (tick one)    male .....                      female .....
2. Do you have any formal training in couple counselling (tick one)?  
Yes .....                      No .....

If yes, what are your qualifications?

.....

## Section B:

1. How often do you get a case of intimate partner violence amongst members of your congregation? (tick one)  
Very often .....                      rarely .....                      never .....
2. When was the last episode of abuse(s) reported to you?  
This week .....                      last week .....                      a month ago .....  
3 months ago .....                      I year.....                      More than 1 year .....
3. From observation where else do the victims of IPV seek help before coming to you?  
Tick as applicable  
Family.....                      friends .....                      chief .....                      police .....  
Other Churches .....                      other (specify).....

4. Tick the actions that in your opinion constitute intimate partner violence from the list below

- Causing anxiety to a partner .....
- Not involving a partner in decision making .....
- Making fun of a partner in the presence of other people .....
- Not being allowed to handle money in the relationship .....
- Not giving a partner time to be with friends and family .....
- Not being interested in a relationship with a partner's family .....
- Jealous suspicions of infidelity without proof .....
- Forceful sexual relations .....
- Threats of physical harm .....
- Beating .....
- Throwing items at a partner .....
- Twisting of the arm .....
- Pulling of hair .....
- Kicking and punching .....
- Pushing/shaking .....
- Choking .....
- Slapping .....
- Attacking with a weapon .....
- Inflicting burns .....

5. From your experience what are some of the complaints presented by the IPV victims seeking your assistance?  
.....  
.....  
.....

6. When a victim reports a case to you what initial steps do you take towards intervention?

.....  
.....

7. In your view, what is your role as a spiritual leader in assisting victims of IPV?

.....  
.....

8. Are there cases of IPV you find you cannot handle because you are a pastor?

Yes ..... No .....

9. What actions do you take when such are presented to you?

.....

10. Would you advice separation or divorce to partners experiencing IPV?

.....  
.....

11. As a pastor, would you discuss issues of IPV from your pulpit during a worship service?

Yes ..... No.....

Explain your answer

.....  
.....

17. What is your cultural view of intimate partner relationships?

.....  
.....

18. From your observation, are there IPV cases that are a result of cultural differences between partners?

Yes ..... No.....

Explain your answer

.....  
.....

19. In your opinion, to what extent should pastors embrace cultural practices in helping intimate partner violence victims?

.....  
.....

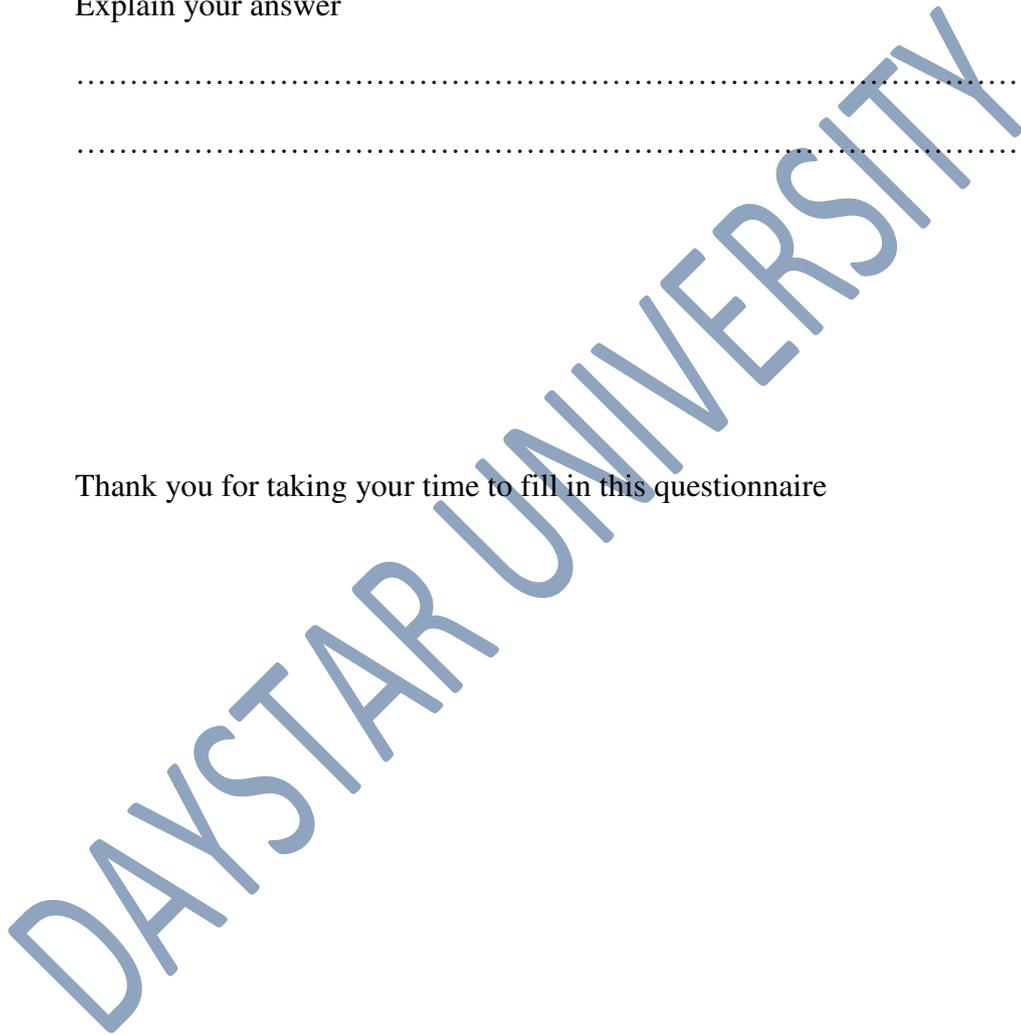
20. In your opinion is it possible for biblical teachings and cultural beliefs to be used together to help the victims of intimate partner violence?

Yes ..... No.....

Explain your answer

.....  
.....

Thank you for taking your time to fill in this questionnaire



Appendix II Research Authorisation –Daystar University

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Appendix III Research Authorisation KAG Church Nairobi District

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