# University of Exeter and the Evangelical Lutheran Church in Namibia 15<sup>th</sup> March 2021 Workshop on

'Disability in Namibia: Religious and Cultural Perspectives'

Following on from our virtual workshop on 3<sup>rd</sup> and 4<sup>th</sup> December 2020, the University of Exeter and the Evangelical Lutheran Church in Namibia (ELCIN) partnered to bring together ELCIN pastors from across Namibia to discuss clergy perspectives on disability in Namibia. 10 ELCIN pastors joined Dr Helen John (University of Exeter) in Ondangwa for a one-day workshop on 15<sup>th</sup> March 2021 (postponed from June 2020 due to the pandemic) in which we discussed the challenges faced by people with disabilities (PWD) and how communities, congregations, clergy and the church can facilitate more inclusive environments. What follows is an outline of the day and a summary of the discussions and key takeaway points.

#### **Attendees**

Dr Helen C. John (University of Exeter)

Reverend Thomas Uushona (ELCIN HQ)

Reverend Gabriel N. Ndjigwa (Etegameno)

Reverend Justina Haipinge (Chaplain, Oshakati Hospital)

Reverend Shivute David Aipinge (Okando)

Reverend Petrus Sheefeni (lihongo)

Reverend Hilja Nghaagulwa (Edundja)

Reverend Martha Kanyemba (Bible Society)

Reverend Josef Shitaleni (Otjiwarongo)

Reverend Sakaria Angula (Oshigambo)

Reverend Gabriel Angula (Swakopmund)

### **Workshop Sessions**

We began the day with an introduction to the University of Exeter and University of Namibia's 'Disability in Namibia' project. Dr Helen John (University of Exeter) shared with the gathered participants our efforts thus far to bring together a diverse network of academics, clergy, Organisations of Persons with Disabilities (OPDs), the Government of the Republic of Namibia, and various UN agencies.

In our first session, we discussed **disability issues** in general and clergy experiences of disability, whether personal or in relation to their congregations and communities. We asked:

- 1. What are the challenges facing people with disabilities in Namibia?
- 2. What are the disability-related challenges facing communities in Namibia?
- 3. What challenges do clergy and churches face in ministering to people with disabilities?

Our second session took the form of a **Contextual Bible Study**, focusing on Markus 10:46-52 / Mark 10:46-52 (Omuposi Bartimeus ta aludhwa / Jesus Heals Blind Bartimaeus). This approach (Contextual Bible Study) originates in South Africa and looks to read biblical texts together and relate them to local contexts, cultures, and concerns, and to bring about positive social change. We read the text aloud in both Oshiwambo and English and then discussed the characters and events in the text, how the text relates to Owambo contexts in Namibia, and how this text could promote disability-inclusive attitudes. Examination of texts in this way leads to a more detailed discussion of the situation on the ground in communities of a given social/cultural issue.

After lunch, Dr Helen John (Exeter) presented the results of a recent study into **attitudes to disability in Owambo**, focusing particularly on negative terminology in use in communities to refer to PWD. She also discussed the attitudes communicated in Owambo proverbs, some of which are undoubtably negative but some of which she suggested could be used to sensitise and put forward positive messages about PWD.

In our fourth session, we again undertook a **Contextual Bible Study**, this time looking at 1 Aakorinto 12:12-31 / 1 Corinthians 12:12-31 (Olutu lumwe I una iilyo oyindji / One Body with Many Parts). Again, we read the text aloud in both languages, considered initial reactions to the text, key themes within the text, and how the text has/might shape attitudes to disability moving forward.

The last session of the day focused on the findings of the December workshop (at which ELCIN was not represented). An equivalent summary of the December workshop is available on this blog. This session offered the pastors a chance to review and reflect on the key discussion points put forward by PWD, OPDs, the government, the UN agencies, and the academics about the current situation regarding 'Disability in Namibia'. We then discussed the pastors' responses to those issues and, more generally, the ways in which the clergy and ELCIN church can respond to the challenges and concerns raised by our December 2020 and March 2021 workshops.

# Findings from the Day

We want to share here the main discussion points raised over the course of the day.

