THE CONCEPT OF *ŨTUGI* WITHIN THE HIV AND AIDS PANDEMIC: A PASTORAL ASSESSMENT OF THE ECCLESIAL PRAXIS OF THE ANGLICAN CHURCH OF KENYA.

JOSIAH KINYUA MURAGE

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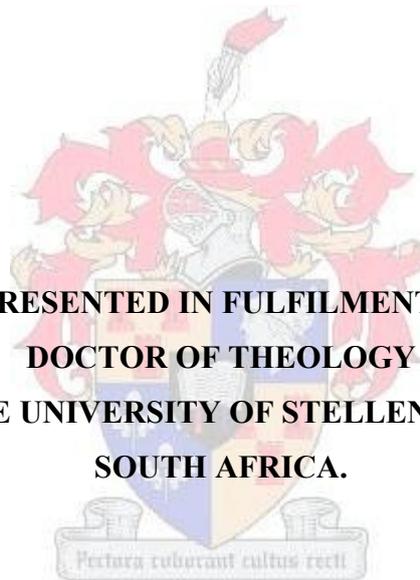
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DECEMBER 2011

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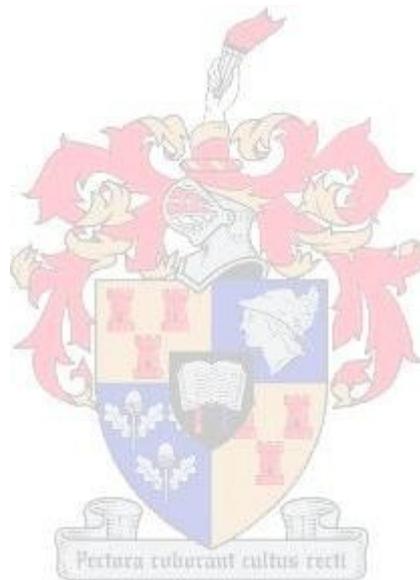
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ABSTRACT

This thesis deals with the concept of *Ũtugi* in relation to the HIV and AIDS pandemic and its contribution to the ecclesial praxis of the Anglican Church of Kenya. The thesis scrutinizes the HIV and AIDS context in Kenya, examines the origins, the nature, the characteristics and the definition of *Ũtugi* and its role in socio-economic, political, cultural, moral and religious life of the *Agĩkũyũ* community in Central Kenya and assesses the ecclesial praxis of the Anglican Church of Kenya. This concern is prompted by the need for the Anglican Church of Kenya to marshal *Ũtugi* (traditional resources) to complement Christian hospitality (church resources), to enhance human dignity of PLWHA and to fight the HIV and AIDS pandemic. By employing a hermeneutical tool as a praxis approach to pastoral care and counselling to interpret theological and assess the Agĩkũyũ cultural concepts and using a non-empirical research method (a qualitative research) based on conceptual analysis, the study explores critically the role of *Ũtugi* within the context of HIV and AIDS and its appropriateness as a tool for pastoral care and counselling in the Anglican Church of Kenya. The study poses the following research questions: In which way can the Agĩkũyũ concept of *Ũtugi* be used to create a healing space? How can *Ũtugi* be used to reframe the prevailing ecclesiological paradigms applied by the Anglican Church of Kenya? How can *Ũtugi* as a cultural concept help the Anglican Church of Kenya to become relevant and contextual in her endeavour to respond to the challenges posed by the HIV and AIDS pandemic in the twenty-first century?

The thesis unveils that the principles of *Ũtugi* can complement Christian hospitality to network and help the church to carry the burden of PLWHA, thus, enhancing their human dignity, sharing their joy and comfort, and journeying with them in their pain, sorrow and healing. It was also found that *Ũtugi* as a contextual model which is culturally rooted, is relevant to the Agĩkũyũ people and that it can help in transforming the existing ecclesial praxis of the Anglican Church of Kenya. Drawing from Daniël Louw's existential model for spiritual healing, the study assesses the appropriateness of *Ũtugi* as a model for pastoral care and counselling to PLWHA. It is revealed that *Ũtugi* is not only a paradigm that can augment their physical, social, psychological, economic, moral and spiritual aspects but that it has the capacity to deal with the existential threat of anxiety, guilt and shame, disillusionment and anger, despair and doubt, helplessness and vulnerability. Thus it can enable them to shift from their existential threats to a position of love, care, support, compassion, accommodativeness, liberation and hope.

OPSOMMING

Hierdie navorsing gaan oor die kultuur-bepaalde konsep *Ũtugi* met betrekking tot die MIV en VIGS -pandemie en oor die bydrae van hierdie konsep tot die kerklike gebruike en ekklesiologiese-self-verstaan van die Anglikaanse Kerk in Kenia. In die navorsing word indringend gekyk na die MIV en VIGS konteks in Kenia, en die oorsprong, aard, eienskappe en definisie van *Ũtugi* en sy rol in die sosio-ekonomiese, politieke, kulturele, morele en godsdienstige lewe van die *Agĩkũyũ*-gemeenskap in Sentraal-Kenia gekyk. Die navorsing evalueer voorts die gemeentelilie bediening van die Anglikaanse Kerk in Kenia. Hierdie ondersoek is noodsaaklik gemaak deur die behoefte van die Anglikaanse Kerk in Kenia om *Ũtugi* (tradisionele hulpbronne) te gebruik in aanvulling tot die Christelike verstaan van gasvryheid (kerklike hulpbronne) om die menswaardigheid van mense wat met MIV en VIGS saamleef, te verhoog en die MIV- en VIGS pandemie te beveg. Die navorsing sluit metodologies aan by die hermeneutiek. Die volg 'n praktykbenadering tot pastorale versorging en berading. Dit wil teologiese konsepte en die Agĩkũyũ se kulturele konsepte interpreteer, en deur middel van kwalitaticwe, kritiese analises vir die pastorale bediening aan mense wat positief met MIV getoets is, help sorg. In die lig van konseptuele analise, word daar in hierdie hierdie studie krities gekyk na die rol van *Ũtugi* binne die konteks van MIV en VIGS en na die gepastheid daarvan as instrument vir pastorale versorging en berading in die Anglikaanse Kerk van Kenia. In hierdie studie word die fundamentele vraag gestel: Hoe kan die Agĩkũyũ-konsep *Ũtugi* gebruik word om ruimte vir heling te skep en die heersende ekklesiologiese paradigmas in die Anglikaanse Kerk in Kenia omskep word sodat dit relevant en kontekstueel kan wees in die strewe om te reageer op die uitdagings van die MIV en VIGS pandemie in die 21ste eeu?

Die navorsing toon aan dat die beginsels van *Ũtugi* Christelike gasvryheid kan aanvul om netwerke te vorm en die kerk te help om die las van mense wat met MIV en VIGS saamleef, te help dra. Só kan hulle menswaardigheid verhoog word, in hulle vreugde en gerief gedeel word, en saam met hulle deur hulle pyn, hartseer en soeke na heling pastoraal gereis word. Daar is ook bevind dat *Ũtugi* as 'n kontekstuele model wat kultureel gegrond is, relevant is vir die Agĩkũyũ-mense. Dit kan inderdaad bydra en kan help om die bestaande kerklike gebruike van die Anglikaanse Kerk in Kenia te verander. Deur gebruik te maak van Daniël Louw se eksistensiële model vir christelik-spirituele geestelike heling, word die gepastheid van *Ũtugi* as 'n model vir pastorale versorging en berading aan mense wat positief met MIV en VIGS saamleef, evalueer. Daar is bevind dat *Ũtugi* nie net 'n paradigma is wat hulle liggaamlike, sosiale, sielkundige, ekonomiese, morele en spirituele lewe kan versterk nie, maar dat dit ook die vermoë het om die eksistensiële bedreiging van angstigheid, skuld en skaamte, ontnugtering en woede, wanhoop en twyfel, hulpeloosheid en kwesbaarheid, pastoraal te hanteer. Dit kan 'n verskuiwing vanaf eksistensiële bedreigings na 'n posisie van liefde, sorg, medelye ondersteuning, tegemoetkomendheid, vryheid en hoop meebring.

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Many individuals have encouraged and assisted me during the past few years as I continue working on this project. I would like to express my sincere thanks to my wife Revd Emily Wanja wa Njoka and our beloved children Jabez Mũrage wa Kĩnyũa and Perpetual Lilian Mĩcere wa Kĩnyũa for their perseverance and faithfulness during my long years of study. Although at times they seems not to understand why I should spend many years in South Africa studying, nevertheless, they always prayed for me and supported me in many ways, for that I am eternally grateful. In fact, throughout my entire studies I have always hoped that my son and daughter will one day understand why they only saw me for brief periods. Of course, I love you and I did all for you and the church of Christ.

Gratitude is due to Prof. Daniël Louw for his inspiring teaching in dogmatic, pastoral anthropology, pastoral care, medical ethics, marriage, family and counselling skills. Prof. Louw encouraged me to continue writing and assisted me in clarifying my thoughts. His interest both in my personal life as well as in my studies has never lessened; his inquisitive questions and comments were always a motivation and inspirational. I am delighted for the trust that he had shown in me. Thanks for being my promoter, hence giving the study the weight it now enjoys. Sincere thanks goes to Rt. Rev. Daniel M. Ngoru (Bishop of the ACK Kirinyaga Diocese) for releasing me to pursue my postgraduates' studies in South Africa. Tribute also goes to my fellow students Revd LeeAnn, Pastor Judy Prince and Revd Jack - without whom I could have found the journey being too long.

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DEDICATION

This thesis is dedicated to the late Revd Nathaniel Kamunye, who was my pastor and mentor in the early years of my theological studies. It is also dedicated to my parents Lilian Mĩcere wa Magũrũ and Nathaniel Mũrage wa Njũbi who introduced me to Christianity when I was young and also supported my primary, secondary and university education. Finally, it is dedicated to all those who lost their lives because of the HI virus and those who are still genuinely struggling to fight it.

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ACRONYMS

AACC	All Africa Conference of Churches
AAPSC	Africa Association for Pastoral Studies and Counselling
ACK	Anglican Church of Kenya
ART	Anti-retroviral therapy
ARV	Anti-retroviral
AIDS	Acquired Immune Deficiency Syndrome
CBO	Community Based Organisation
CCS	Christian Community Services
DFID	Department For International Development
HAART	Highly Active Antiretroviral Therapy
HIV	Human Immunodeficiency Virus
HBCP	Home Based Care Programme
ICPCC	International Congress of Pastoral Care and Counselling
IMF	International Monetary Fund
KNHASP	Kenya National HIV and AIDS Strategic Plan
NGO	Non-Governmental Organisation
NACC	National AIDS Control Council
USAID	United States Agency For International Development
UN	United Nations
UNDP	United Nations Development Programme
PBCP	Parish Based Care Programme
PLWHA	People Living With HIV and AIDS
PMTCT	Prevention of mother-to-child transmission
VCT	Voluntary Counselling and testing
WCC	World Council of Churches
WTO	World Trade Organisation
WMS	Welfare Monitoring Survey
WSSD	World Summit on Sustainable Development

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MAP OF AFRICA

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MAP OF KENYA

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THE MAP OF KENYA SHOWING ALL THE COUNTIES

Coast: Mombasa, Kwale, Kirifi, Tana River, Lamu and Taita/Taveta; **North Eastern:** Garissa, Wajir and Mandera; **Eastern:** Marsabit, Isiolo, Meru, Taraka-Nithi, Embu, Kitui, Machakos and Makueni. **Central:** Nyandarua, Nyeri, Kirinyaga, Murang'a and Kiambu; **Rift Valley:** Turkana, West Pokoti, Samburu, Trans Nzoia, Uasin Gishu, Elgeyo/ Marakwet., Nando, Baringo, Laikipia, Nakuru, Narok, Kajiado, Kericho and Bomet Western: Kakamega, Vihiga, Bungoma and Busia. **Nyanza:** Siaya, Kisumu, Homa Bay, Migori, Kisii and Nyamira; **Nairobi City.**

CHAPTER ONE
INTRODUCTION

1.1. Background of the research topic

This chapter intends to provide an introduction to the whole study. The chapter consists of the background to the study, the statement of the problem, limitations of the research, objectives, methodology, hypothesis, research ethics, conceptual analysis and the definition of terms. Finally, the chapter will also provide an outline of the chapters. The thesis examines the concept of *Ũtugi* within the HIV and AIDS pandemic and its appropriateness to the the ecclesial praxis of the Anglican Church of Kenya.

Geographically, Kenya is located in the Eastern part of the African continent, between 5 degrees North and 5 degrees South latitude and 24 and 31 degree East longitude. The equator cuts across the country from East to West. The neighbouring countries are Tanzania to the south, Uganda to the west, Ethiopia and Sudan to the north, Somalia to the northeast, and the Indian Ocean to the southeast with a coastline of about 536 kilometres. The country's total area covers about 582,650 Km^2. From this, 569,250 Km^2 (97.8%) constitutes dry land while13, 400 Km^2 (2.2%) constitutes water bodies. Approximately 80% of the land area is arid or semi-arid and only 20% is arable. After the promulgation of the new constitution on 22 August 2010, the country was divided into 47 administrative units which were referred as Counties as opposed to the previous eight provinces. These 47 Counties were further sub-divided into districts, divisions, locations and sub-locations as the smallest administrative unit.

For more than two decades since the first Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS)[1] case was described in Kenya, the HIV and AIDS pandemic still remains a huge problem for the country in its efforts for social and economic development. The HIV and AIDS pandemic is unique because, the HI virus infects people at the apex of their productive years, when they are healthy; the incubation period is long and the condition without Antiretroviral (ARV) drugs is a catastrophe. Dreadfully, the HI virus infects many people who are skilled and educated consequently reducing their productivity. It is horrifying that the HIV and AIDS pandemic knows no social boundaries

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[1] The difference between HIV and AIDS is that a person infected with the HI virus is considered HIV positive and he or she can be healthy without showing any symptoms of the illness. Such a person can live a long and active life with counselling and adequate nutrition, as well as by practising a healthy lifestyle, following certain precautions, and if available or affordable, by taking antiretroviral (ARV) drugs. A person who has reached the stage of AIDS is usually symptomatic, and often has to contend with many illnesses. Unless treated with ARVS drugs, he or she will usually have a limited time left to live. This difference between HIV and AIDS is an important one. Therefore, in this thesis the term HIV and AIDS will be used as opposed to HIV/AIDS, as these are two separate, but related, conditions.

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although there are socio-economic and political contours which the virus seems to follow as it spread. In fact, it thrives in the background of poverty, rapid urbanisation, violence and destabilisation. For instance, in Kenya those who are vulnerable are those who lack information and resources, and those who lack control over their lives. In other words, these are the poor, the marginalised, the uneducated, women, and those living in rural areas.

Responses to the pandemic have evolved over time as people became aware of this new disease, as they experienced illness and death among family members, and as services are developed to confront it (Ministry of Health 2007:1). Initially, many segments of society expressed denial of the disease while many who were living with the HI virus were stigmatised and discriminated against. Several theologians particularly Musa Dube (2004a), Martti Lindqvist (2006), Philippe Denis (2006), John Iliffe (2007) and Daniel Louw (2008) are in agreement that discrimination occurs when a distinction is made against a person that results in his or her being treated unfairly and unjustly on the basis of belonging or their being perceived to belong to a particular group. The above is also worsened by the belief that HIV and AIDS infection is a result of witchcraft and this notion has added stigmatisation and discrimination to the problems of *People Living with HIV and AIDS* (PLWHA) (Bodibe 1992a: 91; 1992b: 149; cf. Buhrmann 1984:5; Ashforth 2001:6).

Additionally, self-stigmatisation or the shame that the PLWHA experience when they internalise the negative responses and reaction of others, is also evident in Kenya. Martti Lindqvist notes that, stigmatisation of the PLWHA arose out of a sense of shame or guilt imposed on them by the community. He further observes that:

> AIDS is associated with taboos in combining the images of death and sexuality. After all, it is an illness that is usually transmitted sexually and often leads to the death of the infected person. Given, on the one hand, that sexuality itself is often associated with shame and guilt, and death with fear and incomprehensibility, these experiences converge to form an entity that is highly difficult emotionally to handle. In that case, one is close to the idea that AIDS is a punishment for the person for his or her sexual misdemeanour (Lindqvist 2006:18).

The above is also observed by UNAIDS (2002:9), which acknowledges that stigma, discrimination and silence debilitate the strength of already-weakened individuals and communities, and cause people to blame themselves for their predicament. Indeed, UNAIDS (2002:9) notes that stigma has been linked to what some writers call "felt" as opposed to "enacted stigma," in that it effects primarily the feelings and sense of pride of an individual or community (UNAIDS 2002:9). As a result, the PLWHA continue to experience the fear of

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family rejection and loss of job among other things. Sadly, this stigma and discrimination discourage them to seek the needed services because to do so may compel them to reveal their HIV status to their families, colleagues, or community who may stigmatise them. It is from this background that this study intends to formulate a model that can be used to embrace and accommodate PLWHA as opposed to stigmatisation and discrimination. This is in line with Louw's (2008:401) contention that, "stigmatisation and labelling are synonymous with immediate isolation. HIV (and AIDS), therefore becomes the leprosy of the twenty first century."

Similarly, the ideas about the lifestyles of the PLWHA contribute to a sense that the HIV and AIDS are problems that affect "others," which may undermine individuals' estimation of their own risk and reduce their motivation to take preventive measures.[2] Therefore, to respond to the injustice of stigma and discrimination, there is a need for the church to analyse the root cause and provide hospitable spiritual and socio-economic support system. Accordingly, *the Population Council's Studies and Activities on Stigma and Discrimination* (PCSASD) indicates that there are a number of practical approaches that can be undertaken to reduce the basis for these fears. These include providing information, counselling, and skills acquisition as well as increasing the opportunities for contact with the PLWHA.[3] In this regard, we need to broadly crush and shatter the above stigma and discrimination. This would require that we re-examine our religious, political and cultural ethics and uphold attitudes, values, customs and mores that are constructive by discarding those, which are destructive and problematic. This argument is supported by Haddad (2005:33), who affirms that we are living in "a critical" and perilous time where our lives are jeopardised by HIV and AIDS; therefore, the church needs to take drastic measures to address the situation.

Arguably, the slow pace of the Kenyan government to respond to the challenges posed by HIV and AIDS especially in 1980s and 1990s, and particularly its failure to take political commitment has been bluntly criticized by many NGOs (Ministry of Health 2005:1). They complain that since HIV and AIDS are preventable and manageable, the government could have acted fast but because of its ignorance, neglect and lack of political will the disease turned into a pandemic or national disaster.[4] It is also noted that while awareness of HIV and AIDS has been nearly universal for more than a decade, misconceptions still abound and

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[2] *Population Council –http://www.popcouncil.org/hivaids/stigma.html-*(22rd July 2009).
[3] *Population Council –http://www.popcouncil.org/hivaids/stigma.html-* (22nd July, 2009).
[4] http://www.mpra.ub.uni-muenchen.de/952/ - (4th July 2009).

many people have not yet dealt with this disease at a personal or community level (Juma 2001:5). The HIV and AIDS pandemic has become a serious concern for the government and the church for both recognise and acknowledge that the pandemic is on the "threshold of an exponential increase in the country" (Ministry of Health 2005:14).

Sadly, as more and more PLWHA progress to the final stage of AIDS, the financial and material burden of caring for them shifts from hospitals to their families and friends.[5] Hence, the impact of the disease on household welfare becomes devastating. As the disease progresses towards its final stages, medical expenses rise and household resources and savings are diverted for medical treatment and eventually for funeral costs.[6] In fact, the medical expenses for PLWHA are typically higher than for other patients because of the opportunistic diseases, which may occur. This means that there is an additional burden on already poor households resulting in further impoverishment for families already near or below the poverty line. Until recently, the cost of HIV and AIDS treatment was beyond the reach of most Kenyans. Now the price of these medicines has been reduced and in government hospitals, they are now being given freely (Daily Nation, 18th August, 2007:3).

However, obstacles to overcome include how to handle hidden costs such as cost of transport to health facility, cost of laboratory investigations, cost of care and support services, cost of food and other care-related commodities. These hidden costs still put adequate health care beyond the reach of many Kenyans. Kellerman (2000:201) notes that the poor may even be forced to sell their remaining property, borrow from others, and withdraw everything from their savings; but when at last the person dies, the funeral cost drains them of whatever is left, thus, increasing their burden. Musa Dube (2003d: 4) agrees with Kellerman and Gennrich in asserting that HIV and AIDS have indeed devastated the walls of our souls, families, communities, countries and continents, to such a great extent that the theme "come let us rebuild" is more than relevant in our time.[7] It is widely accepted that the HIV and AIDS pandemic have a major depressing effect on the social and economic life of the individuals, families, communities and society as a whole.[8]

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[5] World Bank country Kenya 2006 at http://www.worldbank.org/html/extdr/offrep/afr/ke2.htm -
(8th July, 2009).
[6] World Bank country Kenya 2006 at http://www.worldbank.org/html/extdr/offrep/afr/ke2.htm -
(8th July, 2009).
[7] See paper presented by Musa Dube to the General Assembly of the All Africa Conference of
Churches held in Cameroon, Yaounde on 20th -27th November, 2003.
[8] The effect of HIV and AIDS in Kenya at http://www.hbs.edu/research/pdf- (8th July, 2009).

In Kenya, as in many other countries in Africa, the HIV and AIDS threaten personal and national well-being by negatively affecting the health and productive capacity of the individual; and by critically constraining the accumulation of human capital and its transfer between generations.[9] This statement agrees with the International Monetary Fund (IMF) research (2004:1), which affirms that HIV and AIDS have severely affected low-income countries and have become the most serious impediment to economic growth and development in such countries. This is true of Kenya whose economy has been adversely affected by the HIV and AIDS pandemic[10] and complicated by the violence that erupted in Western Kenya and Nairobi after the December 2007 presidential election (Githiga 2009:162). This unfortunate, sad and disappointing tidal wave of post election obsession and insanity has caused the loss of more than 1200 lives and more than 650,000 people were displaced (Daily Nation 21st March, 2008).

 The direct cost and social problems associated with caring for increasing numbers of orphans and displaced families as well as existing high poverty levels place severe burdens on family and societal structures.[11] Due to the prolonged phases, the PLWHA continue to suffer even though they live within the community and they are breadwinners, fathers, and mothers etc. As such, there is need to engage them in meaningful livelihood support systems. This is because, the PLWHA have skills and gifts that can be used to empower them as they empower others. Besides, the interplay between HIV and AIDS and poverty is evidenced in the society, and this calls for a fight against poverty as well as provision of good support systems. Actually, HIV and AIDS fuel poverty and create an ongoing spiral of disease and poverty that undermines family stability. The household income is reduced and even land and property are lost while medical expenses increase. Malebogo Kgalemang (2004:153) reminds us that poverty and unemployment contribute to the spread of the HIV and AIDS pandemic. Furthermore, families also tend to break up while some even live on the streets. These are issues that the Anglican Church of Kenya and other church denominations need to address.

The role of churches in the context of the HIV and AIDS pandemic cannot be ignored. Of late, the spotlight is on both the church and the government with regard to response to the pandemic. Scholars such as Louw (1991), Ronald Nicolson (1995:7), and Willen Saayman

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[9]The effect of HIV and AIDS in Kenya at http://www.hbs.edu/research/pdf- (8th July, 2009).
[10] The effect of HIV/AIDS in Kenya at http://www.hbs.edu/research/pdf/- (8th July, 2009).

[11] http://www.sarpn.org.za/documents/d0002626/index.php.htm - (8th July, 2009).

and Jacques Kriel (1992:17), had earlier pointed out that the church is in a better position to respond to the epidemic than the government given that it is trusted by the majority and disadvantaged population and that it has a well established structure in the communities – right from the grassroots. In Kenya, various church denominations have not been left behind in the war against the HIV and AIDS pandemic especially the Anglican Church of Kenya (ACK) (Juma 2001:24). Many people still believe that the Anglican Church of Kenya is an important institution that can adequately deal with the issue of the HIV and AIDS pandemic.

Certainly, the Anglican Church of Kenya is advantageously positioned and the church is acknowledged by many as a religious institution. As such, the community see it as a reliable institution that can network and mobilise the local resources that are needed to fight HIV and AIDS. On her side as an integral part of the Kenyan society, the Anglican Church of Kenya has noted that the HIV is steadily on the increase and this has compelled her not to be passive but to respond to the pandemic. With this multidimensional nature of the HIV and AIDS in Kenya, the church, therefore, is obliged to assume a holistic approach to fight the pandemic.

In Kenya, the HIV pandemic has raised the question of how best the church should provide and engage in pastoral care and counselling to the PLWHA and their families. Certainly, Christians have to develop pastoral care and counselling models that are relevant to their context, that deeply appreciate human dignity and that portray a holistic understanding of human being. It is from this perspective that this study proposes that if the Anglican Church is able to 'interculturate' *Ũtugi* (the traditional resource) in her ecclesial praxis to complement the Christian hospitality (church resource), she will be able to fight the HIV and AIDS pandemic in Kenya effectively.

As a practical and humanitarian principle rooted in the Agĩkũyũ culture, *Ũtugi* can be used to demonstrate a new way of doing pastoral care and counselling to the PLWHA and their families. This is because *Ũtugi* opposes individualism and enhances protection, provision, solidarity, sharing, compassion and respect for the vulnerable, needy, guests and strangers while at the same time it sustains fundamental moral bonds within the family, *Riika* (age set), *Mbarĩ* (extended family), *Mũhĩrĩga (clan)*, elders and acquaintances. With such elements, this study argues that *Ũtugi* is capable of creating a physical, social, psychological, moral and spiritual healing space needed by the PLWHA and their families in their fight against the HIV and AIDS pandemic.

1.2. Problem statement

Specifically, the study is set to examine "*The concept of Ũtugi within the HIV and AIDS pandemic: A pastoral assessment of the ecclesial praxis of the Anglican Church of Kenya*" The question that the study seeks to answer, therefore, is:

> *In which way can the Agĩkũyũ concept of Ũtugi be used to create a healing space and reframe the prevailing ecclesiological paradigms applied by the Anglican Church of Kenya so that she can be relevant and contextual in her endeavour to respond to the challenges posed by HIV and AIDS pandemic in the twenty first century?*

The above research question will help us to explore how the Anglican Church of Kenya can promote *shalom* to the PLWHA and their families. Additionally, it will be hypothesised that the concept of *Ũtugi* can help to reframe the existing space and agents of ecclesial paradigms and, consequently, help to critically address the issues of healing, care, support systems, safety, power dynamics, inclusiveness, embrace, empowerment and unconditional love needed by the PLWHA and their families. Indeed the principles of *Ũtugi* have the potential to challenge and transform the existing ecclesial paradigms applied by the Anglican Church of Kenya. Through *Ũtugi*, the Kenyan Anglican Church is capable of creating a physical, social, psychological and spiritual space for the PLWHA and their families. In this regard, the healing space includes physical safety (where food, shelter, medical care and basic needs are provided), psychological and social safety (where the PLWHA can speak about their personal experience without being judged, misinterpreted, ridiculed or opposed, (cf. Ericson 2007:27). This is possible because the reliability, dependability and credibility of the Anglican Church of Kenya as a social and religious institution, together with her widespread pro-poor programmes place her in a strategic position to respond to the above.

1.3. Hypothesis

This research is based on the premise that because the Anglican Church of Kenya has parishes in every community in Kenya, it has great influence on the people of Kenya. Therefore, the church can mobilize her resources and her adherents to implement programmes based on *Ũtugi* which are effective in the prevention of the spread of the virus and in care giving and which can create a healing space for the PLWHA and their families. However, this will be possible only if the church would shift her ecclesiological paradigms of exclusiveness to paradigms of accommodation, sharing, inclusiveness and embracement. In this case, *Ũtugi* can play a decisive role in the transformation of a theory for pastoral care that can create a healing space and support system for the PLWHA and their families.

In order to contextualise the above, the study will argue that a theological understanding and interpretation of the concept of *Ũtugi* can help the Anglican Church of Kenya to formulate a pastoral healing model and set up hospitable caring groups in order to mobilize the community and the church members to combat the spread of the HI virus and support families endeavouring to cope with the HIV and AIDS pandemic. In this case, the Kenyan Anglican Church will be able to position herself and offer a healing space to the PLWHA and their families by creating an atmosphere of openness, love, acceptance, accommodation and support as dictated by *Ũtugi*. However, the ecclesial praxis of the Anglican Church of Kenya will not be authentic, relevant and contextual unless an intercultural model is put into consideration and a condition is created where the local idioms, metaphors, narratives, rituals, symbols, and contextual theologies are emphasized. This agrees with John S. Mbiti's statement that, "Christianity has made a real claim on Africa… the question is: Has Africa made a real claim on Christianity? Christianity has Christianised Africa, but Africa has not Africanized Christianity…" (as cited by Gehman 1991:20; cf. Waruta 1995:124).

1.4. Objectives of the study

The main objective of this study is to show the capacity of *Ũtugi* as a paradigm that can be used to mobilise the local resources needed for socio-economic empowerment of the PLWHA and their families. Additionally, this will be useful when constructing a contextual *Home Based Care* (HBC) modelled on *Ũtugi*. Secondly, the study aims to show how the practice of *Ũtugi* can complement Christian hospitality in the fight against the HIV and AIDS pandemic. Thirdly, the study aims to show how the Anglican Church of Kenya can interculturate her ecclesial praxis so as to respond effectively to the challenge posed by the HIV and AIDS pandemic. Finally, the study aims to demonstrate how the practice of *Ũtugi* can enable the Anglican Church of Kenya to shift from her present pastoral paradigm of exclusiveness to a more inclusive paradigm of pastoral care. This will enable this study to formulate an inclusive pastoral care and counselling model based on *Ũtugi*. In fact, discovering that one is having a full blown AIDS and waiting to die challenges the quality of life of the PLWHA. This is because death usually means the end of the efforts of the medical fraternity; however, it signals another important task in the holistic pastoral counselling ministry of the church.

The Anglican Church has to take up the challenge of both counselling the person who is dying and counselling those left behind, that is, the parents, the spouse and the children, the

siblings and the close friends. Mwaura (2000:92) notes that the pastoral counsellor is called to participate in the inner turmoil, agony, frustration and hopelessness of the sick or troubled person. In order to do this properly, the church has to deal with its own paranoia, get in touch with the PLWHA on the level of their basic needs, and give them hope that is rooted in the faithfulness of God and the resurrection power of Jesus Christ (Louw 1994:43). This hope should be encouraged through providing a healing space and restoring dignity to the PLWHA and their families. Obviously, the above objectives emanate from the hypotheses underlined above and from the need to engage the Anglican Church in empowering the PLWHA and their families within the community.

1.5. Theoretical framework

This study adopts a theoretical framework based on the contextualisation of pastoral care as exemplified by Louw (2008:153), Lartey (1997:30), Bevans (2003) and Ezeh (2006). Contextualisation, literally, refers to the process of relating the "message" [12] to the "context."[13] Mugambi (1995:64) defines the word as "the transfer of concepts invented in one culture to another." In Louw's (2008:153) view, contextual pastoral care is indispensable as one of the paradigms in pastoral care and counselling because within an African perspective the human being cannot be understood separate from cultural issues and values.[14] This is because humans are embedded in culture and culture in itself is an expression of the creative and imaginative human spirit which can be viewed as sacred endeavour (Louw 2008:153). Moreover, because culture encompasses the entire life of a people, their morals, religious beliefs, social structures, political, economical and educational systems, forms of music and dance, and rituals, it should, therefore, include the aesthetic, spiritual, and sacred dimension. This is because "culture is where the sacred reveals itself " and human beings are only able to know what they are "created to be and called to do through the human created realm of culture" (Hopkin, as cited by Louw 2008:153).

Indeed, *Ũtugi,* as exhibited in the Agĩkũyũ culture, unifies the community and gives a sense of welcome and belonging to the community. In view of this, Ezeh (2006:68) explains that the greatest value arising from the community is the support which it offers its members. It offers support to its weak members especially the old, the sick and the handicapped. In

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[12] Message may refer to the experiences of the past such as scripture or tradition.

[13] Context, in this study, refers to the present experiences that inform culture, social location and social change.

[14] According to Louw (2008:153), culture, from the Latin word c*olo,* means to nurse (take care of) or to transform the earth through a plough (an instrument) in order to live.

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African traditional life, there are various hospitable institutional and socio-cultural provisions that incorporate the young, the poor, the sick and the old into the society. Therefore, this study will adopt the contextualisation of pastoral care as a theoretical framework to demonstrate how the church can shift from exclusive paradigms adapted from the West to an African communal paradigm of inclusiveness.

As a matter of fact, this framework is in line with the call to contextualise pastoral care and counselling so that it can be liberative (Louw 1995:29). It also agrees with Stephen Bevans's (1992:4) assertion that doing pastoral theology contextually is not an option but really a theological imperative. He provides six models of doing contextual theology, which includes the praxis model, the translation model, the anthropological model, the synthetic model, the transcendental model and the counter cultural model (Bevans 2006:5).[15]

The synthetic model, which is our main frame of reference in this study, is derived from the transitive verb "synthesize" which means to "combine into a complex whole" or "to make up by combining parts of elements" (Obeng 2000:43). For Bevans (2006:88), the synthetic model is midway between emphasis on the experience of the present (that is, context: experience, culture, social location, social change) and the experience of the past (scripture, tradition).[16] The model preserves the importance of the Biblical message and the heritage of traditional doctrinal formulation. It also acknowledges the importance of other cultures in theology. The result is a synthesis between one's own cultural point of view and the point of view of others (Obeng 2000:44). The main assumption of the synthetic model is that every culture has elements that can contribute to theological dialogue (Obeng 2000:46). This assumption will give us a framework to explore how the concept of *Ũtugi* can be used to reframe the pastoral praxis of the Anglican Church of Kenya in her response to the HIV and AIDS pandemic.

As Obeng (2000:43) notes, when used as a description of a theological approach, the synthetic model has the sense of integration; the blending of theological ideas from different cultures into a coherent whole. Thus, the main reason for using the synthetic model in this study is due to the multidisciplinary nature of the HIV and AIDS pandemic, which calls us to

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[15] The sixth model, the counter cultural, appears in the 2003 edition of his book. For more information on synthetic and praxis models see Emmanuel Adow Obeng (2000:41-53).

[16] When using synthetic model, I am aware that there are two main opposing sides, that is, those who support the approach (e.g Mbiti) and those who oppose it (e.g Byng Kato and Tokunboh Adeyemo).

examine various "complexes" that emerge from our reviews. An example of these complexes is found in the question: Can the communality paradigms of *Ũtugi* that advocate inclusiveness challenge the Western paradigms of exclusiveness and individualism when we come to the HIV and AIDS pandemic? Equally, can the Agĩkũyũ concept of *Ũtugi* contribute positively and appropriately in shifting the ecclesiological paradigm practiced by the Anglican Church? The study, thus, opts for a synthetic model as the best frame of reference to address the above statement of the problem.

1.6. Rationale and motivation for the study

As matter of fact, some of the reasons for choosing this topic include the inspiration that arises from the need to use traditional resources to complement church resources in the fight against the HIV and AIDS pandemic.[17] Even though the Anglican Church of Kenya has been initiating various programmes on HIV and AIDS prevention and care, no research has ever been conducted on how the existing traditional *Ũtugi* can be used to complement the Christian hospitality (church resource) in pastoral care and counselling to the PLWHA and their families. Generally, most of the studies done on the HIV and AIDS pandemic in Kenya are either conducted from the medical or from the sociological perspective.[18] Therefore, this study will attempt to add to the HIV and AIDS literature on the church understanding of *Ũtugi* within the HIV and AIDS pandemic - primarily from a pastoral care and counselling perspective.

Another reason for choosing this topic is to provide an alternative way of doing pastoral care and counselling that is contextual and relevant, as a response to the challenge thrown by the *International Congress of Pastoral Care and Counselling* (ICPCC), the *African Association for Pastoral Studies and Counselling* (AAPSC)[19] and the *World Council of Churches* (WCC). As early as 1981 when the ICPCC was founded at San Francisco in USA and as early as 1984 when the AAPSC was founded at Limuru, Kenya, the issue of the relevance of pastoral care to a particular context was raised. The same debate was also repeated at the AAPSC conference at Stellenbosch University, South Africa, on 25th -28th March 2009. Both

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[17] Kwame Bediako challenged the church in Africa to search for local resources which can complement church resources in the fight aganist HIV and AIDS(A presentation on "Theology and development in Africa" at St Matthew's Anglican Church in Pietermarizburg on April 2006 workshop).

[18] There are very few HIV and AIDS research conducted from a theological perspective. MAP international has been noted as one organisation supporting HIV and AIDs research; others include Acton Publishers and Paulines Publishers.

[19] The *African Association for Pastoral Studies and Counselling* (AAPSC) was formed at the end of an ecumenical consultation on African Pastoral Studies held from the 17th to 24th of February, 1985, at Limuru, Kenya. This consultation was held under the initiative of Prof. Masamba ma Mpolo of Zaire who was at that time working with the WCC.

associations found that the pastoral care and counselling that evolved in the North American context was heavily influenced by Western philosophical individualist thinking; hence, it focused on individual therapy. Both associations also observed that while pastoral care and counselling as a discipline is concerned with the religious quest for meaning and life, it is closely influenced by other forms of psychotherapy which ignore interculturation (Mpolo ma and Nwachuku 1991:27-28).

Further, at Limuru, Kenya, the AAPSC pleaded with the audience, which consisted mainly of lecturers from theological institutes and universities in East Africa and other parts of Africa, to shift their pastoral care and counselling approaches so as to be relevant and contextual. The call by both the ICPCC and AAPSC received support from Howard Clinebell (1984:101) who contends that, "The new world of global communication and transcultural relationships opens up many problems. It also open exciting and challenges possibilities for us as pastoral counsellors, to learn from each other and thus to transform age-old cultural barriers into bridges." In response to Clinebell, the ICPCC and the AAPSC, we shall, therefore, endeavour to investigate the above topic, since interculturality in the context of HIV and AIDS has become inevitable.

On a more specific note, however, this topic is also chosen to respond to the Eighth Assembly of WCC, which met in 1998 at Harare in Zimbabwe. At this meeting, the WCC noted the increasing rate of inequality, poverty, unemployment, HIV and AIDS, and environmental degradation in Africa. Indeed, the WCC observed that these predicaments were perpetuated by neo-liberal development which was and still is imposed on Africa by institutions such as the IMF, World Bank and WTO. In this respect, the WCC challenged the church in Africa to start looking for alternative contextual models to fight the above calamities.

However, these issues are yet to be resolved and the church in Africa is yet to provide an alternative contextual model of fighting the HIV and AIDS pandemic. Therefore, this study will attempt to show how the Anglican Church of Kenya can use the principles of *Ũtugi* in her pastoral care and counselling to the PLWHA and their families. In addition, the study will explore various ways the Anglican Church of Kenya can use *Ũtugi* principles to reframe her ecclesial praxis. In line with the WCC's challenge, the study aims to set the pace for other churches to identify their contextual pastoral paradigms which can be used as a tool to curb the above predicaments.

Finally, another reason for choosing this topic is based on the understanding of the interplay between poverty and the HIV and AIDS pandemic, which is a reality not only in Africa but also in the developed countries (Murage 2007a:140-170). Therefore, this study will provide an understanding of how the faith communities in Kenya can use *Ũtugi* to rally the resources available in their locality and in the globe for the benefit of the PLWHA and their families. As such, the study is interested in constructing a pastoral counselling model based on *Ũtugi* which can enable the Anglican Church of Kenya to create the ecclesiological space and place for healing the PLWHA and their families, thus, helping the church to fight the above vices. It will be stimulating to see how the *Ũtugi* (traditional resource) is compatible and incompatible with the Christian theology of hospitality and how it can complement Christian hospitality (church resources) in the pastoral care and counselling to the PLWHA and their families.

1.7. Contribution of the study to the HIV and AIDS debate

This study contributes to the HIV and AIDS debate by showing how the principles of *Ũtugi* can be used by the Anglican Church of Kenya in her fight against the HIV and AIDS pandemic. In this respect, so far, we have attempted to demonstrate how the local indigenous resources (*Ũtugi)* and assets in the community can be used and mobilised by the church for pastoral care to enhance the war against the HIV and AIDS pandemic in the community. In fact, the study will show how the church in its ecclesial praxis can become a redemptive community. As we have seen in the section above, the study's uniqueness is also to be seen in the fact that it endeavours to critique the present methods that the church (faith community) and the government are using to fight the HIV and AIDs pandemic. Moreover, the study will show how the church can enhance her programmes and network with various organisations (NGOs) to fight the pandemic. This is because the HIV and AIDS pandemic is a global crisis that cannot be fought by a single church, NGO or institution. The study will argue that there is a need to work together with interested groups to fight the HIV and AIDS pandemic. By so doing, the study will revisit the socio-economic, cultural, gender and political issues from a pastoral care perspective.

In addition to the above, the study will show how the church can tap some of the positive cultural values embedded in the principles of *Ũtugi*. This is because Africa's traditional education system and its religious education are an integral aspect of the African life and they can be used in the fight against the HIV and AIDS pandemic. In fact, the Anglican Church of

Kenya has been ignoring these aspects of education by calling it satanic and evil, yet, these education systems are not replaced in our present education (cf. Synod Document of Kirinyaga Diocese 2005:60). Therefore the uniqueness of this study is seen in our attempt to demonstrate how the church can graft these principles of *Ũtugi* in her pastoral care and counselling. Our concern here is also to formulate a pastoral care and counselling model based on *Ũtugi* that can be used by the pastoral care givers and pastors in their HIV and AIDS ministry.

In fact, to extend *Ũtugi* to those who are stigmatised and who experience discrimination because of their diseases, through an act of kindness and concern for their well-being, is to create a healing space. For if they accept these offerings, the act becomes healing for them as well as part of the psychological healing of the stigmatizer and discriminator, who is often traumatized by his or her acts of stigmatisation and discrimination. Within the stigmatizer and discriminator who extends *Ũtugi*, the shame and hatred connected to the "other" are psychologically transformed by constructive social action. For both the stigmatised and stigmatizer, forgiveness becomes a possibility. The study will argue that *Ũtugi* needs to be considered as an important variable in pastoral care and counselling of the PLWHA and their families. It is an effective process for both the victim and the perpetrator, since it provides them with a caring and safe environment needed to help both parties understand the fears, needs and hopes of the "other."

 Moreover, this practice has deeper implications because it creates room for self-reflection and it enables the individual to begin to create the space needed within the self that opens a place for the other in previously unknown ways. Thus, this research seeks to employ the principles of *Ũtugi* to show how *Ũtugi as a model for healing* can provide the space(s) for people to move from hostility to the understanding of the other's interests, needs and feelings (cf. Louw 2005:134). The study will also attempt to prove that this *Ũtugi* model can create, in addition, an environment of mutuality and interaction where misunderstanding, identity threat, and psychological pain (existential threats) can be discovered and processed. It will show how *Ũtugi* can remove fear - a critical force that divides people - by gradually overcoming and replacing it by a sense of healthy tolerance and a certain level of trust (cf. Louw 2005:134).

The study hopes to contribute to the HIV and AIDS debate by exploring some other *Ũtugi paradigms* such as family and communal models, in its effort to assess this proposal for a new way of doing pastoral care within the context of the HIV and AIDS pandemic. Additionally, the study will offer a theological reflection of the themes that advocate the equality of humanity as well as the empowerment of the poor and the PLWHA. This basic orientation is in agreement with the Christian doctrines of *imago Dei*, human dignity, justice, liberation, prosperity, love and redemption. The issues will be dealt with in the light of Christian hospitality and *shalom*; for *shalom* involves the re-establishment of human beings in the right relationship or righteousness and justice with God, each other, and the environment. Therefore, in the spirit of redemption (*shalom)* the study will attempt to understand how the Anglican Church of Kenya can emulate Christ's hospitality in reversing indignity, injustice, enslavement and poverty in our society which represent other ways that the HIV and AIDS are perpetuated.

The studies' uniqueness will also be seen in the fact that it will endeavour to survey some other theological paradigms such as embracement, otherness and reconciliation in its effort to propose a new way of doing pastoral care and counselling in the context of theHIV and AIDS pandemic in Africa. According to Schreiter (1985:9), the reconciliation paradigm acknowledges the enormity of the task created by "the consequences of history and the centrifugal powers of the present," and reconciliation, as a form of mission, acknowledges the "centrality of truth in a world enmeshed in lies, seeks safety and security as the basis for trust, and works" within the community in situations of isolation. In Hegel's technical sense of the term, "reconciliation" refers to both a process and a state; and the process is that of overcoming alienation from the social world, and the state – that of being at home in the social world, which is its result (Hardimon 1994:95). To Hegel, therefore, "reconciliation is the movement that makes estrangement *(Entfremdung)* disappear" (Hardimon 1994:95). Being at home in the social world *(Bei sich sein, Zuhause sein)* is given prominence in Hegel's theory (Hardimon 1994:95); and as Michael O. Hardimon (1994:95) affirms, it is the concept out of which "both reconciliation and alienation are construed."

At the individual and communal level, the PLWHA are not only alienated socially and psychologically but also spiritually (Dube 2004a:4,12-13), a fact that gives credence to the paradigm of reconciliation in this study. Furthermore, Hegel reminds us that, modern people, anyway, are fully at home in the social world if, and only if, the social world is a home, they

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grasp that the social world is a home, they feel at home in the social world, and they accept and affirm the social world (Hardimon 1994:95). Seen from Dube and Hegel's perspective and taking into consideration the above-cited incidences facing the PLWHA, there is need for authentic home *(oikos)*, a place and a space where love, justice, reconciliation and embrace can be experienced. In a broader sense, this revelation justifies the need for this study and shows its uniqueness.

1.8. Research methodology

1.8.1. Library research

This study will employ a qualitative research based on conceptual analysis. As such, our approach will include engaging pastoral care in a dialogue with development theories, anthropology, philosophy, social events, cultural events and historical events that are compatible with the study. Indeed, literature research will be the primary method that will be employed in this research in its endeavour to meet its objectives; therefore, extensive literatures that are relevant and beneficial to the study are consulted. These include Anglican Synod documents; reports from the Kenya government, Welfare Monitoring Survey, WCC, WHO, KAIS, NACC, and UNAIDS; workshop papers; conference presentations; and reviews and analyses of the works of different authors. In this respect, both published and unpublished works that are relevant to the study will be consulted including periodicals, articles, internet resources, books, Diocesan Synod books, and papers presented at various workshops or conferences among others.

1.8.2. Archival research

Archival research includes the search for primary materials especially those papers written by early missionaries and pioneer African care givers (both lay and ordained). These primary materials offer some insight into our interpretation of *Ũtugi*.

1.8.3. Participatory observation

Even though the study will employ a qualitative research based on conceptual analysis; nevertheless, it will indirectly be enriched by a participatory observation method from my fifteen years' experience as a minister in the Anglican Church of Kenya. The immediate context of the HIV and AIDS pandemic in Kenya will also influence my attitude and aptitude, which are further, enriched by the philosophical and theological concepts acquired during my many years of study at various universities. Furthermore, my experience in various

ARV clinics, VCT programmes at the University of Stellenbosch, and the HIV and AIDS support groups has enriched this research. Likewise, my experience as a Diocesan Mission chairman/ Diocesan Evangelistic Team coordinator has also proved useful to this study. As a Diocesan Evangelistic Team coordinator for four years, I was able to visit different churches in various Anglican dioceses in Kenya. Again, as an Anglican clergyman who has worked as a member of the standing committee of the synod of the Diocese of Kirinyaga and as a board member of *Ũtugi Children Home*, I have a good knowledge of how the Anglican Church ecclesiological structure operates. Therefore, my being informed by these experiences, can be regarded as crucial to this research.[20]

1.8.4. Hermeneutical approach

Finally, this study will employ a hermeneutical approach to pastoral care and counselling. Casalis (1985:7) reminds us that, in its original form, hermeneutics is the science of *Hermes*. *Hermes* was the Greek god who was entrusted with transmitting to human beings the result of the confused and stormy deliberations of Olympus. *Hermes* was also responsible for getting that commodity across the border from one culture to another and he was the protector of physicians who were trained to restore fullness of life to those threatened by death (Casalis 1985:7). From this description, Casalis (1985:7) concludes that hermeneutics has four dimensions. First, it translates a divine message into human words; second, it transposes what was said "at that time" into contemporary categories; third, it claims possession of the text and its meaning from those who have unwarrantedly locked them away; and finally, it revives the past in order to retain its values for the present. Hermeneutics, therefore, is a principle by which the biblical text is interpreted to make the message relevant to the modern situation. It takes into consideration the text and its context, as well as the reader and his or her context. If the former is taken seriously without the latter, then we end up with an ancient text without any relevance for the present. If the latter is taken seriously without the former then we are in danger of advocating subjective interpretation.

The use of pastoral hermeneutics in practical theology was developed at the beginning of the twentieth century. Gerkin (1984:24) notes that in pastoral hermeneutics approach the person's

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[20] Since 1995, I have been involved in the HIV and AIDS programmes in several parishes having initiated HIV and AIDS programme in the following parishes in Kenya: Gatwe, Gacharu, Kabonge (Kirinyaga Diocese) and Abori (Taita-Taveta Diocese). In South Africa, I have been involved in various HIV and AIDS projects in the last six years. For example, in 2005-2006, I was involved in the HIV and AIDS work at the *uMgeni* AIDS Centre (KwaZulu Natal) and in 2007, I worked for one year at the *Nolungile* Government clinic in ARV therapy, VCT, and PLWHA support group. Again, I was involved in pastoral care and counselling and in the church HIV and AIDS projects at the *JL Zwane* at Gugulethu (Cape Town). From 2007 to 2010, I have been involved in the HIV and AIDS programme at the faculty of Industrial Psychology at the University of Stellenbosch. Therefore, these experiences cannot be ignored in this research.

life is viewed as a living human document, "which should be studied in ways similar to the written documents of the Bible and ancient texts." For him, the resemblance of meaningful action and written texts is an important assumption of the application of hermeneutical sciences in pastoral theology. Donald Capps (1993:10) argues that four similarities can be outlined: (a) both meaningful action and written text have an influence that lasts beyond the moment; (b) both have consequences, some that are intended and others that are not; (c) both create a world people live in; and (d) both are open for a new interpretation afterwards. This means that the texts and human actions disclose the world for understanding.

Therefore, this study will employ a pastoral hermeneutical approach to interpret theological and cultural concepts and to assess their meanings within the Agĩkũyũ spirituality. In other words, the hermeneutical approach will be used as a praxis approach to pastoral care and counselling to probe meanings and the normative framework of human actions as well as the interplay between the Christian spirituality and the Agĩkũyũ spirituality. In his book, *"Pastoral Care and Hermeneutics",* Capps (1993) calls for a pastoral hermeneutical model which, can help pastoral care givers to interpret pastoral actions contextually. For Capps (1993:40), the most important aspect of a pastoral hermeneutics model is the way it helps us to understand and interpret pastoral action within a given context and its link to the conceptual schemata. This is important especially when interpreting and probing the cognitive and the worldview of the PLWHA.

Since a person's worldview is influenced by either the religious, cultural, social, political or economic context, then it plays a decisive role in the healthy functioning of mature faith. For instance, the perception of "God- image" that one takes may play a decisive role in his or her spiritual healing or it may create an illness (Louw 2008:95). This hermeneutical approach is important to this study especially when attempting a pastoral diagnosis and spiritual assessment of the PLWHA and their families. In other words, a pastoral hermeneutics will be employed in this study in order to understand the pastoral actions in terms of the challenges posed by the HIV and AIDS pandemic in the Kenyan context.

On the other hand, the approach helps one to understand the pastoral actions in the context of Christian spirituality and African spirituality. In this case, the hermeneutical approach will be used to evaluate and interpret the meaning of the Christian spirituality within Agĩkũyũ spirituality as well as to explore the mutual influence and exchange between the two. For

instance, various *Ũtugi* components will be examined in an attempt to see those which can be assimilated and accommodated in the Anglican ecclesiology. In addition, those elements of *Ũtugi* which need to be transformed or discarded so as to complement the Christian hospitality in the fight against the HIV and AIDs pandemic will be probed.

Moreover, the paradox, that is, the tension between exclusiveness and inclusiveness and the continuities and discontinuities between *Ũtugi* paradigm and the Christian hospitality, will be examined. This is in line with Villa-Vicencio's (1994:122) contention that the requirement for such a dynamic hermenuetical approach is "a risky, critical openness, without losing the tension between continuity and discontinuity, as well as the identity of the ultimate (the eschatological truth of the Christian faith) within and through the particular we encounter in culture."

1.9. Scope and limitations

The study has begun by indicating the general scope to be covered. It has also indicated its interdisciplinary nature, linking the fields of pastoral care with history, sociology, anthropology, philosophy, development theories, psychology, ethics and theological studies on the HIV and AIDS, the concepts of *Ũtugi* in Agĩkũyũ and the ecclesiological praxis of the Anglican Church. As such, the study calls for some necessary delimitation as the field of investigation would be, otherwise, so wide as to be unmanageable in a thesis of this nature. The delimitation covers several areas. The first is dictated by the topic of discussion. The study focuses on the Anglican Church of Kenya but, at times, reference is made to the wider church such as the WCC or the Worldwide Anglican Church (as a broader context of the Anglican Church of Kenya). Although the topic seeks to create a dialogue between *Ũtugi* in the Agĩkũyũ, on one hand, and the Christian understanding of hospitality as well as the Anglican ecclesiology and pastoral care and counselling, on the other hand, it endeavours to restrict itself to the *Ũtugi* paradigm within Agĩkũyũ and its contribution in the fight against the HIV and AIDS pandemic in the Anglican Church of Kenya. However, the *Harambee*, solidarity, embrace, communal living which are some of the elements of *Ũtugi* is seen in this thesis as that which can be embraced by the whole Anglican Church of Kenya. This shows how *Ũtugi* transcends the Anglican Church within the Agĩkũyũ area hence showing its relevance in other Kenyan communities.

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In cases which historical events such as the history of Agĩkũyũ, history of the Anglican Church of Kenya, or the genesis of the HIV and AIDS pandemic in Kenya are cited, they will be carried out on the strict condition that they contribute to the topic of research. It needs to be acknowledged that it is impossible to exhaust the various aspects of *Ũtugi* and while this study will provide examples from various dioceses which cover Agĩkũyũland (Nyandarua, Nyeri, Kirinyaga, Murang'a, Kiambu, Nakuru and Laikipia Counties of Kenya) nevertheless, most of the projects mentioned are from the Anglican Diocese of Kirinyaga. The reason for choosing Kirinyaga Anglican Diocese is because I am familiar with the region, having worked there for many years both as a clergyman and as a member of the standing committee of the synod, which is the governing body of the church.

Secondly, the area of study is a limiting factor, that is, it is limited by the research problem, which strictly deals with the question of how the concept of *Ũtugi* in Agĩkũyũ can be used to reframe the prevailing ecclesiological paradigms applied by the Kenyan Anglican Church to enable it to be relevant and contextual in its endeavour to respond to the challenges posed by the HIV and AIDS pandemic. This means that the arguments which are borrowed from various disciplines are geared towards helping us to assess this proposal for a revision (contextualisation) of the ecclesiological praxis of the Anglican Church of Kenya in the articulation of pastoral theology in the context of the HIV and AIDS pandemic. Thirdly, the study is limited by the quest for the theory behind "*Ũtugi,* within the context of the HIV and AIDS" and the lessons that the pastoral care and counselling can draw from it to respond to the HIV and AIDS pandemic. It will discuss the Christian hospitality (church resources) only in one chapter for the study is focused on *Ũtugi* (traditional resources) and its role in fighting the HIV and AIDS pademic in the Anglican Church of Kenya.

1.10. Definition of terms

The following terms need clarification:

(i) Archdeaconry

An archdeaconry is a combination of more than one deanery which is headed by a priest referred to as an Archdeacon.

(ii) Agĩkũyũ:

Agĩkũyũ is the community name of the largest Bantu speaking people in Kenya. The name of their language is also known as Kikũyũ or Gĩkũyũ. Their homeland is mainly in Nyandarua, Nyeri, Kirinyaga, Murang'a, Kiambu, Nakuru and Laikipia Counties. For in the purpose of

this study, we will refer to the community as the Agĩkũyũ. This is because the terms Kikũyũ, Agĩkũyũ or Gĩkũyũ all means the same thing. Due to the phonological problem experienced by the early Western writers in pronouncing the word, most books spell the name as Kikuyu, Kikũyũ, Gikũyũ or Gekuyu, to make it sound English. Therefore, in this study the name Agĩkũyũ will be used to refer to the community for this is, indeed, how it should be spelled and pronounced.

(iii) Anglican

The term refers to the denominational name of the Anglican Church of England and all the churches connected with it or churches in communion with the Church of England. In this study, the term will be used to describe a congregation or a member of the Anglican Church of Kenya that acknowledges or upholds the faith and orders of the church ministry that are common to all churches connected to the Church of England.

(iv) Catechist

The term refers to a religious teacher or instructor, particularly the one who uses questions and answers to instruct Christian converts about Christian principles. The Catechist prepares Christian converts or catechumens (*Gategithimo*) for baptism and confirmation. In this study, the term will be used to describe a full-time lay church worker who prepares Christians converts for baptism and confirmation, but who also reaches out to the unchurched and visits Christians in the area where he or she is working.

(v) Church Missionary Society (CMS)

This missionary society was originally called the Society for Missions in Africa and the East. It was founded in 1799 and it became the first Church of England society to send missionaries to Africa and Asia. In Central Kenya, the society maintained the Evangelical persuasion of the *Low Anglican Church* segment of the Church of England as opposed to the *High Anglican Church or Anglo-Catholics* (Anglican Church which is still attached to the Roman Catholic Church).

(vi) Deacon

A Deacon in the Anglican Church is a person who assists in the *diakonia* (service) of the Church. In real sense, it is a stage or grade through which an Anglican clergy passes for a brief period before being ordained as priest. Those who complete their seminary training are first made deacons of the Church by bishops before they are ordained to priesthood.

(vii) Deanery

A deanery is formed by many parishes and it is under the jurisdiction of a priest referred to as a Rural dean or Urban dean.

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(viii) Diocese

The diocese represents the extent of a bishop's jurisdiction or the geographical area or district in which a bishop has ecclesiastical authority.

(ix) Evangelist

The term is translated as a preacher of the gospel or a person who takes the gospel to a city or region. In this study, the term evangelist will be used to describe a full time lay worker whose job is to reach out to the unchurched, whom he or she instructs in the Christian faith, and prepare them for baptism and confirmation. Thus, the terms evangelist and catechist may be used interchangeably to describe one and the same lay church worker.

(x) Parish

The parish is an area that has its own church under a clergy. In this study, the term will be used to describe an ecclesiastical unit of area committed to one pastor. The area could include either one congregation or a number of churches under the care of one clergy.

(xi) Pastoral care giver

This is generally referred to a pastor who offers pastoral care and counselling but, in this study, it includes both clergy and members of the congregation who engage in pastoral care and counselling particularly to PLWHA and their families.

(xii) Priest

In the Anglican Church, a priest is a clergy ordained by the bishop after serving as a deacon. The priest is an administrator of a parish and he/she engages in sacramental duties as well as in pastoral work within the parish.

(xiii) Province

This is a federation of all Anglican Dioceses in Kenya, which are autonomous under the leadership of the Archbishop of the ACK, and it maintains full spiritual kinship and doctrinal identity with the other provinces of the Anglican Communion.

(xiv) Vicar

In the broadest sense, *a vicar* from a Latin word *vicarius* means a representative. It is a title ordinary given to certain parish priests and the term means the office of a pastor. Historically, the Anglican parish clergy were divided into rectors, vicars, curates and sometimes *perpetual curates*. In this study, it will mean the clergy in charge of a parish.

(xv) Praxis

The word praxis comes from the Greek word *prasso* which means 'to work.' It involves a revolutionary action on behalf of the poor and the oppressed – and out of this, theological perceptions (liberationists believe) continually emerge. In other words, praxis refers to the

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discovery and formation of theological "truth" out of a given historical situation through personal participation in the struggle for the liberation of the oppressed. Gutiérrez defines praxis as "a transforming activity marked and illuminated by Christian love" (McGovern 1989:32). Thus, praxis does not simply mean activism; for it connotes a transforming activity guided by theory and goals. This motivating force, therefore, according to Gutiérrez, is Christian love. In what follows, the outline of the study is presented.

1.11. Structure of the dissertation

This study is divided into seven chapters:

(i) Chapter one provided the general background and overview of the key aspects of this study. The aims, the motivation and the rationale for pursuing the study were presented. In addition, the research question, research hypothesis, methodology and objectives were also highlighted.

(ii) Chapter two will explore the HIV and AIDS scenario in Kenya. The chapter will investigate the historical background of HIV and AIDS, the HIV and AIDS prevalence, the factors influencing the spread, and the challenge facing the Anglican Church of Kenya. Precedence will be given to recent studies and to those that have direct bearing on the present area of study.

(iii) Chapter three will investigate the concept of *Ũtugi* in the Agĩkũyũ community. The origin, definition and the nature of *Ũtugi* will be scrutinised while the chapter will further discuss *Ũtugi* in the Agĩkũyũ ancient time (the pre-colonial period) and in the colonial and post-colonial periods in Kenya. It will also examine the characteristics, distinctiveness, symbols, forms and expressions of *Ũtugi* in the Agĩkũyũ community. Additionally, the chapter will explore the role and the challenge of *Ũtugi* in a post-modern Kenyan context from socio-economic, political, cultural and religious perspectives.

(iv) Chapter four will provide a theological reflection of *Ũtugi* and the Christian understanding of hospitality. It will examine the roots, the origin and the characteristic of the Christian hospitality. The chapterwill further examine the role played by Christian hospitality in various centuries. In this respect, the continuity and discontinuity between *Ũtugi* and Christian hospitality will be addressed as well as the fundamental components of Christian hospitality such as *koinonia*, the body of Christ, solidarity and *shalom.* Subsequently, the chapter will attempt to assess the appropriateness of *Ũtugi* (local resource) as a tool for complementing Christian hospitality (church resource) in fighting the HIV and AIDS pandemic.

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(v) **Chapter five** will deal with the ecclesial praxis of the Kenyan Anglican Church. It will critically discuss the ecclesial praxis of the Anglican Church of Kenya and show how the church can shift from an ecclesiological paradigm of exclusiveness to the *Ũtugi* paradigm that embraces inclusiveness. The chapter will focus on an inclusive and communal model of pastoral care and counselling for PLWHA and is sensitive to the critiques of the interculturation paradigms, thus, helping us to reassess the research problem. The chapter will discuss how the Anglican Church can create a safer space for the PLWHA and their families and also proposes some hospitable paradigms and sustainable strategies that the Anglican Church of Kenya can utilise to mitigate the HIV and AIDS pandemic.

(vi) **Chapter six** will attempt to formulate a praxis theory for pastoral care and counselling to PLWHA and their families based on the basic elements of *Ũtugi*. Drawing from Daniel Louw's existential model for spiritual healing, the chapter will assess the appropriateness of *Ũtugi* as a model for pastoral care and counselling for PLWHA and their families. The chapter will also investigate the capacity of *Ũtugi* as a pastoral care tool to deal with the existential threat of anxiety, guilt and shame, disillusionment and anger, despair and doubt as well as the helplessness and vulnerability facing PLWHA and their families. Finally, the chapter will provide a pastoral strategy and examine the potential of *Ũtugi* to provide a healing space and support system needed by PLWHA and their families.

(vii) **Chapter seven will** serve as a conclusion to the whole study and will revisit the findings in a nutshell. It will make recommendations and suggestions for the Anglican Church of Kenya to consider when engaging in pastoral care and counselling to PLWHA and their families.

1.12. Conclusion

Having considered the research background, rationale and motivation, statement of the problem, hypothesis, scopes and the limitations of the research as well as research objectives, theoretical framework, research methodology and the chapter outline, the present chapter has set the background for exploring the concept of *Ũtugi* in respect of the HIV and AIDS pandemic in Kenya and for conducting a pastoral assessment of the ecclesial praxis. Therefore, the next chapter will investigate the HIV and AIDS context in Kenya.

CHAPTER TWO
THE HIV AND AIDS CONTEXT IN KENYA

2.1. Introduction

The task of this chapter is to investigate the HIV and AIDS scenario in Kenya. The understanding will enable us to grasp how to reframe the pastoral care and counselling from the perspective of *Ũtugi*. The chapter will attempt to answer certain questions, such as how HIV and AIDS have affected the socio-economic, spiritual and psychological life of Kenyans? What factors has influenced the spread of the HIV pandemic. Who are the most affected persons and why are they affected? In other words, the understanding of HIV and AIDS in the Kenyan context will enable us to evaluate, critically, the relevance of *Ũtugi* as a model for pastoral care and counselling for PLWHA and their families within the Anglican Church of Kenya. It is, therefore, vital to explore and scrutinise the four main fields of study namely the historical background of HIV and AIDS in Kenya, the HIV and AIDS prevalence, the factors influencing its spread, and the HIV and AIDS as a challenge to the Kenyan Anglican Church. Precedence will be given to recent works and those that have direct bearing on the four areas of study.

2.2. An overview of the HIV and AIDS scenario in Africa

The challenges facing Africa is well stipulated in most of the literature on post-colonial Africa (Young 1982:1; cf. Fattson 1992:50; Harbeson and Rothchild 1994:101; Zartman 1995:4 and Joseph 1999:25). It is astonishing to note that almost immediately after the decade of independence, the 1960s, the short rupture of enthusiasm was replaced by a long, almost unlimited, period of despair and suffering. It is evident that, by 1970, many countries in Africa were experiencing military coups, civil wars, repressive regimes, refugee flows,[21] or were suffering from economic stagnation (Zartman 1995:4).

Ironically, the attainment of political independence from colonialist turned into a false start for the rebirth of the African continent. Although the continent retained international authenticity and its juridical status in legal, normative terms, there was no doubt that in reality it was struggling to sustain itself. It is amazing that many African states did not disintegrate in total, like Somalia, given the extremity of internal illegitimacy. By the late 1980s when the Cold War was coming to an end, the Key Cold War protagonists removed a

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[21] Although in the 1970s Kenya escaped a military coups and civil war many refugees flowed into the country from the neighbouring countries hence, stagnating her economy.

huge barrier to political transformation on the continent, hence, giving a new hope to Africa (Joseph 1999:2). Sadly, almost overnight when many African regimes were losing their automatic, clientelist relationships with Cold War protagonists and many Africans countries were starting to celebrate the coming of new liberated Africa, [22] the HIV and AIDS pandemic emerged. In fact, the HI virus only joined other viruses such as poverty, negative globalization, debt, Structural Adjustment Programmes (SAPs), tribalism and ethnic wars, thereby, grounding Africa in enormous problems. However, in the midst of all these calamities, the HIV pandemic seems to be the only catastrophe that is working rapidly against the dilapidated socio-economic and political structures while, at the same time, it continues to kill many people.

The above scenario has caused the majority of the people in Africa much physical, psychological and spiritual suffering. This forces one to wonder: How is it that nearly 7,400 new HIV infections occur every day in Africa through heterosexual transmission by persons who are largely unaware of their HIV status? (cf. UNAIDS 2008:1). Why is it that sixty percent of new infections occur in women and over a thousand per day in persons younger than 15 years (cf. UNAIDS 2008:1-2)? Again, how is it that almost four million people a year are dying from HIV and AIDS when there is now an affordable antiretroviral (ARV) drugs to save lives? How come the greatest global health pandemic of our times is not on the care agenda of most of our church denominations? Why is it that so few people in the church and seminaries discuss the impact of a disease that is devastating families, unravelling the social fabric of societies and leaving over 15 million children orphaned worldwide? The UNAIDS and WHO affirm that the HIV and AIDS pandemic is the factor causing the single largest decline in human development in history:

> Ninety-five percent of those living and dying with HIV and AIDS are in the developing world, where poverty is rampant, health care is poor and there are limited resources for both prevention and treatment. Though sub-Saharan Africa has only 10% of the world's population, 63% of those living with HIV and AIDS are in sub-Saharan Africa; in 2006, 72% of global AIDS deaths, 2.1 million people, died in the region from AIDS (UNAIDS and WHO 2006:14).

As early as 2004, Colin Powell had noted that no war on the face of the world is more destructive than the HIV and AIDS pandemic (cited by Messer 2004:2). Powell seems to be

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[22] This demonstrates the erosion of international legitimacy and it also shows how Africa was unable to control her political realm without external military, diplomatic, political and economic support. This vulnerability is more visible in the DRC, Somali, Ethiopia and Liberia. The long-suppressed demands exploded when political movements were coached by the West to talk the language of reform and, as a result, many political parties in Africa started calling for the democratization of their countries (Joseph 1999:25).

right considering that even if HIV and AIDS are seen as a global pandemic, there is an overwhelming negative effect on Africa more than any other continent in the world. For instance, the global statistics of the HIV and AIDS, which were published by UNAIDS on November 2009 and, which refer to the end of 2008, indicate that more than 25 million people have died of AIDS since 1981 and Africa has over 14 million AIDS orphans now. This report also shows that at the end of 2008, women accounted for 50% of all adults living with HIV worldwide and in developing and transitional countries, 9.5 million people are in immediate need of ARV drugs. Of these, only 4 million (42%) are receiving the drugs (UNAIDS 2009:3). The table below indicates how each of the above group was affected by HIV and AIDS globally in the year 2008.

Table 2.2.1:   Global statistics on HIV and AIDS in the year 2008 (UNAIDS 2009)

Year 2008	Estimate	Range
PLWHA	33.4 million	31.1-35.8 million
Adults (PLWHA)	31.3 million	29.2-33.7 million
Women (PLWHA)	15.7 million	14.2-17.2 million
Children (PLWHA)	2.1 million	1.2-2.9 million
People with new HIV infection	2.7 million	2.4-3.0 million
Children with new HIV infection	0.43million	0.24-0.61 million
AIDS related death	2.0 million	1.7-2.4 million
Children who died of AIDS	0.28 million	0.15-0.41 million

According to UNAIDS (2009:4), the number of PLWHA in 2008 increased to 33.4 million, the adults living with HIV and AIDS reached 31.3 million, the women living with HIV and AIDS reached 15.7 million, children living with HIV and AIDS was 2.1 million, new infections increased to 2.7 million, new infection of children increased to 0.48 million, while the AIDS related death was 2.0 million. UNAIDS (2009:4) reports that the children who died of AIDS related diseases were 0.28 million but prior to that 2009 report, UNAIDS (2004:1-2) had noted that, globally, the HIV and AIDS pandemic was affecting many people and the most affected region in the world is Africa South of Equatorial Forest. [23] According to UNAIDS's 2006 data, an estimated 2.1 million adults and children had died as a result of HIV pandemic in Africa South of Equatorial Forest. For the year 2007, the UNAIDS's statistics estimated that 22.5 million people in the same region were living with the HI virus while an approximated 1.7 people were infected at the end of that year (UNAIDS 2007:2). In the same year, about 1.4 million Africans were reported dead as a

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[23] Africa South of Equatorial Forest is the name used for what used to be negatively named as Africa Sub-Sahara (the term which was intended to show the negativity of Africa; in a reconstruction model, this study will be using a positive approach).

result of AIDS related diseases, and 14.1 million children lost either one or both parents to the pandemic.

Considering the above scenario, it can be said that the HIV and AIDS pandemic in Africa is not only a pastoral problem, but it is also a socio-economic and political problem. Hunter's (2002:22) research reveals that the countries with the HIV pandemic mostly face economic decline of up to 20% of their gross national product while families disintegrate and break under the burden of caring for PLWHA and AIDS orphans. What can be learnt from Hunter's research is that when the percentage of a country's population afflicted with HIV and AIDS reaches 10% to 30% as in many countries in Africa South of Equatorial Forest, a distinct process evolves (cf. Hunter 2002:22). This includes increase in poverty, heightened food insecurity, collapse of social and economic systems and increase in HIV and AIDS related deaths.

As a way of searching for meaning and coming to terms with these deaths, many African countries have resorted to the denial of the pandemic and have attempted to come up with theories that explain the origin of the HI virus. These theories tend to shape and inform many people in Africa and include theories which range from the bizarre to more perplexing ones such as theories of witchcraft and sorcery.

For instance, some African communities believe that sorcery and witchcraft should be blamed for the origin of HI virus.[24] In their understanding, the HI virus was sent by some powers to cause AIDS. Consequently, they regard the HIV and AIDS pandemic as a witchcraft pandemic. The implications of this interpretation of the source of the HIV and AIDS pandemic as an infection caused by witchcraft are rather grave. When suspicions of witchcraft are at play in the community, the problem of illness and death through the HIV pandemic is regarded not as a matter of public health but as one that leads to the identification and punishment of persons deemed to be responsible for bringing misfortune to the community, that is, the witches. In this regard, Bodibe (1992a:91; 1992b:149) observes

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[24] Alexander Rodlach (2005:2) argues that the origin of AIDS is sometimes attributed to "clever" (meaning 'selfish') Western researchers and their Zimbabwean colleagues whose experiments on HIV in primates went awry and infected the human population. Rodlach suggests that this local disgust of biomedical research originates in strong taboos against transgressions of primate-human boundaries, the researchers' failure to adhere to other local knowledge and traditions, and the suspect intentions of anyone who is personally enriched by biomedical research. Clearly, this is a fertile ground for the emergence of a conspiracy theory that holds biomedical research responsible for the spread of HIV. Rodlach then situates these seemingly irrational beliefs in the context of colonial medical practices during the Spanish Influenza Epidemic of 1918–1919, which witnessed rampant androgenic morbidity and mortality. This serves to demonstrate how irrational thinking can be can be turned into a logical interpretation of the origin of HIV and AIDS against historical context.

that many Africans view diseases as a human-made phenomenon through the agent of a spirit, or it may be the result of a visitation from the ancestral spirit as punishment for failure to fulfil certain obligatory customary rites due to the deceased.

Accordingly, Buhrmann (1984:5) traces the origins and development of the theory of witchcraft in the African worldview and notes that some Africans believe that diseases strike when ancestors have withdrawn their protection. According to Adam Ashforth:

> The witchcraft paradigm as a framework within which suffering can be comprehended is inherently political in the sense that it constitutes a way of understanding one's place in the world that is replete with struggle against agents of evil manipulating extraordinary powers who are also and at the same time ordinary members of the community. Protection from evil requires intercession with forces and entities capable of resisting the agencies of evil. Before the coming of Christian missionaries, indigenous cosmologies in this part of the world, by all accounts, used not to posit a centralised force of evil, such as the figure of the devil… rather, the main threats to human life came from other humans (using sorcery or inherent destructive capacities) or ancestral spirits and the primary source of protection was found in the ancestors of families, clans, and nations (2001:6).

Many communities in Africa South of Equatorial forest especially those rooted in the ancient traditional beliefs try to find out the true cause of an illness through the framework of the witchcraft paradigm. They struggle to ascertain whom, and not what, causes the illness. This is because they believe that sickness is meant to alert a person to the error of his or her ways and to urge him or her to make amends and restore broken contact with ancestors.[25] Of course, this understanding differs from the Western view of sickness, which works with germ theory, rather than with the view that diseases are caused by human agency:[26]

> Another theory which is promoted by some African scientists seems to be based on the extra-terrestrial theory. This theory was borrowed from the theory of extraterrestrial origin by Sir Fred Hoyle the astrophysicist. Hoyle and his colleague, C. Wicramasinghe, propose that the HIV and AIDS pandemic was sparked off by the biological matter which exists in the upper atmosphere and is pulled to ground level by the patterns of global atmospheric circulation (Shannon 1991:34).

According to Adam (1989:165), the extra-terrestrial theory is based on the premise that comets carry additional particles, which periodically augment the viral particles in the upper atmosphere; and with the vast biological cloud, the human race was rained on resulting in the virus, which then infected the people. For Adam (1989:165), this is in line with the theory of seasonal epidemics of influenza and it is relatively easy to apply it to the HI virus.

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[25] Reverence for ancestors is common among the Agĩkũyũ and it is widespread across the whole continent and in nearly all traditional African communities. Mbiti (1969:50) affirms that ancestor veneration has been practised by all the communities in East Africa.
[26] This debate will be further explained in Chapter Three and revisited in Chapter Six when dealing with healing paradigms in the African setting.

Another theory that surfaced is the conspiracy theory. This view is supported by some scientists and some politicians who claim that the virus was artificially created, either deliberately as a biological warfare weapon by the "doctors of death" at Fort Dietrich, Maryland, USA or accidentally by molecular biologists in a recombinant research laboratory of some sort in the USSR or Eastern Europe (Shannon 1991:34). Ironically, Wangari Maathai, a biology professor, a former Member of Parliament (MP) in Kenya and the first woman in Africa to win the Nobel Peace Prize, affirms that the HI virus was a deliberately created biological agent. She was reported as saying:

> Some say that AIDS came from the monkeys, and I doubt that because we have been living with monkeys (since) time immemorial, others say it was a curse from God, but I say it cannot be that. As black people we are dying more than any other people in this planet. It's true that there are some people who create agents to wipe out other people. If there were no such people, we could have not have invaded Iraq. We invaded Iraq because we believed that Saddam Hussein had made, or was in the process of creating agents of biological warfare. In fact it is the (HIV) virus which is created by the scientist for biological warfare… Why has there been so much secrecy about AIDS? When you ask where the virus came from, it raises a lot of flags. That makes me suspicious… Africa accounts for 25 million out of the estimated 38 million across the world infected with HIV, and the vast majority of infected Africans are women (Daily Nation, 9th October 2004:4).

Maathai's view agrees with President Thabo Mbeki of South Africa who claims that the HI virus was invented as a bio-weapon in some laboratory in the West. Mbeki argues rhetorically thus:

> Does it happen that others who consider themselves our leaders take to the streets carrying their placards, to demand that because we are germ carriers, and human beings of lower order that cannot subject its passions to reason, we must perforce adopt strange opinions, to save a deprave and diseased people from perishing from self-inflicted disease... we are natural-born, promiscuous carriers of germs, unique in the world, they proclaim that our continent is doomed to an inevitable mortal end because of our inconquerable devotion to the sin of lust (Mail and Guardian, 26th October 2001:2).

Before he was ousted from office, Mbeki was the president of one of the most economically stable countries in Africa and his statement on 25th September 2003 at a United Nations (UN) meeting in New York shocked the world. He claimed that he had never known "anybody with HIV and AIDS, or anybody who has ever died of the disease" (cited in Washington Post 2003:4).[27] This is weird and can be termed as ignorance of the highest degree. Again, when addressing the students of the University of Fort Hare on 12th October 2001, Mbeki questioned the very foundation of science and the global strategy for the prevention and

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[27] See also Mbeki comments at BBC on http://news.bbc.co.uk/2/hi/africa/3143850.stm- 8th December 2010.

treatment of HIV and AIDS (Ramphele 2008:232). His dismissal of the issue with claims that the "HI virus is not the one that causes AIDS" was disastrous and regrettable because his audience were young university students who fall within the susceptible group to the HI virus, that is, ages 15 to 35 years.[28]

Of course, the above position placed Mbeki in an uncomfortable position, similar to that of President George Bush after his infamous denial of global climate change during the early days of his presidency. In fact, the Maathais, Mbekis or Bushes of our time are just examples of the political leaders who take things for granted and assume roles that are beyond their levels of competence. Actually, this has become more problematic in Africa where poorly educated citizens are vulnerable and would believe whatever political leaders say.

In view of the above, Elias K. Bongmba (2007:33) asserts that although Mbeki has contributed significantly to the revival of Africa by championing the African Renaissance and the New Partnership for African Development (NEPAD), he has clearly missed the renaissance on the HIV and AIDS pandemic. Therefore, when we consider the above theories and their argument, one would automatically notice that the proponents of the conspiracy theory believe that the West is to blame for creating the HI virus to finish Africans who they perceive as germ-carriers, promiscuous and prone to self-destruction. This, in our opinion, appears irrational and an emotional response since such claims cannot be authenticated or proven scientifically. Could this instance then be a denial of the reality of HIV pandemic in the African context?

Another theory is that of the African Green monkey and the SI virus. Some researchers argue that HIV developed from the African Green monkey and infected those who ate the monkey's meat.[29] Simian immunodeficiency virus (SIV), which is similar to HIV-2, is said to infect

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[28] The statement compelled some religious leaders including the (then) Archbishop Ndungane of Cape Town to protest against such statements and they joined the TAC to demand treatment for those living with HIV and AIDS.

[29] In 2006, the British Broadcasting Corporation (BBC) reported that a virus called SIVcpz (Simian Immunodeficiency Virus from chimps) thought to be the source of HIV virus, was found in a few wild chimpanzees living in southern Cameroon. The team of scientists identified a natural reservoir of SIVcpz in animals living in the wild and thought that people hunting chimpanzees first contracted the virus and that cases were first seen in Kinshasa, in the Democratic Republic of Congo - the nearest urban area - in 1930. Scientists believe the rareness of cases and the fact that symptoms of AIDS differ significantly between individuals explain why it was another 50 years before the virus was named. This team of researchers, including experts from the universities of Nottingham, Montpellier and Alabama, have been working for a decade to identify the source of HIV. Laboratory tests detected SIVcpz specific antibodies and genetic information linked to the virus in up to 35% of chimpanzees in some groups. Chimpanzees in southeast Cameroon were found to have the viruses most similar to the form of HIV that has spread throughout the world. The researchers claim that, apart from solving the mystery about the origin of the virus, the findings open up avenues for future research. Paul Sharp, a professor of genetics at the University of Nottingham notes that, "It is likely that the jump between chimps and humans occurred in south-east Cameroon - and that virus then spread across the world" See http://www.avert.org/origin.htm/how/when- (3th July 2007).

some African monkeys but the monkeys do not get infected by AIDS. Because of this theory and the high incidence of infection of people in Central Africa, some people are of the opinion that HIV originated there and mutilated to become virulent for humans (Umeh 1997: xv-xvi). Tony Banett and Alan Whiteside (2002:36-37) argue that the HIV-2 originated from *Macaque* monkey in West Africa while HIV-1 originated from chimpanzees in Central Africa; both viruses spread from these animals to human beings.

Further, they hypothesised that the virus entered the human body through bush meat (game). This happened when a hunter or some other person butchered the monkey and, in the process, a cut in his or her hand became contaminated with the monkey's blood. Others argue that the virus entered human beings through the contaminated vaccine or through contaminated needles in the poorly equipped clinics in rural Africa (Banett and Whiteside 2002:36-37). Again, they note that the virus could have entered human beings through ritual behaviour (Banett and Whiteside 2002:36-37). They suggest that the blood of the monkey that had the virus was used in rituals and as a result, the virus entered into human blood. However, there is no indication where and how this ritual took place. Similarly, some scientists doubt the Green monkey theory because SIV is closer to HIV-2 but the theory claims HIV-1 appeared first before HIV-2. Of course, this theory does not explain the origin of the original HIV-1 (cf. Hubley 1995:21).

The frozen blood theory is another theory which has been championed by J. Iliffe. Looking at some frozen blood, Iliffe (2006:2) argues that there is evidence that HIV and AIDS were in Africa as early as the 1950s. The theory also points to Central Africa and suggests that by 1959 the virus was in Leopoldville (now Kinshasa) the capital of the then Belgian Congo. About 672 frozen blood samples collected in the city by American researcher studying malaria were tested for the HIV and one was found to be positive. Other such studies in the region suggest that the HI virus was present in the Equatorial Central and in Western Africa in the 1950s although it was a rare disease (Iliffe 2006:3). However, the above theory has been refuted by doctors who have worked for many years in those regions as they argue that before 1980, they "never saw any diseases resembling the very obvious characteristics of HIV and AIDS" (Van Dyk 2008:6; cf. Murage 2007b:7).

In the light of the above theories, it becomes crucial to ask, what is the truth about this HI virus and where did it originate? Perhaps the short answer, at least in Africa, is that we do not

know; and the longer answer can only be hypothesised while allowing space for further discussion. For instance, globally, it is clearly known that the first case of HIV and AIDS was reported in the USA in the early 1980s.[30] In this case, some gay men in New York and San Francisco had suddenly developed rare opportunistic infections and cancers that seemed persistently resistant to the treatment given to them.[31] Since this was a new case in the world, it was unknown and the virus did not have a name. However, it was discovered that all the men suffered from a common syndrome and this led to the discovery of HI virus, the *Human Immunodeficiency Virus,* as it was later called (Van Dyk 2008:6). Therefore, while the origin of HIV continues to be a mystery, there is need for prevention of the HIV infection for it has remained a big challenge to the church in Africa, the government and the community. Furthermore, as we have seen above, up till now, there is no conclusive scientific evidence for locating the exact origin of the HI virus and some of the above theories appear to be too superficial to be accepted as truth.

In fact, the most important thing for the parties involved in the above debate is to acknowledge that the HIV and AIDS have affected and will continue to affect all aspects of the political, religious, social, spiritual and economic lives of the people. On the other hand, we need to appreciate the scientific information that has been accumulated in the last twenty five years which has shown how the HIV is transmitted and how it is spread through intercourse with an infected partner or through sharing of piercing and cutting objects that have been used by an infected person (Murage 2007b:7; cf. Igo 2006:14; Van Dyk 2008:34-48).

Certainly, this information is critical in the continued fight against the HIV and AIDS. Furthermore, science has also shown beyond reasonable doubt that the HI virus cannot be spread through social kissing, sharing the same ablutions, blankets or any other utensils that do not necessarily lacerate the body.[32] Again, HIV and AIDS are not that contagious but the virus has its own route, which it follows. Like all viruses, the HIV cannot grow or reproduce on its own and for it to make new copies of itself it must infect the cells of a living organism (Van Dyk 2008:10-11). Scientific knowledge has also revealed that the HI virus belongs to a special class of viruses known as retroviruses, and within this class, HIV is placed in the

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[30] http://www.avert.org/origin.htm/how/when- (3rd July 2007).
[31] http://www.avert.org/origin.htm/how/when -(3rd July 2007).
[32] HIV and AIDS cannot be spread through the air, coughing, sneezing, kissing, hugging, shaking hands, massage, sharing dishes and glasses or toilet seats, insect or animal bites, swimming pools, or eating food prepared by someone with HIV and AIDS, etc.

subgroup of lentiviruses (Igo 2006:14; cf. Van Dyk 2008:34-48). Other lentiviruses include SIV, FIV, Visna and CAEV, which cause diseases in monkeys, cats, sheep and goats. It is now known that the HI virus is around 100-150 billionth of a metre in diameter. In other words, the HI virus is about 0.1 microns, 4 millionth of an inch and one seventieth of the diameter of a human CD4 (white blood cell).[33]

Most important is the way the virus enters the human body; for it begins to multiply and fight off the white blood cells. When the HIV reduces the CD4 in the body to 200, it is said that one has the Acquired Immune Deficiency Syndrome (AIDS). It is during this time that one gets frequent and serious attacks of opportunistic diseases like Tuberculosis (TB) (Van Dyk 2008:61-64). Therefore, armed with this scientific knowledge, the church can now brace herself and come up with more effective responses to fight the pandemic. This is because the horrendous consequence of the HIV pandemic affects the entire fabric of human society and its basic institutions of marriage, family and church (i.e. the church as the family of God in Africa.

Moreover, in many African communities, everything that has to do with human life has religious and theological connotations. Therefore, because the HIV and AIDS pandemic, with all its implications, affect human life, the African looks at it from a religious or theological perspective. It is in such a context that the church in Africa is called to become an actor in responding to her mission of healing and caring for PLWHA and their families. We now turn to the HIV pandemic in Kenyan context.

2.3. HIV and AIDS in the Kenyan context

The HIV and AIDS pandemic in Kenya has had, and continues to have, a very damaging impact on the country's socio-economic and political development, both at the individual and at the aggregate level. The first indigenous HIV and AIDS case was discovered in Kenya in 1984 and by the end of that year, seven more cases were identified (Shisanya 1997:47). This implies that the HIV infection probably started to spread in Kenya in the late 1970s or early 1980s. However, Mati (1997:55) argues that because the HI virus found in Africa South of

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[33] There are two types of HI virus; the HIV-1 and the HIV-2. These viruses are transmitted by sexual contact through blood, and from mother to child; and they appear to cause clinically indistinguishable AIDS. However, it has been discovered that the HIV-2 is less easily transmitted, and the period between initial infection and illness is longer. The worldwide and predominant virus is HIV-1 which is found in many parts of Africa. The relatively uncommon HIV-2 type is concentrated in West Africa.

Equatorial Forest tends to move much faster than the virus found in West Africa and Europe, then the HI virus could have entered Kenya in the early 1980s and not 1970s.

Indeed, responses to the pandemic have evolved over time as people became aware of the new disease, as they experienced illness and death among family members, and as services have developed to confront the pandemic. However, many segments of society still express denial of the disease because, early in the pandemic, the political commitment by the government was limited and because of the stigma and discrimination associated with the disease (Murage 2007b:9). Furthermore, myths, misconceptions, superstitions and stereotypes still abound even though many people are struggling with the disease at a personal or community level.

Figure 1: HIV and AIDS prevalence in Kenya from 1990-2006 (UNAIDS 2009:3)
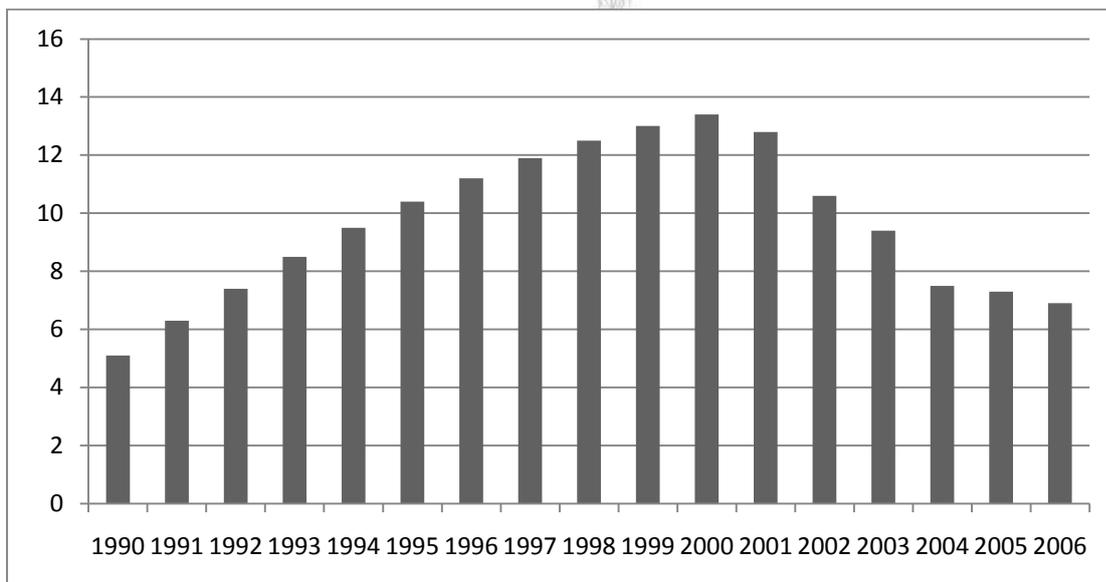
The figure above demonstrates the rise and fall of the HIV prevalence in Kenya. It is noted that, recently, some stabilising or decreasing trends of the HIV infection was registered in Kenya. This has raised society's hope since the HIV prevalence, which was 5.1% in 1990 and had reached its peak of 13.4% in 2000, fell to 7.5% in 2004 and 6.9% in 2006 (Daily Nation, 18th May 2007:1; cf. UNAIDS 2009:1). The World Health Organisation (WHO) revealed that in 2005 PLWHA in Kenya were 1.2 million, and in Africa, 25 million, while in the whole world, it was 37.8 million. The data released by UNAIDS 2009 showing the trends of the HIV and AIDs prevalence in Kenya from 1990 to 2006 indicates that the HIV pandemic increased from 1990 and it was at its peak in 2000 before it started falling between 2001 and 2006.

The UNAIDS (2009:4), found that by 1990, around 800 people in Kenya were estimated to have died everyday of AIDS related diseases and this can be translated to three deaths from the HIV and AIDS every five minutes. The data from the "*AIDS in Kenya profile*" confirms the above and indicates that at that time, 80-90% of infections were in the age-group 15- 49 and about 70% of the deaths that occurred were young adults between 25 and 35 years (Daily Nation, 18th May 2007). The study conducted on 2000 people revealed that the infections among schoolchildren in upper primary classes were 2% and up to 4.5% among children in secondary school.[34] It also indicated that in Kenyan secondary schools, 20% of students were infected the with HI virus, 16% of whom were girls and 4% boys. In addition, the prevalence among pregnant women attending antenatal clinics ranged between 6% and 17% in low prevalence areas.[35] This means that young women were more vulnerable to infection than men of the same age-group. During that year, it was also noted that the country was losing approximately US$3 million (Ksh 200 million) daily in form of reduced work productivity, absenteeism from work place, deaths and funeral expenses, as well as replacements and training of new personnel.[36]

What is clear is that even though the HIV and AIDS are preventable and manageable, they have turned into a pandemic and national disaster in Kenya because of ignorance, neglect and lack of political will.[37] In March 2003, President Mwai Kibaki declared "a total war" against the HIV and AIDS pandemic.[38] He mandated the National AIDS Control Council (NACC) to coordinate and manage the implementation of a multi-sectoral approach to the national HIV and AIDS programmes, provide policy direction, and mobilise resources. In late 2004, the Kenyan government instituted guidelines for HIV testing in clinical sites.[39]

This was an awakening from slumber because when the first case of HIV and AIDS was reported in Kenya, the government responded by denying that the infection was a problem to the nation. Little or no effort was made by the KANU[40] government to see that the HI virus did not spread.[41] By the time the Kenyan government realized that HIV and AIDS are real, many people were already greatly infected. Thus, when the government declared HIV and

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[34] http://www.standwithafrica.org/hivaids/reality1.php.htm (8th July, 2009).

[35] http://www.standwithafrica.org/hivaids/reality1.php.htm (8th July, 2009).

[36] http://www.standwithafrica.org/hivaids/reality1.php.htm (8th July, 2009).

[37] http://www.mpra.ub.uni-muenchen.de/952/ (8th July, 2009).

[38] AIDS in Kenya-http://www.cdc.gov/nchstp/od/gap/countries/Kenya.htm (4th April, 2010).

[39] AIDS in Kenya-http://www.cdc.gov/nchstp/od/gap/countries/Kenya.htm (4th April, 2010).

[40] This is Kenya African National Union party, which came to power in 1963 when Kenya got independence and stayed in power up to 2002 when it was ousted by the NARC (National Rainbow Coalition Party).

[41] AIDS in Kenya-*http://www.cdc.gov/nchstp/od/gap/countries/Kenya.htm* (4th April, 2010).

AIDS a national disaster in 1999, that is fifteen years after the first HIV and AIDS case was reported, more than half a million Kenyans were estimated to have died of the pandemic, and some 2.5 million adults were already infected with the HI virus.[42]

 In fact, other countries in Africa South of Equatorial Forest[43] had reacted to the pandemic more than a decade earlier, notably, Kenya's neighbour, Uganda, which had declared HIV and AIDS a national disaster in 1986.[44] It is unfortunate that President Daniel Arap Moi, who ruled Kenya with iron fist for 24 years, was in denial and his administration only started responding to the HIV pandemic few years before he retired in 2002. Moi's administration felt that talking about HIV and AIDS was unwarranted criticism of the KANU regime (Bongmba 2007:30). For this reason, little or no publicity was given to the HIV pandemic and the response of the Kenya government in the early years was "silence" (Bongmba 2007:30). However, in 2000, Moi was able to come out of his "denial-world" and he launched a HIV prevention programme in the country. By the time the plan started bearing fruit in 2002, Moi had retired and Kibaki was the president of the country.

It is obvious that, preserving the image of the country in the early stage of the HIV pandemic proved to be a very costly exercise for the KANU government. Moi's waking up from slumber, declaring HIV as a pandemic, and launching a prevention programme explain why the HIV prevalence which was high in 2000 started falling in the following years (2000-2006) as indicated in the *figure 1* above. However, the infection rate remained high; thus, calling for the need to continue focusing on the HIV and AIDS pandemic, particularly, from a multi-faceted, multi-disciplinary and multi-sectoral perspective (Kamaara 2008:71).

The *figure 2* below shows the HIV prevalence in what used to be provinces in Kenya. The *Kenya AIDS Indicator Survey* (KAIS) of 2009 reveals that in Kenya, the HIV and AIDS prevalence differed significantly in the rural areas of each province, ranging from 0.5% in the North Eastern Province to 14.9% in the Nyanza Province (as shown in the *figure 2*). Looking at these data, it is evident that the Nyanza Province of Kenya has the highest prevalence rate compared to other provinces *(see figure 2)*.

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[42] AIDS in Kenya-*http: //www.cdc.gov/nchstp/od/gap/countries/Kenya.htm* (4th April, 2010).
[43] In this study, Southern African Countries are referred to as African South of Equatorial Forest. This is because these countries are on the Southern part of the largest forest in Africa as opposed to Africa South of Sahara Desert (which many people use to emphasise the negative aspect of Africa).
[44] *http://www.standwithafrica.org/hivaids/reality1.php.htm* (8th July, 2009).

Figure 2: Number of HIV prevalence per province in 2009[45]
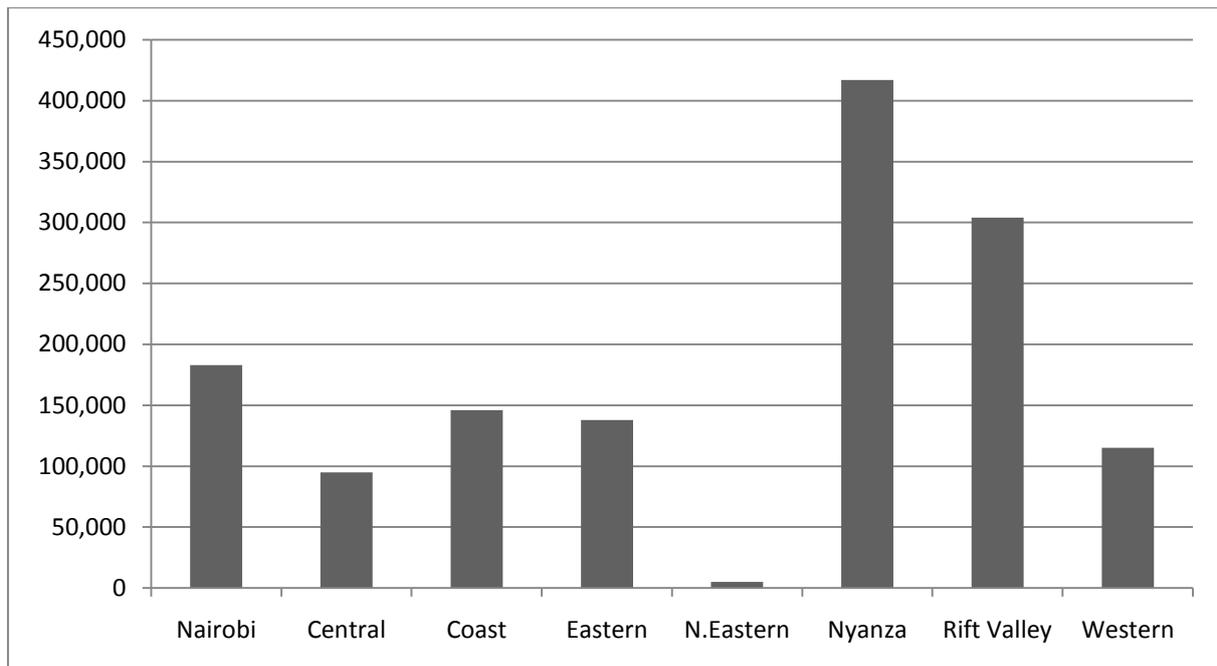
Furthermore, from the *figure 2* and from the Kenyan map (*figure 3*), which shows the position of each province, it is shocking to note that the estimated number of the HIV-infected persons in Nyanza and in Rift Valley provinces represent approximately half of all PLWHA living in Kenya. According to the report released on August 2007 by National AIDS Control Council (NACC), the HIV and AIDS prevalence rate in Kenya dropped from 5.9% in 2006 to 5.1% in August 2007 (Daily Nation, 14th August 2007:2).

KAIS (2009:35) shows that among adults aged 15-64 years residing in rural areas, 6.7% of them were infected with HIV compared to 8.4% of adults in urban areas. However, though the prevalence among rural residents was lower than among urban residents, the absolute number of HIV infections was greater in rural than urban areas, given that the vast majority of Kenyans reside in rural areas, that is, approximately three out of four persons in the country (KAIS 2009:35).

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[45] With the promulgation of the new constitution on 27th August 2010, the eight provinces of Kenya were abolished when the 47 Counties were created. For instance, the part which used to be Central Province now consists of Nyandarua, Nyeri, Kirinyaga, Murang'a, and Kiambu Counties.

Figure 3: The map of Kenya showing HIV and AIDS prevalence per province (Adopted from KAIS 2009:39)
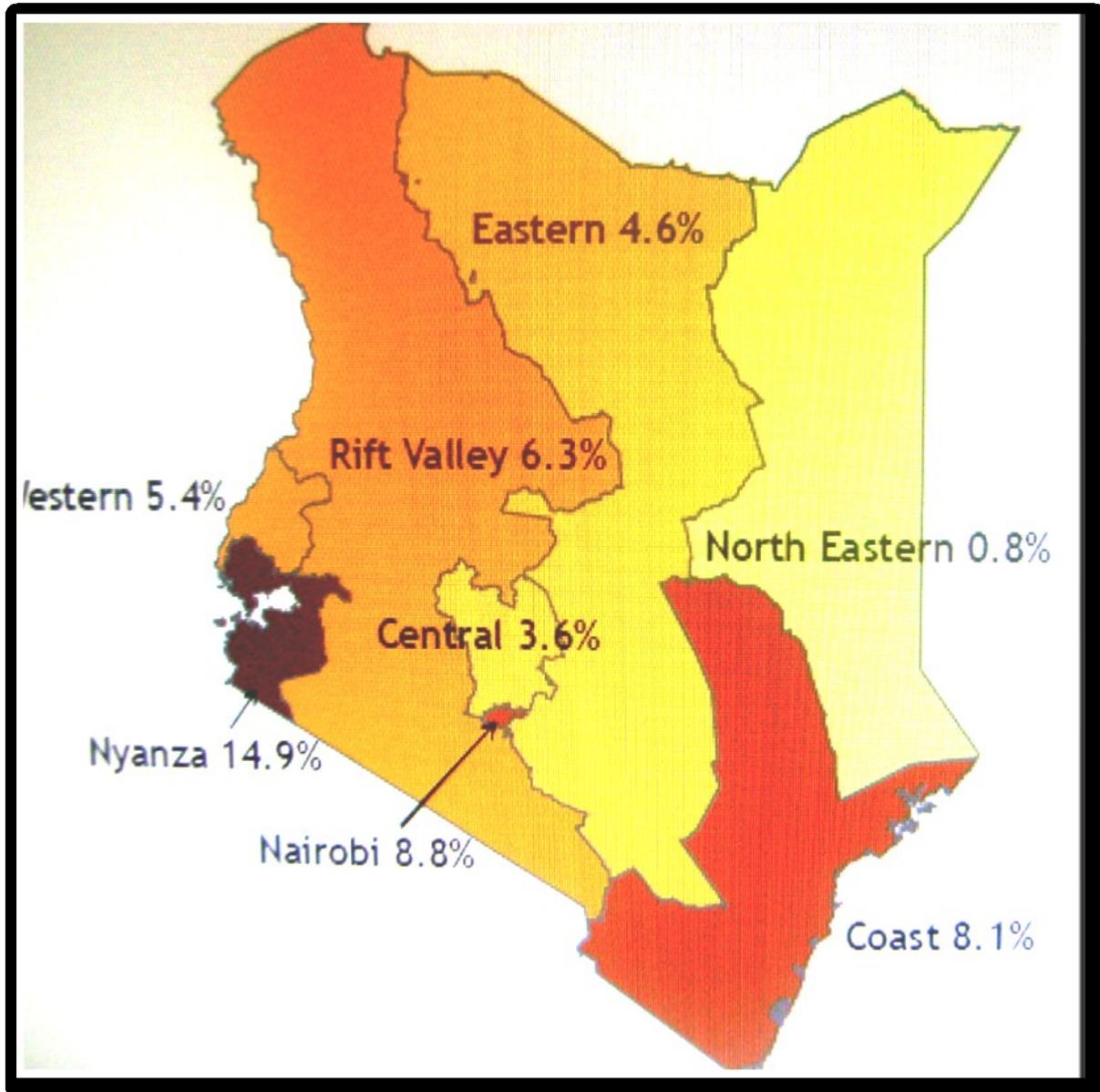
Therefore an estimated 1,027,000 adults in rural areas were infected with HIV, compared to 390,000 adults in urban areas in 2009. The *figures 4* and *5* below illustrate this. Indeed, the decrease of HIV prevalence recorded from 2002 to August 2007 was attributed to the successful multi-sectoral responses and the fact that the church and the government began to work together to fight HIV and AIDS. It has also been noted that the increase of condom use, voluntary counselling and testing services, antiretroviral therapy, [46] and increased co-

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[46] Since the identification of HIV and AIDS pandemic, a series of drugs has been developed that significantly prolongs the lives of those who are HIV positive. These ARVS drugs can block the replication of the virus and delay the onset of AIDS by slowing down the progression of the disease. However, these drugs do not provide a cure. The most effective treatment is known as Highly Active Antiretroviral Therapy (HAART). The Kenyan government started giving this free therapy in 2006.

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ordination among stakeholders have contributed to the reduction in HIV prevalence (NACC 2007:2).

Figure 4: Rural and Urban HIV and AIDS prevalence in 2009

Rural: HIV prevalence 2009

- HIV infection 6.7
- Not infected   93.3

Urban: HIV prevalence 2009

- HIV prevalence 8.4
- Not infected 91.8
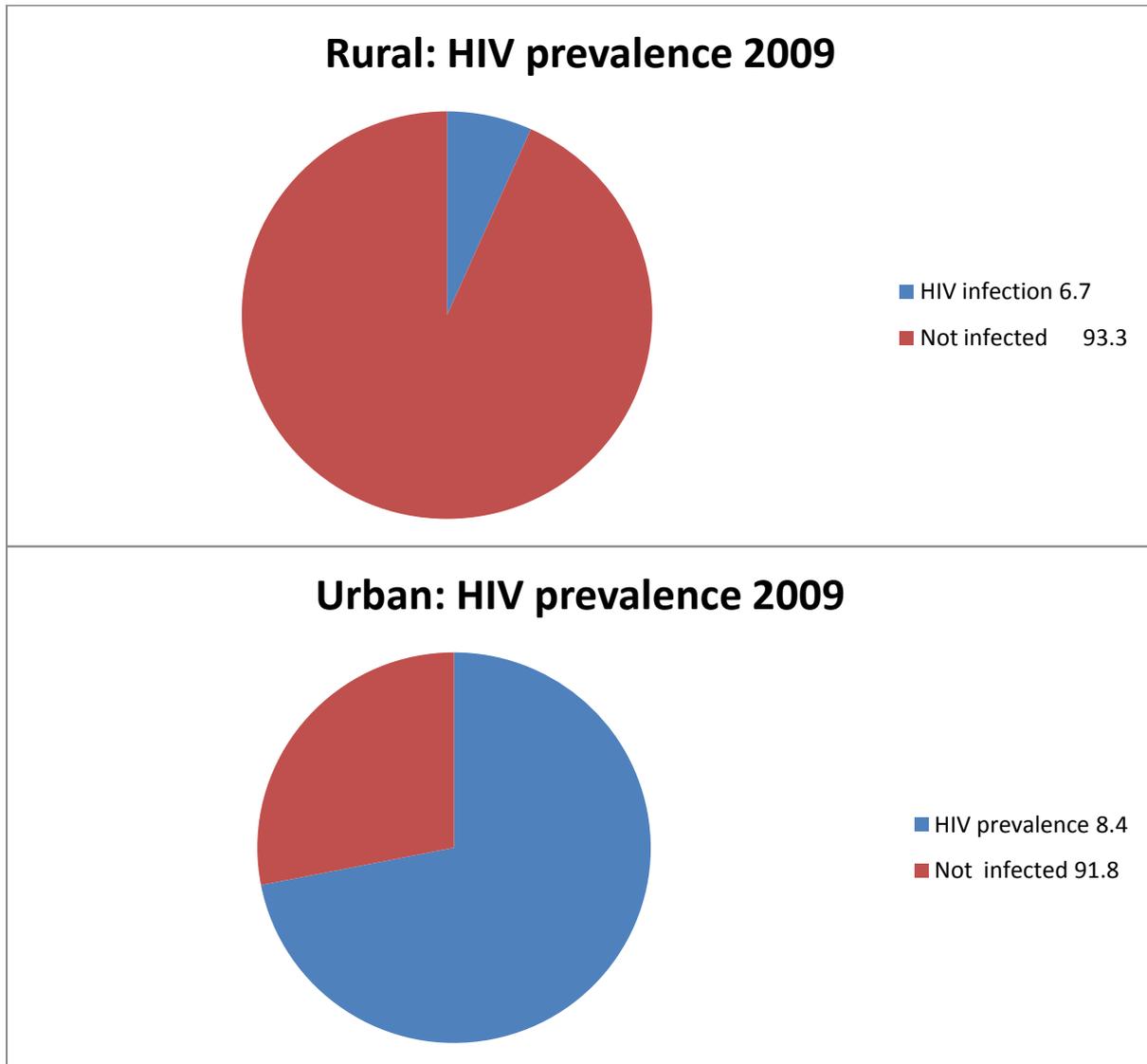
In spite of this progress, enormous challenges remain because after the Kenya election of 2007, this effort was disrupted by the political situation.[47] Githiga (2009:162) affirms that during this political unsteadiness many women were raped and infected with the HI virus. Githiga (2009:162) further claims that over 1,133 people were killed and over 650,000 others were displaced, explaining the reason for the rise in the HIV prevalence between 2008 and 2010 (cf. Daily Nation,15th December 2010).[48]

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[47] The declaration of Kibaki as a winner of the highest contested election in the Kenyan history and his emergency swearing in as the new president was not celebrated by all. Suspicion and rivalry made the opposition reject the presidential result. The immediate announcement resulted into sporadic killing of numbers of the Agĩkũyũ community and members of other communities who were suspected of having voted for President Kibaki. This killing was not the first one to target the Agĩkũyũ community; similar incidents were recorded in 1991, 1992 and 1996 elections especially in the Rift-Valley and Coast Provinces (cf. Githiga 2001:122).
[48] Many countries surrounding Kenya have engaged in war for many years. Examples include Sudan, Somali, and Uganda (once Tanzania was at war with Uganda). As a result many women were raped with rape being used as a weapon of war. In fact, during the wars in the Great

Githiga's claim is supported by the report released by the pre-trial chamber at Hague in which a Chief Prosecutor of the International Court of Justice (ICC), Luis Moreno-Ocampo, was given permission to investigate the politicians, businessmen, police bosses, and others who authored the orgy of killing, rape and displacement. This Court found that between December 27, 2007 and February 29, 2008, more than 876 women were raped and there were 1,984 cases of defilement (Sunday Nation, 4th April, 2010). The report further affirms that the gender violence recovery centre of the *Nairobi Women's Hospital* treated 443 survivors of sexual and gender-based violence, 80 per cent of which were rape or defilement cases while between January and March, 2008, the hospital and its partner health institutions received at least 900 cases of sexual violence (Sunday Nation, 4th April, 2010).

The court in Hague also found that a large number of rapes and other forms of sexual violence were reported in Rift Valley and Nairobi while the number of reported incidents in Western, Nyanza, Central, and Coast provinces was lower (Sunday Nation, 4th April, 2010:1). Interestingly, this court agrees that the abovementioned incidents caused psychological damage such as trauma, stress and depression, loss of income due to loss of jobs or inability to re-establish businesses, the contraction of sexually transmitted diseases and the HI virus after rape, and the separation of families (Sunday Nation, 4th April, 2010:1). However, it should be noted that rape in Kenya is not only confined to the political unrest of 2007 and 2008, it has been registered in several parts of the country.

Another data on the HIV and AIDS pandemic in Kenya by the NACC shows that in 2007, the HIV prevalence was highest among widowed women (20.1%) and men (17.3%). This is also confirmed by KAIS (2009) who asserts that widows and widowers are highly infected by the HI virus. This is shown in the *figure 5*.

Figure 5: HIV prevalence among women and men aged 15-64 years (Adopted from KAIS 2009)

Lakes Region, soldiers systematically raped women in order to spread HIV. For instance, during the Rwandan genocide of 1994, the militiamen infected with the HI virus used it as a weapon. Their aim was to cause delayed death. Subsequently, many refugees from these countries came to Kenya where they have established a home. It is possible that some among them have been infected with the HI virus as a result of war. This is according to the report from human rights in Rwanda which was submitted to the UN by Rene-Degni-Segui, the special rapporteur of the Commission on Human Rights in 2004. Such atrocities were recorded in Kenya during the political instability of 2008.
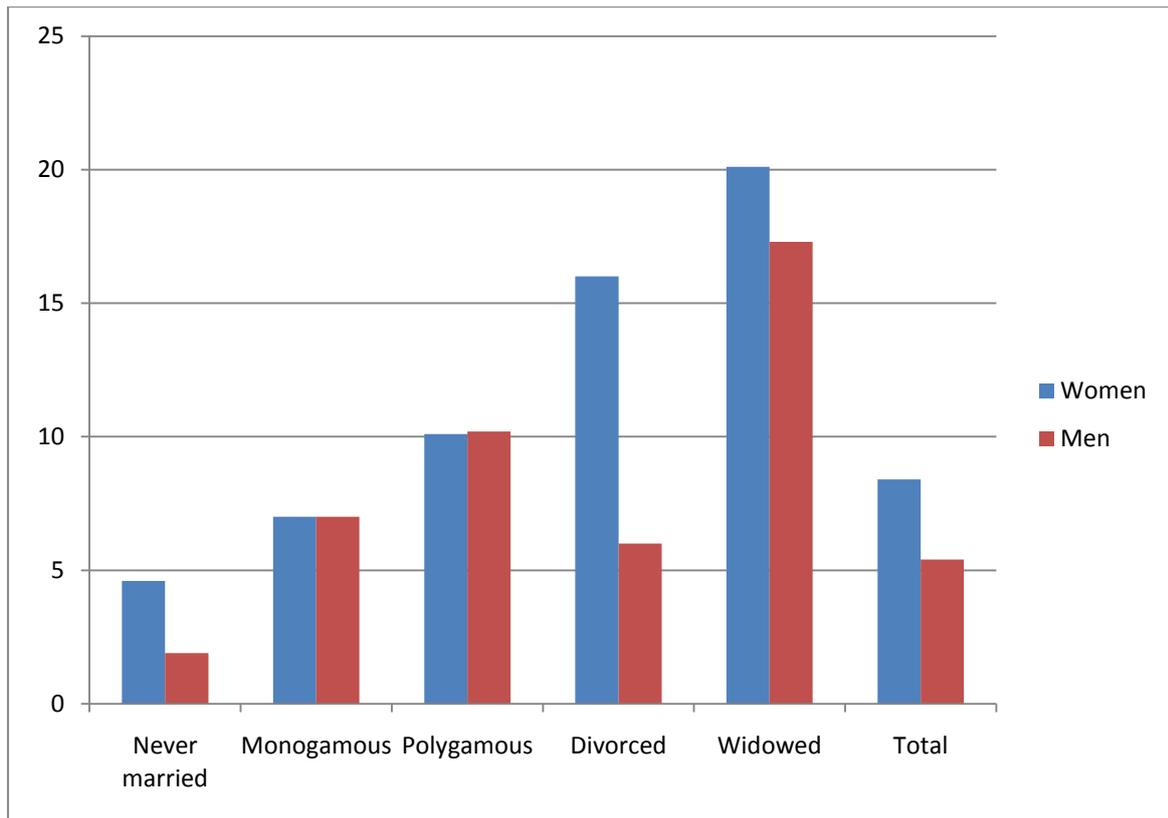
The KAIS (2009:42) also reports that women and men who had never married or cohabited have the lowest HIV prevalence rates, at 4.6% and 1.9%, respectively while the HIV prevalence is similar among women and men who are currently monogamous or currently polygamous. From the *figure 5* above, it is true that the HIV and AIDS pandemic appear to have a gender bias in that more women than men are infected. This is affirmed by Miriam Were, of NACC, who maintains that there are higher HIV and AIDS prevalence rate in women and young girls than in men (Daily Nation, 14th August 2010). For Were, women and girls bear the brunt of the disease as 2006, 2007, 2008, 2009 statistics indicate that prevalence in males is 3.5% compared to 6.7% in females (Daily Nation, 14th August 2010). This can be translated to mean that for every man infected, there were four women infected. Based on this data, it can be said that there is a feminisation of the HIV and AIDS pandemic as the next section will show.

Thus far, it is clear that the statistics of the HIV prevalence in Kenya is rising. The new infection is unacceptably high particularly among vulnerable groups including young girls, individuals in HIV discordant relationships, commercial sex workers and their clients, migrant workers, and injecting drug users (cf.Daily Nation, 18th May, 2007). While the pandemic affects everybody in Kenya, the most deeply affected are those least able to

exercise their rights, the poorest, the weakest, the least educated and the marginalized. Equally critical is the availability of affordable treatment for those in need of antiretroviral therapy. Other challenges include the negative socio-economic impact that HIV pandemic has inflicted on all communities in Kenya as evidenced by the cumulative number of orphans and other vulnerable children, widows and the elderly as well as high levels of poverty and unemployment in the country. These oblige us to examine the social, economic, cultural, biological diseases and injustices that sponsor and promote the spread of the HI virus in Kenya.

2.4. Socio-economic and political factors

It is widely accepted that HIV and AIDS have a major depressing effect on social and economic life of the individuals, families, communities and on society as a whole.[49] Generally, this pandemic has affected every socio-economic status of Kenya either directly or indirectly. Anso Kellerman (2000:201) observes that the HIV and AIDS pandemic have robbed the resources of the "already weak economies of the developing countries." In other words, the HIV pandemic is slowly destroying the resources and the economies to "the point of collapse" (Gennrich 2004:16). In agreement with Kellerman and Gennrich, Musa Dube affirms that the HIV pandemic has indeed devastated the walls of our souls, families, communities, countries and continents, to such a great extent that the theme "come let us rebuild" is more than relevant in our time.[50]

In Kenya, as in many other countries in Africa, HIV pandemic has threatened personal and national well-being by negatively affecting health, lifespan, and productive capacity of the individual; and, critically, by severely constraining the accumulation of human capital and its transfer between generations (Murage 2006:5).[51] The *International Monetary Fund* (IMF) (2004:1) states that, in Africa, the HIV pandemic has severely affected low-income group and has become the most serious impediment to economic growth and development. In fact, this is true of Kenya whose economy has been adversely affected by the HIV and AIDS pandemic.[52]

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[49] The effect of HIV/AIDS in Kenya at http://www.hbs.edu/research/pdf/07-025.pdf (8th July, 2009).
[50] See paper presented by Musa Dube to the General Assembly of the All Africa Conference of Churches held in Cameroon, Yaounde on 20th -27th November 2003.
[51]The effect of HIV and AIDS in Kenya at http://www.hbs.edu/research/pdf/07-025.pdf (8th July, 2009).
[52] See the effects of HIV and AIDS in Kenya at http://www.hbs.edu/research/pdf/07-025.pdf. (8th July 2009).

The impact of HIV and AIDS on economic growth and development, coupled with the direct impact of increased mortality and morbidity of the poor, make the HI virus a uniquely corrosive threat to the war against the HIV and AIDS pandemic in Kenya. It is also noted that HIV and AIDS in Kenya is a pandemic within other pandemics (Daily Nation, 14th August 2010). What this means is that the HIV and AIDS pandemic occurs within the pandemic of poverty, malaria, typhoid and other treatable diseases, which continue to affect many people in the country.

According to the national census conducted in 2009, Kenya's population was 38.6 million thus marking an increase of 10 million since the last census in 1999. This figure is projected to increase to 42.4 million by 2012.[53] This high rate of population growth has adverse effects on spending on infrastructure, health, education, environment, water and other social and economic sectors. The *Welfare Monitoring Survey* (WMS III), indicates that half of the country's households live below the poverty line and this translates to about 19.3 million people (Government of Kenya 2010:1). The implication of this is that one in every two Kenyans is poor. The WMS III (Government of Kenya 2010:1) further notes that in urban areas, the majority of the poor lives in informal settlements, which are characterised by inadequate or low quality services such as clean water, limited access to quality schools and health facilities, and general unhygienic living conditions. In addition, WMS III (Government of Kenya 2010:1) affirms that most of the urban poor do not have a regular job or income and this leads in their being caught in a vicious cycle.

Indeed, while the wealthy and the poor are both prone to HIV infection, the poor are more vulnerable than the rich and the wealthy (Murage 2006:5). This is because poverty is not just the absence of material necessities but it also entails the loss of self-respect, deep anxiety and the loss of hope. When a person is in such a situation, it becomes hard to choose to abstain from sex or to protect himself or herself; for the urgency at that time is to get something to eat (Myers 1999:30). Seen from this angle, Philomena Mwaura argues that:

> Poverty can be perceived as deprivation in terms of lacking access to resources or in terms of living in a deteriorating or demolishing environment. It can also mean the denial of opportunities and choices most basic to human development for example denial to lead a long health creative life and to enjoy a decent standard of living, freedom, dignity, self-respect and the respect of others. Poverty can further be seen from a mental or cultural perspective as isolated, loss of direction, hopelessness, apathy and passive suffering (2001:7).

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[53] Kenya Vision 2030 (First Medium Term Plan 2008-2012)

The suffering referred to above is clear in the Kenyan context because the majority of the poor in Kenya are women who live in rural areas for they are the ones who experience abject poverty. Both Mwaura and Chirairo (2006:65) confirm that in Kenya, 70% of women live in rural areas making a livelihood out of agricultural activities and in the urban slums, women are concentrated in the informal sectors working as hawkers of illicit liquor or in other small enterprises. Alcohol brewing is the major economic activity for many poor young women both in rural and in urban areas. This creates a high-risk environment for the spread of the HI virus as women's homes become makeshift bars (Murage 2007a:24).

Similarly, poverty deeply strikes and it accelerates the spread of the HIV and AIDS pandemic because the poor people often lack nutritional and balanced meals needed to strengthen the immune system. Furthermore, stress caused by poverty and unemployment may further weaken the immune system of those with the HI virus, thus worsening their situation. The issue of poverty explains why Kenya, like the rest of Africa South of Equatorial Forest, is more highly affected by the HIV and AIDS pandemic than the rest of the continent. Cohen (2005:2) argues that "unless the reality of the lives of the poor are changed" they will persist with behaviours which will "expose them to HIV infection."[54]

In line with the above, the DFID (2004:1)[55] argues that the HIV and AIDS pandemic undermine development across all sectors of the economy and society, the major challenges include the productivity of the agriculture sector, (on which the majority of Kenyans rely for their livelihood but, which is undermined by negative impacts on the supply of labour), crop production, agricultural extension services, loss of knowledge and skills and, at a personal level, the trauma associated with death. As a result, there is a reduced household as well as food insecurity and decline in the nutritional and health status of smallholders and their families (DFID 2004:2). Commercial agriculture, which is a major source of employment and foreign earnings in Kenya, is also adversely affected by increasing health costs as well as protracted morbidity and mortality of key workers (DFID 2004:2).

The above shows that the health services are not spared by the HIV and AIDS pandemic. Majority of Kenyans do not have access to affordable health care. According to the Household Health Expenditure report of 2003, 44% of Kenyans who fall sick do not seek

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[54] See Poverty and HIV and AIDS in Sub-Sahara Africa –
  http://www.undp.org/hiv/publication/issues/english/issue27e.html 2005-(8th July 2009).
[55] DFID (2004) in a document entitled, "The *Sector Impact Studies*".

health services due to lack of finances. Infant mortality rates increased to 77% per 1000 births in 2003, while under 5 mortality rates increased to 115 per 1000 births. Maternal mortality rates are currently 414 maternal deaths per 100,000 live births. In fact an estimated 14,700 women of reproductive age die annually due to pregnancy related complications. The *Household Health Expenditure* report of 2003 further shows that in 2002 the country had 514 hospitals, 634 health centres, 3,351 health sub-centres and the number of beds available in these health institutions were only 60,657. This increased in 2003 as follows: 526 hospitals, 649 health centres, 3,382 health sub-centres and 63, 407 beds. This is clearly shown in the *table 2.4.1* below.

Table: 2.4.1. Health Institutions (Health informationsystems, Ministry of Health)

	Hospital	Health cenres	Health sub-centres and dispensaries	Total	No. of beds and cots	No. per 100,000 population
Total 2002	514	634	3,351	4,499	60,657	19.2
Total 2003	526	649	3,382	4,557	63,407	19.5

Still on health, it is known that many trained health workers have died and those left have to cope with the increasing burden of the HIV and AIDS related diseases.[56] The direct cost and social problems associated with caring for increasing numbers of orphans, coupled with high levels of poverty, place severe burdens on family and societal structures.[57] In addition to these direct effects on production and social services, there is a growing realisation that the HIV and AIDS may undermine the long-term revenue base of the economy, and so reduce government's capacity to provide the infrastructure and social services essential for long-term economic growth. Studies in countries[58] severely affected by the HIV and AIDS suggest that the impact of the HIV and AIDS on public finances is largely growing. This provides an additional argument (particularly relevant for the Ministries of Finance and Planning), for greater investment in an expanded response across all sectors.

On the other hand, the educational services suffer as teachers also die of the HIV and AIDS and children drop out of school as parents die and household incomes fall.[59] Even the education of those children whose parents are not ill suffers, as their teachers are often too sick to conduct classes. The Kenya Teachers Service Commission (KTSC) reports that

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[56] http;//www.sarpn.org.za/documents/d0002626/index.php.htm (8th July, 2009).
[57] http://www.sarpn.org.za/documents/d0002626/index.php.htm (8th July, 2009)
[58] See, for example, *The Impact of HIV and AIDS on Government Finance and Public Services*, Haacker (2004).
[59] http://hivaidsclearinghouse.unesco.org/ev_en.php?ID=3236_201&ID2=DO_HITS_SUMMARY_POPUP – 22nd July 2009

deaths among teachers was more than triple between 1995 and 2002, rising from 450 to 1500 per year.[60] On the average, 1.4% of all teachers are expected to die of HIV and AIDS yearly between 2007 and 2010.[61] Additionally, the Government of Kenya and UNICEF study document reveals that:

> Children are now becoming subject to many psycho-social impacts of HIV and AIDS such as stigma, fear, worry, depression and hopelessness. All these impact negatively on their learning and development. Children's participation was reported to have been affected in that pupils themselves are getting infected and some of them infect others; attendance and performance in schools is affected; pupils are dropping out of school while some were reported to have died due to suspected HIV and AIDS related causes. Teachers' participation and performance in the learning process was reported to have been affected as some of the teachers have been infected and therefore are increasingly unavailable to the pupils. Pupils reported that they feared being taught by infected teachers. Teachers' participation in school is also being compromised by HIV and AIDS related commitments in the community. Teachers were also reported to be dying from HIV and AIDS related causes and they are not being replaced hence are lost to the educational system. The results of the study also indicate that the resources available to support education have increasingly been diverted to meet HIV and AIDS related needs (2006:1).

Similarly, as more and more PLWHA progress to the final stage of AIDS, the financial and material burden of caring for them shifts from hospitals to their families and friends.[62] Hence, the impact of the disease on household welfare becomes devastating. As the disease progresses towards its final stages, medical expenses rise and household resources and savings are diverted for medical treatment and, eventually, funeral costs.[63] In fact, the medical expenses for the PLWHA are typically higher than for other patients because of the opportunistic diseases, which may occur. This means that there is an additional burden on already poor households resulting in further impoverishment for families already near or below the poverty line.

Until recently, the cost of the HIV and AIDS treatment was beyond the reach of most Kenyans. Now the price of these medicines has been reduced and, in government hospitals, they are now being given freely (Daily Nation, 18th August, 2007). However, obstacles to overcome include how to handle hidden costs such as cost of transport to health facilities, cost of laboratory investigations, cost of care and support services, cost of food and other care-related commodities. These hidden costs still place adequate health care beyond the

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[60] http://www.hbs.edu/research/pdf/07-025.pdf. The effect of HIV/AIDS in Kenya (8th July, 2009).
[61] World Bank country Kenya 2006 at http://www.worldbank.org/html/extdr/offrep/afr/ke2.htm -(8th July, 2009).
[62] World Bank country Kenya 2006 at http://www.worldbank.org/html/extdr/offrep/afr/ke2.htm -(8th July, 2009).
[63] World Bank country Kenya 2006 at http://www.worldbank.org/html/extdr/offrep/afr/ke2.htm -(8th July 2009).

reach of many Kenyans, and as we have seen above, the majority of Kenyans live below the poverty line.

Figure 6: HIV prevalence among women and men aged 15-64 years by level of education in Kenya 2007 (adopted from KAIS 2009:42)
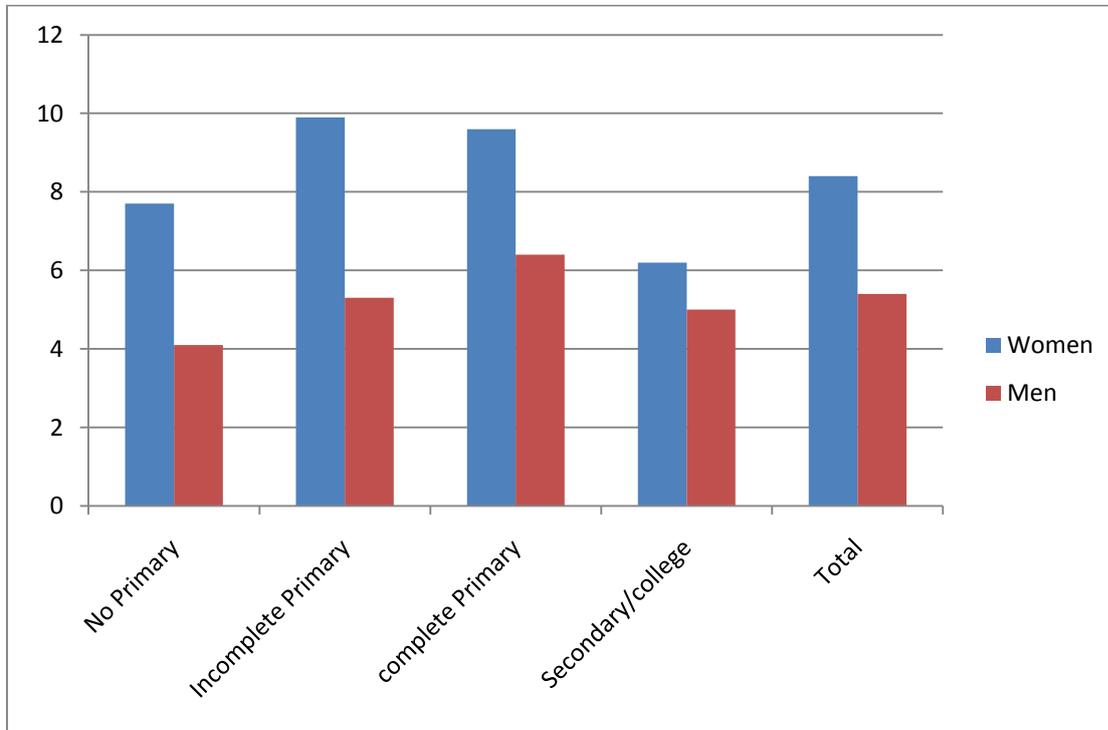
Figure 7: Comparison of HIV prevalence among women and men in the (2003) KDHS and (2007) KAIS
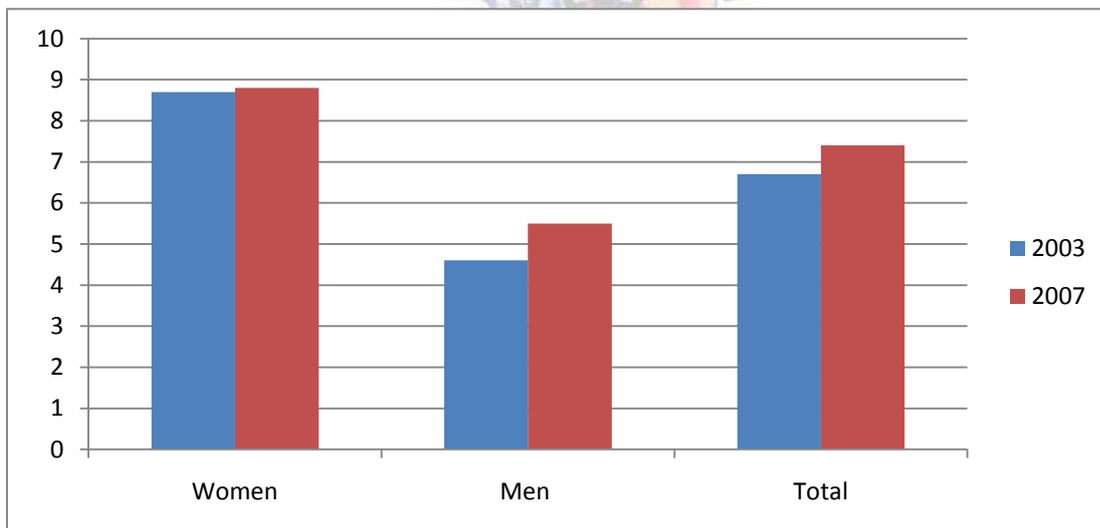
In their research, KAIS (2009:42) found that the HIV prevalence among women with secondary education or higher (6.2%) was significantly lower than the prevalence seen among women with less education (7.7%-9.6%) and there were no differences in HIV prevalence by education level among men with rates ranging from 4.1% to 5.0%. It emerged from the findings that the HIV prevalence among women was significantly higher than men

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at every level of education with the exception of the highest level. The *figure 6* above illustrates this fact. A careful comparison of the *figure 6* above with the previous data (*figure 7*) shows clearly that women are in a disadvantaged position compared to men for they are the least educated; hence, they are more vulnerable to the HI virus. This also means that because of lack of education they will also lack sustainable livelihood, assets and savings, which make them more vulnerable to the HIV and AIDS. Furthermore, lack of sustainable livelihood, assets and saving make women poor. In other words, they are put on the margin of survival and if they are infected with the HI virus, they are unable to deal with the consequential health and other costs.

Kellerman (2000:201) notes that the poor may be forced to sell their remaining properties, borrow from others and withdraw everything from their savings, but when at last the person dies, the funeral cost drains them of whatever is left and, thus, increases their burden. This is perhaps the reason why the HIV prevalence in 2003 was not significantly different from 2007 as shown in the *figures 6* and *7* above. Lack of education together with poverty is likely to make more women to be infected (8.4%) than men (5.4%) and, in this case, young women aged 15-24 years in Kenya are four times more likely to be infected (5.6%) than young men of the same age-group (1.4%).[64]

To curb the above socio-economic issues, the church and the community at large should make it a priority to reach the most impoverished people. As we have seen, the most impoverished group is the rural women who suffer from low, socio-economic, and cultural status, which makes them to be more vulnerable to the HI virus infection and transmission. This is clearly the case with women in rural Western, North-eastern and Coastal provinces of Kenya, where many women are employed in the commercial sex industry (Daily Nation, 24th May, 2007). Gillian Paterson concurs that, "millions of women are forced into prostitution by illiteracy, exploitation and economic necessity."[65]

Another socio-economic factor that has accelerated the spread of HIV and AIDS in Kenya as in the rest of Africa is her historical background (Schoepf, Schoepf and Millen 2000:91-125).[66] What this means is that, Kenya like the rest of the African continent, is still struggling to recover from her painful history of slavery, economic colonisation, and political

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[64] See KAIS (2009:42).
[65] See Paterson G, "Understanding the Issues," Norwegian Church AIDS- http://www.nca.no/articleview/2381/1/277/htlm (22nd July, 2007).
[66] For more information, see Schoepf, Schoepf, and Millen (2000).

mismanagement of 24 years which has made it a poor country and, thus, susceptible to the HIV and AIDS pandemic. It is regrettable that in the period between the emergence of Islam in the seventh century and the re-consolidation of Europe in the twentieth century, many Africans were subjected to the slave trade. Mugambi (1989c:80) affirms that these African slaves (human capital) were transported from the West African coast to European colonies in America (cf. Bediako 1992:226-228). Similarly, they were transported in European ships from the East African Coast (including Kenya) to the European colonies in Asia. Consequently, as the trade in slaves proved lucrative, Spain, England, France, Holland, Denmark and the American colonies all entered the trade at various periods.

Mugambi (1989c:80) recalls that during the Middle Ages, the institution of slavery was justified on Aristotelian rather than on Christian grounds. Amazingly, just as Aristotle, the famous Greek philosopher, had approved of slavery, so did Thomas Aquinas (1224-74), the Christian theologian, follow suit (Russell 1991:196-205, 444-54). Tokunboh Adeyemo (1997:14) notes that the Portuguese and the Spanish slave traders, who were the first Europeans to deal in the Black slave trade, believed that Africans were cursed. He also notes that the capture of slaves was done in the name of Christianizing the slaves and under the assumption that they were cursed anyway. Adeyemo (1997:14), therefore, laments that the most unfortunate thing is the way New Testament passages on slaves submitting to their masters, as written in Ephesians 6:5-8 and Colossians 3:22 were used by some contemporary scholars and evangelical church leaders such as George Whitefield, John Davenport and Jonathan Edwards among others, to support the status quo.

Kwame Bediako (1992:226) is of view that "if the effect of 'uncommon market' in the economic sphere was to help widen the 'technological gap' between Africa and European societies, the slave trade also entailed social and political disruptions within African societies themselves." He further affirms that:

> As African societies were drawn more and more into slaving, either in order to survive economically or in order to avoid being enslaved, or both, social and political relationships and structures were undermined through wars fought now with European firearms. The slave trade thus promoted the disintegration of African societies and prepared the conditions for eventual colonial occupation when the slaving partnership was terminated by some of the European nations which had derived the greatest prosperity through the trade (Bediako 1992:226).

From the above it is clear that the slave trade was the prelude to the tragedy of colonialism. With the coming of colonisation, Schoepf, C and Schoepf, B.G. and Millen (2000:95) assert

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that, African raw materials and crops were further taken to fuel the "European industrial development while little of the profit was re-invented in Africa." This implies that the profit generated from African economies at this period was focused on benefiting the colonial states at the expense of African people; thus, impoverishing them and causing what Cohen (2005:6) refers to as "intergenerational impact of HIV and AIDS." This is a situation in which a culture of poverty was created and was passed from one generation to another. In other words, slavery and colonialism have generated, *inter alia,* the culture of poverty in Africa through erosion of human and physical resources, and it is known that HIV and AIDS flourish where poverty abounds and where institutional capacity is weak. This agrees with Louw's contention that:

> In such poverty scenario, the HIV (and AIDS) pandemic flourishes. Poverty provides the social context within which the pandemic flourishes in Africa and South Africa… Thus HIV (and AIDS) and poverty are intricately linked, they interplay and create a vicious circle. Poverty causes HIV and in turn causes poverty, which exacerbates pain and suffering of the infected and affected people (2008:393).

Furthermore, on the issue of socio-economic factors that have contributed to the spread of HIV and AIDS in Kenya, the debt crisis and the Structural Adjustment Programme (SAP) imposed by the IMF and World Bank or Bretton Wood institutions are worth noting (Millen *et al* 2000:98). The SAP needs to be scrutinized broadly for it has adversely facilitated the spread of the HIV and AIDS pandemic. The SAP policies have really played a crucial role in impoverishing Africa as they "perpetuate many of colonialism's destructive features" (Schoepf, Schoepf and Millen 2000:94). These structural reforms were dictated by the IMF and World Bank in the 1980s and 1990s because African governments were in need of funds to pay their increasing debts (Schoepf, Schoepf and Millen 2000:99). As a result, these huge debts have led to the stagnation of already declining economies, thus making it economically very difficult for some African countries to fight the HIV and AIDS pandemic. The scenario is worsened by the Washington consensus, which forced African governments to privatise social services and retrench workers. In Kenya, the health sector was badly affected in such a way that, the treatment of opportunistic diseases, which occurs because of HIV and AIDS, became unduly expensive in that the poor could not afford to pay for the services.

It was unfair that these Western institutions further dictated that African governments cut subsidies on food production and government run services, cut public sector employment and government spending on social welfare, health and education, besides privatizing and

commercialising state enterprises. They were also mandated to devalue their currencies, promote production for export rather than meeting the need of the people and, finally, remove barriers to trade (Murage 2006:4). Instead of alleviating poverty, SAPs brought inflation, retrenchment, increased debt, deteriorating health conditions, decline in economic growth and environmental degradation (Murage 2006:4). Worse still, SAPs have negatively affected women, especially in the area of health, and as Haddad (2000:99) reminds us, health services are "crucial to the survival of women." She further states that, The HI virus is but a symptom of the deeper infection of patriarchy and oppression. Activist-intellectuals cannot be content to merely engage in critical inquiry about the HIV and AIDS epidemic and about "other" women (Haddad 2008:56).

Another socio-economic factor that has adversely facilitated the spread of the HIV and AIDS pandemic in Kenya is the social condition created and encouraged by globalisation (cf. Dube 2003a:79). In criticizing globalisation, Dube (2003a:79) argues that, "lack of education, entrenchment, gender inequities, cultural views, decrease access to health services, mobility, sex work industry, girl-trafficking, unemployment make globalisation the fertile ground for the spread of the HIV and AIDS pandemic." The situation has further increased the level of poverty and adversely affected the economic sector and social welfare services, thereby, facilitating the spread of HIV and AIDS (Murage 2007a:160).[67]

When people are faced with food insecurity and lack of social welfare, they become frustrated. The traumatic situation forces them to start living carelessly and, consequently, to engage in irresponsible sexual behaviours. Since globalisation tends to focus on privatisation and profit making, the anti-retroviral drugs have remained unaffordable for millions of people who need them, hindering the fight against the HIV and AIDS pandemic. This agrees with UNAIDS' (2000:4) declaration, which considers the HIV and AIDS as a "true development crisis that threatens the social and economic fabric and the political stability" of the world. For UNAIDS (2000:4), the most urgent ethical issue arising from the HIV and AIDS pandemic is the lack of distributive justice. The most worrying factor is that the poorest, most marginalised and oppressed members of society are also most vulnerable

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[67] According to Kenyan Standard newspaper, dated 28 March 2008, a Muslim scholar has demanded that the African Union asks for compensation from western countries for Africans who were sold as slaves. Mr Mohammed Sheikh demanded that the African Union sets up a special commission to pressure the West to admit culpability and compensate victims. He observed that, apart from slavery, the developed nations must compensate Africans for colonialism and the plunder of their natural resources. He said western countries were developed due to the natural resources taken away from Africa. Sheikh argues that, "Africans must be compensated for the hard labour they provided, which made countries in the West rich. They must be made to understand that it was our labour that made them what they are today."

to the threat of HIV and its tragic consequences. They are deprived of access to the preventive education, care, treatment and support, which they urgently need.

Ironically, while Kenya spends US$0.76 per capital on the HIV and AIDS and US$12.92 per capital on debt repayments, the United States of America spends US$50billion a year to cope with the medical consequences of obesity (UNAIDS 2007:4). The observation made the United Nations Commission on human rights to advise the churches in Africa to exercise advocacy by insisting that the poor and vulnerable people of the world be accorded universally recognised human rights.[68] These will entail access to care and treatment, not just for the HIV and AIDS pandemic but also for the two other global "killer" pandemics - tuberculosis and malaria.[69]

2.5. Biological factors

Besides the economic factor, the biological make up of women is another factor that facilitates the spread of the HIV and AIDS pandemic in Kenya. Abdool Karim (1998:24) argues that women are biologically more vulnerable to HIV than men. This is because, during intercourse, women retain sexual fluids from men for a long time. If the male partners are sero-positive, the HI virus easily enters into women's bodies due to their long retention of sexual fluids. Anatomically, women are exposed longer to potential infections through male secretions (semen) than men are exposed to female secretions during intercourse (Phiri 2003:9). Vaginal intercourse exposes a larger surface area of the vagina and the cervix to semen, compared to the surface area of the male genitalia exposed to female secretions (Mati 1997:50-51). Haddad affirms that:

> Given women's biological susceptibility to the virus, their subordinate position in sexual relationships prescribed by culture, and the high incidence of gender violence, their vulnerability to HIV infection is frighteningly high. Young women within the 15-24 year old age group are four times more likely to be infected than young men (2008:40).

Haddad (2003:151) had earlier noted that female genital tissues are easily injured during sexual intercourse, which results in cuts and bruises that provide entry points for the HI virus. She further points out that, this biological nature as well as the disadvantaged and oppressive socio-cultural situation of women mean that "the odds are stacked against them" (Haddad 2003:151). Phiri maintains that:

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[68] See intervention of Bishop Silvano. M. Tomasi, Apostoric Nuncio, Permanent Observer of the Holy See to the United Nations at Geneva at the 61st session of the Commission on Human Rights, Item 10: Economic, social and cultural rights, March 2007.
[69] See intervention of Bishop Silvano. M. Tomasi, Apostoric Nuncio, Permanent Observer of the Holy See to the United Nations at Geneva at the 61st session of the Commission on Human Rights, *Item 10: Economic, social and cultural rights, March 2007*.

> Girls and young women are even in more serious danger because the lining of their vagina is not well developed to protect them from infections. There is also the danger of forced penetration, which leads to bleeding that may also increase the risk of getting the HIV. Women are more likely than men to get sexually transmitted diseases (hereafter STD) without noticing them because they are inside the vagina. Women are also most likely interested in the well being of the members of their families and they are the last to seek medical help for themselves, even when they are sick. There is also stigma attached to STDs, which may prevent women from seeking early treatment. The existence of STD in the vagina increases a woman's chances of being infected with the virus (2003:9).

2.6. Cultural and gender factors

There are a number of cultural practices, which perpetuate the spread of the HIV and AIDS pandemic in Kenya. Haddad (2005:35) argues that cultural practices can influence the spread of HIV and AIDS in the society (cf. Shisanya 1997:34). The reason for this is that culture encompasses the "intellectual and artistic aspects of social life, a society's way of life, heritage and traditions that have been handed down from one generation to another" (Proctor 2002:334). This shows that culture has a very strong influence on people's life. According to WCC (1997:20), some cultural environments can also prohibit people from talking about "sex, AIDS and aspects of sexual health" but the fight against the HIV and AIDS pandemic requires that for "effective education", the "participation of educator and student" would require open communication.

Regrettably, some communities in Kenya still maintain certain ancient traditional practices that facilitate the spread of the HI-virus. For instance, the practice of polygamous marriage, which is often responsible for shortage of food in homes, continues to facilitate the spread of the HIV and AIDS pandemic as the women in such a marriage share (sexually) one man. For that reason, it is possible for an infected partner to spread the HI virus to the other members in such a marriage. Most communities in Kenya forbid married women from having other sex partners yet advocate polygamy, which allows men to have more than one wife (Shisanya 1997:34). Phiri (2003:11) notes that the practice of polygamy was widely practised in Africa and is very common even in modern Africa.

In ancient Agĩkũyũ culture, polygamy in its pure form was intended to safeguard a man from involving himself in illicit sex. Therefore, the present casual sex associated with polygamy is a perversion of the culture of polygamy in the Agĩkũyũ culture (cf. Kenyatta 1938:28). This means that the current practice of polygamy has given room to infidelity among the partners. For instance, in ancient Agĩkũyũ culture, all the wives used to live in one homestead but many modern polygamists prefer to locate their wives in different

homesteads, which may be geographically dispersed across the towns and in villages in various districts. This living arrangement has increased unfaithfulness among the spouses, thus, putting them at the risk of the HI virus exposure. Nicolson argues that:

> AIDS has spread in Africa because of cultural beliefs, and in particular, the belief that men need, and are entitled to frequent sex with a variety of partners. Even if we can immunise against AIDS, even if we can find a cure for AIDS, issues such as the commercialisation of sex, the expectation among men that women have a duty to provide them with casual sexual gratification, the belief among young women that their worthy is determined primarily by satisfying the demands of their partners, remain (2000:10-12).

For Phiri (2003:11-12), the practice of polygamy demeans the humanity of women and promotes the spread of HIV and AIDS. She affirms that, besides polygamy, African culture also encourages African men to have sex with other un-official partners. However, we need to realise that even in a monogamous family, there is still a risk when one or both partners are unfaithful. The study conducted by Kawango (1998) reveals that among the Luo in Siaya District of Kenya, the HIV and AIDS pandemic are widespread in both polygamous and monogamous marriages. This is attributed to three factors.

(a) First, the monogamous men tend to be younger with stronger sex drives than the polygamous men who are older. (b) Secondly, in some parts of the Central Kenya, there is a greater tendency for monogamous males to seek sexual gratification out of marriage when their wives deliver babies. This is because the Agĩkũyũ culture forbids married men from engaging in sex with their wives during the first few months after they give birth (cf. Kenyatta 1938:138; Waiyaki 1993:20-33). (c) A third factor is that other monogamous men claim that they prefer to have several casual sexual relationships to marrying other wives due to the church's prohibition of polygamous marriage.[70]

Certainly, these factors show that monogamous men become involved with more sexual partners than their polygamous counterparts. In the same way, Schoepf, Millen and Schoepf (2000:95-109) argue that having several sexual partners expose an individual to the risk of contracting the HI virus. To this end, many women are victims of their husbands' irresponsible sexual behaviours (Anarfit 1994:6). Equally, the unsatisfied married women, particularly, younger wives, who seek sexual satisfaction outside their marriage can also transmit the HI virus to their husbands or other people with whom they engage in sexual

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[70] Even though there are many polygamous marriages in the church, the Anglican Church of Kenya prohibits polygamous marriage in her Canon (Revised Church Constitution, 2001).

intercourse. The *figure 8* below shows the different numbers of sexual partners that men and women in Kenya have during their lifetimes according to the study conducted by KAIS 2009.

Figure 8: Women and men aged 15-64 years by number of lifetime sexual partners (adopted from KAIS 2009:97)
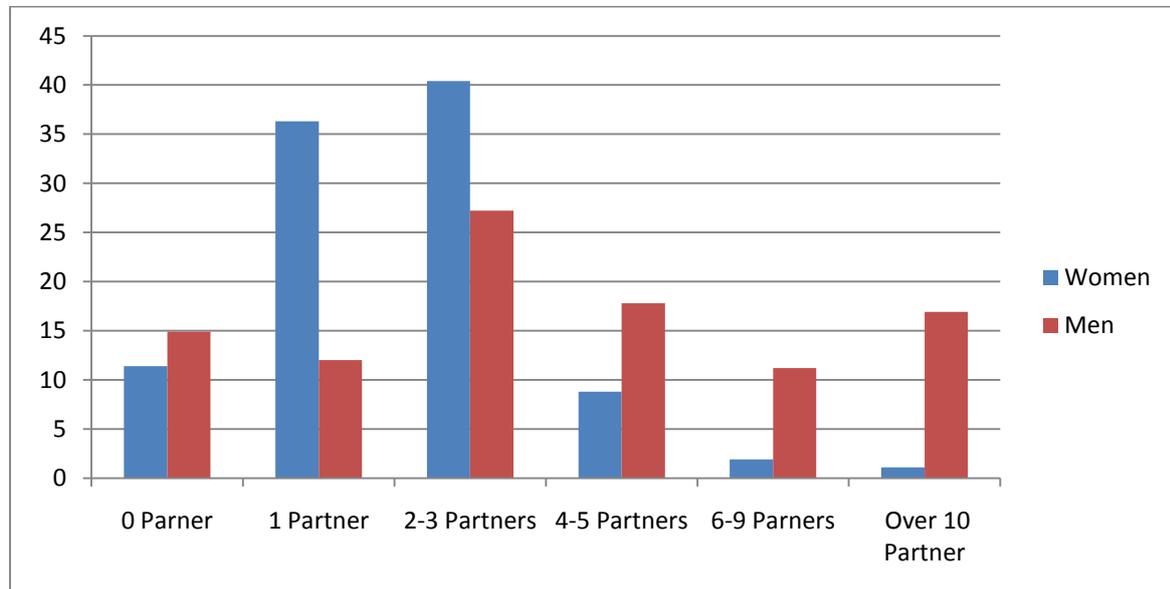
KAIS (2009:97) found that the number of lifetime sexual partners varied significantly between men and women; for nearly half of men (45.9%) were reported to have four or more lifetime sexual partners compared to 11.8% of women. Conversely, more women (36.3%) than men (12.0%) reported having only one lifetime sexual partner.

It is unfortunate to note that even though women realise that their husbands have multiple sex partners, they cannot negotiate for safer sex because they are powerless. It may also be difficult to come out of such marriages because of the cultural practice of *Ruracio* (bride price) or *Mahali* (dowry). The payment of *Ruracio or Mahali* places women in a defenceless situation in which they are expected to meet their husbands' sexual demands all the time (Shisanya 1997:11). Such demands include fulfilling conjugal rights irrespective of the sexual activities of the husband. At times, some women are raped by their sero-positive HIV husband (Shisanya 1997:11). Haddad agrees with Shisanya that:

> (Bride price) may also contribute to women's vulnerability. Conversations with women indicate that they are often treated by their husbands as if they are "owned" because they paid (bride price) *lobola* in order to marry. This practise is a double-edged sword for African women because at the same time, if *lobola* has not been paid for them, they could be considered "cheap." This too can lead to abuse by their husbands. Abuse extends to their sexual relationship with their husband expecting sex on demand. Requesting the use of condom often evokes anger and suspicion, so all too often women feel unable to insist its use during intercourse (2003:150).

We agree with this view because the pervasive threat of physical violence or divorce makes women to surrender to unsafe sex with their husbands (Freeman 1996:42). Unfortunately, those women who suspect that their husbands might be HIV positive find it difficult to protect themselves from the virus through the use of condoms because, in Kenya, the men often decide whether or not contraceptives should be used (cf. Rono 1998:5; Muvandi 1995:4). Coleman (1996:5) observes that, "by encouraging discussion of sexual behaviour, independent for women in sexual relationships and promoting condoms and monogamy, many of the messages of the HIV and AIDS intervention challenge the accepted structure of society, and are therefore rejected." What is clear is that although condoms are issued freely by the Kenyan government and are found in most health clinics, bars and lodgings, some communities in Kenya discourage the use of condoms as an effective tool against the spread of HIV and AIDS (cf. Mati 1997:22; Rono 1998:6). Besides, female condoms are unavailable in most chemists in Kenya and they are not dispensed freely in public toilets and hospitals like male condoms.

Other cultural practices that facilitate the spread of the HI virus in Kenya are wife guardianship[71], levirate marriage, ghost marriage,[72] bed warming and widowhood rituals (Kahindi 2002:40). As a way of caring for widows, the Luo community of western Kenya practise levirate marriage, besides bed warming and "washing ceremony" (Kawango1990:4). Such a practice is not only uncivilized but also poses a health hazard. Nevertheless, this is an accepted customary practice in many communities in Kenya. The widow of a deceased brother or next of kin is allocated to or inherited by a younger brother to provide livelihood for the widow and her children.[73] In the era of the HIV and AIDS pandemic, the above practice is a big health hazard especially where sexual contact is mandatory. This is because the ritual becomes the avenue for transmitting the HI virus from

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[71] The term *widow guardianship* is used in this study as opposed to wife inheritance because a male relative takes over responsibility for the widow and her offspring but this person is only a protector and a provider and not a husband since the widow remains the 'wife of the deceased person - wife of so and so." Interestingly, the children born out of the union belong to the deceased and not to the protector; hence, the relationship does not qualify as marriage.

[72] Ghost marriage is also known as sororate marriage. In this marriage a barren woman may ask her sister to be a co-wife with her so that she can have children for the man's clan and remove shame of childlessness that would otherwise fall on her family and clan. Likewise, a Ghost marriage may be entered into if a man dies without children and the clan finds a wife for him to "marry" so as to provide children for him. Further, if there is no male to inherit a widow, she may be treated as a "man" and allowed to "marry" a "wife." Whatever children the later may have through sexual liaison with other men are counted as the widow's children and she is considered their legal "father." This is also know as women marriage. Certainly, such marriages are recognised as ethical in African context because of the purpose they serve (see Magesa 1997:141).

[73] Magesa (1997:140-141) narrates of how a young single man went to a Catholic priest to be united according to the Catholic ritual of marriage with sister-in-law after his brother died. The priest agreed on one condition, that he should never marry again, as his sister-in-law will now become his legal wife in the eyes of the church. Even though the young man agreed, signed all the forms and the marriage was solemnised after a few months the man came to see the priest wanting to marry another young woman. It was observed that in his mind, he had remained unmarried because the woman with whom he had been living with as his wife traditionally is regarded as the wife of his deceased brother. He now wanted a wife and children of his own. Hence, showing the paradox of levirate marriage in Africa.

a sero-positive ritual performer to a sero-negative widow or vice versa (Njau and Njeri 1997:5).

Furthermore, in some Kenyan communities, when the husband dies the widow loses the family income and possessions. Since most people do not write a will, this woman is dispossessed unless she is inherited as described above. What is hurting is that in some cases, the widows who were HIV positive could be disinherited by their fathers-in-law as punishment because they are accused of causing the deaths of their HIV positive husbands. Thus, such widows are left with numerous problems before they also succumb to death. Of course, it is known that a widow whose husband has died of the HIV and AIDS related complications can easily transmit the virus to the ritual performer. As a result, this ritual performer can then infect his innocent wife thereby subjecting her to the HI virus.

Due to the fear of contracting HI virus, some relatives of the deceased hire professional cleansers to engage in sex with widows. Describing this new phenomenon among the Luo of Siaya District, Ocholla-Ayayo notes:

> A '*jakowiny*', a sexual perverse, or psychopath capable of doing what normal human beings cannot do, is persuaded to perform cord cutting sex between a widow and the deceased husband so that the widow may be free to re-marry or be inherited. Because of payment of a cow, goat or money to date, there are many *jakowiny* cleanser who goes from one village to another where a man has died (1996:4).

"Professional cleansers" emerged in the 1990s when deaths from the HIV and AIDS pandemic in Siaya District were at a peak (Ambasa-Shisanya 2004:24). As a result, most educated men were afraid of having sexual contact with widows and because the Luo tradition dictates that the widows must be freed from the *'okola'* bondage, 'cleansers' sprung up to free these women. If the family suspects that the husband's death is related to the HIV and AIDS, a professional cleanser is hired and given alcohol; he is then taken to the widow's house to perform a sex ritual on her. In most cases, family members would supervise the ritual to ensure that the penis penetrates the widow's vagina to effect the cultural cleansing (Ambasa-Shisanya 2004:24).

The reason for widowhood rite in the Luo community is that, it is believed to set the widow's offspring culturally free to construct houses, marry, plant and weed their farms (Muvadi 1995:30). In fact, farms among the Luo were planted in the order of seniority and a son

cannot plant before his mother. Therefore, sex rituals are performed to symbolise fertility and they are set to precede the planting process (Kawango 1998:20). Kawango (1998:20) observes that many widows practise the widowhood rites as a survival strategy to protect their property; otherwise, if they refuse, the community can take their property.

However, in the contemporary society, this institution is known to be problematic for it creates social tension among women, places economic burdens on widows and, sometimes, leads to physical violence against them (Kawango 1998:20). Due to the fact that widows require cleansing as a pre-requisite for incorporation into their society and as a means of neutralising the assumed cultural impurity, their decision to go through 'cleansing' is culturally compelling rather than self-willed (Ambasa-Shisanya 2004:24). Again, the use of drunken strangers as sexual partners seems to violate the widows' right of association and protection.

From the above, it can be construed that, widowhood rites promote the transmission of the HI virus; for when a professional cleanser is infected, it is possible to transmit the HI virus to the other widows on whom he performs the rite. On the other hand, widows whose husbands were HIV positive could easily transmit the virus to their ritual performers and other social partners, if the couple was not discordant. Therefore, a contextual model for pastoral counselling is vital as widows need to be educated and given economic empowerment. Besides, there is a need to improve legal structures so that widows can inherit the property of the deceased, directly, instead of owning it through their sons as many people do in Kenya. This will prevent widows from risking their health for the sake of property. Again, the human rights of mentally impaired persons need to be respected so that they are not abused by relatives to act as professional cleansers for survival.

Of concern is the way some African cultures prefer sons to daughters and favour boys against girls (Mati 1997:13). Of course, this is one of the reasons why women are forced to have frequent pregnancies some of which are unplanned. The culture also promotes the need for large families and the wife's worth and status are often judged by the number of children she has brought forth regardless of the effect this may have on her health and that of the children (Mati 1997:13). Moreover, in many Kenyan communities, women are traditionally regarded as care providers for those who are sick. This together with the care of big families makes women to be overloaded with work in the context of the HIV and

AIDS pandmeic. Phiri (2003:15) observes that the advent of the HIV and AIDS pandemic have "increased women's home workload as (HIV and) AIDS patients require home-based care for a long time." Furthermore, the culture dictates that women should care for those who are sick at home, thus placing them at high-risk of HIV infections.

Due to lack of knowledge on how to protect themselves, some women have been exposed to the HI virus when nursing victims at home (Mitula 1995:24). Another reason is that in most homes, there are no gloves to wear when handling fluid from a patient and this may expose others to the HI virus if they have an opening in their skin. This is evident especially when they perform indigenous midwifery because some villages in Kenya do not have clinics, hospitals or dispensaries (Mitula 1995:24). As a result, these women handle blood from many patients who may be HIV sero-positive. Yet most of them either do not use surgical gloves or re-use a pair every time they handle a patient. In the event of a cut on their fingers, these indigenous midwives are at the risk of being infected with the HI virus (Mitula 1995:24).

With the increase of the HIV and AIDS pandemic in Kenya, parents now consider taking their sons to the hospital and clinics for circumcision. Nevertheless, many people still regard the practice as going against the tradition even though they know that it is done to avoid the danger of non-sterile or shared blades being used on their sons. Again, initiation as a rite of passage is practised by all the forty-two communities in Kenya and it is known to facilitate the spread of the HI virus (Kahindi 2002:39). The rites are performed to initiate the youth into adulthood and, subsequently, into marriage.[74]

Such rites include the removal of the six frontal teeth among the *Luo* people, putting tattoos on the body among the Turkana in central Kenya, the practice of male circumcision among the Agĩkũyũ, Abgusii, Maasai, Taita, Taveta, Kamba, etc, and among the Wa-Meru, to the practice of both male and female circumcision- or clitoridectomy popularly called female genital mutilation (FGM). Interestingly, these rites of passage are practised by both Christians and non-Christians even when their church leaders are aware that in some cases unsterilized instruments are used (Kahindi 2002:39). The Maasai and Abgusii practice the

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[74] This topic of initiation will be re-visited, in the chapters which follow, with special reference to Agĩkũyũ community.

above rites in addition to tattooing the body which goes with the health risk of septic wounds and cross infection (Kahindi 2002:39).

In fact, clitoridectomy is recognized as the most ruthless initiation rite because of the serious health risk to women resulting from the use of unsterilized instruments, haemorrhages, cross-infections, contracting the HI virus, and difficulty during delivery due to scarification. The implication of the procedure is that the girl is now mature, ready for marriage and for sex. For instance, among the Maasai, a girl is ready to be married soon after circumcision (cf. Kahindi 2002:39).Given that most girls get married after this ritual, it follows that if they contract the HI virus in the process, then, they automatically pass it to their respective husbands (Okemwa 1993:24).

Again, their offspring would equally stand a high chance of getting the virus during the pregnancy, labour and delivery, or breastfeeding (Mother to Child Transmission-MTCT) since the culture dictates that a mother must breast-feed her child. It is no wonder that the MTCT has become one of the most challenging problems facing the country in her fight against the HIV and AIDS pandemic. This is because a woman infected with the HI virus is capable of passing it to her baby. Without treatment, around 15-30% of babies born to HIV positive women become infected with the HI virus during pregnancy and delivery. A further 5-20% becomes infected through breastfeeding (Mitula 1995:24).

It is reported that in 2008, around 430,000 children under 15years in the world became infected with HIV, mainly through MTCT (Sunday Nation, 31st Oct 2010:4). It is also reported that by October 2010, the rate of MTCT in Kenya was 37 per cent. This is despite the availability of methods that can halt infections of children at birth. Still in 2010, there were over 22,000 children infected with HI virus annually through MTCT and an overall of 1.4 million people were a reported to be living with HI virus of which 81,000 were pregnant women. As with the previous records, half of the infected children lived in Nyanza and Rift Valley provinces. Astonishingly it is noted that even though there was an increase of MTCT programmes in 2008, 2009 and 2010 with services being offered in 4,000, out of 4,500 antenatal care centres, the rate of MTCT was still very high (Sunday Nation, 31st Oct 2010).

Now it has become clear that, an effective Prevention of Mother-To-Child Transmission (PMTCT) requires a three-fold strategy: (a) Preventing HIV infection among prospective

parents thus making HIV testing and other prevention interventions available in services related to sexual health such as antenatal and postnatal care *(Puerperium)*. (b) Avoiding unwanted pregnancies among HIV positive women hence providing appropriate counselling and support to women living with HIV to enable them to make informed decisions about their reproductive lives. (c) Preventing the transmission of HIV from HIV positive mothers to their infants during pregnancy, labour, delivery and breastfeeding. Thus the integration of HIV care, treatment and support for women found to be positive and their families. (d) The use of antiretroviral drugs, safer infant feeding practices and other interventions. However, the biggest challenge facing the PLWHA in Kenya is that only the district hospital gives anti-retroviral drugs, therefore the majority of women may transmit the HI virus to their children.

Apart from the MTCT and dangers, which arise from the cultural rituals as we have seen above, in some communities, the women are instructed to apply desiccating vaginal agents to give men maximum sexual satisfaction (Anarfit 1994:7). These desiccating vaginal agents include twigs, herbs, chemicals, drugs and cold water and they are reputed to create friction and vaginal tightness during sexual intercourse (Femnet News 1994:6). Haddad (2003:153) contends that in South African the practice of "dry sex" is common in many communities and, of late, women use substances such as methylated spirits or vinegar to dry their vaginas at the request of their husbands for "greater pleasure." The above practice is dangerous because it creates more friction during sexual intercourse and wears down the vaginal lining of the girls or women, thereby, making them easily susceptible to the HI virus infection. Additionally, the natural antiseptic contained in the vaginal secretion is no longer available to combat Sexually Transmitted Infections (STIs). Besides, this practice makes condoms tear easily due to increased friction.

Another cultural practice, which perpetuates the spread of HIV and AIDS in Kenya, is the requirement of a girl to be virgin before marriage (Okemwa 1993:41). Although "virginity testing" is not a common practice in Kenya, most of the community put pressure on girls to be virgin before marriage hence increasing the risk of contacting the HI virus especially when the girls opt to have anal sex as a way of guarding their virginity (cf. Haddad 2005:35). Likewise, the practice that allows men to have sex rights to their brothers' wives is another factor that influences the spread of the HIV and AIDS pandemic in Kenya. Mbiti (1969:147) notes that due to the African communal system, a person may have hundreds of

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brothers and their wives are seen as potential wives of all.[75] This sex practice within the community has really accelerated the spread of the HI virus in Kenya. Again, the numerous food taboos associated with cultural practice also obstructs the fight against the HIV and AIDS pandemic. Such taboos may prohibit a person from taking some types of food which may be nutritional and well balanced even though good nutrition and balanced diet are very crucial to the health of the PLWHA.

Sexual intercourse with a virgin is another cultural misconception, which has perpetuated the spread the of the HI virus in Kenya. Some communities believe that having intercourse with a virgin can cure sexually transmitted diseases such as "chronic blennorrhagia" (Setel *at al* 1999:24). According to Govender (1999:12), even in Europe at one time, people believed that sex with a child provides a cure for syphilis. Govender (1999:12) recalls that, as early as 1827, quack doctors in Europe especially in Liverpool kept special lodges to provide this cure. Some communities in Kenya, as in some parts of South Africa, still believe that sex with a virgin brings good luck (Green 1994:4). The horrifying upsurge in the belief has led some men to rape babies, subjecting them to the HI virus. It is also evident that some people have the perception that schoolgirls cannot be HIV positive and, therefore, they pose no threat in terms of the HIV infection. This belief encourages prostitutes to wear school uniforms in their pursuit of clients (Green 1994:6).

Another social factor that facilitates the spread of the HIV and AIDS in Kenya is gender inequality. Geeta Rao Gupta (2002:2) describes gender as "a culture-specific construct." She further explains that "there are significant differences in what women and men can do or cannot do in one culture as compared to another." Gupta argues that:

> There is always a distinct difference between women and men's role, access to productive resources outside the home and decision-making authority. Typically, men are seen as being responsible for the productive activities outside the home while women are expected to be responsible for reproductive and productive activities within the home: women have less access over control of productive resources than men - resources such as income, land credit, and education (2000:2).

In other words, gender does not distribute power equally between men and women. In line with this, Dube laments that:

> Men are constructed as public leaders, thinkers, decision-makers and property-owners. Women are constructed primarily as domestic beings, who belong to the home or in the

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[75] Although these sexual practices are slowly dying out among the Agĩkũyũ, some communities still hold on to them.

kitchen. They are mothers, wives, dependent on the property of their husbands, brother or fathers. Women are constructed to be silent, non-intelligent, emotional, well behaved, non-questioning, obedient, and faithful to one man - husband, boyfriend or live-in partner. And so we think of a good woman as one who takes good care of her home, children, husband, who hardly questions or speak back to her partner and who remains faithful to him. A good man is one who is fearless, brave, a property-owner, a public leader. At the centre of gender relation is the concept of power and powerlessness (2003c:87).

The problem with this understanding is that it uses gender to disempower women who constitute half of the population in the world thus sidelining half of humanity in the world. It is on these grounds that Purvis (1996: 125) contends that "women are not subjects in the same way that men are. A woman is a derivative concept that exists only as an object of a man's attention."

As we have noted above, patriarchy is well entrenched in Kenya's socio-political structures and economic systems, which, in one way or another, have spearheaded the spread of the HI virus. The patriarchal culture involves the domination of women by men, thereby, institutionalising poverty in women. Reddock (2000:35) believes that women are created by God, not to be dominated by men, but both are to complement one another. Haddad (2002:99) observes that the "African women have been surviving against the odds for centuries." Olivia Harris and Maureen Mackintosh agree with Haddad as they argue that "patriarchy is socially constructed and not biologically determined" (Reddock 2000: 40). Surely, it is impossible to fight against the HIV and AIDS pandemic when patriarchy continues to inform and influence the religious, socio-economic and political structures.

We support the view of Harris and Mackintosh that patriarchy is socially constructed and not biologically determined (Reddock 2000:37). The same view is expressed by Ogundipe-Leslie (1994), Oduyoye (1986, 1992, 1995, 2001), Njoroge (1996, 1997, 2000) and recently by Phiri (1997a,1997b, 2004). It has been noted that patriarchy in Kenya is evident in cultural, political, religious, social and economic systems and structures (see Njoroge 1996, 1997, 2000). In this case, it involves men dominating women, thereby, hindering authentic growth in many Kenyan communities. Surprisingly, it is dominant in most church denominations in Kenya, yet patriarchy does not facilitate social or individual progress[76] because it is based on insensitivity to gender (Ogundipe-Leslie 1994:30).[77] It amounts to

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[76] Molara Ogundipe-Leslie further notes that "man does not want to abandon" patriarchal attitudes and feelings of male superiority because "male domination is advantageous to him" (1994:35).

[77] Maria-Christina Ventura observes that the exercise of deconstruction involves questioning and confronting theology, which has traditionally been defined, in terms of one culture, as reflection of God, who is not only masculine, but also hierarchical and absolute.

rewarding a person or judging a person by the content of his or her gender as opposed to rewarding on account of the content of the character of the individual.[78]

Louw (2008:366) argues that patriarchalism is the product of four interlocking premises. First is *male physical strength* as part of intended natural law; and the second is *families and societies*, which are naturally based on aggression, domination, procreation and spouse and child protection. The third is *property, production and the distribution of goods* as the natural domain of men while the fourth is *male superiority, dominance and privilege* as part of religious revelation. He notes that these four interlocking justifications are based on biological, cultural, economic and religious criteria, which form the cornerstone of patriarchalism (Louw 2008:366). He further affirms that the problem with these premises is that they feed oppressive behaviour and social structures and lead to the domination of one gender over the other (Louw 2008:366). As a result, men use power, control and dominance over women, girls and children, which, in fact, represent "abuse of power, male controlling in intimate relationship and lead to male violence" (Louw 2008:366). In a way, women and girls experience physical, visual, verbal or sexual abuse thus creating threat, invasion and assault to them.

It is easy to identify with Brigalia Bam's amazement at the way men tend to rediscover their African traditions only when it pertains to women, even though they are quite willing to allow the old ways to be transcended on almost every other issue (Bam 1991:367). Since culture can be reformed, Christians need to lead others in transcending certain traditions such as patriarchy, as has been done in other issues. Thus, patriarchy is a concern because it is impossible to fight HIV and AIDS adequately while patriarchy continues to inform and influence the trend of things.[79]

In fact, women are more vulnerable to the HIV and AIDS than men (WHO 2003:1) because they react differently to health conditions due to factors such as poverty, economic dependence, limited power over their sexual and productive lives, and inadequate access to

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Therefore, it involves breaking down the elements of traditional theological thinking in order to analyse them, destabilize them and disqualify them from speaking for all people and all cultures. However, as she further notes, deconstructing or breaking down offers an opportunity for reconstruction, working out new models that "can subvert the racist dynamic present in traditional theology and the culture to which it belongs, so that hierarchies cease to exist."
http://www.wcc- coe.org/wcc/what/ipc/echoes/echoes-17-06.html (8th April, 2010).
[78] The words are attributed to the Civil Rights leader, the late Martin Luther King Jr. (1929-1968), when he expressed his dream that his four little children will be judged by the content of their character and not by the colour of their skin.
[79] This debate will be revisited in chapter five where we will also look at how patriarchy is entrenched in the ecclesial structure of the Anglican Church of Kenya.

safe water and sanitation facilities (Dube 2004a:8-9; 2003a:72-88). This is over and above the economic, legal and social inequalities between the two genders (Dube 2004a:8; 2003a:78-79). This point is true because the inability of some women to meet their basic needs and to provide for their children makes them to engage in prostitution; thus, risking their lives in order to survive (cf. Dube 2004c:4). In Kenya, majority of men migrate to urban areas leaving their poor wives in the rural areas, unaided, impoverished and with children to cater for. This clearly shows that the church and other social institutions have a duty to address the issues of the HIV and AIDS pandemic.

Sadly, some other cultural practices in Kenya, as in many other countries in Africa, facilitate the spread of the HIV and AIDS through stigma and discrimination (Bate 2003:25). UNAIDS notes that:

> Stigma is harmful, both in itself, since it can lead to feeling of shame, guilt and isolation of people living with HIV, and also because negative thoughts often lead individuals to do things, or omit to do things, that harm others or deny them services or entitlements. Hospital or prison staff, for example, may deny health services to a person living with HIV and AIDS. Or employers may terminate a worker's employment on the ground of his or her actual or presumed HIV-positive status. Families and communities may reject and ostracise those living or believed to be living with AIDS. Such acts constitute discrimination based on presumed or actual HIV-positive status and violate human rights (2000:10).

Definitely, discrimination occurs when a distinction is made against a person that results in his or her being treated unfairly and unjustly on the basis of their belonging, or being perceived to belong, to a particular group. In many communities in Kenya, the PLWHA are often regarded with shame. The belief that the HIV and AIDS infection is a result of witchcraft has caused stigmatisation of and discrimination against those living with the HI virus. The images of HIV and AIDS created in the Kenyan media and television in early 1980, which suggested that HIV and AIDS is a "woman's disease, American thing and gay plague" still create the HIV and AIDS related stigma and discrimination.[80] In fact, unlike many other sexually transmitted infections, the HIV and AIDS were first perceived as the disease of "outsiders." In many communities in Kenya, the HIV and AIDS are viewed as diseases of gays in Europe and Australia and closely related to the United States of America. People link them with weakness of family structure, liberal social values and moral decline in these countries.[81] In order to curb the injustice of stigma, we need to explore its root cause so as to evaluate how deep it is entrenched in our social and religious systems. It is only through

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[80] http://www.aidssalliance,org/sw45398.asp (8th April, 2010).
[81] With the passage of time, most countries in the world are now associating HIV and AIDS with Africa South of Equatorial Forest.

a clear understanding of the root causes of stigma that proper action plan can be put in place to combat it. According to UNAIDS:

> Stigma is linked to power and dominion throughout society as a whole. It plays a key role in producing and reproducing relations of power. Ultimately, stigma creates and is reinforced by social inequality. It has its origins deep within the structure of society as a whole, and in the norms and values that govern much of everyday life. It causes some groups to be devalued and ashamed, and others to feel that they are superior. For example, long-standing ideologies of gender have resulted in women being blamed for the transmission of sexually transmitted infections or HIV. This has influenced the ways in which families and communities react to the sero-positive women. Many are blamed for the illness from which they and their husband suffer. [82]

The fear of being infected by the HI virus and that anyone with AIDS will die have led many people to stigmatize the PLWHA. Edward Philip (2006:330) describes stigma as an unhealthy attitude, which discredits the basic human integrity of the person in society due to a condition or sickness to which he or she is subjected. In this case, a person is perceived as "less than" the rest of society. Further, he notes that a number of factors contribute to stigma. These include the notion that the HIV and AIDS are life-threatening diseases, the fear of contracting the HI virus, and the association of the HIV and AIDS with a promiscuous behaviour as in that of commercial sex workers. Other factors are the belief that the HIV and AIDS are contracted through immoral behaviour and the moral judgment by some religions and societies that the HIV and AIDS are punishment from God (Philip 2006:330).

Indeed, judgementalism and rumour-mongering are classic examples of how the PLWHA are labelled as immoral people since one of the ways through which the HI virus is contracted is through sexual behaviour. Louw (2008:401) observes that, "With a society, the question as to how the person became infected by the virus, often remain unmasked for infection as such already implies a stigma...." even the question of how the HI virus was contracted is "part and parcel of the problem of stigmatisation."

We support this view because comments that the person must have been promiscuous are common in Kenya. Of course, the PLWHA might not hear these things directly from the community but they are aware of the common attitudes because, in the first place, they probably had the same attitudes before they became aware that they are HIV positive. In this case, the 'stigmatizer' now becomes the stigmatized as the Agĩkũyũ would say, *Karĩ itara gathekaga karĩ riko* (this simply means, the firewood laughs at the one burning).

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[82] UNAIDS - http://www.unaidsstigmatasation.org.htm (10th August 2007); cf. (Dube 2004c:24).

Philip (2006:329) notes that stigma is a virus of the mind and soul that infects and destroys not only those who are stigmatized but also the stigmatizer. Generally, stigmatization results from ignorance of the HIV and AIDS pandemic. For instance, we have met some people with ungrounded fear and anxiety and, consequently, prejudice that made them to think that any association with an infected person will spread the infection.

Some people still assume that shaking hands, hugging or sharing utensils with an infected person can spread the virus. In fact, ignorance of how the HI virus spreads is also responsible for stigmatization. It is evident that there are many ways of contacting the HI virus other than through sexual promiscuity. In any case, a sexually responsible person may become infected through other means such as blood transfusion. A person may even have been infected sexually but through an unfaithful spouse or through rape. How can one blame such a person? The implication of this is that stigmatization of the PLWHA elicits self-righteousness. The person who stigmatises another on the basis of the infection assumes that the other person is a greater sinner and should, therefore, not be associated with. Stigmatization of the PLWHA and their families in Kenya is based on a false notion that "we are the people; they are less human than us." It is a narrow-minded attitude that thrives on deception and uncontrolled hate of the PLWHA and their families. Yet it is well known that such an attitude is against the principles of love as exhibited by Christ (Mk 12:28-31). This is because stigma encourages hate as opposed to love, exclusivity as opposed to inclusivity and dismissiveness as opposed to accommodativeness. It is a vice that needs to be rooted out of our communities.

2.7. Religious factors

The teachings and the practices of some religious denominations have perpetuated the spread of HIV and AIDS in Kenya. Since the HIV and AIDS were first detected in Kenya, the pandemic has created a dilemma for religious groups. This is mainly because of the way the HI virus is transmitted from one person to another, and because almost 90% of the HIV and AIDS cases in Kenya are transmitted through sexual intercourse, it becomes a challenge to religious communities. Masenya (2003:124-125) blames some church denominations for using andocentric interpretations of the Bible which disempower women on the issue of the HIV and AIDS. The church in Africa has also been blamed for remaining the supporter of patriarchy and male privilege (see Chapter five). On this issue, Njoroge and Kanyoro (1996:2) lament that African women are groaning in faith. Similarly, Dube (2004a:24;

2004c:4); Haddad (2003:149-157) and Phiri (2003:12-14) affirm that the issue of the HIV and AIDS pandemic has intensified the tension that surrounds the religious attitudes to sexuality. In their research, KAIS (2009:49) reveal that the religious groups in Kenya are not free from the HIV and AIDS pandemic. This explanation is illustrated in the *figure 9* below.

Figure 9: HIV prevalence among women and men aged 15-64 years by religion in Kenya in 2007 (Adopted from KAIS 2009:47)
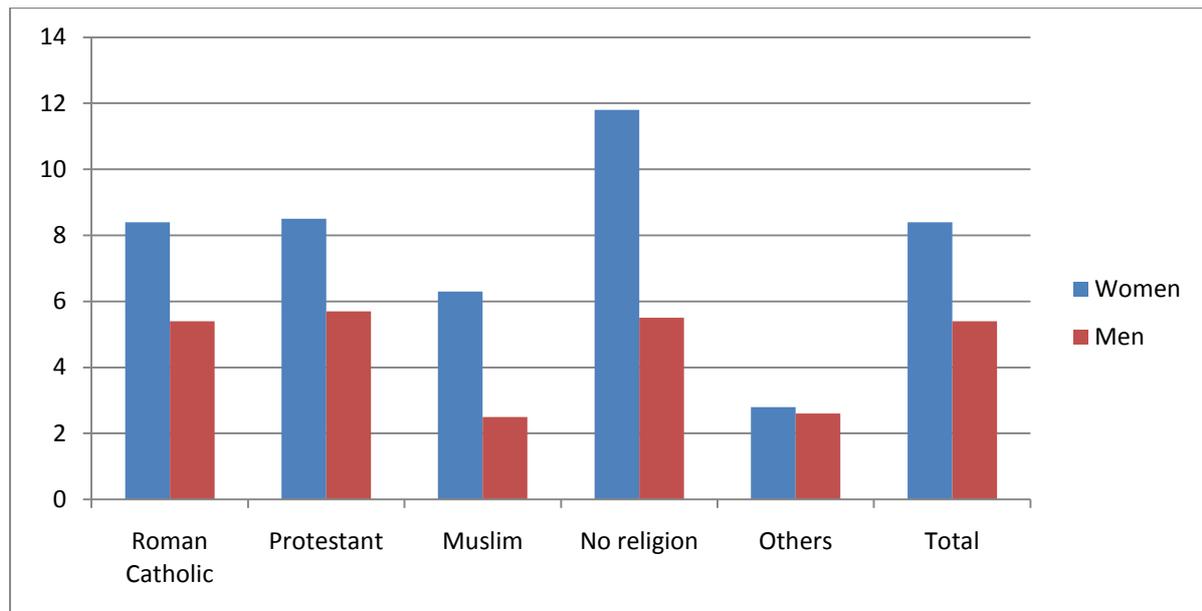
KAIS (2009:49) show that HIV prevalence among women across religious affiliations and among men in Kenya is as follows: Roman Catholic (5.4%), Protestant (5.4%), other Christian (5.7%), and those with no religious affiliation (5.5%). They also note that while HIV prevalence estimates among Muslim men was 2.5%, it was marginally lower among men who report other or unspecified religions (2.6%) than among men who reported being Roman Catholic, Protestant or having no religious affiliation. In spite of such clear revelations, some church denominations have long maintained a cloak of silence and ambivalence towards some widely accepted preventive measures against the HIV and AIDS especially the use of condoms (Haddad 2003:149). Such silence and slackness in the church compelled Martin Luther King (Jr.) to say that "our lives begin to end the day we become silence about things that matter" (Phiri *et al* 2009:220). King was not alone in blaming the church for her slackness. Before him, Dietrich Bonhoeffer had questioned the relevance of the church of his time after it compromised her ministry to Nazism thus:

> We have been silent witness of evil deeds; we have been drenched by many storms; we
> have learnt the art of equivocation and pretence; experience has made us suspicious of

others and kept us from being truthful and open for intolerable conflicts have worn us down and even made us cynical. Are we still in use? (as cited by Phiri *et al* 2009:220).

Moreover, when some of these church denominations respond to the pandemic, they become reactive instead of proactive. In other words, instead of being active in addressing the issue of HIV and AIDS prevention, some of these churches focus only on care. Until recently, most sermons have been soaked in prejudice, stigma and misconceptions about the HIV and AIDS. Indeed, in Kenya, two concepts surround the reason for the HIV and AIDS.[83] The first is the religious concept that is based on sacred works, while the medical concept claims to be based on medical research. In fact, some church denominations interpreted the HIV and AIDS pandemic as a curse and punishment from God for humanity's sexual excesses and appetite. As a result, some pastors started condemning preventive measures such as the use of condoms for they saw it as justifying illicit sexual relations, which constitute disobedience to God. In this case, they argued that the only way to prevent the HIV and AIDS pandemic is to return to the demands of religion and faith in terms of abstinence. Louw notes that:

> At the beginning of the pandemic in the eighties, theologians responded with a moralistic approach. It was argued inter alia that HIV must be related to immoral behaviour in one way or another. In terms of a cause-effect paradigm and the notion of sinful behaviour, HIV was assessed by some clergy and theologians as a punishment of God (2008:402).

As early as 1994, Louw (1994:13) had warned the church that referring to the HIV and AIDS as a direct punishment from God would be engaging in irresponsible theology. Louw (1994:13) had perceptively argued that the punishment element can only come to the forefront when those involved and suffering accept the responsibility for their behaviour. Louw had realised that such theology in the context of the HIV and AIDS pandemic could only offer the church two possibilities. The first is the causal *explanatory model*, which regards God as an autocratic and unsympathetic despot; and the second is the *hermeneutical interpretive model*, which equates God with suffering (Louw 1994:29).[84]

In Kenya, the moralistic approach is very popular especially in the Catholic Church and among Muslim groups, which discourage their adherents from using condoms as a preventive method against the HI virus and as a family planning device. The policy document released by the Kenya Episcopal Conference (Roman Catholic) on 28th June,

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[83] On the other hand, the proponents of a medical explanation argue that there is not enough evidence to support the belief that HIV and AIDS are a curse sent by God to punish humanity for disobeying God's will. The medical argument is that HIV and AIDS transmission can occur within sexual relationship between husband and wife and it can occur through other means that are not sexual and may, therefore, not be considered sinful.
[84] This debate will be revisited in Chapter Six.

2007 re-affirmed a declaration, which the church formulated in 1987.[85] The Church Policy document states, in part, that:

> ... The only way to fight AIDS was for men to marry virgin brides, and not by "reacting" to the epidemic through "immoral" means. This is why the Church encourages everyone to live in integral sexuality which means behaving responsibly towards others and oneself. Therefore, the Church does not promote the use of condoms as protection against AIDS because sexual intercourse is for the married alone, and using a condom does not make it right in other situations… prompted by the principle of the greatest happiness of the largest number of citizens, guided by the principle of utilitarianism and hedonism. (They) may resort to the unrestricted use of condom (whose efficacy, incidentally, is not infallible) and tacitly encourage promiscuous living. But this is not a question of protective condoms and clean needles only. We have to go to the sources of morality, do a bit of heart-searching, consider our attitude towards human relationships and how sexuality fits into that (Sunday Press Esc, 28th June, 2007).

The above shows that the issue of condom is not only a cultural but also a religious conflict. However, some church denominations such as the Anglican and Pentecostal churches differ from the Roman Catholic and Muslim stance and advocate the use of condoms as a preventive measure in the war against the HIV and AIDS pandemic.[86] In fact, when some church denominations propagate religious beliefs that prohibit their members from using condoms during sexual intercourse, it becomes a danger to them as such church leaders fail to realise that the use of condoms is one way of preventing the HI virus infection (WCC 1997:62).

Although there are some ethical questions raised on the use of condoms, it is very disheartening to see the Roman Catholic Church Bishop and some Muslim leaders demonstrating on the streets of Nairobi, burning condoms and rejecting its use (Daily Nation, 20th April, 2007). Nevertheless, both the Roman Catholic Church and the Muslim communities, like other church denominations, accept that everybody has the right to defend his or her life against the mortal danger. It is, therefore, ironic that these religious bodies refuse their faithful to use condoms when it is clear that when one member of a couple is living with the HI virus, there is a real danger that the healthy partner may contract the HI virus if they engage in unsafe sex. Challenging the above irrationality, Phiri asks:

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[85] On 28th June, 2007, the Catholic Archbishop, John Njue, who is also the chairman of the Kenya Episcopal Conference, maintained that the Roman Catholic Church would not support condom use even for discordant couples. He argued that morality, which is the guiding principle on the Church's position, must be upheld. However, the chairperson of NACC, Prof Miriam Were, argued that prevention is the primary focus and asked the Church to lead in teaching the public how to reduce infection and avoid treatment expenses by using condoms. She noted that some faith-based organisations disagree with the Roman Catholic on its stance on condom use. The two shared a podium on the last day of the first national HIV-AIDS workshop organised by the Catholic Church. It was at the same occasion where the National Catholic AIDS Policy and Strategy Document -This We Teach and Do - was launched. Njue claims that the document would equip the people with the teachings of the church regarding behaviour change, abstinence and fidelity as the measures to control the spread of the pandemic (Bishop Njue is now the new head of the Catholic Church in Kenya and he has been made a Cardinal of the Roman Catholic Church by the Pope).
[86] The Anglican bishops adopted the document entitled "Kanamai Declaration" in 1999. In this document, the Anglican Bishops accepted the use of condoms as one way of preventing HIV and AIDS.

> How do we continue to protect women who are found in such situations if we continue to preach that Christians must not use condoms because they promote prostitution? It is also disheartening when church leaders misinterpret Scripture about a man and a woman becoming one body in marriage as a basis for refusing the use of condoms, when one or both of them are infected, because they need to share the virus and die together (2003:14).

Condemning the use of condoms without giving an alternative can be termed as retrogressive in the war against the HIV and AIDS pandemic in Kenya. Hence, we agree with Dube (2003a:159) that, "what constitutes ethical guidance should be that which effectively helps us arrest the spread of HIV and AIDS."

In our opinion, religious institutions should appear on the frontline of the crusade against the HIV and AIDS pandemic and all religious leaders should close ranks and present a united front. This could be achieved when all religions become open and objective about HIV and AIDS. Denis (2004:73), a Catholic minister and a professor of *History of Christianity*, considers the stance of the Catholic Church that rejects condoms as unjust and a dangerous venture. Denis (2004:66) argues that it is unjust because the church seems not to take the real lives of broken families into consideration and it seems to ignore the real situation of ordinary men and women. Denis (2004:63) is of the opinion that the Catholic Church should re-examine her stand on human sexuality, taking into consideration issues of sexually active youths. Denis's view resonates with that of Dominican theologians[87] who maintain that the Catholic Church should consider the debate about condoms more compassionately. This is in view of the understanding that the condom is not an entirely reliable means of defence, but it does prevent the transmission of the virus in the majority of cases.

It should also be seen as a naive view of interpreting the availability of condoms as a means of encouraging sexual activities. This is because sexual drives respond to different issues and not merely to the presence of condoms. Sexual desires are on the increase even in places where there might be a limited supply of condoms to remind people about the possibility of engaging in sexual intercourse. Sexuality in Africa and elsewhere is shaped by many more issues than the availability of condoms alone.[88]

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[87] *http://www.suntime.co.za/health/aids/dominica.asp* - Badenhorst, M, Denis, P, Keijsper, K and Murove, M. "A Catholic Opinion on Condoms and AIDS" (27th April, 2010).
[88] Although it was reported that abstinence was the main factor in reducing the rate of infection in Uganda, this is now disputed by the results of a study conducted by researcher from Columbia University School of Public health, John Hopkins University, and Ugandan Organisations over a ten years- period in the Rakai district found that people did not really abstain; the number of people reporting engaging in sexual intercourse with two or more partners actually increased from 28% to 35% and the percentage of young people who abstained

Again, while, it is generally accepted that the teaching and preaching of the church on abstinence and faithfulness are powerful moral principles that should be encouraged, the church has been challenged to understand that preaching the message of abstinence and faithfulness as the only method of the HIV prevention may not work in all contexts. For instance, there have been many women and girls who are raped by men in the desperate search for control over them and there are cases where young girls, children and even infants are raped by thugs or even by their own relatives at home, school or the work place, and in the bush or streets. How then can the church preach abstinence and faithfulness as the HIV prevention methods to such people?

2.8. Challenge facing the Anglican Church of Kenya

From the above, it is clear that the church cannot sit down while the government and the NGOs are taking action to protect the most vulnerable in their midst. The involvement of the church in the pastoral care and counselling programmes is crucial in the fight against the HIV and AIDS pandemic for it compromise the human dignity of the PLWHA and their families. It is known that from the time the HIV and AIDs emerged in Kenya, many clergymen have been overworked. This is because, besides, other pastoral duties, they are compelled to visit more PLWHA in their community, conduct many more funerals and attend to grieved families. Sadly, for the first time, in the history of the Agĩkũyũ community, we can see more orphans who are not absorbed by the extended family support system. The situation has compelled the Anglican Church of Kirinyaga to start programmes such as the "*Ũtugi* Children Home",[89] an institution located at Ngurumbani in the Mwea part of the Kirinyaga Diocese, which caters for the orphans in the diocese (Anglican Church of Kirinyaga Synod 2005:25). The above scenario also prompted the Anglican Bishop of Thika to lament that:

> (HIV and AIDS pandemic) today has effects throughout the country and there can be no parish which is absolutely free of the scourge (sic) and the scar it inflicts on families and communities. While the management of the scourge (sic) has improved, the scar that never fades away is the number of orphans in society. Many of these children are left in the hands of aged grandparents. Kenya and a number of other African countries have lost a good number of people especially mothers and fathers (Githiga 2009: 31-32).[90]

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from sex actually declined from 60% to 50%. During the period of the study, the researcher found that HIV prevalence rates declined among men and women, although it increased slightly from men between ages 15 and 24. Researchers attributed the decline to premature death of PLWHA, but the researcher also pointed out that increased condom use might have contributed to the decline- http://www.kaisernetwork.org/dailyreports/hiv – 20th May, 2010.
[89] The researcher has worked as a board member of the *Ũtugi Children Home* in Kirinyaga Diocese from 2002 to 2005.
[90] The Rt. Revd Dr Gideon Githiga, the first bishop of Thika, is among the few Kenyan Anglican bishops engaging in the war against HIV and AIDS. He is of opinion that the vicar should be the first to reach to the orphans and PLWHA and their families. (2009:32). For Githiga (2009:32), it is only when the vicar leads by examples that the congregation can emulate him or her.

In addition to the above, the members of the Anglican clergy are now compelled to cater for many distressed widows, who are grieved and bankrupt after spending all their family resources in catering for their deceased husbands. These widows yearn for support, pastoral care and counselling from their pastors and add to the work-load of the clergy. The ageing grandparents are also struggling, often against massive odds, with growing burden of caring for their grandchildren and foster children, besides, grieving the death of their sons or daughters and the remaining children who live with HIV and AIDS. The clergy cannot ignore these old people, pastoral care and counselling need to be extended to them. Furthermore, the clergy needs to help both these old people and those at the last stage of AIDS for they are in dire need of being prepared to die peacefully and with dignity. Another challenge that the church faces is learning how to give pastoral care and counselling to millions of the PLWHA who are experiencing the above stated needs. In other words, the clergy, in this context, are called to give hope and encouragement to millions of people who are encountering hopelessness, anger, despair and fear.

From the above considerations, the work is massive and cannot be done by one particular institution, even though the church has exclusive duties to perform. Therefore, the Anglican Church needs to network and collaborate with other church denominations, governments, NGOs and the private sector who are trying to restore hope to the PLWHA and their families. However, the Anglican Church is better positioned than the rest of the institutions because it is based in every community in Kenya, it has affiliation with families and individuals in every village and, like any other church, it considers every person as created in the image of God (*imago Dei),* thus, giving the message of hope and salvation.

Another challenge facing the Anglican Church of Kenya in her attempt to confront the HIV pandemic is that many of her clergy members are not trained to deal with the HIV and AIDS. Musa Dube laments that:

> Most ministers who are serving now, never learnt about HIV and AIDS in their theological programmes. They were not instructed on HIV and AIDS counselling, care… yet they are expected to stand up to the challenge. They were not instructed in reading and preaching the bible from the HIV and AIDs context. They do not have liturgy that specifically addresses HIV and AIDS (2004a:4).

Dube's observations can be supported because, although all the Anglican bishops, except those appointed recently, in the Anglican Province of Kenya were taken to an HIV and AIDS conference in Mombasa in 1999, few Anglican clergy are well equipped to work in

the HIV and AIDS context. In fact, nearly all the clergy members serving in the Diocese of Kirinyaga have never learnt anything about clinical pastoral care and counselling in the context of the HIV and AIDS pandemic, and only few have done HIV and AIDS courses in their theological college. This means that the majority of the clergy are not trained in the HIV and AIDS counselling, VCT, HIV and AIDS prevention, or the management of HIV and AIDS projects; yet, they are expected to minister in the HIV and AIDS contexts.

In other words, if the members of the Anglican clergy in Kenya are going to confront the challenges posed by the HIV and AIDS pandemic, they must start engaging in studies that can equip them to minister in the HIV and AIDS contexts. As such, they will have to start learning how to minister pastoral care to orphans, widows, grandparents, and the PLWHA. They will have to learn to give pastoral care to the grieved, the dying and those who are faced with hopelessness. Indeed, they will have to learn how to mobilise internal and external resources which will include traditional resources and resources within the church.

Their task will also entail learning how to start and manage *Home Based Care* programmes (HBCs), *Community Home Based Care programmes (CHBCs), Hospice Care (HC)* and to offer nutritional and health programmes. Of course, the church will need to begin to write literatures related to HIV and AIDS, engage in HIV and AIDS research, and do biblical study and preaching in the context of HIV and AIDS. Similarly, she will have to learn how to deal with stigma and discrimination and how to mobilise the church to become a caring community, i.e. among other responsibilities.

2.9. Conclusion

The chapter has discussed the context of the HIV pandemic in Kenya and in African, in general. It has identified and diagnosed the reality of HIV and AIDS in the Kenyan context and noted that the pandemic has permeated, practically, every dimension of the Kenyan community life, affecting people of all ages. The chapter has shown how the HIV is transmitted in various ways and that sex and the Mother to Child Transmission (MTCM) serve as the major root. It has further been identified that certain cultural and social practices conspicuously aggravate the spread of the HIV and AIDS pandemic in Kenya. In addition, the spread of the pandemic has been accelerated by social diseases such as poverty, gender inequality, violence, human rights abuse, child abuse, ethnic conflicts/cleansing, national and international injustice, discrimination against women, bad

politics, poorly managed healthcare and the delay of the Moi regime to offer antiretroviral treatment to PLWHA. As a result, there is a high rate of mortality which reflects negatively on education, the care of orphans and the maintenance of a skilled workforce.

The chapter has also shown that some cultural practices in Kenya need to be discouraged and set aside since they add no value to the quality of life or to the human person and, in themselves, contribute to the spread of the HIV and AIDS pandemic. On the other hand, some cultural practices need to be reviewed and improved upon as their application and practice are no longer appropriate but, in principle, they are not dangerous or harmful. Furthermore, some other practices such as *Ũtugi* need to be encouraged and re-enforced because their teachings are fundamental to human values and are not inimical to the prevention of the HIV and AIDS. As the conscience of the society, therefore, the church needs to search for contextual and relevant pastoral hermeneutical keys that can enable her to confront the challenges posed by the HIV and AIDS pandemic.

Finally, the chapter has expressed the need for the church to engage in ecumenicalism and teamwork with the government, CBOs, NGOS and other FBOs so as to offer nutritional and health care. On her part, if the Anglican Church of Kenya would offer pastoral care and counselling to the PLWHA and their families, then she would need to use both the traditional and the Christian resources at her disposal. It is from this perspective that this study proposes *Ũtugi* as practiced in the Agĩkũyũ community as one traditional resource that the Anglican Church of Kenya can use, and we shall turn our attention to this in the next chapter.

CHAPTER THREE
ŨTUGI: A SOCIO-ECONOMIC, CULTURAL AND POLITICAL PERSPECTIVE

3.1. Introduction

The preceding chapter have discussed the HIV and AIDS scenario in Kenya, as well as the ways in which the HIV pandemic is ravaging the Kenyan communities and the factors that facilitating these. The chapter has argued that the church needs to mobilize both traditional and the church resources to fight the pandemic. In a country like Kenya where majority still live in rural areas and adhere to tradition, searching for traditional resources to complement church resources, therefore, becomes of paramount importance. The task in this chapter is to discuss the concept of *Ũtugi* as a traditional resource for fighting the HIV and AIDS pandemic in Kenya. As such, the origin and definition of *Ũtugi* will be investigated as well as the concept of *Ũtugi* in the Agĩkũyũ ancient times and in the pre-colonial and post-colonial periods in Kenya.

Furthermore, the chapter will examine the nature, characteristics, forms and expressions of *Ũtugi* within the Agĩkũyũ culture. It will also investigate the role of *Ũtugi* in the socio-economic, political, cultural, moral and religious life as well as its challenges in a post-modern Kenyan context. In exploring the above, the chapter will first seek to understand the practices of *Ũtugi* within primordial narratives and its role in the Agĩkũyũ life. It will be argued that *Ũtugi* is a profound, authentic, socio-economic, and spiritual Agĩkũyũ resource of enduring vitality, and it is neither an irrelevant relic nor a glamorous romantic re-invention of the past. The chapter is based on the premise that the concept of *Ũtugi* can help the Anglican Church of Kenya to reframe her ecclesial praxis, thus, enabling her to critically address the issues of healing, care, support systems, safety, inclusiveness, embrace, empowerment and unconditional love needed by the PLWHA and their families.

3.2. Agĩkũyũ primordial narratives

 To understand the origin of *Ũtugi* one needs to understand the origin of the Agĩkũyũ community.[91] While there are many theories and schools of thought[92] that reflect on the

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[91] Masamba ma Mpolo (1985:101) argues that the traditional African cosmology is dynamic, for it recognises and integrates the quality of mind and body, magic and rationality, order and disorder, negative and positive powers, and individual and communal consciousness. He claims that, the maintenance of personal and social equilibrium in the midst of this apparent dualism becomes the major role of traditional diagnosis, psychotherapy, medical systems and style of social relationship. Such practise is very clearly attested in the Agĩkũyũ community in Kenya.

origin of the Agĩkũyũ community, the most popular theory is that which is contained in the Agĩkũyũ mythology.[93] The theory not only serves as the key for the interpretation of other similar legends but is also relevant for the investigation of the relationship between *Ngai (*God) and *Gĩkũyũ,* the father of Agĩkũyũ community (Battignole 1984:30; cf. Wachege 1992:6; Kabetũ 1997:1). The Agĩkũyũ or the Kikuyu (as used by most publications) inhabit the region around the slopes of Mount Kenya, Central Kenya (Kabetũ 1997:1), in the present day Kiambu, Kirinyaga, Muraga, Nyeri and Nyandarua counties. However, due to the factors that will be discussed later in this chapter, the community members can now be seen in almost all other provinces in Kenya and, numerically, they are the largest community in Kenya[94] (Wanjohi 1997:3; cf. Wachege 1992:6). According to the earliest pre-historic version of their social lives, which is well documented by various scholars (Cagnolo 1933; Kenyatta 1938; Wachege 1992; Wanjohi 1997), the community believes in *Mũgai* (the Divider, Lord of nature and the universal God*), Ngai*[95] *Mũtugi* (Hospitable God)

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[92] Wachege (1992:8) outlines two schools of thought; one school claims that the Agĩkũyũ community has a Jewish ancestry which can be traced as far as Abacii (Abbysinia in the present day Ethiopia) while the other school claims that the community came from Egypt. Both schools of thought agree that the community migrated through the Meru region and finally settled in *Mukurwe wa Gathanga* from where they multiplied and dispersed to other areas in Central Kenya. While Gagnolo (1933:20) seems to support these schools of thought, we are left wondering whether this thinking was not influenced by the teaching of Christianity.

[93] According to Kunhiyop (2008:11), "myths and legends are traditional stories about something that happened in the past which explains something in the present." They often involve gods and heroic figures; therefore, it is vital to take into account the context in which they originate and the community that produces them if one is to interpret them correctly. As Kunhiyop (2008:110) notes, "failure to do so will give a false and misleading meaning." Indeed, it is interesting to note that in African mythology there is no speculation concerning how God created people or how many days it took God to complete the work of creation. According to Waweru (2007:175), "Africans appreciate God's power of creation through the spirit without being speculative about how long it may have taken God's Spirit to complete creation. So the African understanding of creation is more scientific than the biblical story. It was just a big bang and people came from the ground and unto the ground they shall return, that is all." Waweru (2007:175) also note that the African stories of creation agree with the Bible story of creation, where God's Spirit is referred to in terms of *ruach, neshamah* and *nephesh.* These terms, Waweru (2007:175) states, "can mean wind, breath, air, life, or spirit with reference to God", and they find harmony in the core meaning, like two rhythms played together for a counter point. The mythology makes people understand where they came from and unto whom they will return, but through the spirit. Such myths, Waweru notes, makes people, both in Africa and in the Bible, understand their environment in which they live and their relationship with other creations that belongs to their God (Waweru 2007:175).

[94] By 2009, the Agĩkũyũ community was said to be about 6.6 million people, i.e. of the thirty eight million people in Kenyan, and the 2010 data indicates that the Agĩkũyũ community is 22%, Luhya 14%, Luo 13%, Kalenjin 12%, Kamba 11%, Kisii 6%, Meru 6%, other Africans 15% and non-Africans (Asians, Europeans, and Arabs) 1% - http://www.kenya-information-guide.com/kenya-population.html (Nov 2010).

[95] The Agĩkũyũ are monotheists, believing in a unique and omnipotent God whom they called *Ngai*. The name of *Ngai* is also used by the *Maasai* alongside the word *Enkai*. The Agĩkũyũ*'s* neighbours, the Kamba, also use the name *Ngai* for God. It is interesting to note that God is also known as *Mungu, Murungu,* or *Mulungu* (a variant of a word meaning God, which is found as far south as the Zambesi of Zambia), and is sometimes given the title *Mwathani* or *Mwathi* (the greatest ruler), which comes from the word *gwatha,* meaning to rule or reign with authority. *Ngai* is the creator and giver of all things, the divider of the universe and Lord of nature (Kenyatta 1938:3). God is believed to have given birth to the human community or created the first Agĩkũyũ communities, and provided them with all the resources necessary for life: land, rain, plants and animals. Ngai is also regarded as one who cannot be seen, but is manifest in the sun, moon, stars, comets and meteors, thunder and lighting, rain, in rainbows and in the great fig trees (*mugumo* or *mugumu*) that served as places of worship and sacrifice, and which marked the spot at *Mukurue wa Gathanga* where Gikuyu and Mumbi - the ancestors of the Agĩkũyũ in the oral legend - first settled. Yet *Ngai* is not a distant God for *Ngai* has human characteristics, and although some say that God lives in the sky or in the clouds, they also say that the deity comes to earth from time to time to inspect it, bestow blessings and mete out punishment (Wachege 1992:55). When the deity comes, it is believed that he takes his rest on Mount Kenya and on four other sacred mountains. Thunder is interpreted to be the movement of God, and lightning is God's weapon by means of which He clears the way when moving from one sacred place to another (Kenyatta 1938:4-7; cf. Mbiti 1969:12ff). In this regard, Ochieng (2009:4) reminds us that the creator goddess of the Nilotes who for many years has been worshipped as far as Mesopotamia, India, Australia, Britain and Mexico had ten thousand names; therefore, the Hellenes called her *Myronymos* because of her many names. However, she always insisted that she had only one name. She would have said, "My name is *Achieng, Anath, Aphrodite, Artemis, Asenath, Aset, Asherah, Asiis, Astarte, Astoreth, Athena, Brigit, Cara, Chebet, Dagda, Dana, Demeter, Diana, Enkai, Ereshkigal, Esther, Eve, Friya, Gaia, Hathor, Hawwa, Hebe, Hera, Inanna, Iao Io Ishtar, Isis Khasaya, Leviathan, Mary, Medusa, Minerva, Mumbi, Nyakalaga, Neith, Nephthys, Ninhursag, Ninki Nut, Oestre Onyame, Pandora ,Persephone, Rahab, Semele Sophia, Tefnut, Tehom, Tiamat, Usha, Venus* and so on *ad infinitum.*" By this, the divine sovereign *Maat* argues that in her system – which includes English - the name is always singular no matter how many words are composed in it.

or *Ngai Mũũmbi*[96] (which literary means God the creator) who is said to have created (*Kũmba*) a man (*Mũndu*) called Gĩkũyũ and his wife (*Mũtumia or Mũka*) called *Mũũmbi* (Kenyatta 1938:1-9; Wa Thiong'o 1965: 17; Kabetũ 1997:1).[97] As the myth goes, this couple did not have a son but only nine daughters (Kenyatta 1938:4).[98] Therefore, they became very disturbed as they did not have a male inheritor, and their grown up daughters did not have any suitors to marry them (Kenyatta 1938:5). Having known *Ngai* as *Mũtugi* and *Mũhiani* as hospitable and a giver, *Gĩkũyũ* prayed so that *Ngai* (God) would provide men to marry his daughters (Kenyatta 1938:5).[99] Thus:

> God (*Mũgai)* responded quickly and told *Gĩkũyũ* not to be perturbed, but to have patience and everything would be done according to his wish. He (sic) then commanded him, saying: 'Go and take one lamb and one kid from your flock, kill them under the fig tree *(mũkũyũ)* near your homestead. Pour the blood and the fat of the two animals on the trunk of the tree. Then you and your family make a big fire under the tree and burn the meat as a sacrifice to me, your benefactor. When you have done this, take home your wife and daughters. After that go back to the sacred tree *(mũkũyũ)*, and there you will find nine handsome young men who are willing to marry your daughters under any condition that will please you and your family (Kenyatta 1938: 4).

Kenyatta (1938:4) further relates that Gĩkũyũ's prayers were answered by *Mũgai* or *Ngai* because after he went to the *mũkũyũ*[100] (the sacred fig tree), he found that God had already sent the nine young men. It is from here that Gĩkũyũ invited these young men to his homestead so that they could meet his wife Mũũmbi and his nine daughters (Kabetũ 1997:1). After these young men were welcomed in his home, Mũũmbi and the nine daughters started sharing food and drinks to these nine men (*Gũtugwo*). Prior to that, *Mũgai* had taught Gĩkũyũ what it means to be a *Mundu- Mũtugi* (a hospitable person*)* and the value of *Ũtugi* (the practice of hospitality) or *Gũtugana* (being hospitable) in line with the social customs of the community. In this case, the vulnerable guests or strangers are to be welcomed, given meals, and shown a place to sleep after listening to their stories. Kenyatta (1938:4) affirms that Gĩkũyũ practiced *Ũtugi* by entertaining these young men and being hospitable to them as required by *Mũgai* and as dictated by the above social custom. Hence:

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[96] The person who makes pots is also called *Mũũmbi.*

[97] There is no satisfactory explanation given as to why the first ancestors were called *Gĩkũyũ* and *Mũũmbi*. The only plausible information offered was that a man met a woman who was making pots *(kũmba),* and that this woman discovered that the man was sheltering under a wild fig tree, *Mũkũyũ*. After they got married, they called each other by nicknames, a usual Agĩkũyũ custom, associated with the circumstances of their initial meeting. Thus, the man called the woman *Mũũmbi,* which means potter, while the woman called him *Gĩkũyũ,* i.e. of the fig tree (cf. Kenyatta 1938:3-6; Muriuki 1974:1ff).

[98] The Agĩkũyũ is a Bantu-speaking, agrarian society and is one of the forty-two community groups in Kenya. The Agĩkũyũ community as the most populous people opposed colonialism and fought for Kenyan independence from the British, most notably in the *Mau Mau* Uprising. After the coming of Christian missionaries who accompanied the British colonialists, many Agĩkũyũs were converted to Christianity and, at present, more than 70% of the Agĩkũyũ people claim to be Christians while others continue to hold on to their traditional beliefs and very few joined Islam.

[99] This shows that the Agĩkũyũ are deep religious and every issue such as the need of a woman of marriageable age for a husband are subjected to prayers. This tends to confirm Mbiti's (1969:1) statement that African people are notoriously religious.

[100] The *Mũkũyũ* tree is used as a sacrificing site. This tree has a special significance for the Agĩkũyũ people. It has even been suggested that the name of the people is derived from that of the tree, e.g. *Mũkũyũ,* the tree; *Mũgĩkũyũ, one person;* and Agĩkũyũ, the community (see Kenyatta 1938:257).

> A ram was killed and a millet gruel prepared for their food. While this was being made ready, the youths were taken to a stream nearby to wash their tired limbs. After this, they had their meal, and conversed merrily with the family and then went to bed. Early the next morning Gĩkũyũ rose and woke the young men to have their morning meal with him. When they finished eating, the question of marriage was discussed. Gĩkũyũ told the young men that if they wish to marry his daughters he could give his consent only if they agreed to live in his homestead under a matriarchal system (Kenyatta 1938:4).

From the above, six acts of *Ũtugi* are noticeable, which include*,* welcoming the guests, escorting, washing, eating, sharing of stories, and sleeping, all these are entrenched in the social practice of *Ũtugi.* In addition, the story provides the background of the origin of *Ũtugi* (hospitality), *Ũrumwe (*togetherness) and *Wathani wa atumia* (matriarchy) among the Agĩkũyũ, for during the marriage negotiations, Gĩkũyũ agreed to accommodate these young men who were willing to marry his daughters as his own sons. Subsequently, they married his daughters and continued to stay with him as part of the family. The agreement was reached after the young men agreed to practice *Ũtugi* (to be hospitable to people), live in his homestead in a communal way (*Ũrumwe* - togetherness) and under a matriarchal system, which means they would never lord it over his daughters (Kenyatta 1938:5).

Kenyatta (1938:5) notes that because Gĩkũyũ's daughters were so beautiful, the young men adhered to the conditions stipulated by Gĩkũyũ. They agreed that they would practise *Ũtugi,* live in *Ũrumwe ta andũ a nyũmba ya Mũũmbi,* i.e. live together as the people of the house of *Mũũmbi* (Muriuki 1969:2), and live under the matriarchal system as opposed to patriarchy. Therefore, because *Mũgai* (God) had earlier told Gĩkũyũ that those young men would marry his daughters under "any condition that" pleased "him and his family" (Kenyatta 1938:4), the above practices of *Ũtugi, Ũrumwe,* and matriarchy are acknowledged by the Agĩkũyũ community as models that emanated from *Mũgai,* God (Murage 2007b:45). Even though it can be argued that the young men accepted Gĩkũyũ's condition because they wanted to marry his beautiful daughters, the deed became the custom and way of life of the whole Agĩkũyũ community. On the other hand, one can argue that the young men accepted Gĩkũyũ's conditions after they were overtaken by the extraordinary care, hospitality and kindness which the family had shown to them (cf. Murage 2007b:45).

Therefore*,* both *Ũtugi* and the matriarchal system, which were dictated by Gĩkũyũ, became the pillars of the Agĩkũyũ family, which was composed of the father, mother and children as well as other relatives from one's sisters. Interestingly, this was also the origin of communal life as exhibited in *Ũtugi.* Wanjohi (1997:25-28) reminds us that, to clarify the above

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principles, Gĩkũyũ (the father) divided the land to each of his daughters so that they could cultivate it. The reason for this was that each family was then expected to grow crops so that they would have the resources to practise *Ũtugi* as they interacted with their neighbouring communities. Consequently, the practice of *Ũtugi* began to transcend their homestead and the borders of the Agĩkũyũ community at large. With the marriage of the nine young men to Gĩkũyũ's nine daughters, the Agĩkũyũ community was born (Kabetũ 1997:2).

It is amazing to note that out of these nine daughters, the Agĩkũyũ nine clans emerged, which bore the names of Gĩkũyũ's nine daughters (Wanjohi 1997:25-28). For instance, the Acheera clan got their name from daughter *Wachera*, and the *Agacikũ* clan was named after daughter Wanjikũ. In the same way, the Airimũ clan was named after daughter Wairimũ; while the *Ambũi* clan got their name from daughter *Wambũi* (Cagnolo 1933:16-20; cf. Kenyatta 1938:6; Wachege 1992:7). Furthermore, from daughter *Wangarĩ,* came the *Angarĩ* clan; from daughter Wanjirũ, the *Anjirũ* clan was named; and from Wangũi, the Angũi clan got its name. From the other daughters, *Mwĩthaga* and *Waithĩra,* the *Ethaga* clan and the Aithĩrandũ clan derived their names, respectively (Kenyatta 1938: 4-5; Muriuki 1969:50; Wachege 1992:7; Kabetũ 1997:2).[101]

The narrative above shows that the Agĩkũyũ people were, primarily, a matriarchal society before they changed to patriarchy.[102] Originally, women were heads of their families as opposed to the present situation where men dictate the tune.[103] Again, the narrative shows why the Agĩkũyũ, popularly known as *Andũ a Nyũmba ya Mũũmbi,* i.e. "the people of the house of *Mũũmbi,*"[104] (Muriuki 1969:2) place emphasis on the practice of *Ũtugi* and *Urumwe* in their socio-economic, religious, political and cultural activities (cf. Murage 2007b:45). It is

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[101] Wachege (1992:7) observes that "to the Agĩkũyũ, the ten daughters though ten were not ten but *Kenda Mũiyũru* (nine full*)."* The common understanding of the Agĩkũyũ community is that it is a taboo *(mũgiro)*to give the exact number of one's children and the violation of such a taboo is believed that it would bring a bad omen to the community. Therefore, if the number is seven, it should be understood as eight and if it is eight it means nine, etc.

[102] The legend continues that, in time, the kinship system changed from a matrilineal to a patrilineal one (tracing descent through the male line). It is believed this happened because the women went too far in their domination over men. The men ganged up on the women when they were all pregnant at the same time. They overthrew female rule and became heads of their families. From then on, polygyny (one man with several wives) replaced polyandry (one woman with several husbands) as a marital practice. Nevertheless, the women were able to maintain their names for the main clans. To this day, most women carry one of these names - *Wanjirũ, Wambũi, Wanjikũ, Wangari, Waceera, Wairimũ, Wangũi, Wangechi, Wambũra and Wamũyũ.*

[103] Despite this patriarchal-anthropological socialisation, members of the Agĩkũyũ community refer to one another as *Andũ a Ayũmba ya Mũũmbi* – meaning – "people of the house of *Mũũmbi*." *Mumbi*, the name of the "first" Agĩkũyũ woman, literary means, "the creator" or "the moulder." This implies that there is a "quiet" admiration for women's participation in the society that is not well harnessed so far!

[104] In the Agĩkũyũ community, a family without a male child is seen as coming to an end and, for this reason, the ancient Agĩkũyũ community used to advocate *a* polygamous system of marriage for they feared the extinction of a kinship group. The end of the kinship group means cutting off the ancestral spirit from visiting the earth because there is no one left to communicate with them. Therefore, when a man has more than one wife and many children, it is believed that his soul would "rest in peace with the feeling that, after death, it will not be wandering in the wilderness or lose contact with the earth, for there will always be someone to hold communion with" (Kenyatta 1938:14).

interesting to note that the above mythological story is the only oral tradition that relates to the origin of *Ũtugi* among the Agĩkũyũ. Therefore, it is important here to explain the concept of *Ũtugi* and its role in the Agĩkũyũ socio-economic, political and religious life.

3.3. Meaning of *Ũtugi*

The word *Ũtugi* (from Agĩkũyũ*)* is translated literally as hospitality.[105] It means the creation of a free space where the vulnerable people in the society are welcomed, not only as guests, but also as a part of that community (Gathogo 2006:22; cf. Kenyatta 1938:4, 10, 26, 46, 59). In the Agĩkũyũ custom, it is believed that one cannot be mean with his or her services and be appreciated by the society. According to Kenyatta (1938:179), the idea of sharing everything is strongly emphasised in the upbringing of children, so that when children mature, they are able to find it natural to share love and affection with others and to practice *Ũtugi.* It is said that "to live with others is to share and to have mercy on one another" since only witch-doctors are allowed "to live and eat alone." In view of this, the community believes that a *Mundu- Mũtugi (*a hospitable person) is the one who is generous in providing food and shelter for the needy and services for whoever is in need (Kenyatta 1938:10). In his book, "*The Truth about African Hospitality: Is There Hope for Africa?*", Mutugi (2001:4) demonstrates that *Ũtugi* is deeply rooted in the Agĩkũyũ community. He notes that, "meals are not prepared for the exact number of people at the home, for it is believed that a visitor may come and get his or her share. In fact when a visitor comes, he or she is offered something to eat or drink even if it is only a glass of water" (Mutugi 2001:4).

The above is not peculiar to the Agĩkũyũ community for it is also found in many other African communities who practice hospitality. Mutugi rightly affirms that:

> African hospitality is expressed in a loving way… when a visitor comes, you welcome him or her by ushering him or her to a seat, and then you give him or her something to eat or drink. Then you share or socialize, seek to know, politely the problems or issues or news that brought him or her (2001:4).