### (a) Challenges and Concerns

- i. We noted in the summary of the December 2020 workshop that 'there was considerable concern shown about ignorance, stigma and discrimination. People with disabilities continue to face discriminatory social, cultural, and religious attitudes, which lead to their marginalisation and exclusion from mainstream life. Problems highlighted include ignorance about the causes of disability, the association of disability with witchcraft and sin, and the continued hiding away of children/family members with disabilities.' These points arose many times in discussions amongst the clergy, too, as did the point that we will all be disabled at some point, whether because of an accident, illness, old age, and so on.
- ii. Likewise, the pastors noted that there is a problem in their communities and congregations with the widespread use of **negative terminology** to refer to PWD. These terms often define the person by their disability, and may be accompanied by mocking, mimicry, insults, name-calling, and nicknaming (and even labelling of whole communities where disability is very visible). It was noted that some people's actual names are not even used ('you even forget their names') and rather they are called by the name of the disability. It was also reported

that in some cases, negative terms are used behind someone's back, even if they are addressed by their name to their face. Problems with terminology is exacerbated by the fact that the biblical text also uses negative terms. The Bible Society is engaged in an ongoing project to rework aspects of the translation that reflect contemporary negative attitudes. However, the biblical text also reflects negative attitudes of its context(s), and these cannot be erased.

- iii. There is a genuine **risk of physical harm** to PWD and the incapacitated elderly from their own family members, who are not well-prepared for the caretaking demands. There are instances in which elderly are killed because of being a 'burden'. Persons with a mental disability may be the victims of revenge treatment for accidents caused in the home (food burned in accidental fire, food later withheld). It is difficult for PWD to report mistreatment as they may fear retribution.
- iv. Echoing a concern raised by participants in December, there was much discussion concerning issues of accessibility. This related to physical buildings (schools and churches), which are most often not wheelchair accessible (steps into the building, steps at the altar), for example. It also related to the difficulties pastors face in reaching PWD in rural villages (off the tar road), and the difficulties PWD face in reaching church, schools, medical care. Distances are long, high cost of transport, sand tracks often require 4x4 vehicles (in a context where few have cars at all), and people live at considerable distance from village centres where the churches and schools are located. Wheelchairs are not well-suited to the sandy terrain of the North-Central region and therefore considerable assistance is needed for those with certain physical impairments to move long distances. Accessibility issues were also raised in relation to communication in church how can the church be accessible to PWD when there is inadequate training in sign language, braille, and general communication with people with mental or cognitive disabilities?
- ٧. A further aspect of the accessibility issue is the frequent hiding away of family members with disabilities, who may be deemed 'not normal', 'sub-human', useless, a community 'disturbance', or a 'burden'. It is difficult or impossible to minister to those hidden and when families do not want to engage or cooperate with pastors. The pastors noted that a pervasive sense of shame surrounds disability and means that a PWD may not be allowed out of the home, may be mistreated (lack of hygiene, clothing, food, water, subject to physical harm and/or hard labour), and made to be invisible when visitors are present. Children may also be withheld from schooling (or choose to avoid it), whether due to issues of shame, unwelcoming attitudes, concern that they will encounter mistreatment, or because of issues surrounding the practicalities of getting to and from school (which itself may also have accessibility issues). The government disability grant has meant that there may now be less of this hiding away of family members, but perhaps for financial gain rather than positive reasons. It was noted that in some cases it is not PWD themselves who benefit from this grant – a PWD may now simply be seen as a source of income. It was noted that the enormous care taken in the delivery of a funeral and memorial service and associated celebration of life in Oshiwambo culture be at odds with the care taken of the PWD before their death.
- vi. **PWD** are often not married. PWD may be told not to marry each other (e.g. two people with visual impairments) but this is due to prejudices of family members. It was reported that disability is deemed to propagate further disability, so PWD would be dissuaded from 'multiplying' through marriage and children. The community's preference is to 'minus', not 'multiply'. Some men may be willing to engage in a sexual relationship with a woman with a disability but will not be willing to acknowledge any resulting children. When a woman

becomes disabled after marriage, a man may be encouraged to 'move on' and leave her family to step in and help, as cultural roles mean that he is unwilling/unable to provide the requisite care. A woman in an equivalent situation would not be encouraged to 'move on' because of the pre-existent cultural expectation that she will care for her husband. There is therefore a gender imbalance in experiences of acquired disability.