Mutugi's view resonates with the Agĩkũyũ proverb that, "Information is never sought from a hungry person" (*Ng'aragu ndihoyagwo ũhoro*). The importance of eating within the practice of *Ũtugi* is seen in many African proverbs and riddles. Among the *Ganda,* a similar proverb says, "Relationship is in the eating together" (Healey and Sybertz 1996:257). This agrees with the *Swahili* proverb, *Kula pamoja nikupendana,* i.e. "eating promotes relationships", and

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[105] The German word for hospitality is *Gästfreundschaft*, which means friendship for the quest, while in Dutch the word *Gastvrijheid* means freedom of the guest (Nouwen 1996:48)*.*

the *Akamba* proverb, "Food eaten together is sweet" (Mutugi 2001:24). On the other hand, the *Luhya* people believe that, "friendship is in the stomach" while the *Shona*, say that, "relationship (kinship) is a gap that is filled by eating" (Healey and Sybertz 1996:257).

These proverbs and riddles further show the importance of food and meals in many African cultures and the importance of sharing in the community. The practice of eating and sharing drinks among the Agĩkũyũ is well cemented within *Ũtugi,* and this fosters community unity. In any case, in the Agĩkũyũ community people never eat alone, neither do they eat in front of another person without sharing what they have. Thus, food sharing is an important feature and symbol of unity in the Agĩkũyũ community and, it is for that reason that, in celebrating the rites of passage such as birth, initiation, marriage or funeral, a feast of celebration and unity is always included. It would be recalled that the Anglican Church of Kenya found it difficult when they attempted to stop feasting during funerals or during the times of bereavements. However, the church could have taken advantage of these rituals to find new vigour of dynamism and solidarity in line with the living theology and cerebration of the Eucharist.[106] The resistance against the church on the issue of sharing food by the local communities show the value placed on sharing by Africans. In his book, "*Things Fall Apart,*" Chinua Achebe describes how an African community celebrates the New Year Festival thus:

> All cooking-pots, calabashes and wooden bowls were thoroughly washed, especially the wooden mortar in which yam was pounded. Yam foo-foo and vegetable soup was the chief food in the celebration. So much of it was cooked that, no matter how heavily the family ate or how many friends and relatives they invited from neighbouring villages, there was always a huge quantity of food left over at the end of the day (1958:26).

The above implies that the sharing of food is an important feature of African communities and is an important symbol of hospitality in Nigeria. As for the Agĩkũyũ, they believe that until you feed the visitor or a needy person you may not be able to converse with him or her as the person may be unable to concentrate and reason without disturbance. Mutugi (2001:4) notes that when a visitor or a stranger comes, she or he is given something to eat or drink even before starting any formal or informal discussion. It is assumed that one cannot seek information from a hungry person nor can a hungry person be able to narrate his or her story. The response to the caution is to feed him or her before you socialize for the Agĩkũyũ believe

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[106] In this case, the dynamic symbols of human solidarity and oneness should be emphasized in these rituals and through the *Eucharist,* the partakers of the elements should be reminded of oneness with Christ, with one another, and the community at large. This can be adopted in Church ecclesiology and in pastoral care of PLWHA.

that *Ndahũtũ ndĩrĩ matũ* (an empty stomach or a hungry person has no ears); and as the English saying goes, "a hungry person is an angry person."

According to the Luo community of Kenya, a hospitable and generous person is called "*Jangwono*"; the word may also mean "a gracious person" (Obengo 1997:53; cf. Gathogo 2006:34; 2008a:279). In his book, *Challenging Issues in African Christianity*, Moeahabo Philip Moila (2002a:4) states that the opposite of the word "*Jangwono*" is "*Ja wooro*", which describes a person as "both greedy and the stingy." For the Agĩkũyũ, the vice that is opposed to generosity and *Ũtugi* is referred to as *Ithũnũ*. Wanjohi (1997:114) notes that such a greedy person is condemned by the community and is perceived as a social reject who is cursed. Commenting on this point, Mutugi writes:

> (*Ithũnũ's* are) highly stigmatised, and were classed with robbers, murderers, prostitutes, witches, sorcerers, the corrupt, defrauders and greedy people of the world, who were regarded as short-sighted and lacking in vision… (for) *Mukari aimaga uhuunii* (A mean person refuses to serve food to one who has eaten) is used to caution against meanness or stinginess in socio-economic life (2001:44).

The Agĩkũyũ refer to a hospitable person as a "*Mũtugi*", which simply means, "a gracious person" or "a hospitable person" (Gathogo 2006:34; 2008a:279). Perhaps this is the reason the Agĩkũyũ refer to *Ngai (God)* as *Mũtugi;* for *Ngai* is perceived as the creator, giver and generous one. The opposite of *Mũtugi* is *Mũndũ Mũkarĩ* (a selfish person); hence, the opposite of *Ũtugi* (hospitality) is *Ũkarĩ* (selfishness). Both *Mũtugi* and *Jangwono* are equivalent to *Mũndũ Mũtana* "a generous person" and when translated into English would mean "a hospitable and gracious person." *Gũtugana* is a reciprocal term (with the suffix –*ano* or –*ana* in the verbal form *Gũtungatana*) which means "being hospitable to one another", and may also mean to give service, as distinct from *Ũtugi*, "hospitality" which at times is used as a synonym. In fact, *Ũtugi* is a noun*, Gũtugo or Gũtugana* is an act or practice of hospitality while *Mũtugwo* is a person who receives hospitality. Hence, *Ũtugi* has the connotation of a person who is hospitable, gracious, appreciating, accommodating, welcoming and loving, and *Mũndu Mũtugani* is a person who gives and shows kindness, mercy, compassion, empathy, sympathy and love. According to Hannah Kinoti (2000a:197), a man who is generous is referred to as *Mũtugi*, a woman is referred to as *Nyatuga*, *mwendo ni irĩ* is the one loved by people, while *Mũũma andũ* is a generous and charitable person and *Mũndu mũthingu* is the one who is righteous.

Above, shows what the word "*Ũtugi*" means to the Agĩkũyũ and its association with gracious, generosity, accommodating, appreciating and loving person have been examined. In this manner, the Agĩkũyũ refer to *Ngai* (God) as *Mũtugi.* This perception is confirmed by Mbiti (1969:45) as he notes that God is also described as "gracious" among Africans. To be a *Mũtugi* (a hospitable person) is, therefore, to participate in *Ngai's* (God's) acts of *Ũtugi* (generosity, accommodativeness, appreciative love). It has an element of liberating humanity and nature; hence, it includes the process of improving the socio-economic and political well being of those in need and those who are vulnerable within the society. It is, therefore, vital to explore the distinctive features of *Ũtugi.*

The first distinctive feature of *Ũtugi* is the act of welcoming or reception. Olikenyi (2001:110) claims that welcoming of the guest by the host is the feature that takes priority over other features in African hospitality. Among the Agĩkũyũ, the most important aspect of welcoming a person is the exchange of greetings; for to bypass a person is interpreted as anti-social, rude and an insult. Thus, each group of people has its own modes of greeting. For instance, the elder and his wife address the children as follow:

Greetings	Response
Father to son: *Wanyũ Baba?*	Son to father: *Wanyũ Baba*
Mother to son: *Wakiawa?*	Son to mother: *Wakiamaitũ*
Mother to daughter: *Wakeri?*	Daughter to mother: *Wakeri*
Father to daughter: *Wakia Mwari?*	Daughter to father: *Wakia Baba.*[107]

As for initiates or members of one's age-group, they would greet one another as, "*Wanyũ Wakine?,"* which means my community sister or brother, and the other initiates would respond, "*Wanyũ Wakine."* While the visitor or guest can use one of the above depending on his or her age, the general greeting is simply*: Wĩĩ Mwega?* (Are you fine?). The response is *"Ndĩĩ Mwega"* (I am fine). The *Swahili* community uses the expression, "*Habari yako",* for "How are you?" The addressee is expected to respond "*mzuri sana*" (I am very fine). Gathogo (2004:86) records different forms of greetings across Africa. For example, the Igbo would say, "*Nno!";* the Ewe, "*Wezo (n)!";* the Yoruba*, "E kaabo*!"; the Mende*, "Seneo*!"; the Igala, *Wolale*!; the Kamba, "*Wimuthokye*!"; the Hausa, "*Sanu dazuwa*!"; the Tiv, *Nsuh de vaan*!"; while the Berber or Swahili would use the Arabic, "*Marhaba!*" (cf. Olikenyi 2001:111). It is noted that all the above forms of greetings, found in various African communities, express the concept of welcome, appreciated, and loved consequently demonstrating the notion of African hospitality.

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[107] While these greetings are common in rural areas, they are less used in urban areas.

Among the Agĩkũyũ and the Taveta, greetings are extensive and formal discussions can only take place after prolonged greetings. Mutugi explains that such greetings continue:

> … Until everybody feels that his or her friend has minded his or her welfare. Otherwise it is always seen as a rude gesture to go on and present your problem or issue to an African without first greeting him or her – as that is seen as disrespect. Now, these verbal greetings are often accompanied by gestures that vary from one community to the other (2001:35).

According to Healey and Sybertz (1996:169), these prolonged greetings are considered essential in African communities for they show that a person is loved and welcomed. As we also have seen above, the Agĩkũyũ extensive greetings are set according to age-group, rank, status and gender and they are accompanied by gestures such as handshakes, crouching, nodding, prostrating, hugging and kissing (embrace). Olikenyi (2001:111) observes that in the Baganda of Uganda as in Tanzanian and the Yoruba, kneeling also accompanies the greetings. However, the most widespread gestures of greetings in Africa are the handshake and embrace.

For Olikenyi (2001:111), such gestures symbolise a friendly and peaceful encounter and they also express humility or respect, which is an essential part of the African life. Olikenyi (2001:112) further explains that hugging each other symbolises friendship, closeness, affection and togetherness. It is interesting to note that, it is only after the greetings that the host can now start preparing or serving the food and drinks to the guest or visitor. Healey and Sybertz (1996:173) point out that the host would abandon every other undertaking in the house so as to pay attention to the guest by serving food and drinks, make him or her to "feel at home", and enjoy a friendly conversation (cf. Moila 2002a: 2ff.).

Another distinctive feature of *Ũtugi* is the collective participation. With such community solidarity practiced by the Agĩkũyũ, the neighbours would express their *Ũtugi* by bringing some gifts to the visitor or the needy. This normally takes place when the neighbours come to greet and welcome the visitor. Olikenyi (2001:113) notes that this communal element in the African hospitality is vital in that the host "believes that whatever affects him or her affects the community and vice versa." Several writers such as Nkemnia (1999:111), Wanjohi (2001:21), Mbiti (1969:106), Mutugi (2001:21), Oduyoye (2001:103) and Mugambi (1995:200) agree that communal participation is a strong feature in dispensing

African hospitality, as hospitality is not dispensed in isolation from the hospitality of the host's clan, tribe or family group. The same can be said of the practice of *Ũtugi;* the Agĩkũyũ are able to strengthen their sense of community through this practice. Magesa narrates how the Nyakyusa community cherished hospitality and sharing:

> A Nyakyusa father is gratified and feels very proud if his son brings many of his friend home to eat. A father will come home only to learn that much of the food prepared for that day by his wives has been eaten by his son and his friends. The more companions his son has, the prouder the father will be. Monica Wilson learned that among the Nyakyusa, "if a young man came home often alone to eat, his father would beat him, or even take a spear and wound him, and when people asked why he would say: "This great fool comes alone to my place again and again." The implication is that such a character isolates a person, that is, it makes one inhospitable or greed (1997:63).

Respect is another important feature that is highly emphasized in the practice of *Ũtugi* in the Agĩkũyũ culture. The visitor is respected in the same way one would respect an elder. This is in line with the Swahili saying, *Heshima si Utumwa,* which means, "Respect is not slavery nor is it a burden"; it is simply a costly undertaking. Gathogo (2004:80) notes that, according to the Tugen of Northern Kenya, "respect" is comparable to a cow, which is for them "a symbol of wealth, life and blessing as a producer of milk, meat and blood." In this case, the Tugen would say, "Respect is as great as a cow" (Gathogo (2004:80). In other words, the practice of *Ũtugi* in the Agĩkũyũ culture calls attention to respect all people.

Another common feature of *Ũtugi* is sincerity and honesty when dealing with one's neighbours. This is true especially in the ancient practice of *Ũtugi*; a genuinely hungry visitor or any person was permitted to enter any farm and eat as much ripe bananas or sugar cane as he or she could provided nothing was carried away from the spot (Mutugi 2001:24). Due to the emphasis on sincerity and honesty, the hungry visitor or stranger would obey the above principle of *Ũtugi,* for failure to do so would not only affect his or her conscience and annoy the living, but it would also annoy the ancestors who, are believed to be exemplary beings, hence, are sincere and honest. Certainly, the sharing of food and drinks is another distinctive feature of *Ũtugi*. As J. Ambe observes:

> Many African communities share food or drinks whenever it is available. He further notes that even an uninvited visitor is warmly welcomed to drink and eat with that person. No one takes unexpected visits at meal time amiss. The feeling of togetherness among the people surpasses all forms of formal invitations (1993:14).

The above statement is in line with the Agĩkũyũ custom in which extra food is cooked to cater for guests who may arrive unannounced as well as their needs. This is because the

community believes that participation in meals strengthens fellowship among members of the community; therefore, it is seen as a positive step for those who are not necessarily from the same family or clan to share food. Mutiso-Mbinda states that:

> Every visitor to a home is always invited to share a meal with the family. Not to be invited to do so is a sign of enmity; not to accept the invitation is an insult or an act of hostility. Even if the visitor has previously eaten, he or she must try to participate in the meal (1984:2).

Mutiso-Mbinda's observation agrees with Mbiti's view that:

> Hospitality and tender care are shown to visitors, strangers and guests. In the eyes of African people, 'The visitor heals the sick' (African proverb). This means that when a visitor comes to someone's home, family quarrels stop, the sick cheer up, peace is restored and the home is restored to new strength. Visitors are, therefore, social healers – they are family doctors in a sense (1976:23).

The above statement indicates that *Ũtugi* transcends the family and includes even strangers or guest. In line with the view of Mbiti and Mutiso-Mbinda, it is worth noting that the arrival of a guest called for a sumptuous meal of welcome in which everyone could participate. Among the Luhya of Kenya, the arrival of a guest called for slaughtering a chicken, the meat of which is highly valued. However, among the Agĩkũyũ, to receive a highly valued guest, a goat or chicken would be slaughtered just before the guest arrived (Healey and Sybertz 1996:174). This automatically means that all the local members of the family would participate in the special meal. In other words, everyone would eat meat, which would not be available on an ordinary day. For children, the time of entertaining guests becomes a special time and signifies a break from some of the house chores (Healey and Sybertz 1996:173).

In turn, the guest would be expected to bring gifts for the hosts and the family members, although it was not compulsory. The gifts could include meat, bananas, millets, sorghum and other types of food, which symbolise building good relationships. Sometimes, the visitor may bring seeds or medicine or anything that can help the family; hence, a Kamba proverb says, "A visitor is the only one who has ripe tobacco" (Healey and Sybertz 1996:174). Among the Waembu, eating together or sharing a meal is taken seriously and it is believed that it is easier to reconcile enemies after a meal.[108] As a result, sharing a meal serves to contain or control anti-social behaviours such as rape or general corruption within the community. Among the Wameru, eating together is said to create, in some cases, permanent friendships. In the

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[108] The Waembu live around Mt Kenya and are neighbours to the Agĩkũyũ community. The ACK Embu Diocese used to be in the larger diocese of Mt Kenya Diocese until 1992 when the diocese was sub-divided and now we have Kirinyaga, Embu, Meru, Mbere and Masabit Anglican Dioceses.

ancient times, this could happen during ceremonies such as weddings and other forums for getting together. As a result, people could do social events like trade together and clan wars would decrease. Similarly, a person could be adopted as a full member of the Agĩkũyũ community from another tribe or clan, after a goat was slaughtered and eaten together.[109] The importance of eating together, as a major feature of *Ũtugi* is explained clearly by Mutiso-Mbinda thus:

> A meal is perhaps the most basic and most ancient symbol of friendship, love and unity. Food and drink taken in common are obvious signs that life is shared. In our (African) context, it is unusual for people to eat alone. Only a witch or wizard would do that. A meal is always a communal affair. The family normally eats together. Eating together is a sign of being accepted to share life and equality (1984:2).

Since sharing food is one of the major features of *Ũtugi,* it is important to consider it carefully when analysing *Ũtugi*. Healey and Sybertz (1996:254) observe that the *Sukuma* people of Kenya have over two hundred proverbs on food, meals and eating. During the time of farming and eating, the proverb that says, "The sorghum in the stomach gives us the strength to farm", is constantly repeated; thereby, affirming the importance of food in sharing and showing love to one another. On the importance of meals, Mutiso-Mbinda adds:

> Occasionally there are times when the daily rhythm of the families in a community is interrupted for the celebration of birth, marriage, initiations and thanksgiving rites. These celebrations call for a feast. At such a feast the symbolism of a meal is much more elaborate and therefore it is a meal on a much larger scale (1984:2).

This agrees with the Swahili proverb that says, "Eating promotes relationships", while an *Akamba* proverb says, "Food eaten together is sweet" (Gathogo 2004:94; cf. Mutugi 2001:24). The Luhya people say that, "Friendship is in the stomach", while the Shona say that, "Relationship (kinship) is a gap that is filled by eating" (Healey and Sybertz 1996:257). Certainly, sharing of food is part of every person's upbringing among the Agĩkũyũ. This is because sharing of food evokes memories of the origin of their being (see Gĩkũyũ and Mũũmbi), and their socio-economic, religious and political activities. Indeed, sharing of food reminds them of the departed ancestors, yet it brings joy, contentment and the spirit of commonality. Needless to say, the space created through sharing of food is that of an extended family setting where the fellowship serves two purposes: to share food and narratives. Therefore, sharing and eating of food is not just a biological activity, but it also

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[109] This debate about *Ũtugi* common meal will help us in understanding why the Anglican Church should appreciate communion that stresses sharing with PLWHA and their families. This is because the sharing of Eucharist with PLWHA in some Dioceses in Kenya has become a thorny issue for some clergy argue that when people share the same cup and use the same chalice, there is a possibility of spreading the HI virus. As a result some Dioceses have resolved to be receiving communion by intuition and others have decided to use different cups (See also Nicolson 1995:36). However, there is no scientific base for this argument. Therefore, the church can learn from *Ũtugi* which sees sharing as healing and stress the sacredness of eating together.

fulfils a cultural, economic, religious, political and social purpose. On the other hand, exchange of gifts, protecting and empowering one another, sharing of narratives, escorting the visitor, giving accommodation (shelter) and showing of love are other distinctive features of *Ũtugi,* which will be discussed in the next three chapters. However, because *Ũtugi* is practiced within the context of household, we now turn to this discussion in the next section.

3.4. Space and place of *Ũtugi*

In the ancient Agĩkũyũ community, the custom dictates that every married man should have two huts; one for his wife's private use (*Nyũmba*) and the other for himself (*Thingira*).[110] It was forbidden for a mere visitor to enter the woman's hut (*Nyũmba*), for it is here the woman and children reside and the house is also used as the space for showing *Ũtugi* to the ancestors spirits (cf. *theoxenic* hospitality). In fact, all aspects of family, religious, and magical ceremonies and sacrifices are performed in the *Nyũmba*. For this reason, visitors or strangers were not allowed to come into this sacred space for fear of *Thahu* (defilement) and misfortune. Kenyatta observes that:

> A woman's hut is considered as the cradle of the family tradition; it has many taboos (*Mũgiro*) which for the harmony and the prosperity of the family, must be strictly observed. Among other things, fire must be lit in the hut every night. The wife is debarred by custom from having sexual intercourse anywhere else but inside a hut. Sexual intercourse must not take place in the day-time, even with her husband, neither it (sic) be performed whilst food is being cooked or food will have to be thrown away, for an act of this nature renders the food unclean and unfit for human consumption. Anyone eating such food will have *Thahu* (defilement) and will have to be cleansed by a *Mũndu Mũgo* (medicine person), for it is feared that unless this is done, disaster will befall such a man (1938:84).

It is not only the *Nyũmba* (woman's hut) which is perceived as sacred but a woman is also viewed by the community as sacred and as one whose name should change after giving birth. For instance, she is addressed as *Maitũ* (my or our mother) or *Nyina* (his, her or their mother) or *Nyũkwa* (your mother). In most cases, the term "mother" is considered as an honourable form of address, and is desired by every woman in the Agĩkũyũ society. The reason for this is that her motherhood is highly respected by her children and the community at large; and because of the sacredness associated with her motherhood, she is addressed by her neighbours and their children as "mother of so and so." On her part, the community expect her to practice *Ũtugi* in her *Nyũmba* if she is to maintain the prestige mentioned above. In other words, she is expected to be hospitable to those who are

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[110] With the establishment of the British colonial rule and the imposition of house tax, some people stopped building two houses. This resulted in congestion in one hut and the shift of *Ũtugi's* space to the community.

vulnerable and to visitors and to assist her neighbours when they are in difficulty or need (Kenyatta 1938:10).

On the other hand, the man's hut *(Thingira)* is a space where *Ũtugi* is practiced (Kenyatta 1938:10). The women were expected to warm the place, and then take food and drinks so that friends, visitors and strangers can be entertained. If the man is a polygamist,[111] each wife takes her turn to provide the firewood and light the fire in the *Thingira*. However, no food is prepared in this hut except when meat is roasted, for the family food is prepared in the *Nyũmba.* Kenyatta asserts that:

> Each wife cooks in her own hut. When the food is ready, each wife takes the husband's share to his hut, where he entertains his friends and casual visitor. When the meal is over and utensil cleaned, the wives may go and spend the rest of the evening in the company of their husbands or remain in their huts. But whenever special visitors, particularly members of the husband's age-group call, the wives are expected to join the company in the husband's hut. The reason for this is to show the solidarity of the age-group. If the visitors come from far away and they are to spend the night in the homestead, the arrangements for their accommodation are made according to the rules and customs governing the social affairs among the age-group (1938:181).

The establishment of a *Thingira* gives a man special status in the community, for it symbolises that he is a *Mũthũũri Mũtaana* (a hospitable elder) and he is considered capable of holding responsible positions in community affairs. Hence, it was the desire of every *Mũthũũri* to work hard so as to accumulate property which could enable him to build a homestead that consists of both the *Nyũmba* and *Thingira*. This is because the community believes that, "*Wega ũũmaga na Mũcii,*" that is, the good quality of a man is judged by the way he shows *Ũtugi* to others in his homestead. Kenyatta notes that:

> The man's hut, unlike that of the woman, is very simple; it has only one partition and sometimes none at all. When there is one, it is used to divide the bedstead from the fire-place. The rest of the hut is left open; this is to provide a large sitting-place for the family and their visitors. For the man's hut is used for general purposes whereas the woman hut is strictly used for her private purposes and family matters (1938:84).

The *Mũthũũri Mũtaana* (a generous elder) is respectable in the community and because the Agĩkũyũ community had no kings or chiefs, and they did not have self-appointed or elected leaders who could make decisions for them. Therefore, the person who is gifted in wisdom, tact, self-control and public speaking, and who practices *Ũtugi* in the *Thingira* is normally recognised as a spokesperson. In fact, the word *Mũthũũri* (elder) comes from the verb

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[111] The term polygamy comes from the Greek word, πολύς γάμος (*polys gamos),* which means the practice of multiple marriages. In the Agĩkũyũ community, this practise is common although it has been fought by Christian missionaries (Murray 1974:24; cf. Macpherson 1970:105).

gũthũũra (to choose) and when the man is married, it is assumed that he is competent, for he has chosen a wife. Marriage in African Traditional Religion symbolises the entry from adulthood to elderhood (Mugambi 1989a:204). Its importance is underlined by the fact that the African customs expect every adult to marry regardless of how much one enjoys freedom. An adult, who is not married, according to custom, cannot become an elder in his or her community (Mugambi 1989a:198).

As a process, which runs through the lives of the married partners, and even beyond it, marriage "never ends" (Mugambi 1989a:198). It is climaxed by the transactions and the social contracts between the families involved, whereas children come to cement it (Mugambi 1989a:199; cf. Kenyatta 1938:163ff). Therefore, the *Mũthũũri* (elder) is expected to choose and practice virtues such as *Ũtugi,* among others. However, such a *Mũthũũri* is mandated by only the members of his *Riika* (age-group) to take part in the most important decisions of his groups and, therefore, he had the authority to proclaim decisions which are acceptable to others. Based on his age, Muriuki (1974:2) notes that, he could also take up leadership within the *Kiama* (council of elders), which is limited to the *Muthamaki* (pl. *Athamaki* or spokespersons).

Besides being a place where *Ũtugi* is practiced, the *Thingira* is also a space for meditation, *Kũhorohia* (reconciliation or making peace), instruction, teaching, encouragement, and correcting family members so that they may lead a good live. Interestingly, anything discussed in the *Thingira* is kept confidential and cannot be shared outside that space. Hence, the Agĩkũyũ believe the saying, *Ikwario Thingira Itirehagwo Nyũmba* (whatever is decided in an elder's hut is never disputed in the house). Wachege (1992:67) affirms that even an elder could not reveal any important matter in the house except in his *Thingira* "since it was of supreme importance." Wachege further states that:

> An ideal elder was expected to have his own family and look after it well. He was expected to head his family upright. This included counselling his people through traditional pedagogy. He was expected to enlighten his sons as to how to establish and manage their homes (1992:69).

From the above discussion, we can deduce that the *Thingira* (man's hut) is an open space where *Ũtugi* is extended to the guest, the vulnerable and the needy, while *Nyũmba* (women's hut) is a private space where *Ũtugi* is exclusively practiced by the family only for the benefit of the ancestors. The two spaces are important for the Agĩkũyũ practice of *Ũtugi.*

This section, therefore, prepares us to explore the manifestation of *Ũtugi* within the Agĩkũyũ religious life.

3.5. Religious life

Among the ancient Agĩkũyũ, the people perceived *Ngai* (God) as unique and *Ũtugi* was extended to this *Ngai* and *Ngoma*, i.e. spirits (cf. *theoxenic* hospitality). In this regard, the community could not eat or drink something before sharing it with *Ngai* who is addressed as *Mwene Nyaga* or the "Reverend Elder" (Wachege 1992:46; cf. Kenyatta 1938:247). Therefore, small granaries were built temporarily on the main roads so that people coming from farms could deposit a few grains of their harvest as tribute to *Ngai* (Kenyatta 1938:257). Such a practice of giving some portions of food to God is also seen among the *Bambuti* of Central Africa. Bujo (1992:19) asserts that when a *Bambuti* woman becomes aware that she is expecting a child, she prepares food and takes a portion of it to the forest where she offers it to God saying: "*God from whom I have received this child, take thou and eat!*" Kenyatta (1938:259) affirms that the practice of giving food to *Ngai* (God), as in the case of *Ũtugi*, symbolises that one is not gluttonous but is a *Mũndũ Mũtugi* (a person who is hospitable). He states that:

> In the Agĩkũyũ custom of "give and take" (*Ũtugi*)… when Mwene-*Nyaga (God)* has given the rain to the people… he is entitled to be rewarded by a gift of the first crops of season. For it is said that without his aid the people could not have any crops. Thus for a man (sic) to fail to pay tributes to his benefactor would be contrary to the established custom and would be regarded as shameful and greedy (Kenyatta 1938:259).

The above remark shows how *Ũtugi* is integrated in the Agĩkũyũ traditional psychology, philosophy and religious life. In Mbiti's (1969:58-74) view, the study of the beliefs and practices of the African people shows that African religious practice is a complex web of relationships which creates harmony and stability for well-being and wholeness of the community (cf. Berinyuu 1988:5). He also explains that, because "traditional religion permeates all the departments of life", there is no formal distinction between "the sacred and the secular between the religious and non religious, between spiritual and the material areas of life" (Mbiti 1969:1). In other words, the Agĩkũyũ religious practice permeates every aspect of socio-economic, political, and cultural life, which explains why *Ũtugi* is easily accommodated in the social, political, religious and cultural life of the Agĩkũyũ people (cf. Berinyuu 1988:5). In line with this, Mercy Oduyoye observes that African cerebration of life includes every aspect of life, hence:

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> All the beginnings and endings are marked by ritual. All signs of abundance and renewed health are celebrated. Life is to be lived with full intent, lived forcefully and with power. Celebration of life is seen in festivals, which often call on women to provide feasts. The ultimate concern of all this is for fullness and blessedness of life. Those who are blessed demonstrate their appreciation of their good fortune by being hospitable to others. This makes hospitality a religio-cultural trait of Africans. Giving, to ensure life and to preserve the life-force or save the "face" of others, is part of African culture. Sharing is built into communal existence, but it does not remain there. All strangers, living or passing through become the responsibility of the host community. This principle of hospitality is based on honouring reciprocity (2001:27).

The principles of *Ũtugi* enhance the security and prosperity of the community, for everyone is expected to be mindful of each other's welfare (Mbithi 1974:33). Kalilombe appropriately sums up the above view by saying that in the African Tradition Religion:

> The outcome depends on how successful the human community can relate with the different participants in the universe so that life is assured … success is the solidarity and cooperation among the community itself, which includes both the living and the dead. For God's supreme presence is mediated by this solidarity among the visible and invisible forces. Human living, culture and religion are the way this struggle takes place (1999:128).

As for the Agĩkũyũ religion, it is based on two separate conceptions, which are related to one another. First, is the belief in *Ngai*, who is perceived as a high God (Wachege 1992:46). *Ngai,* in the Agĩkũyũ religious life, is strictly a monotheistic God and scholars like Kenyatta (1938); Muriuki (1974); Mbiti (1988); Mugambi (1989a); Wachege (1992); Kibicho (2006) depict *Ngai* as the supreme powerful being who is universal and believed to be the one who controls all the powers in the world. The people's belief in *Ngoma* (ancestors' spirit) is another feature of the Agĩkũyũ religious conception. Even though dead, the *Ngoma* continue to have influence on the living through their spirits. Mbiti (1969:125) accurately describes ancestors as "the living dead", for they remain part of the community after they die. For Mbiti, ancestors are:

> The closest links that men have with the spirit world… (they) are bilingual: they speak the languages of men, with whom they lived until "recently"; and they speak the language of the spirits and of God, to whom they are drawing nearer ontologically. These are the "spirits" with which African peoples are most concerned: it is through the living-dead that the spirit world becomes personal to men. They are still part of their human families, and people have personal memories of them (1969:83).

Moila (2002b:68) agrees with Mbiti that Africans perceive death as a departure from this life rather than complete annihilation of a person. He further notes that, "Death is a bridge to the world of the ancestors" and that, "Death takes a person away from the human society without breaking the ties between the person and his or her people" (Moila 2002b:68). Perhaps the

belief that people cannot live alone is what has compelled the Agĩkũyũ to embrace the living, the dead and the unborn, for this notion is thought to be very important for the "survival" of an "individual" (Mbiti 1969:108).[112] This is because of the perception that the community belongs to the living, unborn and the dead. As noted above, the dead are regarded as being asleep and as living-dead (Mbiti 1969:125; cf. Diop 1964:25; Moila 2002b:68). Furthermore, naming in the Agĩkũyũ culture is predetermined according to a comprehensive scheme designed in such a way that the dead and the living are remembered. In view of this, Eugene Hillman observes that:

> The traditional system of names points to and helps to establish the people's powerful and pervasive sense of belonging to one another in the unity of family, clan, ethnicity and culture. The names also bespeak mutual responsibilities. The firstborn son is given the name of his paternal grandfather whose memory is thus perpetuated generation after generation. The second son has the name of his maternal grandfather, while the third boy perpetuates the name of his own father's eldest brother. The fourth male child is named after his mother's first brother. The fifth son gets the name of his father's second brother and the sixth boy continues the name of his mother's second brother. An exactly parallel scheme is used for relating each daughter to paternal or maternal relatives whose memory is to be perpetuated (1993:13).

Moreover, as a symbol of *communion, fellowship* and *remembrance* with them, the community pours libation to the living-dead (Diop 1964:25). This shows the practice of *Ũtugi* as it exists between the dead and the living. The libation consists essentially of giving portions of food or pouring alcoholic drink and water to the ground. Indeed, this is how the concept of community develops itself into the concept of the African ancestral cult. As Mbiti (1969:108) reminds us, the community includes both the members of the past and those of the future and the individual defines and expresses self through the community. Hence, death is assumed as that which releases the human spirit and soul from the body for continued existence. Healey and Sybertz (1969:211) assert that the living-dead are "remembered in the oral tradition" for "five generations", and whether they are remembered or not depends on how much good they had done on earth, i.e. whether or not they practiced *Ũtugi*. Indeed, Healey and Sybertz's view strikes a working harmony with Mbiti's understanding of the ancestors when he says that:

> The departed of up to five generation are in different category from that of ordinary spirits which we have been considering. They are still within the *Sasa* (now) period, they are in the state of personal immortality, and their process of dying is not yet complete. We have called them the living-dead. They are the closest links that men (sic) have with

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[112] Nkurunziza (1989:87) observes that the family is the centre of human life and it consists of the living, the dead and those yet to be born. It also includes the grandparents, the blood relatives and the in-laws. The family is the centre of life ceremonies - birth, marriage and death - and it is within the family that children are born, educated and cared for. The most sacred and respected human activity of the family is that of procreation. It is within the family that one is born, nourished and one's whole life sustained; and even when one dies, burial takes place not far away from the family relations.

> the spirit world… the living-dead are bilingual: they speak the language of men (sic), with whom they lived until 'recently": and they speak the language of the spirits and of God, to whom they are drawing nearer ontologically... they are guardian of family affairs, traditional, ethics and activities… they are the best group of intermediaries between men (sic) and God: they know the needs of men (sic), they have "recently" been here with men (sic) and at the same time they have full access to the channels of communication with God directly, or according to some societies indirectly through their own forefathers (1969:83).

Ancestral spirits are omnipresent, affecting the affairs of the community on a regular basis. Achebe observes that:

> The land of the living was not far removed from the domain of the ancestors. There was coming and going between them, especially at festivals and also when an old man dies, because an old man was very close to the ancestors. A man's (sic) life from birth to death was a series of transition rites which brought him nearer to his ancestors (1958:85).

From the above, we can note that ancestors play a crucial role in African spirituality and cosmology. This is because they are the protectors of the African family from adversaries and possible calamities. Second, they are the guardians of the African community, and, finally, they are the custodians of African moral and community law, for they are intermediaries between human beings and *Ngai*. The views of Mbiti, Achebe, Healey and Sybertz are acknowledged by Dickson (1984:198) who adds that only those ancestors who practiced care, love and hospitality are recognised as ancestors when they die and that "the cult of the dead is not to be equated with that of the ancestors."[113]

Kenyatta (1938:266) explains that in the ancient times the Agĩkũyũ recognised three different types of ancestral spirits. They include *Ngoma cia Aciari* (ancestors of the *Mbari/*family), *Ngoma cia Muhiriga* (clan ancestors) and *Ngoma cia Riika* (age-group ancestors). The three types of *Ngoma* are consulted and obeyed after death as they had been while living and the *Ngoma* in each group are particularly interested in the welfare of their own group (Kenyatta 1938:266). The *Ngoma cia Aciari*, therefore, want their living relatives to fulfil all customs, particularly the practice of *Ũtugi,* which is necessary for the well-being of the *Mbari* (Kenyatta 1938:266). The Agĩkũyũ believe that *Ngoma* become angry when traditional customs are not observed and that they direct "misfortune on the deviates" (Kenyatta 1938:266).[114] Therefore, the Agĩkũyũ ensure that good relationship is

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[113] Concerning the notion of ancestorship, we can deduce that death in African communities is seen as a promotion to become a higher being – an ancestor. It is, however, imperative to acknowledge that not everyone becomes an intermediary between God and people (ancestor) after death but only those who were adults and have practiced virtues such as *Ũtugi*, justice, honesty, love and truth, etc., before death (Gathogo 2007:109; cf. Moila 2002b:69).

[114] Stiloane (2000:30) contends that ancestors, perceived as human beings, are not worshipped but are only served. The service to the ancestors is rendered through performance of certain rites. These rites are observed in different ways.

maintained with the *Ngoma*. That is why, in the ancient Agĩkũyũ practice of *Ũtugi*, it was habitual to pour a libation (i.e. pour out beer or to sprinkle the last few drops of beer in the calabash for the ancestors to drink; this is known as *Gũitangĩra Ngoma Njohi*). Similarly, it is believed that when a *Nyũngũ* (pot) containing beer breaks, it is a good omen, for the *Ngoma* are said to be drinking. Kenyatta notes that:

> [The] Agĩkũyũ custom requires that anyone giving food or drink to another should taste it first to prove his (or her) sincerity; and therefore, when offering sacrifice to God... this custom must be adhered to, or else he will be displeased. The liquid thus sipped is spat over the right and left shoulder to feed the ancestral spirit who are the keepers of the Tree of God (*Mũgũmo*), and who are at this moment in the procession guiding the elders (1938: 248).

Of course, the above practice of *Ũtugi* to ancestors is common in many African communities. For instance, in the Pedi culture, a woman would pour some food to the ancestors when she is cooking (Moila 2002a:3). Reflecting on the custom of the Pedi of South Africa, Manala observes that:

> [S]nuff, traditional beer and meat of a home-slaughtered animal are often used. Snuff is sprinkled on the grave or shrine as the priest or the ceremony leader communicates with a particular ancestor. An animal, especially a goat, but sometimes a fowl is slaughtered and blood is shed for the ancestors and meat enjoyed by those who are present with bones left unbroken on the grave (2008:88).

Such practices in which the community shares food with ancestors are also seen among the Wataveta, the Wataita, the Wagiriama, the Wadigo, the Wachonyi, the Waembu, the Wambere, the Wameru and the Wakamba peoples of Kenya in East Africa. Gathogo affirms that:

> The East African communities have a characteristic of pouring anything, including water, tea, or food onto the ground before they consume it, as a way of seeking blessings from God through the ancestors, who they believed to be closer to God than the ordinary people, thereby appeasing them. This symbolises a harmonious relationship between the living and the living-dead, and is equivalent to prayers offered in modern African Christianity before taking meals (2007:109).

Similarly, Olikenyi (2001:105) states that the issue of ancestors and the practice of hospitality are vital to African communities and he goes on to narrate that the Fang of Gabon in West Africa believe that an ancestor can visit a person in the form of a guest. Another insight of people's attitude toward ancestors comes from the Bulsa community. Olikenyi (2001:105) notes that the Bulsa treat guests, orphans, handicaps, beggars and lepers kindly because it is perceived that their ancestors may visit them in these forms. Likewise, among the Agĩkũyũ, it is believed that unanticipated visitors are the embodiment of *Ngoma*; therefore, they are shown kindness, love, and care, are given food, water and a place to sleep. Such practice of

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Ũtugi, through spontaneous services to guests, is a means of communing with the *Ngoma* and maintaining good relationship. If a person breaks the customs, he or she is required to reconcile with the *Ngoma* and *Ngai*. As such, the *Mũramati* (the oldest member of the *Mbari)* is called to cleanse the *Thahu* (defilement or unholiness).[115] Kenyatta elucidates that a *Mũramati* could perform the religious ritual:[116]

> [For failure to do this,] could not only harm the transgressor but the entire descent group, rendering them ritually impure or having *Thahu* (being unholy). It was commonly believed that if disease was infecting people or livestock, or if crops were not prospering, someone had broken the social code and upset the balance within society and the universe. The *Mũramati* would then call in the service of a *Mũndu Mũgo* (medicine man/woman) who is a religious specialist (1938: 35).

Agreeing with Kenyatta, Manala (2008:88) argues that failure to observe these and other rites is interpreted as neglecting the ancestors and is punishable by one or more afflictions. Manala (2008:88) further notes that such punishment, could make life quite difficult for the whole community and their descendants and, if sustained, the neglect may signify the fact that the departed has been forgotten, "something that ushers in loss of personal immortality on the part of the concerned ancestor." Among the Bahema of Central Africa, sharing food does not only take place with God and ancestors but also with corpses. Bujo observes that:

> During the funeral rites, the son, as heirs, all "receive communion" from the hand of their dead father. Grains of millet are placed in the hands of the corpse, and each son knocks them off four times, four being the masculine number. The significance is clear: the dead man's children receive his strength, and they must not allow themselves to be unduly depressed by their loss. As their father feeds them with this millet, they ask him not to take food away from them, but to continue to think of them and to strengthen them even in death. A second rite follows. The son jumps four times over the corpse to receive increase of life and strength. The idea of survival after death is also expressed in the ceremonies to install the eldest son as his father's heir. His uncle, the dead father's brother, places his hands on a cow's udder, which he must then begin to milk. Failure to carry out this rite will bring about the death of the cows which the son is inheriting from his father (1992: 25-26).

For the Agĩkũyũ, in the time of crisis, the *Mũramati* (the oldest member of the *Mbari)* would check whether the *Ngoma cia Aciari* (ancestors of the family) are in tune with the *Mbari* (extended family). After checking, the *Mũramati* would call the *Mũndũ Mũgo* (witch-doctor) to find out what annoyed the *Ngoma* (Kenyatta 1938:267). Lebaka-Ketshabile states that:

> Ancestors communicate their wishes and dissatisfaction in dreams and in visions to their families, relatives and to their communities. They show their continued interest in their families, communities, clans… and so on. They also act as guardian angels to the living (1997:31).

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[115] *Mbari* members were bound together by common descent, corporate land ownership and collective worship.
[116] The Agĩkũyũ believe that *Ngoma* can be pleased or displeased by an individual, family or age-group. In order to establish good relations between the two worlds, the ceremony of communing with the *Ngoma* is observed constantly.

As guardians, the *Ngoma* are believed to safeguard life in the Agĩkũyũ community and through them *Ngai* is said to give life to the world, but *Ngoma* are not seen as taking the place of *Ngai*. In fact, the *Ngoma* remain human beings in spirit form but they are more powerful than the living; that is why the Agĩkũyũ approach to *Ngai* is totally different from the way they approach the *Ngoma*. Hence, the people beseech or worship *(Gũthaithaiya or Gũikia-mũkoigũrũ) Ngai* (God) and not *Ngoma,* for *Ngai* is is approached when all other ritual avenues have been exhausted. In other words, the people only commune with the *Ngoma* but do not beseech them. Interestingly, both *Ngai* and the *Ngoma* are believed to practice *Ũtugi* and the people are expected to emulate them by practicing the same virtue.

Generally, in the Agĩkũyũ religious life, a person is expected to participate in the *Magongona* or *Mambura* (community's religious life). This is because in the time of drought, plague or other calamities, the leading elders (*Mũramati*), who are mainly men and a few women who have reached their menopause, would summon all the people to gather together for worship (Kenyatta 1938:40). They would then congregate under the sacred *Mugumo* tree (tree of God) and offer sacrifice to *Ngai*. When the animal for sacrifice is about to be slaughtered, a boy or a girl and a woman who has gone through menopause would touch the animal's head while the *Arume* (male elders) would slaughter it and roast the meat. As the roasting goes on, the smoke from it is believed to ascend to *Ngai*. All this is a symbolic act of inclusiveness and of the community's total participation in religious acts of *Ũtugi*, which is referred to as *kũruta magongona ma gũthaithaiya Ngai* (offering or performing sacrifices or rituals to beseech God).[117] With the collective *Ũtugi* to God, it is believed that the worship of the faithful results in *Ngai's* blessings (*Kĩrathimo*) for all. The blessings include sending of rain, unity, harvest, health and general prosperity.

Mugambi (1989a:205) reminds us that all rituals manifested the religious consciousness of the African peoples. For example, burnt animal sacrifice was a predominant feature of traditional African rituals. An animal without blemish and of one colour symbolised the purity and sincerity of the community's intentions in a ritual, as well as the perfection of God to whom all rituals were ultimately directed (Mugambi 1989a:205). Similarly, a reference to the ancestors in all rituals indicated the consciousness of African peoples that their human

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[117] Because of this ritual (*magongona*), the early Christian missionaries refused to use the Agĩkũyũ word *Mambura* for religion but instead they imposed the Kiswahili word *dini* (religion. Kenyatta (1938:233) argues that the reason is because the word is associated with both *Ngai* and the *Ngoma.*

community included not only the present generation but also the past and the future ones (Mugambi 1989a: 205; cf. Moila 2002a: 67-70).

3.6. Socio- political life

In the social realm, *Ũtugi* has much to do with material support on auspicious occasions such as betrothals, marriages, initiations, fundraising for medical bills, mourning for the dead, burials, education of children and social gathering (Gathogo 2006:28-29). Apart from during the above ceremonies, the Agĩkũyũ give without waiting, hesitation or without any formal invitation. This is because the community understands one person's happiness as the happiness of all and one person's sorrow as the sorrow of all (Gathogo 2006:29). The people believe that *Irĩ mũrũngũ igiritanagĩa na irĩ hĩa* (the hornless animal leans on the one that has horns). In this context, the hornless animal can refer to a person who is vulnerable and in need of assistance, the person who gives assistance may also need to be assisted when problems come and the one helped before may come to the rescue. This is due to the communal interdependence entrenched in *Ũtugi*. Mbiti argues that:

> To be human is to belong to the whole community and to do so involves participating in the beliefs, ceremonies, rituals and festivals of the community. A person cannot detach himself from the religion of his group for to do so is to be severed from his (sic) roots, his foundation, his (sic) context of security, his (sic) kinship and the entire group of those who make him (sic) aware of his (sic) own existence. To be without one of these who make him aware of his (sic) own existence. To be without one of these corporation elements of life is to be out of the whole picture. Therefore, to be without religion amounts to self excommunication from the entire life of society and Africans do not know how to exist without religion (1969:108).

From the above, we note that a person is an integral part of the society. This view is clearly captured by Eugene Wangiri (1999:71-89) who says that a human being in Africa is not just a social being but a being that is inseparable from the community. Likewise, Teffo (1996:103) observes that in Africa, "every person, every individual, forms a link in a chain of vital forces, a living link, active and passive, joined from above to the ascending line of his ancestry and sustaining below him the line of his descendants." This kind of connection is very important in the Agĩkũyũ setting, for it enhance the practice of *Ũtugi* which is a social ethic and unifying practice. The Agĩkũyũ place high value on human beings and, from a humanism perspective, it is expressed in a communal context rather than the individualism that often characterizes the Western philosophies (cf. Teffo 1996:103).[118] Teffo argues that:

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[118] This description of the communitarian practice of the Agĩkũyũ could appear to be a romantic one. However, as a native and someone who has socialized and grown up in such a context it is possible to confirm that the practice is a reality. Besides, similar practices are common in

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> Counter to the individualist view of many Western philosophies, man (sic) in Africa is inseparable from the community. However, it should be emphasized that individuality is not negated in the African conception of humankind. What is discouraged is the view that the individual should take precedence over the community (1996:103).

As a way of life, *Ũtugi* has the essential principle of connecting people and enabling them to be united as human beings. For Mbiti (1969:109), this is a cardinal point in understanding the African worldview of humanity. In other words, *Ũtugi* connects members of the same community in relationships. This includes binding individuals and groups together, which is the ultimate meaning not only of unity in multiplicity, but of the concentric and harmonic unity of the visible and invisible worlds (Berinyuu 1988:5; cf. Mbiti 1969:108). Thus, the practice of *Ũtugi* is embedded in interconnectedness, interdependence, collective consciousness and a communal worldview in which one is obliged to adopt the virtues of sharing, accommodation, inclusion, love, welcome and compassion. In this case, a system is put in place in which an individual has a social commitment to share with others what he or she has. According to Mulaudzi:

> [This means] helping one another by making sure that one does not eat while one's neighbour is hungry, sharing opportunities, responsibilities and challenges; participatory decision making and leadership; and reconciliation as a goal of conflict management (cited by Mojola 1988:21).

As implied above, the services of every person is needed in the community's social life which is permeated by religion. In fact, the Agĩkũyũ social life dictates that a person must practice interdependence, for no person can work on his or her own. In fact, the Agĩkũyũ would say: *Mũndũ nĩ Mũndũ nĩ ũndũ wa Andũ,*[119] which means that a human being is a person because of the other people.[120]

This kind of interdependence is entrenched in the people's cosmology, which embraces nature, the living, the dead and the unborn, and is thought to be important for the survival of the individual who lives in the land (cf. Mbiti 1969:108). This is because the community is

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various communities in Kenya which also strive to preserve the custom as in the case of *Ũtugi*. Therefore, we shall try to be objective and give a critical appraisal of *Ũtugi* in this study.

[119] J. B,Van Der Walt (1988:9) argues that virtues and values are kept vivid in African proverbs and songs. For Van Der Walt, proverbs are useful means for determining what the anthropology of a group is, because they reveal to us what the users revere and what they hate, what they respect in a person and what they find reprehensible. These offer us a glimpse into their hearts.

[120] Arguing on the value of interdependence, and from an *Ubuntu* perspective which is in line with *Ũtugi*, Desmond Tutu of South Africa states that, "In our African language, we say, 'a person is a person through other persons.' I would not know how to be a human being at all except (that) I learned this from other human beings. We are made for a delicate network of relationships, of interdependence. We are meant to complement each other. All kinds of things go horribly wrong when we break that fundamental Law of our being. Not even the most powerful nation can be completely self-sufficient" (Tutu and Tutu 1989:71). D, Tutu and N, Tutu's understanding echoes *Ũtugi's* basic principle of interdependence. He further declares that, "We call it *ubuntu, botho*. It means the essence of being human. You know when it is there and when it is absent. It speaks about humaneness, gentleness, and hospitality, putting yourself on behalf of others, being vulnerable. It embraces compassion and toughness. It recognizes that my humanity is bound up in yours, for we can only be human together" (Tutu and Tutu 1989:69). K.A Opuku says "Life is when you are together, alone you are an animal" (As cited by Block 1978:483).

perceived as that which belongs to the living, the unborn and the dead, and whether dead or alive one would need to be in the land. As we have seen above, the dead are regarded as being asleep in the land and as such they are regarded as the living-dead (Diop 1964:25; cf. Mbiti 1969:125). This shows that it is only in unity with the earth, flora and fauna and other human beings that an individual can be said to be and to belong. In other words, there is a relationship between creation and humanity. Nkurunziza (1989:86) says, "Animals, plants and inorganic beings are considered as the extension and means of life of those to whom they belong. The cosmos, of which man the *Muntu*, is king, is man's (sic) servant, at least in so far as he can draw from it and sustain his life."

According to Wangiri (1999:71-89), the sense of oneness holds that the universe and all that is in it, be it animals, plants or any created thing, have an interrelationship that is mutually sustaining. She notes that nature, for example, should not be abused for the sake of human benefit (Wangiri 1999:71). In this case, all entities in the universe depend on one another. If rain failed or if human beings cut down all trees and killed all animals, there would be disharmony, chaos and, finally, global extinction. This argument shows that harmony is life. Oneness and harmony enhance the practice of *Ũtugi* which is the harmonious existence of entities whose being is based on being-together-with-others[121], i.e. *Ũmũndũ* or personhood (Wangiri 1999:72).

The above understanding of oneness is dismal if one does not come to terms with the philosophical understanding of the African community. The idea of oneness, the "we" and "us", is ingrained in the African, right from birth; and as children grow, they know that they belong to a wider community and are compelled to function within that community. This point is well articulated by Mbiti (1969:108) who states that, "I am, because we are; and since we are, therefore I am" or "I am related, therefore, I am" *(cognatus ergo sum* or an existential *cognatus sum, ergo sumus,* that is, "I am related, therefore, we are." This sense of belonging or being together, which Mbiti emphasizes above, is important to this study especially in our attempt to construct support systems for PLWHA and their families.

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[121] Maphisa (1994:8) observes that South Africans are slowly rediscovering their common humanity and that, the days are gone, when people were stripped of their dignity (*ubuntu*) through harsh laws, when people had to use *ubulwane* (animal-like behaviour) to uphold or reinforce those laws. As such, this shift from an apartheid paradigm to a democratic paradigm is seen as a re-discovery of *ubuntu* for *ubuntu* served as a cohesive moral value in the face of adversity. In fact, as Teffo (1994:5) contends, even though the demon of Apartheid vastly damaged the majority of black South Africans, "… there is no lust for vengeance, no apocalyptic retribution… A yearning for justice, yes, and for release from poverty and oppression, but no dream of themselves becoming the persecutors, of turning the tables of Apartheid on White South Africans… The ethos of *Ubuntu*… is one single gift that African philosophy can bequeath on other philosophies of the world."

Such systems would help the community to care for and seek the highest good of one another because, in so doing, they are ultimately helping themselves. If this virtue is cultivated, it can ensure that the community cares for one another and it can be an effective way of reducing the ever-widening gap between the rich and the poor thereby enabling the society to fight the HIV and AIDS pandemic. It can also ensure that the needy, the sick, the disabled, PLWHA and other disadvantaged people, are well cared for, especially in these times when the HIV and AIDS pandemic is leaving multiple problems in its wake. Mbiti reminds us that:

> Only in terms of other people does the individual become conscious of his (sic)own being, his own duties, his (sic) privileges and responsibilities towards himself and towards other people. When he suffers, he (sic) does not suffer alone but with the corporate group; when he rejoices, he rejoices not alone but with his kinsmen his neighbours and his relatives whether dead or living. When he married, he is not alone; neither does the wife 'belong' to him (or her) alone. So also the children belong to the corporate body of kinsmen even if they bear only their father's name. Whatever happens to the individual happens to the whole group, and whatever happens to the whole group happens to the individual (1969:108).

The above outlook contradicts René Descartes' Western, individualistic and Cartesian understanding of community, which says, "I think therefore I am" (*cogito ergo sum*)[122] (Russell: 1991:547). Indeed, Mbiti differs with the radical view of Descartes in his assertion that in Africa it is impossible for an individual to exist alone. He builds on this view thus:

> Only in terms of the other persons does the individual become conscious of his own being, his own duty, his privileges and responsibilities towards himself and other people. When he suffers he does not suffer alone but with the corporate group, his neighbours and his relatives whether dead or living (Mbiti 1969:108).

Mbiti's explanation shows that in Africa an individual is identified through the community. In line with this, the Akan of Ghana would say, "I belong by blood relationship; therefore I am" (Ezeh 2006:67). Ezeh (2006:66-67) notably comments that, in the communal life, there is fundamentally a spirit of communing, and the concrete expressions of the community is found in the family, in socio-cultural association and in the state. Certainly, knowledge and meaning in many African communities are perceived to be in progression and connected to culture. As Pobee (1992:16) affirms, there is no universalistic epistemological assertion, as both knowledge and meaning are entrenched in culture based on ontology and epistemology which is relational and communicative in concept.

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[122] The seventeenth-century French philosopher René Descartes (31 March 1596 – 11 February 1650) is said to have written, "Thus, as our senses deceive us at times, I was ready to suppose that nothing was at all the way our senses represented them to be…Finally, as the same percepts which we have been awake may come to us when asleep without their being true, I decided to suppose that nothing that had ever entered my mind was more real than the illusions of my dreams. But I soon noticed that while I thus wished to think everything false, it was necessarily true that I who thought so was something. Since this truth, I think, therefore I am (or exist), was so firm and assured that all the most extravagant suppositions of the sceptics were unable to shake it, I judged that I could safely accept it as the first principle of the philosophy I was seeking" (Rene Descartes 1960:24), *Discourse on Method and Meditations*, trans Laurence J. Laufleur, Indianapolis: Bobbs-Merrill). This therefore became the famous *cogito ergo sum* (I think, therefore I am). With premise, Descartes was certain he had established the foundation of knowledge in the mind's own experience of certainty.

Indeed, the practice of *Ũtugi* ensures that the community needs, wants, aspirations, goals, and worldview are catered for. This is well expressed in *Ũmũndũ* (personhood) whereby the community views a person in relation to the others, and it is in line with Augustine Shutte's statement below:

> In the African conception, persons depend on persons to be persons. It is by belonging to the community that we become ourselves.[123] The community is not opposed to the individual, nor does it simply swallow the individual up; it enables each individual to become a unique centre of shared life (2001:8).

Thus, *Ũtugi* has a religious element that focuses on the welfare of the community as well as the social and political life. Indeed, while Western humanism tends to underestimate or even deny the importance of religious beliefs, *Ũtugi* and African humanism are resiliently religious (Prinsloo 1995:4).

Since *Ũtugi* is established in African community life, we, therefore, concur with Ezeh (2006:68) who keenly observes that the greatest value arising from this community is the support which it offers its members. It offers support to its weak members especially the old and the handicapped. This is why a community may have poor people but it should not have beggars. A beggar is to be understood in this context as someone who is not accommodated in the elastic means of the community's life and resources. Ezeh (2006:68) and Moi (1986: 20) argue that, in the traditional African communities, there were no beggars. In fact, in the ancient Agĩkũyũ community, there were no beggars (*Ahoi*) or begging (*Ũhoi)* for it would be regarded as an indication of the disintegration of *Ũtugi* and the collective concern for the poor. The assumption is that an individual is never born "whole and fully human" because only the family, the clan, the community or the nation in which that individual belongs that enable him or her to become a mature human person (cf. Pato 1997:56). In the socio-cultural and political realms, the ancient Agĩkũyũ community placed various structures of provisions to incorporate the young, the poor, the sick and the old into the society. Moi affirms that:

> Begging is a symptom of the progressive breakdown of African self-reliance and socialist concern for others. Indeed, traditional Africa had institutional and socio-cultural provisions to incorporate the young, the poor, the sick and the old into society. Each age-set achieved self-fulfilment by playing it allotted role in the society. The products of the labours of the society would go to all, to satisfy everyone's needs. It was only the lazy, depraved and incorrigible who would suffer and even experience ostracised by the community. Therefore, within the community, there was inbuilt provision for self-reliance for the individual and for the society (1986:20).

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[123] Compare this with the Sotho idiom which says *Motho ke motho ka batho* and a Zulu maxim, *Umuntu ngumuntu ngabantu*, that is: "A person is a person through other persons" (Shutte 2001:46; cf. Van Der Walt 1988:9). This African aphorism articulates a basic respect and compassion for others as its centre. It can be interpreted as both a factual description and a rule of conduct or social ethic. It describes the human being as 'being-with-others' and prescribes what 'being-with-others' should be all about.

In line with the above, Kobia (2005:267) confirms that social justice was at the centre of the socio-cultural and political spheres and that nobody in the society was allowed to go hungry, for the system of mutual caring for one another was well established. This practice still exists in Kirinyaga; the system still cares for the *Athami* (migrants or strangers)*, Mũciarwa* (people who are born within the community after a goat is slaughtered or strangers who are integrated into the community*), Athoni* (in-laws who have no land) and the *Abatari* (the needy or vulnerable).

In fact, it is a common practice for every household to prepare enough food to cater for unforeseen guests. This sharing of food shows how *Ũtugi* is well entrenched in the social life of the community. John Ambe (1993:14) asserts that Africans share food anytime and anywhere when the food is available. Interestingly, an uninvited guest in a neighbour's house is warmly welcomed to drink and eat with that person and no one makes unexpected visits at meal time would fail to eat because the sense of togetherness among the people surpasses all forms of formal invitations (cf. Amble 1993:14). For instance, among the Agĩkũyũ, there is a strong bond of kinship between *Mũihwa* (cousins) and, whenever they visit one another, the host provides a special meal for the guest. This happens even when they are just passing by for it is considered a bad omen not to visit the homestead of your cousin or to leave it without eating something, no matter how little it may be; hence the people say "*Mũiwha ndaimagwo rũnyeni",* which means, a cousin cannot be denied a meal (Kenyatta 1938:15).
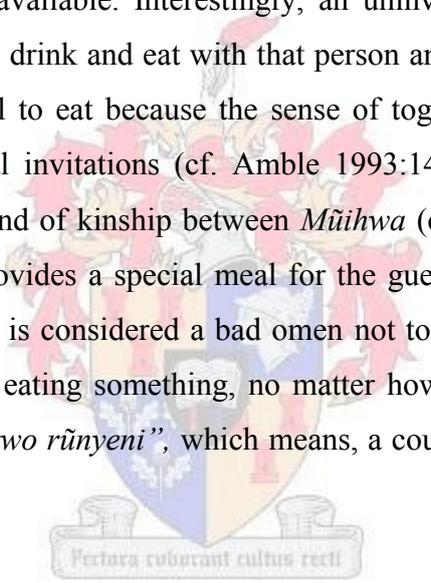
Furthermore the above practice of *Ũtugi* is also common within the *Mũcii* (family). According to Kenyatta:

> If a son is married and has a homestead of his own, the father and mother always receive a specific portion of whatever the son has prepared. If he kills a sheep or a goat, the tongue and the fleshy portion of the back are reserved for the parents. If it is beer he has brewed, the father and mother have the right to drink the first horn filled from the fermenting calabash (*Ndũa*) and a special calabash is reserved for the parents. These gifts are given as tribute and recognition of the parental duties, as advisor and guardians of the family group. The elder, when holding a feast or ceremony in his own homestead, gives these tributes to the ancestral spirits in the same manner and with the same respect as he himself receives them from his living son (1938:265).

Thus, the above is made possible because of the way the community is committed towards teaching the value of helping one another within the *Riika* (age-group*), Mbari (*extended family) and *Nyũmba* (immediate family). As the saying goes, *Nyũmba na Riika itiumagwo* (the clan and age-group cannot be repudiated). In other words, a person never loses the age-

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group or the clan right (Barra 1960:93; cf. Wachege 1992:11). In fact, one generation ensures the integrity of each of the succeeding generations and this is through socialization and perpetual kinship bond. The clans and age-groups help in maintaining healthy interpersonal relationships even in the face of misfortune or calamities (Cavicchi 1977:15). In this existential political structure, the Agĩkũyũ have managed to establish a social structure that enhances the community's togetherness. Nkurunziza observes that:

> Everybody belongs to a particular clan and the guiding principle of the clan is the understanding that the clan has a common patrilineal ancestor. There is a life-bond relationship among the members of the clan. This life-bond relationship is supposed to be respected and enhanced by every one of the clan. The social significance of the clan consists in the fact that it provides identity to individuals. Identification is with reference to the clan. Fellow clansmen are brothers and it is stressed that one should be friendly to fellow clansmen (1989:90).

 In this case, the life of an individual consists of sharing with others who are seen as brothers and sisters, sons and daughters. In fact, the members of the community, the clan, and the family know that one does not live by himself or herself but within the community. They know that, apart from the community, they would no longer have the means of existence. In particular, they know that their lives are in participation with others and this knowledge enhances their relationships with one another.

On this point, Higgs and Smith (2000:11) argue that African philosophy is a holistic philosophy for it stresses the importance of the human community and its place in the universe. The individual is born out of and into the African community and will always be part of the community. This is true because the interdependence, communalism, sensitivity towards others and caring for others are all aspects experienced and seen in *Ũtugi*. Furthermore, the community and the fact of belonging to a community are parts of the essence of traditional African life. Thus Mbiti (1969:108) states, "Whatever happens to the individual happens to the whole group, and whatever happens to the whole group happens to the individual." The principles of *Ũtugi* enhance human relationships thereby increasing human value, trust and dignity. In the same way, *Ũtugi* increases social harmony and cohesion from the family, to the clan and to the entire community.

 Hence, *Ũtugi* is well cemented within the family kinship, the promotion of which everyone is expected to participate in. For Nkurunziza (1989:83), "Man's (sic) life is neither purely bodily nor purely spiritual but a life of the whole man. It is the whole life of the entire being; being in its totality. Man (sic) is not alone, his being and existence is to participate."

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Therefore, within the family, there is a strong sense of respect for life and this is where it is cultivated and promoted. Moreover, because of the strong belief and understanding of *Ngai* as the creator and giver of life, there is a deep sense of vital participation in this source of life. Indeed, each member of the family is seen as an active participant in the same gift of life, the same humanity, the same image and likeness of God (Nkurunziza 1989:88). For this reason, there is a strong and deep respect for the valued gift of life; hence, *Ũtugi* is seen as a model for nurturing life. In fact, the family is not only seen as the centre of life but also as the source of continuous nourishment and support. The family life then becomes a necessary aspect of psychological growth towards maturity for each member of the family (Nkurunziza 1989:88).

According to Cagnolo (1933:253), the *Mũcii* (family) consists of *Nyũmba* (families)[124] and many *Nyũmbas* make up the *Mbarĩ (*extended family*)*. Various branches of *Mbarĩ* consist of the *Mũhĩrĩga* (clan*)* and the nine *Mĩhĩrĩga* (clans) form the Agĩkũyũ people. Furthermore, clans or *Mĩhĩrĩga* promote solidarity within the Agĩkũyũ society but, above all, it is the *Mariika* (age-groups; sing., Riika)*,* which produce cohesion of the whole Agĩkũyũ society. In fact, when boys and girls reach late adolescence, they are initiated together. Their association (age-group) is formed across all kinship and territorial lines, and it brings people together for life, irrespective of their membership in different clans, *Mbarĩ* (descent groups) or locations (Beecher 1944:4). The ties of comradeship which are formed lasts a lifetime and become the basis for such informal tasks as self-help, work projects, dancing group and other formal obligations such as military and judicial systems (Beecher 1944:4).

Therefore, it can be seen that in the social and political sphere, the role of *Ũtugi* is life affirming and life sustaining (cf. Moila 2002b:4). For, indeed, an individual is never alone as the Agĩkũyũ would say: *Mũrĩa wiki akũaga wiki*, that is, "He who eats alone dies alone" (Wanjohi 1997:21). According to Mbiti (2002b:83), the Kamba also have the same saying, which is used to highlight the value of sharing both joy (food) and sorrow (death). He further says that if there is no fellowship and there is no sharing of food during one's life, it follows that there will be no sharing of grief and bereavement at one's funeral (Mbiti 2002:83). Thus, African hospitality means more than the sharing of experiences by members of a group.[125]

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[124] In the language of the Agĩkũyũ, the word *Nyũmba* has two meanings - a family and a woman's hut.
[125] Gathogo (2007:109) talks of the importance of consensus building rather than dividing the people along the lines of 'winners versus losers'. The emphasis is on the value of togetherness, hence, the expressions, *twĩ hamwe* (an Agĩkũyũ *word* for 'we are together'), *tuko*

Moila (2002a:4) also asserts that hospitality eradicates loneliness while Thorpe (1991:120) comments on the Zulu culture in the same manner: "individuals cannot exist alone. They are because they belong."

Furthermore, Moila (2002a:4) notes that any disruption of the wellbeing of a community calls for the members of the group to sit down together and share a common meal. In reference to many African societies such as the Asu of Tanzania, the Nupe of Nigeria, the Efe (Pygmy) of the Democratic Republic of Congo, and the Fulani of West Africa, Mbiti (2002:83) asserts that these communities believe that "a person who eats alone dies alone." For it is believed that if people eat together, they can also happily live and die together. This view is in line with Kaunda's (1966:22) claim that Africans are "a patient people, forgiving people and accepting, inclusive people." He further states that:

> Social qualities weighed much heavier in the balance than individual achievement. The success-failure complex seems to me to be a disease of the age of individualism-the result of a society conditioned by diploma, the examination and the selection procedure. In the best tribal society people were valued not for what they could achieve but because they were there. Their contribution, however limited, to the material welfare of the village was acceptable, but it was their presence not their achievement which was appreciated (Kaunda 1966:23).

For example, the practice of *Ũtugi* is used in reconciliation and making peace between the Maasai (who inhabit the plains below the Agĩkũyũ forests) and the Agĩkũyũ. Lawren (1968:571) notes that because drought, which results in famine, often threatened the Maasai the Maasai could leave their place and reside in the Agĩkũyũ plateau which is well watered and resistant to drought. As a result, conflict often arose between the two communities. To establish peace with the Maasai, the Agĩkũyũ would call the Maasai leaders and, after practicing *Ũtugi,* they would agree to host them as refugees. Lawren explains that:

> To assure peace, treaties are made to cement ruptured relations. Emissaries, sent usually on Maasai initiative, conducted the negotiations, which were concluded with a solemn religious ceremony in which both groups were bound by oath; if one participated in raiding or killing the other, severe punishment would follow. Such ceremonies established peaceful coexistence and initiated a personal relationship between the two parties (1968:571).

In ancient times*, Ũtugi* was also extended to Maasai families especially when disaster struck. In that case, women and children could be taken to Agĩkũyũ land where *Ũtugi* would be extended to them and when the disaster was over, the family would go back to their land. During the time they are hosted, Lawren relates that:

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nawewe (in Kiswahili for 'you are not alone'), and *simunye* (Zulu for 'we are one'). He notes that these African idioms point to the fact that 'unity is strength', and they agree with slogans such as "an injury to one is an injury to all."

> They were given food products to tide them over the drought or cattle epidemic. They also had the guarantee that when conditions became better (they could go back). Good relations between Agĩkũyũ and the Maasai community were the rule rather than exception. Some indication of these good relations seems to be apparent in the consideration which amount to inter-marriage that took place between the two groups. Many Agĩkũyũ lineages claim Maasai ancestors and founders (1968:571).

From the above statement, it can be noted that the socio-cultural and political construction of the Agĩkũyũ society is based on the idea of interdependence which is entrenched in the practice of *Ũtugi.* In this regard*, Ũtugi* is extended to all members of the Agĩkũyũ community and also extended to other communities as in the case of the Maasai. This shows the value of *Ũtugi* and demonstrates that human beings in a community cannot afford to live in isolation. As we have seen in the case of *Ũtugi,* it is impractical for human beings in the socio-cultural and political context to live alone. Perhaps this is one of the reasons why *Ũtugi* flourishes among the Agĩkũyũ of Kenya.

3.7. Economic life

Ũtugi, among the Agĩkũyũ, is evident in the economic life which is rooted in communal living. As in many African communities, the Agĩkũyũ demonstrated their *Ũtugi* by involving everybody in communal agricultural work, the building and repair of houses, land cultivation, the clearing of bushy areas, hunting, and fishing, among others (Kenyatta 1938:42ff; Gathogo 2007:110). Kenyatta (1938:42ff) has documented how various industries were used by the Agĩkũyũ in the ancient times and how the practice of *Ũtugi* was important to the socio-economic life of the community especially in the areas of ironwork, hut building, pottery, basket making, skin tanning, making musical instruments, and agricultural activities.

The notion of encouraging hard work is based on the understanding that when a person works hard, he or she will be able to practice *Ũtugi* and to share food, shelter, clothing, and materials with others. To encourage people to work as a team, therefore, the community ensures that *Ũtugi* is articulated in the songs, stories, and customs. For instance, in the ancient practice of *Ũtugi,* young people were taught proverbs which expressed the *Ũtugi* communal approach to life. Some of these proverbs are still taught today, e.g. *Mũgogo ũmwe ndũaragwo iriũko* (one log does not make a bridge). This means that an individual is not sufficient alone just as one log is not enough to make a bridge. In fact, this proverb also affirms that humanity is found, shaped and nurtured in and through the humanity of others. Another proverb is the one that says: *Indo ni kũrimania* (Wealth comes by working together). This proverb teaches

that for a community to achieve commendable results, teamwork or co-operation is needed. In addition, working hard promotes the economic well being of the community and it discourages laziness within the community, for *Muria wiki akũaga wiki* (He who eats alone, dies alone) (Kabetũ 1997:21). This is a measure aimed at discouraging laziness; for a lazy person among the Agĩkũyũ is condemned and abhorred. It is also meant to uphold the sense of community and togetherness (Kenyatta 1938:24).

Surprisingly, such approach to communal work can be found in many rural areas not only in Kenya but in other African communities (Moila 2002a:4; cf. Obengo 1997:53). However, *Ũtugi* is practiced during communal cultivation or work party popularly known as *Gĩĩtatĩ* or *Ngwatio*. These two words "*Gĩĩtatĩ* or *Ngwatio*" literary mean working in unity (in *Kiswahili* it is *kufanya kazi pamoja)*. In ancient times and in contemporary Agĩkũyũ villages*,* such practice is common especially when weeding which is normally done twice a year during the rainy season when the people weed their crops. The members weed the farm of one member and, when they have finished, they go to the farm of the next member until they finish weeding all the farms in that village. After the weeding, the host prepares food and drinks for the work party. Another type of work party involves cutting a new garden from the bush. This is normally done by men and it takes place during the dry season. It consists of cutting and burning bushes, digging out their roots, moving rocks and stones and clearing the land to make it ready for digging and planting.

Similarly, during the harvesting, work party can be organised and this type of work party is done mostly by women, boys and girls who work as a team. Collecting of building material is another type of work party where *Ũtugi* is practiced in rural areas in Kenya. Women could cut and carry thatch-grass while men cut and carry wood for poles and roof supports. In most cases they could go ahead and build a house of one member before moving on to build for the next person. Men weave the frames and the women fetch the water for making mud. Men thus trample the mud, plaster the wall-frame, and set the roof on the wall-frame and struts while the women then thatch it. On this Kenyatta points out that:

> When a family is engaged in the work of building a hut or huts the help of neighbours and friends is necessary in order to expedite the work. A man goes around asking his friends to help him and at the same time telling them what kind of building materials he would like them to supply him with. In the same manner the wife visits her woman friends, requesting them to help in various ways. Those who cannot take part in collecting building materials are asked to help in providing food and drink for the builders' feast, which is called "*iruga ria Mwako*." On the day appointed many of these friends will turn up, bringing with them

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> the required materials for building. The man and his wife or wives receive their helpers joyfully and bid them to sit down and rest. After all have arrived a feast is provided, consisting of a variety of food and drink. During the feasting this group of men and women entertain themselves with traditional songs relating to team-work. Before they part, a day is appointed when the actual building of a hut or huts will take place (1938:78).

Work parties *(Ngwatios)* have to do with the members of the neighbourhood working for an individual who is called *Mwene Ngwatio* (the owner of that work party). Interestingly, this African communal approach to life is equally felt by both genders. For example, when an expectant mother delivers, the neighbouring women sets a date on which they would bring firewood, porridge, cooked food, sorghum, millet, corn, sugarcane, sweet potatoes and yams to the mother. In turn, men were to ensure that their wives take the items to the new mother; and if they were not readily available, it was their duty to look for them as a gesture of solidarity with their wives. The gesture fell within the spirit of communalism and sense of belonging, for the community believes the saying: *Mwana ndareragwo nĩĩ muciari ũmwe*, that is, a child is not raised by one person.

Such practice of *Ũtugi* ensures that the mother of the newly born child would get fuel and supplies enough for many months; this gave her sufficient time to nurse her baby without worrying about food and firewood for her family. This aspect of *Ũtugi* also ensures that the mother who has delivered would regain her strength and resume her normal duties of participating in the building of the community. One fascinating aspect of *Ũtugi* is that an individual is regarded as a part of and responsible to the whole community and, in the olden days, service to the community included defence, building of bridges and fire fighting. In most cases, those things were done communally and men played a leading role.[126] For that reason, every Agĩkũyũ male was trained as a soldier after initiation and during military recruitment the men were taught the need for fighting together and in solidarity with one another.[127] A young man started as a member of the junior regiment (Kenyatta 1938:24-35). At that stage, he was under the authority of the senior warrior regiment. After a reasonable period, he was promoted to the senior warrior regiment.

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[126] This concept of an individual being responsible to the whole community finds its parallel in the Christian understanding of being concerned with the needs of others.

[127] Gathogo (2007:4) argues that this element of "every *Mundurume (male)* being a soldier of the community is crucial to the fight against HIV and AIDS in this century. As HIV and AIDS is not only a Third World War – a costly war which is mainly fought on the African soil but it is more importantly a genocide that threatens to wipe out the people of Africa." He claims that, if an army fails to fight for the nation, it is said that it would have been better not to be there in the first place! (Gathogo 2007:4). Furthermore, in ancient times, the *Arume* used to lead in the battle-field; therefore, as good soldiers today they should be the first to combat HIV and AIDS and this, indeed, "provides an opportunity for them to prove their worth, that is, their being responsible soldiers – who will never shy away; but as soldiers who will confront the enemy until the Nation will experience genuine peace" (Gathogo 2007:4).

The explanation above shows community security and the fact that *Ũtugi* was and is entrenched in the economic life of the Agĩkũyũ. Moreover, it shows that everyone in the village is expected to participate in communal work and that the community lives in solidarity. Certainly, the principles of *Ũtugi* dictate that when there is work to be done, the whole community turns out with supplies of food and drinks, and as they work, they would sing and dance until they successfully finish each chore. Thus, "work was converted into a pleasurable productive pastime" (Ezeh 2006:68). The concept of mutuality of relationships is well expressed in *Ũtugi* and that is why the Agĩkũyũ say: *Gutirĩ gĩitatuirie kĩngĩ* (all things are interdependent).

In support of the saying, Gathogo (2007:119) equates interdependence with a small bird called *Nyange* or *Ndeithi* which naturally inhabits the Mwea plains of the Kirinyaga East District. He narrates that this bird would follow the cattle every time they are eating grass as if it is shepherding them; the bird was then named *Ndeithi,* from the word *Muriithi,* which means to shepherd (Gathogo 2007:119). It seems Gathogo fails to understand that the reason that the *Ndeithi* follows the cattle is not to shepherd them but to eat the ticks that clings to their body and to eat the grasshoppers and other insects which are exposed by the cow when eating the grass. Nevertheless, he is right in that when the *Ndeithi* follows the cattle, both of them benefit from each other. For the bird, removing the ticks from the cow saves the cow from the East Coast Fever, while the cow exposes the insects to the bird enabling it to have nutrition. From this understanding, we can, therefore, construe that as the cow and the bird depend on each other for their survival so do people depend on one another in the context of *Ũtugi.* Hence, this symbiotic behaviour expresses that community members are "possible assets at all times" (Gathogo 2007:119).

Perhaps, this is why the Agĩkũyũ community still regard themselves as the *Andũ a Nyũmba ya Mũũmbi* (the people of the house of Mũũmbi). The community believes that everyone's contribution is important and necessary because, *Rũĩ rũnenehagio nĩ tũthima* (a river is enlarged by its tributaries). In this respect, the need for one to be industrious is sounded right from childhood and climaxed during the time of initiation. During the *Irũa* (initiation), boys and girls in the traditional Agĩkũyũ society were trained to perform particular jobs. They were taught that even if the parents die, the affected child would be reborn "with a goat" to another family; for society has great interest in a productive person. This explains why there were no orphans in the society in the past, for orphans were incorporated into the

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extended families. Youths were taught that there is no task, which is as big as an elephant, but the only difficult task is the unperformed one. They were made to realise that being initiated as a group cements *Ũtugi* and ushers them into adulthood enabling them to work with others within the framework of the community's economic life. As Kenyatta observes:

> An old man who has no children of his own is helped by his neighbour's children in almost everything. His hut is built, his garden dug, firewood is cut and water is fetched for him. If his cattle, sheep or goats are lost or in difficulties the children of his neighbour will help to bring them back, at great pains and often at considerable risk. The old man reciprocates by treating the children as though they were his own. Children learn this habit of communal work like others, not by verbal exhortations so much as by joining with older people in such social service. They see the household and friends building a house for someone, when everybody brings poles for the uprights or grass for thatching. They go with their relatives to help in another man's garden, building his house or his cattle-pen or granary. They help in provision of marriage feast or brewing beer for a kinship ceremonial party. All help given in this way is voluntary and kinsfolk are proud to help one another. There is no payment or expectation of payment. They are well feasted, of course. This is not regarded as payment, but as hospitality. The whole thing rests on the principle of reciprocal obligations. It is taken for granted that the neighbour whom you assist in difficulty or whose house you help to build will do the same for you when in similar need (1938:118).

 The above practice of *Ũtugi* in the Agĩkũyũ community is not on the ephemeral level but it is profoundly rooted in the community's custom and world-view. Mugambi summarises the obligations of an individual toward the community as follow:

> Affirming his identity in terms of the community, working for the welfare of the community, sharing his fortunes and misfortunes with the community, sharing his joys and sorrows with the community, ensuring continuity of the community through responsible marriage and family life, being responsible and conducting oneself maturely in private and family life, being hardworking and shunning laziness, being honest and sincere, while shunning dishonesty and insincerity, being courageous and shunning cowardice, being chased and shunning promiscuity (1995:200).

By contrast, Mugambi (1995:200) outlines the responsibility of the community to an individual as giving a person a sense of belonging, providing the person with moral and material protection, and ensuring security and the individual's survival. He notes that through such a system, there is provision for a person's needs and wants, taking care of person's family connections and putting in place social security system for all persons (Mugambi 1995:200). This is made possible by the industries promoted in the community.

Many people in Kenya depend on the land for their survival either as agriculturalists or pastoralists even though some, like the Agĩkũyũ, tend to combine the two activities. Interestingly, the community sees the land as not only an economic asset but also as that

which carries socio-religious value. Mbiti (1971:92) observes that every community has a myth which explains how God gave the land to their ancestors to own and till. For instance, among the Agĩkũyũ, Meru, Aembu and Akamba, land is seen as a unifying factor among the descendants, the family, the clans and the communities. For the Agĩkũyũ, Meru, Aembu and Akamba, to be human is understood as owning land in a communal way (Kenyatta 1938:120). This is because for a man to get a wife, he is required to own a piece of land and some cows for dowry. It is also believed that for a wife to feed her family and practice *Ũtugi,* she would require a piece of land to grow food and the milk from the cattle to feed her children (Kabetũ 1997:21). Similarly, the cattle would need a piece of land to feed on grass. Therefore, according to the understanding of the above-mentioned communities, the land, man, woman and cow are all interrelated, for it is thought impossible to practice *Ũtugi* without each of the items mentioned above.

This anthropological understanding is what the British colonialists could not understand and, the issue of land became one of the major factors that drove the *Mau Mau* (Agĩkũyũ freedom fighters) to the forest to reclaim their inheritance. Many factors prompted the *Mau Mau* rebellion, which was a guerrilla war of emancipation that was fought from the 1940s to 1963 by the Agĩkũyũ against the British colonial authorities to protest the disruption of *Ũtugi.* The colonial government forced the Agĩkũyũ into colonial camps and seized their land, thus, making the practice of *Ũtugi* impracticable (Wachanga 1978:24; Likimani 1985:60; Kanogo 1987:33; Throup 1987; Wanjaũ 1988:47; Kabetũ 1997:21; Kershaw 1997:5; Clough 1998:40; Odhiambo & Lonsdale 2003:23). The Agĩkũyũ found themselves in overcrowded areas which were not fertile for farming and had little grazing land for their cattle. The Agĩkũyũ regard the land as the mother of the community because "it is the soil that feeds the people and at death the people are buried in the soil which nurses the spirit" (Kenyatta 1938:21). Therefore, the people found life unbearable and they opted to fight back as a way of regaining their humanness.

Another economic aspect of *Ũtugi* is service to community. Among the Agĩkũyũ, one cannot afford to be mean with his or her services, for the people believe that, *Ũtonga wa mũndũ ũmwe ũtitongagia gĩcagi no ũtonga wa gĩcagi nĩutongagia andũ othe* (the wealth of a single person does not make the village rich but the assets of the village makes the community

rich).[128] In other words, wealth increases when people work together and share their wealth in the society, hence, *"Kamũingĩ koyaga ndĩrĩ* (when people joins hands to lift the *Ndĩrĩ* - a heavy wooden mortar - they make the work easier); or, simply put, "pulling together" makes a heavy task easier (Kabetũ 1997:41). Of course, this is based on the understanding that to acquire wealth and improve the community's economic well-being requires one to practice *Ũtugi* and this also means hard work. The sense of working together in a community is sometimes perceived by Westerners as a way of promoting laziness and permitting people to act as parasites. Certainly, this is not the case; on the contrary, responsibility and hard work is encouraged, acknowledged and interpreted in the context of the entire community. Similarly, the success, achievements, failures, frustrations and the grief and sorrow of the individual are shared collectively because the solidarity of the unit is stressed at the expense of the individual's private interests or loyalties.

 In her book, "*Introducing African Women Theology*," Oduyoye (2001:95) talks of the case of Nyerere of Tanzania who linked African hospitality with work and economic productivity in his saying: "Treat your guests as guests for two days, and on the third day, give them hoes." In other words, Nyerere sees the act of engaging guests in communal work as a way of sustaining the community's hospitality. Oduyoye (2001:95) interprets this as empowerment within African hospitality which teaches "not only the life skills but also specifically economic skills in order to prevent dependency and parasitism." Seen from this angle, *Ũtugi* should, therefore, be seen as a tool for empowerment and that which obliges the community to be kind to each person, be generous to others, work hard, be disciplined, honour and respect others and to live in harmony with one another. Consequently, the solidarity creates self-awareness and a path to critical consciousness through an awareness of self in relation to others and, such elements of *Ũtugi* can play a decisive role in the fight against HIV and AIDS pandemic in the Kenyan context.

3.8. Ethical life

In view of the above considerations*, Ũtugi* is not only based on anthropological principles but provides the basis for ethics and morality as manifested in the Agĩkũyũ religiosity and sexuality. Van der Walt (2003:221) argues that ethics or morality in Africa is something

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[128] With regard to ecomonic activities, families render to one another a great deal of mutual help. For instance, in farming, people could grant cultivation rights to their in-laws if they did not have sufficient land of their own to maintain themselves. On the other hand, numerous gifts were exchanged among them especially in times of ceremonies which are connected with intiation, marriage or religion (cf. Kenyatta 1938:19).

shared in a communal way and to the benefit of society. This view is in agreement with Gyekye (1987:143) who affirms that morality in Africa has a social and humanistic basis. He further observes that all ethical and value systems in Africa exist "to reinforce unity and communal life", to "seek to create a climate for life in fellowship" and to encourage "mutual participation, exchange and cross-fertilisation" (Gyekye 1987:143).

Sidhom notes that ethics in Africa is a structured system "in the light of which each individual knows where he (or she) stands" (cited by Kunhiyop 2008:9). For Sidhom, the aim and purpose of ethics "is nothing less than the restoration of relationships within the immediate community" in view of the fact that community life is continuously endangered by disturbances and forces of chaos (cited by Kunhiyop 2008:9). In this case, the society itself is the norm, for moral behaviour, as the fundamental criterion of morality, is the community. Hence, an act is perceived to be right if and only if it conforms to the rules and regulations established by the community. Kunhiyop remarks that:

> In Africa ethical principles and rules of conduct have been preserved over the ages in various customs and tradition that provide explanations of the reason, motivation, values and purpose of behaviour. They supply the moral code and indicate "what the people must do to live ethically." Traditions that are passed on from generation to generation become the "Scriptures" of the people that is their source of knowledge about what God requires (2008:9).

The above remark implies that knowledge is sustained by the elders, who are the guardians of the rules and regulations that guide the entire community. Kunhiyop (2008:9) also notes that Africans will always consult the elders and the ancestors to enquire about an issue or the tradition. If the tradition prohibits someone from doing a particular thing, one has to abide by that rule as failure to do so could bring problems or disharmony to the whole community, which comprises not only of the living but also those who have died and are still a vital part of the community (Idowu 1975:42). For that reason, disruption of societal harmony is interpreted as sin. Thias Kgatla claims that:

> [Africans perceive sin as] a transgression of the ethical laws derived from the ancestor. Sin constitutes an offence against the human group as a whole and still further against the ancestral spirit. Sin is inherently the destruction of the group's solidarity, so that a person sins, not against God but against others (1992:328).

From Kgatla's (1992:328) description, an offence is not perceived in isolation of the broader context and an offender "does not stand alone in guilt", for his or her family and the community share in it. Since sin is anything that causes disharmony and disturbance within the social, physical, environmental, moral or religious life, it is, therefore, related to illness

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or lack of health (Kgatla 1992:328). In this case, disruption caused by sin must be counteracted through correct behaviour by setting relations right. Such a view explains what Adegbola (1969:116) calls an "ethics of dynamism" or what Kuckertz (1981:86) views as "ontological, immanent and intrinsic morality." For instance, prior to the arrival of European, it was an acceptable norm for the Agĩkũyũ to practice an aspect of *Ũtugi* which was entrenched in *Ngwĩko* (fondling). This kind of *Ũtugi* was concerned with sexual education for the adolescent. In *Ngwĩko* (fondling), a girl was allowed to sleep in one bed with any man of her age-group but they were not allowed to engage in penetrative sexual intercourse (Kenyatta 1938:157-158).[129]

This form of *Ũtugi* was managed by elders who ensured that young people spent their private time with one other so as to understand the members of the opposite sex well. From the early stage, the Agĩkũyũ would teach their boys and girls to be responsible. A boy was taught how to love and keep a homestead with as many wives as possible since the society believed in polygamous marriage (Kabetũ 1997:50). With this in mind, the Agĩkũyũ male children were taught to cultivate the idea and technique of extending their love to several women and to regard them as companions and as members of one big family (Kabetũ 1997:50). In the same way, the girls were taught how to share a husband's love with other co-wives and how to look after their husband in a communal way.

In the case of *Ngwĩko* (fondling)*,* the girls could visit members of their age-group in one of the boys' huts. On such visits, they could bring with them cooked food and drinks as a sign of friendship (Kabetũ 1997:50); these they would share among the age-group members in the boy's hut and they are expected to eat collectively. As they talked, usually they would pair up according to their mutual attractiveness. What is unique with this practice is that even boys who had no girl-friends, but are of the same age-group, were included in the entertainment (Kenyatta 1938:157). After eating, each boy and girl could then go and 'sleep together.' Describing the process of *Ngwĩko*, Kenyatta (1938:159) explains that the community law forbids these young men from engaging in actual sexual intercourse and they were not permitted to remove the girl's garment (*Kũgucia mwengo wa mũirĩtu*) while

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[129] Although *Ũtugi* as a sexual practice is slowly dying among the Agĩkũyũ because of the way it was condemned by the missionaries, some communities still hold on to it. Indeed, some Agĩkũyũ elders believe that the missionaries made a mistake when they labelled *Ngwĩko* as sinful, for the schools that were started during and after the colonial era did not include sex education in their curriculum. Surprisingly, after independence, the governments of Kenyatta, Moi and Kibaki have failed to include sex education in the secondary and primary school programmes even though many children in Kenya go to boarding schools far from their parents. This has led to an increase in teenage pregnancies which is now a major social and moral problem (read *HIV and AIDS, Drugs, Pregnancies among Young Girls*).

engaging in *Ngwĩko*. In this case, the young man was supposed to put his sexual organ between his thighs to prevent it from touching the girl's sexual organ. Likewise, the custom forbids the girl from touching the male sexual organ with her hands.

The above customary law was put in place because it was assumed that the purpose of *Ngwĩko* was to teach young men sex education by allowing them to experience *Ũrũgarĩ wa nyondo* (the enjoyment of the warmth of the breast) but not the experience of sexual intercourse. While the partners may experience sexual relief, this was not seen as the reason for *Ngwĩko* (Kenyatta 1938:158). Any young man who rendered a girl pregnant (*Kũhira mũirĩtũ ihũ*) was severely punished by the *Kĩama* or the council of elders (Kabetũ 1997:50). Since *Ngwĩko* was associated with reproduction, the Agĩkũyũ considered it a sacred act of carrying out the orders of *Ngai* to reproduce. Furthermore, the girls were expected to be a virgin in the sense of having an imperforated hymenal membrane when they get married. As we have seen above, any form of intercourse which could result in pregnancy before marriage was strictly forbidden.

Another practice of *Ũtugi*, which includes sharing of sex partners, is the *Kũhanda itimũ nja ya Nyũmba*, which literary means planting a spear outside the woman's hut. According to Mbiti (1969:147), this practice was common in some African communities because a person could have hundreds of brothers and their wives were seen as potential wives of all. In the case of the Agĩkũyũ, wives occasionally practiced polyandry especially if a man in the husband's age-group visits the family.[130] When this happens, any of the host's wives had the freedom to take that guest and accommodate him for the night. That night, a spear would be planted outside the woman's hut (*Kũhanda itimũ nja ya Nyũmba)* as a sign that a guest was inside that particular hut and no one should enter.[131] Within the framework of *Ũtugi* and the community's social ethics, this practice was looked upon as purely social intercourse and no feeling of jealousy or evil was attached to it on the part of the husband or other wives (Kabetũ 1997:50). The reason for this is that all the people socialised and have been educated in the idea of sharing especially at the time when they were indulging in *Ngwĩko*

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[130] This practice is prompted by the desire for children which is deeply-rooted in the heart of the Agĩkũyũ society. In fact, procreation of children is seen as the only purpose of marriage and the community regards it as a sacred duty. Therefore, a childless marriage in Agĩkũyũ community is regarded as a failure, for children were seen to bring joy to the family, the clan and the whole society. The social position of a married man and woman who have children was of greater importance and dignity than that of an unmarried man or woman (see Kenyatta 1938:164).

[131] The Maasai of Kenya and Tanzania also engage in the practice of planting a spear outside the hut (see Mbiti 1969:147).

(fondling). They had already imbibed the idea of collective enjoyment, without which there could be no strong unity among the members of the age-group.

Surprisingly, the above practise could be interpreted as committing adultery if a married woman secretly invited into her hut a man (even if he was a member of her age-group) and engaged in sexual intercourse with him (Kenyatta 1938:158). Any man or woman who was found breaking the above *Ũtugi* rules was punished heavily by the *Kĩama* (council of elders); for it was perceived as a transgression of the teachings received during initiation (cf. Nthamburi 1982:70-72). This communal aspect of extending *Ũtugi* to sex is also seen in some other African cultures. Mbiti cites the case of the Maasai culture which also values highly the age-group system:

> The members of one group who were initiated in the same batch, are entitled to have sexual relations with the wives of fellow members. In case where the husband is forced by circumstances to live away from his wife, it may also be arranged by the individuals concerned, and with the passive understanding of the community, that a friend (normally of the brother relationship) may go to his wife and have sexual intercourse with her as may be convenient, partly to satisfy her sexual urge and thus prevent her "going about" with anybody, and partly to fertilize her and raise children for the absent "father." The same arrangements are made where husband is either too young or impotent or sterile (1969:147).

Oduyoye (2001:101) laments that, for many years, women's sexuality has been used as hospitality by men and this type of hospitality is totally ignorant of the welfare of women as it exploits their sexuality. Debunking such customs, Oduyoye (2001:101) argues that certain practices are unacceptable in the modern world and deserve condemnation, for they are just a caricature of hospitality. Such practices include the exchange of wives by men who went to the same school of initiation, absent husbands being replaced by friends appointed by them to have sex with their wives, "brothers, especially twins sharing the duties of being husband to a wife", sterile husbands appointing surrogates in order to have children (sperm donation) and "a healer having sexual relation with his patient."[132] She firmly rejects those forms of hospitality and regards them as a misrepresentation of sexual hospitality and mistreatment of women, since in all cases women "are not given the choice of decision, only the stance of protest" (Oduyoye 2001:103).

While we agree with Oduyoye in questioning the relevance of the above practice in our contemporary world and in the context of HIV and AIDS, it should be understood also that,

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[132] Moyo (1996:10) reminds us that chiefs used to be offer women to male visitors to honour them and to keep them company for the duration of their visit; and, sometimes, they were taken as wives. Such practice was done without consulting the women and it because it was carried out with or without their consent, it could be considered dehumanizing.

prior to participating in *Ngwĩko*, both boys and girls were supposed to have undergone numerous rituals that would guide their morality. Such rituals, which included surgery on their genital organs, were to ensure that these young people had strong bonds with others with whom they underwent painful experiences of initiation and sex education. The principles of *Ngwĩko* dictates that, if a man tried to loosen a girl's *Mwengo* (garments) during the night of *Ngwĩko,* she would automatically report him to all her friends and the issue could be taken to the *Gĩtũngano kĩa Riika* i.e. the age-group meeting, (Kenyatta 1938:158).[133] As a result, the man would be ostracised by his *Riika* (age-group), penalised and banned from engaging in *Ngwĩko* with any girl. His character and moral life have been questioned and his age-group members would never trust him in any sexual matters. Kenyatta notes that:

> These guiding principles, ingrained in the very soul of the young men and women, serve as checks to sexual promiscuity, for, unless a man knows a girl very well, he lest she should not only refuse, but tell other girls and have him *Kũhigwo* (sent to Coventry) (1938:160).

Definitely, no Agĩkũyũ man would like to be ostracised by his *Riika* and this is what enabled the community to adhere psychologically to sex education and ethical teaching. In addition, the strong sense of community solidarity and the concept of collective shame are a regulating factor in the Agĩkũyũ moral life. This factor is also cemented by the sex education entrenched in *Ũtugi* which we shall explore below.

3.9. Traditional education system

In the Agĩkũyũ culture, children are taught the value and meaning of *Ũtugi* right early. As part of the training, a mother could give a child some food or gifts and then tell the child to share it with others; if the child declines to share, the food or gifts would be taken away. The child is being taught to understand the purpose of sharing. In his research, Kenyatta (1938:99) notes that education of children is exclusively in the hands of the mother who, through the medium of lullabies, music, dance, oral tradition, proverbs, myths, culture and stories, the society's history and customs, unconsciously transmits instructions to the child. As a result, the child is helped to understand the meaning and value of *Ũtugi*. This view agrees with Omolewa's observation that:

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[133] Evans-Prichard (1965:49-58) observes that among Nuer, Azande and Kgatla people, full sexual intercourse between boys and girls is allowed as long as it does not result in pregnancy. This means that it is possible for these young men and women to get HI virus and other STDS even though there is no pregnancy.

> The traditional African education is an integral part of the culture and history of a local community which is stored in various forms and transmitted through various modes. Such modes include language, music, dance, oral tradition, proverbs, myths, stories, culture and religion. Traditional African education, which is passed from one generation to another, is usually by word of mouth and cultural rituals, and has to some extent been the basis for sustainable development in agriculture, food preparation, health care, conservation and other sectors for many centuries. This mode of education has by and large been used as a way of acquiring lifelong learning (2007:553).

Omolewa (2007:553) sees the basic characteristic of traditional education in Africa as that which is intimately integrated in the social, cultural, political, occupational, artistic, religious and, recreational life of the people. However, songs, stories and proverbs are the most common modes of education and they are used in all age-groups especially during birth, puberty, initiation, marriage to instil the meaning and values of *Ũtugi* into the Agĩkũyũ people (Kenyatta 1938:119). If anyone is seen to be anti-*Ũtugi*, songs are composed against him or her to challenge such behaviour. This is because a person, who is selfish is seen as a social reject within the community, is nicknamed as *Mwĩbũgĩa* (one who works only for himself), and is feared by the community for he or she is comparable to a wizard (*Mũrogi*). Furthermore, the Agĩkũyũ regard selfishness as crime against the community (Kenyatta 1938:119). In fact, a self-regarding person has no name or reputation among the Agĩkũyũ and is regarded as an individualistic person who should be treated with suspicion (Kenyatta 1938:119).

To counter anti-*Ũtugi* behaviours, the child is taught to practice *Ũtugi* through the education system called *Ũtaraani wa mũciĩ* or *Kĩrĩra kĩa mũciĩ* (family or clan education). In this type of education system, *Ũtugi* is continuously taught until one dies. J.P Ociti (1973:24), David Scanlon (1964:20-130), J.S Mbiti (1969:40), J. Kenyata (1938:119), and Felix Boateng (1983:335-336) have all described traditional systems of African education, prior to the coming of Islam and Christianity, as that which prepared children to be responsible adults in their home, village and community. Kenyatta states that:

> The child has to pass various stages of age-grouping with a system of education defined for every status in life. The parents take the responsibility of educating their children until they reach the stage of community education. They aim at instilling into the children what the Agĩkũyũ call, "*Ũtaraani wa mũcii*" or *Kĩrĩra kĩa mũciĩ*," namely, educating the children in the family and clan tradition. Apart from the system of schools which has been introduced by Europeans, there is no special school building in (Agĩkũyũ*)* sense of word; the homestead is the school. The education of very small children is entirely in the hands of the mother and nurse. It is carried on through the medium of lullabies. In these the whole history and tradition of the family and clan are embodied and by hearing these lullabies daily, it is easy for the children to assimilate this early teaching without any strain(1938:99).

Since the *Kĩrĩra kĩa mũciĩ* (family or clan education) is a continuous education, the person is socialised to appreciate *Ũtugi*. For instance, during childhood the child is taught *Ũtugi* by the parents, sisters, brothers and the members of the extended family. However, the child's education is largely in the hands of the biological mother and, as the child reaches adolescence, the elders assume the teaching of *Kĩrĩra kĩa mũciĩ*. After taking adolescent education, the person is now introduced to adulthood education where the whole community is involved in educating the person. The above *Kĩrĩra kĩa mũciĩ* helps children to know, internalize and practice *Ũtugi* properly. In other words, the lessons of *Ũtugi* are enhanced during language training which is received from the mother. As the child grows, the *Riika* (peer group) becomes important especially as he or she approaches the stage of circumcision.

As we have seen above, preparing the youth for adulthood continues with the use of myths, legends, folksongs and folktales, proverbs, dances, among other resources. An important aspect of *Kĩrĩra kĩa mũciĩ* is the acquisition of knowledge - the entire community is taught how to behave towards one another. This agrees with the Agĩkũyũ's understanding of a person in a community: *Mwana ndareragwo nĩĩ muciari umwe*, meaning, a child is not raised up by one person. Thus, the society is encouraged to pay special attention to strangers and visitors whom they are to welcome warmly with open hands, and whose immediate needs are to be met until they have been fully integrated into their new society. The vulnerable are also welcomed and integrated within the family system and this is well experienced by the orphans and widows who are automatically taken care of by the community. This shows that *Ũtugi* was (and remains) beneficial to the underprivileged. In this regard, Pato asserts that:

> A person is socialised and occasionally re-socialised and in the process, given an identity, a place of belonging, human dignity and personhood. Growth to full humanity is essential not only because it enables one to take one's rightful place and responsibility in the society, but also because failure to become a mature human being renders one vulnerable to forces which diminish one's humanity and the humanity of others. A person who remains childish and irresponsible is feared because he or she tends to be the agent of forces that work against humanity, health and wholeness of both himself and others. To be truly human, therefore, is to belong and to participate positively in those activities that makes self-fulfilment in life by all concern possible. So we are all ineluctably interdependent (1997:56).

In the same way, a person is made conscious of his or her life in the community and is reminded that the pursuit of life is not attained in isolation. This is because life is perceived as communal and the community believes that life can only be possible in "a network of mutual interdependencies between an individual, the family and the community" (Pato 1997:56). This is well articulated by Shutte who claims that in the African way of life:

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> A person depends on personal relations with others to exercise, develop and fulfil those capacities that make one a person. At the beginning of one's life one is only potentially a person. One's life, if all goes well is a continual becoming more of a person through one's interaction with others. Personhood comes as a gift from other persons (2001:12).

For Obanya (2005:7), traditional education system shows three things; first, the educational goal, second, the place where education takes place and, finally, the agencies of this education. He argues that:

> The trans-generational transmission of culture has helped to cement human solidarity and to ensure the continued survival of societies over the ages. Before the emergence of schools as specialized agencies, Education took place in society, where the young and the not so young became educated by simply living their culture (Obanya 2005:7).

The *Table 3.9.1* shows a summary of the Agĩkũyũ's *Kĩrĩra kĩa mũciĩ* (family or clan education) as conducted in various age sets. In this education system, *Ũtugi* is taught from childhood to adulthood. The table also illustrates the fact that *Ũtugi* is well ingrained in the socio-economic, cultural and political life, as well as its inclusiveness in the community set-up.

Table 3.9.1 Summary of *Ũtaraani wa mũciĩ" or Kĩrĩra kĩa mũciĩ* (family or clan education)

Riika (Age group)	Mworoto na Ũtaraani wa mũciĩ (The goal of family education)	Cũkũrũ (School-place where teaching is conducted)	Arũtaani a kĩrĩra (Teachers as agencies of education)
Ciana (Childhood)	Primary socialisation	-*Mũci ĩ* (at home) - *Mbar ĩ* (within the extended family)	-*Aciari* (Parents)
Anake na Airitu (Adolescence)	Life skills acquisition	Within the *Mũhiriga* (clan): all places of work recreation,religious observance, etc During the *Irua* (Initiation period)	-*Aciari (*Parents) -*Athũri (*Elders) -*Riika* (The age-group) -*K ĩama* (Council of elders*) Mũtirii*(Foster parent)
Andu Agima (Adulthood)	Social and organisational skills development	*Bũrũri* - At the community level	-*Athũri* (elders) -*Kiama(*Council of elders*) Mũig ĩ wa bũrũri* (whole community*)

The *Kĩrĩra kĩa mũciĩ* is enhanced through taboos and sanctions and every member of the community is obliged to conform. Obanya (2005:6) observes that African traditional education does not draw "a sharp line of demarcation between formulation and implementation for it is the education for all and by all." Obanya's point can be seen in the summary of the *Kĩrĩra kĩa mũciĩ* above. Furthermore, the use of the *Riika* (age-group) system, in which those of the same age-group are brought together, ensures that everyone

shares responsibilities and works together, as the culture dictates. In fact, the entry to each age-group is marked by initiation in which those initiated are obliged to be responsible and accountable to community's customs (Muriuki 1974:124; Wachege 1992:17; Kabetũ 1997:50). The whole of traditional education is completed before and is considered to be part of the *Irũa* (initiation), which culminates in circumcision. Therefore, it would be needful to examine what takes place during the *Irũa* (initiation).

Certainly, circumcision for *Ihii* (boys) and clitoridectomy for *Irĩgũ* (uncircumcised girls) was and, to some extent, remains a practice among the Agĩkũyũ (Kabetũ 1997:40). The Agĩkũyũ see circumcision as the central focus of the traditional education and through this ritual, both the boys and the uncircumcised girls graduate into adulthood (cf. Nthamburi 1982:70-72; Mwaluda 2003:10; Kabetũ 1997:40).[134] It is believed that the operation carried out on the sexual organ is only the outward sign of an inner transformation to adulthood (Wachege 1992:17; Nthamburi 1995:18). Thus, it is through this initiation that the community recognises a person as an adult, for it is assumed that he or she has received the required education and is now a graduate. In spite of the fact that a child was considered a person after infancy, and had specific duties to perform, it is only during the initiation ceremony that children are accepted as full members of the Agĩkũyũ society.

 To all intents and purposes, the education received by the Agĩkũyũ boys and girls during and after initiation qualifies them for marriage, consequently, opening their door to parenthood, a practice also found in the Wakamba,Waembu, Wataveta, Wataita and Maasai communities (Nyamiti 1969:94; Hobley 1971:68; Mwaluda 2003:10). As for the Agĩkũyũ, each initiate is given a *Mũtiri* (a sponsor or foster parent),[135] as she or he approaches the end of the initiation period. Many dances and songs, called *Mambura* (rituals or divine services), take place during initiation ceremonies and the Agĩkũyũ history is publicly enacted so as to provide a sense of communal solidarity (Wachege 1992:21). Interestingly, each *Irũa* (initiation) group is given its own special name. Initiation ceremonies involve special foods and the selection of

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[134] Clitoridectomy for girls is is a much debated topic in Africa and it is red by women theologians often refer to it as Female Genital Mutilation (FGM). This term was officially adopted by the Inter-African Committee on Traditional Practice Affecting the Health of Women and Children at their meeting in Addis Ababa, Ethiopia in 1990. However, it should be noted that those communities that practice Clitoridectomy do not see it as mutilation but as initiation. In fact, women who have undergone this rite of passage do not see themselves as mutilated and they do not want to be referred to as mutilated; therefore, the topic has become controversial. A middle-ground position appears to be emerging that grants the social significance of adolescent ritual while working to eliminate clitoridectomy even under hospital conditions where it now occurs in some communities in Kenya (the procedure was formerly carried out in unsterile conditions with crude instruments and many life-threatening injuries and deaths have often resulted). However, the Agĩkũyũ boys continue to be circumcised, in a practice which seems to be widespread in Africa and many other parts of the world as well. In Chapter Five, we shall revisit this debate and demonstrate how the church can interculturate this rite of passage in more psychologically, socially and religiously relevant ways, and how this rite can be used as a tool for fighting HIV and AIDS in Africa.

[135] The *Mũtiri* acts as a personal teacher and a foster parent to the initiates.

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a sponsor to impart knowledge and to supervise the youths. After several days of instruction, boys and girls are taken together to a compound for their circumcision (Kabetũ 1997:25). Numerous friends and relatives gather to sing and dance throughout the night while a special feast is made for the parents of the initiates. Prior to the day of operation, there is a ceremonial dance known as *Matuuro;* the physical operations are conducted the next day. It is expected that both boys and girls would endure pain during circumcision and they were not supposed to cry or show signs of fear or weakness (Kabetũ 1997:25).

Indeed, during the festivities, the initiates are separated from those younger than them as a symbol that they no longer belong to the same age-group. Similarly, old ornaments and cloths are thrown away while their *Kiganda* (seclusion hut) of healing is burned down after the initiates heal. Wachege note that:

> Through the elders' instruction, they learned to be dignified. They were warned against compromising their good moral conduct. It was explained to them how to behave uprightly. All listened carefully as they persevered in pain from their operation wounds. Theirs was an initiatory kind of education. It was mainly informal and highly discursive. Such a preparation helps them to acquire insight into traditional, customary matters thereby enabling them to enquire into the community's existential life (1992:21).

After healing, their heads are shaved as an indication that they are not carrying past behaviours into the present. Finally, the initiates return home where their parents anoint them to demonstrate that the past is gone and they are now reborn into the society. On arriving home, a *Mbũri ya kũinũkia mwana* (a goat for escorting the child back home) is slaughtered to celebrate, which signifies a "welcome homecoming" by the community (Wachege 1992:21).

For three to four months prior to their circumcision, the initiates travel throughout the district singing and dancing together, and at the end of the rituals, an oath is administered to ensure that they would live together as one group. The oath is sworn only by initiates in the presence of the community as a public loyalty that they would together, as Kenyatta (1933: 136) puts it, "deport themselves like adults and take all responsibilities in the welfare of the community, and that they will not lay behind whenever called upon to perform any service or duty in the protection and advancement of the (community)."

After initiation and arrival at home, they would go about singing and dancing; and in every place they visit, they are welcomed with joy and the community members feed them with

peas, bananas and porridge. The celebration is normally overseen by the senior members of the community who actually directed the various acts of initiation. Meanwhile, community participation and indulging in *Ũtugi* continue for two or three months. The above rituals teach the initiates that they are now fully a part of the Agĩkũyũ adult group. It also makes the initiates aware that their identity is rooted in the generations of people that stretched into the future and back into the past (ancestors). This understanding enables them to position themselves within the gallery of the living and the living dead and to participate in the maintenance of the elaborate relationships between the two groups which guarantee the smooth running of the entire society. For this reason, it is not possible for one to forego initiation; it is even unthinkable as it threatens the harmony with one's ancestors and places both the individual and the community in conflict.

Another importance of the Agĩkũyũ *Irũa* (initiation) is that, when a first born child successfully completes the initiation process, his or her parents are awarded higher social status in the community; for initiation is considered the point of graduation for both the initiates and their parents (Nthamburi 1995:18).[136] The initiates graduate from adolescent education to adulthood education, while their parents graduate from being members of the *Kĩama gĩa Kamatimũu* (council of spear carriers) to the *Kĩama kĩa Mataathi* (council of peace; cf. Wachege 1992:29). The other stage of graduation associated with *Irũa* (intiation) is the *Kĩama kĩa Maturanguru* (religious sacrificial council) which is the highest grade. This stage is reached when a man has practically circumcised all his children and his wife (or wives) has reached menopause (Wachege 1992:29). Indeed, the shift in position, described above, enables both the parent and the initiates to be transformed.

Besides *Irũa* (initiation), marriage is, among other things, a status symbol in traditional African society. It is understood that the married person has entered the process of becoming an elder, thereby, earning automatic respect (Mugambi 1989a:204; cf. Mwaluda 2003:10). Indeed, every rite of passage in African traditional society is ritually enacted. The enactment of the respective rites of passage symbolises the progressive transition of an individual from one phase to another within the context of corporate identity (Kenyatta 1938:130-187; cf. Mwaluda 2003:10). For instance, it is assumed that *Irũa* (initiation) brings somebody into close fellowship with both the living and the living dead members of the community and into

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[136] Other works written on Agĩkũyũ circumcision include Brown, G.G. 1973. *Christian Response to Change in East African Traditional Societies* and Hopkins, A. 1940. "Female Circumcision" A Paper Written for Staff Consultation, Methodist Church, July.

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active dependence on *Ngai* (God). Frederick Burkewood Welbourn (1968:212) affirms that, "initiation" in the Agīkũyũ society is "a time when an ontological change takes place, a change in one's very nature and state of being." After undergoing the above process, *Ũtugi* becomes consciously and unconsciously assimilated in the society's mind, hence, becoming a way of living. Therefore, in the next section we shall explore the shift in the practice of *Ũtugi*. This will be covered in three areas; *Ũtugi* before, during and after the colonialization of Kenya.

3.10. Pre- colonial era: *Mũgeni nĩ rũĩ*

Before the coming of Europeans to Kenya, the Agīkũyũ were trading with the Wakamba and the Maasai. Muriuki (1974:136) states that the attitude of the Agīkũyũ to all newcomers - the Swahili, the Arabs and the Europeans - was largely influenced by the initial behaviour of the Swahili caravans that had penetrated Agīkũyũ land. And because the Agīkũyũ were traditionally hospitable people who believed that, "*Mũgeni nĩ rũi*" (a visitor is like a river that passes on), they used to practice *Ũtugi* and extended it to all the visitors who came to their land. This kind of *Ũtugi,* particularly to the coastal traders, enhanced their trade relations for instead of having to go through the Kamba who were acting as middlemen, the Agīkũyũ were able to trade directly with the coastal people (Muriuki 1974:136).

With the emergence of Mũgo wa Kĩbirũ, the famous and greatest Agīkũyũ seer, the Agīkũyũ were apparently forewarned that strangers would come to the Agīkũyũ land from out of the big water to their east (Muriuki 1974:137). In his predictions, Mũgo wa Kĩbirũ declared that strangers (referring to European settlers, administrators and missionaries) would come to Agīkũyũland "from out of the big water" (i.e. Indian Ocean). He also said that the colour of their body would resemble that of a small light-coloured frog *(kiengere),* which lives in water, and their dress (clothes) would resemble the wings of butterflies (Muriuki 1974:137). Mũgo wa Kĩbirũ predicted that these strangers would carry magical sticks which would produce fire (meaning guns), and the sticks would be very much worse in killing than poisoned arrows, which the Agīkũyũ used as their war instruments (Muriuki 1974:137). The strangers also would later bring an iron snake with as many legs as *munyongoro* (centipede), referring to the Kenya-Uganda railway, which was built from 1896 to 1901. Mũgo wa Kĩbirũ claimed that the iron snake (rail) would spit fires (meaning smoke) and would stretch from the big water (Indian Ocean) to another big water in the west of the Agīkũyũ country (i.e. Lake Victoria). Mũgo wa Kĩbirũ cautioned the Agīkũyũ warriors not to attack them because

spears and arrows would not contest their sticks that spat fire; instead, he urged the them to practice their *Ũtugi* and accommodate them (Muriuki 1974:137). However, Muriuki questions the predictions:

> But it should be remembered that few intrepid and enterprising Agĩkũyũ traders had journeyed to the coast, accompanying the Kamba people, as early as the 1840s. Others had travelled to Kambaland where they had met coastal traders and possibly the white explorers, Krapf. These Agĩkũyũ traders must have talked about their experiences at the coast and in Kambaland, and it is conceivable that Kibiru - who had many clients, was greatly respected and widely travelled in Agĩkũyũland must have heard of the activities of the Swahili, the Arabs and perhaps the Europeans (1974:137).

For Muriuki, Mũgo wa Kĩbirũ might have heard stories from the Arabs from the coast about the coming of the European and so it was not difficult for him to predict what was likely to happen in the near future as the coastal traders were beginning to penetrate the interior from Mombasa at that time (Muriuki 1974:138; cf. Kenyatta 1938:41-44). Although it is difficult to authenticate Mũgo wa Kĩbirũ's prophecy, it should be noted that Mũgo wa Kĩbirũ was regarded as an outstanding Agĩkũyũ medicine-man and a person who envisaged the coming of the European and appealed to the Agĩkũyũ to extend their *Ũtugi* to them.

In fact, Mũgo wa Kĩbirũ was able to perceive *Ũtugi* as a tool for protection and a weapon for making peace and reconciliation. For him, the Agĩkũyũ could only overcome the above forces of the "upcoming strangers" through the practice of *Ũtugi*. Therefore, he advised the Agĩkũyũ not to take arms against the strangers for they would be able to kill the people from a great distance with their magical sticks which would spit deadly fires, i.e. guns and machine guns (Muriuki 1974:138; cf. Kenyatta 1938:41-44). Mũgo wa Kĩbirũ proposed that the Agĩkũyũ practice of *Ũtugi* could shift these strangers from their position of hostility to a more loving and caring position. Mũgo wa Kĩbirũ claimed that the Agĩkũyũ could also benefit from them before "they could get back to their homes" if they practiced *Ũtugi* (Muriuki 1974:138). As envisaged by Mũgo wa Kĩbirũ around 1887, the foreseen danger began to appear; for the strangers dressed in clothes resembling the wings of butterflies and with guns started to arrive in small groups and, later, in large number when the Kenya-Uganda railway was completed (Muriuki 1974:138; cf. Kenyatta 1938:43).

3.11. Colonial era: *Ũigũano wa Mũingi*

Following the Berlin conference of 1884-85 in Germany,[137] Africa was partitioned by several Europeans powers and Kenya was subjected to British colonial rule.[138] According to Kenyatta (1938:49), this partition is only comparable with the proverbial Agĩkũyũ elephant which invaded the innocent person who owned a house and demanded the rights of putting its trunk inside his hut because it was raining. After the man allowed it to enter, his *Ũtugi* was misused when the elephant adamantly put its whole body within the small hut and broke the hut. According to Kenyatta (1938:51), this is what the colonial settlers did with the land of the Agĩkũyũ and with Africa, at large. Their cunningness could be seen in the fact that the first few Europeans and the Imperial British East Africa Company (IBEA) which, occupied or passed near the Agĩkũyũ land, looked innocent and harmless (Kenyatta 1938:46). They passed through the borderline of the country between the Agĩkũyũ and the Maasai, and between the Wakamba and the Agĩkũyũ. He further explains that in their natural generosity and *Ũtugi*, the Agĩkũyũ welcomed these "wanderers" and felt pity for them (Kenyatta 1938:46). Thus, the Europeans were allowed to pitch their tents and to have a temporary right of occupation of the land in the same category as those of the Agĩkũyũ *Mũhoi* (borrower or beggar) or the *Mũthoni* (in-law) who were given only cultivation or building rights but could not own the land as it belonged to the Agĩkũyũ.

Accordingly, the Europeans were treated with *Ũtugi* in the belief that one day they would get tired of wandering and, finally, return to their own country (Kenyatta 1938:47). By 1895, the Imperial British East Africa Company (IBEA) was replaced by the British

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[137] While colonialism brought many diverse ethnic groups together, communities found themselves split at the centre after unfair, unrealistic and artificial boundaries were agreed upon. For instance, the Maasai found themselves in Kenya and Tanzania, the Luo found themselves in Uganda, Tanzania, Kenya and Sudan; the Somalis found themselves in Kenya, British Somaliland, Italian Somaliland and French Somaliland; the Chewa found themselves in Malawi, Mozambique and Zambia; and the Nguni found themselves in South Africa, Swaziland and Zimbabwe - the list is long (Nthamburi 1991:39).

[138] Evidence shows that the official British presence in East Africa had been limited up to the last quarter of the nineteenth century to indirect influence through the Sultan of Zanzibar. For decades, the British had pressured the Sultan, through a number of treaties to stop slave trading on the East African mainland but without success. Although there were many missionaries and traders living in East Africa - 300 by 1885, the British government was reluctant to become more involved in East Africa; but when the Germans decided to start a colony in East Africa, the British government started becoming more directly involved. With the Anglo-German partition agreement of 1886, Kenya and Uganda were allocated to the British government. Although, the British did not want to invest much money in the East African countries, events in Egypt forced them to change their minds and to take control of those countries. Britain had invaded Egypt in July 1882 thinking that a quick, sharp intervention in Egyptian affairs would restore the leadership of the Khedive Ismail against the growing nationalist movement and, therefore, secure the massive British private investment that had taken place over the previous sixty years. However, the short term restoration of the Khedive stretched into months and then years. In this case, the British thought that if they were to remain in Egypt and invest there, there would be a need to protect the River Nile which had its source in East Africa. They thought that all other Europeans must be kept out of East Africa for the purpose of protecting the Nile water. This is because they felt that if the Nile was tampered with or controlled, Egyptian prosperity and business interests, which depended upon a viable Egyptian economy, would be ruined. Therefore, the British government commissioned Mackinnon and his associates to establish a protectorate in Kenya in the 1870s. Later, Mackinnon and his associates (as a British trading chartered company), took administrative work in Kenya, thus, allowing Britain to have a colonial presence in East Africa without any official involvement. Subsequently, when the Imperial British East Africa Company (IBEA) was launched, this very act became the genesis of many problems that were to affect the lives of the Agĩkũyũ and other Kenyan communities (see Ogot 1963:260; Likimani 1985:10; Kanogo 1987:14; Throup 1987:50; Kershaw 1997:60; Clough 1998:2; and Anderson 2001:9).

government but it was in 1905 that the Agĩkũyũ came under the direct influence of the British foreign office and, then, the colonial office (Kenyatta 1938:47). Of course, the Agĩkũyũ did not notice this change and they only came to realise it after the colonial government had established the first military and administrative posts in Central Agĩkũyũ land which was named, Fort-Hall. However, because of the warning by Mũgo wa Kĩbirũ and the Agĩkũyũ's understanding of *Ũtugi,* the people welcomed this new government and helped them with anything they needed. For instance, Karuri, who was afterwards named a colonial chief, was known to have shown extraordinary *Ũtugi* as he welcomed the new visitors and even called for missionaries to set up permanent residence at his own home. He gave them food, land and provided security during their stay. However, even as Karuri and the Agĩkũyũ at large were administering *Ũtugi* to the missionaries and the government, the colonial government was embarking on a conquest and decisions were being made to bring more European settlers to take Agĩkũyũland (Ogot 1963:260).

The completion of the Kenya-Uganda railway in 1902 had cost 5.5 million shillings and the good soil of Agĩkũyũland attracted the first significant number of European settlers (Ogot 1963:260). The government hoped that the export produce of the European settlers would offset the building cost of the railway,[139] hence, they advertised for more settlers to come especially the peasants and slum dwellers of North American (Ogot 1963:266). However, the settlers who came were European aristocrats and retired officers of the *Crown* although some from the white South African communities also came (Sorrenson 1968:1-4). The first land which these incoming settlers took was the area near Nairobi (which became the new capital of the colony) and the area which borders the region of the Agĩkũyũland.

Surprisingly, while the white settlers were abusing the *Ũtugi* of the Agĩkũyũ by taking their land, the missionaries were also scrambling for the same land. For instance, in 1908, the African Inland Mission (AIM) took 2461 acres of land near Nairobi (Kijabe) and occupied another piece with an area of 200 yards by two miles without lease or title deed (Sorrenson 1968:4). Sadly, land occupation was taken by the settlers and missionaries alike with total disregard of local community ownership. Further, the Crown Land Ordinance (CLO) of 1915 caused additional hardship to the Agĩkũyũ people, for this law enabled the colonial government to disregard the ownership of land in the entire Agĩkũyũ region and forced the

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[139] Ironically, it was African grown cotton in Western Kenya and Uganda that eventually paid for the railway and not settlers' agriculture (Ogot 1963:260-266).

people to become tenants of the government (Kanogo 1987:14; cf. Likimani 1985:10; Throup 1987:50; Kershaw 1997:60; Clough 1998:2).

In the midst of all the controversy, the government provoked the Agĩkũyũ by bringing more settlers and encouraging the administrative officers and their relatives to take more of the Agĩkũyũ land. This had a negative effect especially on the practice of *Ũtugi,* for the people's social and economic systems were threatened when the colonial government introduced the forced labour law. With this law, the Agĩkũyũ were forced to work for settlers on the very land that was taken from them besides working for the government on the forced public works (Nthamburi 1995:27). Further, because there was a great need for a number of projects which the colonial government wanted to complete after an administrative post was established in the Agĩkũyũ area, the colonial administrators thought that the practice of *Ũtugi* would be useful to them if the people were forced to work on the projects (Muriuki 1974:5; cf. Nthamburi 1995:27). Under the 1912 forced labour law, the Agĩkũyũ were coerced to work outside their districts as in the case of the construction of the Fort Hall-Embu Road. Those who were not working on the construction of the road were forced to work for missionaries. According to Nthamburi (1995:46), many innocent people were massacred during this period, and those who resisted in any way were taken to work in road construction in other areas as punishment.

On the other hand, forced labour on the European farms had the greatest impact on the welfare of the Agĩkũyũ. Elspeth Huxley, who was a sympathiser of white settlers, affirms that:

> Since the government had encouraged the settlers to come to Kenya, it was now her responsibility to help them get free labours in their farm if they were to make profit. After 1st World War the settlers pressurised the government to exercise every possible lawful influence to induce able bodied men to go into the labour field. To achieve this, the government introduced *Kipande* (identity card), which was a massive registration in which all the male Agĩkũyũ over the age of sixteen[140] is to be registered and given an identity card. The idea behind this was to find out the labour potential and to control those who were running away. The certificate had to be endorsed by the employer before the labour could lawfully leave his job. Failure to have this done or to produce one's certificate upon demand by the police rendered a person liable to a fine of not more than 300 shillings and one month imprisonment (1953:47).

To add insult to injury, the colonial powers did not only subjugate communities by using excessive force labour and introduction of *Kipande,* but they also imposed their culture on

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[140] The age was lowered to twelve in 1926 to enlarge the labour force.

the people and introduced hut taxes. The purpose of the hut tax was to compel the Agĩkũyũ to leave their homeland as they would only be able to pay the tax when they were employed on the settlers' farms (Anderson 2001:9). Certainly, this method worked well in favour of the white settlers for those Agĩkũyũ who failed to pay received stiff penalties. Furthermore, the colonial government put more pressure on the Agĩkũyũ by increasing the taxes every year, thus, forcing them to continue working on the settlers' farms (Anderson 2001:9). Consequently, the Agĩkũyũ spent most of their valuable time each year trying to earn money to pay taxes. McGregor. M. Rose (1927:196) notes that, to absent oneself from work, even for emergencies, was not acceptable and the *Kipande* registration made desertion without being caught very difficult. Furthermore, the situation was characterized by much brutality as the Europeans were insensitive to Agĩkũyũ socio-economic and political needs. For those who worked for unscrupulous employers, payment of wages was not even guaranteed (Rose 1927:196). Such tactics as displaying great cruelty or setting impossible tasks were used against labourers nearing the end of their contract in the hope that they would leave early and, thus, forfeit their wages (Rose 1927:196).[141]

Such gross abuse of the practice of *Ũtugi* brought severe disharmony in the life of the Agĩkũyũ. This was made worse during the First as well as the Second World War when the colonial government forced many Agĩkũyũ to join the war (Anderson 2001:9). Moreover, because of lack of motorised transport, those who did not join the war were forced to become porters. By the time the war came to an end, many of those people who returned died of fatigue, smallpox, tuberculosis and dysentery contracted during the war (Anderson 2001:9). However, despite the misfortunes, remnants of the two World Wars discovered many secrets of the colonisers including the rivalries among the various colonial powers (Anderson 2001:9). They noted their cunningness and felt betrayed for being made to fight amongst rival European armies in the name of freedom.

With socio-economic and political disharmony in the society and the colonial trend of humiliating policies, rudeness and dispossessions, the Agĩkũyũ began seeking a permanent solution to this dysfunctional system of colonialism. To overcome the above, the Agĩkũyũ attempted to use the elements of unity entrenched in *Ũtugi* to address the issue of power relations, identity, politics, self-assertion and sovereignty for their country (Ezeh 2006: 99).

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[141] It is vital to note that, at some stage, there were few missionaries who opposed the forced labour, colour-bar and assault on Africa culture; these include people such as Dr. Philip, Barlow and J.H. Oldham of the CMS (see Nthamburi 1995:27).

Kibicho (2006:148) agrees with Ezeh that the unity found in *Ũtugi* helped the formation of liberation groups such as *Mũma wa Ũigũano* (Oath of Unity) and *Ũigũano wa Mũingi* (Unity of the Masses), which later became the *Maũ- Maũ* movement.[142] If the imperial powers had not dispossessed Agĩkũyũ of their practice of *Ũtugi,* freedom, decorum and possessions, then the community would not have engaged in war for they were warned against it by Mũgo wa Kĩbirũ (Muriuki 1974:24; cf. Mugambi 1989c:84; Abdul-Raheem 1996:1ff). By misusing *Ũtugi*, the Agĩkũyũ felt that colonialism was draining their essence, making a caricature of their culture, undermining their socio-economic and religious system and destroying their magnificent artistic creations (Ezeh 2006:98). Consequently, they realised that their survival could only depend on *Ũigũano wa Mũingi* (Unity of the Masses).

This view echoes Kenyatta (1938:46) who claims that the misuse of *Ũtugi* by the colonial government and the missionaries made the Agĩkũyũ to be bitter in their hearts after they realised that the strangers to whom they had shown *Ũtugi* had set out to raid and conquer them with brute force. The *Ũtugi,* which can be traced to the Agĩkũyũ legendary narratives and was practiced by the society for generations, was misused by European colonisers. Obianga laments that Africans welcomed Europeans and adopted European values only to find that the element of reciprocity was missing (cited by Oduyoye 2001:94–95). Moreover, Africans resisted European colonialism because of misuse of their hospitality (Oduyoye 2001:94). Of course, Obianga and Oduyoye might have discovered that the European understanding of hospitality was incompatible with the African understanding.

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[142] The *Mau Mau* movement was a guerrilla war of emancipation that was waged mainly by the people of Central and Eastern Kenya, from the 1940s to the early 1960s, to protest the injustices of the colonial authorities. The injustices can be explained in various ways. First, the then five million Africans who lived in the British colony of Kenya had failed to gain any meaningful form of political representation, and the emerging political movements such as the *Agĩkũyũ Central Association* were suppressed and banned by 1940. Anderson (2001:9) recalls that the dissent found its expression for over three decades leading up to the *Mau Mau* rebellion; for Africans voiced their "plangent political concerns despite the obstruction of an unsympathetic colonial state." Some of the issues that dominated the African politics included low level of African wages, which were kept so by the European settlers who were eager to be competitive agricultural producers. The Africans also agitated against the forced carrying of the *Kipande* – that is, an identity card and a passbook that were introduced after the First World War – without which no African could leave his or her home to look for a job. Frequently, European settlers would punish "errant" African workers by tearing up the *Kipande*, thereby, making it impossible for them to get another job (Anderson 2001:9). In addition, the settlers punished their labourers with the *kiboko* – that is, a whip made of rhinoceros hide; they would also flog the African workers from time to time and justified their actions with trivial excuses. As Anderson notes, "by the early 1920s, the deaths of several African servants from beatings at the hands of their European masters earned Kenya's white settlers an unenviable reputation for brutality" (Anderson 2001:78; cf. Wachanga 1975, 1978; Likimani 1985; Kanogo 1987; Throup 1987; Wanjaũ 1988; Kershaw 1997; Clough 1998; Odhiambo & Lonsdale 2003). Thus, the injustices led the Africans to go to the forests and they began to operate as guerrilla fighters. As the war went on, police brutality was experienced in earnest as the screening of the suspects began. The colonial government tortured people in the name of verifying who was a *Mau Mau* adherent or who was not. Caroline Elkins (2005:87-8) asserts that, "Torture, or fear of it, compelled oath takers to give details about their ceremonies, including names or revealing the locations of the caches of arms or food supplies for *Mau Mau* fighting the forest war. Some of this intelligence was accurate and some (was) pure fiction, fabricated on the spot by *Mau Mau* suspects trying to save themselves. The colonial government nevertheless used the information to convict some thirty thousand *Agĩkũyũ* men and women of *Mau Mau* crimes and sentence them to prison, many for life."

3.12. Post- independence Kenya: The shift of *Ũtugi*

3.12. 1. The Kenyatta era (1963-1978)

The *Ũigũano wa Mũingi* (Unity of the Masses) and the communal element entrenched in *Ũtugi* was seen by th*e* Agĩkũyũ as a tool that facilitated Kenya's independence in 1963. Kiiru (2004:49) rightly observes that each community in Kenya has a local name equivalent to "community co-operation" found in one of the elements of *Ũtugi*. For instance, the Luo call "community co-operation" *Kende,* the Luhya call it *Obwasio,* the Kamba call it *Mwethia or Ngwatano,* and the Maasai call it *Ematonyok* (Kiiru 2004:49)*.* After independence, the first President of Kenya, Mzee Jomo Kenyatta realised that independence was not really the end of the struggle but just the beginning. As a person who had studied anthropology at the University of London, Kenyatta realised that the communal element of *Ũtugi*, which exists in almost every community in Kenya but under different names, could be used as a tool for socio-economic and political progress (Ezeh 2006:99). Since this communal element in *Ũtugi, Kende, Obwasio, Mwethia* and *Ematonyok* connotes the idea of "pulling people together", it was translated in Kiswahili as *Harambee,* even though this does not really mean to "pulling together" (Kiiru 2004:49).This is because the Kiswahili word for "pulling together" is *Kuvuta pamoja.*

It is from the above perspective that the Agĩkũyũ perceived the launching of *Harambee* by Kenyatta as an attempt to construct a philosophy which could be embraced by the whole country.[143] However, while many people knew about *Ũtugi,* few people in Kenya knew the origin of the word *Harambee* which Kenyatta seemed to have imposed on the Kenyan people. Thus, many theories emerged concerning the origin of the word *Harambee.* This is because different people interpret it differently and there is no clear consensus on its origin. For instance, one school of thought argues that the word *Harambee* has its origin in the coastal part of Kenya in areas such as Mombasa, Malindi, and Lamu (Murage 2006:14). Since the economy of these Kenyan districts was of a maritime nature, the dhow trade played an important role in their society.

Ngethe (1979:27) confirms that the launching of a newly constructed or repaired dhow would require many people to pull it aside to the particular place where the engineers would work

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[143] According to the Government of Kenya's Session Paper No 10 of 1963, *Harambee* as a political philosophy was established at independence when the destiny of Kenya was placed in the hands of the Africans. In order, then, to translate the political aspirations of the people into tangible benefits, the government initiated measures for speedy economic and social development. During this particular period, *Harambee* was promoted and it aimed at "enhancing the quality of life of the nation's families."

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on it. To do this, mangrove logs were normally arranged towards the sea to facilitate the exercise. The people who would take part in the launch would use ropes and other devices and would collectively chant *"Qalbi"*[144] (Murage 2006:14; cf. Ombudo 1986:6). As they engaged in trade, they collectively harmonized their efforts by helping one another to pull the dhow swiftly from the dry dock into the sea as they would do in an everyday business. This explanation is closer to our present popular understanding of the official interpretation of the word *Harambee* which means, in Agĩkũyũ, *Kamũingî koyaga ndĩrĩ* (when people join hands to lift the *ndĩrĩ* - a heavy wooden mortar - they make the work easier) or simply put, "pulling together."

Another theory suggests that the alternative "linguistic interpretation of *Harambee*" is a derivation from the twin words *"Haraka"* and *"Mbele."* For example, Ombudo (1986:8) suggests that, *"Haraka* is a Swahili word which means doing things quickly (*Haraka*) and collectively, while '*Mbee*'" is derived from the northern Swahili dialects, which means forward (*Mbele*)." This interpretation shows that when you combine *"Haraka"* with *"Mbee"* it would signify "doing things quickly and collectively with a forward connotation."

Critics of *Harambee,* however, argue that the Indians imposed the word *Harambee* on African workers who joined the construction of the Kenya-Uganda Railway from 1896 to 1901 (Murage 2006:14). According to this school of thought, the word *Harambee* has no origin in Bantu languages and neither does it come from Arabic or Semitic languages. Instead, they argue that the word *Harambee* comes from the two words *"Hare"*, which means "hail, exalt or praise" while *"Ambe"* means "goddness" (Murage 2006:14; cf. Mutugi 2001:106). On this, Mutugi claims that:

> Hare *Krishna* means "exalt *Krishna*," and "*Hare Rama*" means "exalt *Rama, "Amb*e" is a word for an Indian goddess with eight hands… Hinduism involves beliefs in more than 300,000 gods. Most devotees worship just a few powerful ones and respect the rest. But "Ambe" is believed to have power above every other gods and these fall under her. "Ambe" is addressed as "*jak Ambe*" or supreme ruler of the universe or "*jai-Ambeman*" meaning hail the goddess mother (2001:106).

Mutugi's claim enables the critics of *Harambee* to argue that during the building of the Kenya-Uganda railway, the Indian constructors probably called upon the strength of "*Ambe*" to enable them pull the wagons from the rails and as they did so, they would cooperatively

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[144] This is an Arabic word which means "heart" and was commonly used by the people of the Kenyan coast region because of their early interaction with Arabs. Accordingly, the Shirazi tradition affirms that King al-Hausan Ibn Ali and his six sons sailed to the coast and founded various Arabs settlement in the coast of Africa (Ogutu and Kenyanchui 1997:122). Indeed, these Arabs intermarried with the locals and the Kiswahili language was developed as the language of religion (*Ndini*) and commerce (*Biashara*).

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and collectively work as they shouted *"Hare-Ambe"* i.e. "hail Ambe", and, then, the others would respond by saying, *"Jay"* (Mutugi 2001:106). As a result, the African labourers who were assisting the Indians to pull the wagons on the railway were also compelled to shout *"Hara-Ambe"* but they could only pronounce it as *"Harambee."* According to Mutugi (2001:106), they did this until the construction was completed in 1901 and, by then, the word *"Hara-Ambe"* had changed into *Harambee.* However, unlike *Ũtugi, Harambee* only focused on the financial and political aspect of the country. In his speech as Kenyan Prime-Minister in 1964, Kenyatta declared *Harambee,* as a tool for fighting "our enemies" which include "ignorance, sickness and poverty."[145] As they did in the practice of *Ũtugi,* Kenyatta urged Kenyans to engage in *Harambee* (self-help) efforts to satisfy their economic needs rather than wait for the state to address such concerns (Cullen 1964:7). As a way of reinstating the original *Ũtugi* before the coming of the Europeans, he encouraged people to demand support for their initiated self-help projects from their political leaders (Cullen 1964:7).

In a way, Kenyatta was directing the society to give their support to political leaders in exchange for the assistance that such leaders accord their economic activities. The central message of the *Harambee* slogan was "self-reliance" (Widner 1992:63). This was expressed most concretely in the rural self-help movement, but the slogan underlay wider social, political and economic policies of independent Kenya which were propagated as representing "the spirit of *Harambee*" (Widner (1992:63). In the first decade of independence, *Harambee* was linked to other slogans or catchwords of the political leaders of the new nation who preached *"Uhuru na Kazi"* (independence and hard work), "No *Manna* from heaven", and "No free things" (Widner 1992:63). This explains why Kenyatta constantly reminded people to work hard and to work together in the spirit of *Harambee*. During his time in power, the concept of *Harambee* gained momentum when he popularized it as a mobilizing slogan. For instance, in his inaugural speech as prime minister of the new Republic on 1st June, 1963 (Madaraka Day), Kenyatta is quoted by Anthony Cullen to have said:

> But as we celebrate, let us remember that constitutional advance is not the greatest end in itself. Many of our people suffer in sickness. Many are poor beyond endurance. Too many live out narrow lives beneath a burden of ignorance. As we participate in pomp and circumstance, and as we make merry this time, remember this: we are relaxing before the toil that is to come. We must work harder to fight our enemies that (sic) are ignorance, sickness and poverty. I therefore give you the call *HARAMBEE*! Let us all work hard together for our country Kenya (1964:7).

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[145] See Kenyatta, J. 1964. The *Prime-Ministers' Speech.*

Later, on 13th December, 1963, the day of the state opening of parliament, Kenyatta reiterated the need for co-operative effort for a successful Kenya and stressed that:

> Our motto *Harambee* was conceived in the realisation of the challenge of national building that now lies ahead of us. It was conceived in the knowledge that to meet this challenge, the government and the people of Kenya must pull together. We know only out of our efforts and toil can we build a new and a better Kenya. This then is our resolution… (in Cullen 1964:8).

According to Widner (1992:63), every political speech that Kenyatta made ended with his chant of "*Harambee! Harambee! Harambee-e-e-e-e!",* and people would respond, "*Hooooooo.*" This can be translated literally as, "let us pull together and develop this nation!" while the audience responded, "Yes! Yes"! Kenyatta, who extolled the virtues of independent self-help activities and emphasized the mythical linkages between traditional community self-help activities, encouraged *Harambee.* He felt that *Harambee* was a contemporary example of *Ũtugi* even though *Harambee* should be used to enhance community cooperation and self-reliance of the whole country, unlike *Ũtugi,* which is practiced only by the Agĩkũyũ.

3.12. 2. The Moi era (1979-2002)

The demise of Kenyatta in 1978 opened the way for the then vice-president, Daniel Arap Moi, to take over as the President of Kenya. Even though many *Harambee* projects were initiated during his tenure, the period also marked the misuse of *Harambee.* According to Norman Miller (1984:110), President Moi inherited Kenya's leadership when the economic growth was at its highest peak. Moi is said to have exploited his experience as a long-term serving vice-president of Kenyatta to be elected unopposed as the president in the 1979 one-party elections (Miller 1984:110). From that time, Moi took all possible measures to establish his regime and, in the process, he transformed Kenya into a fully authoritarian state (Miller 1984:110).

Regrettably, during the Moi era, the wonderful *Harambee* phenomenon turned into a strategy for enriching a few at the expense of the poor. This is because Moi and other politicians turned *Harambee* into a political vehicle with which they manipulated and misused public funds (Gitari 2005:160). Thomas observes that:

> Among the most important ways candidates for parliament seek support is support is demonstrating their ability to aid their people with funds for *Harambee* projects. Candidates seek to prove their loyalty to their constituency by organising new projects, contributing generously to projects and indicating that, if elected, they would be able to provide largeness of various sorts for their people (1999:9).

According to Ogot (1995:192), during the Moi era, a large section of the public was apprehensive about the tremendous increase in smuggling and corruption, activities known as *Magendo,* which marked Kenya's public life. The first major action that Moi took in 1982 was to introduce constitutional change which made Kenya a one-party state, *de jure* (Okumu 1984:65). However, the Moi era was characterised by recession and stagnation which resulted in a drop in economic growth (Okumu 1984:65). In addition, the situation deteriorated because of high inflation, the drop in coffee and tea prices which were, and remain, Kenya's leading cash crop.

The declining economy was evidently worrisome to the president as his leadership success would largely be determined by the economic development of the country (Miller 1984:113). Therefore, Moi thought that the best way to keep contact with the people, especially the rural poor, was by adopting *Harambee* but changed its name into *Nyayo* philosophy (Miller 1984:113). *Nyayo* is a Kiswahili word, which simply means "footstep." Gitari (2005:160) observes that, in 1978, Moi called Kenyans to follow his *Nyayo* (footsteps) because he himself was following the *Nyayo* of Kenyatta. Gitari (2005:160) further notes that, "between 1978 and 2002 the word *Nyayo* had become a famous political slogan in all political rallies and was repeated alongside President Kenyatta's *Harambee*".

Thus, Moi was nicknamed *Nyayo,* and any politician who wanted to survive politically had to toe Moi's line. Failure to follow "*Moism or Nyayoism*" meant a politician could be kicked out of politics and, in some cases, after trumped up charges were levelled against the politician. What this implies is that anyone who acted contrary to the *Nyayo* philosophy was perceived as being anti-government (*The Standard,* 22nd July, 1987). This era marked further entrenchment of political monolithism. The *Nyayo* ideology in its expanded form was attacked by church leaders and Moi regarded them as dissidents preaching "foreign ideologies" (Gitari 2005:160). He capitalised on *Harambee* meetings to capture the attention of the nation and, at the same time, he used the *Harambee* forums to address Kenyan citizens. At these meetings, he won people's political and economic confidence as he contributed generously to various *Harambee* projects.

Consequently, every political leader tried to emulate Moi and they would organise a *Harambee* launch every weekend. As Kiiru (2004:50) notes, many *Harambees* were organised to raise money for all types of projects. Moi sums it up thus:

> The rally is many things in one. The opening prayers make it a place of God. The political speeches make it an educational institution. The fundraising makes it a commercial undertaking. The cultural performances turn it into the people's theatre. Thus, the rally is truly an African *baraza*,[146] at which all that is best comes together, openly and sincerely for the common good (1986:30).

Kiiru (2004:30) noted that unlike Kenyatta who attended very few *Harambee* meetings, Moi attended all major *Harambees* that were conducted at District levels, made himself accessible to *wananchi* (ordinary Kenyan public) and, by so doing, increased his moral support and political power base. Gitari (2005:160) agrees with Kiiru (2004:30) who contends that, during this period, the Pentecostal churches and African Inland churches (AIC) were the major beneficiaries of Moi's *Harambee*. This was so because they did not criticise his misrule unlike the mainline churches such as the Anglicans, Methodists, and Roman Catholics which criticised his increasing authoritarian rule.[147] Unlike Kenyatta, who refused to associate himself with any religion, Moi was a churchgoer and a member of the "Evangelical African Inland Church" (Kiiru 2004:30). According to Okullu (1984:55), that church pulled herself from the National Christian Churches of Kenya (NCCK) because the mainland churches were critical of Moi's administration. Despite the drawbacks, President Moi remained the biggest financial asset to *Harambees* countrywide between 1980 and 1999 (Finance magazine 1999:3).

Since the period of Moi's government is interesting to our studies, we need to analyse it critically. Firstly, while *Ũtugi* was a traditional virtue for helping visitors, the needy and the vulnerable in the Agĩkũyũ society, after independence, Kenyatta used the same concept which he named *Harambee* to include the wellbeing of all other communities in Kenya. During Moi's era, politicians used the concept to maintain their status quo thereby reducing it to a political tool. In this regard, the Agĩkũyũ realised that *Ũtugi,* as they know it, has profoundly changed and has been reformulated to become a mere tool of political mobilisation and propaganda. This is because Moi misused it politically to manipulate the masses for his own selfish ends and political survival. In fact, Moi ruled Kenya for twenty-four years, fourteen of which, he ruled with an iron fist and as a despot.

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[146] In Kiswahili, the word *baraza* means an informal open air public meeting normally conducted by local leaders.

[147] The political leadership that came in Africa after the 1960s has also abused African hospitality. Nthamburi (1991:41) argues that the independent African states cannot be exonerated from the suffering of their peoples. There are many examples to illustrate this. Uganda, during the time of Idi Amin, was stained with blood; and the civil war between Biafra and Nigeria reportedly left at least a million people dead (Mutugi 2001:133). Rwanda's genocide pitted Hutus against Tutsi tribes and the civil war in Chad reportedly left many people dead. The civil war between Southern and Northern Sudan cannot be blamed on the foreigners who abuse African hospitality per se but on Africans themselves. In addition to the dictatorial regimes that Africa has witnessed before the 1990s when multiparty politics swept across Africa, we can rightly argue that Africa has her own share of blame.

Secondly, whereas, during Kenyatta's time, *Harambee* was meant to be a tool of empowerment, unity, 'pulling together' and giving the poor the power to solve their own problems, under Moi's regime, *Harambee* was changed into *Nyayoism* and it was hijacked by the rich and the politicians as a tool for disempowering the poor, both politically and economically. *Harambee* had become part of the grand theft that took away the little that the poor contributed. In fact, some money, which was contributed during Moi's time, ended up benefiting and glorifying the few rich who were mainly the political elites (Okullu 1984:55; cf. Kiiru 2004:30; Gitari 2005:160). For instance, Gitari (2005:160) claims that in the Kirinyaga District, it was once discovered that some substantial amount of money collected during *Harambee* ended up in the pocket of a rich local politician.

In reality, such practices are against the principles of *Ũtugi*. For it is clear that the success of the practice of *Ũtugi* among the Agĩkũyũ was greatly undermined by the Europeans and, subsequently, by the Moi regime which was voted out of power on 29th December, 2002. With the coming of the NARC government on 30th December, 2002, politicians and civil servants were banned from participating as "guests of honour" at *Harambee* ceremonies. Specifically, President Kibaki's administration banned politicians from becoming guests of honour at *Harambee* ceremonies.

3.12. 3. The Kibaki era (2002-)

At his inauguration on 30th December, 2002, Kibaki declared war on corruption, nepotism, bribery, inefficiency and all malpractices, on which Kenya's detractors had consistently harped. [148] Probes and investigations were set up to implement this new venture and *Harambee* came under severe public censure. Koigi Wamwere, who was at the time a Subukia Member of Parliament and later became an assistant minister of information and broadcasting, was appointed as the chairman of the task force to evaluate the misuse of *Harambee* (Daily Nation, 30th July, 2003). As a result, a wide range of reforms were proposed by the Kibaki regime to control the rampant abuse of *Harambee*. [149] However,

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[148] Presidential speech - http://www.statehouse.news/inagulation.htm- (cited on March 2010)

[149] The Koigi wa Mwere committee recommended the abolition of *Harambees* for raising money to build government offices such as district headquarters, police stations and chiefs' camps (Daily Nation, 30th July, 2003). Similarly, it was also declared illegal to publicly raise funds at night or to use children as collectors. All serving members of parliament, including ministers and civil servants, were banned from officiating at *Harambees* (Daily Nation, 30th July 2003). However, because of the public outcry, the government agreed to maintain *Harambee* at the local community and family levels, especially in the cases of pre-wedding parties, hospital bills, university education, funeral committees, birthday fund-raisers and church fundraising. The committee also recommended the elimination of Presidential *Harambees* for school fees and introduced free primary education (Daily Nation, 30th July, 2003). In summary, the government observed that the *Harambee* concept was originally good and the spirit was right. However, the government started to work on eliminating its abuse, corruption and distortion created during the Moi's era. As a result, the government introduced the Constituency Development Fund (CDF), which gives the community power to identify their projects in their area while the Members of Parliament are given a certain amount of

despite his attempt to curtail corruption, the Kibaki administration has been largely unsuccessful, even though the misuse of *Harambee* has been reduced to minimal.

Therefore, it would be erroneous to ignore the political misuse of *Ũtugi;* the increasing economic pressures; the task-oriented life-style; advances in technology; materialism; growing urbanization; increasing individualism; secularism; permissiveness; religious fundamentalism; as well as advances in medical, agricultural, mechanical and other rational empirical scientific approaches, all of which have threatened the practice of *Ũtugi* in contemporary Kenya (Mutugi 2001:47; cf. Healey and Sybertz 1996:196; Githiga 2001:58). However, despite the setbacks, *Ũtugi* continues to play a decisive role in the Agĩkũyũ society; for it remains centred in the extended family system, groups, clans, villages and even towns. For instance, those who live and work in urban areas continue to link and network with their families in the rural areas and during the rite of passage, they would travel to their villages in the rural areas (cf. Beyaraaza 2008:1). At times, those in urban areas would spend their holidays in the rural areas while those in the rural areas, if they so desire, could spend their holiday with their relatives in town.

Interestingly, in times of crisis, both the urban and the rural dwellers would congregate with their relatives to support one another as dictated by *Ũtugi,* i.e. simply "being there" for the others.[150] Therefore, it is good to concede that certain elements of *Ũtugi* have had, and will continue to have, strong influence on the Agĩkũyũ worldview. In spite of the abovementioned challenges of modern life on the socio-economic life and the political pressure that compelled the Agĩkũyũ to adjust to the new conditions of living which often differ significantly from their traditional way of living, the practice of *Ũtugi* is very strong and still

money for these projects in their constituencies. However, because this money is allocated to community projects, and not to projects associated with the faith groups, the church has continued to use *Harambee* as a tool to initiate various development projects in the community.

[150] According to Ernest Beyaraaza (2008:1), almost all people in Kenya who live in urban areas have roots in rural areas where they have a great deal at stake; and those who do not have parents, have other relatives in those places. Beyaraaza (2008:1) claims that unless one is a foreigner, one owns a house where he stays in the city and a home where his parents and other relatives live. He notes that the difference between house and home are extremely important for many working people, including high officials, who live in the houses that either belong to or are rented by the unit for which they work (Beyaraaza 2008:1). In other words, the employee lives in this house with his family and even other relatives only as long as he is still employed. This is very significant because, at any time, one can lose one's job or die, and eventually one must retire. In the event of any of the above, the family members, relatives, and whoever has been in the house will have to go. Due to uncertainty in the urban areas, many tend to resort to the rural areas. This is the safest in Africa today. First of all, when you have a good job and fit in the city it does not follow that all your children will fit there as well. Thus, many think it wise to keep contacts with both urban and rural life. Second, experience has shown that whenever wars or political uprisings break out, it is the urban people who suffer most. One may lose all one's savings in a day. Therefore, even those who can afford to establish homes in urban areas think twice before they do so. Many first develop homes in rural areas and then build houses in the urban areas for mere comfort. Third, when they retire, many feel more comfortable in rural areas where life is often far cheaper and much easier. Fourth, the general tendency in Africa is to bury the dead at home, i.e., in the rural areas; whereas urban areas are generally places of work. Loss of job, death, or retirement, generally, means returning to the rural areas.

largely influences the Agĩkũyũ's way of life. For this reason, it is necessary to identify the positive aspects of *Ũtugi* that can be useful in developing a creative praxis theory for pastoral care and counselling of PLWHA and their families. In this case, the abovementioned Agĩkũyũ worldview and identity would need to be acknowledged in order for this model to be effective.

3.13. Conclusion

This chapter has outlined the mythological factors, the history, the nature, the characteristics, the meaning and the principles of *Ũtugi* among the Agĩkũyũ. It has shown that *Ũtugi* was used during the ancient period, the colonial period and post-colonial period, that is, the Kenyatta, Moi and Kibaki eras. The chapter has unveiled the centrality of *Ũtugi* in the cultural, social, political, economic, moral and religious practices of the Agĩkũyũ. It has also found that *Ũtugi* has its foundation in both *Nyũmba* and *Thingira* and it transcends Agĩkũyũ culture, consequently, enabling us to understand the context in which the practice of *Ũtugi* emerged. The chapter has noted that, since *Ũtugi* is entrenched in *Kĩrĩra kĩa mũciĩ* (family education) and it permeates all sectors of life, like African traditional religion, it is difficult to give a distinction between its sacred and secular dimensions. Indeed, *Ũtugi* as a prerequisite in the Agĩkũyũ communal life, opposes individualism and has been seen in this chapter, as that which enhances, protection, provision, solidarity, love, care, nurture, accommodation, compassion, welcome, appreciation, forgiveness, encouragement reconciliation, restoration, justice, rehabilitation, supports, sharing, togetherness, inclusiveness, socio-economic (*Harambee)* and harmony with *Ngai* and ancestors. It also offers respect for the vulnerable, needy, guests and strangers, while at the same time it sustains fundamental moral bonds among families, *Riika* (age-group), *Mbarĩ* (extended family), *Mũhĩrĩga* (clan), elders and acquaintances. In this case, it has revealed how the practice of *Ũtugi* enhances the collective existence of the Agĩkũyũ, hence, giving rise to values such as communality, group orientation, cooperation, interdependent and collective responsibility.

In this way, *Ũtugi* offers communal solidarity and sense of belonging that augment the spiritual and mental well-being of the society and epitomise the community ethic of working together, which is essential in the fight against the HIV and AIDS pandemic. Further, the chapter has exposed the misuse of and the challenges facing *Ũtugi* and argued that, despite these impediments, *Ũtugi* has continued to be an important tool for supporting

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one another and the vulnerable. Thus, although *Ũtugi* has refused to be intact (as in ancient times), it has also defied extinction (as with political despondency). Indeed, the Agĩkũyũ felt that, in the political arena, the name *Ũtugi* was shifted to *Harambee* during the Kenyatta era while during the Moi era, the concept was modified into *Nyayoism* in an attempt to nationalise *Harambee* as a political and economic tool that can be embraced by all the Kenyan peoples. The chapter affirmed Oduyoye's (2001:94) contention that, the significance of African hospitality is "inherent in being African, as well as in adhering to a religion that derives from the Bible." Thus, it is "given a religious meaning, and linked with the ancestors, Christ and God."

The chapter has demonstrated that *Ũtugi* is a traditional resource which the church can use to fight the HIV and AIDS pandemic. This is because *Ũtugi* has the potential for augmenting the physical, social, psychological, moral and spiritual capitals needed by PLWHA and their families. However, this chapter and, indeed, this study is not meant to either glorify or denigrate *Ũtugi* but it is intended to offer a refreshingly new perspective on how *Ũtugi* (a traditional resource) can complement the Christian hospitality (church resource) in the fight against the HIV and AIDS pandemic. This assumption, therefore, calls for a theological enquiry if the church would adopt this model in her ecclesial praxis. We shall turn to this discussion in the next chapter.
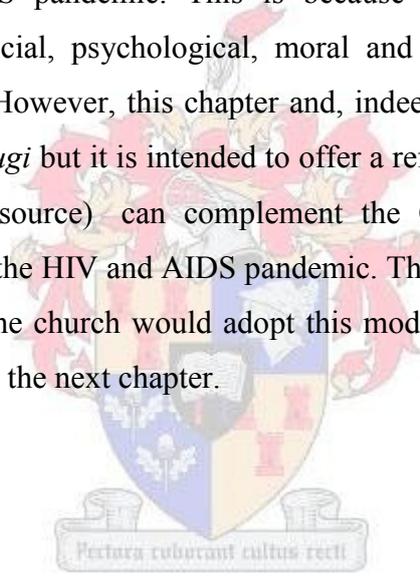
CHAPTER FOUR
ŨTUGI AS A COMPLEMENT TO CHRISTIAN HOSPITALITY

4.1. Introduction

Having considered *Ũtugi* as a traditional resource, its nature, characteristic features, meaning and its place in the socio-economic, political, moral and religious life of the Agĩkũyũ in the previous chapter, in this chapter, we shall discuss the Christian hospitality as a church resource that can be complemented by *Ũtugi* in the fight against the HIV and AIDS pandemic. The chapter will first seek to understand the meaning and the linguistic root of the word hospitality. It will then examine the influence of the ancient Jewish, Greek and the Roman communities on early Christian hospitality and how Jesus reconfigured it. A part of the chapter will investigate the role of hospitality in various centuries and its historical and theological paradigm shift. It will further explore the tension, the paradox as well as the continuity and discontinuity between *Ũtugi* and the Christian hospitality. Subsequently, those principles that are compatible will be compared and contrasted, and their theological validity will be assessed through the paradigms of *koinonia*, the *body of Christ*, *solidarity* and *shalom*. To accomplish this task, the chapter will examine the theological grounds on which the Anglican Church of Kenya can stand to adopt the principles of *Ũtugi* (traditional resource) to complement Christian hospitality (church resource) in her fight against the HIV and AIDS pandemic.

4.2. Definition

According to the *Oxford Latin Dictionary*, the word *hospes* means a guest, a visitor or a host while the word *hospita* means a female guest, a hostess or the wife of a host. Further, *hospitalis* means "one with whom one has special ties of hospitality" or to whom one is ready to offer hospitality or to provide entertainment and accommodation (Glare 1973:806). On the other hand, the word *hospitalitas* means hospitableness while the word *hospitium* means entertainment, accommodation, welcoming or reception of guests (Glare 1973:806). In this case, the word *hospitium* (or the adjective *hospitalis*) is translated as hospitality and is derived from *hospes*. Interestingly, the word *hostilis* means to belong to an enemy (Glare 1973:806; cf. Simpson 1980:729), but from the word *hospes*/*hospitis* we get the word *hospitium*, which means hospitality of guest (Lewis and Short 1999:867). From the word *hospitium* we derive the root of the English word for hospital, host, hostel, hotel and hospitality (Lewis and Short 1999:867). This shows that the word hospitality is related to the

words hospital, host and hotel and has the connotations of care, food and accommodation. Lewis and Short (1999:867) note that the Latin word *hospitallers* means "those whose duty is to provide *hospitum"* (lodging and entertainment) and that in the ancient times *hospitallers* are the people who provided accommodation, food and entertainment to pilgrims. As it will be seen in this chapter, hospitals were originally hospices for the reception of those travelling to shrines or the Holy Land. The term later applied to charitable institutions for the aged, the sick and later to charitable institutions for the education of children, before it gained its current meaning. Indeed, behind the Latin word *hospes,* is the Greek word *xénos* which can be translated as a foreigner, stranger, guest who receives welcome or "acts as a *welcomer* of others" (Koening 1987:470). From *xénos,* the word *xenon* and *xenodocheion* are derived. *Xenon* can be translated as a home for strangers, hospital, hospice, and hostel or guesthouse while *xenía* can be translated as hospitality or guestroom. It is baffling to note that *xenon* can refer to either "a home for travellers or a home for the sick" (Oden 2001:217). Amy Oden notes that in Constantinople, Procopius narrates that Justinian and Theodora built many *xenones* for visitors to the city who could not afford to pay for lodging. She further states that:

> By the fifth century it was customary in the ancient world for monasteries and churches, particularly those in cities, to have some sort of *xenon* or place for visitors, rich or poor attached to the building or nearby. Moreover, in the Byzantine world, a hospital that offered treatment of all sort of illnesses as well as surgery was usually called xenon. *Xenones* were often staffed with physicians and nurses and could be a place of convalescence. A *xenodocheion*, on the other hand, refers to a guesthouse for guest, strangers and pilgrims. Because travellers were likely to have ailments or contract disease, a *Xenodocheion* could easily include medical care. Other institutions incorporating practice of hospitality included homes for the ages, for lepers and for the poor. A Gerodomeion was a home for the elderly who may or may not be destitute. A *Nosocomeion* was a home for the sick or a hospital. A *Leprocomion* or *leprosarium* was a hospital for lepers. A *Ptocheion* or *Ptochotropheion* was particularly for poor who could not work due to illness or disability. By fourth century, *Porticoes* or courts of churches were commonly used by the sick, the dying and the destitute for refuge (Oden 2001:217).

The Greek word *xenízō* can be translated as "to make surprise or to entertain" and the word *xenodochéō* can be translated as "to show hospitality" while the word *philóxenos* can be translated as "host or hospitable" (Brown 1975:690). Likewise, the Greek word *philoxenía* simply means "hospitality or love for strangers" (Healey and Sybertz 1996:193; cf. Brown 1975:690). However, John Koenig (1987:471) claims that *philoxenía* does not literally mean "a love of strangers *per se* but to delight in the whole guest-host relationship" in the mysterious reversals and gains for all parties, which may take place. Oden observes that:

> The Greek of the New Testament that is used to express hospitality carries within it the reality of shared identity and partnership. The same word, *xénos,* can mean guest, host or stranger. The semantic fluidity conveys the blurred identities of guest and host, heightened by the recognition of Christ (2001:51).

From the above we therefore note that in the practice of hospitality, the element of reciprocity, that is, a mutual giving and receiving is very essential. Hospitality *(philoxenía)* involves friendly exchanges of gifts, sharing of food or shelter through which peace and harmony are achieved in what would otherwise be a chaotic world (Koenig 1987:471). According to Koening (1987:470), many societies attach religious and ethical values to the establishment of "friendly exchanges between those who view another as different in rank, race, or tribe." As a way of evading these vices, the host is compelled to give hospitality to those considered "others" (Koening 1987:470). Furthermore, this understanding is in line with the old French word *entretenir* (entertainment) which means "to hold among" and can also be translated as giving "attention to the comfort and a desire to give guests, visitors and the vulnerable hospitality" (Lewis and Short 1999:867).

On the other hand, the fundamental notion underlying the theory and practice of hospitality in Arabic communities is safeguard or protection (Koenig 1987:472). For instance, the term *Djiwar*, denotes neighbourliness or granting of refuge to wayfaring strangers and resident visitors who are not members of one's own community (Koenig 1987:472). This view is clearly captured by John MacQuarrie:

> The essence of hospitality is a readiness to accept people as members of the household, temporarily, for short or long period as the circumstances indicate. Hospitable people welcome guests without drawing attention to all the preparation that have been made and guests are grateful and show it without expressing surprise at the host's thoughtful consideration. Before there can be hospitality there must be both host and guests; to be a good guest requires as much generosity, liveliness and imagination as it does to be a good host. Hospitality graciously offered and graciously received enriches the household that provides it as well as the guest who enjoys it (1984:155).

From the above, we note that the practice of hospitality is more than kindness and friendship and the act of hospitality normally implies the sharing of material goods, food and protection as well as giving accommodation to the *hostis* (the stranger or foreigner), the guest, the poor or the vulnerable. It is from this perspective that Serinity Young (1999:440-441) says that even though hospitality entails receiving and entertaining equals or superiors at home, hospitality to the poor, homeless and the vulnerable is acclaimed by different religions of the world as a religious virtue, and it rewards the host with "transcendent abundance." It has been noted that, in recent decades, the usage and the meaning of hospitality have evolved and begun to focus on industry hospitality, which has overshadowed the above definition of hospitality. In the light of the above definitions, one

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may inquire how the Agĩkũyũ understanding of *Ũtugi* can complement Christian hospitality in the fight against the HIV and AIDS pandemic in Kenya.

It is supposed that a theological understanding and interpretation of the concept of *Ũtugi* in the light of Christian hospitality can enable the Anglican Church of Kenya to formulate a praxis theory for pastoral care and counselling of the PLWHA and their families. These can also help them to set up hospitable caring groups that would involve the community and the church members in combating the spread of the HI virus. In other words, a theological framework of Christian hospitality can provide a foundational and fundamental basis for interculturating *Ũtugi* into the ecclesial praxis of the Anglican Church of Kenya.

4.3. An obligation

From the beginning, the concept of hospitality was a central part of the Jewish[151] social and religious life as, indeed, it was in many parts of the Fertile Crescent. Madeleine and Miller (2003:41) relate that the ancient Babylonians had a special virtue of hospitality and the Canaanites were so "concerned with it that they would call local gods to protect strangers in their midst." They further note that hospitality was traditional in Egypt and it was included in the teaching of the *Egyptian Book of the Dead,* where some chapters echo the word of Jesus. For instance, Jesus' words in Matthew 25:35-36 are closely related with the teaching in the *Egyptian Book of the Dead* that says "I have given bread to the hungry man,….and water to the thirsty man and apparel (clothing) to the naked man and a boat to the ship wrecked mariner" (quoted by Madeleine and Miller 2003:43). It was also a cultural practice for Egyptians and Syrians to make a threshold covenant with a guest by smearing the blood of a freshly killed animal at the entrance of the house (Madeleine and Miller 2003:43). [152]

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[151] It is important to note that the term "Jew" or Jewish came into use after the emergence of normative Judaism during the time of Ezra in about c.450 BC; cf. Esther 2: 5. During the time of exodus until the post-exilic era (c.1200-500BC) the Jewish community were known as Israelites, which means sons of Israel (Exodus 1:7) and before that they were simply known as Hebrews which is an old and ethnic name (See Genesis 14: 13). As such, in this section the name Jewish and Israelite will be used.

[152] The practice of hospitality is not an exclusive Christian practice; many world religions and cultures practiced hospitality though in different ways. For instance, in Muslim tradition, the act of "giving" is directed in the Qur'an as a principal merit; thus people are commanded: "O you who are faithful, give of the good things that you have earned" (2:267) (Young 1999:440). The generosity of Muhammad and his companions is projected as an important ideal for human behaviour. Likewise, the *Hadith* accounts encourage the gracious hospitality displayed by men and women in the early community toward the stranger or the pauper who arrived at the door to share a meal or to find a place to rest (Young 1999:440). For instance, Muhammad's daughter, Fatimah and her husband, Ali-ibn Ali-Talib were said to have ended their fasting of three consecultive days as a result of their hospitality. It is said that each evening, as they were about to eat their food a hungry person came to their house. As a result, they could give him food and water (Young 1999:440). The same is said of Muhammad's wife, Zaynab, who is remembered as ".. with the long reach or arm" for her generosity. Again, when the Muslims migrated from Mecca to Medina, Muhammad created a bond of brotherhood between them and the local Medinians, who would be resposible for their subsistence in a new place (Young 1999:442). These Medinians, referred to as *Ansar* (Helpers), opened their home to the needy Meccans. In the eighth-century, Rabi'al al-'Adawiyyah revived the practice of hospitality by giving two loaves of bread to the beggers who came to her house. It is said that she was rewarded with twenty fresh loaves which she then provided to her guests. In the Hindu practice of hospitality, the classical caste system limits hospitality to specific people (Young 1999:442). While the Brahim or the *Samnyasin* at the door will be granted food by the *Dvija* (twice born-like *Brahmin, Ksatriya* and *Vaishya*) householder, hospitality is not offered impromptu to the stranger who appears seeking refuge or assistance (Young 1999:441). Within this general framework, women are primary agents of generosity. Indeed, in the Hindu creed , the divine power associated with wealth and abundance is associated with a female deity, *LaKsmi*.

Likewise, hospitality was vital to the life of the Jewish people right from the patriarchal period; they offered food and drinks to visitors (Gen 18:4-8). Trent Butler states that:

> To entertain or receive a stranger into one's home as an honoured guest and to provide the guest with food, shelter and protection... Only the depraved would violate this obligation. Hospitality probably grew out of the needs of nomadic life. Since public inns were rare, a traveller had to depend on the kindness of others and had a right to expect it. This practice was extended to every sojourner, even a runaway slave (Deut 23:16-17) or one's arch enemy. The Pentateuch contains specific commands for the Israelite to love the stranger as themselves (Lev 19:33-34; Deut 10:18-19) and to look after their welfare (Deut 24:17-22) (1991:670).

According to Wright (1996: 431), in the Old Testament, Abraham is depicted as the prototype of the good host in Jewish culture even though he was also considered a sojourner in the land (Gen 23:4; Heb 11:9). In the narrative in Genesis 18, Abraham courteously welcomed three visitors in what turned out to be a divine encounter that confirms to Abraham and Sarah that they would have a son Isaac in their advanced age (Gen 18:9-15). Furthermore, Abraham was informed of the awaiting destruction of Sodom and Gomorrah for their rebellion against God. It is interesting that these two stories were revealed to Abraham in the context of hospitality, thus, giving unique pre-eminence to Hebrews 13:2 which says, "do not neglect to show hospitality to strangers, for thereby some have entertained angels unawares" (Wright 1996:431; cf. Oden 2003:33; Bolin 2004:37-57).[153] Koenig (1985:15) argues emphatically that this encounter between Abraham and the three strangers is what made Abraham to be seen by both the Jews and Christians as a patron saint for hosts. Pohl (1999:24) also remarks that Abraham's kindness to the strangers connects hospitality and the "presence of God, with promise and with blessing."

Likewise, in the narrative of Lot, we see him welcoming strangers in his home for the night. Although the strangers refused to accept Lot's invitation at first, he was able to convince them to share some food with him (Wright 1996:431). Again, within the context of hospitality, Lot and his family were rescued by his guests when Sodom and Gomorrah were destroyed in the morning. Of importance in this narrative is the way Lot protected these strangers from sexual exploitation by a mob (Gen 19:8). Pohl (1999:25) reminds us that this

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According to *Wisdom*, Princess Gandhari, the daughter of King Subala and wife of King Dhitarashtra, provided hospitality to Vyasa. In the story of *Rama* and *Sita*, when *Sita* was commanded not to leave the hut while *Rama* was away, she was in dilemma, not knowing whether to give something to the beggar on her doorstep or remain inside her hut. She decided to do both, keeping one foot inside the threshold and with the other foot she stepped out to give food to the beggar, who happened to be a demon in disguise. Her impulse to be charitable is tempered by her duty to be obedient. Hospitality is also important to **Buddhist** tradition and women are specifically prominent for their generous actions. The bowl of porridge that supplied nourishment to Buddha just before his enlightenment was placed under the tree for a spirit by a young maiden. The original begging bowl of **Buddha** that provided food for him and his followers is associated with a virtuous woman, Amrita Surabhi.

[153] The stories of the "divine visitor" are regularly seen in many Near Eastern and Mediterranean religions and traditions (see Bolin 2004:37-57; cf. Oden 2003).

is in line with the ancient understanding of hospitality in which the host and the entire community were obliged by law to protect their guests. However, the act of Lot offering his virgin daughters to be abused sexually rather than the guests being abused through homosexuality as a lesser evil can be understood on the basis that patriarchal structures had greatly informed the reaction of the Jewish community. The act is comparable to the Agĩkũyũ practice of sexual hospitality (*Kũhanda itimũ nja* ya *Nyũmba)* and of *Ngwĩko* which in reality amount to an abuse of the dignity of women.[154] Thus, it is difficult to justify Lot's act as purely situational ethics as one cannot show love at the expense of injustice to women's humanity.[155]

Surprisingly, sexual hospitality was practiced by several ancient communities in the world. Matthews relates that:

> Since the early Middle Ages and throughout 19th and 20th centuries, travellers' reports on the Middle East, North Africa and Asia have recorded a kind of community hospitality that includes sexual gratification as part of the hospice. This social world is divided between affiliated brothers and foes; and if a stranger is accepted he will share the privileges of brotherhood. Moreover, the stranger could embody a god in disguise who would bestow blessing and fertility on the tribe. Fear of virginal haemorrhage forms another motivation for handing daughters into the strangers' arms. Frequency of occurrences of sexual hospitality shows the custom to be a consistent template and not a series of isolated events. In such societies the host's honour depends on the satisfaction of the male guest, and likewise his neglect would be the host's liability (1964:27).

The question that has been raised with caution is whether the anthropological evidence of communities' life can be set up as a model for ancient times, the biblical times or the Jewish community. In his book, *Sex and Family in the Bible and the Middle East*, Raphael Patai (1985:27) investigates customs and traditions regarding family values and sexuality in the ancient Middle East and biblical times. Patai (1985:27) discovers that patriarchal hospitality was so highly regarded that it ignored the strict considerations of women's chastity. The host would sacrifice the chastity of his wife, mistress or unmarried virgin daughters to safeguard his guest's honour and protection. Indeed, the ancient Middle East practice of hospitality parallels Genesis 19 and Judges 19 where Lot's daughters and a man's wife, respectively,

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[154] Apart from the cases in East Africa in which women/wives and girl children were given out to male visitors for sexual entertainment (cited above), Judith Mbula Bahemuka cites case studies on marriage where women were outrightly devalued and subjected to all kinds of abuse in the name of preserving culture (Bahemuka 1992:119-133). This included "ghost marriage", a practice in which the family and clan got together and married a wife in the name of a young man who died before getting married. Consequently, a close relative was chosen to act as a genitor. This disregard of the woman's feelings was done in the guise of avoiding discontinuity as if other clans or families could not continue with the growth of the entire community. Another dehumanising case of downgrading women in patriarchal African society is found in the case of "child marriages." This was traditionally arranged in cases where an elderly couple bore an only son in their old age (Bahemuka 1992:122). The boy's father chose a girl for his son, which in itself was unfair to the girl chosen as she was denied her golden opportunity to marry a man of her choice with whom she could share her affectionate love and comfort. The boy's father would propose to the girl's family (and this could easily be rubber-stamped). This was done to ensure that before the father died, his son would have children to remember him. The girl was then given to one of the relatives to act as a genitor until the son was old enough.

[155] The challenges of patriarchy in the context of the HIV pandemic in Africa are already discussed in Chapter Two.

were offered to outsiders when the protection and honour of a guest were at stake (Patai 1985:28). Patai (1985:28) claims that it is from this context that the communities that practiced such hospitality believed that if they failed to perform the rite, nature would show its displeasure by way of misfortunes. Hence, he classifies sexual hospitality among customs of sacred or cultic sexuality.

Sadly, we can see the bold extent to which ancient hospitality was practiced. In Lot's case, he demonstrated, clearly, this audacious hospitality by attempting to fulfil his obligation to the vulnerable strangers in a difficult context of an utterly sinful city and he was unable to provide protection for his daughters (Alexander 1985:289-291). His suggestion to the mob to take his virgin daughters and do what they liked with them instead of raping his guests was a terrible attempt to bargain for his guests' protection (Gen 19:8). As we have seen above, he seemed to show no regard for the enormous potential costs to the more vulnerable members of his own household; he was thereby confronted with two evils: to allow the forceful and evil Sodomites to commit homosexuality with the guests, who were considered sacred in the ancient times or to allow the abuse of his daughters by the Sodomites.

Even though Lot's valiant desire to uphold hospitality to his guest at the expense of his daughters distinguished him from his social context, and for this he was commended in later traditions (2 Peter 2:7-8; 1 Clement 11:1), from a gender perspective, such an act is seen as a greater evil. This is so especially if Lot's virgin daughters were given out to the unruly crowd and, eventually, they died of gang rape or if it was our contemporary situation where they could be infected with the HI virus. The act of surrendering his virgin daughters, therefore, could be interpreted as condoning abuse of the helpless virgin daughters at the expense of rescuing his visitors from homosexual rape. This debate helps us to understand the patriarchal challenge of the time that continues to dominate even in our churches and communities particularly in Africa. Lot's action also opens the wider debate on the devaluation of women in the patriarchal societies, in general, and Africa, in particular, especially in the context of HIV and AIDS.

Apart from the negative aspects of the above narratives, we should note that the hospitality practiced by Abraham and Lot include the following several positive vital elements. These

are openness in the encounter between the host and the guest (the stranger),[156] obliging invitation, whole-hearted welcoming, sharing of meal, giving of protection, and opening of a new and promising future (Sarah promised a child, and Lot and his family rescued from disaster). Besides the promises given by the strangers to Abraham and Lot, Pohl (1999:25) argues that the hospitality of both Abraham and Lot to the strangers was not new within the context of their society for it was unimaginable to permit a stranger to pass by without "sharing the salt" (eating together or showing hospitality).

This is because hospitality at that time was part of the world order, tied to the idea of sacredness. Such an idea is expressed in Leviticus 2:13, Numbers 18:19 and in 2 Chronicles 13:5, where salt, is used to seal the covenant with God and is used as a symbol of hospitality (Cheyne and Black 1999:2129). Salt as a symbol of hospitality was also used by Arabs and they would say, "there is salt between us", to reflect the idea that eating another person's salt creates a sacred bond between the host and the guest (Pohl 1999:25; cf. Cheyne and Black 1999:2129).[157] In fact, even the Greek would say, "we shared salt" implying that they have shared a meal and they have "established the friendship" or have "mutual obligation" between the host and the visitor (Dalby 2003:291).

In the Jewish socio-religious life, laws were put in place to protect the needy and the vulnerable. In Deuteronomy 10:17-19, God is perceived as the Lord and the mighty who shows no partiality and accepts no bribes. God is also depicted as one who defends the fatherless, the widows, and the aliens and who gives them food and clothing. Moreover, because this practice of hospitality was entrenched in their laws and customs, the whole Jewish community was obliged to care for the poor, widows, orphans, travellers, and those who were vulnerable (Deut 10:17-19). Furthermore, the law repeatedly commanded and reminded them that they were aliens or orphans in Egypt (Ex 22:21; 23:9; Lev 19:33-34; Deut 10:19; 23:7) and, therefore, they should be able to understand what it meant to be a stranger in a foreign land (Gen 15:13; Ex 2:22; 18:3). Additionally, the laws reminded them that it was God who, ultimately, delivered them from Egypt where they were slaves. From the above, we see the moral dimension of hospitality and the universal relevance for the Jewish

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[156] Koenig (1987:471) explains that the three strangers in Genesis 18 "are variously understood to be human messengers, angels" and in the later Christian thought, they were regarded as "trinity."

[157] Cheyne and Black (1999:2129) note that the Arabic term for the bond between the host and the guest is *Milhat*, from *Milh*, which means salt. They note that the most appropriate symbol could be milk. For drinking milk together in the same tent is the best sacramental form of hospitality, for milk is the natural substitute for blood- covenant.

people to protect one another as well as the aliens in their midst (Lev 24:22; Num 9:14; 15:16; 15:29; Deut 1:16; 24:17; 27:19; Josh 20:9).

Care for the aliens was demonstrated to the Jewish community especially when they were in the wilderness (Num 15:15) where God viewed both Jews and aliens as equals in terms of giving them manna from heaven (Deut 10:18; cf. Ps. 146:9). However, there was a distinction made between the aliens who wished to be part of God's covenant community (Ex 12:48-49) and who were thus shown hospitality, welcome and good treatment (Ex 23:12; Lev 19:10; 23:33; 25:35; Deut 5:16; 14:29; 24:14-21), and those aliens who were said to have vigorously opposed God through their attitudes and practices (Deut 12:30-32; 18:9-14; 20:18; 29:16-18). Those who opposed God, as in the case of the Canaanites or the Philistines, were denied hospitality and subjected to war or destruction. Magezi, Sichula and de Klerk (2009:189) affirm that foreigners were of four categories - "the alien, the resident alien, the resident without rights and the alien temporarily present." Citing Knauth (2003:27), Magezi *at el* confirm that the terms *ger, toshbh, nokri and zar* designated the concept of the "other", "outsider", foreigner", "alien" or "stranger" and that, of these four terms, *ger* was the general term within which other terms designating the concepts of the stranger function.

While each member of the Jewish community was expected by custom and law to show hospitality, Young (1999:440-441) claims that, in many instances, altruistic giving or hospitality was linked to women. He cites the narrative of the aged widow of Zarephath, the lonely woman and her son who gave hospitality to Elijah even though she was in dire poverty and it was a period of drought. When this woman and her son were about to eat their last meal and wait for death, Elijah appeared at their door and requested some water and bread. This woman provided her last nourishment to the guest and, as a result of her hospitality, she was rewarded with ultimate plenitude; the jar of meal and cruse of oil which remained sufficient to sustain her and her son until the end of the drought (1 Kg 17:8-16).

For Young (1999:441), narratives of this nature demonstrate selfless generosity, which was cherished and reflected in Jewish culture and law. Again, such narratives illustrate the importance of hospitality in the Judaic tradition and the social systems that supported the sick, the poor and the disadvantaged within the Jewish community life (Young 1999:441). As the widow was commanded by God to offer hospitality to Elijah, God also is depicted in the Bible as one who was hospitable to his people as in the case of Exodus and wilderness

wanderings when God showed them hospitality. It is important to note that, the widow was miraculously blessed by God as her flour and oil jars did not run out throughout the time of drought; but this happened only in the context of hospitality.

Another remarkable narrative in which a woman was blessed within the context of hospitality is in 2 Kings 4:1-43 where an affluent woman offered hospitality to Elisha and, as a result, she was blessed with a child. Both narratives shows that divine and human faithfulness are important in the practice of hospitality and that it is possible to practice hospitality during the time of abundance and during the time of infirmity and desperation. Accordingly, Bratcher (2002:2) asserts that the Israelites welcomed strangers mainly out of gratitude for their experience of hospitality while they were in Egypt, and during their Exodus out of Egypt, as well as their wanderings in the desert (cf. Ex 23:9; Lev 19:33-34). Interestingly, even after the Exodus out of Egypt and the wandering in the desert, Israel did not cease to see itself as God's guest. God was manifested as host to them at a place they regarded as the focal point of their land and life namely the Temple in Jerusalem. For, in the Temple, sacrifices were made to God, and all who participated in the sacrificial meal regarded themselves as God's guests (see Ps 23:5-6; Ps 61:3-5). Therefore, to be hospitable, according to the Jewish teaching, was not only to welcome the visitors and strangers but also to act in the administration of justice to the marginalized, the widows, orphans, children and the less privileged members of the society, as seen above.

However, there is a shift in the way hospitality was practiced during the settlement period and when Israelites were under the monarchy. During the settlement (also known as the pre-monarchic) period the social-economic and political life of the Israelites was set on communalistic principles (Wittenberg 1992:75). Davies (1989:358) observes that, during this period, Israelites were able to divide their land according to the requirements of each tribe so that each person could practice hospitality without strain (cf. Gĩkũyũ's nine daughters, clans, *Ũtugi* and the land). Alexander and Baker (2003:487) observe that in Hebrew, the word "land" (e.g. in Genesis) entails אֶרֶץ(*ěrěṣ*), *adama* and *sadeh*.[158] Hence:

> Although the terms are often used synonymously, each has its own particular emphasis. The word *ě·rěṣ* occurs most frequently. It occasionally denotes "ground" (Gen 18:2; Ex 4:3; Deut 15:23) but usually refers to large stretches of territory such as a particular region or country (Gen 12:1, 5; 17:8, Ex 2:15; Lev 11:45; Num 13:2) or to the earth as a

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[158] שָׂדֶה, שָׂדַי[*sadeh*, *saday* /saw·deh] has also been traslated as "field", "country", "land", "wild", "ground", and "soil" (see Strong 1996: 544; cf. Alexander and Baker 2003:487).

whole (Gen 1:1 2:1; 6:4; 11:1; Deut 28:25); *adama*[159] may denote the habitable earth (Gen 12:3; Deut 14:2) or a particular country (Gen 47:20), but most occurrences refer to the soil or the ground (Gen 2:5; 7; 3:7, 19 , 23; 4:2, 3, 10; Ex 3:5; Lev 20:25; Deut 4:18). Occasionally *sadeh* denotes a particular country (Gen 14:7) but usually it refers to cultivated land (Gen 37:7; Ex 9:22; Num 16:14; Deut 11:15) or to the open countryside (Gen 2:19, 20; 3:1, 14; 25:27, 29; Ex 23:11; Deut 22:25). Thus *sadeh* is used, for example, in relation to the land that Abraham brought from Hittites (Gen 23:8-20) (Alexander and Baker 2003:487).

Indeed, this was done by casting lots before the Lord as a way of recognising that it was Yahweh who had given them the land as it was promised to Abraham. According to Bruggemann (1977:23), when the Israelites finally inherited the promised land after their sojourn in Egypt, God reminded them that the land belonged to the Lord and that they were strangers and sojourners with God (Lev 25:23). Thus, they were to view themselves as aliens in their own land, for God owned the land and they were to be its stewards and caretakers, living in it by God's permission and grace (Habel 1995:4). In other words, although they were the chosen people, they remained aliens in the land. For this reason, they were to share their resources equally. Gerald West (1999:15) affirms that, "The socio-economic relationship of Israelites were egalitarian in the sense that the entire populace was assured of approximately equal access to resources by means of their organisation into extended families, protective associations of families and tribes."

The above system ensured that an equal distribution of resources was put in place and this includes family associations (West 1999:15). This agrees with Wittenberg (1991:76) who reminds us that the ancestral estate (*nahala*) was handed on to the descendants according to a strict law of inheritance and it contains the family tomb; it was defined by boundaries which they were strictly forbidden to remove (see Micah 2:2). According to Alexander and Baker (2003:487), the occupation of Canaan is depicted as a divine gift to an unworthy people and it was Israel's *nahala*. In other words, the land was an "inheritance" and as the gift of a *nahala* to Israel, it was a legal grant of land (Habel 1995.4).

The above shows that Yahweh's gift of land, which was seen as a basis of hospitality, was to be shared by all and this would include the less fortunate in the society (Davies 1989:351). The reason the mechanism was put in place was to act as a redemptive apparatus for both land and persons who were in danger of being exploited by the unjust systems (Davies

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[159] It should be noted that land and people are portrayed in a close interdependent relationship. This is initiated when God, having already commanded the ground to bring forth vegetation, used the soil (*adama*) as the material for the creation of humankind (Adam). While there is interplay between these two words, there is probably no etymological link between them (i.e. between *adama* and Adam). Of importance is the way the ground was elevated after humanity was created from it; it also means that human beings are to nurse the land if they are to eat from it (see Alexander and Baker 2003:488 cf. Homelessness in chapter six of this study).

1989:351). Wright (1990:63) argues that this inheritance law protected individual rights for it gave security and prevented permanent alienation from their land because without land, hospitality was impracticable (Alexander and Baker 2003: 487). Therefore, laws were well formulated in such a way that they addressed the imbalances. For instance, they formulated the laws, which catered for the poor and weakest members of society. The Deuteronomic laws were meant to uphold the freedom, which was conferred, to the Israelites at the time of Exodus (Alexander and Baker 2003: 487).[160] In this case, everyone had access to food at all times because of limitations on the rights of farmers to harvest their crops completely; the right to what remained was given to the poor (Lev 19:9-10; Deut 24:19-2; cf. Brueggemann 1977:3).

Again, tithes was partly meant for the poor (Deut 14:28-29) and the poor were given the right to use the land produce (e.g. grains) in the sabbatical years (Ex 23:10-11). They had the right to eat in a neighbour's field or vineyard (Deut 23:24-25) and were also given access to necessities in the short duration by means of interest-free loans which were to be cancelled every seventh year. This means that checks and balances were put in place to enable the practice of hospitality and it indicates that, in Israel, the more fortunate members of the society were compelled to be responsible for the weaker ones and readily share their passions with them. Through the practice of hospitality, the poor who, otherwise could have been trapped in poverty or in dysfunctional systems, were liberated. Richard Valantasis (1995:64) observes that this Jewish consciousness of hospitality to the vulnerable and strangers has precedent in Egyptian culture and law as in the teaching of *Amen-em-ope* (1250-1000 BC). *Amen-em-ope* teaching says, "Do not steal from the poor, Do not cheat the cripple, do not abuse the elderly, do not refuse to let the aged speak" (Valantasis 1995:64).

Besides, the Jewish practice of hospitality to strangers was not unique because their neighbours in the Near East also practiced hospitality to the strangers at their door where, occasionally, they fed, sheltered and protected them (Pohl 1999:28). Thus, hospitality was honoured and respected as a sacred duty throughout the ancient eastern world. However, what was unique in the Israelite practice of hospitality was the explicit legislation regarding the protection, feeding and sheltering of resident aliens (Ex 20:10; 23:9; 12, 22:21; Deut 5:14-15). This is well entrenched in Leviticus where they were commanded, "to love your

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[160] Alexander and Baker (2003:487) observe that land was an important theme in the Pentateuch and that it has even been described as "the central theme of biblical faith" (cf. Brueggemann 1977:3; Habel 1995:4).

neighbour as yourself" (19:18ff) and "to love the alien as yourself" (19:34). The Torah prohibited the abuse of the vulnerable and compelled the Israelites to practice inclusivity to members of such a group.

The establishment of the monarchy represented the genesis of an oppressive system, which distorted the original practice of hospitality. This is because the oppressive system, which was introduced by the monarchy, undermined the traditional patterns and social systems that catered for all (Davies 1989:351; cf. Bruggemann 1977:23; Wittenberg 1992:58). Israel's kings imposed taxation and forced labour as predicted by Samuel, subsistence farmers were driven from their land by debt and they became slaves of the city state system. In fact, this created what West (1999:16) calls a systemic injustice, a situation where the rich got richer at the expense of the poor and the vulnerable. Indeed, when the peasant took loans, they were forced to pay with exorbitant interests and, as a result, they became very poor (Wittenberg 1992:58). This development was a direct threat to hospitality and economic freedom of the rural peasantry and can be compared with the land issues in Kenyan where the land was seized from local communities and declared as the Crown Land by the colonial government, thus, distorting the practice of *Ũtugi* as we have seen in the previous chapter.

Bratcher (2002:2) claims that in the era before the birth of Jesus Christ, the responsibility to help the poor and the needy was central to the teaching of Judaism. This means that even though the practice of hospitality was distorted during the monarchical period, the practice persisted during this period. Madeleine Miller and Lane Miller report that:

> The king's table was shared by many guests sumptuous (I King 4:22ff). Nehemiah, the governor of Jerusalem, entertained 150 men at a time, from many nations. The hilltop court of Ahab and Jezebel extended hospitality to as many as 400 Baal prophets and 400 Asherah prophets. Hospitality among people was widespread, like the entertainment of the fugitive King Saul by a witch of Endor (1 Sam 28:24ff) and the prophet of Elisha by the woman of Shunem (1973:270).

In the same vein, Bratcher (2002:4) observes that Simeon the Just, the High Priest at the time of Alexander the Great (c. 325 BC), clearly defined hospitality as an act of compassion, meaning that it was still in practice during this era. Bratcher identifies hospitality as one of the three (the other two being the study of Torah and Temple worship) distinguishing characteristics of being a Jew. To refuse the practice of hospitality was interpreted as refusing to practice Judaism (Bratcher 2002:2). Evans and Porter (2000:144) note that even after the birth of Jesus, the Jewish community continued the practice of

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hospitality. Furthermore, because Jews who were in exile had to make pilgrimages to Jerusalem every year, some synagogues in Jerusalem were built in a way that could accommodate them (Evans and Porter 2000:145). For instance, Theodotus claims that he built "the guest-house and the rooms and the water supplies as an inn for those who have need when they come from abroad" (cited by Evans and Porter 2000:145). Therefore, Evans and Porter conclude that:

> The emphasis in Judaism remained on the exercise of private hospitality, especially to aliens and strangers, as an obligation that was enjoined by the Torah (Lev 19:33-34). And underscores by the depiction of Yahweh as the protector of strangers (Deut 10:17-19). Hospitality was viewed as a by-product of personal piety toward God and Josephus's depiction of the pious Essenes accordingly gave emphasis to their hospitality. To practice hospitality, therefore, was worthy of praise, even self-praise (Job), whereas the failure to do so evoked condemnation (Job 22:7), especially in circles where hospitality was regarded as superior to fasting (Isa 58:6-7). For models of hospitality and inhospitality, Jews of Greco-Roman period drew heavily on the O T. Particularly important was the theoxeny of Genesis 18:1-18, where Abraham is praised as an extraordinarily attentive and gracious host. Lot's theoxenic hospitality (Gen 19:1-11) was also noted, including his placement of the security of his guest above his own daughters. Others singled out for their hospitality included Melchizedek (Gen14:17-24), Rebekah (Gen 24:16-25), the prostitute Rahab (Josh 2), whose house, in view of her profession, was called an inn, Boaz and the Shunammite woman (2 Kg 4:8-17) (2000:146).

Seen from the above, failure to practice hospitality was regarded as a serious offence liable to punishment by God (Deut 23:3-4) and community (1 Sam 25:2-38; Judg 8:5-17). For Malherbe (1993:292), hospitality was even preferred to fasting as in Isaiah 59:7 and Job commends himself to it (Job 31:31-32). In this case, the use of "*Pesa'* (Isa 25:28), a term employed for transgression of covenants, indicates the importance attached to hospitality. Therefore, the unique violation of hospitality by Jael (Judg 4:11-21, 5:24-27) could only have been commended because of her unwavering loyalty to *old family* ties and to Yahweh (Malherbe 1993:292).

By way of summary, we can say that the Jewish practice of hospitality entails the following elements: (a) First the practice was extended to all the family members, God's people and the vulnerable as in (Gen 29:1-14; cf. Judg 19:10-12, Isa 58:7; 2 Sam 17:27-29; 1 Kg 17:1ff; 2 Kg 4:8ff; and the stranger could wait at the city-gate or near the well for an offer of hospitality as in Gen 19:1; Judg 19:15; Gen 24:14ff; Ex 2:20. (b) Secondly, hospitality was sometimes given in return for an earlier kindness as in Ex 2:20; 2 (cf. Leon-Dufour 1973:243). (c) Thirdly, concerning the food given, Douglas (1968:541-542) notes that bread and water were offered as evidenced in Deut 23:4 (cf. 1 Kg 17:10-11), and that when the best food was available, it was given as in Gen 18:5 (cf. 1 Sam 25:18; Gen 18:7; Judg 6:19;

13:15). Similarly, curds and milk were also given to refresh the traveller (Gen 18:7; Judg 5:25), and animal fodder was supplied when required (Gen 18:8; Judg 19:21); Elisha even received furnished accommodation (2 Kg 4:10). (d) Fourthly, the guest's feet were washed from the dust of travel (Gen 18:4; 19:2; 24:32; Judg 19:21), and their heads were at a time anointed with oil as in Ps 23:5 (cf. Amo 6:6; Lk 7:46; see also Leon-Dufour 1973:243; Malherbe 1993:292). We shall now turn to the Greek and Roman understanding of hospitality as a way of shedding more light on the origin of the Christian hospitality.

4.4. A reciprocal

The ancient Greek and ancient Roman understanding of hospitality was different from the Jewish understanding of hospitality (Evans and Porter 2000:200). This is because the ancient Greek and Roman hospitality stressed formal reciprocity between the host and the guest and the focus of this tradition was on the appropriateness and worthiness of the guest rather than on need (Evans and Porter 2000:200). In Greek, the word, *philoxenia,* which means hospitality, indicates that the host welcomes the guest and treats the stranger as though he or she is a friend, *philos* (Evans and Porter 2000:200). It was believed that strangeness created mutual tension between natives and foreigners and it is only through hospitality that such tension was to be overcomed. Thus foreigner *(xénos)* was transformed into a friend *(philos).* In the ancient Greeks, foreigners were regarded as enemies and law permited their killing. It is from this background that hospitality was found as a better way of dealing with foreigner *(xénos)* as oppose to *xénophobia* hence becoming a law and was integrated into their religion. Koening (1987:471) states that, in the Greek epic tradition, the gods were depicted as occasionally putting on human disguises and assumed the role of guests. He further says that, when these gods were welcomed, they responded with good news or extraordinary gifts. This is comparable to Abraham's gracious reception of the three strangers at the Oaks of Mamre (Koening 1987:471; Oden 2001:18).

Similarly, John Bell Matthews (1964:523) contends that during the *Homeric* times the host's friendly treatment of the guest created a formal bond of friendship between him or her and the guest. The bond of guest friendship was cemented and was symbolised by a gift that the host gave to the departing guest or the gift he or she might have received from the guest. Matthews (1964:523) notes that receiving the gift enabled the guest to remember the host and to return his hospitality and generosity later. Moreover, the bond between the host and the guest became "trans-generational", which means that even the descendants of the original

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guest and host were bound by this bond to remain friends (Matthews 1964:523). Furthermore, the ancient Romans, like the Greeks, related hospitality with gods. Oden affirms that:

> In Roman culture, hospitality is prized as a virtue of civilisation and a privilege of patrons. Early in Roman society, perhaps as soon as 399 B.C, hospitality to strangers was simply obedience to divine will. Both Cicero and Ovid cite the sacred duty of hospitality. The *jus hospitii*, or law of hospitality, regulated seven different categories of relationship and the hospitality properly accorded in each case (2001:18).

A part from associating hospitality with the gods, the ancient Roman community, like the ancient Greek, practiced the hereditary agreement of hospitality (*hospitium*). In fact, both the Greek and the Roman guests occasionally carried gifts to give as part of their own hospitality (*symbola, tessarae hospitales*) (Matthews 1964:523). Matthews (1964:523) sees this act of presenting gifts to the guest as something intended to identify the guests to the "former hosts and their descendants as guest friends entitled to hospitality." In this case, only an official denunciation of the relationship, which must be symbolically accompanied by the breaking of the gift, could terminate the treaty of guest friendship (Matthews 1964:523). The above practice is also recorded in *Homeric* as the best thing that the ancient Greeks could do to please the gods.

Among all the cultural elements of ancient Greece society embodied in the *Odyssey*, hospitality was given prominence. In fact, nearly all episodes in the *Odyssey* demonstrate some form of hospitality. This fact shows that, from the beginning, the practice of hospitality was related to friendship and aimed at establishing a relationship, which should be reciprocated by persons previously unknown to one another and was later "extended to nurture both affective and non-affective association between known parties" (Matthews 1964: 523). This practice of hospitality is, therefore, contradictory to *xénophobia*, which simply means the fear of strangers, a situation in which guests or strangers are neglected or abused.

Interestingly, both the ancient Greek and ancient Roman cultures saw hospitality as a generous act given by the host to strangers or guests. To abuse strangers or for strangers to take advantage of the host was interpreted as an improper act that totally breached the treaty of guest friendship (Matthews 1964:523). Matthews (1964:523) explains that the violation of the treaty of hospitality provoked communities resulting in war as in the case of the notorious act of inhospitality recorded in Greek mythology. In this myth, Paris (the guest) abducted

Helen (the wife of his host) resulting in "the Trojan War."[161] The incident suggests that the practice of hospitality played a major role in ancient Greek society because social status appears to have been determined by how well a person could accommodate his or her guests; and only the poor or uncivilised could not accommodate their guests (Matthews 1964:523).

A distinctive feature of ancient Greece hospitality is offering food to guests and entertaining them before attending to any other business. Koenig (1985:5) relates that, in *Odyssey,* hospitality occurs early in the epic when Telemachus secretly set off to find Nestor. On seeing Telemachus and Athene and without question about who they were, Nestor's son Peisistratus invited them to the banquet that was in progress. It was only after they had eaten and become comfortable that they were asked who they were and where they came from. This understanding of hospitality is said to have influenced Greek hospitality.

Another characteristic of ancient Greek hospitality is that guests expected to be provided with food, a place to rest and pleasurable company as well as to be accepted into the day's activities (Koenig 1985:5). It was assumed that the host was capable of providing hospitality to the guests, for by so doing, he or she receives honour from the gods. Thus, giving hospitality to the guest was interpreted as offering it to the gods. According to Koenig (1985:5), *Zeus* who was the Greek god of hospitality was worshipped in many ways including being hospitable to strangers and travellers. In other words, by showing hospitality to the travellers and strangers *Zeus* was being worshipped.

Most of the Greek hospitality themes are in the *Homeric corpus*, which contains eighteen major scenes on the rituals of hospitality. Matthews identifies thirty-eight conventional elements that occur in the *Homeric* hospitality scenes and the most important include:

> ... the guest's arrival and waiting at the threshold, the reception by the host, seating, feasting, toasting, revelation of the guest's identity, exchange of information, entertainment, the guest's blessing of the host and participation in a libation or sacrifice, bed and bath, the giving of gifts to the guest, departure meal and libation, farewell blessing and escort to the guest's next destination (1964:523).

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[161] The Trojan War was the greatest conflict in the Greek mythology. It was a war between the Greeks and Trojans with their allies in a Phrygian city and it was to influence many people in literature and arts for centuries.

Interestingly, many of these ritualised actions, such as the reception, feasting, meal, exchange of information, washing, farewell blessing and escort resemble the Jewish characteristic features of hospitality and the Agĩkũyũ practice of *Ũtugi*.

However, unlike the Agĩkũyũ practice of *Ũtugi* and Jewish hospitality, Greek hospitality was made strong by the aristocratic nature of guest friendship (ritualised friendship) which created strong alliances between families living in different lands (Matthews 1964:523). As the society progressed, it contributed to the rise of "proxeny (*proxenia*) which was an official treaty of friendship" and hospitality with certain individuals as part of the foreign policy to a number of Greek states. Matthews asserts that:

> Whereas modern states typically appoint their own citizens to reside in foreign lands and represent their national and commercial interests many ancient Greek states formed alliances with citizens from another state for this same purpose. The local individual with whom this treaty was formed was known as a *Proxenos* (friend of a foreign state), and he or she promotes the interest of the foreign power within his own country and providing hospitality to envoys and distinguished visitor from the state that he or she represented (1964:523).

Another characteristic of the ancient Greek and ancient Roman hospitality is public hospitality. Some Greek states selected a *proxenos* to give public hospitality to a foreigner or guest who visited their state. Matthews (1964:523) observes that such public hospitality (*hospitium publicum*) was also common in the Roman society where state hospitality was emphasized. With the development of elaborate network of roads and sea routes by the Roman society, travel was made relatively easy and it facilitated the establishment of hostels and inns. Thus the commercial hospitality began, which enhanced physical mobility. Some of these commercial establishments were far from ideal as some were simply brothels and posed the danger of robbery and murder. As a result, many people, especially the wealthy, preferred hospitality offered by friends who often entertained them in luxurious style. To this end, private hospitality continued to be practiced even after the establishment of these commercial lodges in the Greco-Roman era (Matthews 1964:523).

Indeed, in Greco-Roman hospitality, one had to be recommended by a friend through the writing of a letter to be able to get a place to stay where the friend's contacts lived. Matthews (1964:523) notes that even though such letters were written commending the travellers and requesting hospitality and other favours from the host, the practice of extending hospitality to complete strangers without letters continued. This was made possible by the strong conviction that hospitality was not only a generous and philanthropic gesture (cf. Acts 28:7)

but also a religious act that obliged a person to give reverence to the gods as the protector of strangers. Matthews (1964:523) further relates that only in very rare cases was inhospitality supported and celebrated by the Greco-Roman communities. Consequently, there is little doubt that the ancient practices of hospitality were essential in shaping a civil society.

Ladislaus Bolchazy (1977:12) contends that hospitality was used as a tool of persuading ancient Romans to stop *xénophobia*. He notes that in a society where strangers were viewed as possessing magical powers, which were perceived as weapons, the only way of escaping the menace from such strangers, was through hospitality, that is, by befriending them. Of course, as the Roman law became advanced, hospitality shifted and became a diplomatic tool of averting hostility and a means of transforming strangers into political allies or friends (Bolchazy 1977:12). As such hospitality became a virtue and a tool for "civilization", something which was later "applauded by the Stoics" (Bolchazy 1977:12). As a moral philosophy for both Greeks and Romans, hospitality was adopted by the ancient church, even though it went through a paradigm shift with the teachings of Jesus Christ.

4.5. From exclusivity to inclusivity

The Christian understanding of hospitality that was developed in the Early Church drew heavily from the Jewish, the Greek and the Roman practices of hospitality (Oden 2001:17). In comparing Jewish hospitality with the Christian hospitality, we have noted that there is both continuity and discontinuity in the ways they were practiced. In terms of its continuity with Jewish hospitality, Bretherton asserts that the Christian hospitality was a command from God:

> To provide hospitality to strangers; "The alien who resides with you shall be to you as the citizen among you; you shall love the alien as yourself, for you were aliens in the land of Egypt: I am the Lord your God" (Lev 19:33-34). The command in Lev 19 was echoed in a range of other legislation. The tithe, for instance, is fundamentally a command to be hospitable on a lavish scale (Deut 12:17-19). Again, the commands concerning harvesting are demands that hospitality be observed: one who harvests a field must not seek to maximize his harvest, but leave the gleanings for those who are in need (Deut 24:19-2). Stories of hospitality constitute a leitmotif throughout the Old Testament, for example, Abraham and Sarah entertaining angels, Abigail placating David and the Widow of Zarephath caring for Elija. At times this hospitality is not only offered but also demanded, as when Lot insists the Angels spend the night with him (Gen 19:1-3). At other times it is extended to enemies as a sign of the reconciling work of God, as when Isaac made a feast for Abimelech (Gen 26:26-31). It is linked with the renewal of creation (Ecc 10:16-17), and ultimately it comes to include all creation and all the nations at the messianic banquet, as depicted and anticipated in the prophets. Jesus' ministry can be seen to draw together all these elements, intensify their application and inaugurate their fulfilment (2006:129).

Pohl (1999:17) observes that the elements of Christian hospitality inherited from Jewish hospitality are linked with God, covenant and blessing (cf. Eugene1999: 251-261). In addition to this continuity, there is also discontinuity (Smith-Christopher 1996:117-142). Certainly, some elements in the Jewish culture accentuate the exclusion of Israel's neighbours and regard them as unclean, of which Jesus did not approve. Such elements include the cultural prohibition of the Jews from marrying foreign women as in Nehemiah 13:26-27 and Ezra 10:2-4, which shows that they were in constant fear of being polluted and they constantly protected themselves in order to remain holy and distinct from other nations, - this, Jesus inverted. Luke Bretherton argues that even though Jesus did not resolve the tension between hospitality and holiness in the Jewish culture, he inverted their relations in unique way:

> Jesus relates hospitality and holiness by inverting their relations: hospitality becomes the means of holiness. Instead of having to be set apart from or exclude pagans in order to maintain holiness, it is in Jesus' hospitality of pagans, the unclean and sinners that his own holiness is shown forth. Instead of sin and purity infecting him, it seems Jesus' purity and righteousness somehow "infects" the impure, sinner and the Gentiles (2006:130).

The above shows that not even uncleanness was understood as contagious in Jesus teaching and practice of hospitality. A good example is the story in which Jesus was touched by a haemorrhaging woman who was healed and made clean; instead of Jesus undergoing purity rituals because of contact with her as commanded by the law, it was the woman who was "cleansed" by the very contact with him (Borg 1972:135). Even after touching the lepers, the dead, the blind, the deaf and dumb or partaking in a meal with a tax collector, Jesus did not undergo cleansing rituals. For Wright (1996:192), Jesus' healing miracles were a means of bestowing the gift of *shalom* or wholeness to those who lacked it, "bringing not only physical health but renewed membership in the people of *YHWH*."

On the other hand, the Greco-Roman hospitality, which encompasses elements of "benefit and reciprocity", also shows continuity and discontinuity with the Christian practice of hospitality. In terms of continuity, Christian practice of hospitality was immensely embedded within the Greco-Roman hospitality and in terms of discontinuity, Christian hospitality focused on the weakest, "those least likely to be able to reciprocate" (Pohl 1999:17). Oden (2001:20) asserts that the Early Christians offered hospitality to the sick, the injured, widows, orphans, sojourners, strangers, the aged, slaves, prisoners, the poor and the hungry. He observes that the factor common to them is that they were all vulnerable people who existed

on the periphery both socially and economically; thus, it was easier to ignore them (Oden 2001:20).

Consequently, Jesus' teaching and practice of hospitality was good news to the poor, the captive, the blind and the oppressed (Lk 4:18-19; cf. Isa 61:1-2). It was because of the vulnerability of these groups that Jesus' message of liberation was convincing to them. Michael. F. Trainor observes that:

> Jesus' Galilean message was first preached to the peasant community, the owners of simple houses, the homeless and the socially expendable. Debt-ridden peasants expelled from ancestral lands, overburdened by taxation and economic demands and victimised by a civil and religious elite minority from the major urban centres heard Jesus' message of a joyful and liberating God. In a culture in which religion was embedded with politics and economics, this message of God's renewed reign (*basileia*) was more than a theological one. It was a conviction that God was involved in and cared about their lives. This proclamation of the presence of God's *basileaia* that echoed in the community of disciples, the model of a renewed Israel, the peasant "household" was also renewed. In such a house where mutuality and inclusivity were the community's characteristic, the ancient practice of reciprocal kinship exchange was also encouraged (2001:20).

Therefore, in such a context, it is easier to see how the religious and political leaders interpreted the teaching of Jesus as a social and economic threat. Due to their vulnerability, the poor, the captive, the blind and the oppressed were anxiously waiting for Jesus' liberating message, which was relevant to their situation. Oden (2001:21) elucidates that the poor in the ancient world had several sources of illness especially where clean water and sanitation were minimal. As a result, infectious diseases spread rapidly leading to deterioration of their health conditions. Oden further explains that:

> While home remedies were practiced widely, only the well-off has access to professional medical care. Even if one could afford it, such medical care might not have been available. For example, the second-century Roman emperor Antonius ruled that major cities could have no more than ten physicians, while provincial cities could have seven. Outlying areas were not likely to have any. Serious illness could easily become chronic for workers who could not afford time off for rest or recovery. Injury could also lead to lifelong illness or disability. Broken bones not set or fully healed could leave the injured with permanent deformities that prevented gainful employment. Moreover, sickness or disability could connote evil spirits or moral perversity that estranged one from the community that might otherwise offer resources. To be sick in the ancient world was a dangerous and [often leads to] stigmatising state. The sick, maimed, or disabled were at a decided disadvantage in cultures that found such conditions mysterious at best and divine punishment at worst (2001:21).[162]

To make matters worse, the vulnerable were not only stigmatised and discriminated against but were also extremely poor in an economy based on social and familial relations. In such

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[162] Matthews and Benjamin (1997:281) assert that, even in ancient Egypt (13th century BC), the community was being reminded to recognise the vulnerable and protect them from exploitation and ridicule. Such teachings include, "Do not make fun of the blind, do not tease the dwarf, do not trip the lame, do not tease the insane, do not lose patience with them when they are wrong" (Matthews and Benjamin 1997:281). These injunctions were aimed at protecting the sick or disabled.

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a socio-economic situation, the vulnerable were expected to remain trapped in their social class because their social mobility was extremely rare and limited. Therefore, their survival was pegged on the mercies of those with resources. Physically, they also suffered from chronic hunger as a result of bad weather and bad politics of the time. Oden (2001:22) asserts that "drought, an infestation of pest, disease, or a conquering enemy" pushed the working poor to extreme poverty and hunger. As a result, they suffered from malnutrition and this caused illness, which incapacitated them and made them unable to work (Matthews and Benjamin 1997:281). It is on record that in Jesus' time, Palestine was characterised by high levels of poverty and indebtedness. Douglas Oakman affirms that:

> The "factor of debt" put obligations on peasants particularly to operate in ways that benefited the elites of society. As more land-owners overtook the land of peasant farmers, indebtedness became a more real and regular experience for peasants. In exchange for loans, peasants were expected to produce not only repayment but also honour for their creditors. Indebtedness, in this sense, is related to the phenomenon of patronage in antiquity. To be a client of a powerful patron meant that the client received protection and some opportunity but also became somewhat emasculated, since men were supposed to be in control of their own lives (2008: 63).

It was in such a situation that Jesus' message of liberation focused on the strangers' vulnerability and intimidation. In his book, *Travel in the Ancient World*, Lionel Casson argues that without social, ethic or familial ties to protect them, travellers were exposed to exploitation and violence and because of *xénophobia* they were under constant attack (Casson 1975:23). Of course, for one to leave his or her homeland, there must be a reason and it was presumed that one must have left his or her community because of guilt, debt or murder, that is, one was suspected of having done something sinister (Casson 1975:23). Moreover, because the strangers might not be conversant with the local laws, custom, language or dialect, it was difficult for them to find accommodation, establish fair prices for goods and services or even get fair rate of exchange (Casson 1975:23). In other words, being far from their families and home meant that they were not protected; thus, they became victims of injustice. Russell (1981:113) outlines some of the hardships encountered by travellers in the ancient world as "attacks by brigands, hunger and thirst, marshy ground, lacerated feet, sinking in a swamp, wading through a rising river, being chased by robbers a capsized boat, running aground, exposure to rain and hail and last but not least, crocodiles."

It was from this framework that Jesus' act of liberation was relevant to the above groups of people for the strangers were defined as those who lacked any resources to support themselves and were, therefore, in need of liberation. The strangers lacked a "place" in the

society because they were detached or excluded from the basic means of supporting and sustaining life, family, work, polity, land, and among other needs, they were defined as vulnerable and in need of liberation.

Another striking thing about Jesus' message of liberation was his concern for the vulnerability of widows and orphans. Without a clear place within the patriarchal family structure as the wife or child of a man within the community, a person could lose all considerations. The vulnerable were not only exposed to starvation but they were also subjected to sexual predation; yet the Torah and prophets advocated that the widows and orphans are to be shown hospitality by the community (Deut 10:17-18; Isa 1:17).[163] Further, they were to be taken seriously in the law courts and in civil and financial matters, for it was assumed that there is no one to assist in their case. For instance, in the Roman Empire, widows who were below fifty years old were compelled by Roman law to remarry within a year or they would be punished (Oden 2001:25). However, this law was later contested by Christians in the fourth century.

In addition to the message of liberation, Jesus used the images of feasting to teach the need to practice hospitality to the vulnerable. For instance, narratives of the wedding feast in Cana, the starving Lazarus and feasting Dive,[164] the feast with Zacchaeus at Jericho, the woman who washed Jesus' feet, the washing of the disciples feet, the Last Supper, and the meals enjoyed with the resurrected Jesus are all clear on Jesus' understanding of hospitality (Bretherton 2006:129). Bretherton (2006:134) contends that these stories and actions were a direct challenge to "the religious, political, economic and social authorities of the time." Bretherton rightly points out that the table fellowship with sinners, and the reconfiguring of Israel's purity boundaries, which the above hospitality represents, designated the mission of Jesus. In the same vein, J.Jeremias cites Jesus' eating with "sinners" as:

> [A]n expression of the mission and message of Jesus (Mark 2:17), these eschatological
> meals (are) anticipatory celebration of the feast in the end-time (Matt 8:11), in which the

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[163] Even before the Mosaic Law, the Israelites must have learnt about the care of widows and orphans from the Egyptians. In the story of "*A Farmer and the Court during the Middle kingdom*", which dates from 2258 to 2052 BC, they are urged: "When you sail the lake of justice, Fairness fills your sail. You father the orphan, you husband the widow, you brother the divorced, you mother the motherless. I will extol your name throughout the land, I will proclaim you a just judge" (see also Oden 2001:25).

[164] In the Gospel of Luke 6:19–31, Jesus tells of one Lazarus, a beggar who lay outside the gate of a rich man, whom later tradition has given the name Dives, from the Latin for 'rich' - who dressed in fine clothing and dined sumptuously every day, but gave nothing to Lazarus. Both men died, and the beggar received his reward in the Hereafter, in Abraham's nosom at the everlasting banquet, while the rich man craved a drop of water from Lazarus' finger to cool his tongue, as he was tormented with fire. This story has been accepted as a parable aimed at teaching about the evil result of the neglect of others. Lazarus was rewarded, not because he was poor, but for his virtuous acceptance of poverty and the rich man was punished, not because he was rich, but because of vicious neglect of the opportunities given him by his wealth.

> community of the saints is already being represented (Mark 2:19). The inclusion of sinners in the community of salvation, achieved in table-fellowship, is the most meaningful expression of the message of the redeeming love of God (1983:115).

Jeremias' observation is acknowledged by Wright (1996:431) who affirms that Jesus' feasting with "sinners" was the most distinguished and extraordinary mark of Jesus' regular activity, for "Jesus was, as it were, celebrating the messianic banquet." His action represented a paradigm shift from exclusive to inclusive hospitality. In other words, Jesus' teaching and action introduced a kind of hospitality, which some of his contemporaries regarded as shocking in relation to certain Jewish precedents and this was why his hospitality prompted conflict with the custodians of Jewish purity. Borg (1972:135) affirms that "this conflict between Jesus and his contemporaries is about the shape and purpose of the people of God which is itself part of a wider debate about the response of Judaism to Roman political power and the encroachment of Hellenistic culture."

For instance, in his hospitality, Jesus refuted the exclusion of sinners and proposed a different paradigm that redefined holiness. Bretherton (2006:130) notes that, in the previous paradigm, Israel's identity was preserved through "opposition to sinners" and the exclusion of "Gentiles." Jesus' new paradigm of hospitality was based on the inclusion of "others" in the kingdom of God as endorsed in his table fellowship (Bretherton 2006:130). The parable of the Great Feast (Lk 14:15-24), which re-affirms Isaiah (25:6-9), is a good example. While Gentiles were excluded by the Jews and the Jews who were unrighteous or physically blemished were rejected by the Qumran community, Jesus' model of hospitality challenged and reconfigured this to include all in the feast of the kingdom, for "people will come from east and west, from north and south, and will eat in the kingdom of God" and "those who are last who will be first", and "those who are first will be last" (Lk 13:29-30; cf. Koenig 1985:17). In the parable of the Great Banquet, Jesus confirmed that the time of the banquet was ready (Lk 14:17), for he had inaugurated the *eschaton*. Perhaps, the exploration of this parable can give us a clear insight into how Jesus reconfigured the existing Jewish and Greco-Roman model of hospitality.

In the parable, the host invited his peers but his invitation was met with impertinent excuses that can be interpreted as a kind of rejection and the systematic exclusion of the host by his

peer–group.[165] Willi Braun (1995:110) notes that such rejection was not only intended to hurt the host but, in the context of a shame culture, it was intended to lower his dignity and reputation. Consequently, these invited guests were depicted as active enemies of the host, and because the host was "very disturbed at having his invitation rejected," he made the banquet open to outcasts: "Go out at once into the streets and lanes of the town and bring in the poor, the crippled, the blind and the lame" (Lk 14:21).

According to Braun (1995:106), the host's reaction was a paradigm shift in hospitality, for by inviting the outcasts the host embraced an inclusive model of hospitality as opposed to the accepted pattern of the time which was "competitive social relations" that safeguarded honour and prestige among the privileged. The tradition among the Greeks and the Romans stressed the worthiness and goodness of recipients rather than their need because a grateful response from the beneficiary was the key to the ongoing relationship (Pohl 1999:18). In Lactantius' words, such hospitality was "ambitious" and was offered for "advantage" (as cited in Pohl 1999:18). The host in the above narrative demonstrated the kind of hospitality which is inclusive and which can be embraced by Christians. In fact, the host shows the manifestation of cultural reconstruction by refusing to revenge as would be expected but instead he inverted and subverted the existing pattern of social stratification and the moral order. In the process of reconstructing hospitality, the host reconfigures the existing disintegrating pattern of human sociality (Braun 1995:106).

By reverting to identify himself with the outcasts and not securing his identity, reputation, and economic well-being through mimesis of the conventional moral, social and economic norm, the host honours the poor, the crippled, the lame, and the blind (Braun 1995:112; cf. Lk 14:11-14). As a result, a contrast is drawn between the notables of the world who refused the invitation and now are considered worthless and the outcasts who, at first, were excluded from the invitation and now they are invited and accepted at the banquet. Bretherton says:

> The host of this parable does not remain self-sufficient. He actively pursues relationship with others, and it is pursued in such a way that the host is rendered vulnerable to rejection, while the recipients are blessed by participation in the feast. The host does not simply give a gift (the real meal), nor does he identify or show solidarity with the poor and outcast in some notional or distant manner, rather, the host parties with them. Moreover, his actions are expressive of his need for and dependence on these people: a

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[165] This kind of inviting everybody to the feast was common in Jerusalem. A good example is that practice of hanging cloth on the door a a way of showing that the meal is ready or in process and that guest can enter (see Ber 4:8). Such method of invitation is also associated with the Passover meal where the door is left open for anyone who would like to enter. There was also another practice of hospitality where people go into the street to seek out others, usually the needy, in order to bring them to hospitality. For instance, Tobit bid his son to go and bring in a poor man to share with them the feast of Pentecost (Tob 2:2), something that echoes the host in the parable who sends his servants into the city on a similar mission (Matt 22:8-10; cf. Lk 14:21-23).

> party, by definition, requires others. Thus the fruit of this feast is a communion of giver and receiver (2006: 133).

As implied above, the outcasts were undeserving guests and, therefore, they were not obliged to compensate the host. This approach to hospitality was later emulated by the Early Christians as a new and distinctive feature of Christian hospitality. Certainly, the approach was opposed to the Greek and Roman views of hospitality, which were based on reciprocity and to the use of hospitality within "a client-patron relationship from which both parties gained social, political and economic advantage" (Winter 1994:45-60).