- vii. The difficult conditions in which some people with disabilities therefore live means that there is a considerable **demand on pastors to offer practical assistance** (food, clothing, and so on) alongside spiritual ministry. This is a significant financial challenge and has only been made worse during the pandemic (as pastors rely on congregational support through the collection for their living).
- viii. Hiding people away also means that the **voices of experience are not often heard**. The participants reported that they are not consulted, involved, or considered in community matters and discussions. When heard, voices of people with disabilities are dismissed, and their contributions are not valued.
  - ix. We reported in December 2020 that: 'Many voices of experience told the workshop that they experience negative attitudes when attending church or encountering members of the clergy, sometimes leading to them preferring not to attend church at all. They reported that it is all too common for clergy to focus on their disability and to offer prayers in the hope of achieving 'cure' of the disability. This makes people feel that the ministers and/or communities of faith only see their disability, not the person themselves, and means that their spiritual needs are often not met.' Reflecting on this finding, some pastors reported that they are actively approached for healing/cure and that people expect them to be able to heal/cure in the same way as Jesus did and that this is difficult to manage. Some said that this may draw people away from the ELCIN community, which focuses on acceptance of disability. Concern was raised about the false promises of 'cure' offered by some charismatic churches, who stage disingenuous healing 'performances' in order to draw people in and gain financially.

# **Pathways Forward**

- i. The participants fully recognised the issues faced by PWD but suggested that **more training** and provisions for clergy are required to upskill pastors in the specifics of communication with PWD (e.g. those with visual/hearing impairments, mental illness, or cognitive conditions), inclusive practice, offering opportunities for PWD to share their experience and skills, and how to deal with discrimination.
- ii. The pastors indicated that there is a clear need for **community education campaigns** to raise awareness about disability issues, to address discriminatory religio-cultural attitudes and behaviours, and to encourage positive attitudes and inclusive communities. People should be encouraged to reflect on the fact that they could become disabled any day. Thereafter, communication about the whereabouts and needs of people with disabilities should be improved and pastors will be better able to help. It was noted that you cannot include and advocate for people you do not know about.
- iii. We need to build on the success of **Deacon Day** (a Sunday in October), on which extra efforts are made to bring PWD, the elderly or incapacitated to church to be in community.
- iv. **Preparedness for encounters with disability** could also be delivered in part through premarital counselling, wherein couples could be encouraged to think about what it might mean to have a child with a disability and how they might positively respond. But this also requires training provisions.

- v. In ministry and preaching, the clergy could be encouraged to emphasise 'healing' over 'cure' and to pursue the idea that healing for PWD does not need to involve 'fixing' the disability but must include **healing of communities**: promoting inclusive attitudes and environments, raising PWD to equal status with people without disabilities, promoting accessibility, and making sure that the community itself is not disabling its own members by silencing and hiding them.
- vi. It was suggested that building **community centres** would provide safe spaces for people to come together and an educational space for community learning. This could also be a setting in which we could develop better connections between different strands of leadership (church, elders, traditional authorities, medical outreach, etc.). These suggestions reflected the call for a <u>down-up approach</u>, beginning in communities themselves.
- vii. We can utilise the **biblical texts** to encourage acceptance and inclusivity:

## Mark 10:46-52

The participants felt that PWD should be honoured as equals and not silenced/hidden by their families community (Jesus did not allow Bartimaeus to be silenced) or pushed to beg for income (Bartimaeus may have been taken there to beg by family members). They argued that we should recognise the courage, hope, and faith that Bartimaeus showed, even though others marginalise him. Bartimaeus, as is emphasised by his name and lineage, is a man of honour. We can emphasise acceptance and inclusion of those with disabilities and community healing over miraculous healing of Jesus.

#### 1 Corinthians 12:12-31

The discussions centred around teamwork, mutual care, unity, equality in diversity and difference, and co-dependence of all community members. When one person in the community is hurt, we are also affected, as we find our humanity in and through others (ubuntu). The community/body, includes all of its parts, whether weak, strong, sick, well, able-bodied, disabled. All are needed and none needs to be altered or corrected as none is superior or inferior. All are created in the image of God. There is a role for everyone in the community, as we all have different gifts. The text was seen to promote respect and the recognition of the dignity of all.

## **Future Events**

Our next workshop will follow in April 2021 and is geared towards seminarians. It will also feature a a half-day session with representatives from across the spectrum of stakeholders (academics, OPDs, government, UN, ELCIN, and so on). This will offer us a chance to reflect together on our progress so far, and to map out future plans and possibilities.

We are always looking to expand our network further. If you would like to get involved (or know of someone who might), please get in touch with Helen John at H.C.John@exeter.ac.uk