Another distinctive strength of the Christian hospitality is the concept of centrifugal and centripetal pastoral care, which is virtualised in this parable. Bretherton (2006:135) compares the narratives of Elijah who ministered pastoral care to the Gentile woman of Zarephath and of Elisha who ministered to the Gentile Naaman who came to Israel because he was attracted to what God was doing through Elisha (Lk 4:25-27), to the parable of the Great Banquet. Bretherton (2006:134) argues that the host's servants were sent to "others, whether outcast or outsiders" and they were to be drawn in, hence this was centrifugal and centripetal pastoral care to the vulnerable. For Bretherton (2006:134), such parallels can be drawn in stories of Jesus' encounter with the Syro-phoenician woman depicted in Matthew 15:21-28 and Mark 7:24-30, in the story of the Centurion who calls on Jesus to heal his servant (Matt 8:5-13). Indeed, these stories represent:

> Faithful responses (by outsiders) to the Lord who went out in the midst (meaning that he both literally walked around and that he departed from the accepted conventions of his day) so that the excluded might be included. They respond to the Lord as the servant who exercises creation, transforms their social, political and economic structures, and establishes a community of those who are to carry on this ministry, in his name until he comes again. This going out and reconfiguring the existent order so that it becomes a feast, that is, a place of generative, fruitful relations, applies whether the context is first century Palestine or the remnant of Christendom at the dawn of the third millennium (Bretherton 2006:134).

4.6. Interculturation in the Early Church

The principle of hospitality exhibited by Jesus informed the thinking and practice of the Early Church. This has also influenced the church worldwide and throughout the centuries. Christ's hospitality is a resource that is available to the contemporary church for use in the context of the HIV and AIDS pandemic. Butler (1991:670-671) asserts that hospitality forms the background of many details in the life of Jesus and in the pastoral ministry of the Early Church (Matt 8:20; Lk 7:36; 9:2-5; 10:4-11). In all these passages, the evidence is based on

the centrality of hospitality as the practice that determines how Christians relate to those who are vulnerable.

Koenig (1985:12) contends that the Early Church interculturated the Jewish, Greco-Roman hospitality in their pastoral practice. Trainor (2001:43) explains that with the conquest of the Mediterranean world, by Alexander the Great (356-323 B.C.E), Greek culture and philosophy were stamped on the Middle East. These include Aristotle's philosophy and ideas on family, the household and the city-state. Trainor (2001:43) claims that the influence remained even about three centuries later at the time of Jesus and his first followers including the Christian movement, which sprang from the Mediterranean soil to the rest of the world. Christian's interculturated this hospitality (i.e. both Jewish and Greco-Roman) even though it was influenced, reconfigured, informed and illuminated by Christ's hospitality. Subsequently, it became one of the Early Church's "charming features," which did not only promote cordial relationships among Christians but also enabled the church to engage in pastoral care to the poor, the widows and the persecuted. Koenig (1985:12) shows that Luke perceived the first church in Jerusalem as "a *Banquet* community" hence they bore authentic and credible witness to Christ, for they were of one heart, and many who were attracted by the church pastoral ministry joined it (Acts 2:42-47).

Therefore, as a "*Banquet community*", the church offered hospitality freely with no grudges (1 Pet 4:9) and in a spirit of brotherly (or sisterly) love (Heb 13:1). Such love *(Agápē)* (1 Pet 4:8; cf. Rom 12:9) was essentially outward-looking, issuing from a readiness to provide for the needs of others; thus, it is regarded as a spiritual gift (*charisma*) (1 Pet 4:10-11). Giordani (1944:205-325) asserts that the church's *Agápē* meals provided the setting for a communal response to the needs of the poor for food while simultaneously reinforcing a distinct Christian identity. Again, these meals were intended to reflect on transformed relationships in which worldly status distinctions were transcended if not disregarded, and formerly alienated persons could view themselves as brothers and sisters at God's table (Pohl 1999:42).

Furthermore, because of the quest for hospitality which had become a prerequisite for Christians, the church was urged to make sure that the needs of fellow believers were appropriately met and that hospitality was offered to all (Rom 12:13-14; Gal 6:10). Riddle (1938:146) states that hospitality became a claimed right for travellers or migrant Christians in a later period and at this time travelling, Christians expected to be offered hospitality by

fellow Christians "when they stopped *en route.*" Indeed, the accounts of the missionary activities of Paul in the Acts of the Apostles reveal how hospitality facilitated the spread of Christianity to the Roman world (Riddle 1938:146). With the improvement and building of the Roman roads, travel became easy.

However, since the inns were not many and those available were expensive, travelling evangelists and missionaries were offered hospitality by Christian churches or fellowships (Riddle 1938:146). A good example of how such hospitality was interculturated in the Early Church is Paul's reception at the house of Aquila and his wife Priscilla (Acts 18:1-11). Through the hospitality offered by Aquila, Paul was able to go out regularly to preach the gospel to people as they became converted. It is also known that he instructed the Colossian Church to offer hospitality to Mark (Col 4:10) while he himself awaited hospitality from Philemon after his release from jail (Philem 22).

In most cases, brethren in need of hospitality would go to the place where Christians gathered for worship. Within Judaism, this took place in the synagogue, which was the centre of the social as well as the religious life of the community. In fact that context is reflected in the story of Lydia (Acts 16:13-15). As Paul and his friends were searching for a place of prayer, they meet Lydia who got converted, and appealed to them to accept hospitality in her home. Likewise, the Sabbath service may be the place where Paul met Jason who offered hospitality to him in Thessalonica and accommodated him for three weeks (Acts 17:2, 7). Again, the synagogue was the probable place where Paul met Aquila who offered him hospitality for several days in Corinth (Acts 18:2-3). Although at that time, the local cultures practised hospitality, it should be noted that what the Early Christians imbibed was also in line with the teaching of Jesus who told his disciples to take nothing for their journey, not even a staff, a bag, a piece of bread, money or tunic. They were to go out without provisions and depend on the hospitality of those willing to receive them and the word of the gospel (Lk 9:4-5; cf. Johnson 1981:23). In other words, Jesus encouraged the practice of hospitality in the pastoral ministry of the Early Church.

On the other hand, hospitality was also practiced in private homes where worship, common meals (Acts 2:46), prayers (Acts 12:12) and teaching (Acts 5:42) took place. Matthews (1964:267) affirms that the upper rooms "large enough to accommodate a sizeable number of believers" (Acts 1:13; 20:7) were available in the homes of the wealthy people. He notes that

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as a meeting place for "worship, instruction and exhortation", the private homes of these rich people became the "focal point of the faith and life of the early Christians." Thus, this kind of hospitality was the origin of the house churches cited in the Pauline epistles (Rom 16:5, 23; 1 Cor 16:19; Col 4:15; Philem 2; cf. Matthews 1964:267). Trainor (2001:20) reveals six types of housing in the first-century Mediterranean region where such hospitality was interculturated (cf. Guijarro 1997:42-65).[166] He notes that in five of these houses, the *simple, courtyard, big mansion, shop house* and *apartment*, private hospitality took place while public hospitality took place in the "*big Mansion*" (*domus*).

Trainor (2001:21) says that the "*simple houses*" did not have large space to accommodate many people though it was the most common dwelling place for peasants in agrarian communities. The "*simple houses*" consisted of four rooms and they were constructed with mud and bricks, mud and rock, or stone. Trainor (2001:20) affirms that the size of these houses was originally designed to accommodate a small family of approximately four to six people (mother, father, dependent children, slaves or servants) as well as also animals. He explains that:

> The temporary nature of the mud-brick peasant houses symbolises the nature of their inhabitants. The house's impermanence and fragility typified the life of a peasant majority subject to the natural and economic factors that would have impinged on their world. The peasants were victims of the socio-economy and politics. Good harvests, the essential commodity for the survival of the peasant family, developed on good rains. Grain was also an essential trading and taxation commodity. Without it the agrarian family was forced into debt. Members then needed to borrow from extended family members or other kinship members from the same village region. Taxation was the scourge of these people (Trainor 2001:21).

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[166] Trainor (2001:21) notes how the Roman houses were different from that of their Greeks counterpart. He says that the Roman houses were designed for welcoming the invited guest while the Greek houses weres designed to protect privacy; the Roman houses was for public display and a large group and people could enter into the *atrium*, be received in the *tablinum*, and move into the *courtyard*. Trainor (2001:21) claims that the only space designated as private were the sleeeping and eating areas while the public uses of the *domus* explains one of the characteristic of Mark's house. Trainor concludes that the house envisaged in Mark Gospel was one that was open to public scrutiny and contestation from religious and political officials. Into this house, the vulnerables were welcome and those who entered it have the invitation to become members of the household. Unlike the *domus* which was open to invited guests, Mark's household challenges the social conventions of status and expands the boundaries of those who are welcome. Trainor (2001:21) notes that another aspect of the grand Roman mansion connected to this public nature concerns privacy. The construction of the house for public use did not rule out the possibility of the guest being invited into a great degree of privacy with the household head. This was seen as a symbolising part of the house in which social exchange occurred between the guest and the resident. The degree of privacy was seen also as a sign of intimacy with the household head as reflected in Mark's gospel household. In the latter part of the gospel, Jesus turned to instruct his disciples and the house became the setting in which this happened - "in private" (Trainor 2001:21). This privacy would undergrid the intimacy that Jesus seeks with his disciples and their recognition of the privilge and honor they have in Jesus' eye. Another important feature of these houses was their size. This is because the *domus* was designed to allow a large group of invited guests to gather, and for a larger than nuclear family to be housed. Unlike the modern church building in today's parish, if the Roman *domus* was the envisaged gathering place for the Markan community, then the size of the gathering would be limited. A final characteristic of the grand Roman house concerns the way the articulation of the *domus* reflected and reinforced the conventional social practice of patronage-brokerage. Trainor (2001:21) relates that the entrance of the house led through into the *atrium* to the *tablinum* "where the household-head received clients in the early mornings and late afternoons. Here the head would grant benefices to his clients who, in turn, would reciprocate with expressions of honor. The design of the house, the beauty of its murals and gracefulness of its garden sculpture reflected the status of its occupants and the honour due to them. Mark employs a similar understanding in presenting the household of Jesus's disciples. Honour and status become motivating preoccupations of the disciples profoundly critiqued by Mark's Jesus."

Furthermore, when the peasant families failed to adapt to changing manufacturing needs and a specialised economy they went into greater debt; hence:

> To overcome debt peasants would borrow money either from their own clan members, if that was possible or, more commonly, from official money lenders using their land and household property as guarantee. Most in this predicament were unable to get out of the debt trap and finally were forced to relinquish their farms. These were taken over by the urban elite as absentee landlords or patrons of moneylenders. Some peasants from confiscated lands found that they could stay and work these properties, though most were forced to the urban centres in search for work. When these groups of estranged peasants were added to those who had no support from relatives or kin and to those regarded as socially unclean, degraded and expendable, it's not hard to imagine that a sizeable proportion of the population would have been homeless. This final observation cannot be emphasized strongly enough. Along with the peasant majority, the homeless have little or no archaeological data that records their existence, social habits or thoughts (Trainor 2001:23-24).

On the other hand, "*courtyard houses*", which were a refinement of the simple houses, were used as space for private hospitality. These houses accommodated several families from the same clan group and they lived together "to preserve their kinship bond and to support one another in solidarity, especially in cases of need" (Trainor 2001:20). Trainor (2001:1) observes that unlike the peasant farmers who were subject to the marketing whims of the social elite, *courtyand houses* were owned by elites such as fishermen, priests, military officers, landowners of modest means, and tax-collectors and they had the capacity to amass "a little wealth from their industry."[167]

The *big mansion* (or *domus)*, *tavern* houses (Tabernae) and the *apartment*-style buildings of an *insulae*, were owned by rich people. Trainor describes the *domus* as:

> [T]he *big mansion....* (which) was the typical house of the elite in the Greco-Roman world. It was one of two types of housing that dominated the Roman urban landscape and was popular in Mark's day. Along with the house-apartment/shop, the *domus* could well be read back into Mark's story of Jesus. Several examples of the big *mansion* are found throughout the Mediterranean, in Israel, Syria, Turkey, Egypt, Greece and Italy. The chief characteristic of the *domus* was its central courtyard (atrium), surrounded by rooms, eating and public gathering area, living and sleeping quarters. Under Greek influence, a peristyle courtyard was added which gave the building more space and elegance. Originally one storey, in time a second was added which was associated with the dining are and given the name *cenacula.*There are five features about the Roman *domus* …. first, the *domus* was the residence of wealthier families and presumably some members of Mark community were owners of such dwellings. At the same time it is important point out the scholarly consensus that by the latter half of the first century C.E., there is no

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[167]Trainor (2001:20ff) argues that "most of Jesus' followers came from the rural, peasant segment of Jewish society. But Jesus' community was not composed solely of the peasant poor. If there is any historical basis for the story of the calling of the first disciples, of Simon, Andrew and the two sons of Zebedee (Mk 1:16-20, Matt 4:18-22; Lk 5:1-2) from their fishing cooperative to discipleship, then these four could well represent a more well-to-do wider group of disciples. The Gospel image of them leaving behind their boats and nets, and two of them their immediate family, does suggest that a new, redefined family and "economic" household waited. This does not mean, though, that they also left behind their business or their fishing net on the boat. They would have had an ability to organise, recognize potential and create structure (households) that would bring about "success") that would turn out to be different from what they had anticipated). These were some of the characteristics that made them leading disciples and foundational for the twelve - a symbolic group representative of the widespread renewal that was to happen among the twelve tribes of Israel through the ministry of Jesus and the missionary activity of his disciples. How these discipleship structures were to develop depended on the particular geographical and cultural situation in which the Gospel was preached."

> evidence of the existence of Christians from the highest and lowest level of society. This is not to say that they did not exist in fact. If any historical reliability can be attributed to the writings of Paul and the Acts of the Apostle, Christian were owners of houses in which other members met (2001:27).

From these analyses, it can be noted that, even though Christians were mostly not from the wealthiest of the elite group, nevertheless, some were rich and owned "big mansions" which were used as the place for hospitality and worship. It is probable that the head of such house churches, such as Paul's hosts, Prisca and Aquila (Rom 16:3-5; cf. 1 Cor 16:19), owned "big mansions." It seems that some Christians in the Early Church were rich and opened their home as meeting places for the believers in their neighbourhood. Matthews further points out that:

> With the conversion of a large household, it would have been natural for Christian neighbours to attach themselves to the head of the house as a part of his *familial* and to meet in his home for worship and celebration of the Lord's Supper. (There is) connection between these references in Acts to the conversion of entire households and the house churches which characterised the life of ancient Christianity (1964:268).

Later, these hosts became the heads of those local congregations or house churches, and in this capacity, it was their responsibility to provide hospitality to visiting brethren especially the missionaries (Matthews 1964:268). Brown (1975:690) affirms that *philoxenia* was something expected from the whole church (1 Pet 4:9) and it was recommended as a virtue to Christians (Rom 12:13; Heb 13:2); hence, it was connected to a promise. Brown (1975:690) observes that the Early Church perceived hospitality as an Episcopal duty and as a virtue, that was not supposed to be practised by the bishop only (1 Tim 3:2; Tit 1:8) but also by widows who were urged to show hospitality to strangers (1 Tim 5:10). In other words, it was an obligation for every Christian to practice hospitality and, therefore, it became an Episcopal responsibility and one of the qualifications of a bishop, just as it was a duty for widows anticipating any support from the church (Meyer 2000:492).[168] Matthews affirms that:

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[168] According to Meyer (2000:492) in the ancient Mediterranean world, the term widow essentially referred to any woman who lacked the visible protection and economic support of a husband who had died, a divorced woman, or even a woman whose husband was simply away for an extended period of time (which was the case with women whose husbands were soldiers). She claims that in the Hebrew tradition and in certain early Christian traditions, a widow was "an object of charity" (Meyer 2000:492). The widow, the fatherless and the stranger symbolised those who were not otherwise spoken for within the patriarchal system and, thus, were in need of special protection. By the period of formative Judaism and early Christianity, caring for the widow, the fatherless and the strangers had had a long history as a symbol of faithfulness to God's commandments (Meyer 2000:492). It should be noted that although some widows within the early Christian community were, no doubt, economically disadvantaged, others were self-sufficient. Meyer (2000:492) asserts that, presumably, the Jewish-Christian widows could follow the Jewish custom of reclaiming their *ketuba* or marriage payment upon the death of their husbands rather than remain under the financial protection of their husband's families. Some other widows of the Greco-Roman world could inherit property or other wealth from their husbands. Presumably, widows supported themselves by means of their own economic activities. The Pastoral Epistles (1 and 2 Tim; Titus) and other early Christian writings that associated widows with the practice of hospitality, which would have included activities such as the provision of meals and overnight accommodations to travellers, certainly, assumed that widows had access to money and property (Meyer 2000:492). Even in early Christian writings, writers such as Tertullian and Hippolytus indicate that the order of widows within the Early Church was that of prayers, instruction of younger women, hospitality and services similar to those performed by

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> In the writings of Hermas, the act of being hospitable is catalogued as a virtue of the faithful generally, but it is also linked quite closely with the bishop, along with their care of widows and all in need. Similarly, it is the elders or rulers of the local congregation to whom Justin testifies as the one having responsibility for the care of sojourning strangers as well as of orphans, widows and others in need. Witness of the Pastoral Epistle is even more instructive. Here hospitality appear in the list of qualifications for the office of bishop (1 Tim 3:2; Tit 1:8), while the widow is qualified by her act of hospitality (1 Tim 5:10). Such is not included, however, among the virtue that are to characterise the office of deacon (1 Tim 3:8-13) or that are set forth as duties of the laity generally (Tit 2:2-10) (1964:263).

The Episcopal responsibility for hospitality is evident also in the Johannine epistles where some brethren, most probably missionaries (1 Joh 5:7-8), were offered hospitality by Gaius (1 Joh 5:3-6). This was after they experienced inhospitality in the hands of Diothrephes, a leader in the church, who chose to put others "out of the church" (1 Joh 5:10). In fact, Diothrephes did not only decline to welcome them, but also hindered others from practicing hospitality (1 Joh 5:10). The act prompted the elders to commend Gaius' hospitality (1 Joh 5:5; 5:3-4) and to criticize Diotrephes for his inhospitality and failure to be responsible to his Episcopal duty (Matthews 1964:266). It was believed that, in their acts of hospitality, bishops would reflect the heavenly hospitality of God to humanity and by exhorting those in their household, they would "fulfil the covenant obligation to hospitality that was incumbent on them all, and which the divine name was proclaimed to the world" (Matthews 1964:270; cf. Riddle 1938:141; Hutter 2002:206-207).

Since Jewish hospitality had a strong influence on the Early Church, it is, therefore, vital to explore how this act was practised as a ritual. As we have already seen, the Early Christians practiced hospitality in the household and as well as in the church. Pohl (1999:42) shows that the home setting presented a natural environment for expressing personal qualities of hospitality while the church setting, as a gathered community, was seen as an immediate connection to the household of God. With regard to the practice of hospitality, Matthews (1964:213) explains that, after meeting the guest, the host could exchange greetings with him or her and the "disciples are explicitly instructed to observe this part of the ancient ritual of hospitality upon entering a house (cf. Matt 10:12; Matt 10:5)." Furthermore, only after the host had greeted the guests that he or she could kiss them. In this case, it was apparently the duty of the host to instigate such an action (Lk 7:45). In fact, the act of kissing was a common practice of the Near Eastern cultures (Mk 14:45; 22:47; 26:49), which was adopted by the

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deacons (see Meyer 2000:493). It is from that perspective that widows came to be held in high esteem within the Early Church, perhaps even participate in pastoral and liturgical activities alongside members of the emerging clergy (Meyer 2000:493).

Early Christians as an expression of their intimate fellowship. The practice was later encouraged as a "holy kiss" (Rom 16:16; 1 Cor 16:20; 2 Cor 13:12; 1 Thes 5:26) or a "kiss of love" (1 Pet 5:14) to be practiced by Christians in greeting.

After kissing, the guests were welcomed in the house and water was brought for the washing of their feet (Matthews 1964:213). Indeed, washing the guest's feet was assumed to be the responsibility of the host (Lk 7:44) but the act itself was usually performed by a servant, who used the towel to dry the guest's feet (Joh 13:5). Interestingly, Jesus reconfigured this practice when he assumed the task of washing his disciples' feet as an expression of humility and service (Joh 13:4ff). In Matthews' words:

> It is to be noted, though, that no Early Christian source depicts the washing of a guest's feet by the host himself, and that the act does not appear alongside that of hospitality as one of the qualifications for the office of bishop (1 Tim 3:2; Tit 1:8). Taken as a whole, the evidence would seem to suggest that this part of the rubric of hospitality, which indeed held up in the Early Church as an ideal manifestation of humility and service, was more often performed by (and thus particularly associated with) the Christian hostess (1964:213).

Apart from having their feet washed, guests were anointed with perfumed ointment or olive oil (Lk 7:38; Joh 12:3). Matthews (1964:215) explains that such an act was probably the practice "with respect either to a particular distinguished guest or to an especially wealthy host." As in Jewish culture, it is probable that even the head of the guest was anointed with oil (Lk 7:46; cf. Eccl 9:8) or ointment (Mk 14:3; 26:7). After the guest was anointed, he or she would enter the anteroom, where an initial meal could be served as he or she waited for other people to assemble. According to Matthews:

> Guests were then ushered into the dining hall and given a place at the table compatible with their rank and dignity (Lk 14:8-10), the seat of honour (Lk 14:8; 20:46; Mk 12:39; Matt 23:6) being that next to the host. Although Palestinian practice followed ancient Israelite custom in sitting down for ordinary meal, Hellenistic influence is particularly apparent in that upon special occasions, the most prominent of which were those involving the entertainment of guests; the participant reclined on couches or mats around a semi-circular table. Because of the practice of eating with fingers, the washing of hands was customary not only before, but during and after the meal as well. Accordingly, the Pharisaic criticism of Jesus and his disciples for eating with "defiled" or "unwashed" hands (Mk 7:2; Lk 11:38) probably refers to their failure to follow the prescribed rabbinic ritual observed by the scrupulous in their ceremonial washing which preceded and followed the meal (Mk7:3-4) (1964:216).

Matthews's explanation above shows that the Jewish practice of hospitality was also practiced in ancient Christian hospitality during the serving of meals. For instance, women's customary duty of serving at the table is illustrated by the case of Martha who was troubled

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by the heavy duty of preparing meals for the reception of Jesus and his disciples and who asked Jesus to tell Mary to help her (Lk 10:40; cf. Mk 1:31; Lk 8:3).

Another practice is the blessing spoken over the bread at the beginning of a meal by the host, which was followed by the "Amen of the guests." The host then broke the bread and distributed it to those around the table before finally taking a piece for himself and eating it as a sign for the others to do likewise (Ber 46:47). Interestingly, Jesus, used this method when feeding the multitudes (Mk 6:41; cf. Matt 14:19; Lk 9, 16; Mk 8:6; Matt 15:36), in the Last Supper (Mk 14:19; cf. Matt 26:26; Lk 22:19), and also at Emmaus (Lk 24:30). Matthews confirms that:

> As interpreted by the faith of an ancient Christianity, these were certainly not ordinary meals, but they do reflect the customary practice both in everyday life and upon special occasions, wherein the host's "breaking bread" constituted the ritual act of blessing with which the meal was opened (1964:222).

Another important characteristic of hospitality is the "common grace" which was uttered after eating (Matthews 1964:222). After the host thanked God for the food eaten, the guests then joined (Ber 7:3) and prayed for the host thus, "May it be God's will that our host may never be ashamed in this world nor disgraced in the next world" (Matthews 1964:222). If the wine was not served at this point, then prayers were included to bless it. According to Matthews (1964:222), this appears to be what is reflected in the "Pauline tradition" of the "Last Supper," where the "cup of blessing' (1 Cor 10:16), with which Jesus associated his sacrificial death, is regarded as a 'cup' (1 Cor 11:25)." It is after the above ritual of hospitality that the guest was questioned about the purpose of his or her visit and other details.[169]

From the foregoing discussion, it is evident that hospitality was central to the ancient Christian church as Jesus himself preached and practiced hospitality, which became a tool that guided the operation of the Early Church. Thus, Christ became the foundation of

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[169]As evident in the *Didache* 12:1, the above practice appears to have been maintained by the ancient Church. *Didache* advocates for the proving of the genuineness of the guest, hence, the "testing" of such a stranger-guest in order to "find out about him", that is, to determine whether he was simply passing through or intending to settle in the community (Did 12; 2-3). However, this inquiry was to take place only after he had been "welcomed" (Matthews 1964:222). Matthews' view is supported by Bretherton (2006:138) who views the *Didache* as an early example of both the exhortation to hospitality as an important Christian discipline and the tension within the practice of hospitality. As a document, which was vital to Christian teaching, *Didache* (4:5) calls Christians to be open-handed in their hospitality, especially towards the poor.[169] Bretherton (2006:138) further observes that the document attempted to give an exhortation on generosity by outlining several ways in which those who would abuse Christian hospitality, and those who threatened the unity of the community (for example, by their false teaching), could be discouraged (cf. Tugwell 1989:1-5; Pohl 1999:147). In other words, the document attempted to control the abuse of hospitality and, at the same time, encourage Christians to practice hospitality. The document also helped the Christian in assessing the deserving and undeserving strangers (Benedict 1998:53), thus, showing how the Early Church cherished hospitality as a normative and necessary practice (Oden 2001: 26; Bretherton 2006:139).

hospitality from whom the Early Church drew its inspiration. It is no wonder that as the Christians increased in number, they embraced hospitality, and it became an important aspect of their vocation during Christian monasticism. As the church grew, various shifts occurred in hospitality; we shall consider these in the next section.

4.7. Historical and theological paradigm shift

Christian hospitality has undergone various shifts from the time it was launched by Jesus to the present church era. In this section, we shall explore these shifts starting from the ancient church. Many leaders of the ancient church such as Lactantius, Jerome, Augustine, Ambrose, Gregory of Nazianzus, Basil, Gregory of Nyssa and Chrysostom were of the view that the Christian hospitality was a significant context for transcending status boundaries and all forms of prejudice that tended to crop up in the society from time to time (Carmichael 2004:41; cf. Pohl 1999:19). Besides, Tertullian, the third Century theologian, had supported the plight of poor women whose non-believing husbands found it difficult when they offered hospitality to visitors and prisoners (Sutherland 2006: xii). To the abovementioned theologians, therefore, Christian hospitality counteracts the "social stratification of the larger society by providing a modest and equal welcome to everyone", regardless of background, status, race or creed (Pohl 1999:19). Certainly, John Chrysostom, like Lactantius, felt that Christ's hospitality ought to be different, and he declares:

> Whereas if thou entertain some great and distinguished man, it is not such pure mercy, what thou doest, but some portion many times is assigned to thyself also, both by vain-glory, and by the return of the favour, and by the rising in many men's estimation on account of thy guest (cited by Pohl 1999:18).

In other words, Chrysostom was of view that rather than entertain people who had something to offer in return, Christians should move away from that Greco-Roman approach and welcome those who seemingly brought little to the encounter or nothing at all. Similarly, Jerome, on his part, challenged the clergy to allow poor people "and strangers be acquainted with your modest table, and with them Christ shall be your guest" (Pohl 1999:19). Jerome cautioned Christian leaders against the temptation of entertaining the powerful only and urged them to remember to offer hospitality to the vulnerable for they were servants of a crucified Christ, the one who had lived in poverty and on the bread of strangers. Jerome insisted that Christian leaders should depend directly on Christ for provision rather than compromise holiness with ambitious entertainment, which to him borders on insincerity, hypocrisy and lack of virtue (Pohl 1999:19).

According to Lactantius, hospitality to strangers is equal to justice; hence, every stranger must be given his or her justice by being treated kindly in a strange world (Pohl 1999:19). Lactantius stressed the need to welcome those who could not give anything in return for "our true and just work," - the work that relates to God, for God is just (Pohl 1999:19). For Augustine, the acts of kindness fit into a network of need and both the giver and the recipient are in need before God even though God does not need our goods, for God has "vouchsafed to be hungry in His (sic) poor" (Pohl 1999:20). During the period of the Early Church, hospitality was used as a survival tool because Christians were being persecuted and they were the minority group. Thus, the practice of hospitality was important in sustaining their Christian identity and providing care for the vulnerable and even the ministry to Christians who were taken to prisons was understood as an aspect and an extension of hospitality.

(a) Fourth and fifth century

During this period, hospitality went through a paradigm shift as the socio-political environment changed. Pohl reports that:

> Great changes in this period were associated with the transition of the church from a persecuted sect to the religion of the empire. Although some development of institution of care had begun slightly earlier, the major innovations occurred in the fourth century. When the emperor Constantine gave his support to the Christian faith in the early fourth century, substantial public resources as well as substantial responsibilities flowed to the church. Hospitality as care for the needy came to be viewed as "public service," and by the middle of the fourth century outsider recognised Christian institutions of care as exemplary (1999:43).

After Emperor Constantine[170] gave his support to the Christian faith, the location of Christian hospitality expanded in several different directions and "substantial public resources as well as substantial responsibilities flowed to the church" (Pohl 1999:43). The Christian hospitality, as care for the needy, came to be viewed as "public service" and recognised as an institution of care worth being imitated (Pohl 1999:43). As a result, the Christian hospitality became more institutional, systematic and corporate in form. For instance, Timothy Miller (1995:116) notes that John Chrysostom, acting in his capacity as bishop, was instrumental to founding a number of hospitals in Constantinople.

However, the first hospitals *(xenodochia),* which received extensive attention, were those started by Basil (AD 370) the bishop of Caesarea (Gregory, *Trans.* 1996:407). Gregory of

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[170] In the centuries prior to Constantine's reign over the Roman Empire, Christians had been severely persecuted. However, while entrenched in wars, Constantine reported to have seen a bright image of a cross in the sky inscribed with the words "Conquer by this." He marched into battle under the sign of the cross and took control of the empire. Constantine's apparent conversion to Christianity was a watershed in church history. Rome became a Christian empire. For the first time in nearly 300 years it was relatively safe, and even cool, to be a Christian. No longer were Christians persecuted for their faith. Constantine then sought to unify his Eastern and Western Empires, which had been badly divided by schisms, sects, and cults, centring mostly around the issue of Jesus Christ's identity.

Nazianzus (1996:407) reports that, after famine strikes, Basil started those hospitals so that the sick could be cared for and the poor supplied with prepared food and physical care. Besides building hospitals to care for the sick and the poor, Basil went on to establish a variety of institutions to provide care for travellers (Forell 1979:125-126). In his eulogy, the hospitals that Basil started were described as a "storehouse of piety" and the finest wonder of the world, a place where those decimated by disease could have a city of their own, no longer objects of hatred and exclusion because of their illness (Forell 1979:125-126).

From the above, it is notable that Basil's enormous contribution to the building of hospitals changed the understanding of the Christian hospitality as practiced in the ancient Christian era. It also reflects how the present hospital care was originally connected to the practice of Christian hospitality. All in all, Christians established many hospitals in the fourth century to care for strangers, particularly for poor strangers and the local poor. With time, these hospitals were categorised into separate institutions according to the groups in need -for instance, the orphans, the widows, the strangers, the sick, and the poor (Pohl 1999:45). However, Chrysostom continued to urge his parishioners to make a guest chamber in their own houses, a space set apart for Christ; a space within which to welcome "the maimed, the beggars, and the homeless" (Pohl 1999:45). He further reminded them that hospitality should be offered "personally with one's own hands rather than being left exclusively for the church to provide" (Pohl 1999:46).

In any case, hospitality in the *fourth and fifth century* had become an essential part of Christian identity, and it encompassed welcome compassion, care for the sick, care for the orphans, care for those with chronic diseases, the old, the poor and destitute (Pohl 1999:46).[171] Pohl (1999:46) says that treatment were all part of a proper Christian response to people in need. In recounting the work of the church at Antioch, Chrysostom explained that though the church was not wealthy, it cared for those in prison, the sick, the disabled and those who were away from their homes (Pohl 1999:46). The church also provided food and clothes to those who came, "casually", everyday (Pohl 1999:46). Between AD 400 and 403, Chrysostom built seven "hospitality units" in Constantinople to provide care to strangers, orphans and those who were sick (Pohl 1999:46). This indicates that during this period, the church was able to use hospitality to respond to the challenge posed by the vulnerable groups

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[171] The period between fourth and fifth centuries is very important because it was the most active moment as far as the Christian hospitality is concerned. This is in terms of writings, the emergence of monasteries and church leaders such as Jerome (ca. 342- 420), Lactantius (ca. 240- 320) and Chrysostom (ca. 347-407) who defined Christian hospitality as welcoming the "least" without commercialisation of hospitality.

- a lesson for the modern church leaders in Africa as they grapple with the challenge posed by HIV and AIDS pandemic. In fact, it was within the fourth century that monasticism[172] took root as an essential expression of the Christian life and the major figures were Basil, Chrysostom and Jerome.[173] Later, in the sixth century, Benedict of Nursia (ca. 480- 550)[174] the father of Western monasticism developed a rule of monastic life that gave a central place to hospitality to strangers while protecting other disciplines of the monastery[175] from disturbance (Benedict 1998:12).

The teaching of Benedict and the life of monasticism inspired a life in which humility and obedience were the means by which the love of God and of one's neighbour were accomplished (Benedict 1998:12). In this respect, Benedict's understanding of hospitality to vulnerable strangers was linked directly to a change of "one's self-willed and pride-filled pattern of life in order that worship of God and love of one's neighbour, might come first" (Bretherton 2006:140). Ironically, this distinctiveness of the fourth-fifth century period was defined as the church was increasing in wealth, power and influence. This was probably because of the fact that the relation between the church and socio-political institutions was changing, for the church and the political authorities were no longer at odds. They had become intertwined and dependent on one another because hospitality reinforced that relationship, as the above discussion has shown.

(b) Medieval Ages

This period, which is popularly known as the *Middle Ages,* extended from about AD 1000 to AD 1500 or from about AD 600 to AD 1500. In this period, three institutions became

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[172] E.D.H (Liz) Carmichael (2004:52-53) traces the origin of Christian monasticism to St. Anthony of Egypt who withdrew into the Egyptian desert in the 270s AD and who was followed by other monks (hermits). Carmichael (2004:52) believes that the monastic movement emerged as a result of the zeal for a life of Christian perfection. After the declaration of Christianity as one of the officially recognised religions in the Roman Empire by emperors Constantine and Licinus at Milan in 313 AD, persecutions ended which "also meant the end of a certain quality of Christian commitment" (McBrien 1984:613). This also saw the emergence of the monk as a powerful force to reckon with. Consequently, the monk succeeded "the martyr as the expression of unqualified witness and protest against worldliness" (Bosch 1991:202). At the very early stage of the monastic movement, the monks lived only a solitary life in the Egyptian desert. The significance of this early period of the monastic movement is that the monk was engaged in the task of 'creating his space', that is, "building a spiritual room capable of giving hospitality" (Greer 1974:37). It is no wonder, therefore, that the founding of the first hospital - the hospital of Edessa in Syria in AD 370, which was meant for the treatment of travellers attacked by illness, as well as strangers and inhabitants affected by famine - was inspired by the hermit, St. Ephraim (Murray 1990:24). With time, the Christian monastic movement that was originally an individual affair incorporated a community character. St. Pachomius developed this community character when he began to organise the Egyptian *anchorites* into groups/communities. These communities of monks in the desert were good in many ways - they were exemplary in welcoming strangers. They associated with the poor and the maimed and invited all of them to their tables as guests, hence, rising to the occasion by practising Christian hospitality as Chrysostom set it (Matthew 25:31-46). It is no wonder that John Chrysostom advised Christians of his time to visit these communities of monks in the desert, and learn from them (Greer 1974:42).
[173] Jerome was an early Latin scholar of the church to whom we owe the first translation of the Bible into Latin. Most of his adult life was spent in study and monastic discipline in Palestine.
[174] By the sixth century, St. Benedict of Nursia emerged to give a distinctive shape to Western monasticism. He introduced the practice of the Christian hospitality to "the monks in the West" as evident in his Monastic Rule, which is generally known as "The *Rule of St. Benedict*." It greatly influenced Christian Monasticism especially the Western tradition (Benedict of Nursia 1975:89). Benedict strongly believed that in welcoming strangers, one welcomes Christ who identifies with strangers, the poor and the needy.
[175] Monasticism comes from the word monastery, which means a large building or a group of buildings in which monks live and worship (Benedict of Nursia 1975:89). Monks are religious practitioners in a monastery where they lead a monastic life, living quietly and simply without a lot of money or luxurious life (Benedict of Nursia 1975:89). In most cases, they lead a life of prayer and devotion to God.

very important for the practice of the Christian hospitality. They included the monasteries and their hospices for pilgrims, as well as the hospitals and the great ecclesial and lay households (Pohl 1999:48). Pohl observes that:

> Needy pilgrims and the local poor looked to the monasteries for hospitality and relief. When their numbers were large, care was often distant and relatively anonymous (e.g. alms distributed at the monastery gate). Hospitality for travellers, pilgrims and visitors of higher social status was more personal and grand. Wealthy monastic houses provided important guests with fine quarters and lavish fare, offering a standard of entertainment that was widely regarded. Hospitality to the wealthy and the powerful reinforced important social and political bonds between the monastic authorities and the aristocratic powers (1999:48).

Thus, monastic hospitality in the *Medieval Ages* generally reinforced social boundaries that are a clear departure from the vision of the church leaders of the fourth and fifth centuries and the entire philosophy behind the Christian hospitality. Furthermore, medieval hospitality was characterised by specialised institutions with paid staff who cared for patients, and welcome was fashioned according to the status of the guest (Forell 1979:125-126). It was also characterised by the reinforcement of existing patterns of wealth and power and great households belonging to "senior citizens", like bishops (who had by now acquired noble status as opposed to servant status), and lay aristocrats were central to the practice of hospitality in the Medieval Ages.

Sadly, even though the church had acquired much property during the Medieval period, little was used for the practice of hospitality compared to the resources used in the fourth and the fifth centuries when hospitality was used to the advantage of the sick, poor and needy (Henisch 1976:11). It is no wonder that hospitality in the medieval period began to diminish gradually and complaints about absentee priests, misappropriation of funds, discrimination, and inadequately endowed clergy houses became rampant (Henisch 1976:11). Henisch (1976:11) argues that because of institutionalisation of care, which distanced response to basic needs from community and the increase of specialization of care, the vulnerable and needy people were less frequently incorporated into a local body of believers and were being cared for at a distance by paid workers.

Moreover, because hospitality in the late Middle Ages was connected explicitly and deliberately to power, influence and grand displays of wealth and status among the great ecclesiastical and lay households became the order of the day (Johnson 1981:130; Pohl 1999:50). As Henisch (1976:11) says, for a person to retain authority and influence, the great householder had "to show himself (or herself) the source of all good things for his dependents,

and to equal, or preferably surpass, the magnificence of his allies and enemies." Pohl (1999:50) reminds us that even though money economy, as such, did not exist, the nobility consumed its excess wealth "on its estate in the form of strategic hospitality", which "reinforced the complex bonds of interdependence between Lord and vassal, church and nobility, which were characteristic of feudal life."

By early fifteenth century, the households of bishops and those of lay aristocrats in England were absorbed with the desire to exhibit their power through the magnitude of entertainment. Hospitality of this nature entails an "elaborate deference to rank and power" (Heal 1982:544-563). Hence, grand hospitality was alleged to be the "means of securing good neighbourliness, of ensuring communal stability and promoting the general well-being of the commonwealth" (Heal 1982:547). In the course of dispensing hospitality, those of lower status were received at a different table, fed different and housed in different places (Henisch 1976:12). As the Medieval period (AD 500-1500) ended, the Christian hospitality had died a systematically co-ordinated death. By that time, provision for the poor was done mostly at the gate and not within the house, this was an indication that the poor were now being seen as a bother (Heal 1982:547). Unquestionably, medieval hospitality was a terrible reversal of the great gains that had been made in the past as we have seen above and it is remembered as a period that did not fuel the fire of hospitality but instead it extinguished it through exclusiveness and through class and rank dispensation of hospitality.

(c). Reformation period

During this period, the sixteenth-century Protestant Reformers attempted to reconstruct the mess left behind during the Medieval period (Sutherland 2006: xii; cf. Johnson 1981:27). In so doing, they endeavoured to redefine the practice of hospitality by offering remorseless critiques of the extravagance, indulgence, and waste that were associated with late medieval hospitality (Johnson 1981:27; cf. Pohl 1999:52). They also discarded both the elaborate welcome to the rich and the indiscriminate aid to the poor, i.e. in their attempt to revisit ancient Christian hospitality that cared for the vulnerable (Johnson 1981:27). Pohl (1999:52) notes that the intention of Protestant Reformers was to accentuate "frugality, prudence, discernment and orderliness in the dispensation of hospitality", for the medieval hospitality systems were crumbling. In reality, even as the Reformers attempted to re-instate the ancient Christian hospitality, they found that they faced another challenge of the breakdown of rural communities. At that time, there was an increase in urbanisation,

vagabonds, plagues, wars and trades, which relegated the concept of hospitality into the periphery (Pohl 1999:52).

Conversely, the *Reformation* hospitality was able to recover, partly, the moral credibility and practical relevance of hospitality to the vulnerable especially the large numbers of Protestant refugees fleeing persecutions during the period. On the part of Catholics, the theological significance of hospitality during the time of Reform was articulated by Ignatius of Loyola (1491), who is said to have established places where travellers, strangers and widows were hosted (Sutherland 2006: xii). Another outstanding character was Martin Luther who urged Christians to offer hospitality to the persecuted believers, for in so doing, "God Himself (sic) is in our home, is being fed at our house, is lying down and resting" (Luther 1961:189). According to Sutherland:

> In the early modern period, Protestants and Catholic agreed that hospitality was central to the moral life. "Who is my neighbour?" is the crux of Martin Luther's ethics and his "whether one may flee from a deadly plague" (1527) is typical of the emerging protestant consensus that the cross demands a love that shows itself in the hospitable treatment of other (2006: xii).

On the Protestants' side, John Calvin was a major character who urged the civic leaders of Geneva and Frankfurt to welcome strangers and the vulnerable in an act of what he called "sacred" hospitality (Calvin 1948:15-16). It was recorded that by mid-sixteenth century, John Calvin mourned the demise of ancient hospitality in his church. He complained that the ancient hospitality, which used to be celebrated in history, was being forgotten. Calvin lamented that the inns were being used to accommodate strangers instead of the church providing hospitality to them. Thus, he saw this act as a sign of human wickedness (Pohl 1999:36).

Pohl (1999:52) states that during the sixteenth century Reformation period, hospitality was pegged on Christian families and civic leaders. Unfortunately, the period did not recover the lost glory of the church as a centre and a location for hospitality. Instead, hospitality was identified with the civic and the domestic spheres. Martin Luther, in particular, viewed these spheres as essential to the way of a God-ordered society. Consequently, the Reformers killed the sacramental character of ancient hospitality that we have discussed earlier. Hospitality had become diminished to, mostly, an ordinary but valued expression of human care (Pohl 1999:53).

Despite the Reformers' acknowledgement of hospitality as a "sacred" act, they simultaneously undermined some of the mystery that had "under girded the potent earlier understanding" of Christ's hospitality (Pohl 1999:53). Furthermore, Luther failed to adhere to the philosophy of hospitality when he regarded the Jews in Germany as devils,[176] advocating for the destruction of their homes, schools, and synagogues and suggesting that they should be forced to live in barns doing manual work or be expelled.[177] This shows that even though the Reformers did not invalidate the Christian hospitality, they relaxed the rules by encouraging the political (civic) authorities to work towards its realization. In fact, by Luther's daring advocacy of a forceful removal of a hostile neighbour, the Christian hospitality was clearly jeopardised.

The *eighteenth century* was the most distressing moment in European socio-political history.[178] During that period, John Wesley attempted to recovery the Christian hospitality with his team of evangelical revivalists, thus, earning the name "the friend of the poor" (Rack 1989: xii). This was after the industrial revolution when the social and the religious conditions had changed so drastically that people no longer had time for one another, as the revolution ushered in a material minded quest in eighteenth century Europe (Rack 1989: xii). The moral and religious decline is illustrated by the fact that feasts were ignored, daily worship was neglected and even the Holy communion, which is central to the Anglican faith was infrequently observed; and "the grand old Church of England seemed in danger from

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[176] In the seventh century, a legend was developed based on the concept of the "wandering Jew." This story was about a Jewish man who is said to have verbally scorned Christ with the words, "*Walk faster*", when Christ attempted to rest while carrying the cross on his way to Golgotha. The story says, Christ answered that man, "*I will, but you will walk until I come again.*" This legend has been romanticized and used to explain why Jews were wandering and are to be wanderers until Christ returns at the end of the world. It is interpreted naively as God's punishment for them for their rejection of Jesus as the Messiah and, then, it is used to influence many historic forms of anti-Semitism, thus, becoming also one of the cornerstones for modern anti-Semitism. Karl Barth refutes such an interpretation and asserts that although Jews are a wandering people, their wandering is a sign of God's providence, not God's punishment. By being stripped of their land, language and history, they are preserved, accompanied and ruled by God. Even to this moment they are a testament to God's faithfulness to the covenant of election and their continuous existence is not an accident or miracle but a sign of God's faithfulness and grace, of the constancy of God's will and decree. For Barth, the wandering of the Jews is a forceful subversion of any anti-Semitic ideology that would brand the Jews as "no people" when they are the "people of God." This is because the Jews belong to God even after their rejection of the Messiah and their state of unfaithfulness to their election (Sutherland 2006:35-36).

[177] Also see Luther (1989: 269-75, 285-292).

[178] Rack (1992:7-23) reminds us that the eighteenth century English society was "punctuated by riots against high corn prices; low wages in the textile industry; turn-pike roads; Papists, Methodists and Dissenters; and sometimes against the political violations of "the rights of the freeborn Englishmen." He also says that the century was kept in a state of relative control and equilibrium due to three factors. These were the strength and resilience of the social hierarchy, the possibility of movement up and down the hierarchy, as well as the ruling class' efforts to gain consensus in society by influence, persuasion and religion, though ultimately by force if that was necessary (Rack 1992:6). Other significant features, especially of the seventeenth century that impacted on the times in which Wesley lived, include the fact that, the year 1665 marked outbreak of the Great Plague which was the last major outbreak of bubonic plague, but which killed some 68,000 people. In 1666, the Great Fire of London destroyed much of the city, and a new city emerged. In 1670, Charles II with the help of Louis IV of France tried to make England a Catholic country again. In 1672, Charles issued a Declaration of Indulgence, which suspended all laws against Catholics and Non-conformists, but parliament withdrew it and passed the Test Act, which further excluded Catholics from all official employment. Charles managed to rule the country without calling parliament to convene as Louis IV provided him with personal funds. In short, by the time Wesley was born in 1703, he found a society that was experiencing considerable tension in the political realm as the miseries of the lower class increased. During Wesley's time, many people in England had no schooling or training because of urbanisation. Housing was catastrophic, there was no medical care and there were very high birth and mortality rates. John Wesley himself was one of seventeen children (See Marquardt 1992:19ff). Marquardt (1992:21) concludes that the wealthy were concerned with securing and maintaining property, and increasing income. However, Wesley's Methodism saved England from undergoing a revolution similar to that which had occurred in France in 1789 (Semmel 1974:10).

nothing but its own inertia" (Hempton 1984:31). In such a context, Wesley and his team of Methodists started offering regular opportunities for intense personal interaction, relationship building, and oversight of new believers; thereby, re-integrating church and household hospitality (Pohl 1999:54). He viewed close community as "the very thing that was from the beginning of Christianity" (Wesley 1989:256). He sought to recover the practice of shared meals by instituting love feasts with simple food and instituting regular meetings that provided a context that allowed a close union of believers with one another. It was clearly a move towards the recovery of the Christian hospitality that was lost during the Medieval period. Wesley teamed up with others to build homes for widows, the destitute, children and others who were unable to provide for themselves. This was a bold attempt at returning to the ancient Christian hospitality.

The homes for the widows, like the group meetings and the common meals that Wesley instituted, created a distinctive space where participants transcended some of their social differences (Pohl 1999:55). However, because of Wesley's failure to equate his work with "Christian hospitality" many of his followers later on ignored hospitality. This was despite his frequent encouragement of his parishioners to visit the poor and the sick in their homes as they strived to help them physically, socially and spiritually (Pohl 1999: 55). The exceptional nature of Wesley's action during this period is that, while he was championing the Christian hospitality, his contemporaries were systematically killing it. As a result, Wesley became the lonely voice calling from the wilderness of inhospitality and asking the people to open up to another. Wesley represents an intriguing synthesis of "old and new, conservative and radical, tradition and innovation that can spark greater clarity in today's new quest for authentic Christian hospitality" (Snyder 1980:3). His works and ministry continue to speak volumes to the contemporary church with regard to issues such as the HIV and AIDS pandemic, poverty and the general welfare of vulnerable people.

(d) Post-modern or contemporary period

The Christian hospitality has shifted radically in the *contemporary* period. Pohl (1999:56) observes that the activities like work, religious observance, protection education, care for the sick, provision for the aging and care for the strangers, which used to be located in the household in ancient Christianity, are now located in different spheres and in separate institutions in modern hospitality. Each sphere now has its own culture, rules, and specialists and professionals who are paid to provide service. Even though the modern

churches continue with the practice of hospitality, in most cases, it is limited to Christian Orders.

Young (1999:422) notes that in *contemporary* hospitality, several Christian Orders take in the mission of feeding the poor and tending to the sick as a definitive context of their lives. This is not a new venture because, for many years, the monks and nuns are known for focusing on the ideal of caring for the vulnerable and attempting to improve their lives by offering shelter and food, among other services. Of course, the most outstanding is the late Mother Teresa of Calcutta who became a modern-day example of the twelfth-century *Hospital Sisters of St Augustine of Paris* (Young 1999:422). Others include, the Catholic Worker Houses of Hospitality (CWHH), which was instituted by Dorothy Day, the order of the *Sisters of Mercy* and the *Sisters of St. Dominic of Amityville* (Young 1999:422). The above groups are examples of the contemporary Christian hospitality and they also exemplify the way the modern Christian hospitality of caring for the vulnerable has been limited to specialist groups and professionals. Besides, Levinas (1985:7) and Derrida (2000a:10) are among contemporary philosophers who welcome the relationship between hospitality and identity in the socio-political world. For Derrida:

> Hospitality is culture itself and not simply one ethic among others. Insofar as it has to do with the ethos, that is, the residence, one's at home, the familiar place of dwelling, as much as the manner of being there, the manner in which we relate to ourselves and to others, to others as our own or as foreigners, ethics is hospitality; ethics is entirely coextensive with the experience of hospitality, whichever way one expands or limits that (2001:16-17).[179]

In fact, Derrida (1999:50; 2000a:10; 2001:16-17; 2002:361; 2005a:16), Nouwen (1975:50), Ogletree (1985:1) and Levinas (1985:7) all understand hospitality in philosophical and ethical terms as they argue that hospitality means upholding virtues of morality. Derrida (2002b:361) argues that, "If I welcome only what I welcome, what I am ready to welcome, and that I recognize in advance because I expect the coming of the *hôte* as invited", that is not hospitality. This is because the act of hospitality constitutes the categories of host and

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[179] Derrida's understanding of hospitality is influenced by his personal life. He was born in El-Biar, Algeria on 15th July 1930 and his family had lived in Algeria for centuries before it was colonised by the French. His grandparents became French citizens in 1870, when the *Cremieux Degree* granted citizenship to the Jewish population of Algeria, who, like its Arab and Berber inhabitants, had until then been considered French subjects with limited civil and legal rights. Derrida described how he was marginalized and discriminated against in school when he was twelve years old. For one year, he could not attend school because he was regarded as a Jew. He had been excluded from the French public school system because of the severe *Numerus Clausus* imposed on Jewish students after the *Vichy collaborationist* government rescinded citizenship for all Algerian Jews. It was after the Allied troops conquered North Africa that he was able to attend classes. He never forgot this incident for he felt discriminated against, deprived of basic civil rights, and treated as an unwanted foreigner in his own land. He realized that he was a citizen of no country at all - see
http://universityof california.edu/senate/immemorial/jacquesDerrida.htm- 26th March, 2010.

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stranger, but it is only through unconditional hospitality that we can face the other, "as Other" (Derrida 2002b:361).

Moreover, for hospitality to be 'hospitality' it must contain within itself the irreducible possibility of hostility "without a boundary", for letting the total outsider in as a friend would not make sense. Derrida's main question is, what happens once the "outsider' is inside? Does the outsider not simply become an insider?" (Derrida 2002: 361). He claims that in hospitality there is a paradox, "the unconditional is always already conditional" (Derrida 2002:361). Derrida (2005a:356) further argues that hospitality can neither be "turned into mere integration nor can it simply remain unconditional." For him, hospitality is the ongoing "ethical burden of community that must be negotiated and invented every step of the way" (Derrida 2005a:420). This means that we are always, somehow, in, 'but not quite,' and we are always, somehow, out, 'but not quite.'

In *Adieu to Emmanuel Levinas*, Derrida (1999:50) defines ethics as hospitality and hospitality as ethics. He is of the view that, hospitality is not removed from ethics, nor is it a "specific area of ethics, but it is the foundation" or "the whole and the principle of ethics" (Derrida 1999:50). In other words, Derrida sees ethics as that which relies on hospitality so much that one cannot speak of ethics without speaking of hospitality. However, the relationship between the two may be "both hidden and calling to be seen" (Derrida 1999:50). On the other hand, Derrida (2005 b:16) defines hospitality as culture and, as ethics, this is because there is no culture without hospitality, for "hospitality "is culture itself and not simply one ethic among others."[180] He concludes that this absolute hospitality rests "outside of right, above that which is juridical" and unlike conditional hospitality, "it is not associated with right, with law, with debt, or with duty" (Derrida 2005b:16).

According to Ogletree (1985:1), "to be moral is to be hospitable to the stranger." He claims that Exodus 23:9 has moral implications for the Israelite community. The Israelites were cautioned not to oppress strangers for they knew what it meant to be a stranger since they were strangers in the land of Egypt. In other words, the Israelites had moral obligations to be

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[180] Haughton (1997:3-44) captures this theme and equates hospitality with one of the structures that traditionally made it possible for people to move through the vicissitudes of their own lives with some certainty as they embrace personal struggles and successes, failures and hopes. He further contends that hospitality has a very ancient history. For example, Abraham was visited by three strangers and he welcomed them by killing his best calf, baking and cooking, not because he was particularly generous, but because the deep-rooted customs of desert people required that those who possessed food and shelter should share with those who were vulnerable (Haughton 1997:140). Haughton notes that with the changing global scenario, the challenge facing the church is now different. Hospitality theology calls for the church to begin the difficult task of saying "yes" to the unfolding process of what could culminate in a democratic, just and kinder social order.

fair and considerate to the stranger for they could clearly recall the immoral acts carried out against them in Egypt where they were strangers. Ogletree (1985:1-3) claims that in the contemporary world, where we are always strangers to the "worlds", "times" and "situations", and where we would like to be shown hospitality, there is a need to obey Jesus' call to do to others what we would like them to do to us, "for this sums up the Law and the Prophets" (Matthew 7:12).

In his book, *Reaching out: The Three Movements of the Spiritual Life*, Henri J. M. Nouwen argues that we move between three pairs of relationships. The first is the relationship to ourselves, which is characterised by loneliness and solitude; the second is the relationship between the self and others and it is the movement between hostility and hospitality. The last movement, which is illusion and prayer, is between self and God (Nouwen 1975:5). Nouwen (1975:79) defines hospitality as the creation of a free space in which people can reach out to strangers and invite them to be friends. The stranger is not just an "other" whom we do not know but also an intimate "other living with us, like a child or friend" (Nouwen 1975:79).[181] This is true and applicable to PLWHA and their families who would like to be treated well by the community, for it is possible for those without the virus to be infected.

As a moral duty, the community is obliged to offer hospitality to those who are weak and vulnerable, and, in a metaphorical sense, to pay attention to "otherness" in its many expressions (cf. Ogletree 1985:3). As Ogletree (1985:3) reminds us, this attention to "otherness: calls us to be open to the unfamiliar and unexpected, efforts to transcend barriers generated by any oppression, receptivity to unconscious impulses" arising from our being as "bodied selves and perceiving strangers as equals" who "share our common humanity in its myriad variations", thus, creating a space or opening a door to others without being replaced.[182] Moreover, since PLWHA and their families are subjected daily to a society which denies them their full humanity, the challenge now is for them to accept this space and resist oppression by seeking to open the way for "a new reading of social reality in the

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[181] According to Nouwen (1975:68-69), hospitality means primarily the creation of a free space where the stranger can enter and become a friend instead of an enemy. He argues that hospitality is not to change people, but to offer them space where change can take place. On the same note, Hershberger (1999:104) asserts that hospitality involves listening, learning, seeing the other, and negotiation of space by all parties. He claims that, generous hospitality can lead to reconciliation and genuine embrace of the other; for as we engage in the practice of hospitality, we experience the creation of space that allows for the conversion of both host and guest or stranger.

[182] This is where we differ with Derrida (2000), who argues, philosophically, that hospitality involves giving everything - even a home - but he leaves no connecting point, place or common humanity between the host and guest. In other words, the host is driven away by the emergence of the stranger's radical "otherness" (see Derrida's book, *Of Hospitality*. Stanford: Stanford University Press; Anidjar, Gil (2002: 358-420) "Hospitality", in *Acts of Religion,* New York: Routledge; Anidjar, Gil (2002:22) *On Cosmopolitanism and Forgiveness*. New York: Routledge.

service of strategies directed toward social reformation" (Ogletree 1985:5). This, therefore, calls for the oppressed to expose the deceit and the distortions of the dominant culture. As Paulo Freire (1993:32) notes, "It is only the oppressed who, by freeing themselves, can free their oppressors."[183]

Lesslie Newbigin (1989:227-229) calls for urgency in recovering hospitality in our church congregations and argues that, "The only hermeneutic of the gospel is a congregation of men and women who believe it and live by it." He believes that the community of faith must live out that faith as a community of truth (Newbigin 1989:228). Therefore, when Christians offer hospitality to the PLWHA and their families, they embody an incarnated, plausible community of faith that lives out its Christ-shaped story and embodies the truth of that story.[184] Such understanding compelled Ogletree (2001:86-88) to argue that hospitality is a central dynamic in moral experience because to be moral, is to be hospitable to the sick, the vulnerable and the poor.

The above outline shows how Christian hospitality has been conceived and practiced by Christian churches in various centuries, and it confirms the centrality of hospitality within Christianity. Its centrality is further underlined by the way, in which concern for the proper practice of hospitality occurs in both exhortations to faithful witness and Christian renewal movements, for example, in monasticism (Pohl 1999:52). Furthermore, the above theological notion of care and protection of and sharing with the vulnerable, stranger, guest, etc., will help us to connect with the care, protection and empowerment of, and sharing with the PLWHA and their families. Additionally, the theological and historical review provided here will enable us to explore the fundamental differences and commonalities between the Christian hospitality and *Ũtugi*. Therefore, using the contours of *koinonia*, *the body of Christ*, *solidarity* and *shalom,* we shall explore the tensions, inconsistency, continuities and discontinuities between the Christian hospitality and *Ũtugi* in the following sections.

4.8. *Koinonia* (κοινωνία): A spiritual and socio-economic dimension

From the above discussion, it is clear that the Christian hospitality is a prerequisite for all Christians and its framework is within Christian *koinonia*. It is important to note also that,

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[183] Indeed, as Freire further argues, true hospitality consists, precisely, in fighting to destroy the causes that nourish false charity. For him, false charity constrains the fearful and subdued, the "rejects of life", to extend their trembling hand. Real hospitality lies in striving so that these hands - whether of individuals or entire peoples - would be extended less and less in supplication, "so that more and more they become human hands which work, and working, transform the world" (Freire 1993:20).

[184] See also Palmer (1993:88-105), who uses the classroom to model community hospitality.

in terms of continuity, the spiritual and socio-economic dimension of *koinonia* is what links *Ũtugi* and the Christian hospitality. This is because both have their base within the location of a community's spiritual and socio-economic systems. Thus, *koinonia*, which is the Greek word for "fellowship (κοινωνία), is perceived to be closer to the principles of *Ũtugi* by Agĩkũyũ Christians.[185] The Christian *koinonia* (κοινωνία) including its cognates, which is translated as "communion", occurs 35 times in the New Testament even though this word does not appear in any of the four gospels. In translating the term, Webber (1960:52) sees *koinonia* (κοινωνία) as a fellowship of men and women of all sorts and conditions who are united by the fact that Christ is their common Lord and the source of their fellowship. In other words, *koinonia* (κοινωνία) is, primarily, a fellowship, a sharing in common or communion, community, partnership, participation and solidarity. Its root in both Greek, *koinos* and Latin, *communis,* means "common", "shared", "public", as distinct from "private" or "individual" (Webber 1960:52).

Therefore, *koinonia* (κοινωνία)*,* from *koinos,* means sharing, having, or giving a share, and *koinonos* means one who shares something or a partner, while *koinoneo* means to have a share in something with someone (Cranfield 1999:81-83). In the Greek Old Testament, various forms of *koinos* were used to translate the Hebrew *chabar,* "join together," even though *chabar* in the Old Testament is used only of relationship among people and not for the relationship between human beings and God (Cranfield 1999:83). Cranfield (1999:81) claims that *koinonia* (κοινωνία) is not just a "spiritual" aspect as most Evangelicals understand "fellowship" and "communion", but it embraces the sharing of material resources, which is its socio-economic dimension. This is well demonstrated in Acts 2:44 where Christians of the Early Church were said to have "all things in common" *(koina)*. Paul also understands *koinonia* from the socio-economic and spiritual dimension especially where he is said to have collected a monetary contribution *(koinonia)* from the churches in Rome and Greece for the church in Jerusalem when it was in financial need (Rom 15:26; 2 Cor 9:13).

During the early stages of the development of Christianity, the Christian *koinonia* was practised by a group of people who had been in close fellowship with Jesus before his crucifixion and who taught others about Jesus. In their fellowship, they devoted themselves to

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[185] In the New Testament, we see *koinonia* as *being with* God, hence, we cannot have it with evil *(*1 Cor 10:20; 2 Cor 6:14; Eph 5:11; I Joh 1:6; Rev 18:4). This means *avoiding false teachers* (2 Joh 11; 1 Tim 5:22), *koinonia in the Gospel* (Phil 1:5; 1 Cor. 9:23; Phi 1:7; Philem 6), *koinonia in the sufferings of Christ* (Phi 3: 1; 1 Pet 4:13; Rev 1:9), and in the sufferings of disciples (2 Cor 1:7; Phi 4:14; Heb 10:35) so as to share his glory (I Peter 5:1). It also means *koinonia* with fellow Christians (2 Cor 8:23; Gal 2:9; Philem 17; 1 Joh 1:3 and 7; Acts 2:42), which includes sharing possessions *(*Acts 2:44; Rom 12:13; 15:26; 2 Cor 9:13; Phil 4:15; 1 Tim 6:18; Heb 13:16)*.* Finally, is koinonia is also seen within the *body and blood of Christ in the Lord's Supper* (I Cor 10: 16).

the apostles' teaching, the breaking of bread and prayers (Acts 2:42). In other words, the believers in Christ came together in love, faith, hope and encouragement for they perceived this to be the essence of *koinonia* (κοινωνία). They sold their goods and possessions and distributed them according to their needs (Act 2:45), indicating that the communal sharing of material goods was at the heart of their fellowship. Alston's (2002:39) depiction of the essence of the Early Christian *koinonia* is worth noting. First, the expansion of the Christian church did not occur with isolated individual experiences but within Christian *koinonia* where members shared an intense and transforming experience of Jesus Christ. It was in these fellowships that the Early Christian community interpreted their experiences in Christ in terms of social living, thereby, attracting others in their fellowship of sharing as they continued perpetuating it to future generation (Alston 2002:39).

Second, Early Christian *koinonia* was seen as a new act in the history of Israel (Alston 2002:39). The perception was that God did not change the mind and did not abandon the chosen people. God is said to have elected the people to make known the mystery, which had been hidden for ages, and the Gentiles as well as the Jews were included in the fellowship. In other words, the inclusivity encompasses all people who are now regarded as "members of God's one human family" and "joint heirs of God's unparalleled renovation of the world" (Alston 2002:39). Third, Alston (2002:39) sees the Christian *koinonia* as the context of interrelatedness in which men and women would grow and share in common faith, hope, charity and, ultimately, in a common life (Eph 4:13).

Alston (2002:41) is of view that the above points demonstrate a powerful testimony to the overwhelming reality of Christ's presence felt by these Christians of the Early Church through the power of the Holy Spirit. In other words, the act of sharing was seen as a gift that emanates from the Holy Spirit. The material manifestation came because these Christians experienced the love of Christ and understood themselves "as having been given to each other in order that they might live with and for each other as people of one heart and soul" (Alston 2002:41). This confirms Paul's words to the Philippians, "If you have any encouragement from being united with Christ, if any comfort from his love, if any fellowship with the Spirit, if any tenderness and compassion, then make my joy complete by being like-minded, having the same love, being one in spirit and purpose" (Phil 2:1-2). It is from this understanding that Cranfield (1999:81-83) concludes that *koinonia* consists of both spiritual and material sharing.

The view expressed by Cranfield and Alston receives a strong backing from the New Testament which urges believers to be devoted to one another (Rom 12:10), honour one another (Romans 12:10), live in harmony with one another (Rom 12:16; 1 Pet 3:8), and accept one another (Rom 15:7). Furthermore, they are to serve one another in love (Gal 5:13), be kind and compassionate to one another (Eph 4:32), admonish one another (Col 3:16), encourage one another (1 Thess 5:11; Heb 3:13), spur one another on toward love and good deeds (Heb 10:24) and love one another (1 Pet 1:22; 1 Joh 3:11, 23; 4:7, 11-12). Therefore, because of the socio-economic and spiritual dimensions of the Christian *koinonia,* the Agĩkũyũ Christians do not find it problematic to comprehend.

From the above, one can observe continuity as well as discontinuity between the Christian *koinonia* and *Ũtugi.* In terms of continuity, the idea of sharing of material resources can be established. As in the *Ũtugi* paradigm, Christian *koinonia* also involves material sharing. The Agĩkũyũ Christians see nothing new in sharing, for even before the Christian missionaries came to Kenya, the communal element of sharing resources to the vulnerable was already in practice in the form of *Ũtugi.* However, the Christian missionaries failed to appreciate this extraordinary element of *Ũtugi* and its capacity to enhance their pastoral ministry within the Kenyan context.[186] Another point of continuity between *Ũtugi* and the Christian *koinonia* is evident in *Ũtugi* principles that accentuate communality, accommodation, welcome, protection, love, care, and accepting one another in the society.

In fact, it should be noted that the above continuities enabled many Agĩkũyũs to continue practicing Christianity as part of their moral values (cf. Moila 2002a:50). In this case, Jesus is appreciated as the source of their *koinonia*[187] and he is perceived as a Greater Ancestor with whom they commune (Wachege 1992:46). Thus, the continuities are seen as "factors for cohesion" (Obengo 1997:61; cf. Kenyatta 1938:247; Bujo 1992:19; Wachege 1992:46). This means that the Agĩkũyũ Christians perceive Christ as a common Lord in the same way they regard ancestors as their common family guardians (read *Ũtugi* in the *Nyũmba*). Therefore, by accepting Jesus Christ as Lord, the Agĩkũyũ Christians understand that they are being made one in the fellowship of Christ (cf. Moila 2002a:50).[188]

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[186] This debate will be revisited in the next chapter.

[187] For Banana (1991:76), *koinonia* can also be described as a joint participation of communion with the Father, the Son and the Holy Spirit. It embraces the fellowship of Christians with a feeling of togetherness and a feeling of forming a family unit. This is where every member feels important and loved before others.

[188] This point can be qualified further on the basis that Christ demonstrated his expertise in developing relationships that Moltmann (1976:60) sees as the basic characteristic of his life. Indeed, Jews sharing a table-fellowship with publicans and the ostracized "was a sign of extreme intimacy and closeness" (Aulen 1976:50).

The continuity in the above two concepts should not surprise us because even the notion of the Christian *koinonia* as we know it today was enriched and moulded by the traditions and cultures of the Hebrews, Canaanites, Greeks, as well as the medieval Coptic and the Early Christian churches (Trainor 2001:44). For instance, a study of Aristotle's political philosophy reveals that there is continuity and discontinuity between Aristotle's understanding of *koinonia* and the Christian *koinonia* (Trainor 2001:44). In terms of continuity, Aristotle perceived *koinonia* from a relational, communal and political dimension and described it as "a form of collective harmony that looked towards the good or welfare of those who formed the city-state" (Trainor 2001:44). For Aristotle, every social institution, including the household, was to be infused with *koinonia* (κοινωνία). Before him, Plato and his predecessor Pythagoras considered "orderliness" as the basis for happiness, a notion contested by Aristotle who preferred *koinonia* (κοινωνία) as central to human happiness (Trainor 2001:44).

The discontinuity between Aristotle's and the Christian understanding of *koinonia* is clearly in the way Aristotle regarded *koinonia* as happiness of those in the city-state, which was composed of villages made up of households. Aristotle's understanding of *koinonia* is determined by location, which enabled communities to relate with each other. He also sees the authority structures within the *polis* as where "the good life" can be enjoyed (Trainor 2001:44). For him, this "good life" comes from *koinonia* (κοινωνία). In the same way, the discontinuities between *Ũtugi* and *koinonia* can be seen in several areas.

(a) *Membership by blood:* Unlike in the Christian *koinonia,* the people who practice *Ũtugi* are family members linked by *Riika* (age sets), *Mbarĩ* (families) and *Mũhĩrĩga* (clans). This means that they are related biologically or genetically. Paul (in Galatians 3:28) regards the Christian fellowship as a place where there should be no divisions because there are no more distinctions between Jews and Gentiles, between men and women, or between slaves and free people, for all are one in Christ. Moltmann (1976:61) affirms that Jesus' concept of hospitality, as demonstrated in his fellowship, did not only demand the removal of dividing walls and discriminative segregation but he also showed how to go about establishing an all-embracing solidarity among people.

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(b) *The new creation and grace:* As opposed to *Ũtugi,* the realism of the new *aeon,* the new state of being a Christian that comes due to the mediatory work of Christ, makes those who are in the Christian *koinonia* to be transformed and justified. They are new creation *(nova creatio)* in the new community. As we have seen above, those who are in the Christian *koinonia* have attained their membership not by birth,[189] as in the case of *Ũtugi,* but by virtue of dying and rising again with Christ in baptism and by receiving the Spirit. This is well articulated by Merril and Silva (2009:566) who assert that Jesus, in his immanence, has the power of healing and salvation which transform those in the Christian *koinonia* into new beings or new creation *(nova creatio).*[190]

As new beings in Christ, those within Christian *koinonia* feel that they can now be understood, accepted, respected and befriended, thereby, experiencing their "deepest and freest self-realisation through the exchange of life and mutual service" (Alston 2002:40; cf. Fuchs 2008:24). Paul L. Lehmann (1963:101) notes that the Christian *koinonia* is experienced as the gracious gift of God to people and in Christ; they are included in what "God is doing to renovate the world, a laboratory of humanization." He writes:

> Here is a laboratory of maturity in which, by the operative (real) presence and power of the Messiah-Redeemer in the midst of his people, and through them of all people, the will to power is broken and displaced by the power to will what God wills. The power to will what God wills is the power to be what man has been created and purposed to be. It is the power to be and to stay human, that is, to attain wholeness or maturity. For maturity is the full development in a human being of the power to be truly and fully himself in being related to others who also have the power to be truly and fully themselves. The Christian *koinonia* is the foretaste and the sign in the world that God has always been and is contemporaneously doing what it takes to make and to keep human life human. This is the will of God "as it was in the beginning, is now and ever shall be, world without end (Lehmann 1963:101).

Thus, unlike in *Ũtugi,* those who are in Christian *koinonia* are in the *family of God,* and this "comes after the new birth" (Merril and Silva 2009:566). This means that all those who are within the Christian *koinonia* are partakers of the new life in Christ and they are initiated into an accepting, forgiving and healing community. In other words, through Christ's death,

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[189] *Ũtugi* recognizes membership of the *Riika* and *Mbarĩ* as a requirement for membership of the Agĩkũyũ society, and anyone outside this is regarded as an outsider (cf. Muriuki 1974:124; Wachege 1992:17).

[190] The process of spiritual growth into Christ is known as *theosis* (deification, sanctification, transformation, growth in the Spirit). It is an effort that is geared towards "beholding the glory of God" to enable one to grow into the likeness of God and to be changed "from one degree of glory to another" (2 Cor 3:18). The images of saints in icons reflect the inner, transfigured nature of the person who has "put on Christ" (Gal 3:27), and who reflects that glory of God. For instance, in the Orthodox tradition, the models of growth in the spiritual life are the saints and ascetics, women and men whose whole purpose and direction in life was "to seek God." Some pursued this search alone in prayer and fasting (e.g. Anthony of Egypt and Mary of Egypt) while others such as Pachomius of Egypt and Theodosius of the Kievan caves preferred to live within the communal life of a monastery. Some others such as Juliana Ossorguin, John Chrysostom and Herman of Alaska lived with their families and in service to Christ in the world. Such people can be found in almost every church tradition and much can be learned from their spiritual struggles for humanity. Writings from the Soviet Union church during the communist period reveal that members demonstrated an ecumenical spirit as they suffered together and spiritually shared their existence with one another. They regarded this gesture as a *koinonia* in suffering and in mutual dependence on one another in God.

resurrection and his forgiveness, they are reconciled with God and set free from the bondage of sin. Thus, the isolation, alienation and loneliness, which emanate from sin and the sinner's separation from the fellowship of God, are now thrashed. This is because they are now saved from sin, death, meaninglessness and guilt. Consequently, they become securely grounded and prepared for the transcendence of the Kingdom of God, which is also eschatological. It also means that within *koinonia,* they can now participate corporatively in the eschatological realm of the new creation by Christ. As Alston (2002:40) says, they are in intimate relationship with God (1 Joh 1:3), with Jesus Christ (1 Joh 1:3; Phil 3:10), with the Spirit (Phil 2:1), with the mystery of God's plan hidden for ages (Eph 3:9), with the gospel (Phil 1:5), with the mission of the church (2 Cor 8:4) and with others in the church (Acts 2:42; 1 Joh 1:3).

(c) *The unconditional love:* The love shown in *Ũtugi* is different from that shown in the Christian *koinonia*. Unlike in *Ũtugi,* the love demonstrated in the Christian *koinonia* is based on the unconditional love exhibited by Jesus. Certainly, Christ's love for humanity was extended to the point that he became vulnerable at the cross. The love shown within *Ũtugi* does not make a person vulnerable as in the case of the Christ, who in his hospitality became vulnerable in order to incorporate humanity in his fellowship. In their spirituality, the Agĩkũyũ believe that God *(Ngai)* is not vulnerable and cannot be made vulnerable by humanity (cf. Long 2000:23-24). This also implies that the Agĩkũyũ God (*Ngai*) intervenes in life's events according to one's behaviours (actions) but continues to remain distant and unapproachable as a spiritual being for *Ngai* can only be reached through intermediaries. Therefore, the people believe that all they can do is passively accept God's will (cf. Long 2000:25; Fuchs 2008:24). In this case, the concept of God giving up power as in Jesus' crucifixion becomes difficult for the Agĩkũyũ to comprehend. Perhaps the cross becomes a stumbling block to them; if so, there is a need for the Christian *koinonia* to enrich *Ũtugi* in this area.

(d) *Morality and law:* The fear and shame perpetuated through some elements of *Ũtugi* constitute another area of discontinuity in the two concepts. The Agĩkũyũ morality and law is begged on the law that govern the common good of the society. In this sense, the taboos are used to control the society morality. For instance, the taboos entrenched in *Ũtugi* create fear and shame leading to secrecy and silence. These are bad elements in the fight against HIV and AIDS. Fear and shame associated with some elements of *Ũtugi* can be eliminated

through the enrichment found in Christ's fellowship. Christ's fellowship, as we have seen in theChristian hospitality, offers a space where one is free to give his or her story without fear or shame. The space provided by *koinonia* is very important to PLWHA especially in their support groups because it is seen as a safer space where one can make a confession, ask for forgiveness and one is assured of a better future (hope). Louw (2005:22) reminds us that the space created by soulfulness represents the warmth of God, which entails intimacy as the space of grace. Within the church and the congregation, this space is what *koinonia* (κοινωνία) entails.

From the discussion thus far, it is clear that the concepts of *Ũtugi* and the Christian *koinonia* form creative partners for dialogue even though tensions, paradoxes, discontinuities and continuities exist between them. It is also interesting that both can provide a good space for spiritual and socio-economic enhancement of the lives of PLWHA and their families. For this reason, it can be argued that since the foundation of the Christian hospitality is *koinonia, Ũtugi* could complement it in the fight against HIV and AIDS pandemic in the Kenyan context. In fact, the PLWHA and their families search for spiritual and socio-economic space where their deepest dreams and longing could be realized. Moreover, because of their experiences of suffering, loneliness, stigma and discrimination, they illustrate different aspects of deep-rooted longing for companionship, love, care expressed in authentic community, thereby revealing the universal quest for what they would like to call "a home." It is proposed that the image of the body is one, which can help us to understand the communal and systemic nature of this "authentic community" where companionship can be experienced.

4.9. *Body of Christ* and interconnectedness

The Christian hospitality has its location and place within the *body of Christ*. The communal interconnectedness of the Christian hospitality within the body of Christ is what links it to *Ũtugi*. In terms of continuity, both concepts demonstrate the spirit of communality, interconnectedness, interdependence, collective consciousness, group orientation, cooperation, and belonging. In other words, the oneness and the harmonious existence of entities, whose being is based on being-together-with-others (*Ũmũndũ* or personhood),* as seen in the *Ũtugi* paradigm (Wangiri 1999:72), resonate with the unity or the sense of oneness in the *body of Christ*. It is interesting to note that because the practice of *Ũtugi* is embedded in interconnectedness, interdependence, collective consciousness and

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a communalist worldview where the virtues of sharing, accommodation, inclusion, love, welcome and compassion are found, the Agĩkũyũ Christians easily understand the metaphor of a church as the *body of Christ*.

For instance, the Agĩkũyũ Christians also see Jesus Christ as joining the vertical and horizontal dimensions of their lives. What this means is that they see Jesus as uniting them through the Spirit to God (vertical) and to one another (horizontal). Moreover, because their culture sees a person as a person through others (*Mũndũ nĩ Mũndũ nĩ ũndũ wa andũ)* (cf. Mbiti 1969:108), in their Christian communal life, they might as well say "because we belong to Jesus Christ so we belong to each other."[191] Thus, they see continuity between the *body of Christ* and *Ũtugi* and interpret their relationship with Christ and one another as a means through which God cares for them and through which they grow together in faith, hope, and love. As in *Ũtugi* paradigms, it is within the *body of Christ* that Agĩkũyũ Christians experience their communal solidarity and augment their spiritual and mental well-being.

It is from the above understanding that the metaphor of the *body of Christ* is considered appropriate to fight the HIV and AIDs pandemic in Kenya. Olehile Buffel (2006:12) argues that the suffering that PLWHA have undergone and are undergoing would not have been so severe had the church urgently adapted the *body of Christ* metaphorical approach. Buffel's viewpoint receives strong affirmation from the WCC thus:

> As the *body of Christ*, the church is to be the place where God's healing love is experienced and shown forth and God's promise of abundant life is made freely available. In making tangible the love and care of Christ, the church offers a prophetic sign and foretaste of the kingdom. In its confession, proclamation, worship and service, the church is called to witness to the presence of Christ in the world (2004:43).

Metaphorically, Paul says that the church is like a single body, which has many parts and yet is one body though made of different parts (1 Cor 12:12, 25, 26, 27). Therefore, there is no division in the body, but it is made up of different parts, which all have concern for one another. Paul argues that if one part suffers, all other parts suffer with it, and if one part is praised, all other parts share in the happiness of that one part (cf. 1 Cor 12:26). It is, therefore, within this one body that the compassion of God should be expressed, personified and experienced. If the church responds to PLWHA with discrimination, stigmatization, condemnation or judgmentalism, as opposed to love, care and hospitality, the whole *body of Christ* becomes discriminated against, stigmatised and condemned. This is because each part

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[191] Such concepts are expressed in the Kenyan Anglican book of common prayers in statements such as "We are because Christ is and since Christ is therefore we are" (The Kenyan Anglican Modern Service Book of Common Prayer 2002:4; cf. Githiga 2009:66).

of the body has its role and all the parts constantly interact with one another for the life and continued existence of the whole body. As we have seen above, this social realm shows continuity between the *body of Christ* and *Ũtugi*. For with the *Ũtugi* paradigm, the community operates in unity through the *Riika* (age sets), *Mbarĩ* (families) and *Mihĩrĩga* (clans), thereby, members interact with one another in a hospitable way (cf. Mbiti 1969:108).

This unity is essential to the life of the church if she is to succeed in the fight against HIV and AIDS. According to Louw (1994:123), the HIV and AIDS pandemic in Africa have challenged the church and the wider society to work as a team, for the pandemic has become a communal and systemic problem. This is true because, from a theological point of view, even if only one person or one family member has the HI virus, the whole *body* is infected and affected and this justifies that the *body of Christ* has HIV and AIDS. If the church fails to address the challenge posed by the HIV and AIDS pandemic, she is not true to her calling as the *body of Christ* (WCC 2004:43). Therefore, the church, as the *body of Christ,* is called to the fight against the HIV and AIDS pandemic.

Fulata Moyo (1998:102) argues that if the church is not just a "structure with the symbol of the cross but the body of the compassionate and holy Christ, then it should take up the HIV and AIDS pandemic challenge and make the difference as it brings hope where hope was gone. The church has to continue the work the *Master* began in this world of toil and snare." Moyo's call for the church as the *body of Christ* to respond to the challenge posed by the HIV and AIDS pandemic echoes Oduyoye (2004:5), who urges the church to "respond with Christlikeness" to the contemporary situation of the HIV and AIDS pandemic. For Oduyoye (2004:5), the "people of faith who belong to the community of Jesus Christ" have no choice but to adhere to this call as Christ requires us to do, "if we truly claim to be the *body of Christ*." As Jesus acknowledged and identified with those who were suffering during his time, so the church is called as the *body of Christ* to acknowledge and accept those who are suffering in our society. Moreover, because the Christian hospitality is determined by compassion, the church as the *body of Christ* should stand with the PLWHA, the poor and the marginalized, for, by so doing, they will be standing with them against all "rejection and despairs" (WCC 2004:44) offering hope to their lives.

 In fact, this task is not an option but it is the church's vocation and calling. Nicolson (1995:35) affirms that Jesus had a special concern for the poor and the marginalized and this

provides a model for us as we care to the PLWHA and their families. Further, Christian worship should be concerned about those who have been pushed aside, for unless the church shows concern for PLWHA, the integrity of her worship and witness is called into question. Evangelism, prayers and other interior aspects of church life must not exclude practical concern for those in need around us (Nicolson 1995:35). Moreover, because the church is the *body of Christ* who died for all and who suffered for humanity, then, the church has no alternative but to include all humanity in her programme. Therefore, when the church welcomes PLWHA and includes them in her programme, she can be regarded as one *body of Christ*. Seen from this angle, the WCC states:

> The church is called to stand with persons who are affected by *HIV and AIDS*. This "standing with," this service of the church on behalf of those who suffer, will take different form in each situation depending on the needs and possibilities. In some cases the church will need to work for better medical care for affected persons; in other cases, to work for improved counselling services, or for the defence of basic human right, or to ensure that accurate factual information is available within the church and to the general public or to ensure that a climate of understanding and compassion prevail. Most of the time all of these efforts and more are needed (2004:44).

Dube (2004a:40) suggests that as the *body of Christ,* the church should make connections between power, gender relations, and HIV and AIDS within her own infected body. She notes that because there are many conflicting models for being a church, there is need to concentrate on what is common. Creed is the common denominator, for we confess "one, holy, catholic and apostolic" church (Dube 2004a:40). For Dube, these statements of creed are made in faith and are integral components of the confession of the *Triune* God:

> As the church acquires it existence through the activity of Christ, the marks of the church are, in the first instance, marks of Christ's activity. Unity of the church lies in Christ's unifying activity. Holiness is not initially ours but is the holiness of Christ who acts on sinners. Catholic is really about the limitless lordship of Christ. Apostolicity refers to Christ's mission in the spirit (2004a:40).

The above statement indicates the new creation of all in Christ but it is also a statement of action. The issues raised by Dube are valid because if the church is truly one *body of Christ*, then the whole church has HIV and AIDS. This view is also expressed by Denise Ackermann (2001:5) who declares that the church as the *body of Christ* has HIV and AIDS. For this reason, the church should start seeing herself as PLWHA, who need to relate to one another, because what affects any of her members should be a concern for the whole church. Similarly, Nicolson writes:

> In the church all alike are in need of forgiveness, love and acceptance. We are sacraments and signs of God's love to one another. Within the church it is right that people with (*HIV*

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and) AIDS are welcomed, not shunned; embraced, not held at arm's length. Fear of (*HIV and*) AIDS and consequent rejection of those (*living with HIV and*) AIDS demand that the church lives as a sign to the world, of love casting out fear (1995:54).

As we have already seen, the unity claimed by the *body of Christ* metaphor shows continuity with the communalistic life practiced in *Ũtugi*. Therefore, in both concepts, there is no "them" living with HIV and AIDS and there is no "us" not living with HIV and AIDS, rather, it is "WE" living with HIV and AIDS. Such understanding is clearly seen in *Ũtugi* in which, "Whatever happens to the individual happens to the whole group, and whatever happens to the whole group happens to the individual" (Mbiti 1969:108). The principle of *Ũtugi,* like the *body of Christ* metaphor, can enable us enhance human relationships, thereby, increasing human value and trust of as well as dignity to the PLWHA and their families. Therefore, the Agĩkũyũ Christians will find that the *Ũtugi* paradigm relates well to the *body of Christ* metaphor, for it helps them understand that they are all infected and affected by the HIV and AIDS pandemic. Such inclusive models as the *Ũtugi* paradigm and the *body of Christ* metaphor are opposed to the exclusive treatment usually given to the PLWHA and their families. For the Agĩkũyũ Christians in the context of HIV and AIDS pandemic, this inclusiveness of "others" in the "*body of Christ*" is a reminder of the way of grace, hence:

If we are catholic, we are in solidarity (with the others) because we are connected, in communion, with those who are suffering and who experience fear of rejection, poverty and death. If we are apostolic, we stand in continuity with the church in its infancy and we strive to live as Ignatius of Antioch… in the manner of Apostle (Dube 2004a:41).

Furthermore, within the realm of the *Ũtugi* paradigm, this inclusiveness of "others" becomes a reminder of the unity and patterns of embodiment with self and others. The *Ũtugi* paradigm can enable the Agĩkũyũ Christians to embrace those who are suffering and PLWHA, thus, showing compassion, care and love. For as a cultural phenomenon, *Ũtugi* principles dictate that we bear one another's burden just as Christians are obliged to bear the burden of another (Gal 6). That pursuit of compassion, care and love compels Dube to write:

Our social reality is an embodied reality. Our bodies are more than skin, bone and flesh. Our bodies encompass the totality of our human experience, our thoughts, our emotions, our needs and memories, our ability to imagine and to dream, our experiences of pain, pleasure, power and difference, as well as our beliefs and our hopes. Our bodies are in fact the intricate tracery of all that is ourselves. Bodily praxis is the agent and the vehicle of divine reality and the faith practices of the *body of Christ* are sacraments of suffering and redemption (2004a:43).

Apparently, the bodies of PLWHA are at the centre of a political social and religious struggle, for they have been the subject of ridicule, envy, discrimination, abuse and stigma, among other prejudices. This really affects the *body of Christ* and, therefore, all of us are

affected. Through the enrichment of the elements of the *body of Christ* metaphor, the *Ũtugi* paradigm can help the Agĩkũyũ Christians to embrace the PLWHA and their families with unconditional love. For to be a follower of Christ means to be taken up into God's hospitality, which focuses on others in the shape of a radical welcome and inclusive community symbolized by an open table-fellowship of oneness. As in the parable of the Great Banquet, the church as the *body of Christ* can engage with PLWHA and their families.

As we have already seen, the Christian hospitality is at the heart of every Christian church, for as a "Banquet community", they are to offer hospitality without grudges (1 Pet 4:9), in love *(Agápē)* (Heb 13:1; 1 Pet 4:8; cf. Rom 12:9) and as a gift of the Holy Spirit (see *charisma* in 1 Pet 4:10-11).[192] This distinctiveness locates the Christian hospitality in the *body of Christ.* For this reason, the church should enthusiastically involve herself in the lives of the PLWHA, as a host extending invitation to the outcasts. As the poor, crippled, lame, and blind, who were previously marginalized in the wider society, were invited to the banquet, so the church is to invite the PLWHA and their families. Definitely, because of the way many have been stigmatised and discriminated against, they may reject the invitation and the offer of hospitality, but the church is obliged to encourage, support, care for, protect and make them feel that they belong.

Through the act of hospitality, the church, as *the body of Christ,* is to show understanding, offer compassion, hope, acceptance, reconciliation, comfort, empathy and God's message of salvation for the PLWHA and their families if they are to find meaning within their existential experiences. As Bretherton reminds us:

> The invitation is not to revelry or idolatry, but to the messianic feast that has already begun. Like Jesus, the speech and action of the church is simultaneously centrifugal - they go out into the world - and centripetal - the world is drawn into participating in the banquet. Thus, the church, like Jesus, neither separates itself from the world nor becomes assimilated to the world (2006:134).

Of course, the above practice is not alien to the life of the church even though the issue of the HIV and AIDS pandemic is a new phenomenon. As the sharing of food in *Ũtugi*, the sharing of food and drink in the *body of Christ* is perhaps the most vivid example of the redemptive

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[192] While *agápē* is the ultimate motive of hospitality it should be noted that there are other motives like charismatic. This is because hospitality is a charism, an eschatological motive. The Christians are strangers and pilgrims going through affliction; a metaphysical motive, the hope of entertaining angels unawares (Heb 13:2); and the missionary motive of hospitality is aiding itinerant evangelists (cf. Matt 10:11ff.; Acts 10:6, 18, 32; Phlm 22; 3 Joh 8), which in the case of genuine messengers plays a big part in the spread of the gospel and may lead to the baptism of whole families (cf. Acts 16:15, 33; Rom 16:4-5).

space of hospitality. In God's encompassing banquet, no one can claim special entitlement whether rich or poor, righteous or sinful, women or men, sick or healthy; r all are welcomed. This is because all are incorporated into the *body of Christ* through baptism and, therefore, they become one in Christ. They are enjoined to do the will of God, which includes caring for those who are vulnerable. Therefore, the challenge facing the African church as the *body of Christ* is how to care for the PLWHA and their families without moralising, ostracising, stigmatising and maltreating them. For such vices are against what it means to treat others as God wills. The church, which professes her faith in Christ, should, as the *body of Christ,* be hospitable to those who are marginalized or excluded because of the nature of their disease. We now turn to the discontinuities in the two concepts.

(a) The body as socio-political entity: It should be noted that the phrase "*the body of Christ*" was first coined by Paul in his New Testament writings (Schweizer 1976:1036-1041). Before then, the term, "body", was already in use in the Greco-Roman world and it referred to a community. Eduard Schweizer (1976:1036) affirms that Aristotle used the term "body" to refer to the state. In Aristotle's view, persons constitute a *body* through residence in a common *pólis* [193] but Philo, Seneca, Plutarch, Dionysius of Halicarnassus, and others refer to *body* as the social units of state and cosmos (Schweizer 1976:1036). Therefore, in the term *"body*", we see discontinuity between the social, corporate expression of the "*body*" as it was used in Greco-Roman traditions and Paul's use of the term to refer to the church, i.e. "*the body of Christ*" (Schweizer 1976:1036). While the Greco-Roman concept of *body* refers to a socio-political or cosmic entity, for Paul, the term simply refers to the church and it is connected with Eucharistic celebrations. [194] Goppelt (1982:146) notes that the Eucharistic expression, "*The bread that we break, is it not a sharing in the body of Christ?*" (1 Cor 10:16), is instantaneously followed by another ecclesiological expression, "because there is

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[193] Accoding to Bromiley *at el* (1985.536), the Greek word *pólis* simply means a fortified settlement. It was the ruling center in a town and later became a wider area ruled from it. He states that the word *polítēs* means the one who shares in the *pólis*, i.e., the "citizen" who have an active and passive privilege *(Bromiley at el* 1985.536). Therefore the word *politeúō* means "to be a citizen," or "to live or act as such," "to share in government," or "to rule," "to prosecute state business" *(Bromiley at el* 1985.536). It may also mean: "to have business dealings" or in case of the the weaker; "to behave" (Bromiley *at el* 1985.536). It is noted that with the establishment of the *pólis* culture was higly developed in Greece. It is believed that this took place through free union endowed by Zeus with righteousness and piety. As such spiritual value was developed and culture was achieved. This was possible because of freedom under the authority of laws that protected the common welfare. It was understood that the freedom of the *pólis* was in contrast with the barbarian tyranny. In *pólis* the Individuals were said to have found a true self-development in terms of the common national life. The religious awe encircles state law; the order of state had a religious sanction. The *pólis* was hence a sacral organization and its origin was perceived to be with the supreme God, who was believed to be *polioúchos*, the protector of the state. Certainly, Stoics introduced these concepts and Alexander gave it a political shape in a world kingdom, although for the Stoics it was an ideal fellowship of the wise that did not need legal or social institutions. In the Stoics understanding the term *pólis* was for the cosmos itself as a totality that was governed by a single divine law. As time goes, the concept lost its vitality and fell victim to philosophical spiritualizing *(*see Bromiley at el 1985.536).

[194] It is important to note that various scholars have traced the origins of this image to at least nine different backgrounds. For instance, Gosnell L. O. R. Yorke in his 1991 book, "*The Church as the Body of Christ in the Pauline Corpus: A Re-examination.* Lanham: University Press, describes nine different interpretations of "the body" and "the body of Christ metaphor."

one bread we who are many are one body" (1 Cor 10:17). From the *Ũtugi* perspective, the *"body"* has the connotation of communal and social units and has nothing to do with ecclesiology or the Eucharist as "the body of Christ" in Pauline theology.

(b) *Membership in the body:* Again, unlike in *Ũtugi,* the term the "*body of Christ*" is used by Paul in his baptismal theology. Schnackenburg (1973:207) suggests that Paul's baptismal theology was the basis for applying the concept of "body" to the church. Paul claims that all believers form one "body", and that "we were all baptized into one body... and we were all made to drink of one Spirit" (1 Cor 12:12-13). Schnackenburg (1973:207) argues that it is through baptism that a person is incorporated into Christ himself and into his body, the church. The Spirit is given, therefore, to those who are baptized into Christ, linking those baptized with Christ and with one another. As we have already seen, those who practice *Ũtugi* are members of the community by virtue of being born there (biological dimension). The *Ũtugi* paradigm operates within the social units (body) of the Agĩkũyũ, which consist of *Riika* (age set), *Mbarĩ* (families) and the nine *Mihĩrĩga* (clans).

In other words, Paul's understanding of the church as "*the body of Christ*" is simply not a body of persons who share one's *Riika (*age set), *Mbarĩ* (families) or *Mũhĩrĩga* (clan) as in the case of *Ũtugi.* Rather, those are incorporated into the body by accepting to die and to rise in Christ in order to become new beings are subject to Jesus' Lordship. It can also be seen as the *body* of those who have died and risen in Christ and have received the Spirit as they become new beings in Christ. Unlike in *Ũtugi,* the "*body of Christ*" is also the eschatological community of the Spirit, the new creation, which exists already in the present world (the church) and anticipates perfection in the age come. This implies that, unlike in *Ũtugi,* those who are within "*the body of Christ*" are incorporated into Christ and they share his destiny. For this reason, what God has done in and through Christ's redemptive death and resurrection is theirs for they have "died to the law through the *body of Christ.*" It belongs to them because they have been "raised from the dead" (Rom 7:4). It also means that those who are in "*the body of Christ*" live in the Spirit of God a life of "love, joy, peace, patience, kindness, generosity, faithfulness, gentleness, and self-control" (Gal 5:22), which motivates them to engage in hospitality. In fact, this is what makes "*the body of Christ*" an appropriate metaphor for the church ready to engage in the fight against the HIV and AIDS pandemic.

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4.10. Solidarity and mutual love

One of the notable key elements of the Christian hospitality is solidarity as well as mutual love. These two principles also link the Christian hospitality with *Ũtugi*. Grogan (1998:159) defines solidarity in Christian hospitality as "an entire union of interests and responsibilities in a group", involving communal "interests, objectives or standards." This implies that through the solidarity found in the Christian hospitality, humanity develops a sense of belonging, interconnectedness and protection as they share a common life with common concerns and responsibilities, so that the actions of one may deeply affect others for good or for worse. Moltmann explains that:

> Solidarity as a common struggle unites people who are alike in being oppressed (both the victim and perpetrator). Solidarity as community in the depths unites people who are alike in their suffering. But solidarity in hopeful love goes beyond these limits. Where it exists it turns the unloved into people who are beloved, the repressed into interesting partners and disagreeable enemies into the loveliest of friends (1981:111-112).

This definition is supported by Ada Maria Isasi-Diaz's (1998:32) assertion that "solidarity has to do with understanding the interconnections that exist between oppression and privilege, between the rich and the poor, the oppressed and the oppressors." The understanding of solidarity by Grogan, Moltmann and Isasi-Diaz is in harmony with the practice of *Ũtugi,* which stresses interconnections between one and the others in the family, clan and entire community. Again, this is captured by the saying, *Mũndũ nĩ Mũndũ nĩ ũndũ wa andũ,* i.e. a person is a person through others (cf. Mbiti 1969:108; Van Der Walt 1988:9; Shutte 1993:46). In terms of continuity, solidarity in both the Christian hospitality and *Ũtugi,* amplifies the notion of the common good and holds that, for the community to prosper, it is essential to act in favour of the well-being of all, particularly, those who are most poor and marginalized from spiritual, socio-economic and political perspectives. In both concepts, solidarity is seen as a virtue that entails understanding how humans relate to one another spiritually, socially, politically, and economically. Holland and Henriot (1983:4) claim that solidarity can only be achieved if one is attentive to the voices of the marginalized and the vulnerable who have been systematically ignored.

The same concern is expressed by Jon Sobrino (1994:90-91) who states that the Christian solidarity must begin with an acknowledgment of one's own needs to be evangelized by the vulnerable. For Sobrino (1994:90), listening to the vulnerable enables a person to cultivate an "awareness of the need to forge new ties with the oppressed and to nurture a dialogical, mutually beneficial and relationship with them." Sobrino (1994:90) states that, solidarity

creates "awareness of the actual, often sinful, state of the world." It involves developing a sense of moral concern about the context, thereby, developing some understanding of what moral patterns of relationship should replace the existent structures that dehumanise others.[195] In other words, solidarity demands that the structures of society be reformed in such a way that the situation of interdependence is transformed into a morally positive relationship that respects the human dignity of all.[196]

Therefore, solidarity with the PLWHA and their families (those at the margins) can teach us several things.[197] This is because the PLWHA remind us of our mutual needs for one another as a constitutive dimension of our humanity. They also remind us of our humanness and the love we should extend to them, for our humanity is connected with our fully embodied relational agency. Roberto Goizueta affirms that:

> In order to truly serve the neighbour (that) love must be born out of an identification or solidarity with the neighbour in his or her joys, suffering and struggles. The call to solidarity with is a call to affirm in one's life the interdependence and unity of humankind before God; what happens to one happens to all." Solidarity identifies us with one another, as we honour each "other" as embodied agents, even while connected by the bonds of our common humanity (1993:5).

From the above, it is clear that solidarity can enable the faith community to commit themselves to the issues of the HIV and AIDS pandemic. However, the word solidarity is not a biblical word, even though the concept of solidarity is well expressed in the New and Old Testaments. This view is supported by Albert Nolan (1980:58) who says that Jesus lived in group solidarity as was the custom at that time. As in the practice of *Ũtugi* among the Agĩkũyũ:

> [The Jews] lived together as one corporate being… the extended family including all one's relative. Ties of blood (one's own flesh and blood) and of marriage (one flesh) were taken seriously indeed. Not only were all members of the family regarded as brothers, sisters, mothers and fathers to one another but they identified themselves with one

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[195] According to the *Solicitudo Rei Socialis,* a major document of the *Catholic Social Teaching,* the concept of solidarity with the poor and marginalized is identified in No. 36, 38, 39 as a constitutive element of the Gospel, which is essential for lasting peace. The document states that, "solidarity... is not a feeling of vague compassion or shallow distress at the misfortunes of so many people, both near and far." On the contrary, solidarity is a "firm and persevering determination to commit oneself to the common good; that is to say, to the good of all and of each individual, because we are all really responsible for all. A world divided into blocs in which there is exploitation, can only be a world structured in sin. Those structures of sin are rooted in sins committed by individual persons, who introduced these structures and reinforced them again and again. One can blame selfishness, short-sightedness, mistaken political decisions, and imprudent economic decisions; at the root of the evils that afflict the world there is, in one way or another sin." Furthermore, solidarity as a Christian virtue, seeks to go beyond "itself to total gratuity, forgiveness, and reconciliation and leads to a new vision of the unity of humankind, a reflection of God's triune intimate life." Thus, solidarity helps us to see the "other" whether "a person, people or nation, not just as some kind of instrument, with a work capacity and physical strength to be exploited at low cost and then discarded when no longer useful, but as our 'neighbor', a 'helper' to be made a sharer on a par with ourselves in the banquet of life to which all are equally invited by God." The document affirms that interdependence must be "transformed into solidarity, grounded on the principle that the goods of creation are meant for all. Avoiding every type of imperialism, the stronger nations must feel responsible for the other nations, based on the equality of all peoples and with respect for the differences" (see John Paul II, *Sollicitudo Rei socialis,* No. 36, 38, 39) in http://www.vatican.va/holy_father/ john_paul_ii/encyclicals/documents/hf_jp-ii_enc_sollicitudo-rei-socialis_en.html - (24 July 2010).

[196] See also John Paul II, *Sollicitudo Rei socialis* no. 17, http://www.vatican.va/holy_father/ john_paul_ii/encyclicals/documents/hf_jp-ii_enc_sollicitudo-rei-socialis_en.html - (24 July 2010).

[197] For more reading on various aspect of solidarity, see Jon Sobribo's book (1987) *Jesus in Latin America* by Mary Knoll: Orbis Books.

> another. The harm done to one member of the family was felt by all. The shame of one affected all (Nolan 1980:58).

Solidarity in *Ũtugi,* like Jewish solidarity described above, enhances togetherness, willingness to give, help, assist and care for one another within the *Riika* (age set), *Mbarĩ* (families) and *Mũhĩrĩga* (clans)*.* As in *Ũtugi*, Jewish solidarity is deep-rooted in the people's social, cultural, economic and spiritual lives, which enabled them to cater for the sick and the poor (Wittenburg 1992:76). Social units such as *sebet/matteh* (tribe), the *mispahah* (clan) and the *bet'ab* (father's house or household) help us to understand the social context of Jewish family solidarity. In fact, it was in the *bet' ab* (household) that solidarity was lived and practised. Furthermore, as a socio-economic and political phenomenon, kinship, marriage, common residence, common occupation or covenant dictated community solidarity. Solidarity and mutual love were particularly evident in Levirate marriage, in which a close relative cared for the deceased.[198]

It is interesting to note that even resident foreigners were often associated with a particular family and if they were circumcised, they were allowed to eat the Passover (Ex 12:43-49; Deut 10:18-19). This show that solidarity in the Jewish community was not only seen in the extended families who lived together as a corporate entity but it was extended to others such as one's friends, fellow-traders, and social group as well as within the "confines of the elitist 'sect' like the Pharisees or Essenes among others" (Nolan 1980:60). Vidal notes that one of the reasons for solidarity is:

> To make people, through social institutions and structures, come together not only as a group of free and equal subjects for the sake of self-regarding exchange, but also from a certain sympathy and out of the real desire to collaborate in order to satisfy the interest of all group… solidarity radicalises the value of sociability: this is not only the fruit of the contact between free and equal subjects having a value in themselves… but also the result of the ethical consideration of all subjects as bearers of mutual dependence that make them feel themselves to be co-sharers in the situation of all (1997:108-109).

The statement above indicates that the principles of solidarity are to be understood as those things, which challenge the exploitation and stigmatisation of the vulnerable, in our case, the PLWHA and their families.

The communal solidarity expressed in *Ũtugi* in which a person could have hundreds of brothers, fathers, mothers, wives (cf. Mbiti 1969:147) is a clear indication of continuity between *Ũtugi* and Jewish solidarity. As in the Agĩkũyũ culture, the Jews see a person as

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[198] Such care for widows can also be seen in some African communities where widows are protected. The Kamba, Taveta, Taita and Luo among other communities in Kenya still practise the levirate marriage (cf. Kawango1990:4).

having many fathers, brothers or sisters. Grogan (1998:161) claims that because of solidarity in the extended families, the terms "father and son" could refer to any in the line of direct descent (Num 1:10; Jos 21:4, 5, 10), and the word "seed" could refer not only to one's children but to one's "kinsmen including collateral connections" (cf. Est 10:3). Grogan (1998:161) observes that a "brother" was any "male relative (Gen 16:12; Num 25:6), a member of the same tribe" (Num 8:23-26; Judg 18:2, 8) or nation (2 Sa 2:27; Je 34:9ff) and it could include "another person" (Gen 9:5). Additionally, the terms "household", "father's house", "clan" and "tribe" were used to identify group solidarity since interrelatedness was a characteristic of locational solidarity (Grogan 1998:161).

As already seen, during the pre-monarchical period, the social-economic and political life of Israelites was based on communal solidarity (Wittenberg 1992:75). The system ensured that an equal distribution of resources was put in place and this includes family associations (West 1999:15). Of importance in Jewish solidarity is the protection of land as an inheritance *(nahala)*, which was handed over from one generation to the next in accordance with the law of inheritance. The inheritance law protected individual rights for it gave security and prevented permanent alienation from their land (Davies 1989:351; Wright 1990:63; Wittenburg 1992:76). The above shows that, in Jewish culture, the more fortunate members of the society had to be responsible for the weaker ones and readily share their passions with them. The Christian solidarity was influenced by Jewish solidarity although Jesus reconfigured it to include the weak, the sick and the poor. Therefore, this links the Christian solidarity and *Ũtugi* for both recognise the liberation of the weak, the sick and the poor, and restoration of their dignity. In *Ũtugi,* those who are poor, weak and vulnerable are accounted for within a system of communal solidarity.

Thus, solidarity with the vulnerable is a call to every Christian. Gregory the Great reminds us that, "it is the duty of every man (sic), the compelling duty of Christians, to calculate what is superfluous by the measure of the needs of others and to see to it that the administration and distribution of created goods be utilised for the advantage of all" (Vatican 11, *Gaudium et spe,* No. 69 as cited by Anidjar 2002a:4; cf. Anidjar 2002b:101). This understanding is important to our theology of solidarity, mutuality and protection in the context of the HIV and AIDS pandemic as it can help us to address the issues of policies and imbalance, which continue to mar the fight against HIV and AIDS. Again, it can also help us to fight prejudices

and superstitious beliefs, which surround the PLWHA and their families; for PLWHA and their families need solidarity and mutual love.

In the Old Testament, to love your neighbour as yourself is to experience group solidarity, but the New Testament introduced a radical approach following Jesus' re-definition of one's neighbour to include even one's enemies (Nolan 1980:60). The New Testament depicts Jesus as the man for others, who views his way of life as inextricably tied to other human beings in such a way that his own person is a mystery apart from others (Nolan 1980:60). This view agrees with Cone (1969:38) who sees Jesus as the "man for others" and as one who is God-Self coming into the distressing reality of humanity to break off the shackles of slavery to liberate people from the power and the principalities of this world. The commandments to love God with all one's heart and to love one's neighbour as oneself are the heart and soul of the Christian principles (Mk 12:30). Jesus offers himself as the model of this all-embracing love as he declared, "... love one another as I have loved you" (Joh 15:12). These commands point out the path toward true human fulfilment and happiness and they are not arbitrary limits on human freedom (Ackermann *et al* 1991:65).

For Ackermann *et al* (1991:65), only the active love of God and neighbour can make the fullness of community to happen. The Christians look forward in hope to a true communion among all persons with one another and with God. Soelle relates an old Jewish story which captures the notion of love for one another:

> An old rabbi once asked his students how one could recognise the time when night ends and day begins. "Is it when, from a great distance, you can tell a dog from a sheep?" One student asked "No,' said the rabbi. "Is it when, from a great distance, you can tell a date palm from a fig tree?" another student asked. "No," said the rabbi. "Then when is it?" the student asked. "*It is when you look into the face of any human creature and see your brother or your sister there*. Until then, night is still with us" (Soelle 1984:41).

It is true many people are still at night where they see others not as brothers and sister but as things. It is after the night ends and the day begins that our eyes should refocus on what connects us as opposed to what divides us, for this is the spiritual challenge of solidarity. Perhaps if *Ũtugi* can complement the Christian solidarity it can enable the church and the community to shift from a position of dark night to a position of daylight, thereby, demonstrating the love of the *kingdom of God* to the PLWHA and their families.

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Sobrino (1987: xii) explains that Jesus had joined the commandment of love of God with that of love of neighbour, whereby, the love of neighbours is fulfilled in works as in Mark 12:29-31; Matthew 22:38-40; and Luke 10:25-37. However, in spite of this, "the absolute primacy of the relationship of the human being to God" is maintained (Sobrino 1987: xii). Sobrino (1987: xii) sees both the personal and social aspects of conversion of Jesus' gospel as a radical "interior" transformation from a "situation of sin (self-sufficiency with regard to God and selfishness with regard to neighbour) to a filial attitude toward God and brotherly or sisterly attitude towards" humanity. It is a praxis commitment to justice for it is a dedication towards enhancement and transformation of socio-economic and political structures in favour of the vulnerable (Sobrino 1987:90).

Sobrino (1987: xii) claims that only in such kind of solidarity and protection where there is "unity of interior conversion and Christian commitment to new structures of justice would the kingdom of God, as reconciliation, peace, love, be a reality in the world." He makes clear that Jesus' promotion of solidarity and protection among humanity is not generic and mere declaratory fashion, but it is a reality of concrete solidarity with his people (Sobrino 1987:91). Jesus was categorical in his powerful act and attitudes of solidarity with the vulnerable. He illustrated what he himself understood as solidarity when defended prostitutes, conversed with lepers and those who were regarded as ritually impure, praised the overlooked Samaritans and permitted the isolated women to follow him. This constructive and affirmative action of Jesus was premeditated to create a new collective awareness of what solidarity, mutuality, protection and belongingness mean. His inclusive approach demonstrated the meaning of "the kingdom of God at hand"[199] and its effect on humanity.

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[199] Various scholars have debated and differed on the nature of the kingdom of God. While it is beyond the scope of this study to engage in this debate, it is important to explore the characteristics of the kingdom of God as seen by Jesus. Jesus says that the kingdom of God is for the poor and describes the poor in two ways. First, he says that the poor are sinners, publicans, prostitutes (Mk 2:6; Matt 11:19; 21:32; Lk 15:1), the simple (Matt 11:25), the little (Mk 9:2; Matt 10:42; 18:10, 14), the least (Matt 25:40-45) and those who work in despised professions (Matt 21:31; Lk 18:11). Sobrino (1987:90) asserts that the poor are the vilified, persons of low repute and esteem, the uncultured and ignorant, "those who religious ignorance and moral behaviour stood in the way of their access to salvation, according to the convictions of the time." Additionally, the poor are society's despised, those lesser than others and for whom the prevailing piety proclaims not hope but condemnation (Sobrino 1987:90). Second, the poor are those in need as in Isaiah 61:1. They include those who suffer need, the hungry and thirsty, the naked, the foreigner, the sick and imprisoned, those who weep and those weighed down by burdens. In other words, they are those who suffer some type of real oppression. Sobrino (1987:90) affirms that the poor, to whom the good news of the kingdom is addressed, find themselves in some kind of misery and see themselves weighed down by double burden: "They have to bear public contempt from men and, in addition, the hopelessness of ever gaining God's salvation." Jesus' understanding of the kingdom of God at hand, and not for the just (a piece of irony directed against the Pharisees, who set themselves forth as the just), suggests that the kingdom is inclusive of the vulnerable. Sobrino (1987:91) argues that this interpretation is a scandal (Matt 11:6) - a scandal that God would give hope to those who are deprived by their society. It is also a scandal because God is seen restoring the dignity of those from whom the religious and sociopolitical society have wrenched it away. Furthermore, it is a scandal because God had provided unconditional love and mercy. In other words, Jesus' polemic against the Pharisees shows the importance of this scandal for it shows the inclusivity of the "kingdom of God at hand." This is the reason why the Pharisees refused to accept this type of kingdom, for to them, it could shatter the seeming equilibrium and justice of the law. They criticized Jesus for eating with sinners and Publicans (Mk 2:15-17), for gathering a handful of grain on the Sabbath (Mk 2:23-28), and for eating without washing his hands (Mk 7:1-7). Thus, it is clear that it is not legal prescriptions that are at stake, but God's inclusivity and solidarity with the vulnerable. Sobrino (1987:90) argues that what can be drawn from this "manner of the kingdom's approach is that persons ought to correspond to it by taking the defense of the poor and acting in solidarity with them. This is the "place to

According to Sobrino (1987:91), Jesus persuasively approached the marginalized and the vulnerable not only as individuals but also in their community, "re-creating them as a social group through the materiality of the dining table." Therefore, it is not difficult to see why the members of the Early Church in Jerusalem attempted such gestures when they distributed their possessions to the needy person among them (Acts 4:32-34; 2:44).

Seen from this angle, it can be said that if *Ũtugi* complements Christian hospitality to help the faith community to "pool together" their resources for the sake of the PLWHA and their families, it can be seen as obeying God's will in the service of others (Mk 10:42-45). In the Kenyan context, perhaps, one can argue that as Jesus demonstrated solidarity with the vulnerable, so should the faith community give itself for the common good of providing a life of abundance for PLWHA and their families (cf. John 10:10). In other words, if *Ũtugi* can be used by the Kenyan churches as a tool for pastoral care to the PLWHA and their families, then it can be interpreted as being in solidarity with and doing good work to the underprivileged, marginalized and vulnerable, a concept recommended in James 2:22 as faith and work.

In a real sense, faith and good works (James 2:22) are crucial for the faith community in the fight against the HIV and AIDS pandemic. The untold torment and indignity experienced by the people living with the HIV and AIDS (as we have seen above) should be reason enough for the Kenyan church to adopt *Ũtugi* to complement the Christian hospitality in her ministry. The suffering that Africa South of Equatorial Forest has undergone is contrary to the purpose and the will of God. As Karl Rahner says, "only in having unconditional solidarity with the condemned of the earth could we dare to speak about the love of God for us" (cited in Gillan 1982:3). Moreover, since the church is called to declare love, peace and justice to the world, she should incorporate solidarity in her programme and earnestly work for prosperity of all. By so doing, she will be obeying the will and the purpose of God.

According to Boff (1993:72), the marginalized person is the by-product of the system in which we live and for which we are all responsible. They are "impoverished, plundered, robbed and defrauded of the fruit of (their) labour and dignity" (Boff 1993:73). In fact, such impoverishment generates an appeal to Christian love, not simply to "relieve the demeaning

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live" when the kingdom is at hand." This understanding can help the church to enhance her solidarity with PLWHA and their families in Africa and, in Kenya, in particular.

burden of poverty, but to create conditions for overcoming the situation", for the under privileged are agents of God's transforming power (Boff 1993:72).

Certainly, solidarity in *Ũtugi* can complement the Christian solidarity to facilitate the maximum levels of mutual care. Thus, by participating in pastoral care programmes that empower PLWHA, the Kenyan churches will be creating space for justice and love as is expected of people in the *Kingdom of God* (Matt 6). Nehemiah best exhibited the kind of solidarity that *Ũtugi* offers in rallying his community to rebuild the walls of Jerusalem (Neh 6ff). As Dube (2003a:1) points out, for the work of rebuilding the wall of Jerusalem in 538 BC to be completed, each person's contribution was needed. There is, therefore, a need to adopt traditional resources such as *Ũtugi* to complement church resources such as Christian hospitality in the fight against the HIV and AIDS pandemic.

Of course, the principles of *Ũtugi* dictates that people should contribute as much as they are capable of, in solidarity with the other, and the result will be that a massive task is completed easily. The use of both *Ũtugi* and the Christian hospitality can enable Kenyan churches to promote the God-given dignity of the PLWHA and their families, thus, enabling them to recognise their vocation, gifts and talents. Besides, *Ũtugi* can help Kenyan churches to mobilise the many available God-given gifts and resources within and, at the same time, use those gifts and resources to care for the PLWHA and their families. Mugambi believes that:

> [An individual is capable of contributing] constructively towards the improvement of our social conditions. We do not have to "catch up' with anyone, except God. We are endowed differently and variously, and our contributions cannot be uniform. To those whom much has been given, much will be expected, and to those whom little has been given, little will be expected in proportion to their endowment (2003:148).

Mugambi (2003:148) remarks that though we are created differently by God and we have different gifts, through solidarity, we can use the gifts for the benefit of all. This means that whoever has received some blessings from God should contribute something equally proportional to what they have received and those who have little should do the same. This is also one of the principles of *Ũtugi* and it finds a parallel in Luke 21:1-4. The observation shows further continuity between Christian solidarity and *Ũtugi* in terms of both personal and communal responsibility to the least in society.

The Christian theological reflection on the reality of God as a *Triune* [200] shows that a person is a being in solidarity with God, self and others. Fundamentally, the New Testament depicts God as *Triune* who share "Godself" with humanity (1 Cor 1:9; 2 Cor 13:13; Phi 2:1; I Joh 1:3; 2 Pet 1:4). Boff (1993:82) insists that the nature of God as *Triune* God shows that being a person means being united with persons in mutual love and solidarity. This notion of a *Triune* God in solidarity with humanity is well captured by John Zizioulas.[201] Zizioulas (1985:15) is of view that there is no true being without communion, for nothing exists as an "individual" in itself. He argues that:

> From the fact that a human being is a member of the church, he becomes an "image of God" he exist as God Himself exist, he takes on God's "way of being." This way of being... is relationship with the world, with other people and with God, an even of communion, and that is why it cannot be realised as the achievement of an individual, but only as an ecclesial fact (Zizioulas 1985:15).

Zizioulas arrives at this conclusion after studying the ontological construction of the Trinity by the Cappadocian Fathers. He realized that their understanding of God was opposed to the ancient Greek ontology that considered the "person" as an "individual" (Zizioulas 1985:16). He also noted that the reason the Cappadocian Fathers rejected the platonic understanding of God is because of the Greek ontology of monism.[202] For Zizioulas, God as a being in solidarity with self is a clear indication that no individual can exist apart from others "since personhood is not "an adjunct to a being."[203] Zizioulas (19985:19) further argues that God

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[200] For more information on the doctrine of God from an African communitarian perspective, see the works of John Mbiti, an Anglican from Kenya, *African Religions and Philosophy* (1969), and *Concepts of God in Africa* (1970); as well as Kwesi Dickson, a Methodist from Ghana: *Theology in Africa* (1984). Others include John Pobee, an Anglican from Ghana: *Towards an African Theology* (1979), Charles Nyamiti, a Roman Catholic from Tanzania - *African Tradition and the Christian God* (1976), James O. Kombo, an Anglican from Kenya - *The Doctrine of God in African Christian Thought: An Assessment of African Inculturation Theology from a Trinitarian Perspective* (2000); and Okechukwu Ogbonaya, a Nigerian - *On Communitarian Divinity: An African Interpretation of the Trinity* (1994). Both Kombo (2000) and Ogbonaya (1994) works agree with Zizioulas (1985), for they explore the idea of Trinity from a communitarian approach, which can help us understand God in solidarity with humanity. Ogbonaya (1994) is very interesting as he based his concept of Trinity from an African perspective on the North African church father, Tertullian. The study gives a wonderful comparison of classical theism and African theologies. Ogbonaya attempts to correct those who fit traditional African thought into Western model and those who fail to see the integral link between community and Trinity. He argues that one of the side effects of such approaches is that many oppressed people in Africa fail to see the relevance of a liberating communitarian concept of God. He claims that African concepts, which major in community, need to be taken as the point of departure when discussing God in Africa and the Trinity, in particular (Ogbonaya 1994:1). For Ogbonaya (1994: xii-xix), Tertullian, an African, explored the concept of Trinity from a communitarian perspective, for he conceived Trinity in terms of the community of equal persons - with a temporal rather than an ontological functional subordination among the persons. Ogbonaya (1994:1) affirms that communality is foundational to the African worldview, for in Africa, the sense of community goes beyond actual physical encounters to spiritual ties of existence. Hence, "In the context of Africa, people are surrounded not by things but by beings - the metaphysical world is loaded with beings" (Ogbonaya (1994:8). This is because the ancestors and persons yet to be born are part of the community. Therefore, an African community is a community that reaches into past, respects the present and looks into the future.

[201] John Zizioulas was a professor of Theology in England before becoming a bishop in the Diocese of Pergamon, Greece. In the last twenty years, Zizioulas had established himself as one of the most-well known interpreters of the mystical, apophatic tradition of Eastern Orthodoxy. The work that brought him to international limelight was the book he published in 1985 titled, *Being as Communion: Studies in Personhood and Communion.*

[202] In the Greek patristic view, communion was an ontological concept and Aristotle taught that nothing in existence is conceivable in itself (Zizioulas 1985:16-18). It was after the Cappadocian Fathers used the ontological expression of faith in the Trinity that a new kind of understanding of personhood as communion emerged. The question that these fathers tried to answer is, "what does it mean to say that God is Father, Son and Spirit without ceasing to be one God?" The Cappadocians attempted to identify the *hypostasis* (essence) with the "person" for they thought that Tertullian's formular, *unasubstantia, tres personae* (one substance/essence, three persons) did not address this, for the term "person lacked an ontological content" (Zizioulas 1985:36-37).

[203] Here Zizioulas' use of essence takes up the ancient Trinitarian and Christological language of *hypostasis*, from the Greek term meaning "essence" or "substance."

can only be known as a "Trinitarian person in communion and solidarity with humanity because human being can only approach God through the Son and in the Holy Spirit." In other words, "the being of God could be known only through personal relationships and personal love. Zizioulas (1985:16) argues that, "Being means life and life means communion";[204] and from this perspective, he proposes a new understanding of personhood as opposed to the Greek "non-personal"[205] view (Zizioulas1985:39).

Subsequently, Habermas (1990:201) agrees that the understanding of God as *Triune* can help us to appreciate the "equality of respect (*Gleichbehandlung*), solidarity and the common good (*all-gemeines Wohl*)." Both Zizioulas and Habermas see solidarity as relationality, connection, correlatedness and the interdependence that exist between God, humanity and all creation. De Gruchy (2005:56) concurs with Zizioulas and Habermas that Christians are called in the world to participate and bear witness to the work of God in solidarity and partnership with others. This is interpreted as attempting to make our world nearer to God's vision of *shalom* and effecting abundant life (John 10:10). The crucial argument De Gruchy makes is that:

> There is a lot of suffering in this world and because of this the church should be drawn to work against this suffering and struggle, for this is a world in which people struggle with poverty, homelessness, sickness, violence, racism, domestic abuse, lack of education, health care and sanitation, exclusion form decision making, pollution, deforestation, ugliness, powerlessness, hopelessness and self-denigration (2005:56-57).

It is important to note that the *Ũtugi* paradigm, like the Christian solidarity, has a certain religious devotion to the well-being of members of the society. This is because in *Ũtugi* the participation in communal solidarity and love guarantees communal spirituality, which enhances emotional and physical survival. As we have already seen in the previous chapter, *Ũtugi* can provide communal solidarity and belongingness, which can uphold the spiritual and mental well-being of the society, thereby, making it a contextual model for the Kenyan churches to use in their fight against HIV and AIDS.

However, while such solidarity, belongingness and mutual love resemble the Christian *hospitality,* it is clear that there is also discontinuity between them. (a) *Promise of God:* It is notable that, unlike in the *Ũtugi* paradigm, the solidarity found in the Christian hospitality is

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[204] It is interesting to note that Zizioulas' communion ontology and doctrine of the Trinity have been embraced by many theologians such as Jurgen Moltmann, Wolfhart Pannenberg, Leonardo Boff and Catherine Mowry LaCugna.
[205] Before it gained its present meaning, the Greek understanding of the word "person" referred to the mask of an actor in the theatre - the mask signified that something was added to a being, that means the "person" is not his or her true or real *hypostasis* (essence).

linked to the promise of God and to the possibility of the presence of Jesus Christ. Pohl (1999:68) affirms that "this possibility undergirded the practice of the Christian hospitality to strangers for centuries and it sustained much of the practice today." It is also understood that God will judge humanity according to their deeds. The ancient Church was motivated by the love of Christ rather than the dictates of culture as in the case of *Ũtugi*. Furthermore, the Early Church did not only share their material possessions but, more fundamentally, they exhibited friendship and mutual concern among all members, and this was motivated by the Spirit.

In fact, what compels Christians to offer solidarity to the vulnerable is clearly seen in their nature as new creation. As noted above, those who have died and risen in Christ, have received the Spirit (Rom 8:9-17; Gal 4:6) and have become new beings in Christ, therefore, they are entitled to share the promise of the resurrected Lord (Rom 6:1-5). Subsequently, they are in solidarity with God and the family of believers. This means that they are also empowered by the Spirit to be in solidarity with the weak and to walk in the "newness of life" (Rom 6:4; 8:1-8). As Christians, they are expected to recognise and respect the selfhood and subjecthood of the vulnerable in order to continue building solidarity with them, as it requires full and confident communication in mutuality. As believers, Christians are expected to live as holy people in accordance with God's will (1 Thess 4:3) and, in the present time, they are to expectantly look forward to the time when their salvation will finally be fully realized. The completion of this solidarity will be near when the mysterious plan of God encompasses all people and all creation, finally coming to fruition (Rom 8:21; 11:32) at that time. As believers, they will live in solidarity with the Lord forever (1 Thess 4:17). The Christological, sacramental, pneumatological and eschatological bases, mentioned above, motivate the Christians to be in solidarity with the vulnerable and the marginalized in their neighbourhood. As Luther says, it is to be "Christ to their neighbours" (cited in Cone 1969:38).

 (b) *The God's kingdom:* Unlike in *Ũtugi* where solidarity is practised within the *Riika* (age set)*, Mbarĩ* (families) and *Mũhĩrĩga* (clans)*,* solidarity in the Christian hospitality is shown by and with all those who have become members of God's kingdom. It is notable that the term "church" in the New Testament replaced the Old Testament term *bet'ab*, i.e. "household" (Birkett 2003:19)*.* Therefore, the faith community is called to be in solidarity with the vulnerable. Landman observes that when the church journeys in solidarity with the PLWHA:

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> Their emotions and feelings (are) comforted. They (are) strengthened and empowered, and they (feel) in control. The emotional burden of the illness is eased. They experienced a sense of support and belonging. Their personal relationship with God developed into a significant support system. The acceptance of the illness is facilitated. Self shame (is) reduced. Fear and uncertainty of death (are) relieved (2003:189).

The above statement confirms the findings from the medical research that was conducted by the *Centre for AIDS Intervention Research* (CAIR), Winsconsin, which noted that spiritual dimensions of mental health strengthened the coping mechanisms of the PLWHA (Landman 2003:190). Consequently, as *shalom* makers and as the *body of Christ*, Christians are faced with no other option than to stand with, for and alongside the PLWHA and their families. The church is challenged to develop various structures that can support and sustain the weak, the sick and the powerless in our respective societies (Ajulu 2001:33). By showing them love and with good nutritious food, ARVS healthy lifestyles, and adequate social support, it is possible to extend the life expectation of the PLWHA. This is ultimately God's call in the context of HIV and AIDS pandemic and it sheds light on what the church's appropriate response should be. In the next section, we shall explore the notion of *shalom* and the role of the church as *shalom* maker in the context of the HIV and AIDS pandemic.

4.11. *Shalom* as humanisation of the vulnerable

One of the contradictions in our communities is the reality of a dual pandemic, that is, the pandemic of abject poverty in the midst of plenty plus the HIV and AIDS. In fact, the poorest most marginalized and oppressed members of the society are also the most vulnerable to the threat of HIV and AIDS. Chavannes Jeune writes:

> I have found that poverty is not an accident. It is fundamental to a world of abundance in which many are poor in order that a few others may stay rich. Injustice, exploitation and oppression are created and sustained by the rich and powerful. As such, they seem to be problems too big to tackle; but tackling them is precisely part of the historical purpose of the church. The Gospel has always dealt with social and economic structures that oppress people (1987:219).

The above observation indicates that poverty is not only a condition of scarcity, but it includes the question of unjust power control and distribution. Justice is one of the most outstanding attributes of God (Isaiah 28:6; 51:4-5). Accordingly, Perry Yoder (1989:33) notes that God's justice is a justice that, "set things right" and is liberating. In other words, he sees God as a judge of all nations and the "universal justice" of God is the liberation of the unfortunate who gain redemption (Yoder 1989:33). This is because justice is a dimension of God's saving action, and to participate in the struggle for justice is to participate in God's mission (Abraham and Joseph 2000:359). In this sense, we can argue that if the church uses

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Ũtugi as a tool and participates in empowering PLWHA, it can be said that she is participating in God's saving action. It implies that when the church uses *Ũtugi* to enhance the socio-economic systems to meet the needs of PLWHA and their families, she is working for God, and when she misuses her power and authority, she is working against God.

Onwu (1996:57) observes that the state of s*halom* is closely tied with justice. This is because the fundamentals of justice encompass just treatment of the underprivileged, ensuring that their positions and opportunities are improved as a way of empowering them to participate in their world. Yoder (1989:12-13) explains the meaning of s*halom* (שָׁלוֹם)[206] in Hebrew and its relationship to the state of well-being. Incidentally the word s*halom* (שָׁלוֹם) corresponds with the Kiswahili word *salama* whose root emanates from the Arabic word s*alaam,* which means peace. The Kenyan Kiswahili speaking communities understand *salama* as the well-being of a person (i.e. being well or fine) and use the word in greetings. A person greets another: *Habari yako?*(How are you?) and the response should be: *Niko salama* (I am fine or I am in good health). Hence, the word s*halom* (שָׁלוֹם) describes the experience of wholeness or completeness, often in the context of community.

Willard Swartley (2006:28) claims that s*halom* (שָׁלוֹם) entails everything that is needed for good living and for everything to "be in order as it ought to be" while Nicholas Wolterstorff (1983:116) sees the essence of s*halom* (שָׁלוֹם) as the fundamental condition of a human flourishing in all its fullness. Wolterstorff's view is supported by Claus Westermann (2001:54) and Long (2000:4-15). For Westermann (2001:54), *shalom* (שָׁלוֹם) means wellness, being intact or being in order, and it indicates the "well-being of the human in all imaginable aspects." Likewise, Long (2000:14) affirms that, in *shalom* (שָׁלוֹם), our health, our relationships to God, one another and the environment, are at peace. Furthermore, *shalom* (שָׁלוֹם) is experienced in right relationships with God, the community and the family, in addition to the whole creation; hence, *shalom* denotes fullness of life (Long 2000:14). In a more significant way, Yoder (1989:12-13) grasps the notion of justice in terms of *shalom* (שָׁלוֹם), which he says has social, political, moral or ethical and material dimensions. For instance, in the material dimension, *shalom* (שָׁלוֹם) encompasses the concept of prosperity and physical welfare (cf. Gn 43:27-28; Jer 33:6; Ps 73:3) and, in most cases, it is also used to

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[206] The definition of shalom is contested in many writings and a number of questions are asked such as, is *Shalom* a state or condition, or is it a relationship? Is *shalom* focused on intra-group or inter-group relationships? Is the order of *Shalom* a creation of the king or is the king judged by the vision of *shalom*? However, this study is not affected by the way these questions are answered (read Swartley 2006:27; Yoder 2001:3).

indicate the state of peace or absence of war, disease and famine (Yoder 1989:12-13). Yoder understands the term "*shalom-justice*" as working towards the vulnerable and its purpose as creating s*halom* (שָׁלוֹם) where it is absent:

> Since material want, oppression, and lack of moral integrity are the opposites of *shalom,* God's acts of justice reverse a *non-shalom* situation. God's justice makes things right by transforming the *status quo* of need and oppression into a situation where things are as they should be. This transformation forms the basis of *shalom*. Given this connection between God's justice and *shalom*, we shall call this *shalom* justice. And where *shalom* justice is missing, there shalom is missing. Peacemaking means working for the realization of shalom justice which is necessary for the realization of shalom (Yoder 2001:24).

It is interesting that the New Testament writers chose to use the word *shalom* to indicate the well-being of humanity and to show the importance of peaceful living as in the Old Testament. In this case, they used the sociological term to forge a fundamental theological link; for *eirene* (Greek) conveys all that *shalom* (Hebrew) conveys, although in the New Testament it has become "the *shalom* of God." This is seen in phrases such as "the God of peace", "the peace of God" and "the peace of Christ", which liberally appear in the New Testament (Dinkler 2001:95). For instance, in Ephesians 2:14-17, the word *eirene* is used four times in four verses. Paul also uses *eirene* on the issue of the reconciliation of Jews and Gentiles as a result of the "*blood of Christ*" (Eph 2:13). Dinkler (2001:95-100) notes that because the first century Jews considered non-Jews to be less than truly human, Paul was compelled to argue that the *eirene* brought by "Christ who is our peace," has broken down the "dividing wall" and he has created in "himself one new humanity" by "putting to death" that hostility through the cross (Eph 2:14).

Therefore, the two opposing groups who were openly hostile were reconciled and made one through the actions of the "God of peace" (*shalom*). Jesus, as the "Prince of *shalom*", is now depicted as the one who fulfils God's promise to establish *shalom* (peace) with justice and righteousness. Further, Jesus, the *Prince of shalom,* is "both the witness to the coming of God's reign and the one in whom that reign is taking place." If *shalom* is the presence of God's saving grace allowing us to practice righteousness (right relating), then the "kingdom," the "reign," and the "household" of God become the space where that s*halom* appears. Within this space, the vision of the *household of God* is that of a new creation and a transformed humanity, living in mutuality, justice, peace, and love, which are initiated, grown, and sustained by openness to relationship with God through Jesus in the power of the Holy Spirit.

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In other words, the space incorporates right and harmonious relationship with God and other human beings, and it delights in human community (Wolterstorff 1983:117).

This understanding indicates that *shalom* is against dehumanisation and deprivation; therefore, Christians are called to show solidarity with those who are struggling to achieve their liberation - in this case the PLWHA and their families. According to Wolterstorff (1983:70), the political dimension of s*halom* is well demonstrated in the *Exodus* event in which God collaborated with Israelites to free them from the yoke of slavery. The social aspect of *shalom* implies that harmonious relationships should be maintained in the society. As a society, the Israelites were to observe honesty, integrity, righteousness and justice, which are the moral and ethical dimensions of *shalom* (Yonder 1989:15-16). Thus, when we side with the PLWHA and the oppressed, enhancing integrity, honesty, justice, accountability, we are working for *shalom,* that is, peace with justice. Accordingly, it can be argued that when the church engages in *Ũtugi* to care for the vulnerable, she is working for s*halom,* for this humanises the PLWHA, thereby, empowering them to take charge of their growth as subjects rather than as objects. This position draws us to De Gruchy's (2005:33) conclusion that *shalom* is the same as "the abundance of life" that Jesus mentions in John 10:10.

As we have seen above, both *Ũtugi* and the Christian hospitality advocate the equality of humanity and focus on the empowerment of the underprivileged. This basic orientation help us to see the tension and paradox, as well as the continuity and discontinuity between *Ũtugi* and the Christian categories of human dignity, justice, liberation, prosperity, love and redemption entrenched in the Christian hospitality. The Christian notion of redemption involves the re-establishment of human beings in right relationships with God, with each other, and with the environment (De Gruchy 2005:33). Pohl (1999:17) argues that Jesus identified the redemptive work of God in him with that of the stranger, the weak, and the destitute, he saw anyone who welcome such persons as welcoming him and, thereby, welcoming God.

The discussion in the foregoing affirms the need and the calling of the church to care for the PLWHA and their families; as Pohl (1999:17) says, to welcome them is like welcoming God. It also shows how human beings tend to secure strength, power, domination, wealth, status, and even religious association in order to marginalize the vulnerable. If this is the case, then

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the contemporary church meets Jesus in showing hospitality to the PLWHA and their families. In other words, the saving presence of God, Jesus, and the PLWHA and their families are four interconnecting point. This is because in the work of redemption the church emulates Jesus in reversing indignity, injustice, discrimination, stigmatisation and poverty imposed on the PLWHA and their families. Thus, when the church engages in *Ũtugi* to complement Christian hospitality*,* she is reversing the indignity, discrimination, stigmatisation and injustice, which promote poverty in the lives of the PLWHA and their families.

With regard to *Ũtugi,* it is evident that if the church would accentuate and pragmatically prioritize *Ũtugi* to complement Christian hospitality in her pastoral care and the mobilising of the resources for the HIV and AIDS programmes, then she would be able to address the predicaments of these disadvantaged groups in society. When the church engages in liberating the underprivileged from the shackles of poverty, marginalization and depravity, then she is participating in the act of redemption.[207] According to Vine (1981:263), the term redemption means to set free after compensation or after paying a ransom on a person, which includes the person's physical, spiritual, material, political and social condition. He observes that the Greek verb "*exgorazzo"* means to buy a slave in order to free him or her, while *lutroo* means to release from sin, and the noun "*lutrosis"* means deliverance from physical torment or from sin (Vine 1981:263). Through redemption, God restores humans back and delivers or rescues humanity from physical, spiritual and economic disarray. In other words, through redemption humanity can experience deliverance or liberation from oppressing circumstances.

Wolterstorff (1983:101) urges the faith community to emulate Jesus who sacrificed himself to obtain redemption and justice. The faith community should, therefore, be active workers for s*halom*; that is, they should work "to make things okay in all aspects, material socially and morally" (Wolterstorff 1983:101). In fact, it is clear that the issue of justice and redemption is an ongoing work of humanising dehumanised people in order to maximize the ability of the dehumanised, thus, enabling them to participate in their own empowerment. In a way, this act of redemption will be perfected in the "*eschaton*" (Vine 1981:263). Küng (1978:577) also

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[207] The HI virus, which leads to AIDS, is to blame not only for physical death but also for the premature "social death" that PLWHA and their families undergo. These "social deaths" include discrimination, stigma and fear, which render PLWHA and their families demonised, marginalized and shunned by the society as though they were already dead. As we have seen in Chapter Three, such social deaths are devastating to the Agĩkũyũ whose primary self-identity is social as captured in the saying - *Mũndũ nĩ Mũndũ nĩ ũndũ wa Andũ,* which means a human being is a person because of the other people (cf. Mugambi 1989b: 205 and Moila 2002a:67-70).

reminds us that the redeemed are called to engage in ensuring the well-being of the underprivileged.

Therefore, when the church uses *Ũtugi* to complement the Christian hospitality to reverse the dysfunctional and oppressive socio-economic and political structures, then she would be seen as working for justice and redemption. The suggestion here is that the church, as *the body of Christ* and as a redeemed community, can use *Ũtugi* to complement her resources to work for justice and peace to redeem the oppressed, the weak and the deprived within the society - in this case, the PLWHA and their families. This is because both the Christian hospitality and *Ũtugi* paradigm are against exploitation, injustice, oppression and discrimination within the society. The church is called to advocacy especially in working against all dysfunctional systems. This position is validated by the *Diakonia Council of Churches* (D.C.C) (2006:30) which asserts that the church in her pastoral ministry needs to "speak out in the spirit of the biblical prophets, to speak truth to power wherever the state or the private sector is colluding in consolidating an unjust system." In fact, the above broad Christian vision of s*halom* compels us to engage with the world with the aim of making it a better and more humane place than it is, thus, enabling the PLWHA to become fully human. Expressing this conviction, the W.C.C affirms that:

> The church is called to be a prophetic sign, a prophetic community through which and by which the transformation of the world can take place. It is only a church which goes out from its Eucharistic centre, strengthened by word and sacrament and thus strengthened in its own identity that can take the agenda of the world. There will never be a time when the world with all its political, social and economic issues, ceases to be the agenda of the church (cited by Bosch 1991:440).

Therefore, there is a need to address the structures, which malfunction and, which are unjust. This would include poverty, gender injustice and social injustice. The pastoral issue at stake is that the faith community must accept the challenge to do more than showing compassion and care for the PLWHA and their families. This is because for the church to keep quiet in the face of prevailing injustice is to compel us to question her understanding of inclusive gospel. The church cannot keep quiet while the PLWHA and their families languish in poverty and while women and orphans are forced by poverty to engage in risky survival strategies, which expose them to the HI virus. The church as a community of *shalom*, would have to offer the PLWHA and their families a sense of well-being and wholeness by causing them to experience life in caring, sharing and joyous community (cf. Bruggemann 1976:20). Brueggemann (1976:50) maintains that, "*shalom* is the end of coercion. *Shalom* is the end of fragmentation. *Shalom* is the freedom to rejoice. *Shalom* is the courage to live an integrated

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life in a community of coherence. Unity is having it all of us sharing in an act of celebrating what we have in common."

What this implies is that community needs stable, ongoing associations of people with special commitments to one another, a common purpose and a common sense of life and love. Jesus' ministry was centred on establishing community between people and God, and between people and people. His acts of healing the sick, forgiving sinners, raising the dead and feeding the hungry are all actions, which re-established God's will for *shalom* in a world, which was and is marked by the injustice of self-seeking.

As stated above, love and justice are present within the notion of *shalom* but they are also the result of a common communal identity. *Shalom* faces our deepest divisions and counters them with a vision. Where our world is characterized by chaos, *shalom* speaks of an orderly fruitfulness. Where injustice and exploitation are a daily reality, s*halom* ushers in a vision of responsibility, equity and justice. Even in a community driven by self-seeking individualism, it is clear that within the context of *shalom,* such a community can be transformed into a generous caring community of hospitality. Brueggemann (1976:23) claims that God's *shalom* is known only by those in an inclusive, caring community. *Shalom* goes beyond justice and does not only imply the absence of hostility for it transforms the exclusive community into a beloved community full of joy. Therefore, *shalom* dictates that, as we follow Christ and become an inclusive community, we begin with the vulnerable. Jesus did the same in his journey of *shalom* and transformation. As we join the PLWHA who are victimised by the unjust social structures, we will be undertaking a true justice based on love *(Agápē)*, and the *shalom* of God who sides with the poor by becoming incarnate among the poor and oppressed. Gutierrez affirms that:

> The universality of Christian love is only an abstraction unless it becomes concrete history, process, conflict; it is arrived at only through particularity. To love all men and women does not mean avoiding confrontations; it does not mean preserving a fictitious harmony. Universal love is that which in solidarity with the oppressed seeks also to liberate the oppressors from their own power, from their ambition, and from their selfishness... One loves the oppressors by liberating them from themselves. But this cannot be achieved except by resolutely opting for the oppressed, that is, by combating the oppressive class. It must be a real and effective combat, not hate. This is the challenge, as new as the Gospel: to love our enemies... It is not a question of having no enemies, but rather of not excluding them from our love. But love does not mean that the oppressors are no longer enemies, nor does it eliminate the radicalness of the combat against them. "Love of enemies" does not ease tensions; rather it challenges the whole system and becomes a subversive formula (1990:289).

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Gutierrez's view is in line with pastoral care, which is liberative. Similarly, Louw (1995:29) calls for contextualisation of pastoral care and counselling in a liberative form. In fact, liberative pastoral care and counselling are what PLWHA and their families need. De Gruchy (2006:3) reminds us that the pattern of infection through the HI virus and the exploitation, abuse and brutality against women and children, compel us to focus on the fundamental implementations of patriarchy and the lack of gender equity in our culture, churches and society, by calling for a liberation praxis. In my opinion, *Ũtugi* can complement Christian hospitality as a tool for fighting HIV and AIDS pandemic and it can enable the church to fight the unwarranted dysfunctional systems that facilitate these vices, thus, becoming a tool for enhancing *shalom.*

4.12. Conclusion

In the present chapter, we have traced the practice of hospitality and have revealed that it is a universal phenomenon, which is practiced contextually by various world cultures. The chapter has explored the meaning and the linguistic root of the word hospitality. It has shown how the Jewish, the Greek and Roman communities practiced hospitality as public hospitality, which was practiced by states as part of their foreign policy, as temple hospitality, which was designed to facilitate pilgrimages to holy places, as commercial hospitality, which enabled travellers to obtain food and lodging for a fee and as private hospitality, which was widely valued and encouraged throughout the ancient world as a moral virtue. The temple hospitality was also seen as *theoxenic* hospitality in which humans were said to have provided hospitality to God, gods, heroes and various semi-divine guests.

The chapter has argued that the ancient Jewish, Greek and Roman hospitality was interculturated into the ecclesiological praxis of the Early Christians. This was possible because Jesus had reconfigured and reframed it to include the sick, the injured, widows, orphans, sojourners, strangers, the aged, slaves, prisoners, the poor and the hungry. As an inclusive model, the Christian hospitality was regarded by the Early Church as a praiseworthy virtue, a gift of the spirit, and a charismatic act impelled by that love, which constitutes the special gift of divine grace by which the covenant community of the *New Israel* is built up and perfected (cf. 1 Cor 8:1; 12:7; Eph 4:12; Col 3:14; 1 Pet 4:10).

The chapter probed the manner in which the Christian hospitality shifted theologically and historically in various eras. It argued that after Constantine became an Emperor in the fourth

century, he gave support to the church. As a result, the Christian hospitality, as care for the vulnerable, became a public service, and turned out to be more institutional, systematic and corporate in form. The chapter also noted that in the contemporary world, care for the vulnerable has shifted and it is now located in a separate institution with its own culture, rules and professionals who provide paid services. The shift is seen as a departure from the ancient Christian hospitality, which was practiced in the community and in the household. It further revealed that hospitality could only be understood within a particular tradition, for different generations practised different forms of hospitality. For us to understand hospitality, therefore, we need to understand the culture that is practising it.

In theologising hospitality, the chapter demonstrated that the Christian hospitality was first a social phenomenon with its foundation (framework) being *koinonia* (κοινωνία), which entails a fellowship, a sharing in common or communion, community, partnership, participation and solidarity. Furthermore, Christians in *koinonia* have received one and the same baptism and they are partakers (*koinonoi*) of Christ's body and blood not in an abstract way, but in a way of *persona Christi* who is revealed to them by the power of the Holy Spirit. After becoming the bearers of Christ *(Christophoroi)* and the bearers of the Spirit *(pneumatophoroi)*, Christians become conscious of their unity. In this case, their hospitality is seen as a witness for and a goal of their salvation (cf. 1 Cor. 1:2). The chapter also argued that Christian hospitality is best practiced within the *body of Christ* where there is a radical welcome of all and where an open table fellowship of oneness is experienced. Moreover, the Christian hospitality focuses on compassion and mutuality and its pneumatological dimension is determined by the work of the Spirit.

Through the contours of *koinonia*, the *body of Christ* and the Christian solidarity, it is shown that there are continuities and discontinuities between Christian hospitality and *Ũtugi*. In terms of discontinuity, the chapter found that:

a) Unlike in the Christian hospitality the people who practice *Ũtugi* are family members linked by *Riika* (age sets), *Mbarĩ* (household) and *Mũhĩrĩga* (clans). This means that they are related biologically or genetically.

b) Due to the realism of the new *aeon,* the new state of being a Christian that comes due to the mediatory work of Christ, those who practice the Christian hospitality within *koinonia* are transformed and justified. In other words, they have attained

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their membership not by birth, as in the case of *Ũtugi,* but by virtue of dying and rising with Christ.

c) Unlike *Ũtugi,* the Christian hospitality is an expression of the gracious gift of God to humanity and those who practise the Christian hospitality within the Christian *koinonia* are members of *the body of Christ* and are in the *family of God.* Thus, they are partakers of the new life in Christ and are initiated into an accepting, forgiving and healing community. Similarly, through Christ's death, resurrection and forgiveness, they are reconciled with God being set free from the bondage of sin. Therefore, the isolation, alienation and loneliness, which originate from sin, are now thrashed.

d) The love expressed in *Ũtugi* and in the Christian hospitality especially in *koinonia* are two different things. The love demonstrated in *Ũtugi* is based on blood relationships within the same family while the love demonstrated in the Christian hospitality is based on the unconditional love exhibited by Jesus.

e) Unlike in the Christian hospitality, the practice of *Ũtugi* is based on the need for communal and societal "equilibrium", thus, demanding a certain way of life (behaviour) and actions, which is enhanced by sanctions (taboos) and by means of certain measures of censure. Consequently, it can perpetuate fear and shame leading to secrecy and silence, which are bad elements in the fight against HIV and AIDS.

f) The "*body*" that practices *Ũtugi* has the connotation of communal and social units while "the body" that practices the Christian hospitality is ecclesial as seen in "the body of Christ" in Pauline theology. Unlike in *Ũtugi,* those who practice the Christian hospitality are an eschatological community, the new creation led by the Spirit, which exists already in the present world (the church) and anticipates perfection in the age to come.

g) The solidarity in the Christian hospitality, unlike in *Ũtugi,* is understood as an expression of the gospel. In *Ũtugi,* solidarity is based on and determined by the *Riika* (age set)*, Mbarĩ* (families) and *Mũhĩrĩga* (clans) while in the Christian hospitality it comprises all those who have become members of God's kingdom.

In terms of continuities, although some tensions and paradoxes exist between *Ũtugi* and the Christian hospitality, there are considerable similarities, which can enable the church to use *Ũtugi* to complement the Christian hospitality in the fight against the HIV and AIDs

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pandemic. As a tool for capacity building and empowerment of the PLWHA, the chapter has demonstrated that both the Christian hospitality and *Ũtugi* encourage the spirit of sharing, accommodation, protection, love, networking and reorganisation of different gifts and talents, which is vital in the fight against the HIV and AIDS pandemic. Furthermore, since both paradigms have the capacity to promote equality and the empowerment of the PLWHA and their families, they can be used in the process of humanisation. Finally, the chapter has demonstrated that the *Ũtugi* paradigm can complement the wealth of biblical, theological and ecclesiological resources in the church as she attempt to respond to the challenge posed by the HIV and AIDS pandemic in Kenya. The chapter, therefore, compels us to assess the appropriateness of *Ũtugi* as a pastoral care and counselling tool to the PLWHA and their families within the ecclesial praxis of the Anglican Church of Kenya, to which we now turn.
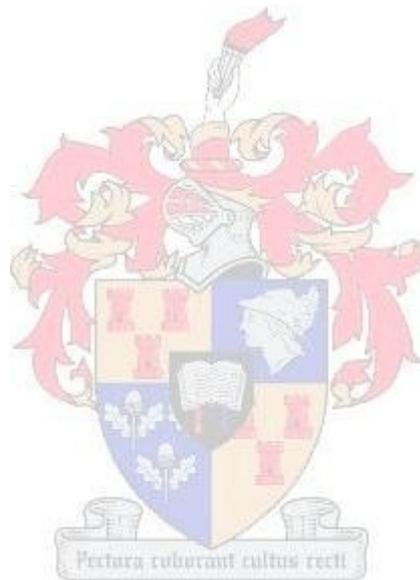
CHAPTER FIVE
ŨTUGI: A PASTORAL ASSESSMENT OF THE ECCLESIAL PRAXIS OF THE ANGLICAN CHURCH OF KENYA

5.1. Introduction

In the previous chapter, we noted that the practice of *Ũtugi* in Kenya echoes and exemplifies the ideas of sharing, accommodation, protection, love, networking, reorganisation of different gifts and talents, assistance, joint effort, self-responsibility, community self-reliance, solidarity and belongingness, which are all crucial to the fight against the HIV and AIDS pandemic. This chapter will discuss the ecclesial praxis of the Anglican Church of Kenya (ACK)[208] critically and will show the way *Ũtugi* can help reframe that ecclesial praxis. In other words, it will demonstrate how the paradigm of *Ũtugi* can enable the Anglican Church to shift from the ecclesiological paradigm of exclusiveness to the ecclesiological paradigm of inclusivity. This will enable the church to address issues of healing, care, restoration, justice, democracy, encouragement, welcoming, hosting, sharing, empowering, reconciliation, accommodation, capacity building, rehabilitation, love and education, support systems, safety, gender, power dynamics, embrace, empowerment and love, which are needed by PLWHA and their families.

In undertaking this task, we shall attempt to trace the historical background of the Anglican Church of Kenya, explore colonial Christianity and post-colonial Anglican ecclesiology, and provide a critique of the patriarchal and ecclesial hierarchy of exclusivity. The chapter will further examine ways in which the Anglican Church of Kenya can employ an intercultural model in her pastoral care and counselling to the PLWHA and their families as well as involve the congregation in the caring programmes. The chapter will also show how the church can use *Ũtugi* to augment the physical, social, spiritual, economic and political support systems for PLWHA and their families, thus, becoming a space for holistic healing. The chapter is set on the premise that the *Ũtugi* paradigm can play a decisive role in creating healing space and reframing the prevailing ecclesial praxis applied by the Anglican Church of Kenya in her venture to respond to the challenges posed by the HIV and AIDS pandemic.

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[208] In this study, the "*Anglican Church of Kenya*" will also be abbreviated as *"ACK."* Similarly, the word "*Church"* and "*church"* will be used as follows: The term with a capital **"C"** will refer to the Anglican Church and that with a lower-case **"c"** will refer to the church as a more general concept.

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5.2. A brief history of the Anglican Church of Kenya

5.2.1. Rev. Dr. Johann Ludwig Krapf (1810-1881)

 The history of the Anglican Church of Kenya is an interesting one as the person who started the church was not an Anglican but a Lutheran pastor from German. The Rev. Dr. Johann Ludwig Krapf (1810-1881) was popular as a missionary, an explorer, a linguist, and as a traveller.[209] He was also the first European to see Mount Kenya and Mount Kilimanjaro (Nthamburi 1995:7) and it is known that he played a key role in exploring the East African coastline and in encouraging other missionaries to come to Kenya.[210] David Barrett (1982:30) writes that Krapf came to Kenya in 1844 as a missionary sent by the London-based Anglican Society, which was widely known as Church Missionary Society (CMS).

Krapf was born into a Lutheran family of farmers in southwest Germany. During his school days, he developed a gift of learning languages, which enabled him to study Latin, Greek, French and Italian. At the age of 17, he joined the Basel Mission Seminary and then went to Tübingen University where he studied theology in preparation for ordained ministry in the Lutheran Church. After completing his studies at Tübingen in 1834, he worked as an assistant pastor in the local church and then joined the Basel missionaries.[211] It was when he was with the Basel Mission in 1836 that he was seconded to the CMS. The CMS posted him to Ethiopia's Anglican mission in 1837 and, from 1837 to 1842, he worked in an ancient Christian kingdom in the Tigré province of Ethiopia. In this province, Krapf studied the Ge'ez and the Amharic languages;[212] however, due to cultural conflict he was unable to continue serving (Hildebrandt 1990:122-123; cf. Nthamburi 1995:8). As a result, he went to the Shoa kingdom, where he and other CMS agents were warmly received by King Sahle Selassie in 1839 (Hildebrandt 1990:122-123). While he was in the Shoa kingdom, he heard about the Galla community (the present Oromo) and became interested in working there.[213]

Besides doing missionary work in this kingdom, Krapf studied the Oromo language and translated the New Testament into the language (Hildebrandt 1990:123). Later, he presented this work as part of his doctoral thesis at the Tübingen University in 1842. After he graduated from the Tübingen University, all missionaries were expelled from Ethiopia forcing him to go to Alexandria in Egypt. In Egypt, he met his co-worker Rosine whom he married before

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[209] See also *http://www.bautz.de/bbkl/k/Krapf.shtml (Biography in the Biographic-Bibliographic Church Lexicon- 29th Aug-2009).*
[210] *http://www.ackenya.org/history.htm (Church of England in Kenya-29th Aug-2009).*
[211] *http://www.martynmission.cam.ac.uk/CKrapf.htm (Krapf's life and works - 29th Aug-2009).*
[212] *http://www.archive.org/details/johnludwigkrapfe00kretiala ("John Ludwig Krapf: The Explorer-Missionary of North-eastern Africa-29th Aug 2009).*
[213] *http://www.martynmission.cam.ac.uk/CKrapf.htm (Krapf's life and works-29th Aug-2009).*

proceeding to the East African Coast, for he anticipated reaching the Oromo community from the Kenyan side (Nthamburi 1995:8). Since the East African coastline was by then part of Zanzibar (now in Tanzania), he was to obtain authorization from Sultan Sayyid who controlled the East Coast of Africa (Hildebrandt 1990:123).

Krapf arrived with his family at the Port of Mombasa (Kenyan coast) in May 1844 and established his first mission at Rabai, Mombasa. Unfortunately, in July of the same year, his wife and his young daughter died of malaria. This was a big blow to Krapf but he continued with the mission work in the coastal region of Kenya (Hildebrandt 1990:123). Before Krapf got to Mombasa, the Portuguese were already in the East Coast of Africa but they were not interested in spreading Christianity. Their main interest was trading with Asia, and Africa happened to have been "discovered" while the new sea route via Southern Africa was being explored (Mugambi 1989a:22). Barrett (1982:30) notes that except for Fort Jesus and some remnant church buildings, there were no traces of the earlier Christian period in the coast of Kenya. This, therefore, shows that Krapf was the first missionary to preach the Gospel in the interior of Kenya.

Later, John Rebmann arrived in June 1846 to assist Krapf,[214] who was by then writing the first Kiswahili dictionary and translating the New Testament into Kiswahili (Barrett 1982:30-31; cf. Falk 1979:240-241; Hildebrandt 1990:123; Mwaluda 2003:3).[215] This became a historical achievement for he was able to write the first dictionary and the grammar of the Kiswahili language. He also started studying other African languages, drafting dictionaries and translating sections of the New Testament into those local languages. In 1849, Krapf and Rebmann were joined by another missionary called Erhardt (Nthamburi 1995:8). However, due to his deteriorating health, Krapf returned to Germany in 1853. When he settled there, Krapf continued writing and publishing several old Swahili manuscripts when he settled in Germany. This includes the "*Book of the battle of Tambuka*", the earliest Swahili manuscript and the *Travel, Researches and missionary labours* (Hildebrandt 1990:126). Nthamburi (1995:8) affirms that the above work inspired the early Methodist missionaries who came to Kenya. Despite the challenges of lack of good road network and quick transport system for

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[214]See Barrett (1982:30-31). The missionaries had to study and learn African languages to communicate and spread Christianity. Therefore, Krapf translated Genesis 1-3 into Kiswahili in 1847, and visited Ukambani in an evangelistic exploration, while Rebmann visited Taita. In 1848, Krapf translated St. Luke's gospel into *Nyika* (Rabai) and in 1850, St. Mark's gospel into Kamba (both are local languages).

[215] In 1848, they visited *Kimweri Ye Nyumba I* in Usambara and then became the first Europeans to see Mount Kilimanjaro. Krapf parted with Rebmann and entered Ukambani area. There he befriended the Kamba trader Kivoi, who showed him Mount Kenya. Krapf and Rebmann's reports of snow-capped peaks on the Equator created a sceptical stir in Europe; nevertheless, their findings helped to stimulate further European interest in east Africa. Krapf returned to Europe in 1853 because of poor health, and later published a full account of his Ethiopian and east African experiences.

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long distances, language barriers and hostility by the Arab Muslims along the Coast region, Krapf's outstanding work as the founding father of the Anglican Church of Kenya include the Kiswahili dictionary and translated portions of the New Testament in the Ge'ez, Amharic, Oromo, Swahili, Kamba, Mijikenda and Maasai languages (Eber 2006:1-24).

5.2.2. Expansion of the Anglican Church

In 1884, the first administrative diocese was formed and was called Eastern Equatorial Africa (comprising of Uganda, Kenya and Tanganyika). James Hannington [216] was consecrated as its first bishop and its headquarters was located in Uganda (Oliver 1965:34; Karanja 1999:22). Jonathan Hildebrandt (1990:188) relates that Hannington "arrived in Mombasa in January, 1885 and set off for Buganda by the direct route across Kenya, instead of going through Tanganyika as the other CMS missionaries had done. As Bishop Hannington approached the Buganda border from the eastern side, the new King, Mwanga, became frightened and ordered that the Bishop be killed."

After Hannington, the next bishop was Parker who died two years later because of fever. Hence, Alfred Tucker became the third and the last bishop of *Eastern Equatorial Africa* (Oliver 1965:34; Karanja 1999:22). Even though the Diocese of *Eastern Equatorial Africa* was establishment as an African diocese and many Christians joined the church it was only after forty years that the first African was ordained as clergy and the diocese was led by European missionaries. This means that idea of a "three-selves" (self governance, self propagation and self supporting) Church was only there in theory. Barrett *et al* (2001:428) claim that it was only in 1885 that, the first two Kenyans (Ishmael Semler and William Jones) were ordained as Anglican priests by Bishop Tucker and eleven years later (1896), he admitted another African J. R. Deimler into deaconate orders (Provincial Unit of Research 1994:14-15). In 1890, over 2000 ex-slaves were baptised at Frere Town in Mombasa becoming the first largest Kenyan Anglican congregation (Provincial Unit of Research 1994:14-15). In 1898 the Diocese of Mombasa comprising of Kenya and Northern Tanganyika was formed and Bishop W. G. Peel became its first bishop in 1899 (Provincial Unit of Research 1994:14-15). It was during that year that many people in Nyanza and Central Kenya became Anglicans. Bishop R. S. Heywood succeeded Bishop Peel in 1916 after he died of typhoid (Provincial Unit of Research 1994:14-15). At the end of 1890, the

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[216] In October of the same year, Bishop Hannington was brutally murdered on his way to Uganda.

Anglican Church was established in Mahoo in Taveta[217] and other stations that followed suit include Kihururuko (1901), Weithaga (1903), Kahuhia (1906) in the Murang'a District, Mahiga (1908) in the Nyeri District, Kigari (1910) in the Embu District, Kabare (1910) and Mutira (1912) in the Kirinyaga District. Other church denominations were also given areas, which they could occupy. These include the Methodist Church, Presbyterian Church, Catholic Church, African Inland Church and The Friends Missions, among others. In 1898, the Diocese of Eastern Equatorial Africa was split into two, with the new Diocese of Mombasa covering both Kenya and Northern Tanganyika while the other part became the Diocese of Uganda (Mwaluda 2003:3; cf. Barrett 1982:32).

In 1960 the Anglican Province of East Africa was formed which remained under Canterbury. Its Archbishop was Leonard Beecher. This was the period during which African countries were struggling for political independence. But even when Kenya attained its independence in 1963 and Jomo Kenyatta became its president, Beecher continued to be the Archbishop of the Anglican Church of Kenya. In 1970, Northern Tanganyika was removed from the Diocese of Mombasa.[218] Prior to Kenya's independence, the Christian missionary expansion was under the control of the British government despite provisions in the Berlin treaty to free missionaries from government control (cf. Mugambi 1995:38; Nthamburi 1995:11). Before colonialism, the missionary societies established their mission wherever they wished regardless of their nationality and denomination. This is the reason Krapf who was a German and a Lutheran minister was able to serve in Kenya with the Church Missionary Society, an Anglican Society from England (Mugambi 1989b:30).

With time, this ecumenical co-operation was affected by the spirit of nationalism that followed colonial expansion. [219] For instance, while the Berlin Treaty allowed free movement of missionary societies across territorial boundaries, irrespective of colonial powers that ruled the territories in question, in practice, it did not happen. For each colonial power tended to accord preferential treatment to missionary societies, which originated from their respective countries (Mugambi 1989b:32).

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[217] I ministered at this Archdeaconry between 1996 and 1998 having been seconded by the Anglican Church of Kirinyaga to serve in Taita-Taveta Diocese.

[218] See also http://www.ackenya.org/history.htm (9 October 2009).

[219] One of the most challenging issues in the study of the history of Christianity in Africa is the way it has been taught in Kenyan schools. This is because it has often been presented in isolation from the history of the colonisation of Africa by Europe, even though the two processes were inextricably woven together. Mugambi (1989a:21) observes that the general history in Kenyan secondary schools is taught as being separate from the Church history; yet, it is very difficult to comprehend one without the other.

As a result, the territories that fell under the British control received mostly British protestant missionaries while territories under French control received mainly French Catholic missionaries (Hildebrandt 1990:143-146). In Tanganyika (Tanzania after the union with the Islands of Zanzibar and Pemba in 1964), which was controlled by Germany before the First World War (1914-1918),[220] German Lutheran missionaries predominated until the beginning of the war. After the war (1918), Germany lost the war that culminated in the signing of the Versailles Treaty on 28 June 1919 in the Hall of Mirrors at Versailles. Consequently, she lost all her territories and she was confirmed as the aggressor who had to pay for war damages (Peacock 1987:292). With regard to East Africa, Germany lost the Tanganyika territory in 1919 and it (Tanganyika) was entrusted to Britain by the League of Nations. [221] Interestingly, after the British took over Tanganyika, British Protestant missionaries increased especially under the auspices of the Church Missionary Society (CMS) and the United Methodist Church of Africa (UMCA) (Mugambi 1989b:32).

5.2.3. Rapid growth of dioceses

From 1900 to 2010, the Anglican population was on increase and as the table (5.2.3.1) below shows. Although there were 3 clergy and 2000 Anglican Christians in 1900, by 2010 this number had increased to 1555 clergy and 3,711,890 Christians. This means that for every one clergy there were 2388 Christians. The table (5.2.3.1) also shows that the Anglican Church of Kenya had grown from 2000 members scattered around the coastal region in 1900 to over 3,711,890 members out of an estimated population of 38 million people in the year 2010. This implies that the Anglican Church of Kenya constitutes about 10.6 % of Kenya's population. [222] This is an increase in percentage of 3.4 from 1980 in relation to 7.2% shown by David Barrett's statistics of 1982. Barrett had predicted that in 1980 the Anglican Christians would comprise of 7.2 % of Kenya's total population (ACK Strategic Plan 2008:5; ACK Synod 2007:1).

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[220] It is evident that, by 1914 when the First World War started, all of Africa was controlled by European colonialists except the Republic of Liberia on the West Coast and the Empire of Ethiopia on the Northeast of Africa (cf. Hildebrandt 1990:136-146).

[221] The League of Nations was formed in 1919 as an integral part of the Treaty of Versailles. Leading statesmen during its formation were President Woodrow Wilson (U.S.A.), Lloyd George (British Prime Minister) and Georges Clemenceau (Prime Minister of France). It was the first time in human history that an international organization was deliberately created whose avowed purpose was the protection of Independent nations from aggression and the preservation of peace. The headquarters of the League was set up at Geneva. It had a council comprised of representatives from five Great Powers and four lesser ones. Accordingly, the so-called Great Powers were to have permanent seats or permanent membership. The council was to meet at least once a year and more often if serious international disputes arose which required action. In addition to the council, there was the Assembly, consisting of representatives of all the member states. The main officer of the League was the Secretary-General, a post first held by an Englishman, Sir Eric Drummond. Interestingly, the famous Covenant of the League (like the present Charter of the United Nations), which replaced the Old League after the Second War (1939-1945), bound all its member states to certain principles of international conduct especially the "acceptance of obligations not to resort to war." Other principles were the adoption of the rules of International Law and respect for all signed treaties (Peacock 1987:292-302). In all these treaties, Africa was *excluded!*

[222] See "History of the Anglican Church of Kenya" at www.ackenya.org/history.html (29 July 2010).

Table 5.2.3.1. A summary of the growth of the Anglican Church of Kenya from 1900 to 2010[223]

Year	Number of African Anglicans	Number of African Anglican Clergy	Number of Dioceses	Parishes/Mission Stations
1900	2000	3	0	0
1910	4,275	3	0	15
1920	6,594	8	0	17
1930	21,962	28	1	20
1940	69,212	38	1	26
1950	315,000	60	1	?
1960	432,000	109	4	?
1970	742,300	200	6	197
1980	1,129,500	390	7	253
1990	1,858,200	1,010	20	779
2000	2,258,240	1,136	27	1,023
2010	3,711,890	1,555	29	1,352

This tremendous growth is also attributed to the relationship between the Anglican Church and the colonial government. The colonial government had enormous resources and was able to coerce the local communities to join the missionary schools (Barrett *et al* 2001:428). Barrett *et al* (2001:428) also attributes this rapid growth of the Anglican Church of Kenya to the increase in the Kenyan population and the involvement of the local African evangelists in pastoral work (also see 5.23.1). Bishop Kariuki and Bishop Festos O'lang were the first local Anglican bishops in Kenya. Both Kariuki and O'lang were consecrated at the Namirembe Cathedral in Kampala, Uganda on 15 May 1955 (Karanja 1999:120). Actually, O'lang and Kariuki were consecrated as assistant Bishops of the Diocese of Mombasa but after Kenya became independent, Kariuki became the Bishop of Fort Hall while O'lang became the Bishop of the Maseno Diocese in 1961. Later, O'lang became the first African Archbishop of the Anglican Church of Kenya.[224]

Another factor that contributed to the rapid growth of the Anglican Church of Kenya is the completion of the Kenya-Uganda Railway from Mombasa to Uganda. With the improved transport system, more missionaries arrived in Kenya and they were able to help in starting new mission stations in the interior of Kenya. This view is captured by Nthamburi (1995:11) who observes that, with the establishment of the East Africa Protectorate and the building of the "Kenya-Uganda Railway", which began in Mombasa in 1895, and reached

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[223] The statistical information is available from the Anglican Provincial Unit of Research 1994 (Nairobi).

[224] His Grace, the Most Rev. Dr. Manasses Kuria, was elected the second Archbishop of the church to succeed His Grace the Most Rev. Festo Olang' in 1980. In 1996, he retired and was only replaced in 1998 by His Grace, the Most Rev. Dr. David Gitari, who was elected as the third Archbishop. After Gitari's retirement, His Grace the Most Rev. Dr. Benjamen Nzimbi, succeeded him and retired in July 2009. Mzimbi was succeeded by His Grace, the Most Rev. Dr. Eliud Wambukala, in July 2009. It was when Gitari took over the leadership of the church that the name of the church was changed from the Church of the Province of Kenya to the Anglican Church of Kenya (ACK), because people had started to call it the *Church of the Politics of Kenya (CPK)*. This means that the name of the church has been changed from CMS (Church Missionary Society) to AC (Anglican Church), then CPK (Church of the Province of Kenya) and now ACK (Anglican Church of Kenya).

Nairobi in 1899 and Kisumu in 1901, other missionaries were able to penetrate the interior of Kenya.

Due to the abovementioned growth, the Anglican diocese was split into several dioceses, for it became impracticable for the whole country to operate as one diocese. Barrett *et al* (2001:428) affirms that by 1970, the Anglican Church had become the largest Protestant church in Kenya, a country where 84% profess Christianity. As of 2009, the Anglican Church of Kenya had twenty-nine dioceses, which include the Diocese of All Saints Cathedral (2002), the Diocese of Bondo (1999), the Diocese of Bungoma (1996), the Diocese of Butere (1993), the Diocese of Eldoret (1983), the Diocese of Embu (1990), the Diocese of Kajiado (1993), the Diocese of Katakwa (1991), the Diocese of Kirinyaga (1990) and the Diocese of Kitale (1997). Others include the Diocese of Kitui (1995), the Diocese of Machakos (1985), the Diocese of Maseno North (1970), the Diocese of Maseno South (1970), the Diocese of Maseno West (1985), the Diocese of Mbeere (1997), the Diocese of Meru (1997), the Diocese of Mombasa (1898), the Diocese of Mount Kenya Central (1984) and the Diocese of Mount Kenya South (1975). The remaining dioceses are the Diocese of Mount Kenya West (1993), the Diocese of Mumias (1993), the Diocese of Nairobi (1964), the Diocese of Nakuru (1961), the Diocese of Nambale (1987), the Diocese of Nyahururu (1998), the Diocese of Southern Nyanza (1993), the Diocese of Taita-Taveta (1993) and the Diocese of Thika (1998). [225] The table (5.2.3.2) below shows the statistical information of the Anglican dioceses of Kenya in the year 2010. In real sense, these are the resources the Anglican Church can use in the fight aganist HIV and AIDS in Kenya.

As the table (5.2.3.2) indicates, it can be noticed that within a period spanning 165 years, the church was able to establish several institutions and theological colleges such as 4,996 congregations, 1,352 parishes, 333 Deaneries, 142 Archdeaconries, 1,782, Primary schools, 547 Secondary schools, 184 Youth Polytechnics, and 69 Health centres (see table 5.2.3.2). Others include St. Paul's University in Limuru, St. Andrew's Theological College in Kabare, St. Paul's Theological College in Kapsabet, Berea Theological College in Nakuru, and St. Philip's Theological College in Maseno. The remaining are Bishop Hannington Theological College in Mombasa, as well as, the Church Army College and Trinity College both in Nairobi. [226] The Anglican Church of Kenya is also a member to the 80 million

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[225] "History of the Anglican Church of Kenya" at www.ackenya.org/history.html- 29th July 2010
[226] See -http://www.ackenya.org/institution.htm (30 April 2010).

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Anglicans worldwide,[227] which consists of thirty-eight provinces. This implies that the Anglican Church of Kenya is a member of the third largest Christian communion in the world after the Roman Catholic Church and the Eastern Orthodox Churches.

Table 5.2.3.2. The Anglican Church of Kenya statistical information for the year 2010[228]

Diocese	Number of Congregations	Number of Parishes	Arch_ Deaconries	Deaneries	Active members	Member not active	Primary Schools	Sec. Schools	Youth Polytechnics	Health Centres	Number of clergy
All Saints	16	11	3	4	8900	39900	4	0	0	2	69
Bondo	149	22	6	3	12915	78915	89	23	8	2	24
Bungoma	141	32	5	11	-	90000	25	6	4	0	44
Butere	161	40	4	13	54000	125200	51	15	1	6	32
Eldoret	255	45	4	13	250000	340000	145	32	2	2	65
Embu	110	44	6	13	55000	145000	52	30	5	0	69
Kajiado	100	22	0	5	9282	34282	8	0	4	0	28
Katakwa	205	40	5	11	99000	169100	42	10	3	3	37
Kirinyaga	210	102	5	25	150000	350000	60	38	8	15	134
Kitale	220	42	5	8	29836	79846	56	8	4	0	41
Kitui	189	44	3	10	9883	44883	11	2	3	4	27
Machakos	200	48	3	12	56000	125000	19	9	6	6	39
Maseno North	178	48	5	13	35000	115000	90	7	5	1	41
Maseno South	225	35	3	8	55000	142500	88	70	1	0	36
Maseno West	230	42	3	9	61000	153000	228	58	11	0	31
Mbeere	130	29	4	9	51131	121976	68	23	2	2	36
Meru	153	40	3	6	12972	43972	21	4	1	0	40
Mombasa	150	54	6	10	50100	141600	90	13	2	5	70
Mt. Kenya Central	358	100	11	28	150000	372000	124	76	2	0	112
Mt. Kenya South	209	120	9	26	81093	161095	67	26	1	0	152
Mt. Kenya West	160	50	3	14	27600	48600	18	7	4	0	39
Mumias	168	32	5	10	34000	69000	52	13	3	0	29
Nairobi	97	44	8	12	22060	67290	10	7	1	3	67
Nakuru	280	59	8	13	32457	98457	12	2	1	2	66
Nambale	206	32	5	12	90000	191000	75	12	5	1	35
Nyahururu	192	39	5	9	21000	77200	40	10	2	0	47
South Nyanza	148	21	3	6	15000	47250	52	11	11	1	19
Taita Taveta	142	61	7	14	64500	164500	80	23	3	0	69
Thika	149	54	5	18	27324	78324	25	152	1	2	57
TOTALS	**4,996**	**1352**	**142**	**333**	**1,565,056**	**3,711,890**	**1,782**	**565**	**184**	**57**	**1555**

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[227] See- http://www.ackenya.org/institution.htm (30 April 2010).
[228]The statistical information was compiled from general information available in several places like the diocesan Synod books, the Parish archives, diocesan offices and some were from the Anglican Provincial Unit of Research 1994 (Nairobi).

However, the greatest challenge in the Anglican Church of Kenya in terms of pastoral care and counselling is that the current clergy serving its members are very few to cater for the spiritual needs of the increasing number of PLWHA. Furthermore, it is clear that with the estimated members of about 3,711,890 only about 1,565,056 (42%) are active members while the rest 2,146,839 (58%) are not active in the life of the church. This means that the clergy were not able to offer proper pastoral care to about 2,146,839 effectively. Hence, there is need for the Anglican Church of Kenya to reassess her pastoral approach so as to engage the whole congregation in the ministry of care, especially to PLWHA and their families (see also 2.8).

5.3. Pastoral model, patriarchy and the ecclesial hierarchy

From the time the Anglican Church was planted in Kenya in 1844, it adopted the missionaries' model of pastoral care, which was exclusive. This partly explains why Krapf and Rebmann were able to convert only a few people (Nthamburi 1995:8). Interestingly, the Anglican missionaries who came after Krapf and Rebmann completely ignored the local cultures and adopted the exclusive method used by the colonial government. John Walsh (1994:14) notes that the classic eighteenth century model of Anglican pastoral care stressed the role of the clergy "not as priestly mediators between God and humanity dispensing the sacraments, but as pastoral educators, spiritual and moral teachers and guiders." This explains the reason these missionaries were forceful and assertive in whatever they did, for they regarded themselves as educators, spiritual leaders, moral teachers and guiders.

5.3.1 Model of exclusivity

Because of the above pastoral care approach that the missionaries adopted, it was assumed that everything they did or said was unquestionable and to be considered a dogma. Kibicho (2006:144) affirms that in their pastoral ministry, the African cultures and customs were regarded by both the missionaries and the colonial government as barbaric and pagan. This agrees with Mugambi (2002:8) who asserts that missionaries did not approve African social structures for they viewed it as "pagan, heathen, savage, primitive and barbaric." This means that both the Anglican missionaries and the colonizers shared the same myth of cultural superiority that regarded African cultures as inferior and inadequate (Kibicho 2006:144). For missionaries, the African cultural atmosphere was not favourable for the establishment of the kingdom of God, and for this reason, every effort was made to eradicate these "pagan,

heathen, savage, primitive and barbaric customs and practices" which were seen as being from the "kingdom of Satan."[229]

It is from the above perspective that the missionaries devised a programme on how to eradicate these "satanic customs" (cf. Cagnolo 1933:27). To uproot the traditional practices, a program was drawn depending on the category or the extent of the seriousness of the presumed evil in a particular practice. First are those beliefs and customs, which missionaries saw as inconsistent with European Christianity but which are not necessarily actively opposed to it; hence, they could be allowed to die a natural death (Macpherson 1970:105). Such include ancestral veneration, sacrificial systems and magic. The second category of customs, which was perceived as incompatible with colonial Christianity and was unacceptable to the missionaries, is polygamy and traditional dances. The missionaries regarded both as sexually motivating, hence, sinful (Macpherson 1970:105).

The last category relates to those customs, which the missionaries regarded as medically and hygienically dangerous and which ought to be uprooted straight away (Macpherson 1970:105). This includes initiation practices and the celebration entrenched in *Ũtugi*. Bediako (1992:234) affirms that the goal of these missionaries was to produce replicas of European models. In other words, they aimed at producing "Black European in the African continent" who would emulate the type of Christianity that was lived and practised in Europe.
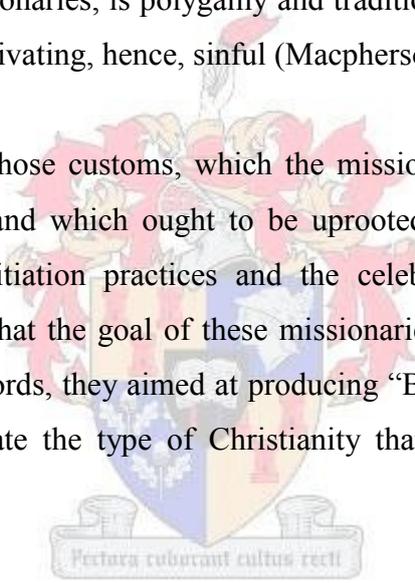
Even in the education sector, categories were put in place for Africans. While the colonial government was unwilling to support African education, the missionaries offered to educate Africans in their Christian mission schools even though they gave them conditions for admission. For instance, Keller explains that:

> To attend mission schools one had to accept Christianity and abandon what were viewed by the missionaries as "primitive tribal traditions." By the 1920s the colonial government attempted to further structure African education so that the emphasis was more on trade or practical; education than academic education. African generally accepted the idea of formal education, but some came to reject the efforts of Europeans to impose their own interpretation of Christian doctrine on Africans and emphasis on non-academic education. Nowhere was this reaction more dramatic than among the Agĩkũyũ people and European missionaries over the custom of female circumcision. This rite was so important to (them)

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[229] Blackslee and, indeed, other missionaries viewed African cultures as a part of the kingdom of Satan and, to establish the Kingdom of God, they had to uproot this kingdom of Satan first. This is well exhibited in the ignorance of Fr. Cagnolo as well as other missionaries, who say, "It is an obligation on us civilized peoples to put these fantasies to flight and to lighten their darkness with the sun of justice and the stars of civilization" (Cagnolo 1933:27).

that they preferred to separate themselves completely from the European-run missions and schools and to begin their own religious and educational institutions (1983:56).

In order to safeguard the *Athomi* (the first Agĩkũyũs converts who also helped the missionaries with the local language) from the influence of the society, the missionaries allocated them some plots near the mission stations where they were allowed to build their homes. They were also given small pieces of land to cultivate near the mission so as not to mix with the unconverted members of their community. With this exclusive approach to pastoral care, the missionaries assumed that they would be able to instil proper "Christian lives" without the influence of the "heathen culture" (Murray 1974:23). Ramathate T.H Dolamo explains that:

> One of the most efficient ways of emptying Africans of their Africaness was to establish mission stations. The new converts would be removed from their communities and villages. They were not only expected to forsake their religion but also required to shun their culture, starting with their cloths and attire in general. Converts were given an opportunity to acquire missionary education, Western civilisation and culture and in turn, they were required to do manual work, often without wages. This included erecting church building and personages as well as ploughing fields belonging to missionaries (2008:233).

It is astonishing to note that many of the missionaries adopted the exclusive model of pastoral care because they lacked advanced theological education. Murray (1974:23) notes that most of the missionaries had only high school education with one or two additional years in Bible school. It also means that they had little or no training in intercultural studies; therefore, they were not acquainted with the pastoral hermeneutical model. Murray (1974:23) further states that, in their orientation courses, most of the missionaries who came to Africa received only lessons on the interpretation of the Scriptures. Moreover, some of these missionaries were against intellectualism and were suspicious of anything done by an African. According to their understanding, they had come to Kenya to teach and convert, and not to learn or to be taught by converts (Murray 1974:23). It is no wonder that such an approach prevented them not only from acquiring the knowledge of *Ũtugi* as practiced in the Agĩkũyũ culture but it also prevented them from improving their linguistic competence. They were totally ignorant of the rudiments of the Agĩkũyũ culture.

Therefore, it is no wonder that most of the missionaries knew very little of the Agĩkũyũ *Irũa* (initiation) other than the physical operation. This aspect of *Irũa* came to their attention because it was the dramatic climax of a long process embedded in *Ũtugi*. Certainly, the male operation was familiar to them, as it was practised in some parts of the West, but the

female operation or clitoridectomy was something strange. Murray (1974:23) observed that, it was only in 1915 when some of the Agĩkũyũ started attending the mission hospital that the missionary doctors noticed the physiology of clitoridectomy.

These mission doctors became convinced that the operation was unnatural and gave reasons for opposing it. For example, they claimed that it obstructs childbirth as the scar tissue left by the operation could reduce the elasticity of the pelvic muscles during childbirth, causing the death of the newborn or the mother (Murray 1974:24). In view of Langley and Kiggins (1974:159), these revelations enabled missionaries to interpret the Agĩkũyũ *Irũa* (initiation) for both males and females as pagan and evil, comparable to witchcraft, polygamy, beer drinking, and so on. In addition to the above, the missionaries declared the Agĩkũyũ *Irũa* (initiation) as incompatible with Christianity and, for that reason, all the *Athomi (*African converts*)* were to abandon it and make their ideas and belief align with missionary thinking (read *assimilation*).[230]

By 1929, the Anglicans, the Presbyterians, the Methodists and all other Protestant missionaries agreed on one thing, they had to identify the loyal Christians by circulating loyalty declaration forms among their Agĩkũyũ converts (Murray 1974:24; Macpherson 1970:105). In this case, the Agĩkũyũ converts were to sign these forms as a proof of loyalty to the church and as a proof that they agreed to abandon those "barbaric initiation rituals" (Murray 1974:100). The missionaries were flabbergasted to see that majority of the Agĩkũyũ converts were not ready to sign the forms. As a result, they excommunicated them from their mission churches and expelled their children from the mission schools.[231] As for the Agĩkũyũ community, they felt that their culture was more important to their survival and they were not ready to trade it for European Christianity.

Such an exclusive approach to pastoral care and counselling was not received well by the Agĩkũyũ. On the issue of initiation, Leakey (1931:277-285) contends that the problem was

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[230] Besides the Agĩkũyũ *Irũa,* the Anglican missionaries condemned other social and religious practices such as payment of dowry, widow inheritance and sacrificial offerings, which were seen as non-Christian. For instance, Arthur, Philip and Hooper who worked as missionaries among the Agĩkũyũ saw women circumcision as simply a disgusting ceremony, which was totally incompatible with Christianity. Langley and Kiggins (1974:159) remark that they looked at it "scientifically and were blinded to the social implication of their injunction." In addition, Kenyatta (1962:84-88) laments that polygamous men were forced to renounce all their wives except one in order to become Christians.

[231] Kibicho explains that the missionaries refused to assist these breakaway Agĩkũyũ Christians in the training and ordaining of their own clergy. They, therefore, hired Archbishop William Daniel Alexander of the African Orthodox Church of South Africa (to ordain their clergy). Their first group of clergy was ordained in 1936, thus, marking the full establishment of (Agĩkũyũ*)* Independent Churches (2006:144-145).

attributable, in part, to the linguistic incompetence of the missionaries. For instance, the word virgin, even in reference to the Virgin Mary, was translated into Agĩkũyũ language and found in the Bible as *Mũirĩtũ*. In the Agĩkũyũ language, this word has only one clear meaning, "an unmarried but initiated woman" (Leakey 1931:277-285). Therefore, if the mother of Jesus was *Mũirĩtũ* as translated in the *Ibũkũ rĩa Ngai* (the Bible in Agĩkũyũ), it means she was initiated. [232] This is because the word for uninitiated woman in the Agĩkũyũ language is *Kĩrĩgũ*. Without considering this kind of linguistic problem, the Agĩkũyũ felt that the European missionaries were not sincere in their teaching and in their pastoral ministry. Between the 1920s and 1930s, several mainline churches almost closed down completely due to the above controversy. In response, the Agĩkũyũ set up their own independent churches and schools as they felt that the church was propagating the interest of the colonial government and was ready to distort their socio-economic and political setting.[233]

Kibicho (2006:144) also notes that the Agĩkũyũ established their own schools because they felt that the missionaries and the government were using *Gĩthomo* (western education) as a form of enslavement. This was clearly seen in the case of missionaries who collaborated with the settlers to force the colonial government to make policies that limit the education of Africans so that they would remain "a sure and perpetual source of cheap labour" on their farms (Kibicho 2006:144). [234] Similarly, the local communities felt that they were being regarded as objects of assistance as they were being domesticated to serve the interests of the colonial administration (Kibicho 2006:144). This prompted them to think of ways that could liberate them from the exclusive models of the missionaries and the colonial government. The uniqueness of these independent schools was in their liberal methods of teaching. They taught using a more open and inclusive approach without fear of what was being imparted to the learner, unlike in mission schools. Indeed, these schools were willing to use the English language even in the lowest grades, unlike mission schools, which used only Kiswahili. Thus, any pupil or teacher who sought unrestricted knowledge opted for these schools (Musalia 2001:40).

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[232] The term, Virgin Mary in *Ibũkũ rĩa Ngai* (as the Bible is called in Agĩkũyũ language) is translated as *Mũirĩtũ,* which in Agĩkũyũ means an unmarried intiated woman.

[233] For this reason, most churches, e.g. Anglican, Scottish Presbyterian and Methodist, revised their policy and resorted to silent compromise in order to keep their members while some others such as the Catholic Church adopted silent diplomacy as a way of maintaining their adherents.

[234] As Musalia (2001:40) relates, on return from England in 1946, Kenyatta was bestowed with enormous socio-political responsibility when he was made the leader of Kenya African Union (KAU) in 1946 after James Gichuru resigned as President of the party in his favour. Later in 1947, Mbiyu Koinange resigned as the principal of *Githunguri* Teachers college so that Kenyatta could take over (cf. wa Thiong'o 2010:138). The college had been opened through the initiative of both Mbiyu and Kenyatta in 1931 to train teachers for the independent schools. With political activist like Kenyatta and Mbiyu, Rironi School had become a centre of political training for Africans. Independent schools as well as independent churches became the most active political forums where teaching and preaching went beyond the set limits into politics (Musalia 2001:40).

Thus, local communities started organising themselves and, through *Ũtugi,* they raised money to start the African independent schools such as the Agĩkũyũ Independent Schools Association and the Agĩkũyũ Karinga Independent Schools Association (Kibicho 2006:144). In fact, these schools were not controlled by the missionaries or the government; instead, they were managed by the local communities and their leaders. The community, through the solidarity and unity entrenched in *Ũtugi*, made bricks for classrooms, collected fees for poor children, and raised money for teachers' salaries. Interestingly, the schools had their own curriculum and taught any kind of subject without being controlled by the church or the government (Kibicho 2006:144-145).

Another striking thing is that these schools went hand-in-hand with their churches, because they believed that education, religion and politics go together. The independent schools were located in many parts of Kenya and could be found as far as the Kamba area of Ukambani and as far west as the shores of Lake Victoria, among the Luo, Luhyia, and Kisii peoples (Keller 1983:57). Moreover, because the formations of these African independent schools were based on religious, political and cultural factors, they became a threat to the colonial government. Keller (1983:57) observes that because of the way they flourished, these schools and churches were "closed by the colonial government in 1952, because they were suspected of providing a forum for the anti-colonial, subversive activities of the *Mau Mau* movement (freedom fighters)."

As opposed to the above method, the missionaries approached the task of educating the Africans from their own western cultural perspective. Waruta says that:

> The missionaries developed an education system according to their own cultural, theological and philosophical backgrounds. Their educational systems were actually meant to create a new African in the missionary's own cultural, theological and philosophical image. Culturally, the missionaries believed that they represented a superior culture to be swallowed by their students in total. Everything the African did was regarded as primitive, dirty or barbaric. Everything European was to be imitated as superior, progressive and noble (1994: 129).

It is no wonder that Dube (2000:14) concludes that the Christian mission of the eighteenth and nineteenth centuries was inseparable from "European cultural imperialism" and that it was understood as a westernisation process. This feeling was also expressed by the Agĩkũyũ who saw no distinction between the colonisers and the missionaries and regarded them as forces of imperialism, which were ready to invade and conquer them. Mugambi states that:

> To Africans there was no obvious distinction between missionaries, administrators, settlers, merchants, soldiers and specialised professionals such as doctors, engineers and architects – they were all Europeans. After all, despite the provision in the Berlin Treaty (which was reaffirmed in 1919), a missionary society was not expected to undermine the commercial and political interests of the colonial power controlling the territory where their society operated. Conversely, any society which facilitated effective colonization was more likely to receive reciprocal co-operation from the colonial administration. It was therefore in the interests of most missionaries not to antagonize the colonial administrators by appearing to take sides with the colonial subjects who were their prospective converts. Many Africans viewed this missionary attitude as hypocrisy, much to the discredit of the modern missionary enterprise (1989b: 23).

The above explanation has several implications for the Anglican pastoral ministry in Kenya and its relationship with western ethnocentricism. Accordingly, the Agĩkũyũ saw this pastoral approach as indissoluble from colonialism. As already seen above, their approach, motives, and method of pastoral care were questionable and redundant, as they were not contextual. Their images of God, Africa and Africans negatively affected their theoretical approach to pastoral ministry. Hence, negative experiences compelled people like Ngũgĩ wa Thiong'o, the renowned Kenyan novelist, to refer to the missionaries as "the colonial spiritual police" (wa Thiong'o 1972: xvii).

Various writers, from non-Christian as well as Christian traditions, have also attempted to articulate the link between missionary pastoral ministry and colonialism. The writers represent various interrelated disciplines such as historical anthropology (Comaroff and Comaroff 1991), post-colonial biblical criticism (Dube 2000), church history (Nthamburi 1995), pastoral theology (Louw 2008), African theology (Mbiti 1969; Bediako 1992) and missiology (Bosch 1991). Bosch (1991:304) explains that, "As it became customary for British missionaries to labour in British colonies, French missionaries in French colonies to be regarded as both vanguard and rearguard for the colonial powers…Whether they liked it or not, the missionaries became pioneers of Western imperialistic expansion."

The Anglican missionaries and colonial administrators had one thing in common; the missionaries appealed to their governments at home countries to establish protectorates in their mission field, "often with the argument that unless this happened, a rival colonial power might annex the territory" (Bosch 1991:305). It is from that perspective that Mugambi (1989b:132) argues that to *colonise* is to '*missionalise*' and to '*missionalise*' is to *colonise*. It can as well be interpreted as to *colonise* is to *pastoralize* and *to pastoralize* is to *colonise*. In other words, the practice of pastoral care and counselling and the colonial policies had become so intertwined that it was difficult for the Agĩkũyũ to differentiate between a

missionary and a colonialist.[235] Furthermore, both the colonisers and the missionaries were using an exclusive model. They worked in the community but they were filled with ethnocentrism.[236] Wa Thiongo (1993:33) points out that the African independence was about people's struggle to claim their own space, and their right to name the world for themselves, rather than be named through the colour-tinted glass of the Europeans. In the context of pastoral care, Hoppers describes this continuing struggle plainly in the following way:

> The African voice… is the voice of the radical witness of the pain and inhumanity of history, the arrogance of modernisation and the conspiracy of silence in academic disciplines towards what is organic and alive in Africa. It is the voice of 'wounded healers' struggling against many odds to remember the past, engage with the present, and determine a future built on new foundations. It invokes the democratic ideal of the right of all to 'be', to 'exist', to grow and live without coercion, and from that to find a point of convergence with the numerous others. It exposes the established hegemony of Western thought, and beseeches it to feel a measure of shame and vulgarity at espousing modes of development that build on the silencing of all other views and perceptions of reality. It also seeks to make a contribution to the momentum for a return of humanism to the centre of the pastoral care, and dares pastoral carers to see the African not as a bundle of Pavlovian reflexes, but as human being culturally and cosmologically located in authentic value systems (2001:1).

Bediako (1992:225-228) reminds us that ethnocentrism affected the motives and methods of the missionaries and colonial administrators. The missionaries who came to Africa were already conditioned by the fact that until the nineteenth and twentieth century missionary era, the West's experience of Africa had been in the context of the slave trade. This made the missionaries to perceive Africans as inferior beings. Influenced further by the ideology based on distorted teachings of the *Great Chain of Being,* the missionaries attempted to rank Africans the lowest category of human beings, below the "White," "Red" and "Yellow" races (Bediako 1992:227). In other words, the image of Africans that missionaries brought was one of uncivilized heathens, with no culture and with religion that lacked monotheistic conception of God. The above understanding of Africans informed the missionaries model of pastoral care; thus, they regarded the *Athomi* (African converts) as a "*tabula rasa* on which a wholly new religious psychology was somehow to be imprinted" (Bediako 1992:226). However, the missionaries remained "blind to their own ethnocentrism" as they continued to reshape "the entire world in the image of the West" (Bosch 1991: 292).

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[235] In most cases, the Christian missionary enterprise in Africa was viewed by local people as invasion. This is partly because missionaries alienated the land from local populations to establish mission stations and partly because missionaries sought protection from their respective colonial authorities to guarantee their security (Mugambi 1998:36). Of course, it is ironical because, how could local populations consider the missionaries as preachers of good news when their presence was perceived as invasion? Therefore, for many decades, the *Athomi* (converts) were locally regarded as "traitors for the community saw them as if they were siding with the "enemy." It is this perspective that led to the massacre of Baganda converts in the 1880s (see J F. Faupel 1984. *African Holocaust: The Story of the Uganda Martyrs.* Nairobi: St. Paul Pub; David B. Barrett 1968. *Schism and Renewal in Africa*. London: Oxford University Press; A.J. Temu 1972. *British Protestant Missions.* London: Longman).

[236] Ethnocentrism is a tendency to view people unconsciously by using one's own group and customs as the standard for all judgements. We place ourselves, our racial, ethnic or social group at the centre of the universe and rate all others accordingly.

The above discussion shows that the motives of the Anglican missionaries included the desire to create docile subjects for the colonising powers with whom they worked hand-in-hand. Further, the colonial state enforced "physical obedience with the aid of punishment and laws", while the mission secured "the inward servility and devotion of the natives" (Bosch 1991:306). It is no wonder, therefore, that we begin to regard the role of pastoral care in Africa as liberating the church from foreign ecclesial structures that it has acquired - a view that is shared by other theologians such as Louw, Mbiti, Idowu, Bediako, Nthamburi, and Mugambi among others.[237] The above also explains why the Anglican Church failed to use many elements of *Ũtugi* in her ecclesial praxis, even though the church had an opportunity to interculturate it in her pastoral care and counselling in order to address the existential issues facing her adherents.

With the advent of the independent schools and churches in Kenya, many changes occurred in the life of the Kenyan. During this period, the principles of *Ũtugi* that advocate solidarity and care for one another were used as a tool of liberation from British colonialism and colonial education. The principles of solidarity and care embedded in *Ũtugi* were used for the first time to build institutions such as schools and churches. Unquestionably, the use of the exclusive model of pastoral care by the Anglican missionaries prompted the above response. Surely, the manner in which the missionaries handled *Ũtugi*, their invocation of the oppressive colonial government, and the perceived demand that the Agĩkũyũ converts *(Athomi)* "traded" their *Ũtugi* for "Christianity", appeared domineering and inappropriate, given the political temperature of the time. Furthermore, the few educated Agĩkũyũ converts *(Athomi)* found that the Gospel of Jesus, as presented to them by western missionaries, contradicted some western cultural values and that instead of condemning African customs, the Old Testament seems to affirm some of these customs.

The Agĩkũyũ converts *(Athomi)* also found that the Early Christian church experienced a conflict between the Jewish and Gentile converts, which was related to culture (see Acts 15:6-19). After reading the Bible, these Agĩkũyũ converts saw that the way the western missionaries imposed their culture on them was the same way the Jewish converts imposed their culture on the Gentiles converts in the name of the Gospel (Acts 15:6-19). They also observed that the "Christian versus heathens" model of pastoral ministry of colonial

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[237] We will revisit this discussion later in this chapter.

Christianity was contrary to the New Testament approach to pastoral ministry in which apostles such as Paul, Luke and Barnabas were able to make new converts and these converts were allowed to live within their communities.

They also noticed that as the western missionaries were forcing them to abandon their culture, so the Jewish Christians were forcing the Gentiles Christians to discard their cultural practices and to regard them as incompatible with the Gospel. To their surprise, the Agĩkũyũ converts discovered that Paul defended the Gentile converts and argued that they should not be forced to undergo the Jewish circumcision ritual as a condition for becoming Christians. As such, they found that Paul's argument, which was endorsed by the Council of Jerusalem in 49 A.D. (Acts 15:6-19), was in line with their understanding of the Gospel. Therefore, their conclusion was that the approach of the Anglican missionaries to pastoral care was totally against the teaching of the Council of Jerusalem's edict of 49 A.D. (Acts 15:6-19) and it was inappropriate to their African context.

As the missionaries left, some of the residuals of the colonial era remained in the Anglican theological colleges and in the church administrative practice. Githiga (2001:47) observes that the church decisions on many issues concerning Africans continued to be made in Europe while the western theology that was brought by the missionaries was regarded as the official theology of the church even when it was inappropriate to the African context. This theology dominated the curriculum of the theological colleges.[238] For example, Msomi (2008:28) observes that the clergy were taught homiletics based on "western methodology and skills, which have evolved in a western milieu and was profoundly influenced by the western philosophical trends."

For Msomi (2008:28), the teaching in these theological college dictates that even the "sermon has to fall within acceptable three-phased substructure perceived to be the outcome of a rigid exegetical work on the text" and its "delivery is expected to be logical and controlled." The clergymen graduating from these colleges were posted to serve in rural areas, where they found that they lacked language and pastoral skills to minister (cf.

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[238] The major problem facing the Anglican theological colleges today is that its curriculum focus on theological thoughts of people like Schleiermacher, Bultmann, Barth, Tillich, Karl Rahner and others rather than those of African theologian like Louw, Idowu Mugambi, Mbiti, Gitari, Nthamburi, Tutu, Kwesi, Nyamiti, Bediako, Nthamburi, Kwesi Dickson. Yet these African theologians understand the real need of the African Church better. Surprisingly, courses like the African Traditional Religion (ATR) are omitted in the curriculum (such challenge was observed by Moses Njoroge (2005) in his research "*The Relevance of Theological Education: training for Ministrial Formation in the Anglican Church of Kenya.*"

Dickson 1984:13). In short, they realised that they could not preach the gospel to the rural congregations through *Summa Theologiae* of Thomas Aquinas[239] or the *Church Dogmatics* of Karl Barth as taught in the seminary.[240] These African Anglican clergymen learnt that in the African traditional world, religion permeates the whole life of the community, while in the western philosophy, theology does not address life in totality. They were also astonished to discover that in the celebration of Christian liturgy, African symbols and images were totally ignored (cf. Magesa 2004:163). In fact worship, was (is) done using the *1662 Book of Common Prayers* and the *English Hymn Book,* which were imported from Europe and translated into local languages, ignoring the African forms of prayer and music (Githiga 2009:65; cf. Ndungu 2008:72 ; Dickson 1984:13). We shall now look at the way exclusivity was entrenched in the ecclesial hierarchy of the Anglican Church of Kenya.

5.3.2. Patriarchy and ecclesial hierarchy of exclusivity

The Anglican Church of Kenya, like other churches in the Anglican Communion, is structured in the same hierarchical manner as the Mother, the Church of England. In this tradition, the Archbishop has the highest authority and the bishops head the independent dioceses (Githiga 2009:115-117). Most, not all, of the Anglican dioceses use the *Book of Common Prayers*[241] and assent (at least in theory) to the *Thirty-Nine Articles* of *Religion*, the major symbols of doctrinal[242] and liturgical unity in the Anglican Communion (Githiga

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[239] Thomas Aquinas was an influential theologian and philosopher of the thirteenth century. His philosophical works include *Commentaries on Aristotle*; *On Being and Essence;* and *On the principles of Nature.* Additionally, in the field of theology, he had three most outstanding works namely *Commentary on the Sentences* (of Lombard); *Summa contra Gentile,* and *Summa Theologiae.*

[240] Such a discovery was also made by Kosuke Koyama of Japan who, at that time, was a missionary in Thailand. When going to preach to the local congregation one Sunday, he discovered that his Western theology was not relevant to the people and he heeded Paul's words in 1 Cor 9:19-23: "For though I am free from all persons, I have made myself a slave to all... I have become all things to all persons... for the sake of the gospel." As such, his theological education went through a paradigm shift for he realised that he did not only need to read it in library volumes, but also hear it in the field where people were ploughing with their water buffaloes or thatching their leaking roofs. This was how his first major theological work was born, which was based on what he called *"the water buffaloes' theologies"* (see Koyama 1974).

[241] Through Henry VIII broke from Rome, it was under King Edward VI and especially Elizabth I that the Church of England as a distinctive Protestant church was officially formed. The Book of Common Prayer was published in 1559 and Parliament passed legislation and those who refused to attend the English Church service were fined, and Catholic persecuted. The aim of these measures was to construct the identity of English Christianity and the community of the English nation, defined against Rome in the wake of the Reformation (Hartung and Deschner 2004:60). Early in its development, the Anglican Church developed a vernacular prayer book (also called the *Book of Common Prayer)*. Unlike other traditions, Anglicanism has never been governed by *a magisterium,* by appeal to one founding theologian, or by an extra-credal summary of doctrine such as the Westminster Confession of the Presbyterian Church. Instead, Anglicans have typically appealed to the *Book of Common Prayer* and its offshoots as a guide to Anglican theology and practice. This had the effect of inculcating the principle of *lex orandi, lex credendi* ("the law of prayer is the law of belief") as the foundation of Anglican identity and confession. This liturgical book has been in use for centuries in all the provinces of the Anglican Communion. The brain behind the book was the Archbishop of Canterbury, Thomas Cranmer. The writing took place when England and other continental European countries were seeking for religious and political freedom from the Pope and the Roman Empire. Church leaders and scholars were looking for freedom from those European countries who were looking for freedom from Roman Catholicism. The book was sanctioned by the British parliament through the Act of Uniformity during the reign of King Edward the sixth. It was put into use on Whitsunday on 9 June 1549. The second edition was put to use in 1552 and the third edition in 1662 after the second one had been used for over a hundred year. The 1662 liturgy book is the one used in the Anglican Church of Kenya even though Archbishop Gitari launched the Kenyan Anglican Modern Service book of Common Prayers in 2002. Since the 1662 liturgy book was the first to be introduced by the early CMS missionaries in Kenya when colonialism penetrated the country, many church leaders have declined to use the modern liturgy because they see the 1662 edition as synonymous with the Bible and the two are regarded as sacred (Githiga 2009:66).

[242] In his New Castle University doctoral thesis, "*Ways of Knowing in the Anglican Eucharistic Tradition: Ramifications for Theological Education"*, Brian Douglas (2006) examined the Anglican Eucharistic theology and its tradition from the time of Reformation to the present

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2009:66). [243] Although all Anglican Churches are affiliated to the Anglican Church in England and are under the aegis of the Archbishop of Canterbury, each local Anglican Church is independent in constructing and shaping its own ways.

In other words, each Anglican Church has its own constitution, which is consistent with other Anglican constitutions, but contains its own special sections tailored to local conditions and the specific needs that grow out of them. Moreover, each Anglican Church has the authority to interpret the Anglican theology and, to some degree, construct its own theology, within the loose, accepted boundaries of the Anglican Communion (Githiga 2009:115-116). Unlike other global denominations which have a centralized seat of power and authority mandating the global policies and actions of the denomination, the Anglican Communion is a loose (though formalized) association between a number of independent and autonomous units known as provinces, each of which is presided over by an elected Archbishop. [244] The provinces are governed internally by a *Provincial Synod* and membership of this body comprises the Archbishop, elected clerical and lay representatives from each diocese (Githiga 2009:105). The Provincial Standing Committee meets every two years to address matters

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day. He documented a large amount of case study material including case studies on two Archbishops of Canterbury. Douglas (2006:269) contends that the way forward for Anglican theological education is a dialogue approach (based on the theory of communicative action as set out by the contemporary German philosopher Jurgen Habermas. He also argues that the Anglican Eucharistic theology is often too closely tied to the particular technical and hermeneutic interests of the various church parties within the Anglican tradition (e.g. Anglican Evangelicals or Anglican Catholics). These narrow interests have sometimes limited critical interest in theological education and in the Anglican Eucharistic tradition (Douglas 2006:269). Douglas' (2006:269) major conclusion is that the Anglican Eucharistic tradition is multiform, that is, it is not found in one uniform life world or expression. Moreover, the multiform character of the Anglican Eucharistic tradition centres on the philosophical assumptions of realism and nominalism in a moderate degree (Douglas 2006:270). He reached this conclusion after investigating the work of several contemporary philosophers and, finally, used the work of David Armstrong (formerly Challis Professor of Philosophy at the University of Sydney, Australia) to construct a model of *Eucharistic theology* based on the distinction between realism and nominalism to the moderate and immoderate degrees. This is an attempt to create an inclusive model of Eucharist in the Anglican Church.

[243] The following are some of the recent books, which provide clear insight into Anglicanism: Paul Avis 2000. *The Anglican Understanding of the Church: An Introduction.* Edinburgh: SPCK (this book provides concise treaties in Anglican ecclesiology, its spirit, source, shape and appeal and contains a useful up-to date bibliography). Paul Avis. 2002. *Anglicanism and the Christian Church.* London: T and T Clark (here he provides a detailed historical discussion from the sixteen century to date, with a focus on the development of the doctrine of the Anglican Church). Bradshaw, T (ed). 1996. *Celebrating the Anglican Way.* London: Hodder and Stoughton (this is another book, which contains a collection of essays that looks at aspects of Anglican beliefs, ethos, worship, sacraments and prayer). Of importance to this study is John Pobee. 2000. *Invitation to be an African Anglican.* Accra: Asempa (in this book, Pobee explores all the basic foundations of Anglicanism from an African perspective and challenges the church to indigenize the traditions so that its identity becomes authentically African).

[244] The Anglican Communion consists of thirty-eight provinces, which include the Anglican Church in Aoteroa and Polynesia, the Anglican Church of Australia, the Church of Bangladesh, the Igreja Episcopal Anglicana de Brasil (Anglican Episcopal Church of Brazil), the Anglican Church of Burundi, and the Anglican Church of Canada. Others include the Church of the Province of Central Africa, the *Iglesia Anglicana de la* Region Central America (Anglican Church in the Central Region of America), the Province *de l'Eglise Anglicane Du* Congo (Province of the Anglican Church of Congo), the Church of England, and Hong Kong Sheng Kung Hui (Hong Kong Anglican Church (Episcopal). Other provinces are the Church of the Province of the Indian Ocean, the Church of Ireland, the *Nippon Sei Ko Kai* (the Anglican Communion in Japan), the Episcopal Church in Jerusalem and the Middle East, the Anglican Church of Kenya, the Anglican Church of Korea, the Church of the Province of Melanesia, and the Anglican Church of Mexico. Included also are the Church of the Province of Myanmar, the Church of Nigeria, the Church of North India, the Church of Pakistan, the Anglican Church of Papua New Guinea, the Episcopal Church in the Philippines, the Church of the Province of Rwanda, the Scottish Episcopal Church, and the Church of the Province of South East Asia. The remaining provinces include the Church of South India. the Anglican Church of Southern Africa, the Anglican Church of Southern Cone of America, Episcopal Church of the Sudan, the Church of Tanzania, the Church of Uganda, the Episcopal Church of the United States of America, the Church in Wales, the Church of the Province of West Africa and the church in the Province of West Indies. It is important to note that all provinces in the Anglican Communion are independent and each has its own primate and governing structure. The provinces may take the form of national churches such as Uganda Canada or Japan, or a collection of nations such as West Indies, Central Africa and Southern Asia.

arising during the two interim years. The dioceses cover varying geographical areas, some in rural areas and others in urban area.

Subsequently, each diocese determines its own operating procedures (Githiga 2009:115-116). In fact, even the Anglican Archbishop as the head of the province cannot force the bishop to implement the decisions made at the provincial level. The individual diocese decides what to implement and what not to implement; not only on matters concerning the HIV and AIDS pandemic but even in other ecclesiastical matters. For instance, the Anglican Diocese of Sydney has categorically refused to ordain women, despite the Anglican Communion in Lambeth Conference that endorsed the ordination of women in 1978. The Anglican Diocese of Mombasa in Kenya only agreed to ordain its first three women on 17 Oct 1999 after most of the other 28 dioceses had already done so. Another example that shows the autonomy of each Anglican diocese is seen in the fact that most of the Anglican dioceses in Africa have refused to acknowledge the ministry of homosexuals, unlike their counterparts in Europe and North America (Githiga 2009:116). This indicates that the power of the Anglican Church does not rest on the Archbishop of Canterbury but on individual Anglican dioceses.

Even though all the Anglican bishops and Archbishops worldwide gathered at the Lambeth Conference in England every ten years to discuss matters of theology, this is interpreted as mere fellowship.[245] In fact, the long interval (ten years) between conferences means that the Anglican Communion is slow to make changes, even though each individual diocese makes and implements its own decisions. For instance, the Anglican Archbishop of Canterbury appointed Archbishop Ndungane of South Africa in 2001 to lead the Anglican Worldwide Communion in fighting the HIV and AIDS pandemic. However, even after meeting at Boksburg (at the *All Africa Anglican Conference - AAAC*) with 33 bishops of African nations, many Anglican Provinces did not adhere to the strategic plan laid down. It was only in 2002 when the Archbishop Ndungane pushed the Primates of the Anglican Communion to issue the statement on HIV and AIDS, that they were able to confess the failure of the church to fight the HIV and AIDS pandemic in Africa. They lamented thus:

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[245]One weakness of the above ecclesiastical model is the lack of doctrinal formations. It is clear that the Anglican Church lacks a single source of doctrinal authority and, perhaps, a core doctrine (Anglican Strategic Plan on HIV and AIDS 2008:4). The Anglican Church has not charged anyone with the task of maintaining sacred doctrine as the Catholic Church has done (Anglican Strategic Plan on HIV and AIDS 2008:4), although various resolutions were made at Lambeth to give guidance to members. The Communion is held together by the "*Instruments of Unity*", which include, the Archbishop of Canterbury, the Anglican Consultative Council, the Lambeth Conference and the Primate Conference (Anglican Strategic Plan on HIV and AIDS 2008:4). In addition, the Anglican Communion is further bound by what is known as the *Lambeth Quadrilateral* which comprises the sacraments of the Holy Communion and Baptism, the Scriptures, the Creeds and the Episcopacy (Anglican Strategic Plan on HIV and AIDS 2008:4). While provinces debate a number of issues at the various forums and make decisions as a Communion, these decisions are discretionary rather than mandatory.

> We raise our voices to call for an end to silence about this disease – the silence of stigma, the silence of denial, the silence of fear. We confess that the church herself has been complicit in this silence. When we have raised our voices in the past it has too often been a voice of condemnation. We now wish to make it clear that HIV and AIDS is not a punishment from God. Our Christian faith compels us to accept that all persons, including those who are living with HIV and AIDS, are made in the image of God and are children of God (PSP 2002:1).

From this background, the Anglican Provincial Strategic Plan (PSP) was circulated to all the dioceses in July 2002. The document prioritised the following:

> (i) HIV-specific pastoral care education for clergy and lay leadership; (ii) Coordination for HIV and AIDS programming and development within each Diocese; (iii) The development of AIDS-specific leadership within each Diocese and congregation; (iv) The expansion or development of community or parish-based responses to support and care for orphans and vulnerable children; (v) The study and ongoing discussion on issues and policies or guidelines on care and support for orphaned and vulnerable children within the church; (vi) The development of appropriate and effective workplace programmes that ensure the rights of people (clergy and laity) living with AIDS; (vii)The development of age-appropriate, culturally sensitive materials for sexual education in the church; (viii)The study and ongoing discussion of issues, policies and guidelines surrounding death and dying (Anglican Strategic Plan on HIV and AIDS 2002:4).

The challenge faced by the Anglican Communion is that such a strategic plan can be ignored by the bishops, and the Archbishop of Canterbury cannot force them to implement it because he has no authority over their dioceses. In other words, the role of the Archbishop of Canterbury is strictly symbolic and unifying. Although the Anglican Communion has four international bodies, it is clear that they only act as consultative and collaborative bodies. This implies that their resolutions have no legal effect on the independent provinces or dioceses of the Communion even though all the churches in the Communion participate in them.[246] These four bodies include:

> (1) *The Archbishop of Canterbury* (*ab origine*) functions as the spiritual head of the Communion. He is the focus of unity, since no church claims membership in the Communion without being in communion with him. The present incumbent is Dr Rowan Williams. (2) *The Lambeth Conference* (the first met in 1867) is the oldest international consultation. It is a forum for bishops of the Communion to reinforce unity and collegiality through manifesting the episcopate, to discuss matters of mutual concern, and to pass resolutions intended to act as guideposts. It is held roughly every ten years and invitation is by the Archbishop of Canterbury. (3) *The Anglican Consultative Council* (first met in 1971) was created by a 1968 Lambeth Conference resolution, and meets

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[246]It is noted that different groups within the Anglican Communion understand the Eucharist differently. For instance, Crockett (1989:12) observes that in the Anglican Eucharistic theology, the "Low Anglicans" (Anglican Evangelicals) and the "High Anglicans" (normally called the Anglo-Catholics Anglicans or Anglican Catholics) hold divergent views and practices, each group reflecting the essential comprehensiveness of its tradition. William R. Crockett (1989:12) notes that the Low Anglican Church is inclined to a Zwinglian ethos, and they hold strict memorialist view of the sacrament. The Anglican Church of Kenya, of Uganda and of part of Tanzania all belong to the Low Anglican Church. This, therefore, means that, like their sister Low Anglicans worldwide understand Holy Communion as a memorial to Christ's suffering, and participation in the Eucharist as both a re-enactment of the Last supper and foreshadowing of the Heavenly Banquet, the fulfilment of the Eucharistic promise (Crockett 1989:12; Stott's 1969:130 see discussion of Remembrance, Participation, Fellowship and Thanks-giving). Therefore, this view rejects the *Real Presence of Christ* in the Eucharist, hence, contradicting the official Anglican theology as stipulated in the Thirty-nine Articles of Religion (Crockett 1989:12). On the other hand, some Low Anglicans believe in the Real presence of Christ in the Eucharist but maintain that the presence of Christ is carnal (Douglas 2006:269).

usually at three-year intervals. The council consists of representative bishops, clergy, and laity chosen by the thirty-eight provinces. The body has a permanent secretariat, the Anglican Communion Office, of which the Archbishop of Canterbury is president. (4) *The Primates' Meeting* (first met in 1979) is the most recent manifestation of international consultation and deliberation, having been first convened by Archbishop Donald Coggan as a forum for 'leisurely thought, prayer and deep consultation' ((Anglican Strategic Plan on HIV and AIDS 2002:4).

In fact, the Anglican Communion is held together by only three elements. These include the (a) *shared ecclesial structure of the component churches*, which is manifested in an episcopal polity and maintained through the apostolic succession of bishops and *synodical government*. The others are the principle of (b) belief expressed in worship (the use of the approved prayer books and their rubrics) and (c) the historical documents (the standard *divines* that have influenced the ethos of the Communion). In other words, Anglicans are generally directed by the principle of *lex orandi, lex credendi* (the law of prayer is the law of belief) (Douglas 2006:269).[247]

As seen above, the episcopal type of government in the Anglican Church of Kenya is patriarchal[248] and hierarchical in nature as it was brought by missionaries. This structure is old and complex and was copied from the structure of the old Catholic Church where the Pope wielded a lot of political and religious power (Githiga 2009:116). With power vested on the bishop, it becomes difficult to influence any change in the diocese without the blessing of the bishop. The above hierarchical structure can be traced to the works of Aristotle (384-322 BCE). As a product of a patriarchal society, Aristotle believed in a society that is structured in hierarchical relations. He taught that it is natural for the superior to govern the inferior and this was interpreted as, "men are to govern women at all times and in all ways" (Rakoczy 2004:10). Aristotle's hierarchical and patriarchal dualism opens the way for injustice and oppression within the society for it gave birth to the sexism and the many "isms" which deform and pollute human relationships (Rakoczy 2004:10). Susan Rakoczy (2004:10) insists that such hierarchical and patriarchal dualism gave birth to "racism, colonialism and economic classism."

Rakoczy (2004:10) notes that patriarchalism is related to andocentrism, a false belief that embraces maleness as the norm of human life. In this case, to be truly human is interpreted as to be a male, thus, regarding females as inferior beings, the deficient types of being and most

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[247] See also Taylor (1822:123), "Of the Real Presence of Christ in the Holy Sacrament", in *The Whole Works of the Right Reverend Jeremy Taylor*.
[248] The term is based on the Latin *pater*, i.e. father, which literally means the rule by a father or fathers. In patriarchy, the male is the norm and women are understood to be inferior in every way; biologically, intellectually, anthropologically, and socially (Rakoczy 2004:10).

probably a divine mistake" (Rakoczy 2004:10). As such, women are perceived as "other" and as "objects" whose meaningfulness should be determined by "men" (Rakoczy 2004:10). In this case, the male assumes every aspect of women's life (including religion, socio-economic and political life), and this is accepted as normative by the society. Elisabeth Fiorenza (2001:211) regards this as *kyriarchy,* which she claims is stronger than patriarchy. *Kyriarchy* is coined from the two Greek words *kyrios* (lord or master) and *archein* (which means to rule or domination) and is a "socio-political systems of domination in which the elite men hold power over women and other men" (Fiorenza 2001:211).[249] As a prejudice and ideology within the church, hierarchy, *kyriarchy* and patriarchy are used to disempower others. In his book, *Exclusion and Embrace: A Theological Exploration of Identity, Otherness and Reconciliation*, Miroslav Volf defines exclusion as transgressing against "binding" and transgressing against "separation." He notes that exclusion entails:

> Cutting of the bonds that connect, taking oneself out of the pattern of interdependence and placing oneself in a position of sovereign independence. The other then emerges either as an enemy that must be pushed away from the self and driven out of its space or as a nonentity - a superfluous being-that can be disregarded and abandoned (Volf 1996:67).

He further affirms that:

> Exclusion entails erasure of separation, not recognising the other as someone who in his or her otherness belongs to the pattern of interdependence. The other then emerges as an inferior being who must either be assimilated by being made like the self or be subjugated to the self. Exclusion takes place when violence of expulsion, assimilation or subjugation and the indifference of abandonment replace the dynamic of taking in and keeping out as well as the mutuality of giving and receiving (Volf 1996:67).

The implication of the above is that, the exclusive model puts a wedge between "us" and those seen as "others", thereby, disconnecting and erasing a pattern of interdependence, which leads to division within the community. This is what Volf (1996:30) calls "the powerful, contagious and destructive evil of exclusion." In other words, the exclusive models are evil because they do not create space for others and, as a result, both the self and "others" are dehumanised. Surprisingly, exclusive models such as hierarchy, *Kyriarchy* and patriarchy are rooted in history and they flourish in a place where identity is seen through the lens of the tribe, gender, culture, economic, politics, class and status, etc. In the case of HIV and AIDS pandemic, PLWHA are perceived as HI virus carriers and are rejected because of the nature of their disease.

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[249] Fiorenza (1993) explores the issue of patriarchalstructure within the context of discipleship of equals. From a feminist point of view, she gives a critical understanding on the feminist ecclesiological praxis of liberation theology.

The existence of the above model in the Anglican Church of Kenya is very real. Majority of the clergy members are men while all the bishops in the provinces are male who happen to assume absolute power over both clergy and laity. In addition, most of the dioceses have male Archdeacons, who are in charge of Archdeaconries (a number of deaneries) and are appointed absolutely by the bishop. The same can be said of the Rural/Area deans who oversee the Deaneries (a number of parishes). While most of the dioceses have women and men priests who are ordained and posted by the bishops to various parishes, majority of those who oversee parishes (which comprise of congregation members)[250] as vicars are males (Githiga 2009:95).[251] In theory, the spiritual leadership of the Anglican Church is hierarchical and it comprises the threefold ministry of bishops, clergy and lay people (Githiga 2009:18-51). However, most of the decisions are made by the bishop (all bishops in Kenya are males) and anyone who goes against that is subjected to excommunication, discipline or interdiction (Githiga 2009:116).

In other words, the structure of the Anglican Church is a "top-down", patriarchal and hierarchical episcopal model of government, which starts from the, bishop to the parish priest and to the members. This type of government is considered by many as problematic to the ministry of HIV and AIDS because it disempowers the congregation members who are the majority and the one who should be empowered to take a lead in the fight against the HI pandemic. Hinga (2008:87) observes that the prevailing ecclesiastical models in Africa remain as they were inherited from European missionaries. Hillerbread (1996:38) affirms that Anglicanism originated in the nineteenth century as the State-Church of England. This means that as it spread with colonialism to the rest of the world, the Anglican hierarchy was maintained and was geared towards centralising power to the bishop, thus, correspondingly disempowering the laity.

According to Boff (1993:34), such ecclesiastical power nurtures a sense of devastating subservience by the laity of the church towards the hierarchy. For Boff (1993:34), this subservience discourages critical reflection and dialogue on matters of theological, ethical

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[250] Since the archdeaconries and deaneries are linked with the parish, there is a creation of regional agencies, which can provide moral support to the Christians and the clergy. In other words, the administrative structure of the Anglican Church can work effectively if the ministry and outreach are done at the congregational level. This is because the Church ministers can offer pastoral care and counselling to the congregation and to individual members as opposed to the top-down model.

[251] As in colonial times, another area that remained the same is the idea of organising local congregations into various parishes headed by ordained ministers. Some parishes are based in areas with complex and high technological communications and transport infrastructures, while others are in areas with no running water, electricity, telephones, computers or passable roads. Many parishes form part of the basic unit of the church, called "the Diocese" with the bishop as its executive director (ACK Synod book 2005:30; cf. Githiga 2009:116).

and practical concern. He further argues that such pyramidal ecclesiology does not impede only critical thinking but also creative engagement by insisting on the practice of absolutisation of power and centralisation of decision-making (Boff 1993:34). Hinga (2008:87) is concerned that such "a top-down ecclesiology" has not only troubled women, "but all who are concerned about the rights of well-being of those at the bottom of such hierarchies." Seen from the above, it is no wonder that most of the declining HIV and AIDS programmes in the Anglican Church of Kenya are attributed to the above dysfunctional inverted pyramidal ecclesiological hierarchy (also see *figure 10*) and patriarchy that exclude the ordinary church member, especially men and women, from participating in the HIV and AIDS programmes. This ecclesial hierarchical structure also gives the bishop absolute powers, even power of veto on what has been discussed and passed by various synods (ACK Kirinyaga Diocese Synod book 2005:30). This means that whatever is decided by the Synod, even in matters of the HIV and AIDS programmes, ordination, women, youth, Sunday school and finances among others must agree with what the bishop wants.

The *figure 10* below is an inverted pyramid, which shows how the Anglican ecclesiastical structural model disempowers the Christians as power is pegged on the bishop.

Figure 10: Inverted pyramidal model of disempowerment in the Anglican ecclesiology
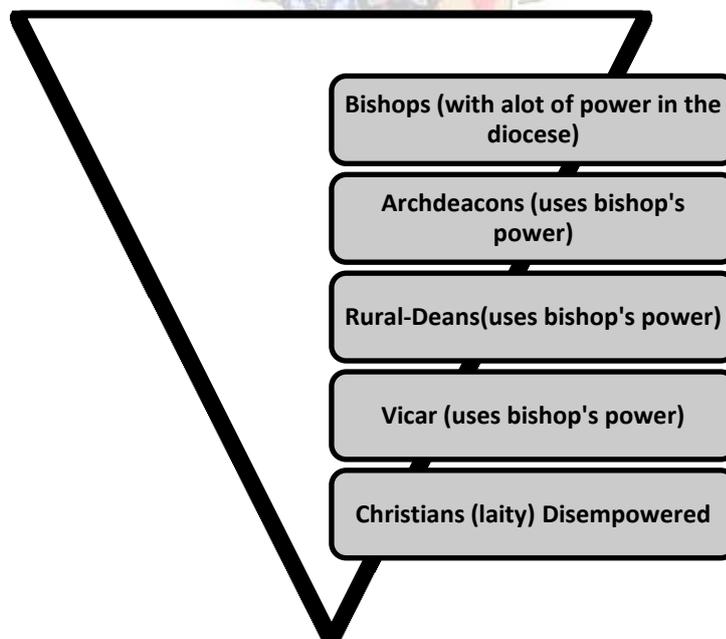
Again, the result of the above *inverted pyramidal ecclesiological model* (bishop-centric - top-down ecclesiology), is that in terms of ministry, the members are reduced to mere passive

spectators (cf. Osmerah 1994:90). For this reason, most of the work in the church is left to the vicar/clergy who dominates every area of ministry such as visiting the sick, giving social support, providing home visits, serving Holy Communion, thus, preventing the participation of the ordinary Christians. Nevertheless, it is clear that the most effective HIV and AIDS programmes are those implemented at the grassroots level and that involve the whole community. In fact, the context of the HIV and AIDS pandemic in Kenya dictates that the Christians at the congregation and parish levels should become active in their witness as compassionate healers and friends, providing pastoral care and counselling to the PLWHA and their families. Therefore, the care for the PLWHA should not be left to the clergy or pastors. Perhaps, this is where the paradigm of *Ũtugi* can help the church to involve all the members, in caring for the sick and, more importantly, the PLWHA and their families.

Unfortunately, attempts have failed to contextualise the above ecclesiological structure so that it addresses the need of the community and the church, at large, and so that it moderates the powers of the bishops, for bishops tend to block any constitutional change, which they think might disempower them. Protesting against the domination of the ecclesial hierarchy of exclusivity, which is a by-product of patriarchy in the modern church, Ruether (1983:206) argues that, "Once we free ourselves from clericalism we will be able to rediscover the value of special celebration garments… and special modes of communication such as ritual gesture, chant and song that distinguish liturgy from ordinary life."

It is sad that many Anglicans do not question the clerical domination for they remain largely tamed to the tradition called Anglicanism, which was laid down for them. Interestingly, only a few theologians have assessed critically the above structures in the context of HIV and AIDS, for many of them fear being sacked by the bishop who technically is their employer (i.e. those who are clergy members).[252] However, the few Anglican theologians who are not directly employed by the church generally agree that the church at its present condition is largely the product of the "defective ecclesiology" of the nineteenth century (Benson 2007:279). This "defective ecclesiology" was noted as early as 1960s by the historian and theologian, Adrian Hastings who writes:

> The church in Africa already exists and we must thank God that it does. But it exists inevitably, as the missionaries of the last seventy years have formed it, and the work was strongly done. The church of Africa as it now exists, is undoubtedly an unnecessarily

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[252] The few clergy in some dioceses who have attempted to question the rationality of the above ecclesiological structure have been either sacked or demoted by the bishops, thus, silencing the majority of clergy and church members.

Europeanised one, formed on the exact canonical model of the church in Europe (1967:20).

Hastings opines that the church needs to change her ecclesiological praxis for it to be effective in the African context. Otherwise, what can be said of this church, which looks to Europe even for the requirements of its liturgical vessels such as wine, bread, books and garments, which must be imported for it to be considered valid for use? Again, how can such a church be effective if it excludes the majority (congregation) in her pastoral care and counselling? It is unfortunate that the vast majority of Christians are excluded even from the sacrament (Mutugi 2001:26). In particular, the polygamists, the single mothers and PLWHA are excluded from partaking in the Lord's Table during the Holy Communion. In addition, those Christians who have not formalized their traditional weddings in the church are excluded from partaking in the Eucharist, even when they have been married for more than forty years under the African customary law.[253]

Nicolson (1995:76), the South African Anglican clergyman, points out that, since the Eucharist constitutes not only communion with God but also with other members of the congregation, it has become an important way of "overcoming the loneliness and feeling of exclusion for the PLWHA" and their families. The passing of peace in the Eucharist, where the congregation greet one another with mutual embrace and hugs, can become also "a moving act of unity in the face of tragedy." Furthermore, in the church, the shared communion is important because it represents both a spiritual engagement with God and a statement of inclusion in the ecclesial community. Since it is now known that there is no risk of contracting the HI virus from a shared communion cup, and that the risk of transmitting other illnesses is very low and the chance is reduced by wiping the cup between communicants, it is, therefore, sad to hear that some Anglican parishes in Kenya refuse to share the cup with PLWHA.[254] I have witnessed occasions where some people moved out of the communion line after they saw the PLWHA queuing in front of them to receive the Eucharist, thereafter, forcing some to stop participating in this important ritual at a time when they require it.[255] Githiga who is now the Anglican Bishop of Thika explains:

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[253] I gathered this information from almost one and a half decades' service in the Anglican Church ministry as an Anglican priest (see also the ACK Kirinyaga Diocese Synod book of 2005).

[254] I have gathered this information from almost one and a half decades' service in the Anglican Church ministry as a priest (cf. ACK Kirinyaga Diocese Synod book 2005).

[255] I have witnessed this in two congregations, one in July 1998 (Taita-Taveta Diocese), and the other in December 2008 (ACK Kirinyaga Diocese Synod book 2005).

> Many Christians could not take Holy Communion from the same cup with someone suspected of suffering from HIV [and] AIDS. In one church in my Diocese only forty communicants were taking the communion, but when the vicar introduced a system of using small cups, with each communicant using a separate cup, that Sunday, the number of communicant increased to one hundred members. Sixty members had previously abstained from the communion probably out of fear of contracting the sickness. Many people still believed that if you shared the same utensils with these people you will contract AIDS (Githiga 2009:31).

Even though the above congregation knew that their vicar was sharing the same cup with PLWHA and their families, they continued to segregate PLWHA and their families in the church (Githiga 2009:31).

In fact, this incident is not new in the Anglican Church of Kenya. The Eucharist, like admission into sacred ministry, has been used as a tool for exclusion and definition of the boundaries for eligibility for church membership, participation in communion and training as clergy (Githiga 2009:11-18). Shockingly, some Anglican dioceses in Kenya continue to debate the issue of women ordination and their eligibility to consecrate the Eucharist even when ordained.[256] This shows that pastoral care can be influenced by the politics of exclusion, consequently, hastening the stigma discourses for PLWHA and their families as discussed above.[257] The results of the exclusive practices seen in the Anglican Church of Kenya, like other forms of "othering", forces the PLWHA and their families to withdraw from church membership since they are made to feel that they are "outsiders" and unwanted. This exclusion model was inherited from colonial Christianity and the post-colonial Anglican Church perfected it. During the colonial times, the Anglican Church was co-opted by the state to serve the interest of the state. Consequently, it neglected her pastoral duties of caring for the vulnerable and the marginalised. We shall explore this church-state relationship in the next section.

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[256] In June 1998, I was asked by the Anglican Bishop of the Taita-Taveta Diocese, the Rt. Rev. Dr. Samson Mwaluda, to discuss the issue of women ordination after the bishop showed some interest in ordaining women in his diocese. At that time, the clergy and few elders opposed the issue. In the course of preparation for this study, it was exciting to note that the recommendation to ordain women as priests in the Anglican Church was first made at the Lambeth Conference of 1978. However, the bishops in Kenya started discussing this issue in the 1980s and agreed in principle that women could be ordained and that each diocese was to be autonomous in doing so. The bishop of the Kirinyaga Diocese of the Anglican Church, the Rt. Rev. Dr. David Gitari, raised the issue of women ordination in four consecutive diocesan synod meetings (cf. Synod Book of 1979, 1981, 1983 and 1986) before ordaining the first women in 1991. One wonders why it took so many years before women were ordained. The answer lies in the history of patriarchalism in the Anglican Church as in many Church denominations in Kenya and the exclusive nature of the Anglican ecclesiology inherited from Europe.

[257] The issue of an inclusive sharing of communion can be "a touchy issue." For instance, in the early twentieth century in South Africa, the white congregations did not allow black congregants to share communion with them. Thus, when Arthur Karney, the Anglican Bishop of Johannesburg from 1922-1934, tried to persuade predominantly white parishes in his diocese to allow black congregants to have separate services in their home languages, he knew enough about prevailing attitudes to suggest they use separate communion vessels. In 1926, he reported that when a priest in a white congregation allowed a black church employee and his wife to 'sit in the congregation and communicate', the parish was in 'turmoil' as sustentation collectors resigned and subscribers withdrew. By 1931, however, the Provincial Synod began to call on Anglican Bishops to arrange at least "one celebration of Holy Communion each year, in his Cathedral Church, during which communicants of the church of all races may receive the Blessed Sacrament together, realize their essential unity in Jesus Christ, and witness the world of the reconciling and unifying power of our Lord.

5.4. Power and dualistic model: Church and State tensions

Having seen the exclusivity perpetuated by the ecclesial hierarchy, patriarchy and colonial Christianity in the above section, we shall now consider the use of power and the relationship between the church and the state during and after colonialism.

5.4.1 Church and State

From the time of colonialism, the Anglican Church of Kenya seems to have been clinging to the government because of power. As a church that supported the colonisers, the Anglican Church of Kenya was like a "State Church" and at independence in 1963, the church was able to reconfigure itself in order to be accommodated by the new government (Githiga 2001:3). What this means is that the church changed and started supporting the new government as a way of protecting its interest. In other words, the church was able to shift her position from being a church that supported the oppressors (colonisers) to a church that supported and identified with the former oppressed people (Africans). In fact, Kenyatta, the first president of Kenya was happy to maintain this relationship and he even urged the church leaders to co-operate with the state to speed up the country's growth especially in the areas of education, health and social work (Githiga 2001:49-50).

Therefore, unlike the colonial period when the Africans were against colonial domination, the post-colonial Anglican Church was characterized by collaboration between the church leaders and political leaders who could be seen sitting and working together. Githiga (2001:51) notes that church leaders were called to conduct prayers at the opening of parliament, on major national days, and during the funding of community projects, which were organised by the government. Furthermore, this co-operation between the state and the church, especially the Anglican Church, portrayed the image of a church that was not conscious of the social ills in the society (Githiga 2001:51). The white missionaries had introduced the only model of church and state, which was familiar to them, the "Constantinian model" which allows the state to control the church. In Britain, when the Anglican Church was breaking from the Roman Catholic Church, the king of England, King Henry the VIII, was able to nationalise the church through an act of parliament (Richardson 1973:5). Subsequently, the state gained power to control the church even on matters of liturgy as in the case of the Anglican "Book of Common Prayer", which was sanctioned by an act of Parliament and not the Church of England (Richardson 1973:5).

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Interestingly, the Anglican Church of England through this model was given a responsibility to anoint and bless the Crown (state) while the Archbishop of Canterbury and York and twenty-four other bishops in the United Kingdom were given seats in the House of Lords (Richardson 1973:5). This shows how these two institutions have maintained a tradition of embracing one another since the Reformation. Although the post-colonial Anglican Church of Kenya was not declared as an "official church", it acted as one when the Anglican Archbishop, Leonard Beecher (of the CMS) was appointed as an official representative of the African interests in the Legislative Council (LEGCO). It was only in 1944 that Beecher resigned from LEGCO to pave way for the nomination of Mr. Eliud W. Mathu, the first African to become a member of LEGCO (Richardson 1973:5). What is evident is that during colonial times, the Anglican Church of Kenya actively supported the colonialists, and it shared their political attitude, accordingly. In other words, the Anglican Church of Kenya technically orchestrated the sub-imperialism, which had seriously affected the traditional socio-economic and political systems of the Kenyan communities. The above scenario is well articulated by Frank Kürschner-Pelkmann as follows:

> In order to administer their new colonies effectively and with as little effort as possible on their part, the new European colonial rulers used the existing political structures of power and adopted them according to their needs. Many "chiefs" and "kings" were used as henchmen to collect taxes and to provide forced labour for plantations and the construction of railways and road. Local chieftains who refused to collaborate were arbitrarily killed or exiled and replaced by new appointees. Traditional mechanisms for controlling the politically powerful were undermined (Kürschner-Pelkmann 2004:4).

The above implies that, instead of the Anglican Church becoming a champion of democracy and good governance, through the influence of the colonialists, it became an instrument of undemocratic and unjust practices.[258] Kürschner-Pelkmann (2004:4) asserts that forming the democratic state was not the purpose of the colonial rulers "for they were neither concerned with, nor interested in participation of their subjects in governance." He maintains that:

> Their main concern was about subduing the people and exploiting their labour and resources. One of the methods of achieving this goal was to intensify the differences between regions and ethnic communities in order to bring about conflicts. Divide and rule" is the name of the game. Thus the seeds of every ethnic and regional conflict were sown through the promotion of difference and undermining of social harmony (Kürschner-Pelkmann 2004:4).

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[258] Mugambi (2004:22) laments that "imperialism and colonial rule imposed on Africans an asymmetrical relationship between the rulers and the governed, so that the imperial citizens were entitled to "democracy" while the colonial subjects were not. Whereas the imperial citizens in the colony could enjoy "democratic rights", imperial subjects could not enjoy any right, freedom, privileges or prerogatives. Subject could not vote to choose their leaders; they could not debate on how much to pay taxes, nor on how the tax revenue could be used. Forced labour was taken for granted, and the colonial Governor was the supreme authority, ruling without the mandate of the governed. Strikes and labour boycotts were illegal and any criticism of the colonial regime was treason."

The above stated is the context in which the post-colonial states were formed and, therefore, the church could not criticize the state, as church leaders who dared to do so, found themselves either detained or harassed. Githiga (2001:201) observes that even the Archbishop's residence was (and remains) next to the state house in Nairobi, which used to be the official residence of the governor during the colonial times. In fact, Kenyatta maintained this relationship to avoid conflict between the church and the state. Githiga (2001:201) argues that Kenyatta's positive attitude towards the Anglican Church prompted the latter to accept with ease his political slogan of *Harambee* as a driving force for development. Moreover, since the church owned about 90 percent of the schools at the time of independence, [259] it took advantage of the era to start more schools and health-centres in various parts of the country. In so doing, the church involved the community to build larger schools, which could accommodate many students and, through *Ũtugi,* the community donated land, materials and labour that were needed for building classes and churches. In addition, the instructional materials, teachers' salaries and even their houses were provided through *Ũtugi (Harambee)* (cf. Githiga 2001:47).Subsequently, the church buildings and the schools became community centres where preaching, teaching, singing, and dances, among other activities, were conducted.

The intensification of the post-colonial Anglican Church in the areas of education, health-care, social welfare, economic training (vocational training) and development gave her legitimacy and power within the society. Additionally, the church also increased her capacity by welcoming some of the most prominent politicians in Kenya into her membership. David Throup (1995:145-146) notes that personal and ethnic affinities were not spared in the effort to increase church capacity. Furthermore, much of the church's power was derived from close family ties between Kenyatta and the church leadership.

It is also fascinating to note that Obadiah Kariuki, the first African Anglican bishop in Kenya, was a brother-in-law to President Kenyatta and it appears that this blood relationship spurred Kenyatta's quest for a church-state relationship similar to the one he had witnessed in Britain, where he lived for fifteen years (Karanja 1999:45). Consequently, the post-colonial Anglican Church of Kenya became increasingly dominated by politicians and Christians who held influential positions in the government. Some of these influential people included the

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[259] See the Kenya National Archives, Education Statistics 1964-1966, Nairobi: ES File.

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Attorney-General, Charles Njonjo and Jeremiah Nyaga who were ministers in both Kenyatta and Moi's regimes. As implied above, the strength and the power of the post-colonial Anglican Church were legitimized because of her involvement in social activities throughout the country. This was evident after the nationalisation of all the church's institutions of education and health by the government in 1965. The challenge was how to change the general perception as the church that supported oppressors. This also happened to the Anglican Church in England. Even when its leaders challenged the government very strongly on issues of social justice thus provoked sharp criticism from politicians, nevertheless, it never reached a point where it was widely seen as the champion of the poor against an uncaring government. Dorr (1991:177) explains that even if, "in the future, its leaders go much further in speaking out for social issues it is unlikely that there will be any notable change in the way the Anglican Church is perceived, so long as it continues in other ways to act very visibly as part of British establishment." However, with the demise of Kenyatta in 1978, the Anglican Churhc of Kenya was able to challenge Moi's autocracy hence redeeming itself from the above challenge.

5.4.2. Tensions and dualistic model

Perhaps the closeness of the Anglican bishops and President Kenyatta compelled the post-colonial Anglican Church to be mute on matters affecting her adherents. While the church had legitimacy and power to address the injustices committed by Kenyatta's regime, the Anglican Church adopted a passive position. This means that she avoided speaking on social ills perpetrated by the government and concentrated purely on religious activities within the church. Thus, it became mute with regard to political activities, and accepted the *status quo* (Gibbs and Ajulu 1999:16). However, in 1982 there was a paradigm shift in pastoral care ministry as young African clergymen started articulating their theology, contextually. This new approach to pastoral care was prompted by Moi's oppressive regime. Widner (1992:162-195) observes that after the attempted *coup d'état* of 1982, Moi's regime started a coercive centralization process, which involved, *inter alia,* the severe restriction of free expression (even in parliament) and of the autonomy of the judiciary. It also entailed the move towards a *de jure* one-party state, the criminalization and persecution of opposition groups, and placing limitations on the activities of professional, ethnic and cultural organizations. The restrictions on political associations forestalled any possibility of legal protests, while constraints on any form of gathering paralysed the process of transforming information and ideas into action.

In such a climate, which was characterized by extensive official violence and systematic torture, surveillance and censorship, abductions and detentions without trial, and the deadly use of police and armed forces, the ability of any organisation to rise against Moi's repression was severely limited (Widner 1992: 162-195). As a result, the church became the only remaining and available channel for expressing the people's discontent and the desire for change in the country. It was in such a context that the church began to address the socio-economic and political issues affecting the country especially the push for the multiparty politics (Gitari and Benson 1986:119-120).

In other words, Moi's tyrannical rule compelled the Anglican Church of Kenya to release herself from the government's fetters. This approach was influenced by church leaders such as David Gitari, Henry Okullu and Alexander Kipsang Muge who all studied abroad (Githiga 2001:47).[260] For instance, both Bishop Gitari and Bishop Muge obtained Bachelors of Divinity from the University of London while Bishop Okullu got a Bachelors of Divinity from Virginia Theological Seminary, USA. In their respective dioceses, Gitari, Okullu and Muge found themselves in a dilemma to determine the extent to which they should criticize the increasingly repressive regime of Moi's.[261] They had three distinct, mutually exclusive options: (a) to speak out and expect to be criticized by government for doing so; (b) to publicly keep quiet, but seek to change government policy by persuasion (behind the scenes); or (c) to refuse to engage the regime in direct public confrontation as in the case with Kenyatta regime.[262]

As for Gitari, Okullu and Muge, they opted to speak out and engage the state in constructive dialogue. In their pastoral approach, they became critical of the state's injustices and contributed constructively to the socio-economic and political issues. Of course, they were well aware that God is squarely on the side of the disadvantaged and it would be sinful for the church to stay aloof in the face of injustice (cf. Yoder 1998:15). This is in contrast to what the

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[260] Gitari, Muge and Okullu were the most outspoken Anglican Bishops in Kenya and they were able to engage pastoral ministry with socio-economic and political issue, thereby becoming relevant in the Kenyan context (Githiga 2001:47).

[261] In his candid speech on 13 September 1984, President Moi went to the extent of saying, "I call on all ministers, assistant ministers and every other person to sing like parrots. During Mzee Kenyatta's period, I persistently sang the Kenyatta tune until people said: This fellow has nothing except to sing for Kenyatta. I say: I didn't have ideas of my own. Why was I to have my own ideas? I was in Kenyatta's shoes and therefore I had to sing whatever Kenyatta wanted. If I had sung another song, do you think Kenyatta would have left me alone? Therefore, you ought to sing the song I sing. If I put a full stop, you should also put a full stop. This is how this country will move forward. The day you become a big person, you will have the liberty to sing your own song and everybody will sing it" *(An Africa Watch Report* 1991: 26-27).

[262] The notion of fighting the state's injustices by church leaders is well represented in the works of Martin Luther King Jr. For King, the church should learn the art of persuading the opponents (state) even though the rival (state) may turn violent (cited in Philips 1999:33). He contends that when the church fights injustice in the society, the battle is between the forces of light *vis-à-vis* the forces of darkness (Philip 1999:33). Freire (1993:53), like King, is of view that there is need for the dehumanised people to experience humanisation and that, "liberation is not a one-off event", but an "ongoing process in which people reject to be objects and become a subject-movement."

church in Angola, DRC, Mozambique, Ethiopia and Uganda did. These churches remained deaf to the cries of those who were suffering. The same can be said of the Roman Catholic Church in Portuguese colonies which enjoyed the privileged position of being an official religion, yet for many years, her adherents suffered the indignity of cultural genocide that was officially known as *Assimilado*.[263] Yonder (1998:15) is of the view that when religious leaders or institutions profit or support oppressors or unjust structures, they are working against the will of God, and their faith is a perversion of authentic Christianity. It was from this understanding that Gitari, Okullu and Muge devoted their lives to fight the injustices of Moi's regime.

However, in 1990 the late Peter Okondo, who was then a minister in Moi's government, dared Bishop Muge to utter anything against the government in Luhyialand. He also told the bishop that if he dared set foot in that part of the diocese, he would not leave the place alive, as he would be set on fire. Regrettably, when Muge went to Luhyialand in August 1990 and preached against the injustices of the government, on his way back home, he was killed in a mysterious road accident. The church regarded this as persecution, and instead of silencing the church leaders, the incident fuelled their struggle for justice until when Moi retired in 2002 and Kibaki became president. Many people regarded this period as the birth of the second liberation, a period intended to remove a singular brutal regime that did not only turned the torture dungeons beneath Nyayo House into a sinister instrument of governance, but also thrusted the most extreme form of exclusion which included the physical elimination of political murder (e.g. Pio Gama Pinto, Ronald Ngala, Josiah Mwangi Kariuki, Robert Ouko, Muge among others) (Saturday Nation, 26th August, 2010). This compelled Ngugi wa Thing'o (Saturday Nation, 26th August, 2010) to say that, "the Kenyan people, having been dismembered by a fractious politics, are finding in themselves the power to remember, in the twin sense of the calling back of their lost memory and the re-gathering of their scattered constituent limbs, to make themselves conscious and whole again." However, the second liberation turned out to be a false hope because the ''Moi-out- Kibaki-in'' change euphoria was short lived and like in Moi's era, Kibaki's regime was characterized by political patronage, ethnicity, corrupt networks, while the impunity inherited from Moi regime continued unabated.

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[263] The Portuguese imposed the doctrine of Assimilation to her colonies in Africa.

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What could be learnt from the regimes of both Moi and Kibaki is that political leaders were comfortable with the fact that the church did not question the state on matters of justice and they wished that there were a separation between church and state. The separation of church and state can be traced to the fifth century model when St. Augustine published his famous book, (the) City of God (Mugambi 2004:26). Mugambi (2004:26) states that in this book, Augustine contrasted divine reign with human regimes and argued that divine reign was the ideal against which human regimes could be evaluated. Moreover, before Rome with all its "splendor, was corrupt, exploitative and oppressive", therefore, "the City of God would be free from all shortcomings and many times more glamorous" (Mugambi 2004:26).

Apart from that, Luther's concept of God's two kingdoms and two reigns is popular with politicians because legitimized political leadership had made political leaders unaccountable to religious authority (Mugambi 2004:26-27). Mugambi (2004:27) claims that modern North Atlantic nationalism has been based on this two kingdoms dichotomy since the seventeenth century. He further states that, "Africa nationalism took cue from European imperial rule." The so-called "separation of church and state made it possible for political leaders to practice two sets of norm, one in the religious domain and the other in the political arena. Ideally, there should be no contradiction between politics and religion, considering that religion and politics are complementary pillars of culture" (Mugambi 2004:27).

Furthermore, in the African community, "there is hardly any distinction between religious and political leadership" (Mugambi 2004:13). What this means is that African leaders used to integrate religion and politics and there were no separation as politicians now would like us to believe. Of course, the missionaries could have learnt about this because, when they came to Kenya, they identified religious leaders and used them to reach the local community. When these leaders accepted the gospel, the community also accepted it. This is because African religion transcends socio-economic and political boundaries. This is well articulated by Mbiti (1969:1) who claims that the African's religiosity is forceful because:

> Wherever the African is, there is his religion: he carries it to the fields where he is sowing seeds or harvesting a new crop; he takes it with him to the beer party or to attend a funeral ceremony; and if he is educated, he takes religion with him to the examination room at school or in the university; if he is a politician he takes it to the house of parliament. Although many African languages do not have a word for religion as such, it nevertheless accompanies the individual from long before his birth to long after his physical death (1969:2).

Therefore, the separation of religion and politics is something foreign to Africa. However, it should be noted that because of the church-state tensions created by church leaders during Moi's time, many Kenyan politicians have reminded the church constantly that religion and politics do not mix. In other words, the politicians wish to amass political power without the involvement of the ordinary people, as they call for religious leaders to keep off politics. Therefore, the understanding of the meaning of power and its relevancy to the faith community becomes vital. The Latin word for power is *posse* or *potestas,* which involves ability, possibility and capacity (Robinson 1999:1088). From the sociological perspective, power involves the opportunity to assert one's own will in a social context even though it may be against the opposition (Weber 1978:24). This means that power is not restricted to specific social spheres like "politics, religious life, education but it includes economic power, judicial power, legislative power and executive power (Weber 1978:24). It also means that power can be used at different levels and in various ways in the society.

Donal Dorr provides a description of four kinds of power, which is helpful for our understanding of the theology of power. This includes personal power, domination power, enabling power and the power of the cross.

a) *Personal power* is a psychological power that enables us to "believe in ourselves, hold our ground in our relationships with others, by standing up for our own beliefs and values" (Dorr 1990:104-110).

b) *Domination power* or coercion power entails physical force or punishment, psychological domination or intimidation of individuals.

c) *"Enabling power"* is the power that helps people to "understand their situation better" and enable them to make responsible public or individual decisions (Dorr 1990:109).

d) The last one is the *power of the cross*. Dorr (1990:110-111) states that the power of the cross touches human life at a personal level, for it stems from God's providential power.

More than that, it is noted that those denominations that reject the use of power prefer withdrawing from the active participation in socio-economic and political life, while on the other hand, Christians who favour the use of absolute power end up oppressing people. Nonetheless, there are claims that all power belongs to God and it is necessary for putting faith into action. These two extreme views prompt us to reflect on the theology of power.

The Christian faith has always attributed power to God, and in this sense, God is seen as omnipotent and almighty. Equally, the biblical tradition perceives power as that which is derived from God and the history of Israel is viewed as that which begins with the experience of liberation from Egypt (Ex 15:3-19). Indeed, Israel met the power of God in this liberation experience. Bonino (1983:95-96) insists that human power is relative in contrast to this absolute power, which is true of our power over nature as well as of political power. Korten (1990:168) asserts that the eradication of unjust structures should compel the church to take power "not as a club to be used in the service of personal" enhancement but rather as a gift in the service of the community and spiritual fulfilment of all people especially the powerless.

In this regard, we can say that for power to be legitimate, faith communities are obliged to use power in the service of God and for the common good of all (Bonino 1983:95-96). As such, the power of God is seen as that which brings freedom rather than enslavement. Germond (2005:9) argues that, "religions are at their most powerful, and simultaneously, at their most distinctive, when they operate in the realm of ultimacy." Moreover, religions have operated all types of power; therefore, the power in religion can be used either negatively or positively. In other words, such power can be either a source of domination or a source of renewal and transformation. The faith communities are obliged to use their power for the wellbeing of the society and the environment, thus, working to liberate the weak and the vulnerable. Louw (2008:77) explains that empowering in pastoral care deals with the issues, which are "related to power and all the abuse of power." The purpose of this gesture is to confront powerful institutions and to expose their abuse of power.

Therefore, faith communities should use their power positively by addressing the predicaments experienced by the PLWHA and their families. Although Weber (1978:24) sees structures created by humans (the culture, ideology, political system or ecclesial structure) as powerful and to be trusted as servants of the people, he perceptively affirms that religion can be a possible source of renewal (cf. Villa-Vicencio 1988:185). This kind of power is used to humanize people. For instance, in the incarnation of Christ, his suffering on the cross and his resurrection are seen as an act of divine freedom and divine power that humanizes. Therefore, there is need for Christians to put faith into action and to use their power to humanize the vulnerable. This is in line with the view of Klaus Nürnberger (2007:167) who argues that dehumanised people need to experience humanisation so as to be able to experience justice,

peace, love, human dignity, prosperity, freedom of the kingdom of God, which is now and yet to come.

Therefore, faith communities should use their power to fight for just society, for this is also a mandate of the prophetic ministry. Ndungane (2004:161) reminds us that, "at all times the church carries the responsibility of reading the signs of the time, and interpreting them in the light of the gospel, if it is to carry out its task." Therefore, with the holistic model of church-state relation, the church is capable of challenging the state where there are injustices and, at the same time, supporting the government in programmes that humanise the people. Louw (2008:76) shows that humanity desires to be emancipated from "slavery, addiction and situations of victimhood." This entails transformation and freedom from oppression, which results in triumph over dehumanising environment and structures that also devalue our human dignity and freedom (Louw 2008:76). For Louw (2008:76), the issues of liberation as praxis are the issues involved in the process of democratisation.

5.4.3. Role of faith communities in the democratisation process

The challenge facing the Anglican Church of Kenya is how to educate fully the society to be responsible citizens and fight for democracy. This is because a responsible society is one that creates an environment that is conducive and provides opportunities for all, including the vulnerable. In the ancient Greek of the fifth century C.E, Plato regarded democracy (*politeia)* as a governance with a limited participation and representation as opposed to actual and equal participation of every citizen in the affairs of the *polis* (state), which can end up being a "mob rule" (Miller 1992:192). For Plato, the ideal system of governance is "aristocracy", which means the rule by philosophers, for they were regarded as those who were enlightened with regard to "reality, truth and goodness and have emerged from the darkness of the cave and beheld the god" (Miller 1992:192). Similarly, Aristotle opposed the "mob rule" and suggested an adequate form of governance, which can accommodate "the rank and file of the citizenry with its collective experience of good sense" (Miller 1992:153).

The above classic understanding of democracy is entirely different from our contemporary understanding of democracy. As a concept or a system of governance that has been applied in various ways from one context to another, democracy in our contemporary world is perceived from a communal perspective rather than from an individual sense of human or personal rights. While the government exists for the well-being of the nation, and seeking

the common good is perceived as good governance, democracy is believed to be applicable only in small states like Athens. Compared to monarchy or aristocracy, democracy (*politeia)* is believed to have the advantage of providing stability by giving power to a greater number of citizens. John De Gruchy argues that:

> The church must surely prefer a democratic society to one that is totalitarian, but its task is not primarily to legitimate democracy. Rather, it is to inject into the democratic system a vision that pushes democracy beyond its present achievements towards a greater expression of what we believe is God's will for the world. Indeed prophetic witness always remains a necessity in public life and there are subtle, and not so subtle, danger embedded in democracy that demand a watchful eye on the part of the churches. The church can be as captive to the powers under democracy as under other forms of government and sometimes, even more so (2004:59).

The reason why the democratic government is regarded as the best as opposed to other kinds of governance is because it ensures everyone's right, for it is understood that the only limit to individual freedom is non-infringement of another person's right. It is also seen as a political system with the best tool to promote and preserve the ideal of freedom, equality and justice, whereas in the classic age it was just one among other options. A democratic government[264] "guarantees every citizen equality before the law, without discrimination of any sort"(Ongong'a1999:15). Fareed Zakaria (2003:1-27) states that the pillars of democracy include sovereignty of the people, government based upon consent of the governed, majority rule, minority rights, guarantee of basic human rights, free and fair elections, equality before the law, due process of law, constitutional limits on government, social, economic and political pluralism, value of tolerance, pragmatism, cooperation and compromise. In other words, the power of a democratic country includes the by-laws, which are clearly defined and sharply limited. As a result, private organizations are free of government control and many may also lobby the government and seek to hold it accountable for its actions.

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[264] For Fareed Zakaria, democracy is more than a set of constitutional rules and procedures that determine how a government functions. He states that, "in a democracy, government is only one element coexisting in a social fabric of many and varied institutions, political parties, organizations, and associations. This diversity is called pluralism, and it assumes that the many organized groups and institutions in a democratic society do not depend upon government for their existence, legitimacy, or authority. Thousands of private organizations operate in a democratic society, some local, some national. Many of them serve a mediating role between individuals and the complex social and governmental institutions of which they are a part, filling roles not given to the government and offering individuals opportunities to exercise their rights and responsibilities as citizens of a democracy. These groups represent the interests of their members in a variety of ways - by supporting candidates for public office, Debating issues, and trying to influence policy decisions. Through such groups, individuals have an avenue for meaningful participation both in government and in their own communities. The examples are many and varied: charitable organizations and churches, environmental and neighbourhood groups, business associations and labour unions" (Zakaria 2003:27).

In this case, the church as a community of faith can play a decisive role in the process of democratisation as stated in the 1991 *Catesimus Annus*. It states that, "the church values the democratic system in as much as it ensures the participation of citizens in making political choices, guarantees to the governed the possibility both of electing and holding accountable those who govern them and of replacing them through peaceful means when appropriate" (cited in Zakaria 2003:27). Therefore, working for democracy should be the pastoral concern of the Anglican Church of Kenya; and as a community of faith, she should be concerned not only with electoral matters, but also with the socio-economic and political conditions of the vulnerable. Furthermore, the church should emphasize good governance and a democracy that considers the unnecessary suffering of the PLWHA and their families as being morally wrong and, therefore, unacceptable. This is because the church has a major social responsibility in democracy as a vision, whose basic elements are freedom, equality, justice, and fullness of life.

Certainly, because of the care, protection, solidarity, networking and interconnectedness entrenched in *Ũtugi* it is possible for the church which adopt it to be capable of serving as a "watchdog" to protect the rights of the PLWHA and their families, hence, becoming a true party to the democratisation process. By engaging in the democratisation process, the church would be carrying out her prophetic ministry. This is why the church, which keeps silence and refuses to participate in the democratic process when the vulnerable are suffering due to the unjust political systems, is said to be ignoring her prophetic role. The church in her advocacy ministry is capable of involving herself in challenging the above deprivation; for as we have already seen the church has the machinery - *Ũtugi* (local resources) and the Christian hospitality (church resources) - to challenge the government policies that directly or indirectly perpetuate injustice (inhospitality) against the PLWHA and their families. Furthermore, the best way to make a defiant government pay attention to the plight of the vulnerable is through advocacy and lobbying. De Gruchy (2001:34) cautions that when the church focuses on the ultimate, that is, the coming of the kingdom (eternal life) and ignores to participate in the pre-ultimate (this present world), she does not understand her purpose on earth. Accordingly, when the church concerns herself only with the things of this present world (pre-ultimate) and assumes that she is called to institute the kingdom of God on earth but ignores the things of the life to come (eschatology/ultimate), then she is missing her goal (De Gruchy: 2001:34).

According to David Bosch (1991:389-390), the mission of the church should be understood as that which comes from the very nature of Triune God in which the Godhead, Son and Holy Spirit - sends the church into the world. He further explains that the mission of the church is, above all, the work of the Triune God (God the creator, Redeemer and Sanctifier) who gives the church an opportunity or privilege to participate in this mission in the world (Bosch 1991:389-390). For Bosch (1991:115), the mission of the church is a multifaceted ministry, which includes many activities such as pastoral care, counselling, witness, service, justice, healing, reconciliation, liberation, peace, evangelism, fellowship, church planting and contextualisation.

The above theological understanding of the work of the church in the context of the HIV and AIDS pandemic is important, for it is based on the notion that HIV and AIDS is a justice, pastoral care and socio-economic problem. Therefore, the issues of care, politics and policy play a decisive role in the way the pandemic is handled. De Gruchy (2001:22) is of the view that the church in the context of the HIV and AIDS should confront leaders and those in power, speaking the truth and enforcing justice as she persuades them to spend time and money on the pandemic. From the above we realise that democracy enhances freedom, equality and justice. It can also be said that democracy provides a favourable space for the church to engage with the state to claim her social rights and ultimately exercise her political rights, thereby, contributing to the development of the healing space within the society. Furthermore, by participating in the democratic process, the church is positioned to use the multidimensional approach to the fight aganist the HIV and AIDS pandemic in Kenya. This multidimensional approach requires the church to confront her patriarchal hierarchy of exclusivity, address issues of power and, finally, accept an intercultural model. In the next session, we shall explore an intercultural pastoral model.

5.5. The quest for inclusivity: Towards a process of interculturality
5.5.1. Intercultural model
From the foregoing, it has become clear that there is a need for an inclusive pastoral care model in the Anglican Church of Kenya as opposed to the exclusive model inherited from the CMS missionaries. This, therefore, calls for an intercultural pastoral model. Such an attempt is crucial, if the church is to adopt *Ũtugi* to complement Christian hospitality in her fight

against HIV and AIDS. [265] Several scholars from non-Christian and Christian traditions lament that the African church needs to recognise and appreciate the local cultures. For instance, Mbiti (1969:108); Nyamiti (1969, 1976:240); Wa Thiong'o (1972:24); Wakatama (1976:13); Strayer (1978:77); Shorter (1988:11); Mugambi (1989b:132); Bosch (1991:447); Bediako (1992:20-22; 1995:40-55); Lartey (1997:101); Dube (2000:34); Pobee (2000); and Louw (2008:126) all agree that the church in Africa needs to respect the culture of the locals so that she can be relevant and contextual.[266] Even the proponents of African Renaissance[267] were of the view that there is need to recognise indigenous knowledge systems (Seepe 2001a:23). This is more appropriate especially if the church is to be relevant in the context of HIV and AIDS pandemic.

To curb the problem identified above, the Anglican Church of Kenya needs to interculturate her programmes. Having seen the paradigmatic wilderness that the Anglican Church of Kenya is sailing through, one wonders: Would it not be appropriate to rethink the paradigm of interculturation in the light of the HIV and AIDS pandemic? If so, how could it be used in

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[265] The CMS missionaries in Kenya failed to distinguish between the Gospel and their Western culture. Their constant denunciation of African culture can be viewed as evidence of their insistence on wholesale westernisation (Strayer 1978:77; cf. Odhiambo 1973:5). This has not only retarded indigenous expression of the Christian faith, but, at times, it has unnecessarily caused confusion and harm to existing social structures.

[266] The first African Anglican bishop to raise the issue of interculturation in the pastoral ministry was Samuel Adjai Crowther (ca. 1806-1891) (Walls 2002:155; cf. Walls 1985:5-15; Msomi 2008:37). Crowther was consecrated at the Canterbury Cathedral in England on 29 June 1864 and he went to serve in the New Diocese of Niger, West Africa (Walls 2002:157). He was born in Osogun among the Egba of the Yorubaland in the present-day western Nigeria. At age thirteen, he was captured as a slave by Fulani and Yoruba Muslim raiders who sold him several times before being purchased by Portuguese traders for the *Transatlantic* market in America (Walls 2002:155). However, the ship was intercepted by the British navy on patrol, and was taken to Sierra Leone. In Sierra Leone, he became a Christian, a teacher and eminent clergyman after he received training at CMS College in London. He was ordained in 1843 and he translated the first Yoruba Bible, which set new standards for later African translations. Crowther became a model for Henry Venn' with his approach to pastoral ministry that advocated self-governing, self-supporting, and self-propagating African churches. He became a bishop in 1864 of the countries in Western Africa under the Queen's dominion (Walls 2002:160-162). However, from 1880, the European missionaries started undermining him for they could not understand his methods of interculturation. As an old man and with his great supporter (Venn) dead, mission policy changed, being regarded with racial attitudes. With no financial support, and some of his staff dismissed and others suspended or transferred by missionaries, a desolate Crowther, died of a stroke at the age of eighty (Walls 2002:163). He was a man far ahead of his time. It is important to point out that as early as 1841, Henry Venn the Anglican clergyman and secretary to the CMS had pleaded with the Anglican Church to interculturate its pastoral ministry. Venn had devised the famous threefold formula, known as *self-support, self-government and self-propagation.* Crowther's pastoral work was the earliest outstanding insight of an African Anglican Bishop into interculturation of pastoral care. It is, therefore, no wonder that today Nigeria has become one of the largest single Anglican Provinces with over 10 million members (cf. Walls 2002:163). Walls (2002:163) claims that this tremendous growth can be attributed to the work of Crowther who, from the beginning, urged his clergy to take seriously the people's culture and beliefs that are attuned to Christianity (cf. Walls 1985:5-15, 132-139 and Msomi 2008:37). With this approach, many accepted Christianity. Crowther, in his pastoral care approach, had taken seriously social, cultural, economic, political and environmental contexts, and disagreed with CMS missionaries who thought that the African mind was a *tabula rasa* (Msomi 2008:37). The above insight demonstrates the value of interculturation in the ecclesiological praxis of the Anglican Church. However, Bosch (1991:455) warns that there is a danger in the interculturation process exhibited by the North Atlantic region where Christianity has become "nothing but the religious dimension of culture, listening to the church, society hears only the sound of its own music". Moreover, as we have seen above, the western world has "often domesticated the gospel in its own culture hence making it unnecessarily foreign to other cultures" (Bosch 1991: 455). While in the real sense, the gospel is foreign to every culture, it is, however, important to establish whether the tension between the Anglican Church of Kenya (in her pastoral care before and after independence) and the *Agĩkũyũ* community, emanated from the gospel itself or from the way the gospel was presented. The same can be said of the pastoral care practice. Seen from this light, any genuine interculturation ought to view the gospel as the liberator of culture, while at the same time, be conscious of the fact that the Gospel also has the potential to imprison culture (Walls 1982:99). Thus, adherence to this viewpoint could have averted the unnecessary "conflicts" between the Anglican missionaries and the African Christians, as we have seen above (see Walls 1985:4; 2002:162, Waruta 1994: 129; and Anderson 1998:24; Msomi 2008).

[267] According to Solomon (2001:50), African Renaissance is about transformation, concern for a new way of thinking and feeling for Africa, its history and its socio-economic and political status. It is an invitation to re-invent the African people, what they do, how they do it and those that benefit from their effort. It is about raising new questions and new possibilities, and reconsidering old problems from a new angle. In fact, Mbeki, the former South African President was a strong driving force behind this call (see Murage 2007:157).

pastoral care and counselling without becoming syncretic in the interpretation? Such questions will be important to our understanding of interculturation that could enable the church to adopt *Ũtugi* paradigms appropriately in her HIV and AIDS programmes.

In fact, when confronted by the HIV and AIDS pandemic, which has been killing people for more than twenty years and has no cure, the church is challenged to identify genuine African values and practices (traditional resources), which though challenged by Christian teaching (wealth of biblical, theological and ecclesiological resources) and modernity, remain positive, true, noble and capable of resisting and eventually defeating this deadly pandemic. Since *Ũtugi* exhibited such values as embrace, concern for life, inclusiveness, care for one another, protection, healing, and sacrifice so that life may continue, we, therefore, recommend it as an appropriate model that could be adopted by the Anglican Church for healing and care in the context of HIV pandemic in Kenya. Therefore, the understanding and interpretation of an interculturation model is crucial to liberative pastoral care. This is because liberative pastoral care takes seriously the African worldview and it also seeks "culturally relevant interpretation of experienced phenomena" (Lartey 1997:25).

Emmanuel Y. Lartey (1997:30) observes that, culture, as a way of people's life includes the ideas, values and meaning embodied in institutions and practices in form of social relationships, in systems of belief, mores, customs, and the way objects are used and organised in the physical life, stressing the way these structures are experienced, understood and interpreted. The implication, therefore, is that, these structures and their meanings influence the experience of people. From this understanding, Lartey (1997:101) contends that, as a paradigm interculturation, is important to pastoral care, for it is based on the premise that the Christian faith must be rethought, reformulated and lived anew in each human culture. Further:

> An intercultural study attempts to capture the complexity involved in the interaction between people who have been and are being shaped and influenced by different cultures. It takes seriously the different expressions originating in different cultures by then proceeds by attempting to make possible a multi-perspective examination of whatever issue is at stake. It recognises that it is impossible to capture the totality of any given social group's culture. It realises also that dominant or powerful groups may deliberately or unwittingly seek to impose their culture and perspective upon all others, or else control and select what is to be allowed as expression. Worse still and yet most common, has been the attempt to universalise and 'normalise" a particular culture's experience and judge all others by that one's views. This has been the case most clearly in the Eurocentric enterprise that has fuelled centuries of modernity. Such hegemonic attempts were pursued quite overtly in the period of Western expansionism, but even now often continue in subtle ways (Lartey 1997:32).

Lartey is of the view that an intercultural model should counter-attack such vices by enhancing diversity and opposing reductionism and stereotyping, which tend to control people through categorisation, characterisation and hierarchy. In this way, an intercultural model becomes a creative model that provides a response to pluralism, hence, affirming contextuality, multiple perspective and authentic participation (Lartey 1997:33). Since contextuality, multiple perspective and authentic participation are important principles for our understanding of interculturality, there is a need to consider each of them.

a) *The principle of contextuality*: This principle dictates that people's behaviours and beliefs be considered within the framework of a broader worldview, meaning and surrounding beliefs (Lartey 1997:33). It is true that context does not determine behaviour or belief; nevertheless, it influences the behaviours and beliefs of people, becoming meaningless outside the context. For this reason, pastoral care givers must consider the social, cultural, economic, political and environmental contexts of their clients if they are to remain relevant (Lartey 1997:33).

b) *The principle of multiple perspectives*: This principle states that when "equally rational persons" are told to explore and examine a particular thing, they give different views (Lartey 1997:33). This is because each person has his or her own perspective. For this reason, the principle of multiple perspectives stipulates that different perspectives should be considered equally worthy, and it calls for attentive listening and open discussion. It is from this premise that the principle of multiple perspectives rejects both mono-causal explanations of phenomena and one total explanation of any experience (Lartey 1997:33). For Lartey (1997:33), power dynamics seems to be at work when interpreting and explaining human experience.

c) *Authentic participation principle*: In this principle, the "other" is valued and given space to share, discuss and expound any issue on his or her own terms, while considering that there are strengths and weakness in every approach (Lartey 1997:33). Lartey (1997:33) concludes that an intercultural model pursues and encourages diversity by making space for the "other", and making room for participation on one's term. This is in line with the theology of creation. Lartey's understanding of interculturation is in harmony with Louw (2008:154) who argues that interculturality is concerned with "Christian spirituality

within culture" as well as mutuality in terms of a "hermeneutical process of understanding/interpretation, enrichment and critical exchange without the sacrifice of uniqueness."

The above concept of the intercultural model is captured vividly by the Anglican theologian, Christopher Duraisingh, who posits that:

> The gospel story is for all places and time, but it is never available to us apart from its embodiment in particular cultures. The story of God's love in Christ becomes the good news only as it is enfleshed in a particular culture; yet this gospel can never be identified with any one of its particular expressions, for it transcends them all. While all culture are worthy expressions of the gospel story, no cultural expression of it, even the classical, can become the exclusive norm or exhaustive means of drawing out the richness of God's love in Christ. It is only as the multiplicity of traditions that mark the global church are recognised and brought into dialogue with each that the church can discern and witness to the "multi-colored wisdom of God" that the author of the letter to the Ephesians speak of (2000:687).

Like Duraisingh and Lartey, Louw (2008:154) also claims that the interculturation model recognises plurality of cultures and presupposes plurality of theologies. Seen in this light and considering that culture encompasses the entire life of a person, interculturation, therefore, connotes the idea of social reconstruction. This incarnational dimension from an ecclesial perspective means that the "gospel being 'en-fleshed,' 'em-bodied' in a people and culture" is not so much of the church being expanded, but of the "church being born anew in each new context and culture" (Bosch 1991:454). Pedro Arrupe (cited in Shorter 1988:11) claims that, the concern of the intercultural model is to become "a principle that animates, directs, and unifies the culture, transforming it and remaking it." From this understanding, we can deduce that the focus, then, is on the synthesis that comes as a result of the interface between the Gospel and culture, leading to the transformation of the old. This view, however, fails to acknowledge the limitations of interculturation, as interculturation does not mean that culture is destroyed.

Bosch (1991:447) traces the origin of inculturation to Pierre Charles who introduced the concept of "enculturation", which was already at home in cultural anthropology circles, into missiology. J. Masson first coined the phrase *Catholicisme inculturé* ("inculturated Catholicism") in 1962.[268] Subsequently, it gained currency among the Jesuits in the form of "inculturation." Later in 1977, P. Arrupe, the Jesuits' Superior-General, introduced the term

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[268] As early as the 1950s, H. R Niebuhr proposed this model in five aspects, but in the form of "Christ and Culture." The first was *the rejection and anti-model* (Christ against culture), the second was *the accommodation model* (the Christ of culture), the third was, *the synthesis model* (Christ above culture); while the fourth was, *the dualistic model* (Christ and culture in paradoxical relationship and the last one, *the operational model* (Christ the transformer of culture) (Niebuhr 1952:58-228).

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to the Synod of the Roman Catholic Bishops. By so doing, he began the process that gave it the universal currency that it enjoys today. As time went by, it was widely accepted in Protestant circles but, this time, in form of interculturation.[269] Certainly, interculturation suggests a double movement, that is, interculturation of Christianity and Christianisation of culture. In this way, the Gospel remains Good News while at the same time it becomes a cultural phenomenon as it takes into account the implication of systems that are already present in the context (Schreiter 1985:12ff). As a paradigm, therefore, it offers the cultures "the knowledge of divine mystery", on one hand, and, on the other, it helps them "to bring forth from their own living tradition original expressions of Christian life, celebration and thought" (Bosch 1991:454).

In line with the above, Louw (2008:153) asserts that, today, interculturality and the systematic approach are needed in our churches, for in an intercultural hermeneutical model, we do not work with the dualism of Christ and culture; rather, we use "interconnectedness between Christ and culture." In fact, interculturality focuses on the meaning of Christian spirituality within culture, the mutual influence and the exchange of the paradigms between the two. Therefore, interculturation in the African context is essential in pastoral care and counselling, particularly, in the context of the HIV and AIDS pandemic. Louw (2008:153) perceptively argues that interculturality is indispensable as one of the paradigms in pastoral care and counselling. This is because:

> Within an African perspective the human being cannot be understood separate from cultural issues and value. Human are embedded in culture. Culture in itself is an expression of the creative and imaginative human spirit. In itself it can be viewed as sacred endeavour. If it is true that culture in a comprehensive sense encompasses the entire life of a people, their moral religious beliefs, social structures, political, economic and education system, form of music and dance, rituals and all other products of their creative spirit, a discussion on culture must indeed include the aesthetic, spiritual and sacred dimension (Louw 2008:153).

The symbolic paradigms such as drama, dance, art, and so forth are important in healing and caring for the PLWHA and their families. Van Dyk (2008:142) observes that there is need to include traditional healing and learning methods to tell the story of HIV and AIDS. She notes

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[269] The concept of inculturation clearly gained currency in the 1970s, largely, because of the efforts of African bishops and theologians who saw it "as an ally against the consequence of cultural alienation and a guarantee of a genuinely African Christianity" (Shorter 1988: xi). Though relatively new in Africa, inculturation is an old process in the history of Christianity and to which African Christianity is a legitimate heir. However, it is an inheritance that was dormant until the twentieth century, when the African Roman Catholic Bishops and theologians popularised it as a significant theological category. It finds its terminological parallel, among Protestant theologians, in terms such as indigenisation and Africanisation. Interestingly, inculturation was greatly boosted by the resolutions of the consultation on Gospel and culture, which was sponsored by the Lausanne Committee on World Evangelisation, held in 1978 in Willowbank, Bermuda. There, the Willowbank Report opted for the "dynamic equivalence" paradigm of inculturation.

that the African notion of social sharing (cf. *Ũtugi*), ritual, story-telling, dramatisation, singing, clapping, dancing and drumming should be explored and creatively used by the HIV and AIDS educators to put their message across (Van Dyk 2008:142). This explains why, in the praxis of pastoral care in Africa, there is a need to focus on the African context as pastoral care becomes contextually grounded and orientated (cf. Pobee 2000:14). Failure to do so, will mean that the pastoral care practice will become alien, oppressive and irrelevant (Lartey 1997:33), a repeat of the exclusive pastoral model as practiced by colonial missionaries and the neo-colonial African clergy.

However, most African theologians are concerned that even though there is a phenomenal growth of the church in Africa, the church in Africa is still immature; for how can it claim to be authentic when it is still burdened by the pastoral and cultural baggage, which was left behind by western missionaries? Nahashon W. Ndungu (2008:72) posits that this religious maturity should be gauged by the degree in which Christianity has been fully rooted in the African cultural experience. He argues that the majority of African Christians continue to have two centres of influence running parallel to each other namely the Christian teachings and their African culture (Ndungu 2008:72; cf. Setilone 2000:23; Dickson 1984:13; Waruta 2000:124). When faced with existential issues, many African Christians tend to revert to traditional customs for solutions. Such dichotomy is noted by Mbiti in his statement that, "Christianity has made real claim in Africa. This question is, has Africa made real claim on Christianity? Christianity has Christianised Africa but Africa has not yet Africanised Christianity" (Gehman 1991:20). Ndungu (2008:72) is also of the view that unless the church is transformed from being a part-time religion and a Sunday only religious cult to "a total way of life for the African Christians", Christianity will not be authentic in Africa.[270]

Consequently, the challenge that faces the Anglican Church of Kenya today is how to address those pillars of African culture that form the core of their life and, indeed, their spirituality, and how to design ways of interculturating them in their Christian living. Mugambi (1989a:116) reminds us that "it does not matter how long a foreign culture suppresses another culture but at one point when the suppressed culture gets an opportunity it will reassert itself and adapt to the prevailing social challenges." Mugambi (1989a:116) further states that, "If Christians choose to detach themselves from the challenges of the society in which they live,

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[270] When the church fails to embrace the intercultural model, it will totally fail, as in the case of Christianity in North Africa (now an Islamic region) and Portuguese missionaries in the East coast of Africa (who totally failed to Christianise anyone). In both cases, the gospel message did not cover all aspects of people's life; as a result, the church never survived.

the church to which they belong will appear to be a cultic club with exclusive membership, which is irrelevant to the needs of contemporary society." For Buffel (2006:48) there is a need to shake off the shackles of western domination and imprisonment, which has limited the possibilities of contextual pastoral care. In this case, the quest is for a pastoral care model that can affirm the identity, integrity and self-esteem of the PLWHA and their families. By embracing an intercultural model, the Anglican Church of Kenya will be able to reassert *Ũtugi,* using it as a tool for affirming the identity, integrity and self-esteem of the PLWHA and their families. In the following section, we shall demonstrate how the Anglican Church can interculturate *Ũtugi* in her HIV and AIDS programmes.

5.5.2. Interculturating Irũa (circumcision)

As a ritual entrenched in *Ũtugi,* the Anglican Church of Kenya should consider interculturating *Irũa* (circumcision) in her ecclesial praxis. The perseverance of this rite, which was condemned a century ago by the Anglican missionaries, calls for it to be interculturated if the Anglican Church is to be relevant to her Kenyan context. According to Mugambi (1989a:124), the rites of passage (*rites de passage*) refers to a variety of rituals which a community set up, according to its traditions, to mark the transition through life of individual members from one stage to the next, for instance, from birth to death. In this case, the "rites of passage" are associated with birth, puberty, marriage and death. The table 5.5.2.1 shows the major rites of passage and the equivalent aspects of life emphasized by initiation.

Table 5.5.2.1. The Agĩkũyũ rites of passage

Rites of passage	Phase of life emphasized by initiation
Puberty (*Mwanake or Mũiritu*)	Adulthood (*Kũgimara*)
Marriage (*Kũhikania or Kũhika*)	Parenthood (*ũciari/Kũrera*)
Death (*Gĩkuo*)	Renewal of life (*Gũciaro rĩngĩ*)
Birth (*Gũciaro*)	Childhood (Wanainĩ/puberty)

In the Agĩkũyũ culture, the "rites of passage" are the means through which the individual is made aware and continually reminded of his or her responsibility as a member of the community (cf. Mugambi 1989a:124). In this case, maturity is not determined by the chronological age, but "in direct proportion to the degree to which the individual meets the expectations of the community to which he or she belongs", at every age in his or her personal growth. Therefore, the rites of passage are established and preserved to "prepare, test, confirm and reinforce" the positive values cherished by the community (Mugambi 1989a:124).

In the Agĩkũyũ worldview, life is understood as a continuous, integrated process in every aspect. As such, the rites of passage graduate boys and girls from childhood to adulthood, thus, incorporating them as full member of the community (Wachege 1992:29). From the cultural point of view, this rite is unique because it is educational and has social and religious dimensions. Therefore, the above explains the reason for its persistence even though it was condemned by the missionaries. For instance, even though female circumcision has remained controversial, the statistics in table (5.5.2.2) shows that the rite is very much intact in Kenya and in many countries in Africa. This shows the need of interculturate it in a more humane and acceptable way.

Table 5.5.2.2. Female circumcision in Africa today (Gachiri 2006:106)

Country	Percentage	Country	Percentage
Egypt	80%	Liberia	60%
Benin	50%	Mali	80%
Burkina-Faso	70%	Mauritania	25%
Cameroon	20%	Niger	20%
Central African Rep	50%	Nigeria	60%
Chad	60%	Senegal	20%
Cote d'lvoire	60%	Sierra Leone	90%
Djibouti	98%	Somalia	98%
Eritrea/ Ethiopia	90%	Sudan	89%
Gambia	80%	Tanzania	10%
Ghana	30%	Togo	50%
Guinea Bissau	50%	Uganda	5%
Kenya	**50%**	**Zaire**	**5%**

The table (5.5.2.2) also shows the countries that practice female circumcision and their percentage. It also shows that about half (50%) of the Kenyan population practice clitoridectomy.

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Table 5.5.2.3. Female circumcision in Kenya selected communities (Gachiri 2006:106).

Community	PERCENTAGE %
Kisii	97
Maasai	89
Kalenjin	62
Taita Taveta	59
Meru/Embu	54
Agĩkũyũ	43
Kamba	33
Mijikenda/Swahili	12
Luhya	3

Focusing on Kenyan communities, table (5.5.2.3) indicates that the Kisii community is the leading in female circumcision with the percentage of 97%. Kisii is followed by Maasai 89%, Kalenjin 62% and Taita-Taveta 59% while the Meru and Embu have 54% and Agĩkũyũ with 43%. Others include the Kamba with 33%, Mijikenda/ Swahili with 12% and Luhya have 3%. It is interesting to note that out of 42 communities in Kenya, only the Luo and Turkana communities who do not practice both boy's circumcision and female's clitoridectomy. This situation, therefore, calls for the Anglican Church of Kenya to find better ways of dealing with this ritual.

Moreover, since this rite of passage poses a huge challenge to the pastoral ministry of the Anglican Church of Kenya, the church has a responsibility to design ways of incorporating it in her pastoral care programmes. As a rite of passage, entrenched in *Ũtugi,* which permits a person to undergo other subsequent rites such as marriage and adulthood (cf. Wachege 1992:17; Nthamburi 1995:18) and a proper burial at death (Wachege 1992:17), this rite is important and the Anglican Church cannot ignore it. During *Irũa,* the operation on a person's sexual organs signifies the departure from childhood to adulthood, and it also symbolises the transformation of the body and mind (Wachege 1992:17).

Apart from the above cultural understanding, it has been found that *Irũa* could be a means of reducing the HIV and AIDS in men. According to the World Health Organisation (WHO), circumcised men are less likely to have HIV than uncircumcised men, and HIV is less common among populations that traditionally practise male circumcision than in communities that do not practise it (WHO and UNAIDS 2007:2). As early as the 1980s, scientists suspected that male circumcision might reduce rates of HIV transmission during sex. However, the extent of the effect of circumcision was not clear, or whether other factors

played a role (Bailey 2007:5). To settle this issue, three experiments were conducted, one in South Africa (2005), another in Kenya (2007) and in Uganda (2007), which altogether involved more than eleven thousand previously uncircumcised men (WHO and UNAIDS 2007:2-3). During the research, each man was randomly assigned to one of two categories. One group had their foreskins removed at the start of the study and the others remained intact and all of them received extensive counselling on HIV prevention and risk reduction techniques (Gray 2007:5; Turner and Morrison 2007:20). The researchers also collected information about the men's sexual behaviour to check whether it varied between the two groups but they found no large differences. The table (5.5.2.4) shows the result of the above experiments:

Table 5.5.2.4. Circumcision of men in South Africa, Kenya and Uganda

Location/place	Number of participants	Year report published	Result in circumcised men
South Africa	3274	July 2005	60% fewer infection[271]
Kenya	2784	February 2007	53% fewer infection[272]
Uganda	4996	February 2007	51% fewer infection[273]

From the above, the WHO and UNAIDS (2007:5) concluded that male circumcision, if performed safely in a medical environment, can prevent roughly half the risk of a man becoming infected with HIV through heterosexual sex (cf. Auvert *et al* 2005:4; Williams *et al* 2006:7; WHO and UNAIDS 2007:5). Such conclusions were reached during the International AIDS Conference in Vienna by the Universities of Nairobi, Illinois and Manitoba (UNIM). They confirmed that in their four-and-a-half years of follow-up, the research has showed that circumcision reduced chances of infection from a female partner by about 60 percent (Daily Nation 2 Aug 2010). In fact, male circumcision is practiced in many communities in Kenya and it often serves as rite of passage to adulthood. Some ethnic groups with ancestral homes in the Nyanza, Rift Valley and Western provinces, however, are traditionally non-circumcising communities. Recently, the efficacy of medical male

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[271] See The Baltimore Sun , 14 December, 2006, "Circumcision Lowers Threat of HIV, Studies Find."
[272] See Williams B. G. *et al* (11 July 2006), "The Potential Impact of Male Circumcision on HIV in Sub-Saharan Africa", PloS Medicine 3(7).
[273] See Auvert B. *et al* (2005), "Randomized, Controlled Intervention Trial of Male Circumcision for Reduction of HIV Infection Risk: The ANRS 1265 Trial," PloS Medicine 2(11).

circumcision in preventing HIV has been established in several randomised controlled trials in Africa South of the Equatorial forest.

Another interesting research by KAIS was conducted in Kenya where they interviewed men and asked them if they are circumcised; their responses were then linked to biological outcomes. KAIS (2009:11-112) reports that a total of 85.0% of men were circumcised and nearly half (48.2%) of men were circumcised in the Nyanza province. A look at the two groups show that 13.2% of all uncircumcised men were HIV-positive compared to 3.9% of those circumcised. [274] The figure 11 shows the number of men circumcised, according to province in Kenya in the year 2009. Whatever the explanation, there is a strong relationship between non-circumcision of men and HI virus infection, with many more uncircumcised in Kenya being HIV positive.

Figure 11: Male circumcision in Kenya

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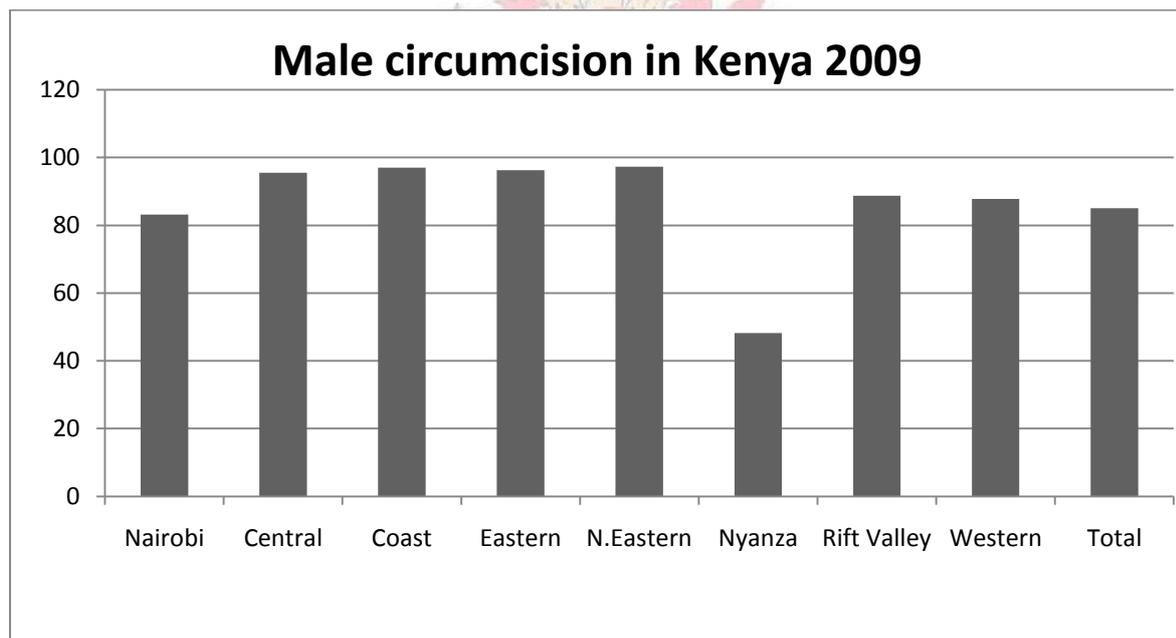
[274] An unpublished household survey in Kenya has shown that uncircumcised men have an HIV rate that is 11 times higher, while a second study in India has found that uncircumcised men have a seven times higher rate of infection. Other studies show that Zambia and Ethiopia have lower rates of HIV infection in areas of the countries where circumcision is more common. Researchers have suspected a link between circumcision and HIV prevention for more than 15 years. In the United States, studies have shown that high circumcision rates have had a protective benefit for heterosexual Americans. However, most specialists have not recommended the procedure because they believed that other factors such as religious and cultural beliefs might explain the link. The recent Kenyan data, however, has given new impetus among some AIDS experts to pay more attention to the issue. The Kenyan study was completed by the Demographic and Health Surveys, a Maryland-based independent group that conducts detailed surveys around the world. Also see - http://www.boston.com/news/globe/health_science/articles/2004/11/16/circumcised_men_/

Anarfit (1994:24) and Mati (1997:13) assert that uncircumcised males suffer bruises during intercourse more readily than circumcised males, and this exposes their partners to infection.[275]

In this regard, Irungu *et al* argue that the mechanisms thought to explain the protective effects of male circumcision are:

> First, the foreskin contains a high density of *Langerhans* cells (the prime target for sexual HIV transmission) compared with cervical, vaginal, or rectal mucosa. Second, the foreskin increases the risk for ulcerative STDs, which facilitate the transmission of HIV. Third, the susceptibility of the foreskin epithelia to disruption during intercourse may facilitate HIV transmission. Fourth, the moisture and temperature under the foreskin may promote microorganism survival and replication. Finally, a circumcised penis develops a layer of keratin that minimizes the risk for HIV transmission (2006:24).[276]

Irungu's (2006:24) observed results could have been precipitated by several possible reasons. (a) *The foreskin:* The foreskin creates a moist environment in which HIV can survive for longer in contact with the most delicate parts of the penis, and the inner surface of the foreskin contains cells that are especially vulnerable to infection by HI virus (WHO and UNAIDS. 2007:2; cf. De Vincenzi and Mertens (1994: 156-166). (b) *Tougher penis head:* If the foreskin is removed then the skin on the head of the penis tends to become tougher and more resistant to infection. In addition, any small tear in the foreskin that occurs during sex makes it much easier for the virus to enter the body (Caldwell 1995:113-117).

The WHO and UNAIDS (2007:2) cautions that it is important to note that the proven benefit only applies to men, and the studies so far conducted suggest that it probably does not have a substantial effect in reducing HIV transmission from an infected man to a woman. On the other hand, male circumcision should never replace other known methods of HIV prevention and it should always be considered as part of a comprehensive HIV prevention package, which includes promoting delay in the onset of sexual relations, abstinence from penetrative sex and reduction in the number of sexual partners (WHO and UNAIDS. 2007:7). Others are providing and promoting correct and consistent use of male and female condoms; providing the HIV testing and counselling services; and providing services for the treatment of sexually transmitted infections (STI).

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[275] Research conducted in Kenya, Uganda and South Africa in 2005 has shown that male circumcision reduces the risk of HI virus transmission by 60% to 70% because certain characteristics of the foreskin of the penis makes it easier for HI virus to enter into the body. Therefore, men who are not circumcised are at greater risk of being infected. When the foreskin is removed through circumcision, the likelihood of transmission is reduced.

[276] De Vincenzi and Mertens (1994:156-166) maintain that since circumcision status is a cultural marker, circumcising and non-circumcising communities may differ markedly in cultural mores, sexual behaviour and in other ways, and, therefore, we cannot just conclude that circumcision can reduce the rate of infections in a male.

In addition to the above scientific evidence, a number of reasons could be used to motivate the Anglican Church of Kenya to interculturate *Irũa* (circumcision) in her ecclesial praxis: (a) First, is the reason that stems from the fear of *disintegrating traditional structures* due to modernity (Ndungu 2008:87). The church needs to realise that traditional structures and programmes that ensured that youths grew up as responsible and useful members of society have been greatly affected by modern social structures that are based on western values (Murray 1974:23; cf. Nyaudi 2005:76-84). In fact, the church needs to realise that the failures ensued after she condemned this traditional rite without replacing it with another. In the context of the HIV and AIDS pandemic, the Anglican Church of Kenya could now reverse the problem by incorporating the rite in her ecclesial praxis. Therefore, there is need for the Anglican Church to reconfigure and interculturate the rite to avoid a repeat of mistakes made by the early CMS missionaries.

(b)The second reason is the issue of the HIV and AIDS. Ndungu (2008:87) urges that, after seeing many young people die of HIV and AIDS related diseases, the church should design a contextual pastoral approach that could enable her to curb the spread of the HI virus in the community. Such an approach should also enable the church to instil moral values, which pertain to sexual relations, personal dignity and, in this case, the rite of passage as entrenched in the practice of *Ũtugi* could be an important tool. (c) Third, is the issue of *female circumcision,* which has persisted regardless of the condemnation by the churches and the government authorities (Murray 1974:23). Ndungu points out that:

> Despite its condemnation of the rituals, it has not offered suitable and/or acceptable substitute for the rituals and the accompanying education for life. The vacuum so created among African Christians has led them to hypocrisy whereby they perform the rituals secretly as a private family affair. What has been observed about the initiation ceremonies apply equally to other rites of passage. In marriage and funeral ceremonies, what is publicized as a church wedding or a church funeral is but the climax of several other cultural rituals that are performed, some before, after or simultaneously with the church ceremony. The family members see no contradiction because to them, the cultural demands must be fulfilled to ensure peace and harmony in the family as well as with the departed relatives (2008:84).

The church is therefore challenged to come up with a programme for girls, which can be socially acceptable and, which can enable girls to have a proper rite of passage like boys, but

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without undergoing clitoridectomy.[277] (d) The last point is the issue of youths being the minority in the mainline churches. Because of the communal aspect of initiation ceremonies, the rite can offer the church an opportunity to reach the youth groups, which have become a minority group in the church. Hence, by interculturating this rite, the church would be able to give pastoral care to many young people, re-evangelise them and enrich their spiritual development especially when the Christian initiation sacraments like Baptism and confirmation are administered to them during the graduation ceremony into adulthood through this rite (cf. Ndungu 2008:87; Gachiri 2006:118-119).

Having considered the reasons that could motivate the Anglican Church of Kenya to interculturate *Irũa* (circumcision) in her ecclesial praxis, we shall explore how the church can use this rite as a space for fighting the HIV and AIDS pandemic in the community. As in the traditional setting, the best time to start preparing initiates for the ceremony is in the month of April during the school holiday and the target candidates should be boys and girls who are to finish their primary school education that year.

Certainly, that age is more appropriate because it is the stage of puberty, the same age they are traditionally initiated (Murray 1974:23). The church, therefore, should register all candidates who would like to participate in the rite of passage. After the registration, the parish clergy and the church council should complement the role played by the traditional elders by providing counsel as in the case of *Ngwĩko* (fondling) (Kenyatta 1938:157-158). In other words, the church elders, clergy members and counsellors should manage this form of *Ũtugi* and teach sex education that would enable the girls and boys to be responsible for their lives. This is in line with the United Nations Convention on the rights of the child, and the National Policy on HIV and AIDS, which state that children should have access to

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[277] According to Flax (1990:1ff), the term "female circumcision" denotes three different surgical procedures that remove all or part of a woman's external genitalia. The first operation, called *circumcision,* is the least severe. It consists of the removal of the *prepuce* of the clitoris, preserving the clitoris itself and the larger parts of the *labia minora* (small lips of the vagina) (Flax 1990:2). The second operation, called *excision or clitoridectomy*, consists of the partial or total removal of the clitoris together with the adjacent tissues of the *labia minora*. The *labia majora* (large lips of the vagina) remain intact and the vulva is not closed (Flax 1990:2). The final and most severe operation, called *infibulation*, involves removing the clitoris, *labia minora*, and all or most of the *labia majora* (Flax 1990:4). After the operation, the two sides of the *vulva* are sutured together with *catgut* or thorns, leaving a tiny opening about the size of a matchstick or fingertip for the passage of menstrual blood and urine (Flax 1990:2). All three operations may be performed with knives, razor blades, or pieces of glass, all of which are rarely sterilized. In addition, all three operations are usually performed without the use of anaesthetics. After each operation, the woman or girl's legs are often tied together for an extended period to allow the wound to heal. The *Agĩkũyũ* removes prepuce of the clitoris in girls and the foreskin in boys. Presently, the church only substitutes the rite for girls with official graduation but for boys, an operation is still carried out on their foreskins.

information that will help them develop their physical and emotional well-being (Van Dyk 2008:344).

Therefore, *Irũa* (circumcision) should be a space where candidates, their parents and mentors could fellowship and could engage in topics that are related to the HIV and AIDS and life skills. Additionally, the fellowship should aim to prepare the candidates to face the rite psychologically, spiritually and physically, and equally ensure that, as in the traditional rite of passage, each candidate is given *Mũtiri* (a mentor/counsellor) who is to journey with them throughout their life (cf. Gachiri 2006:60). The *Mũtiri* is an important person in the ritual of circumcision because he or she is a counsellor of the initiate. Such a person should have an upright behaviour, trained in the HIV and AIDS programme and possess basic pastoral care and counselling skills. As in traditional education, the parents and counsellors are to ensure that the candidates continue with *Kĩrĩra kĩa mũciĩ* (this will be explored in section 5.7).

After the enrolment, the clergy (as facilitator), the parents (as guardians), the counsellors (as mentors), the medical doctor (as circumciser) should constantly teach the candidates various topic related to the HIV and AIDS. This could continue until the real ceremony is conducted during the long holiday, in the month of December. The candidates could be hosted either in the church hostels or in school hostels where they are to remain for three weeks in seclusion, away from their parents and the rest of the community. Of importance is the safety of the circumcision, as it should be performed in a clean place by trained staff. The management of the wound, the use and care of sterilized instruments, the proper organization of the circumcision rite, the information to be given to the initiates and the persons involved particularly the *Mũtiri* (*Atiri*-pl.)[278] are the obligation of the church, which should ensure that such precautions are taken into consideration.

In the case of the boys, the first week could be spent in preparing for the actual physical initiation. This would focus mainly on the teaching of the significance of the ritual as a turning point to adulthood. Appropriate course content should be developed and made available to all members. For instance, topics that could be taught to boys before actual circumcision may include changes in adolescence (physical, emotional and psychological), and the procedure involved in physical circumcision performed by a qualified medical doctor

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[278] Traditionally, after the operation had taken place, the groups of initiates used to leave together in a separate *kiganda* (hut) with the *Atiri* (counsellors who support them physically and emotionally). During the time, they were well fed and they learned from the *Atiri* until they emerged (*kumira*) as adults.

(Caldwell 1995:113-117).[279] The rest of the time could be spent in healing and in-depth lessons by clergy and parish council members, counsellors and experts. Some of the topics to be covered during this healing time may include sexual relations, sex-abuse, courtship and marriage, family life education, drug abuse and HIV and AIDS.

The sex education should aim to both reduce the risks of potentially negative outcomes of sexual behaviour such as HIV and AIDS, unwanted or unplanned pregnancies and infection with sexually transmitted diseases, and to enhance the quality of relationships. It should also aim at enabling the young people's ability to make decisions concerning their lives. Moreover, because young people get information about sex and sexuality from many sources, some of which are inaccurate, there is need for providing accurate information about sex during this period of seclusion. Alta van Dyk (2008:127-145) notes that the purpose of the HIV and AIDS education is to "prevent the spread of HIV infection; to allay excessive fears of the pandemic; to reduce the stigma attached to it and to instil non-discriminatory attitudes towards persons with HIV and AIDS." Therefore, education should ensure that learners and students acquire appropriate knowledge and skills in order to adopt and maintain behaviours that will protect them from HIV infection.

It could be helpful if the counsellor tried to find out what the young boys and girls already know, add to their existing knowledge and correct any misinformation they may have or reframe pathological beliefs. This is because, without correct information, young people can put themselves at greater risk. With proper information, however, they can develop well-informed attitudes and views about sex and sexuality. In other words, topics such as, sexual development, reproduction, contraception and relationships should be integrated in the programme. Other topics include challenges of puberty, sexual reproduction, fertilisation, conception, sexually transmitted diseases, and HIV and AIDS prevention. Additional topics could be incorporated such as birth control, contraceptives, use of condoms, commitment, marriage, partnership, laws relating to sexual behaviour, Christian maturity and traditional understanding of sex and sexuality. Of course, other topics could include the danger of abortion, confidentiality, and relationships as children of God, etc.

In fact, it should be noted that some people might oppose the above education by maintaining that such disclosure can persuade the young people to experiment with sex, thus, increasing

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[279] For more information of this topic, see Gunn, Hansel, Zenner and Harper (1988:1-12).

vulnerability to HI virus. Others might claim that such education is unchristian and unAfrican. However, while these arguments are valid, it should be noted that people who receive such education are more empowered than those who do not benefit from such programmes. Again, sex education is not new for it was (is) taught by many African communities. For instance, in the Agĩkũyũ culture, *sex* education was taught during rites of passage. In fact, *Ngwĩko* (fondling) was part of sex education and as we have seen in Chapter Three of this study. It was taught to both boys and girls during initiation (Kenyatta 1938:157-158), although it was restricted to specific spaces (rites of passage), times and individuals.

Therefore, the church leaders should learn the language for addressing the issue of human sexuality openly. Since many church elders in the Anglican Church of Kenya, as in many Kenyan communities, do not discuss human sexuality openly, it is imperative for the church leaders to use *Irũa* (circumcision) as a space to teach on human sexuality. This is in line with the Agĩkũyũ culture where sexuality is taught only during the initiation of boys and girls, when they are being trained for the roles and responsibilities associated with being an adult. Therefore, the Anglican Church needs to reclaim and develop this space, which the missionaries deliberately attempted to eliminate without replacing with another programme. Otherwise, how can sex education be left to individual families, who are not culturally equipped for it and how can sexual education be addressed without creating a space?

In fact, the lack of sex education forces young people to pick information from their friends, and the media leaving the church with its own Christian culture of silence as it demonizes sex and fails to use this cultural space. As the initiates continue with the course while they heal, the whole session could be punctuated with prayers, Bible study, and Christian instructions on responsible adulthood based on Christian values. The final stage should be the graduation ceremony during which parents, relatives and friends are invited to witness the graduation of the candidates into adulthood (cf. Bongaarts, Reing, Way, and Conant 1989:373).

During the graduation, prominent members of the society could be invited including Christians, politicians, and government officials, among others. A guest speaker could also give a talk on HIV and AIDS. After the speech, Eucharist could be served along with ululating, singing and dancing as the rest of the community welcome the renewed members into the society/church. This celebration should be confirmed by the communal meal or feasting as it is in the traditional practice. During the graduation, each candidate should be accompanied by his or her relatives as he or she is given a certificate to keep as a reminder of

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the important occasion (cf. Bongaarts, Reing, Way, and Conant 1989:373). Certainly, the programme for girls should follow a similar pattern to that of boys except that there may be no physical (cut) initiation (cf. Bongaarts, Reing, Way, and Conant 1989:373).

On the other hand, the Anglican Church of Kenya should come up with an agreed manual to guide local congregations on how to organise programmes in a systematic manner. Important to consider is how to integrate this ceremony with the sacraments of baptism and confirmation. Those who have not been baptised or confirmed should do so. In this case, they should undergo double graduation and receive two certificates, thus, making the whole occasion solemn and religious. Moreover, because the girls would not have undergone actual cutting, they should be made to sign a declaration that they will never undergo female circumcision and they will fight such a vice in the society.[280] The rite of passage, organised in this manner, is significant as it follows the traditional three-phase pattern of *seclusion, transition and incorporation* (cf. Muriuki 1974:124).

In fact, the seclusion of boys or girls, away from their family members signifies that the young person should start taking personal responsibility for his or her life (cf. Wachege 1992:17). The teaching, guidance, spirituality and counselling offered in the programme should signify the renewal to enable the initiates to cope with contemporary social challenges. The HIV and AIDS education should aim at enabling these graduates to make responsible decisions. That means they should have knowledge that is firmly based on healthy values, norms, attitudes and skills to implement these decisions (see the figure 12).[281]

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[280] One challenging question on the part of girls is how the church can ensure that the same girls are not pressured or forced by their parents to undergo the physical circumcision after the Christian initiation. In fact, in areas where education is not adequately given, this is likely to occur, for one may be considered an outcast and unfit for marriage, which is a commitment reserved for adults. Therefore, the Anglican Church will be compelled to set up a mechanism for monitoring such incidences in order to curb the Christian-culture conflicts that may arise from customary or traditional values. Perhaps, this is where the community education can really help.

[281] The *Kĩrĩra Kĩa Mũcĩĩ,* which is integrated in HIV and AIDS education, could provide the following: life-skills, knowledge, attitudes and values according to the appropriateness of each *Riika* (age group). 1) **Knowledge: "**How to conduct relationships with significant others and with friends of the same and the opposite sex and how to cope with strangers; how to deal effectively with peer-group pressure; what sexual abuse or molestation is, how it can be prevented and where to find help in the case of actual or attempted sexual abuse or molestation; how to keep the body safe and health and how to avoid harmful behaviour (such as sniffing glue, drinking alcohol or taking various kinds of drugs); adequate knowledge about germ, viruses HIV and AIDS; ability to identify health problem and seek appropriate help; awareness of the universal precaution to be taken when handling blood; how to care for someone at home who is ill; how to cope with death in the family; facts about sex, sexuality and gender and sexuality education that are appropriate to the age and development stage of the child." 2) **Attitude and values:** These attitudes and values are accepted by all cultures and religions "building a realistic, positive self-concept; respect for the self and others as unique and worthwhile beings; self-control; the right to privacy; the right to protect one-self; the right to say "no" to an older person or someone in authority; the right to chastity; loyalty and commitment in relationships; honesty; taking responsibility for one's actions; respect for life; non-discrimination towards and tolerance of anyone who is different from ourselves; forgiveness; loving and caring; social justice and friendliness; kindness and sensitivity." 3) **Life skills:** These should help them develop life skills so that they can implement the knowledge, attitude, values and decision they make during the learning process "self-awareness; critical thinking; responsible decision making; problem solving; assertiveness; negotiation skills (negotiating abstinence, postponement of sexual intercourse and safer sex practices such as using condom); communication skills (including listening skills); refusal skill(also called "how-to-say no" skills); planning for the future; goal setting; conflict resolution; handling emotions (such as fear; uncertainty anger); handling failure and coping with related feelings; tolerance towards others whose values, behaviour, manners or appearance may differ from our own and positive self concept" (Van Dyk 2008:168).

Figure 12: Initiates equipped with life-skills, knowledge, attitudes and values
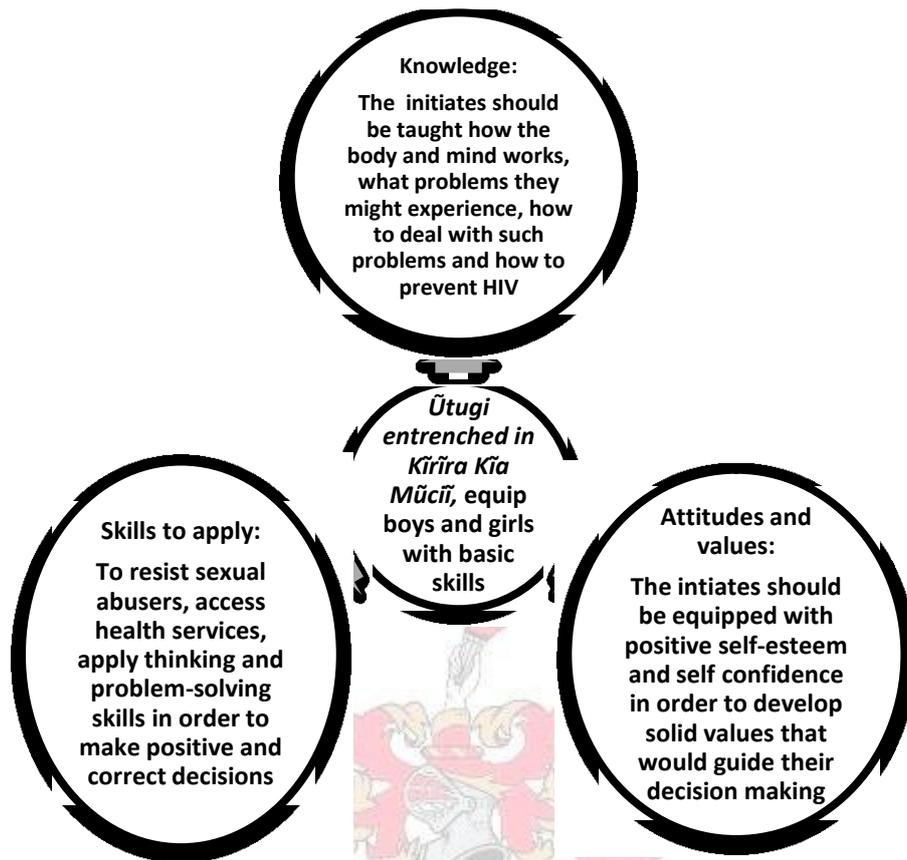
With the proposed model, the rite of passage would offer new relationships similar to those of the traditional *Riika* (age group); hence, there is need for the graduates to name their age group. As earlier observed, the use of the *Riika* (age group) system in which those of the same age-set are brought together ensures that everyone shares responsibilities and work together (Muriuki 1974:124; Wachege 1992:17). Therefore, in this programme, all the members of their *Riika* (age group) should be taught to fight the HIV and AIDS pandemic as a team. In terms of interculturation, the uniqueness of the programme is that Christian values are integrated into traditional practices (rites of passage) in order to transform them and make them to be religiously and socially acceptable.

Certainly, there is need for a follow-up programme to ensure that those who have gone through this ceremony live up to the demands of the vows to which they commit themselves on the graduation day. For instance, the church could start organising annual conferences according to the age group (*Riika).* During the conferences, the members of the age group should be offered a space where they could reflect on their journey since their initiation. Likewise, their mentors, counsellors, parents and church leaders should be given a space

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where they could provide further guidance and counselling. As such, the initiation ceremony should be seen as a continuous process and not a once in a lifetime event.

5.5.3. Interculturating *Harambee*

As we have already seen in the first chapter of this study, *Harambee* is an element of *Ũtugi,* which simply means the pooling together of resources within the community. It has been suggested that the Anglican Church could use *Harambee* to augment the education of the vulnerable as a way of fighting the HIV and AIDS pandemic. In this case, the church could initiate bursaries for orphans and support children from poor families to complete secondary education to boost their social power, employment opportunities and self-reliance, and to reduce their risk of infection. One of the challenges posed by the HIV and AIDS pandemic is that when the infection and death rates increase in the community, educational levels decrease. This is because many children who are infected or affected may drop out of school before completing their primary education because of poverty. They may compromise their education to cater for their sick parents or to engage in farming to sustain themselves. They may also drop out of school because the parents are too sick and poor to afford their school expenses such as books, school uniforms and other items for keeping them in school. The children from poor families, therefore, remain at risk of growing up as illiterates and becoming the probable poor of the future (cf. intergenerational poverty and vulnerability to the HI virus Cohen 2005:6).

In all cases, the most affected person is the girl child, who may be forced to engage in domestic duties or to work in the streets to raise money for food, which may include getting involved in prostitution. In her Masters research, Okyere-Manu (2006:31) found that sex workers in Pietermaritzburg in South Africa (as in the case of Kenya) sacrifice their physical health for cash. Due to poverty, the women as well as the girl child face the hard reality of hunger and homelessness because of their race, class and gender, as well as educational background. Therefore, rather than die, they opt to sell their bodies to get food on the table (Okyere-Manu 2006:31).

With *Ũtugi (Harambee)* at her disposal, the Anglican Church of Kenya is capable of addressing the above disparity. The church can solicit fund to cater for the vulnerable group mentioned above to avoid what Okyere-Manu saw as a challenge to women and girls (cf.

Okyere-Manu 2006:31). This is because education is a tool of liberation. Mugambi argues that:

> The church needs to be viewed as a "school" where people learn how to realise fuller human dignity. The pastor is not just a spiritual shepherd, he (she) is also a teacher. As the good shepherd leads his (her) flock to green pastures, so should a priest lead his (her) congregation towards a better life here on earth. This is a difficult task, especially because the pastor does not necessarily have deeper insights than the congregation which he leads. His (her) role is to be facilitator-a leader who is a follower, a master who is a servant, a teacher who is a learner. The realisation of total liberation means the elimination of all domination. The Christian faith maintains that total liberation on earth is possible only if people take seriously their dependence on God. This theological insight needs to be emphasised as the church continues to make its contribution to the process of liberation (1989a:111).

In fact, through education, the church can increase awareness and knowledge of the HIV and AIDS prevention. In Kenya, many schools and projects have been built on *Harambee*. It is also known that some village elders or individuals have provided plots of land on which schools, hospitals and institutions are built, through *Ũtugi* (*Harambee)*. These actions compelled Moi to say that:

> ...A school built through *Harambee* belongs to the people. Even a life saved through a donation for critical operation is life for all. Thus, the *Harambee* spirit makes it possible for Kenyans to incorporate themselves materially and spiritually into the lives and prosperity of others; and this enables them to benefit from a communality of sharing in both the efforts of each person and also in everybody's products (Moi 1986:29).

For example, in some places in Kenya, schools in rural areas are conducted under trees with no classrooms or desks, but when the local community raise funds through *Harambee* (*Ũtugi)*, they are able to construct mud classrooms. The church at times could mobilise the local community to raise money through *Harambee (Ũtugi)* to construct modern classrooms. It is interesting to note that one of the most beautiful Anglican Cathedrals in Kenya is in the Diocese of Embu and was built through *Harambee (Ũtugi)*.[282] The Kenyan Anglican Dioceses has also built five big cathedrals through *church Harambee*.[283] This implies that, if

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[282]Besides education, it is possible for the Anglican Church, through *Ũtugi,* to fulfil some of the Millennium Development Goals such as the eradication of extreme poverty and hunger, reducing by half the proportion of people living on less than one U.S. dollar a day, reducing by half the proportion of people who suffer from hunger, increasing the amount of food for those who suffer from hunger, achieving universal primary education , ensuring that all boys and girls complete a full course of primary schooling, elimination of gender disparity in primary and secondary education, preferably at all levels by 2015 (Millennium Development Goal at - http:// www.unstats.un.org/unsd/mi.htm).

[283] For example, in 1988, the *Harambee* made a remarkable impact in educating and empowering the rural poor. At that time, the Structural Adjustment Programmes (SAPs), which were dictated by the World Bank and the IMF were introduced in Kenya (Millen, Schoepf and Schoepf 2000:91). To many parents, education became a nightmare, for they were not able to educate their children, yet, many of the rural people were poor (Millen, Schoepf and Schoepf 2000:91). Fortunately, through *Harambee,* many young men and women in rural areas were able to go back to school. There was a case in the Turkana district of Kenya, where a girl was forced to marry so that her parents could get the money to educate the boy (her brother). When the local priest heard about it, he recalled the girl, and an impromptu *Harambee* was conducted so that both the boy and the girl could continue their schooling. This shows how the church could used *Harambee* to empower children from poor families. In fact, the church already has the platform and the halls where such *Harambee* ceremonies could be conducted, unlike that in Turkana, which was held under the tree. Likewise, the church and the community could through *Harambee* educated the poor from the secondary school to the tertiary level. This is true because some leaders in Kenya came from poor backgrounds but they were educated by the community with money solicited through *Harambee*. For instance, President Jomo Kenyatta came from a poor family but

the Anglican Church can construct such schools, or magnificent cathedrals and churches with money raised through *Harambee (Ũtugi)*, then, it is capable of supporting other programmes that are aimed at fighting the HIV and AIDS pandemic. Seen from this light, we can affirm that *Ũtugi* is practically sufficient to be used by the Anglican Church of Kenya to motivate individuals and the community, at large, to act on their own positive discoveries, thereby, empowering the PLWHA and their families. The challenge is how the church would transform her ecclesial structure of exclusivity into an ecclesiological structure of inclusivity.

5.6. Circular ecclesial structure: interaction and mutuality

As we have already seen, the ecclesial hierarchy and patriarchy of exclusivity needs to be transformed if the Anglican Church is to create a good space for congregational participation. Hinga (2008:87) acknowledges that the church needs a circular ecclesiastical model that recognises the community and that stresses the concept of "discipleship of equals." Such a circular structured ecclesiastical model is congregation-centric as opposed to bishop-centric (a top-down ecclesiology). It is interesting to note that the Agĩkũyũ spirituality is structured not along the lines of a pyramid, but of a circle. Even their huts, cooking pots and sitting arragements are circular in structure. Therefore, the Anglican Church of Kenya needs to adopt a circular and inclusive ecclesiology that can enable her to create a space for embrace and welcome to the PLWHA and their families. In this case, the bishops and clergy can play a crucial role in ensuring that the formations of democratic ecclesial structures that facilitate empowerment of laity are put in place.

In the quest for an inclusive Anglican ecclesiology, the Anglican Church of Kenya will be compelled to prioritise her time and resources, and then work out programmes that can enhance the life care of the vulnerable, especially the PLWHA and their families. By so doing, the church will demonstrate that it recognises their woundedness and their ongoing need for grace and mercy, as it continues to open its space to them (cf. Nouwen 1975:87). This is because as a caring community, the church should not recoil from these people's

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went to England through *Harambee* funds. It should be noted that even though the Kenyan government is presently providing Universal Free and Compulsory Primary Education (UF&CPE), there is a need for the church to continue with *Harambee*. This is because secondary and university education has remained very expensive for the poor people in Kenya (ACK Kirinyaga Synod book 2005:169). The implication is that children from poor families cannot afford to enrol in secondary school unless they are helped. Therefore, the Kenyan Anglican Church needs to figure out how *Harambee* could be used to support the bright and the less fortunate secondary school students as well. This can be done, for example, by developing a kind of a national secondary school insurance scheme where well-wishers are urged to contribute voluntarily (ACK Kirinyaga Synod book 2005:169). It is also expected that those who were educated through *Harambee*, in turn, would participate in future *Harambees,* hence, leading to acommunity of care. In 2003 the Anglican Church of Kirinyaga conducted *Harambee* to sponsor bright and disciplined children, and was able to raise Ksh 566,428, while in 2004, it raised Ksh 1,025,168 (see ACK Kirinyaga Synod book 2005:173).

suffering but should be willing to be present (*be there*) and share their burdens even when it cannot solve all their problems.

In this new position, the Anglican Church will become a welcoming space and a place rich with narratives, rituals, and history, thus, facilitating healing and care. Likewise, within this new position, the Anglican Church of Kenya will not only be a physical space but also a place alive with commitments and relationships, a space bounded by particular values and meanings. The challenge that the Anglican Church can face in offering a safe space to the PLWHA and their families is how to dismantle the distorted internal and external structures that perpetuate dehumanisation (cf. Nouwen 1975:87). As an inclusive space for the PLWHA, the Anglican Church will, therefore, need a combination of grace, spiritual and moral intuition, prayer, dependence on the Holy Spirit, the Bible, the wisdom of her tradition, resources from the local context and her tradition, which includes skills from pastoral care givers (cf. Vanier 1995:266-7).

Such an inclusive ecclesiology will enable the Anglican Church to be a place and a space for healing, care, protection and love. This is in terms of human relation and mutuality. The ancient Greek concepts of space and place, in relation to our being human, are very helpful to our understanding of inclusive ecclesiology. Louw (2008:26) notes that the ancient Greek refer to space and place respectively as *chora* and *choreo,* "verbal derivative of *chros* or *chora",* and which means an open space or land. Louw (2008:26) explains that *chora* can be interpreted as "to give room", and in metaphorical language, it can also refer to the intellectual and spiritual capacity of being able "to understand."[284] Louw (2008:20) further observes that one of the main factors that determine space is power. He argues that many life problems are not so much issues of personality and personality traits or personal characteristic, but reactions and human responses to the power within the systemic space and networking of relationships (Louw 2008:20). Louw (2008:20) concludes that power relations play a paramount role in the formation of human identity (cf. Schimdt 1975:742).

Therefore, a circular ecclesial structure encourages human interaction and it accentuates mutuality. It creates an inclusive ecclesiology that enables human beings to "fill space with values, perception and association in order to create a dynamic relational environment and

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[284] From a philosophical perspective, Derrida sees *chora* as a hermeneutic dynamic of interacting discourses (Okland 2004:154) while Platonic philosophy sees *chora* as a space where nourishment and motherly affection are related to *topos,* a specific and exact place of human encounter.

systemic network of interaction where language, symbol and metaphor shape the meaning and discourses of our life" (Louw 2008:26). In other words, an inclusive ecclesiology becomes a space and a place (*chora)* for nurturing, caring, supporting, protecting and healing the PLWHA and their families. This is well espoused by Mugambi in his call for ecclesial reconstruction and theology. Mugambi argues that for reconstruction[285] to be effective there is need for the church to be:

> reconstructive rather than destructive; inclusive rather than exclusive; proactive rather than reactive; complementary rather than competitive; integrative rather than disintegrative; programme-driven rather than project-driven; people-centred rather than project-driven; people-centred rather than institution-centred; deed-oriented rather than word-oriented; participatory rather than autocratic; regenerative rather than degenerative; future-sensitive rather than past-sensitive; co-operative rather than confrontational; consultative rather than impositional (Mugambi 1995: xv).

In such an inclusive ecclesiology, the Anglican Church becomes space or a home for the PLWHA and their families. This is because the church is able to provide the physical shelter (buildings), spiritual shelter (care and healing) and the shelter of relationships/mutuality (safer space) (cf. Pohl 1999:152). Such a church becomes a safer place where the PLWHA and their families are welcomed, appreciated, accommodated and shown Christ's love.[286] Mugambi (1995:17) suggests that such ecclesial space should include mythological reformation, doctrinal teaching, social rehabilitation, ethical redirection, ritual celebration and personal response. He further suggests that an inclusive ecclesiology incorporate good financial policies, pastoral care, research, human resources development, good management structures, family education, service and witness (Mugambi 1995:17).

Consequently, leadership based on the above should be exemplary, free from corruption, nepotism, favouritism or any prejudice, as witnessed in some churches that preach "moral judgements to the PLWHA." By setting the example of good governance, good management *(oikonomia),* which is free from extravagance, inertia, dictatorship and other vices, the church will truly be a place of fellowship where love replaces hate, suspicion and malice. It will be a

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[285] Theology of reconstruction is traced to the works of an Anglican layman and a professor of philosophy and Religion at Nairobi University, Mugambi who is from the Anglican Church Diocese of Embu, Kenya. He pioneered this theology in 1990 when he reflected theologically on the theme, "The *Future of the Church and the Church of the Future in Africa*" (Mugambi 1991:29-50). He was supported immediately by several other theologians such as the South African Anglican Archbishop, Desmond Tutu (1990), Charles Villa-Vicencio (South Africa), and Kangude Mana (DRC) (see Murage 2007:204). Tinyiko Maluleke remarks that both Mugambi and Ka Mana appear to see reconstruction as the new theological task, which replaces the decade long discourse on interculturation and liberation. Villa-Vicencio suggests that reconstruction theology engage in serious dialogue with democracy, human rights issues, law-making, nation-building and economics (Murage 2007:204).

[286] Some PLWHA and their families who come to the church are in dire need of food, money, clothes, while others need mere counselling, HIV information, and ARVS. Majority still sees the church as a hospitable place where they expect to be treated kindly and with love. However, there is a danger when some come with ill motives and pretend to be genuine seekers of hospitality from the church of Christ, only to turn out as crooks or thieves. Whatever the argument, the church is a place where the bereaved, the depressed, the downtrodden or the needy ought to seek their consolation and acquire pastoral and spiritual nourishment. As Vanier (1995:15) writes, when people sense that they have a place, "then we witness a real transformation - I would even say 'resurrection'."

place where the PLWHA are accommodated, protected, and cared for, and their various gifts are allowed to edify the church rather than a place of suppression (1 Corinthians 12-14) and stigmatisation. Certainly, the Anglican Church of Kenya needs such an ecclesiology to address appropriately the challenge posed by the HIV and AIDS pandemic.

However, the anticipated challenge is whether the Anglican bishops, as custodians of the Anglican Church constitution, would accept this ecclesial reconstruction given that they are all beneficiaries of the inherited dysfunctional ecclesiology of exclusivity. Since the bishops are the chairpersons of all synods and all other diocesan departments as noted above, one is left wondering whether the synod members (who are theoretically the governing body of the diocese) would support this gesture without being manoeuvred by the bishops who may feel they are losing some of the power to control everything at their disposal. Therefore, proper education needs to be put in place if an inclusive ecclesiology is to be adopted.

Sadly, the history of the Anglican Church from colonial times has shown that, many bishops are not interested in ecclesiastical reforms, for majority are obstructionist to the ecclesiastical renaissance, while others are the embodiment of such impediment. Perhaps church leaders need to ask themselves, what is the need of maintaining structures, which are dehumanising and, which cause sickness or pathology? Louw (2008:146) reminds us that, "sickness and pathology can refer to ideologies, destructive paradigms, dysfunctional systems, negative frameworks and patterns of thinking, prejudice and fixed presuppositions which hide and protect norms and values that are harmful to our being human."

Therefore, the functional church needs to be a space and a place where everyone is treated with dignity and as human being, and where everybody sees Christ in every human being whatever the person's situation or context may be. Vanier (1995:283) anticipates such a safer space and place, which, in our view, can challenge the Anglican Church of Kenya as it contemplates creating an inclusive ecclesiastical space and place for the PLWHA and their families. She foresees that:

> In years to come, we are going to need many small communities, which will welcome lost and lonely people, offering them a new form of family and a sense of belonging. In the past, Christians who wanted to follow Jesus opened hospitals and schools. Now that there are so many of these, Christians must commit themselves to the new communities of welcome, to live with people who have no other family, and to show them that they are

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loved and can grow to greater freedom and that they, in turn, can love and give life to others (Vanier 1995:283).

As the Irish proverb says, "It is in the shelter of each other that the people live" (Pipher 1996:4). Therefore, the Anglican Church of Kenya should be a shelter/place where the PLWHA and their families find a safer space. Paradoxically, even though the ecclesial hierarchy of the Anglican Church of Kenya facilitates exclusivity, the Anglican liturgy of ordination urges the clergy to make a commitment to compassionate service to anyone who seeks it, as Jesus commanded his disciples to "Love one another as I have loved you" (Githiga 2009:30). What this means is that the clergy members are expected, in their ministry, to do all they can to ensure that they welcome and help all those who come to the church for refuge. Moreover, as good stewards, clergy members are expected to mobilise and network with their congregation members to offer stewardship and pastoral care to the vulnerable (Githiga 2009:31). Therefore, in the context of HIV and AIDS, the pastoral presence of the clergy and the pastoral participation of the parishioners are vital for care and healing of the PLWHA and their families. Louw reminds us that pastoral care for the sick envisages the fostering of a mature faith, and this means that the pastor needs:

> To help the ill to integrate God's compassion into their situation of illness via faith; to help the ill to reach out to other in Christian love in spite of illness, thus witness the presence of God; to help the ill to direct the entire existence, in Christian hope, to a meaningful goal and a new future; to create a space of silence and solitude for spiritual reflection, prayer and embracement; to create a space to talk and to articulate the various issue that are related to the ill person's experience of life; to support the person in the task of interpreting and understanding the dynamics of being ill and the setting of a hospital or caring unit; to assist the person with the process of networking, i.e. how to relate the illness with life, other people and the health profession, and to be with the person. Sometimes the art of care giving is to say nothing and just to create an atmosphere of warmth and acceptance. The intention is to operate on the level of being functions in order to create a space of intimacy (2008:221).

As shown above, the PLWHA need to be helped to rely on the faithfulness of God in their struggle against the HI virus. Therefore, through pastoral care and counselling, the clergy member or a pastoral care giver needs to help them understand God's promise in their life (promissiotherapy). With that understanding, they can start perceiving and accepting their illness as a "challenge to exercise faith" (Louw 2008:221). As a result, their affliction and struggle with the virus are transformed into a space of victorious life, faith, hope, love and joy in Christ Jesus. Such a space is what the ministers of the Anglican Church of Kenya ought to create in their pastoral care to the PLWHA and their families. This undertaking calls

for the church to reframe her ecclesial praxis and, in this case, *Ũtugi* could play a decisive role in the people-based life approach. We now turn to this discussion.

5.7. Reframing the ecclesial praxis and the contribution of *Ũtugi* in the people-based life approach

Since the basic responsibility of any church in the context of the HIV and AIDS pandemic is to educate her adherence, there is a need for the Anglican Church of Kenya to use *Ũtugi* in the HIV and AIDS education programme. According to UNESCO (2005:14), ignorance is the major reason why the HIV and AIDS pandemic is out of control. In the context of HIV and AIDS, prevention education makes people aware that they are at risk, why they are at risk, and how prevalence can be reduced. As a family education entrenched in *Ũtugi, Kĩrĩra kĩa mũciĩ* is thoroughly integrated in the social, cultural, political, occupational, religious, and recreational life of the people, and it is a requirement for all age sets, especially during birth, puberty, initiation, and marriage, being used to instil meaning and values. Therefore, it could be used an effective tool for fighting the HI virus.

Given that knowledge is often not enough to change behaviour, *Kĩrĩra kĩa mũciĩ,* therefore, becomes an invaluable tool for the HIV and AIDS preventive programmes. UNESCO (2005:14) confirms that where the pandemic has been slowed down, education has been the foundation. In this case, education, whether through schooling or non-formal *(Kĩrĩra kĩa Mũciĩ)* means that even public information, mass media or community organizations should be involved in contributing to the prevention effort. Although knowledge alone is not sufficient, nevertheless it is indispensable, for it provides protection against individual vulnerability and gives the tools for understanding and avoiding risk (cf. UNESCO 2005:14). It also creates a context in which the HIV and AIDS pandemic can be discussed and understood, and in which those infected and affected are cared for and included in society.

The Anglican Church can employ *Kĩrĩra kĩa mũciĩ* as ingrained in *Ũtugi* to complement the church HIV and AIDS education, for *Kĩrĩra kĩa mũciĩ* is a cultural resource within her reach. Of course, the Anglican Church of Kenya has great educational resources at her disposal, which can be complemented by *Kĩrĩra kĩa mũciĩ* to disseminate information and educate her adherents and the community, at large. For instance, the Anglican Church of Kenya can use her 1782 primary schools, 565 secondary schools and 184 youth

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polytechnics as well as the eight theological colleges to initiate the HIV and AIDS prevention programmes (see table 5.2.3.2; cf. ACK Kirinyaga Synod book 2005:30).

Besides these formal institutions, the Anglican Church of Kenya can also use the informal education systems such as the Sunday School, catechumens (*Gategithimo*), religious education programmes in government schools and Church Youth Ministry programmes in her war against HIV and AIDS. This is because before people are at risk to the HI-virus, they need to be made aware of the choices and implications that lie before them. The WCC (2004:60) affirms that education about sex, HIV and AIDS and health to children and young people does not result in sex activity. According to the WCC:

> Equipping people, particularly children and youth, with the ability to make sound moral decisions is the most effective way of achieving responsible moral behaviour. But education is more than knowledge. Increasing the number of facts people know will not necessarily turn them into well-equipped decision-makers. Effective education is responsive to the cultural context into which information is introduced, and involves the mutual participation of educators and students (2004:60).

The distinctiveness of *Kĩrĩra kĩa mũciĩ* is that it uses a powerful medium of communication such as lullabies, music, dance, oral tradition, proverbs, myths, culture and stories depending on the age, to transmit education unconsciously, thus, enabling a person to understand and remember the meaning and value of what has been taught (Watkins 1943:666-675; Scanlon 1964:20-130; Ociti 1973:24).

Such a powerful medium of communication can be used in the HIV and AIDS prevention programmes in the church and in the wider society, particularly, in extended families. The main reason for encouraging education at home and in the church is that, most parents in Kenya have relinquished their responsibility to teach sex education to their children and they assume that the schoolteachers and mass media will do it for them. In the context of HIV and AIDS, there is a necessity for *Kĩrĩra kĩa mũciĩ,* which would enable parents to teach their children sex education, for nothing can substitute for parental care and guidance. This is what qualifies *Kĩrĩra Kĩa Mũciĩ* as a space and a place where the *ciana* (children), *Anake na airitu* (adolescence youth) and even the *Andu agima* (adults) can learn about their sexuality and engage in HIV and AIDS education.

Equally, *Kĩrĩra kĩa mũciĩ* can be used as a space for married people to share freely with their partners without feeling ashamed or intimidated. *Kĩrĩra kĩa mũciĩ* can become a space where

those who are married can narrate their sexual problems to one another openly, consequently, enabling each partner to hear and share freely his or her narrative. Lewis B. Smedes (1976:50) reminds us that we need to be able "to look sex in the eye and stop regarding it as an idol of some kind." In other words, one needs to be able to talk about sex and sexuality without feeling ashamed especially when fighting the HIV and AIDS pandemic. Therefore, because *Kĩrĩra kĩa mũciĩ* is a continuous education, which starts from birth to the time of one's death, it can complement the Christian education taught in various church groups in a way that would enable participants to talk about their sexuality and the HIV and AIDS prevention strategies. For instance, an easy way to integrate *Kĩrĩra kĩa mũciĩ* is to incorporate it into some Anglican Church programmes such as the Mothers' Union (MU), the Kenya Anglican Youth Organisation (KAYO), the Kenya Anglican Men's Association (KAMA), the Boys' and Girls' Brigade (B & G), the Girls' and Boys' Friendly Society (G & BFS) and the Sunday School (SS) programmes.

With *Kĩrĩra kĩa mũciĩ*, the above groups can mobilise the community to fight the myth, stigma, prejudice, condemnation and self-righteousness that are associated with HIV and AIDS. As already seen, many of the PLWHA and their families are struggling and suffering because of stigma and prejudice. Within the framework of *Kĩrĩra kĩa mũciĩ*, all church members could be taught about unconditional acceptance of the PLWHA and their families. Since this cannot be achieved overnight, education becomes vital as it assists in overcoming the fear and prejudice, which often accompany the disease. Further, the church will also need to educate the community on the facts of HIV and AIDS, and continue to research and to educate its clergy on this disease. This is in line with the Christian understanding of freedom of choice as expounded by Gustavo Gutierrez. For Gutierrez:

> Freedom implies the capacity we all possess in principle to be our own person and to act on our initiative, so that we can go on fashioning community and participating to be embodied in definitive realities… the freedom to which we are called presupposes the going out of oneself, the breaking down of our selfishness and of all the structures that support our selfishness, the foundation of this freedom is openness to others. The fullness of liberation… a free gift from Christ – is communion with God and with other human beings and environment (1990:127).

Without doubt, it is important and urgent that the clergy, religious groups, seminarians, pastoral care givers, parents and all Christians are properly educated on this disease. This is because many PLWHA turn to the clergy, pastoral care givers and family for care, advice, support and spiritual healing.

Table 5.7.1. Reframing the ecclesial praxis through *Kĩrĩra kĩa Mũciĩ*

Riika (age -group)	*Mworoto* (aim)	*Cũkũrũ* (school - place where teaching is conducted) **Space and place for education**	*Arũtaani a Kĩrĩra* (teachers as agents of education**)**
Ciana (childhood) e.g. Boys' and Girls' Brigade , Girls' and Boys' Friendly Society, Sunday School children	**Teach through socialisation and** lullabies, music, dance, oral tradition, proverbs, myths, culture and stories according to child's comprehension: -HIV and AIDS -How the virus attack the body - HIV transmission -Prevention methods -Stages of AIDS, VCT, deconstruction of hegemonic masculinity	-*Mũci ĩ (*at home) - *Mbarĩ* (within the extended family; but it can be extended also to the church)	-*Aciari* (parents) But can include clergy, evangelists, Catechists, etc
Anake na Airitu (adolescence /youth) e.g. Kenya Anglican Youth Organisation-KAYO	**Teaching and skills** -HIV and AIDS -How the virus attack the body -HIV transmission -Prevention methods -Stages of AIDS -Gender, sexuality, faith in God, ministry of caring and counselling, drug use and addiction, stigma, courtship, gender issues, marriage ,home care nursing, nutrition, VCT, risk behaviours, deconstruction of hegemonic masculinity	Within the *Mũhiriga* (clan) :all places of work, recreation, religious observance, etc During the *Irua* (initiation period) in the church, in the school, in the youth polytechnic in the church clinics in the church halls	-*Aciari (*parents) -*Athũri (*elders) -*Riika* (age-group) -*K ĩama* (council of elders) *Mũtirii* (foster parents) clergy, evangelists, church elders youth leaders catechists
Andu Agima (adulthood) e.g. Mothers' Union (MU), Kenya Anglican Men's Association(KAMA)	**Through Social and organisational skills development** -How the virus attack the body -HIV transmission -Prevention methods -Stages of AIDS, advocacy, gender issues, networking, care, funding the HIV and AIDS projects, Home Based Care, marriage enrichment programmes, *Koinonia,* solidarity, VCT, deconstruction of hegemonic masculinity	*Bũrũri* - At the community level, home, retreat centre, etc also in the church, church clinics and church halls	-*Athũri* (elders) -*Kiama (*council of elders*)* *Mũig ĩ wa Bũrũri* (community*)* evangelist, church elders catechists

Thus the church can congregate all parents, educators, clergy and pastoral care givers in the church and share information on HIV and AIDS besides engaging them in group discussions on the same subject. Table (5.7.1) is a proposal on how various groups and various *Arũtaani a kĩrĩra* (teachers) can be engaged in *Kĩrĩra kĩa mũciĩ* based HIV and AIDS programme. It also shows how the *Riika* (various age groups) can be introduced to HIV preventive education and how the Anglican Church of Kenya can use various spaces and places to integrate the HIV programme based on *Ũtugi.*

Since the principle of *Kĩrĩra kĩa mũciĩ* dictates that every person be involved in education, the church personnel and every church member, therefore, should be engaged in this programme. The church catechists, evangelists and teachers, as well as the leaders of the Kenya Anglican Youth Organisation (KAYO), the Mothers' Union (MU) and the Kenya Anglican Men's Association (KAMA) need to be trained and properly educated on HIV and AIDS. Through *Kĩrĩra kĩa mũciĩ,* all church members could be involved in sharing information about the disease and its prevention. In this case, all the methods of preventing

the spread of HI virus that aim at saving human life should be encouraged. Similarly, in the learning process, the PLWHA and their families could also use the *Kĩrĩra kĩa mũciĩ* as a space where they could also share their experiences, wants and needs. Van Dyk (2008:122) reminds us that the PLWHA are "often the best advocates and activists for social and behaviour change and they should be included in the development and implementation stages of HIV and AIDS prevention programmes." Furthermore, the PLWHA present a "powerful message", which "can mobilise people and resources and so initiate successful prevention programme" (Van Dyk 2008:122).

In addition, gender issues should be integrated within *Kĩrĩra kĩa mũciĩ* as well as topics such as, how to prevent sexual transmission of the HI virus, female and male prevention methods, prevention of HI virus transmission in intravenous drug users, Mother-to-Child prevention, and prevention in health care setting.[287] Through the *Kĩrĩra kĩa mũciĩ,* The Anglican Church of Kenya could organise seminars and workshops at home or in the church in small groups. In this case, various groups or individual members should be educated on the effective HIV and AIDS prevention measures, psychological, social and theological issues related to the HIV and AIDS pandemic and how to response to them. However, Van Dyk (2008:122) points out that, "there is no standard programme that will be meaningful, relevant and effective for all people in all times and places. Prevention programmes must be contextualised so that they are sensitive to local custom, cultural practice and religious belief values, as well as to other traditional norms and practices."

Since there is a need to contextualise prevention programmes, the *Kĩrĩra kĩa mũciĩ* can become a useful gesture. For instance, through the *Kĩrĩra kĩa mũciĩ,* various groups could be taught how to protect themselves from HIV infection. Apart from being a barrier to conception and the fear of unwanted children, the use of condoms in the HIV and AIDS prevention has raised some questions on the power relationship between women and men. Many women find that they cannot negotiate with their male partners on the use condom.[288]

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[287] The lack of correct information on HIV and AIDS has led to untold suffering. It is, therefore, important to review and, if necessary, update medical facts on HIV and AIDS.

[288] The famous "ABC" approach to HIV and AIDS prevention can be integrated into the *Kĩrĩra kĩa mũciĩ* and each letter explained in various ways to the small groups, depending on the age-group (*Riika*). In this case, an explanation of what each letter stands for is vital. However, it should be noted that while "A" stands for *Abstain*, "B" for *Be faithful to one partner and* "C" for *Condom,* the model is seen as a good preventive tool, but for women who have been raped, coerced into sexual activities or subjected to violence, this model does not work or make sense.

Perhaps the "SAVED" approach, therefore, would work better than the ABC model. In the SAVED model, "S" stands for *Safer practice* (not sharing needles, providing safe needles, sticking to one partner, clean blood), "A" for *Availability* of medication and *access* to treatment, "V" for *Voluntary virus testing* (knowing one's status), "E" for *Empowerment* through *education* and correct information (identity development) and "D" for *Diet* (nutrition), *Dialogue* and *Disclosure*. From these and as shown in Chapter Two, it seems that many Kenyans

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There is issue of mistrust by men who oppose the use of condom during sexual intercourse when their female partners suggest its use.[289] Zeferino Teka affirms that:

> Many African men are hesitant or unwilling to cooperate with HIV and AIDS education and prevention tools. In fact, some have succumbed to violent countermeasures such as refusal to use a condom, rape, beating up women, increasing promiscuous behaviour, etc. Gender studies experts interpret such reactions as power-maintaining mechanisms and thereby an upholding of honour (Teka 2008: 30).

Swart (2006:5) is of the opinion that violence is an important means by which gender inequalities are sustained. Such power imbalance and gender inequalities need to be addressed, and the *Kĩrĩra kĩa mũciĩ* can play an integral role against this depravity within the society.

Figure 13: Gender inequalities and power imbalance
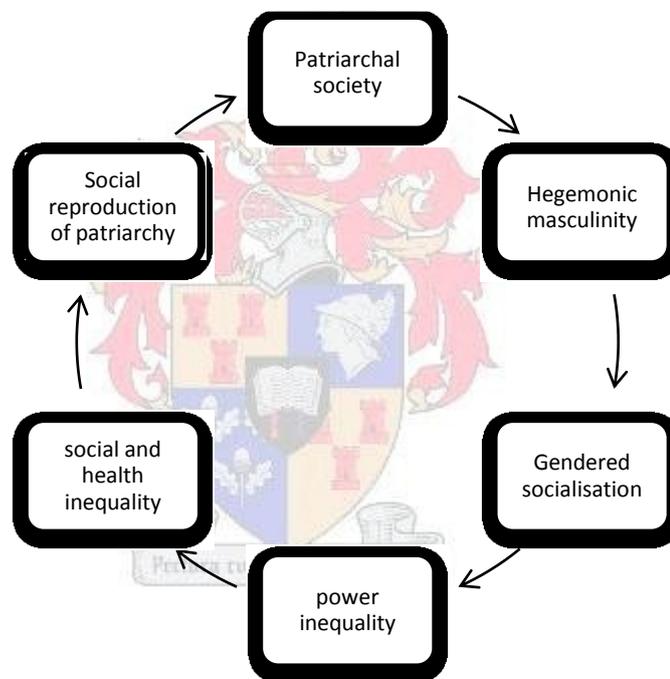
[289] In critiquing the church position on HIV prevention model, Magesa (2000:76-84) argues that the success of prevention of the transmission of HIV and AIDS should be articulated using the traditional worldview that requires explanations for misfortune and disease, e.g. employing the idea of witchcraft. Magesa (2000:76) equates sexual promiscuity with suicide and contends that when a person is infected with the HI virus as a result of sexual misbehaviour, that person is committing suicide. However, those who commit suicide in the African context are regarded as witches and are often denied proper burial (Magesa 2000:76-84). For Magesa (2000:77), the use of traditional sexual taboos can be used as a moral tool to prevent the spread of the HI virus and prevent sexual promiscuity. In other words, the traditional ethical demand can be a tool for fighting the HIV pandemic. Drawing on Benezet Bujo's view, Magesa (2000:80) further affirms that HIV transmission could be reduced if more emphasis were placed on the traditional understanding of sexuality as enhancing the life force of the communities of the living, the dead and the yet-to-be-born. He argues that rituals of levirate marriage and assertive male sexuality would be more easily changed if they were shown to be promoting the death, rather than the life of the community (Magesa 2000:80). Moreover, HIV prevention that concentrates on the communal ramification of sexual behaviour can be more effective than fixating on the use of condoms, "a solution linked to individualistic notion of sexuality" (Magesa 2000:80). While it is true that many Christians are confused by the three discourses, as confirmed by Magesa, concerns may be raised on how Christians can use witchcraft paradigms as a prevention strategy for the HIV pandemic. In fact, whatever the justification, few Christians would be to use the witchcraft model as a prevention strategy for HIV.

As already seen in Chapter Two and as indicated in the *figure 13*, gender inequalities often stem from the social structures and conceptions that have been institutionalized and internalized during childhood. This socialisation continues and breeds the power inequality, social and health inequality, social reproduction of patriarchy, turning patriarchy into hegemonic masculinity.

In a hegemonic masculine society, women continue to be oppressed even though they are regarded as caring and nurturing beings with designated careers, which require such skills. While these skills are valued by the society, they were typically associated with domesticity. On the other hand, a hegemonic masculine society views men as breadwinners or the workers and allow them to hold jobs, which are considered economically valuable and that pay higher wages than women's jobs. Hence, central to the *Kĩrĩra kĩa mũciĩ*, is the participation of both men and women in deconstructing[290] these hegemonic masculinity and disparities. The Anglican Church needs to challenge the gender role that associate care giving with women. The growing tendency of marginalising men in issues relating to HIV and AIDS is becoming counterproductive. This is true especially in the Anglican Church of Kenya where men are the majority in leadership but very few HIV and AIDS programme target them. Ezra Chitando argues that:

> The participation of men (in HIV and AIDS programme) is crucial, for it is men who drive the HIV and AIDS pandemic. While some African women theologians and gender activists might believe that men are already in positions of power and therefore do not deserve any particular attention, such an approach is not helpful. Men can make a difference to the lives of women and children in the era of HIV. We need to dwell on this theme, as it is frequently glossed over in publication on HIV and AIDS in Africa (2007:40).

Therefore, if the *Kĩrĩra kĩa mũciĩ* is employed in educating men and women, they are less likely to hold roles distinctly based on gender. The *Kĩrĩra kĩa mũciĩ* could also be used to re-orientate their thinking and teach them to see others as equal.

In addition, the *Kĩrĩra kĩa mũciĩ* can be integrated in the *Voluntary Counselling and Testing* (VCT) programmes. In this case, through the principles of *Ũtugi,* which advocate solidarity, those who test positive can be given support. It should be noted that the VCT may be an important element in HIV prevention, treatment, care and support programmes, but it could also be a complex intervention that does not usually lead to the adoption of the HIV and AIDS prevention behaviours amongst people who test negative. It does not also, necessarily

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[290] The notion of deconstruction will be explored in the next chapter.

or uniformly, directs the HIV-positive persons towards prevention practices or to seek treatment, care and support interventions. Furthermore, knowing that one is HIV positive can lead to depression and other negative psychological conditions (including, in some cases, suicide). A person who has tested HIV positive may be subjected to physical violence and emotional constraint when disclosing their status to their sexual partners, as we have seen above. Therefore, it is important that the VCT service be accompanied by good pre-test and post-test counselling and support services. In our opinion, the Anglican Church of Kenya is well positioned to use the *Kĩrĩra kĩa mũciĩ* to support those who test positive. The next section will discuss how the *Ũtugi* paradigm can enhance the livelihood of the PLWHA and their families and augment the community's network system of care.

5.8. Towards a caring community: Network system of care and small groups support for the PLWHA and their families

5.8.1. Sustainable livelihood support system

The uniqueness of the HIV and AIDS pandemic as opposed to other diseases is that it takes time before a noticeable change is detected in the person. This is because the HIV infection undergoes four stages namely the primary HIV infection, the asymptomatic latent phase, the minor symptomatic phase stage and the severe symptomatic phase or AIDS defining condition (Van Dyk 2008:53-54). In fact, in the primary HIV infection[291] phase, the person is unaware of being infected and within the first 6-8 weeks of infection, one may develop symptoms like fever, fatigue, rashes, sore joints, headaches and swollen lymph nodes. The asymptomatic latent phase is the second stage, which can last up to ten years and during which the person is essentially free from major systems defect, although the person's glands may be swollen (Van Dyk 2008:53). However, this may vary from one person to another. Actually, some may show symptoms as early as two years from the day of infection.

In the third stage, the minor symptomatic phase, the immune system breaks down and the person begins to experience many minor infections such as sinusitis (inflammation of the sinuses), bronchitis (chest infection), occasional fevers, mild skin irritations and rashes, fungal skin and nail infections, mouth ulcers and slight weight loss. In more advanced stages of HIV, one may suffer from tuberculosis (TB), thrush (whitish eruption in the mouth, throat and tongue), and herpes blisters in the mouth or on the genitals (Van Dyk

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[291] Van Dyk (2008:40) also calls this phase "the seroconversion illness" stage. It means the point at which a person's HIV status converts or changes from being HIV negative to HIV positive.

2008:53). In the final stage, the major symptomatic phase or the AIDS stage, the immune system is damage further, it loses its capacity to fight diseases and the person begins to experience diarrhoea, severe weight loss, pneumonia, brain infection and memory loss, among other diseases (Van Dyk 2008:57). One becomes vulnerable to a series of opportunistic infections caused by common bacteria and and parasites, and the person dies.

Due to the prolonged phases above, the PLWHA continue to suffer and struggle as they live within the community where they are also breadwinners, fathers, and mothers, etc. In the Kenyan context, as in many African countries, there are no social grants and those who are vulnerable are left at the mercy of their families. As such, there is need to engage them in a meaningful livelihood support systems. This is because, the PLWHA have skills and gifts that could be used to empower them as they empower others. Moreover, because of the interplay between the HIV and AIDS and poverty, there is a need to provide good support systems to PLWHA and their families. In fact, the HIV and AIDS fuel poverty and create an ongoing spiral of disease and poverty that undermines family stability.

Figure 14: PLWHA and their families within the chain of viruses
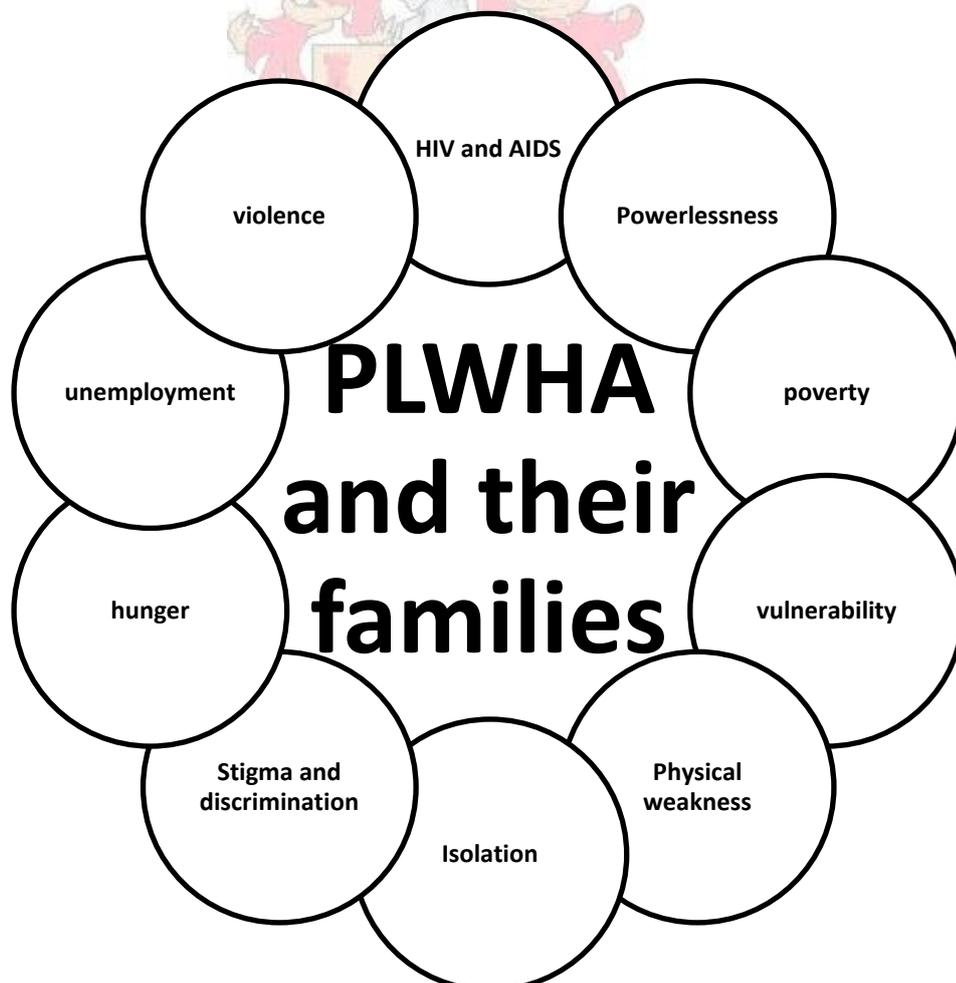
Since HI virus is embedded in life and within existential issues, the PLWHA and their families find themselves trapped in a chain of poverty, isolation, powerlessness, stigma, discrimination, physical weakness, violence, unemployment, hunger, etc., which render them even more vulnerable[292] (cf. Louw 2008:146). The figure 14 shows the place of the PLWHA and their families within the chain of viruses. Robert Chambers (1983:112) identifies seven clusters of disadvantage in which poor people can find themselves trapped; he calls it a cycle the deprivation. He compares these seven clusters with a person put on a rubber boat in a crocodile-infested river, without oars to row and being unable to swim (Chambers 1983:112). Owing to the long-lasting phases of the HIV and AIDS, PLWHA and their families find themselves trapped in such deprivations. Their income decreases, and even their land or property may be lost as they are drained financially by medical expenses. Louw (2008:146) maintains that behind these structural and systemic viruses, there is a danger of misuse of power and authority. As such, the PLWHA and their families may find themselves becoming poorer and, consequently, become dysfunctional in their humanness.

This point is well articulated by Chambers (1983:112) who demonstrates that *poverty* determines all the other clusters of disadvantage for it contributes to *physical weakness* due to lack of food and *isolation* because of inability to pay the cost of schooling, among others. Poverty also promotes *vulnerability* due to lack of assets or income to pay huge bills or to meet contingencies, and *powerlessness* because low status goes with lack of wealth, and it renders the poor voiceless. Furthermore, *physical weakness* contributes to poverty through low productivity of weak labour; inability to cultivate large agricultural areas; lower wage paid to women and to those who are weak; withdrawal of labour through illness (HIV and AIDS); and sustained isolation because of the lack of time or energy to attend meetings. It

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[292] More extensive study on poverty can be obtained from the following books and journals: Abuom, A. 2001. "Women's Issues in Health and Education," in Belshaw, D., Calderisi, R., and Sugden, C. (eds). *Faith in Development: Partnership between the World Bank and the Churches of Africa* Regnum: Bodes. Anglican Church of Kenya 2000. *Ministry of Abundant life: How the Anglican Church of Kenya Is Reaching out to Poor Communities through Christian Community Services.* Nairobi: Creative Pub. Ajulu, D. 2001. *Holism in Development: An Africa Perspective on Empowering Communities.* California: MARC Books. Cowen and Shenton. 1996. *Doctrine of Development.* London: Oxford. Cochrane, J.R., De Gruchy, J.W., and Petersen, R. (eds.) 1991. *In Words and In Deed: Towards a Practical Theology for Social Transformation.* Pietermaritzburg: Cluster Publication. De Gruchy, S. 2005. "A Christian Engagement with the Sustainable Livelihoods Framework". *Missionalia* 33:1. Government of Kenya.1999. *Report of Poverty Alleviation Strategies.* Nairobi: Government Printer. Gutierrez, G. 1980."Journeying with the People", in Echegarag, H (ed). *The Practice of Jesus.* Translated by O'Connel. M. New York: Orbis Books. Jeune, C. 1987. "Justice, Freedom and Social Transformation," in Samuel, V. and Sugden, C. (eds). *The Church in Response to Human Need.* Grand Rapids: William B Eerdmans. Kellerman. 2000. *Introduction to Development Studies* (2nd ed). London: OUP. Kiiru, M. 2004. *How to Develop Resources for Christian Ministries.* Nairobi: Uzima. Oladipo, J. 2001. "The Role of the Church in Poverty Alleviation in Africa", in Belshaw. D, Calderisi and Sugden, C (eds). *Faith in Development Partnership between the World Bank and the Churches of Africa.* Oxford: Regnum Books. Okumu, J. 1984. "A Party and Party-State Relations", in Barkan, J. D. Sugden, C. and Vinay, S. (eds). 1988. *The Church in Response to Human Need,* Grand Rapids, Michigan: William B. Eerdmans. Speckman, M.T. 2001. *The Bible and Human Development in Africa.* Nairobi: Acton. Swanepoel, H. and De Beer, F. 2000. *Community Development and beyond: Issues, Structure and Procedure.* Pretoria: J L aan Schaik Academic. Thomas. B. 1999. *State Formation, Development and the Politics of Self-Help in Kenya.* Clark University. Thomas. B. 1985. *Politics, Participation and Poverty: Development through Self-help in Kenya.* Boulder: Westview Press. Nwaoru. E. 2004. "Poverty Eradication: A Divine Mandate", *African Ecclesial Review: Poverty and Unemployment.* Eldoret: GABA Pub. Wilson and Ramphele. 1989. *Uprooting Poverty: The South African Challenge.* Cape Town: David Philip.

accentuates vulnerability by limiting the ability to overcome a crisis through hard work, and it contributes to powerlessness through lack of time or energy for political participation (Chambers 1983:112).

In addition, *isolation* is characteristically confirmed by a lack of proper education, remoteness and being out of contact with the wider world. The isolation of the poor also sustains their poverty because they may lack social services and those who live in remote areas are prone to a high level of migration (erosion of human labour) to towns or other better-off rural areas. In this case, Chambers (1983:112) notes that the *vulnerability* of the poor is stressed by their isolation; marginal areas are more liable to suffer crop failures and are provided with fewer services to handle contingencies like famine or sickness. Moreover, because of their isolation, the poor have little contact with political leaders; and this increases their powerlessness (Chambers 1983:112).

On the other hand, vulnerability can be caused by poverty (i.e. through HIV and AIDS) when properties are sold or productive assets mortgaged to cover medical bills (Chambers 1983:112). For instance, when a family is hit by a tragedy such as illness or death of a family member who is the breadwinner, a piece of land or farming equipment could be sold or mortgaged. What follows is poverty as the family's assets are now fewer, yet, they are expected to produce enough to survive (Chambers 1983:113). Chambers (1983:113) contends that vulnerability also relates to physical weakness; for in order to handle contingencies, time and energy have to be substituted for money.

The end-result is that the poor families become further isolated, stigmatised and discriminated against because of their vulnerability, for they are left at the mercy of the power brokers, moneylenders or unsympathetic landlords who may force them to look for other means of income. Being socially isolated because of their predicament and their vulnerability may contribute to their powerlessness as they become dependent on these patrons for support (Chambers 1983:113). Therefore, *powerlessness* contributes to poverty by limiting or preventing access to resources or because there is lack of legal redress for abuses. Chambers (1983:113) notes, in addition, that *powerlessness* also contributes to the weakness of the poor in negotiating the terms of distress sales. As we have seen in the case of Kenya (as in many countries in Africa), the majority of the poor are women and girls, and they are more prone to the HI virus. In other words, it seems that gender inequality is one of the

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primary causes of poverty and the root of high HI virus infection among girls and women. Moreover, because of the rigidity of socially ascribed gender roles, many women lack access to economic resources including credit, land ownership, and, in many cases, inheritance rights from husbands or fathers (cf. UNAIDS 2006: 86).

Women's exclusion from economic, political and relational power, therefore, makes them the most vulnerable to HI virus infection, and that explains why, in Kenya, the highest at risk are young women between the age of 15 and 24 years (UNAIDS 2006: 86). As we have seen above, women's powerlessness is also increased by stigma and isolation after they are diagnosed with the HI virus. Some are thrown out of their family homes even when it is well known that they had contracted the virus from their husbands because they were powerless and unable to negotiate for safe sex (UNAIDS 2006:86). Seen from this perspective, it is clear that poverty is one of the most critical factors behind the rapid spread of HIV in Kenya and in most parts of Africa. It is sad to see how women and girls are pressured by poverty to become commercial sex workers, increasing the chances of contracting the HI virus (cf. Van Dyk 2008:263). The marginalisation of Africa in the context of globalisation has obliterated women's socio-economic status and has resulted in the feminisation of poverty (Mwaura and Chirairo 2006:20).

By way of illustration, Chirongoma (2006a:58) narrates a sad story of an orphaned girl whose father was a cross-border truck driver but died in 1998 when she was ten years old. The child remained with her mother who was a hairdresser and who could not work after she became ill. The mother rented out a part of her house so that the family could survive but things changed completely when the mother succumbed to the illness and died in 2003. Her father's relatives took her to the village and rented out her family house. An uncle promised to support her through the rent collected from the house but when she was taken to the village, she enrolled in school for one year and then she was told the money from the rent was not enough to educate her. As a result, she had to secure employment as a maid to one of the nurses in the local clinic. Unfortunately, the husband of the nurse impregnated her and infected her with the HI virus (Chirongoma 2006a:58).

Similar stories to the narration above are common in Kenya. In many cases, children orphaned by HIV and AIDS suffer from malnutrition, illness, abuse and sexual exploitation. They are also denied basic human rights and dignity, as they do not know how to protect

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themselves from the HI virus. Besides, some have no access to doctors, nurses or other health care workers and to medical facilities or information. Furthermore, many are threatened by poverty and unemployment. Kgalemang (2004:153) confirms that poverty and unemployment contribute to the spread of HIV and AIDS.[293] This agrees with Haddad's (2008:56) assertion that poverty fuels the spread of HIV infection, therefore, women's unemployment and limited access to economic, educational, and health resources constitute an ongoing challenge in the fight against HIV and AIDS.

Moreover, it is well known that the HIV and AIDS spread fastest among the poor and dispossessed people. HIV and AIDS also mark exclusions that cut across the geographies of continents, the geography of city blocks, gender divides and social networks. On this point, Barnett (2002:8) notes that, "HIV defines those who can purchase wellbeing and those who cannot", in Kenya, as in many countries of Africa, majority are poor and they lack education, access to water and sanitation. The hardest hit countries have the greatest income inequality, and large numbers of their populations live in poverty, which is linked to HIV transmission (UNAIDS 2006: 84). Clearly, the Anglican Church of Kenya and any other church denomination need to address these issues. In order for us to understand how *Utugi* can complement the church's *support system* of PLWHA and their families to address the above challenges, the understanding of the *Sustainable Livelihoods Framework* is vital. The framework is well articulated by the United Kingdom's *Department for International Development* (DFID 2003).[294]
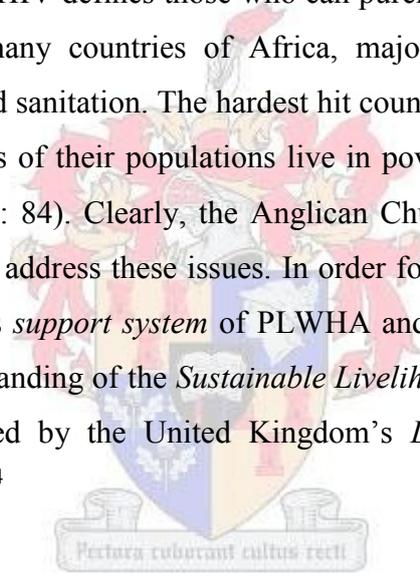
According to the DFID (2003:1), a means of livelihood consists of the "capabilities, assets" (both material and social resources) and "activities required for a means of living." Furthermore, a means of livelihood is sustainable when it "can cope with" and "recover from *stresses and shocks* and *maintain or enhance its capabilities and assets* both now and in the future." Three key dimensions of the *Sustainable Livelihoods Framework* are identified (as shown also in the diagram below). (a) The first one is *sustainable livelihoods assets*. In

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[293] Kgalemang (2004:153) narrates the story of a Zimbabwean woman who was engaged as a sex worker against her will. She was working illegally in a restaurant in Johannesburg where she met a man from Zimbabwe. They got married and had two daughters. Later, her husband was gunned down by the police and she had to take the remains to Zimbabwe for burial. Her parents then sent her to her in-laws to be cleansed. She went for VCT and she tested negative. However, her parents-in-law wanted to keep her children and decided to marry her off to an old uncle. She fled and because she had no job to support herself, friends introduced her to the sex business to survive.

[294] There is need for the church to understand the *Sustainable Livelihoods Framework* if it is to contextualise *Utugi*. The *sustainable livelihood framework* is an asset or capacity building model, which focuses on developing the underlying resources and capacities needed to escape poverty on a sustainable basis. This model claims that there is a mass of assets needed to cope with stresses and shocks, and to maintain and enhance capabilities now and in the future. It also recognises that everyone has assets on which to build and support individuals and families to acquire assets needed for long-term well-being (See DFID 2003:1-2 document).

sustainable livelihoods, assets are seen as a building block. By building or increasing assets within the community, people develop their capacity to cope with the challenges that face them. In this case, they are able to meet their own needs on a sustainable basis (DFID 2003:1).

In order for PLWHA and their families to be accommodated in sustainable livelihood systems, five assets or capitals are indispensable. These are financial assets, social assets, human assets, physical assets and personal assets (DFID 2003:1). What this means is that lack of these assets make the PLWHA and their families vulnerable and they would require practical interventions if they are to live a meaningful life. Of importance is the range of sub-categories within a particular asset. The *financial assets* include *income* from productive activity (employment/self-employment), available finances/savings, and regular inflow of money (from government transfers, family, gifts in kind, credit rating, access to credit).

On the other hand, *human assets* include skills (whether technical or interpersonal), knowledge, ability, employability and earning power, good health, and leadership. The *physical assets* include child/elder care, secure shelter, clean affordable energy, information, access to banking and related services, basic consumer needs (local grocery store and other services), affordable transportation, tools and equipment, natural resources, and air and water quality.

Figure 15: Three key elements of Sustainable Livelihood Framework (DFID 2003)
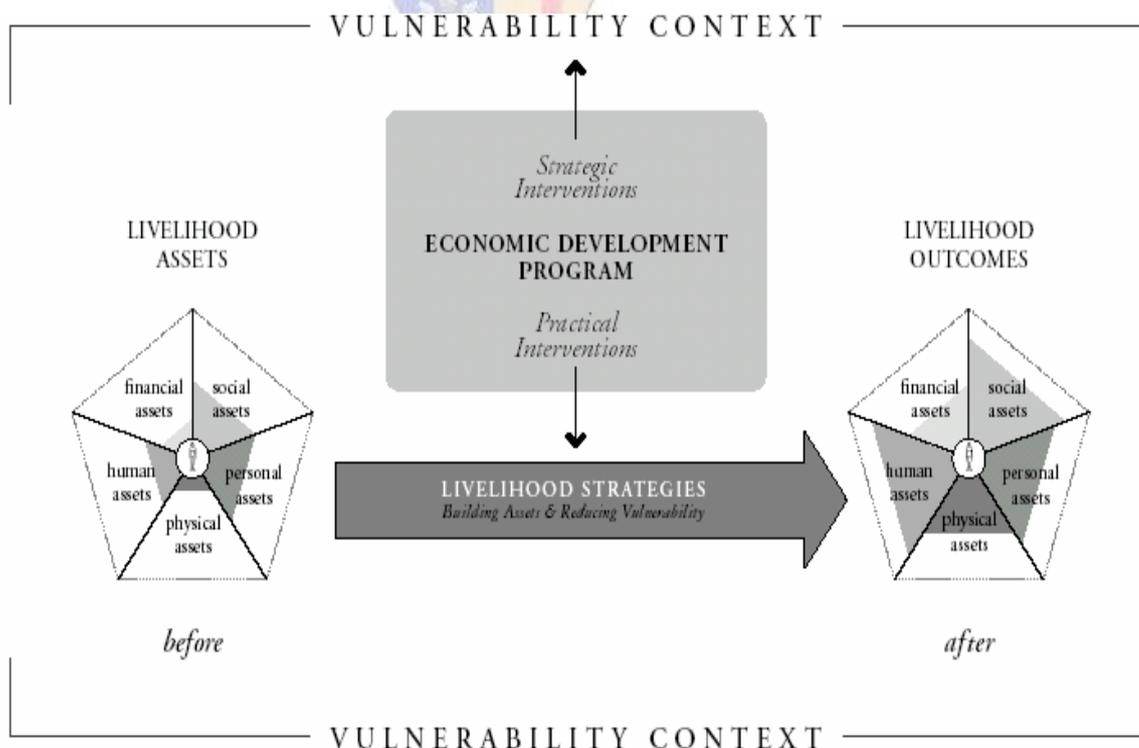
Accordingly, *personal assets* include motivation, self-esteem, self-perception, emotional well-being, assertiveness and spirituality. Lastly, *social assets* have to do with cooperation, networks, interconnectedness, family support, friendship and trust/exchanges, partnership and collaboration, and political participation (DFID 2003:1) (see figure 15).

(b) The second key dimension of the *Sustainable Livelihood Framework* (SLF) is "*vulnerability context*" (DFID 2003:2). In this dimension, the factors that create, propagate and maintain vulnerability and poverty are seen in two levels - the present circumstance that can force a person to become poor, e.g. illness, disaster, bad habits or lack of skills (DFID 2003:1) (see figure 15). The other level concerns the broader context and involves factors such as political instability, government policies, and global influence. According to DFID (2003:2), the vulnerability context of the framework directs attention to the "contextual and systemic factors that contribute to the occurrence of poverty." Therefore, it calls for direct changes at the organizational, community and policy levels, in addition, to increasing or building the assets of the individual and the community.

(c) The third and last key dimension of the *Sustainable Livelihood Framework* (SLF) is techniques and interventions (DFID 2003:2) (also see figure 15). The framework identifies two basic types of intervention that communities can pursue in their poverty reduction effort (DFID 2003:2). The first is practical intervention, which is supposed to facilitate the efforts of the low-income group in the community by increasing or building the livelihood assets. This can be achieved through counselling programs, education, employment training, economic literacy and savings programs, and support for small business development, etc. The second is strategic intervention, which is directed toward the vulnerability context. This includes demolishing the socio-economic and political structures that continue to encourage systemic poverty. Some of the means of wiping out these structures include community building and organizing, alliance building, policy work and advocacy. The uniqueness of the SLF is that it is a holistic model, an asset-based framework for understanding poverty, which provides information on how to reduce poverty (DFID 2003:2).

Seen from the above, it is clear that *Utugi* also could act as a *support system* for the PLWHA and their families. In other words, *Ũtugi* is capable of creating a physical, financial, social, psychological and spiritual healing space for the PLWHA and their families as shown in the *figure 16* below. From the diagram, one could assume that *Ũtugi* is capable of creating a

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physical place of safety (where food, shelter, medical care and basic needs are provided), as well as a place of psychological and social safety (where the PLWHA can speak about their personal experience without being judged, misinterpreted, ridiculed or disputed). Consequently, the Anglican Church of Kenya could use *Ũtugi (Harambee)* to increase the financial capital of the PLWHA and their families. From the money raised through *Ũtugi (Harambee)*, the church could initiate income-generating projects to help orphans, and increase the income of the PLWHA.

Figure 16: *Ũtugi* paradigm as a *livelihood support system*
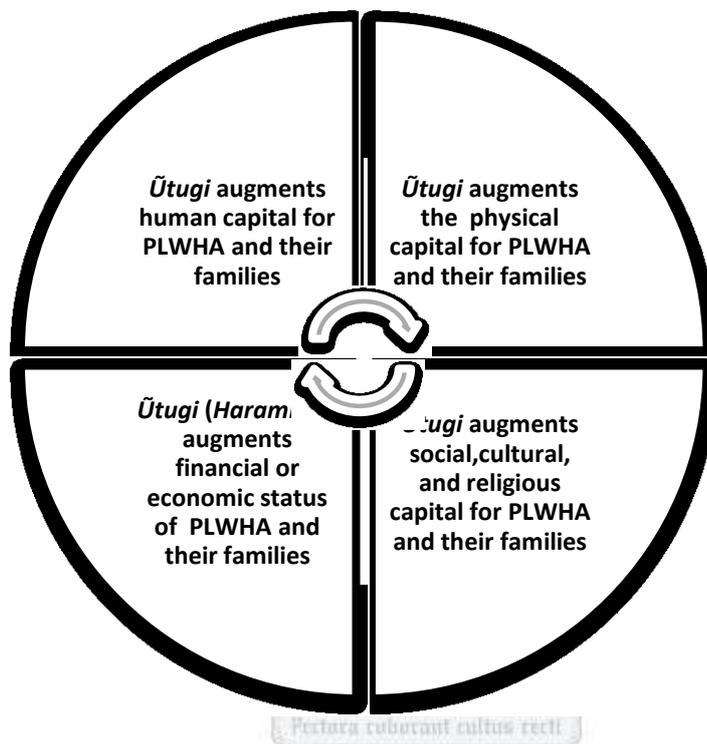
Although many PLWHA in rural areas are uneducated and do not have access to basic resources, it is possible for them to profit from projects initiated by churches. Such projects may include the manufacture of peanut butter, poultry production, craftwork and gardening (cf. Chirongoma 2006b:184).

The projects can empower the PLWHA and their families financially, and protect them from the vulnerability of assuming risky survival strategies that can further expose them to the HI virus infection. When the church engages in such income generating projects, the PLWHA and their families will be able to engage in decision-making at all stages of their development process - from planning and implementation, to monitoring. In this case, their potential is fully utilised to solve their own problems. They become active players in the livelihood

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support system of their community and the growth of their own being, thus, contributing to social transformation and providing an enabling space to name and participate in their own world (cf. Freire 1993:119-143). [295]

Furthermore, through *Ũtugi,* the poverty, which normally engulfs the PLWHA and their families, can be reduced by demolishing structures that perpetuate systemic poverty. It should be noted that the magnitude of the HIV and AIDS pandemic has meant that the family and the community at large have to become unavoidably involved in the care and support of PLWHA (Van Dyk 2008:332). Therefore, the *Ũtugi* model could prove useful to the Anglican Church of Kenya in her attempt to construct a *support system* for the PLWHA and their families. From the *Ũtugi* perspective, the church as a religious asset can be seen as religious capital, thereby, providing the basis for the Anglican Church of Kenya to be seen as a community asset. This is because the Anglican Church of Kenya, like many church denominations, has a diverse and powerful network of gifts and assets that could be employed, in the spirit of *Ũtugi,* as a s*upport system* for the PLWHA and their families. These assets include the clergy, laity, bishops, church halls, clinics, schools, land, professionals, politicians and moral authority, etc. Furthermore, the principles of *Ũtugi* offer a creative approach to community mobilisation and capacity building, thus, recognising the God-given potential and vocation of humanity. In essence, *Ũtugi* can be a tool in the hands of the Anglican Church of Kenya to deal with the HIV and AIDS pandemic in a positive and meaningful way.
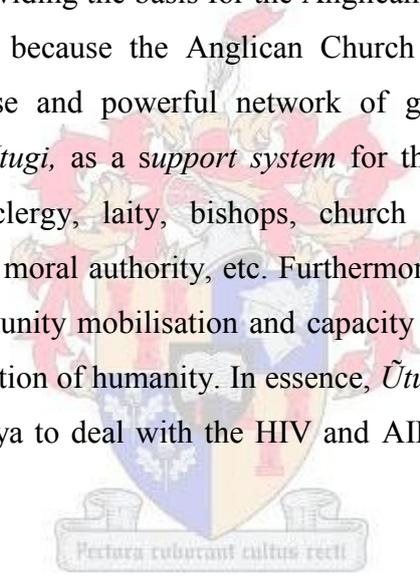
This new way of doing pastoral care could also enable the church to involve the whole community in tackling the challenge of the HIV and AIDS pandemic directly. It is possible for the Anglican Church to develop a mechanism whereby the PLWHA can unite and work together in support groups to improve their status. Generally, women in the Anglican Church of Kenya and in rural villages are best known for working in groups, and this has helped them to achieve group objectives. For instance, the Mothers' Union (*Gwatanĩro ya Manyina*) is an Anglican women's organisation well known for its promotion of voluntary work and belongingness. The organisation is also known for its keen demonstration of love through

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[295] Besides HIV and AIDS and poverty, the church could be involved in finding solution to issues such as gender inequity, malaria, tuberculosis, child mortality, malnutrition, hunger, pollution, deforestation, tribal clashes, nepotism, landlessness, food security, unjust laws, political intimidations, murder of street children, child labour in coffee and tea plantations, abuse of women by police, abuse of ethnic minorities, unemployment and autocracy. Actually, this is in line with Jesus' ministry who demonstrated justice through the declaration of good news to the poor, release to the captives, recovering of sight to the blind, granting liberty to the oppressed and proclaiming the acceptable year of the Lord (Nolan 1980:8).

which the members have empowered themselves socially, economically, spiritually and emotionally. The church needs to engage the PLWHA and their families in such formal or informal groups and even help them start support groups or integrate them into home fellowships, popularly called *Matura* or *Miaki* units. This would be in line with the WCC's perception of the church as a provider of an environment that is conducive for love, acceptance and support, as she reflects on the theological and ethical issues raised by the pandemic, while addressing the temporary and long-term effects of the HIV and AIDS pandemic (in Van Dyk 2008:332).

5.8.2. Prophetic stance and community based approach to networking

As a pastoral issue, HIV and AIDS, like globalisation, debt relief, or environmental degradation, is an issue of justice and ethics. Therefore, alongside her *diaconal* and *koinonic* ministries, the Anglican Church Kenya should not forget that she has a prophetic ministry to remind the leaders in the society of the importance of truth and justice (*shalom*). An example of ethical impropriety is clearly demonstrated by multi-national pharmaceutical companies who are making obscene profits from the ARVS drugs. Therefore, it is crucial that the Anglican Church of Kenya network with other church denominations and NGOS to campaign for fairness and justice.[296] In the same way, the church can bring the community together and challenge the unjust policies and laws that continue to oppress PLWHA in the place of work, schools and other public spaces. Dube argues that:

> [HIV and AIDS] is about unjust international reactions that have reduced some countries' economic viabilities to non-existence; it is about refusal to allow countries in the Two-third world the copyright permission to produce affordable drugs for managing (HIV and AIDS) opportunistic infections... [The HIV and AIDS pandemic] is about unequal gender relations that render many women unable to insist on safer sex, to abstain or to be protected by faithfulness. It is about the powerlessness of children, who are subjected, by some, to sexual abuse, stigma and labour exploitation, when orphaned. It is also about stigma, the discrimination of the infected and their families (2004a:135).

Often, the PLWHA are subjected to unjust treatment by various categories of people. The church needs to defend them, protect their properties and of their dependants, and ensure they get their gratuities in their work place. The church needs to help those who are left behind to receive the entire amount of social security funds owed to the dead. Undoubtedly, God's will is that humanity, which bears God's image (*imago Dei*) should manifest God's glory by

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[296] It is shocking to learn about the forced sterilisation of women who are living with HIV and AIDS by the government of Namibia (Nation 9th September 2010:4). This was done to forty women when in labor and undergoing Caesarean section in government hospitals. Even though the Namibian government argued that these women had signed consent forms, the investigation revealed that all women who had had a Caesarean section as well as a sterilisation had signed them while in labor and without knowing whether the form it was intended to authorise the health personels to perfom sterilisation. In this case the procedure violated their right to life, to privacy and to freedom from cruel, inhuman and degrading treatment. Yet the law states that all people should be treated equally. This implies that PLWHA should have the same rights as everyone else including the right to found a family.

letting justice flow like a river that never goes dry (Amos 5:24). The righteous are called to mirror God's justice; for God is the ultimate author and source of the justice for which we yearn. Certainly, those who have encountered and experienced Christ's love and redemption should utterly shun injustice and wicked practices, which are against the ethics of the kingdom of God. Wolterstorff (1983:101) urges the redeemed to emulate Jesus who sacrificed himself while exhibiting justice. In this respect, they should not conform to the idols of this world (Yoder 1998:69).

Therefore, the Anglican Church of Kenya, or any other church denomination for that matter, ought to appear on the frontline of the crusade against the HIV and AIDS pandemic. All religious leaders should close ranks and present a united front. This could be achieved when all religions become open and objective about the HIV and AIDS pandemic. Again, the religious leaders, through inter-faith advocacy, should insist that the distribution of funds be channelled only to those religious institutions that are willing to speak the truth about HIV and AIDS. Through *Ũtugi (Harambee)*, they can raise funds to support advocacy programmes or projects as they fight the HIV and AIDS pandemic. In particular, the Christian religious leaders in Kenya should mobilize inter-denominational teams to provide more informed and practical approaches to education and prevention in the war against the HIV and AIDS pandemic. Essentially, the pulpit could serve as a powerful tool to advocate for all acceptable preventive methods, instead of just focusing on abstinence. They should also focus on educating people on sexuality and demystify the issues of reproductive health to empower the congregation.
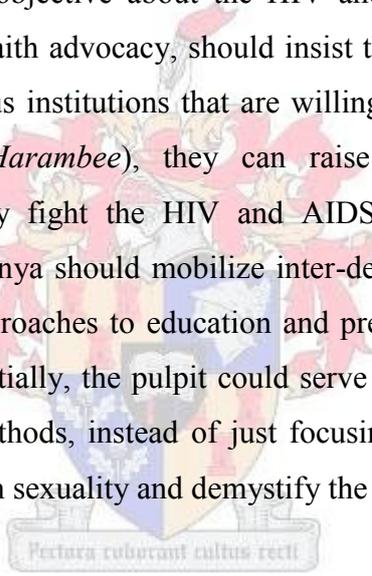
In Kenya, the church can easily engage in empowerment because many religious institutions have formidable resources that can be tapped to combat the HIV and AIDS pandemic. As we have seen above, many Anglican dioceses in Kenya run schools, hospitals, clinics and orphanages, which can be used to disseminate information on HIV and AIDS. Religion plays such an integral role in people's lives that an HIV and AIDS prevention programmes cannot be effective unless it deals with people's religious beliefs and practices. There is a need for the media to examine how religious beliefs shape the relationships between men and women and weave it into their reports. In fact, the media should do well to emphasize the supportive aspects of religion.

Apart from networking with local organisations, the Anglican Church also needs to network with other organizations at international or global levels, as it addresses the above predicament. Stephen Lewis restates this point as he addressed the African Religious Leaders forum in Nairobi, Kenya on 10 June 2002. Lewis, who is the Special Envoy to the UN Secretary General on HIV and AIDS in Africa, acknowledges the pastoral work of religious organisations on the problem of HIV and AIDS in Africa, noting that religious communities provide essential care to the ill and the dying at the village level (Lewis 2008:6). Lewis (2008:4), therefore, urges religious leaders in Africa to be proactive in denouncing the stigma attached to HIV and AIDS, to help waive school fees for orphans and vulnerable children to enable them attend school, and to influence political leaders in the North and South to fulfil their promises to support PLWHA and their families. Indeed, religious leaders in Africa should co-operate, not only among themselves, but also with secular authorities, to prevent death from being the final victor. In other words, religious leaders are challenged to engage in ecumenical and inter-religious dialogue (Lewis 2008:3).

Surely, the Anglican Church, in the context of HIV and AIDS, could initiate ecumenical and inter-religious dialogue with other faith communities in her attempt to fight the HIV and AIDS pandemic. This would mean maintaining and creating bonds with NGOs, FBOs, government ministries, people of other faiths and those affected and infected by HIV and AIDS themselves. As for PLWHA and their families, the church should involve them in rightful membership and participation in the community and in the parish life, thus, reaching out to and creating new bonds with those who are alienated by their community. The families of PLWHA also need to be assured that they are accepted, loved and valued in the community, and in their parish or local congregation. The inclusion of people who are rejected or marginalized by others should be the concern of the Christian community. Through *Ũtugi,* therefore, the Anglican Church of Kenya could turn stigma and discrimination into care and counselling, and allow the experiences and perspectives of PLWHA to be heard and drawn upon in counter-attacking stigma. The church should change her attitude to PLWHA and raise her voice against discriminatory attitudes such that her witness in this area becomes more credible.

As already noted, the above is possible because the Anglican Church is uniquely placed to respond to the challenges posed by HIV and AIDS. Therefore, it needs to respond with creativity, dedication, commitment, determination and courage. The church has a permanent

presence at the grassroots level and it has earned great respect in the community because of her compassion for the weak and vulnerable in society; it certainly has the capacity to influence individuals, the community and the nation.[297] In the same way, the church can act as a vehicle for getting information to the grassroots through its regular meetings, preaching and pastoral visit. It is capable of fighting HIV and AIDS because of its abundant material resources and its adherents who could be employed as compassionate volunteers. The next sections will explore the ways in which the Anglican Church can use *Ũtugi* in the construction of hospice care centres and Home Based Care Programmes for PLWHA.

5.8.3. Towards a caring community: The Home Based Care Programme

As already seen, care for the PLWHA in Kenya should not be left utterly to the doctors and nurses because of the insufficient medical resources in government hospitals. In this case, the care of the PLWHA should be seen as the responsibility of the whole community, which is crucial in the context of the HIV and AIDS pandemic. Magezi (2005:217-218) argues that, the involvement of the community in *Home Based Care* has a significant effect on the people, for they view the care of PLWHA as an extension of caring services rendered to one another in the family and the community. In fact, in the *Agĩkũyũ* culture, when a person is sick, through *Ũtugi,* the family and the community would rally round that person until s/he is well (Cavicchi 1977:15; cf. Ambe 1993:14).

However, since the majority of Kenyans are not pensionable, the government does not offer social grants to the vulnerable and only few people have medical insurance (i.e. only those with money or those employed by the government or companies). *Ũtugi* has been used as a survival strategy, even to raise funds for hospital bills and to buy medication. This is well demonstrated in the rural villages in Central Kenya where a sick person is cared for by members of the family, friends and volunteers until he or she recovers (Cavicchi 1977:15). In caring for the sick, the community would visit with food, and provide water and other necessary items until the person is finally well. Certainly, the community would feel offended if they are prevented from participating in such *Ũtugi*, for they feel denied of involvement in the healing process of a beloved relative. The failure to participate in someone's healing is interpreted by the community as lack of care and as a symbol of a failed *Ũtugi* (cf. Cavicchi 1977:15).

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[297] Mwaura (1999:57) contends that the role of the church and Christians should be exemplary in the society, taking into consideration that "they are the demographic majority in most Christian denominations."

In her attempt to construct a *Home Based Care Programme* forth for the PLWHA and their families, the Anglican Church of Kenya could tap this strong sense of community solidarity with the sick as entrenched in *Ũtugi* (Kenyatta 1938:117). It could also draw on the belief that *Mũndũ nĩ mũndũ nĩ ũndũ wa andũ* (a human being is a person because of the other people) or *Irĩ mũrũngũ igiritanagĩa na irĩ hĩa* (the hornless animal leans on the one that has horns). The church could use the principles of *Ũtugi* that promote, collaboration, participation and sharing to mobilise the local and international resources in the Worldwide Anglican Communion as she constructs a *Home Based Care Programme* at the congregational level.

Additionally, the church could link the local parishes with the Worldwide Anglican Communion in the support of the *Home Based Care Programme*. Louw (2008:452) claims that when the church engages in the programmes of *Home Based Care,* she does not only execute social function to PLWHA and their families, but also acts amicably with the "calling of mediating God's kingdom." Moreover, because of the principles of care, nurture, cooperation, networking, interconnectedness, family support, friendship, partnership, collaboration, communal, participation and sharing found in the practice of *Ũtugi,* it could be a powerful and precious tool for constructing a successful and effective *Home Based Care Programme.* The *Kenya National HIV and AIDS Strategic Plan* (KNHASP 2000–2005), sees *Home Based Care* as the care given to the sick, affected in their own homes, and care extended from the hospital or health facility to their homes through family participation and community involvement. The KNHASP (2000-2005) depicts *Home Based Care* as a collaborative attempt between hospital, family and community. This agrees with World Health Organisation's description of *Home Based Care* as:

> The provision of health services by formal and informal caregivers in the home in order to promote, restore and maintain a person's maximum level of comfort, function and health including care towards a dignified death. Home Based Care can be classified into preventive, promotive, therapeutic, rehabilitative, long-term maintenance and palliative care categories. It is an integral part of community-based care. Community-based care is the care that the consumer can access nearest to home, which encourages participation by people, responds to the needs of people, encourages traditional community life and creates responsibilities (2006:2).

On the other hand, Van Dyk (2008:332) perceives a *Home Based Care* as care given in the home of the PLWHA and is generally given by family members or friends (the primary caregiver) who are also supported by a trained community caregiver. Van Dyk (2008:332) argues that in a holistic *Home Based Care*, a family and trained community care giver is

normally supported by a medical practitioner, professional nurse, a social worker or trained counsellor, a pastor or spiritual leader, volunteers, traditional healers, friends and neighbours, and community members. According to Van Dyk:

> The main goal of *Home Based Care Programme* is to provide the organisational structure, resources and framework that will enable the family to look after its own sick members. the important function of *Home Based Care Programme* are: to empower the community and the family to cope effectively with the physical, psychological and spiritual needs of PLWHA; to educate the community about the prevention of HIV transmission; support family members in their care giving role and to reduce the social and personal impact that PLWHA make on those concern. A very important function of *Home Based Care* is to establish a well-functioning referral system to hospitals, hospices, clinics and other health care facilities in the community (2008:333).

Such a model is good in constructing a *Home Based Care Programme*, where the pastor, the counsellor, the family members, the Christian Health workers (CHW) the church nurse or doctor can work together to address the needs of the PLWHA and their families. Louw (2008:454) identifies three types of *Home Based Care*. (a) First, is the *Integrated Home Based Care*, which entails linking all the service providers with the families in a continuum of care, from diagnosis until death. This model collaborates with families, communities' caregivers, support groups, NGOs and Community Based Organisations (CBOs).

(b) The second is the *Single Service Home Based Care*, which is a one-service component in which a hospital, clinic or church organises a *Home Based Care* unit with the help of trained volunteers who are then linked to PLWHA in their homes (Louw 2008:454; cf. Magezi 2005:219). (c) The third model is the *Informal Home Based Care*, which is a non-professional model in which only family members care for their relatives who is living with HIV and AIDS (Louw 2008:454). In this model, no one has any specific training and there is no formal organisation or external support. In many rural areas in Kenya, the *Informal Home Based Care* model is common because of high level of poverty, lack of medical facilities and personnel, and lack of qualified counsellors. In places where clinics or health centres are found, there are normally not well equipped to handle services needed in the *Integrated Home Based Care* or they may be many miles away. Therefore, the *Single Service Home Based Care* seems a practical and valuable model that the Anglican Church of Kenya can adopt in the local community because it would reach many PLWHA and their families who do not have access to the necessary facilities (cf. Louw 2008:454; Magezi 2005:219).

In this regard, the church can use *Ũtugi* to mobilise the local as well as national and international resources to construct and fund *Home Based Care Programmes* in the local churches. Of course, the church will be required to make a shift from the position of clericalism, where the clergy dominates the laity, to a position where all parishioners, as the *body of Christ,* are allowed to care for the PLWHA and their families. Joy Phumaphi, the Minister of Health in Botswana, reminds us that, "*Home Based Care* is taking us back to the root of human coexistence. It reminds us that we all have the responsibility to one another. If we hold hands through this tragedy... we will be able to retain our humanity and will come out of this (pandemic) as a stronger community" (cited in WHO 2002:8).

This statement is correct because it is only when the church joins hands with the community, families, counsellors, pastors, medical doctors and nurses that she can meet the physical, psychological, social, emotional and spiritual needs of the PLWHA. Through *Ũtugi (Harambee*), the Anglican Church of Kenya could mobilise all her members to raise funds to procure drugs for the management of opportunistic diseases, pain or symptom control, and the supply of hospital items. The items could include gloves, bedpans, catheters, colostomy bags, cotton wool, gauze, swabs, bandages, plasters, washable cloth, disposable pads/incontinence sheets, incontinence underwear, soap, washing detergents, liquid bleach, syringes, needles, *Kleenex*, disposable towels and plastic aprons which will be needed in a *Home Based Care Programme*. Additionally, funds could be raised for training (equipping) as many volunteers as possible so that they can avoid being infected with the HI virus in their task of providing care.

The importance of a *Home Based Care Programme* by the church is that the PLWHA and their families would be able to benefit from church resources (e.g. church healthcare systems) and would be integrated in various support groups *(koinonia*). The most striking thing about the Anglican Church of Kenya is that it owns many mobile clinics, health centres and hospitals with medical personnel who are motivated by their faith and commitment to Christian values. As opposed to those working in government hospitals, these medical personnel perceive their occupation as that which witnesses the transformation power of the gospel and brings physical healing to the body. Therefore, *Ũtugi* can enable these people to reframe their understanding of healing to include, body, soul and spirit (*cura vitae*).

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This holistic approach is crucial in the era of HIV and AIDS pandemic. As opposed to hospitalisation, the PLWHA in *Home Based Care Programmes* are allowed to take responsibility for their own welfare. They also receive care in a familiar environment and they continue to participate in family affairs, thus, retaining their sense of belonging to social groups. The programme, therefore, enables them to accept their condition more easily, for they are offered pastoral care and counselling. In particular, a *Home Based Care Programme* creates space for the family members to continue to care and nurture PLWHA, and to show unconditional love.

Consequently, the Anglican Church of Kenya needs to adopt *Ũtugi* in her attempt to construct Home Based Care. The foreseeable challenge is how to integrate the Kenya Anglican Men's Association (KAMA), the men's organisation, in full participation in the *Home Based Programme*. Perhaps, through *Ũtugi* and in the spirit of *Mũndũ nĩ mũndũ nĩ ũndũ wa andũ* (a human being is a person because of the other people), they can demonstrate justice, love and compassion, and become involved. This implies that, their macho attitudes will have to be transformed and replaced by sensitivity, solidarity, nurture, cooperation, networking, interconnectedness, support, friendship, partnership, collaboration, communal, participation and sharing (cf. Chitando 2007:49). These are well entrenched in the practice of *Ũtugi,* which can also help them redefine their gender role in the context of HIV and AIDS pandemic. As already seen in Chapter Three, the central place for the practice of *Ũtugi* is in the *Thingira* (the man's hut). This place is normally warm and well stocked with food and drinks to be served to friends, visitors, strangers and those who are vulnerable.

In other words, in the *Thingira,* a man demonstrates his love and kindness and, therefore, he is accorded a special status in the community as *Mũthũũri Mũtaana* (a hospitable elder) who is considered capable of holding responsible positions in community affairs. This is in line with the saying, *Wega ũũmaga na Mũcii* (the good quality of a man is judged by the way he shows hospitality to others in his homestead). Such understanding is necessary to convince men in the World wide Anglican Church to be involved in the *Home Based Care* Programme. In fact, the challenge posed by the HIV and AIDS pandemic dictates that both men and women play a meaningful role in caring for the PLWHA and their families. As such, the *Mũthũũri Mũtaana* (a generous elder) must be responsible in the church and in the society. Chitando rightly says:

> The role of men in *Home Based Care* in the context of HIV (and AIDS) in Africa must not be confined to the domestic sphere. It must extend to men in positions of authority in

church, politics and society. It is men who dominate government ministries that oversee health and National AIDS Councils. Male politicians wield power as residents. They must ensure that Home Based Care Programmes receives adequate resources. They need to undergo "behaviour change" regarding the allocation of resources. Caring men do not allocate the resources to the army at the expense of hospitals. Caring men ensures that church programmes on HIV are not mere status symbols that demonstrate political/theological correctness. Caring men do not neglect the needs of orphans and vulnerable children. Caring men endeavour to make a difference in context of HIV (and AIDS pandemic) (2007:49).

5.8.4. Towards a caring community: Hospice care as life care

Discovering that one has full-blown AIDS and is waiting to die challenges the quality of life of the PLWHA. This is because death usually means the end of the task of the medical fraternity, but it signals another important task in the holistic pastoral counselling ministry of the church. It has been observed that, sometimes, church members walk away after the funeral service leaving the bereaved family behind. However, in the context of the HIV and AIDS pandemic, the church needs to realise that, after the burial, there are HIV and AIDS orphans left behind by the deceased. In this case, the Anglican Church of Kenya could use the medium of *Ũtugi* to feed, cloth, educate and support them. Likewise, *Ũtugi* can be employed as a support system at the parish level or congregational level to make lasting contributions in the face of the crisis.

Besides, the church could adopt *Ũtugi* to link the orphans with other church members who can provide the necessary care and integrate them into a *care group*. By so doing, the church would be mustering and developing sustainable support systems needed in the HIV and AIDS era. The Anglican Church has to take up the challenge of counselling both the person who is dying and those left behind, that is parents, spouses, the children, siblings and close friends. Mwaura (2000:92) explains that the pastoral counsellor is called to participate in the inner turmoil, agony, frustration and hopelessness of the sick or troubled person. In order to do this properly, the church has to deal with its own paranoia, get in touch with PLWHA on the level of their basic needs, and give them hope that is rooted in the faithfulness of God and the resurrection power of Jesus Christ (Louw 1994:43). This hope should be encouraged through the Scripture and *koinonia* (κοινωνία) in order to restore the feeling of dignity. Louw (2008:537) argues that the dying person requires psychological, social and spiritual help. On the psychological level, the dying has two central emotions namely denial and anxiety, which are clouded by the conflict of the continuation of life and adapting to the inevitability of death. Louw notes that the crux of the psychological crisis is helplessness; for what the dying fear most, is not death itself, but the process of dying (Louw 2008:537).

On the social need, the dying person desires that people should be near him or her. Louw (2008:537) affirms that the presence of people, "being there" and "being available" is essential for stable relationships and expression of love, tenderness and intimacy. As such, the crisis occurs when they have to "part from their loved ones" and be "alone." Equally, the desire to die with human dignity is entailed in the spiritual needs of the dying person. This, therefore, makes hospice care a care for life. One of the paradoxes of dying in a hospice is that loss, futility and despair permeate this stage of life; these are "the feelings that provide the background against which adaptation and growth occur. It is a life stage characterised by growth through the process of letting go and adaptation to the gradual giving up of life, by learning to live with an increasing sense of loss and being directly in contact with the threat of non-existence" (cited in Louw 2008:536). Louw (2008:538) shows that the dying person needs to die with hope and to journey into death meaningfully. This is because spiritual crisis arises when there is doubt and despair. These stimulate anxiety, which is aggravated by admitting the diminishing of a future and the running out of time. In this sense, "the future is telescoped into the present, creating a sense of urgency" (Louw 2008:538).

Certainly, the above needs of the dying person should compel the Anglican Church of Kenya to adopt *Ũtugi* to care for those who are dying of AIDS. Any person who has ever cared for a family member who is bedridden by the HIV and AIDS would definitely appreciate *Ũtugi's* communalistic solidarity and generosity. The presence of God, the parishioner, the counsellor and the clergy are important to the PLWHA and their families because they feel supported in their journey and struggle. Through *Ũtugi,* the Anglican Church of Kenya could adequately mobilise the community to cater for the PLWHA and their relatives in a holistic manner.

As it is possible to raise funds through *Ũtugi* element of *Harambee* to start and manage *Home Based Care,* so is it possible to raise money to establish a *Parish Based Hospice.*[298] Pohl (1999: 167) claims that, hospice represents a return to hospitality that connects care

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[298] The name "hospice", a resting place for travellers or pilgrims, was popularised by Dame Cicely Saunders (1918), who founded St. Christopher's Hospice, London in 1967, and thereby, launched the modern hospice movement. In other words, hospice is a programme of care for terminally ill patients and their families. Most of the patients helped in this way have cancer and the launching of the hospice movement in 1967 was dictated by desire to provide a type of care, which incorporated the skills of a hospital and the more leisurely hospitality and warmth of a home. In the hospice, the centre of interest shifts from the disease to the patient and family, from the pathological process to the person. In our context, hospice and Home Based Care are vital for PLWHA and those orphaned by HIV and AIDS.

with respect, comfort, and presence. In this case, it enables participants to give basic attention to relationships and connection. The hospice caregiver visits the home of the dying person to support the family in caring for their dying member (Pohl 1999:167). However, Bretherton (2006:186) laments that, the term "hospice care" has changed in meaning as it now refers to a programme rather than a place of care for terminally ill patients and their families. Differentiating the term hospital and hospice, Bretherton (2006: 186) claims that the term "hospital" refers to an institution that focuses on care for the sick and, if possible, curing them while the term "hospice" is used for an institution that cares for patients but does not cure them. In this case, the term "palliative medicine" refers to the technical attribute of hospice care that focuses on relieving pain by using specific drugs (Bretherton 2006: 186).

The uniqueness of the *Parish Based Hospice* is that it can provide effective and holistic relief of patients' pains and other distressing symptoms of their condition, besides offering psychological and spiritual care to PLWHA in their final stage so that they can come to terms with and prepare for death as fully as they can. In other words, the *Parish Based Hospice* can be a support system to help dying AIDS patients to live as actively and creatively as possible until they die (cf. Bretherton 2006:186). In this way, their independence, personal integrity and self-esteem are promoted, while their families are also helped to cope during the patients' illness and their bereavement. Another uniqueness of the *Parish Based Hospice* is that it does not accelerate death neither does it postpone it (cf. Bretherton 2006:186). From a theological point of view, Bretherton states that:

> The manner in which hospice care gives a space to the suffering - dying bears the mark of feasting and fasting that are a sign of properly Christian hospitality. Hospice care neither denies the absence of Christ nor the possibilities, even in dying, of the freedom available now through the action of God (even dying is not a continual fast, but may encompass time of joyful feasting). Hospice care gives space and time for the celebration of the life now dying, and yet, in the care it gives, it expects and longs for the full disclosure of God's rule when "God will wipe every tear from their eyes. Death will be no more; mourning and crying and pain will be no more, for the first things have passed away" (Rev 21:4). Hospice care incorporates both joy at the presence of freedom through reconciliation (the joy of the feast) and pain at the presence of unfreedom and hope of the world's release from it (the longing of the fast) (2006:186).

Besides buying relieving medicine and other essential items needed in hospice, the Anglican Church, through *Ũtugi,* could engage in giving the PLWHA and their families, full-time care. As such, the community could be mobilised to protect, save and care for life to its very end including giving a decent burial to the dead. As Waliggo (1990:111-128)

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observes, the community is not tired of contributing the little its members have towards burial expenses. This, therefore, challenges the Anglican Church of Kenya to adopt *Ũtugi* in her HIV and AIDS pastoral ministry.

Furthermore, even the funeral is not just a church function; it is an opportunity to face the reality of death, honestly, together, and to remind ourselves that death is not the final word that God proclaims to humanity. Even in the cultural setting of many communities in Kenya, feasting during and after burial is perhaps as a way of celebrating the life that has just transcended to the place of the ancestors. The funeral rites follow burial and family-head of the bereaved is officially installed, a sign that weeping and sorrow are ended so that new life, joy and work can resume. As we have seen earlier, in the Agĩkũyũ culture, the name of the deceased is not lost because the newborn babies in the family are given his or her name, hence, the gap is filled. The inner energy contained in such naming and ceremonies is the clear assertion that death has not defeated life; it is a declaration that life must continue and the unborn should actively find life. If the church could tap such potential principles existing in *Ũtugi,* it can demonstrate God's unconditional love to the families confronted by the HIV and AIDS pandemic.

5.9. Conclusion

This chapter has given an outline and a brief history of the origin of the Anglican Church of Kenya. It has described the church's ecclesial practice during the colonial and postcolonial periods. It has been noted that with the advent of Kenya's independence, President Kenyatta became instrumental in championing *Harambee* (which is a component of *Ũtugi*), and the Anglican Church of Kenya supported his gesture by adopting it to augment her financial capital to build many schools, hospitals and churches. However, even though the Anglican Church attempted to interculturate *Ũtugi* in the form of *Harambee* to initiate the above programmes, the church did not succeed in using *Ũtugi* as a tool for pastoral ministry. This was due to the exclusive ecclesiological models, inherited from the colonial missionaries, which were heavily influenced by western philosophical trends that underrated local cultures and traditional heritage.

It has been shown that the exclusive "top-down," hierarchical episcopal model inherited from colonial Christianity aimed at centralising power in the bishop, thus, disempowering the congregation. In this case, it needs to be replaced with an ecclesiological model of

inclusivity, which can involve the whole congregation in the care of the PLWHA and their families. This therefore calls for an intercultural hermeneutical model of inclusivity, which could enable the Anglican Church of Kenya to adopt the *Kĩrĩra kĩa mũciĩ* (family education)*, the *Irũa* (rites of passage) and *Harambee* as entrenched in *Ũtugi*. In short, the chapter shows that, *Ũtugi,* in the context of HIV and AIDS could reframe the existing ecclesial praxis of the Anglican Church of Kenya in the following ways:

a) With the *Kĩrĩra kĩa mũciĩ,* the church could deconstruct the institutionalized and internalized patriarchy, power imbalance and gender inequality within the church. This is because such discrepancies stems from the social structures and conceptions, which have been acquired right from childhood and which produce a patriarchal society based on hegemonic masculinity. The *Kĩrĩra kĩa mũciĩ* could also help the church to dismantle her dysfunctional ecclesial hierarchy of exclusivity and to adopt a more inclusive paradigm based on the Agĩkũyũ spirituality which is not pyramidal but circular in nature. For it is through such an inclusive ecclesiology that PLWHA and their families can feel embraced and welcomed. Again, the *Kĩrĩra kĩa mũciĩ* could help the church to engage the community and PLWHA in the HIV and AIDS prevention education that would help them to make informed decision concerning their lives.

b) With *Harambee,* the church could augment the physical, financial, social, psychological and spiritual capitals of PLWHA and their families. In this regard, the money collected through *Harambee* could empower and help equip the PLWHA and their families by enrolling them in courses that can increase their life skills. That way, they would be able to secure employment, improve their technical and interpersonal skills and fight poverty, which is often a threat to the PLWHA. The *Harambee* could also enhance "group savings", credit, and insurance programs for the PLWHA and their families. Furthermore, children who are orphaned by HIV and AIDS need to be educated, and the church, through *Ũtugi* (*Harambee),* could help raise money for their fees and for their upkeep. Similarly, the PLWHA and their families could be supported emotionally and spirituality. They become motivated while their self-esteem and self-perception are also strengthened. In fact, the church gains her authority in livelihood support and advocacy work because it is also, at heart, a caring community. By so doing, the church will be demonstrating care and God's unconditional love to the families confronted by the HIV and AIDS pandemic.

c) The principles of *Ũtugi* that focus on care, love, nurture, cooperation, networking, interconnectedness, family support, friendship, partnership, collaboration, communal, participation and sharing would enable the Anglican Church to construct effective support groups, *Home Based Care Programmes* and *Parish Based Hospices.* It could also enable the church to mobilise the congregation to become a caring community that provides PLWHA with adequate shelter, nutritional food, household tools and equipment, water and sanitation and hygienic home-environment. Additionally, it could help pastoral care givers and the medical personnel in the church to reframe their understanding of healing to include, body, mind and soul (*cura vitae*). This holistic approach is crucial in the era of the HIV and AIDS pandemic. Certainly, the care and compassion that is present during the pastoral care and counselling need to continue throughout the life of PLWHA and their families, and as the effects of the virus become debilitating, the church needs to demonstrate her caring presence by looking after frail PLWHA and their families up to the last stages of their lives.

d) The elements of communal care and relationality embedded in *Ũtugi* could enable the church to be involved in an advocacy ministry that would challenge the abovementioned deprivation. The machinery of communal, participation, networking, interconnectedness (relationality) in *Ũtugi* is an important tool that can help the church in advocacy as it challenges government policies that directly or indirectly perpetuate injustice against PLWHA and their families. This is in line with the principles of solidarity entrenched in *Ũtugi.*

Therefore, we can conclude that the *Ũtugi* paradigm has the potential to reframe, challenge and transform the existing ecclesial paradigms applied by the Anglican Church of Kenya, for it can be regarded as a credible model that is contextually relevant to fight the HIV and AIDS pandemic in Kenya. This chapter, therefore, has prepared us to examine the *Ũtugi* paradigm as a praxis theory for pastoral care and counselling to the PLWHA and their families, to which we now turn.

CHAPTER SIX
ŨTUGI: A PRAXIS THEORY FOR PASTORAL CARE AND COUNSELLING

6.1. Introduction

In the last three chapters, we have explored the concept of *Ũtugi,* the ways in which *Ũtugi* can complement Christian hospitality and the appropriateness of *Ũtugi* as a tool for pastoral care and counselling to the PLWHA and their families in the ecclesiological praxis of the Anglican Church of Kenya. In this chapter, therefore, we shall endeavour to integrate these chapters through a more composite reflection. To accomplish this, we shall attempt to formulate a praxis theory for pastoral care and counselling, based on the paradigm of *Ũtugi.* By drawing from Louw's (2008) existential approach to healing, we shall assess the appropriateness of *Ũtugi* as a model for healing and demonstrate how it can deal with the existential threats of anxiety, guilt feelings, shame, despair, doubt, helplessness, vulnerability, frustration and disillusionment, which are often experienced by the PLWHA and their families. Lastly, the four basic anthropological components that can enable the pastoral care givers to use *Ũtugi* paradigm effectively in their pastoral strategy will be examined.

6.2. Quest for healing: The contribution of *Ũtugi* as a holistic healing model

Since *Ũtugi,* like the Agĩkũyũ religion, permeates the socio-economic, political, psychological, emotional and religious life of the Agĩkũyũ, it can be used as a holistic model to facilitate the healing of the PLWHA and their families. From *figure 17*, we see that, the *Ũtugi* element of welcoming could help the PLWHA and their families to share their stories freely without being judged. In other words, *Ũtugi* can provide a space where the PLWHA are accepted and accommodated. Similarly, *figure 17* shows that the *Ũtugi* element of solidarity can facilitate the formation of HIV and AIDS support groups, while the elements of care, love, nurture, co-operation, networking, interconnectedness, family support, friendship, partnership, collaboration, communal, participation and sharing (*Harambee*) could encourage the integration of PLWHA in the community of care (see *Home Based Care or Parish Hospice).*

Again, the *Ũtugi* element of protection could be adopted in the formation of advocacy groups, while the *Kĩrĩra Kĩa Mũciĩ* and the rites of passage could enhance the HIV and AIDS prevention programmes (see *figure 17*). As already seen in the Chapter Five, the *Ũtugi* element of *Harambee* can augment the physical, financial, social, psychological and spiritual

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support systems of the PLWHA and their families, thereby, facilitating their healing. The figure *17* demonstrates how each of the *Ũtugi* components can facilitate healing to the PLWHA.

Figure 17: *Ũtugi as* a holistic healing model and existential life approach
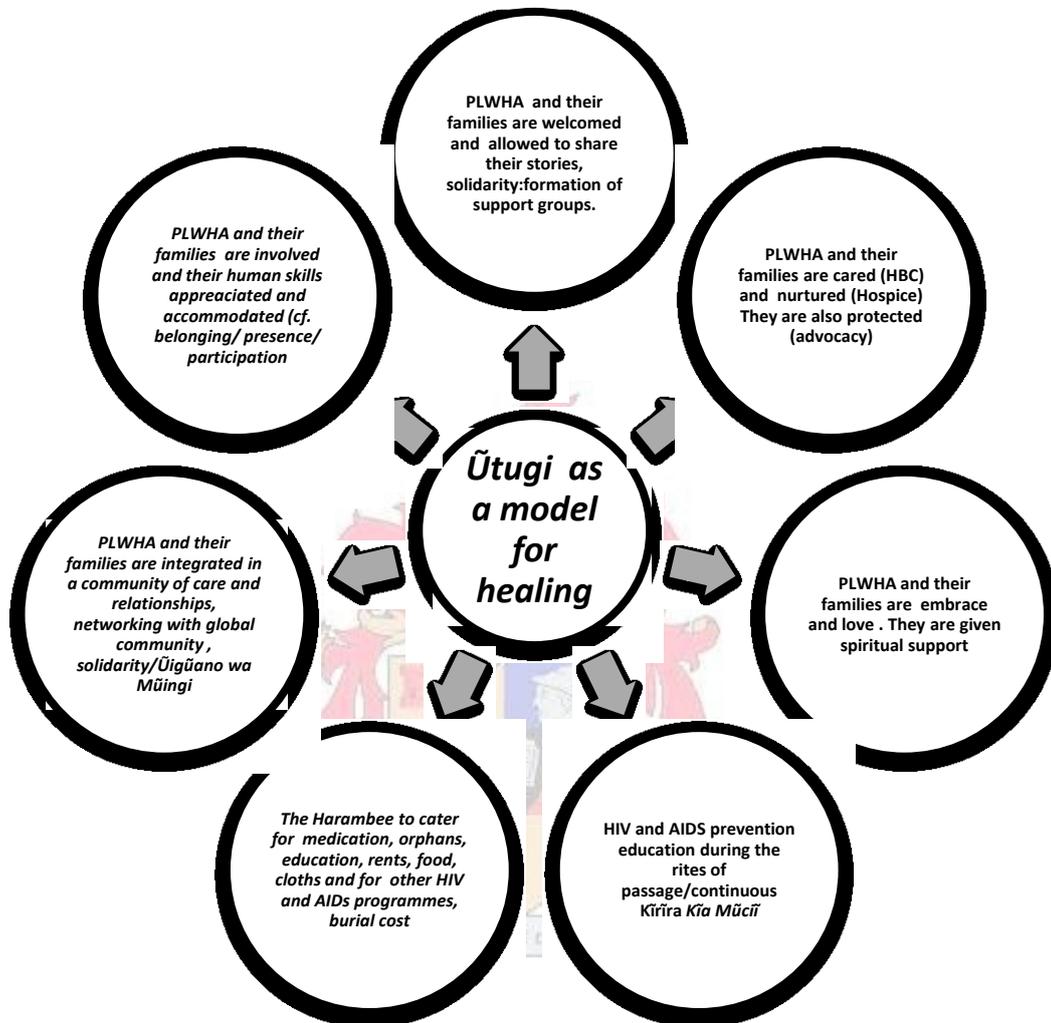
Moreover, the money raised through *Harambee,* could be used to equip the PLWHA and their families with life skills to enable them live a more meaningful life. Such donations could be used to fund their education or to help pay for their rent, medication, food, clothing and burial costs. It has been noted that PLWHA and their families need to be helped to gain a better understanding of God's care and providence, to rediscover their self-actualisation, to devise positive strategies and objectives for living and to be integrated into adequate support groups. Besides, *Ũtugi* as a holistic healing model could serve as a tool for reducing the incidence of stigma and discrimination against PLWHA and their families. This is because the model can provide togetherness, accommodation, inclusiveness, sharing, belongingness,

welcome and love needed by PLWHA, thus, offering them hope as they journey with the HI virus in their bodies.[299]

The advantage of *Ũtugi* as a holistic healing model is that it recognises the role of caring for one another within the community. The model also recognises the contribution of communal institutions such as *Riika* (age set), *Mbarĩ* (families) and *Mũhĩrĩga* (clans). In fact, *Ũtugi* presumes that everybody within the community is willing to give to and assist the sick person. This is because *Ũtugi* does not operate around an individual, but it involves the community as reflected in the saying, *Mũndũ nĩ Mũndũ nĩ ũndũ wa Andũ* (a person is a person because of the other people). In this case, the communal element of *Ũtugi* becomes vital in providing support systems for PLWHA, and the healing process becomes a communal undertaking. This is in line with Louw's (2008:171) view that "to live and therefore to share life, with others cannot be ignored in the process of healing."

Therefore, when developing a healing model based on *Ũtugi*, one should bear in mind that the PLWHA and their families in the African context need to be integrated into the community (fellowship) for it is only in a community atmosphere of that healing, sustenance, reconciliation and nurturing can occur. In other words, their humanness can only be fully realised in the context of relationality and communality. This is well expressed by Wangiri (1999:71-89) who asserts that the sense of oneness holds that the universe and all that is in it, be it animal, plant or any created thing; all have an interrelation that is mutually sustaining. In fact, most Africans are convinced that, in the activities of life, harmony, balance or tranquillity must constantly be sought and maintained. As Mbiti (1969:108) says, the idea of oneness, the "we" and "us" is ingrained in African people right from birth, and this gives each person an identity. Therefore, the healing act implies the restoration of a loss and the search for integration and identity (cf. Louw 2008:75). This is because healing occurs when we regain what has been lost or when we "attain new coping skills or coping mechanisms" (Louw 2008:75).

Since *Ũtugi* seeks a holistic and comprehensive approach to healing (psychological, emotional, economic, social and spiritual), then, it can be used in a Christian context where

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[299]Louw (2008:75-77) is of the view that pastoral care implies more than empathy, and functions to heal, sustain, guide, reconcile, nurture, liberate, empower, and interpret.

spiritual healing is approached in a holistic way (cf. Louw 2008:75). It should be noted that the lives of the PLWHA and their families are not compartmentalised into several categories, e.g. religious, social political and economic spheres, as we tend to assume. In many African cultures, life is holistic and religion permeates every aspect of the socio-economic, political, and cultural life (Berinyuu 1988:5; cf. Mbiti 1969:1; Wangiri 1999:71-89; Long 2000:20). In other words, like other person with various ailments, the PLWHA and their families in the African context do not distinguish between religious and secular issues. Therefore, this experiential and holistic approach to life is their framework when they go for counselling. Berinyuu (1988:5) explains that most Africans generally believe that everything (human beings included) is in constant relationship with one another and with the invisible world, and that people are in a state of complete dependence on the invisible powers and beings. According to Berinyuu (1988:5), society is not perceived in segments, but as a whole; and life is seen as "a liturgy of celebration for the victories and sacrifices of other."

Another issue that needs to be considered when constructing *Ũtugi* as a model for healing is the African understanding of sin, sickness and healing. Many African communities perceive sin not as a transgression against God or the transgression of some moral law or virtue, but as a breakdown of the complex structure of human relationships within the community, which includes the ancestors. Nürnberger (2007:27) rightly states that the people believe that this breakdown could cause infirmity. On the other hand, African communities also recognise that virtues such as trustworthiness, reliability and good judgment, among others, bring health and healing to a person. However, in the African perception, what really matters is the health of the network of relationships within the community. What this means is that sickness is not necessarily located in the disease but in relationships. Writing from African perspective Louw claims that:

> Sickness is something more a systemic issue than a disease. Both sickness and health are embedded in life and existential issues such as hunger, poverty, unemployment and violence. Behind these structural and systemic issues lurk the ever existing danger of power and the misuse of power and authority (2008:118).

Certainly, this view shows that, in the African context, a healthy community is one that lives in harmony with self and others, including the ancestors. Moreover, since every person is born into a family, is raised in the family, is trained by the family, and will be buried by the family (cf. Mbiti 1969:108), then, the family is an important element of the wellbeing of an individual. A person loses social standing within the family when his or her actions run counter to the community's idea of right conduct (cf. Mbiti 1969:108). What this means is

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that holistic healing in African cannot be sustained outside the family. In fact, it is within the family that an individual is given a religious identity and it is in it that a person is connected to the spiritual world of the ancestors. For this reason, when there is disharmony in the socio-cultural, political and religious structures, an individual, the family and the community would be regarded as sick. Saayman and Kriel (1992:36) point out that, "in the community where such a balance exists, a person is able to attain fully his or her vital force or life force", and in such a community, "disease can be either the cause or consequence of the disruption of the essential balance or harmony."

This statement rings true because in Africa, interpersonal relationships are the foundation of the whole community and entail the economic, social, cultural, political as well as spiritual activities. Louw (2008:138) argues that this spiritual dimension must be understood cooperatively, for humanity is part of a "societal order within which living energy is linked to cosmic and religious powers which give meaning to everyday existence." Therefore, during counselling, the pastoral care givers should bear in mind that the HIV and AIDS pandemic is a threat not only to the PLWHA but also to the whole community. This is because any disease in Africa is perceived as a warning sign of disorder, and the crucial issue is not the exact diagnosis of the disease but the reason for the interruption of the order (Saayman and Kriel 1992:36). Saayman and Kriel explain that:

> The disorder could have come about because an ancestor had been neglected or maltreated (for example by not fulfilling all the ritual requirements accompanying his or her burial) or because of some maltreatment of environment (for example chopping down a sacred tree or killing a sacred animal). Or it can come about because relations between people have been disturbed, either because of wrong behaviour (stealing from a neighbour, committing adultery with another person's wife/husband) or because of witchcraft (having a spell cast on a more successful competitor in love or business (1992:36).

From the above discussion, it is clear that the holistic healing of the PLWHA and their families would require a holistic healing model. With the elements of welcome, love, care, nurture, accommodativeness, compassion, appreciation, forgiveness, encouragement, reconciliation, protection, restoration, rehabilitation, enjoyment, justice, supports, sharing, togetherness, inclusiveness, and socio-economic empowerment (*Harambee*), as well as harmony with *Ngai* (God), ancestors and the community, solidarity through *Ũtugi* can be used as a holistic healing model. This is because *Ũtugi* has the potential to address the psychological, emotional, political, economic, social and spiritual needs of the PLWHA and their families. Certainly, *Ũtugi* as a holistic healing model can facilitate the ongoing quest of

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the PLWHA for holistic healing, the ultimate being better and healthier living conditions, as they strive for wholeness. Furthermore, *Ũtugi* could offer the space for harmonious living with self, community and *Ngai,* thus, facilitating holistic healing. According to Shorter (1985:3), in Africa, it is not illness that is healed but people (cf. Saayman and Kriel 1992:38). Based on the above perspective, we shall now turn to an existential approach to spiritual healing before demonstrating how *Ũtugi* as a holistic model for healing could help the PLWHA and their families to shift from their position of existential threat to a position of holistic healing.

6.3. Louw's concept of an existential approach to healing

An existential approach to healing is well elucidated by Louw in his book, *Cura Vitae: Illness and the Healing of Life in Pastoral Care and Counselling: A Guide for Caregivers.* Louw (2008:63) regards the existential threats as viruses in life, which influence and determine the quality of the "ensoulment of life and the embodiment of the soul." From a theological perspective, Louw perceives the Christian spiritual healing as that, which deals with the existential threats of anxiety, guilt feelings, shame, despair, doubt, helplessness, vulnerability, frustration and disillusionment (Louw 2008:66; cf. Capps 1995:98). He posits that:

> Spiritual healing occurs when one can relate an appropriate understanding of God to the basic issues in life. Healing is about the encounter between life and God and the quality of our being functions which emanates from such an encounter as well as an awareness of the presence of God (the *coram Deo*-principle) that inspires and motivates faith. Inspired faith is a pneumatological event that fosters a directed courage to be and lead to inspiring and transforming actions of hope (Louw 2008:66).

In Louw's (2008:65) contention, spiritual healing involves the encounter between life, and God and the quality of our being functions, which originates from such an encounter as well as an awareness of the presence of God that inspires and motivates faith. He maintains that a mature faith consists of change (soteriological), responsible choice of behaviour (ethos and ethics), the growth (sanctification), empowerment and mutual support (*koinonia*-κοινωνία)) and anticipation (eschatological hope) (Louw 1998:19). The *table 6.3.1* below illustrates Louw's understanding of *Cura vitae,* the life dimension of healing and how it is involved in the facilitation of the Christian spiritual healing. Louw (2008:66) further claims that the inspired faith is a pneumatological event that encourages "a directed courage to be" and "leads to inspiring and transforming actions" of hope.

Table 6.3.1: *Cura vitae***: Life dimensions of healing (Louw 2008:65).**

Existential issues	Life needs Being needs: courage to be	Christian spiritual healing/therapy
Anxiety: experience of loss/ rejection →	Intimacy: Affirmation & self-actualisation	← Grace: unconditional love Role of God-images
Guilt/shame →	Freedom/deliverance	← Forgiveness/reconciliation
Despair/doubt →	Anticipation: meaning	← Eschatological realm of hope
Helplessness/vulnerability →	Support system	← Fellowship/*koinonia*/*diakonia*
Frustration/anger → (Disappointment & frustration; structural issues: poverty/unemployment/violence /crime)	Life fulfilment/direction/ transformation	Gratitude & joy/*promissio*- therapy/ethics ←

Therefore, the discovery of meaning and spiritual healing through the perspective of the existential paradigm of faith care as life care means that, with the clear understanding of the Christian faith, appropriate God-images can be related to anxiety in such a way that intimacy is experienced. It also means that the guilt feelings and shame, which can be related to freedom and despair are addressed by eschatology and hope, while the helplessness and vulnerability are connected to the concreteness of *diakonia* and *koinonia* (Louw 2008:66 ; cf. also refer to figure 6.3.1). Similarly, the frustration and anger are met by the fulfilled promises of God and ethical actions of structural and contextual transformation. From a theological perspective, Louw maintains that spiritual healing is simply:

> [A] new state of being: healing represents the fact that "… if anyone is in Christ, he is a new creation" (2 Cor. 5:17). This is a shift from sin into the eschatological realm of redemption and salvation. Spiritual healing as new state of mind: peace. *Shalom* describes a contentness with God and life. "For he himself is our peace" (Eph. 2:14). Spiritual healing as a new attitude and way of doing and living." Live by the Spirit… but the fruit of the Spirit is love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control" (Gal. 5: 16; 22-23) (2008:62).

From the viewpoint above, we can acknowledge that suffering is an existential and structural part of the lives of the PLWHA and their families. The suffering that the PLWHA undergo is part of their existential ontology and it limits their pursuit of happiness. The failure to "make sense" of their predicament challenges their understanding and depiction of God,

unavoidably (as we have noted under God-images). Therefore, in pastoral care and counselling, the focus should not be on the existential ontology of their suffering, but on a hermeneutic of suffering that would challenge their pathological concepts of God and eventually lead to a concrete action of hope, *koinonia* and *diakonia.* Although Louw's existential approach to healing focuses more on the pastoral and hermeneutical implication of the Cross, reframing of God-images, the human quest for meaning and its implication for Christian spiritual healing (promissio-therapy), his model will be useful in our evaluation of *Ũtugi* as a model for healing.

### 6.4 An interpretation of *cura vitae* in the context of the HIV and AIDS

In this section, we shall address the question, how can *Ũtugi* contribute to the *cura vitae* of PLWHA and their families? As depicted in the *figure 18*, when people are diagnosed with the HI virus, they are faced with the existential threat of anxiety (the fear for isolation and rejection), guilt and shame, despair and doubt (meaninglessness and emptiness), helplessness and vulnerability (depression) and frustration and disillusionment (i.e. experiences of unfulfilled needs).

As shown in *figure 18*, the PLWHA's response to these existential threats depends on whether or not they are integrated into a support system. The support systems enhance the healing of the PLWHA even though they may not be cured. This, therefore, explains the reason why majority of people who test HIV positive and lacks good support systems experience meaninglessness and emptiness and struggle to cope with their (new) HIV status. They begin to see their environment as that, which negates their identity and deny their humanity.

With good support systems, the PLWHA are able to cope with their situation and live meaningfully. In this case, the *cura vitae* can be interpreted as a theology of life and healing of life from the perspective of Christian spirituality. Thus, the understanding of the resurrection in Christ and the indwelling presence of the Spirit contributes significantly to their empowerment. It enhances hope and gives meaning to life in the context of suffering, vulnerability and the predicament of trauma, stigma, illness and sickness (cf. Louw 2008:12). The core issue in this discussion is that, from the time people are diagnosed with the HI virus to the time they die, the way they respond to the existential threats will be determined by the quality of the maturity of their faith, the content of their belief system (worldview), the

normative dimension of their lives, their value system, and the nature of their relationships with God, friends, families and the environment.

Figure 18: An interpretation of *Cura vitae* in the context of HIV and AIDS -life dimensions of healing for PLWHA
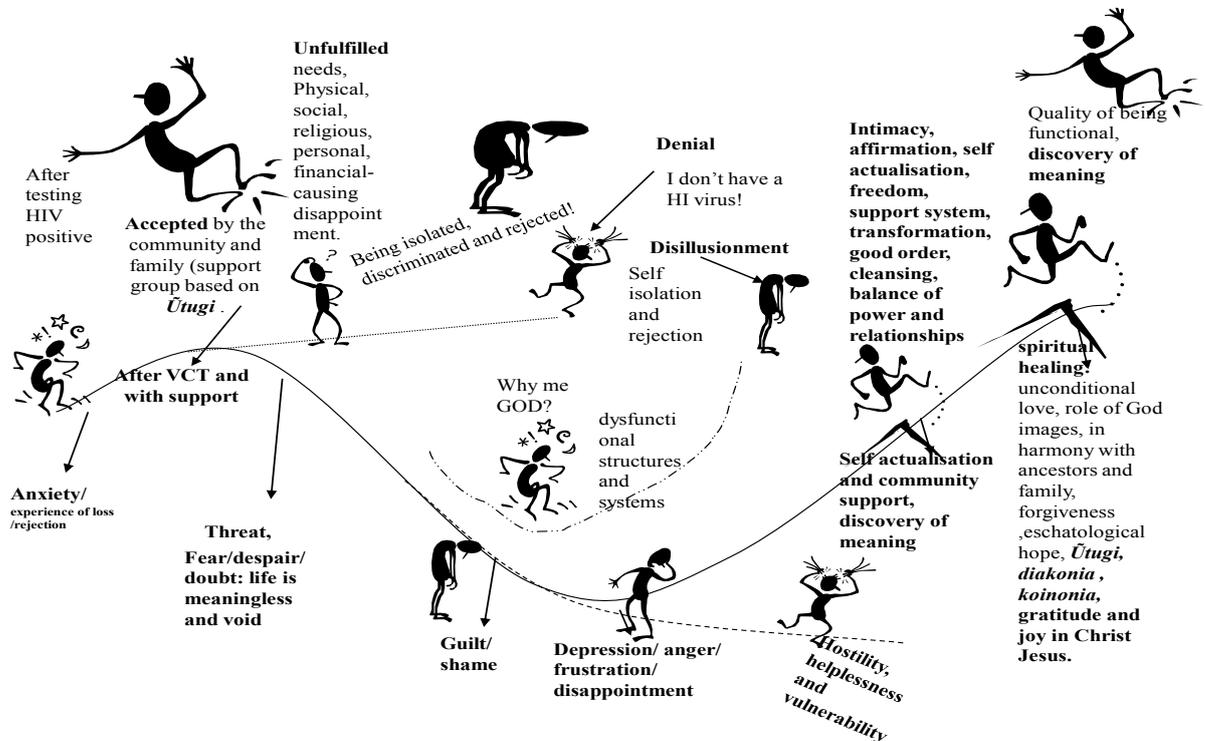
These factors play a decisive role in the holistic approach to the healing of the PLWHA and their families (cf. Long 2000:14; Louw 2008:46). Therefore, in the following sections we shall attempt to demonstrate how *Ũtugi* as a holistic model for healing can be used to deal with the existential threat of anxiety, guilt and shame, despair and doubt, helplessness and vulnerability, frustration and disillusionment experienced by PLWHA.

6.5. Existential threat of anxiety

It is unfortunate that for more than two decades since Kenya started sensitising people to the reality of the HIV and AIDS pandemic, many people still treat PLWHA and their families with discrimination and prejudices hence stigmatizing them. When people are stigmatised or discriminated against, they feel rejected, isolated and unwanted, thus, experiencing an existential threat of anxiety. With the elements of *Ũtugi* such as love, care, nurture, protection, accommodation, welcome, share, reconciliation, togetherness, inclusiveness and compassion, (cf. Kenyatta 1938:10; Olikenyi 2001:111), the PLWHA and their families can be helped to shift their existential position of anxiety, feeling rejection and stigma to a

position of intimacy, love and self actualisation thus facilitating healing. The two arrows in the *figure 19* illustrate this shift of positions.

Figure 19: From an existential position of anxiety to a position of intimacy and love
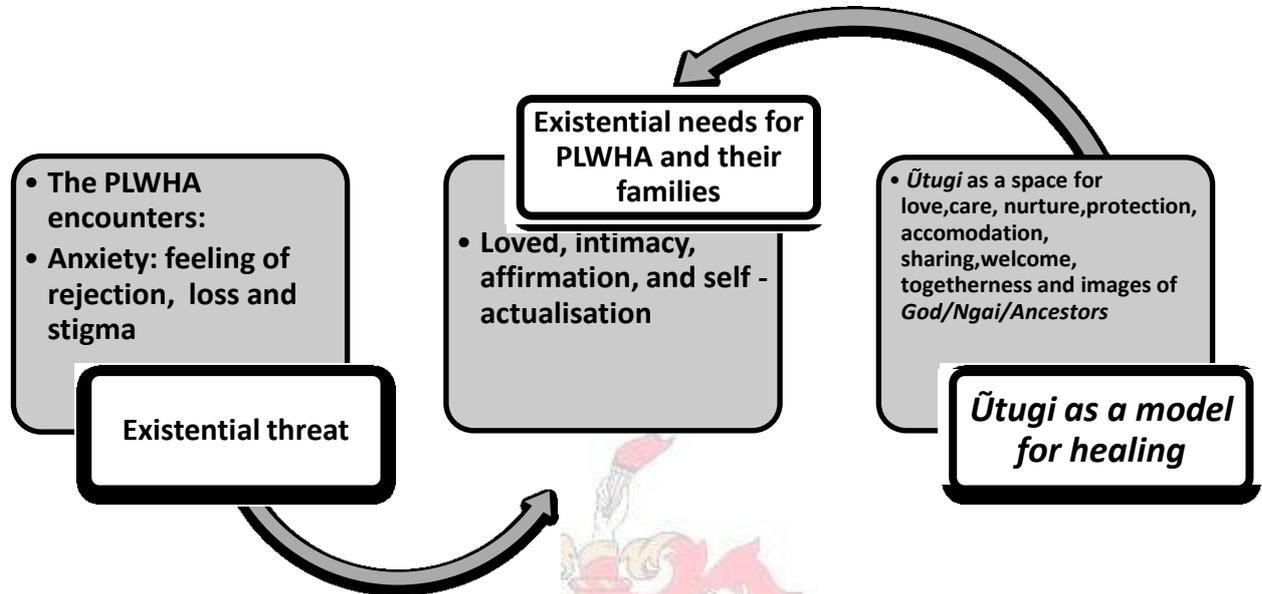
Therefore, if through *Ũtugi,* love, care, nurture, protection, accommodation, welcome, sharing, togetherness and inclusiveness could be offered to the PLWHA and their families, then, it is an appropriate model for healing. Louw (2008:63) claims that when rejection and isolation are tackled by unconditional love and grace, transformation within the "essence of our very being and human identity occurs."

The theory behind the model is that real healing occurs in human soul when it experiences intimacy. In other words, healing would be experienced by the PLWHA and their families when they are accepted unconditionally and are placed in an environment where they do not encounter the fear of being rejected or stigmatised. From a Christian perspective, Louw (2008:63) acknowledges that when people are faced with the existential threat of anxiety, the fear of being rejected and isolated within the human dynamics and relationality, what they simply need is intimacy. This implies that the basic need of the PLWHA is being accepted unconditionally without any fear of rejection. Additionally, Louw (2008:63) explains that spiritual healing refers to the discovery of the amazing grace of God (1 Cor 15:10) as exhibited in the theology of unconditional love of Jesus Christ.

6.6. Existential threat of guilt and shame

With lack of support systems, PLWHA and their families experience guilt and they are ashamed of their HIV status, which reduces their self-esteem. Merle A. Fossum and Marilyn

J. Mason (1986:5) describe shame as the feeling of being diminished or disgraced as a person. Therefore, when the PLWHA and their families experience the existential threat of guilt and shame associated with their disease, it can be concluded that they feel diminished and disgraced as persons. One major reason why the PLWHA experience shame and guilt is because the HI virus is associated with sexual promiscuity even though it is evident that there are many other ways of contacting the virus other than immorality (cf. Philip 2006:330). Similarly, their family members are made to feel uncomfortable about being related to or associated with them. Our argument is that through the principles of *Ũtugi* that accentuate forgiveness, welcome, encouragement, reconciliation, protection, sharing, restoration, justice and rehabilitation, the PLWHA and their families would be able to shift from their existential position of shame and guilt to a position of freedom and deliverance (liberation). The two arrows in *figure 20* explain this shift of positions.

Figure 20: From an existential position of shame and guilty to a position of freedom and deliverance
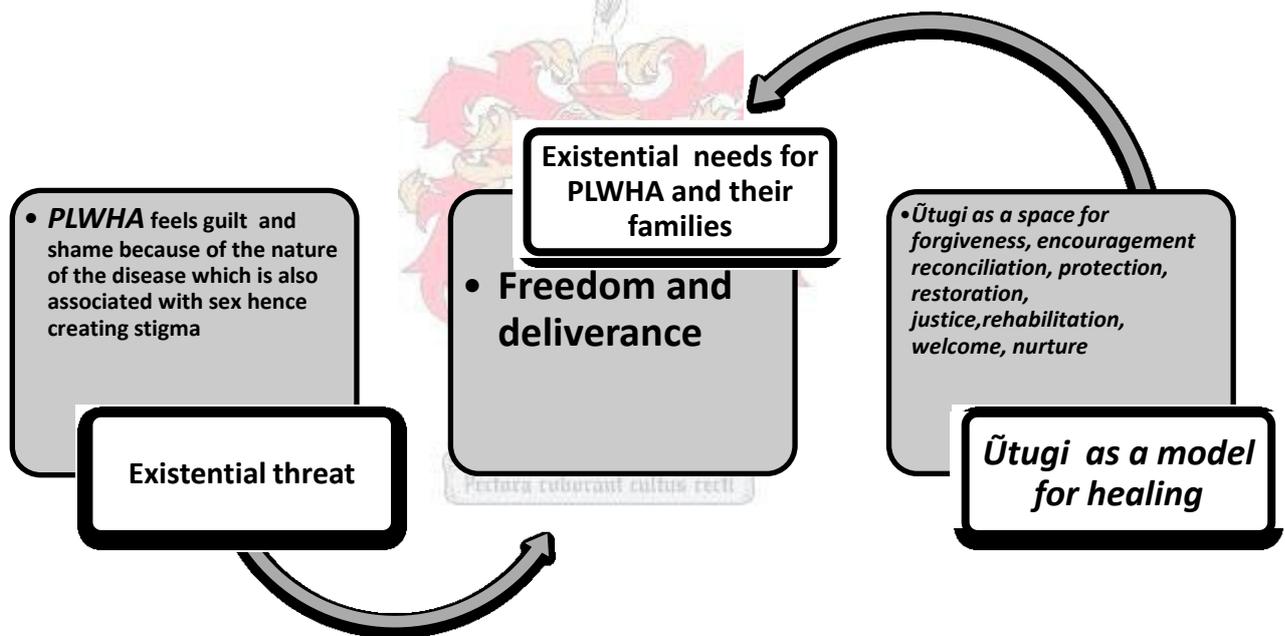
The theory behind such healing is that by being shown forgiveness, nurture, encouragement, reconciliation, protection and welcome as entrenched in *Ũtugi,* the PLWHA would encounter freedom and deliverance and their self-esteem would be regained. From a Christian understanding, Louw (2008:63) asserts that spiritual healing, in this regard, means forgiveness and reconciliation. This is reminiscent of the fact that Jesus forgave all our sins (Col 2:13-14), an act of "God reconciling us to Godself through Christ" (2 Cor 5:18). In other words, when our guilt is totally obliterated, forgiven, and our shame is addressed by

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reinstating or affirming our value before a reconciling God, spiritual healing takes place (Louw 2008:63).

6.7. Existential threat of disillusionment and anger

Obviously, the HIV pandemic has had adverse effects on the social and economic lives of many communities (Kellerman 2000:201). With hunger, insufficient health care, lack of proper and decent housing, as well as lack of formal education, unemployment and minimum wage agreements, the PLWHA and their families face an existential threat of disillusionment, frustration and anger (Kellerman 2000:201; Mwaura 2001:7; Gennrich 2004:16; James 2008:6-14). Anger and disillusionment often constitute an existential threat to the PLWHA and their families. In fact, anyone who feels condemned to death will naturally express anger, against God, the disease, the supposed source of affliction or him/herself (cf. discussion of theodicy 6.12.2.2). Louw (2008:64) explains that anger, as an existential threat, is an expression of frustration impelled by unfulfilled needs such as poverty, unemployment, poor housing and living conditions, violence and crime.

Figure 21: From an existential position of anger and disillusionment to a position of hope and transformation
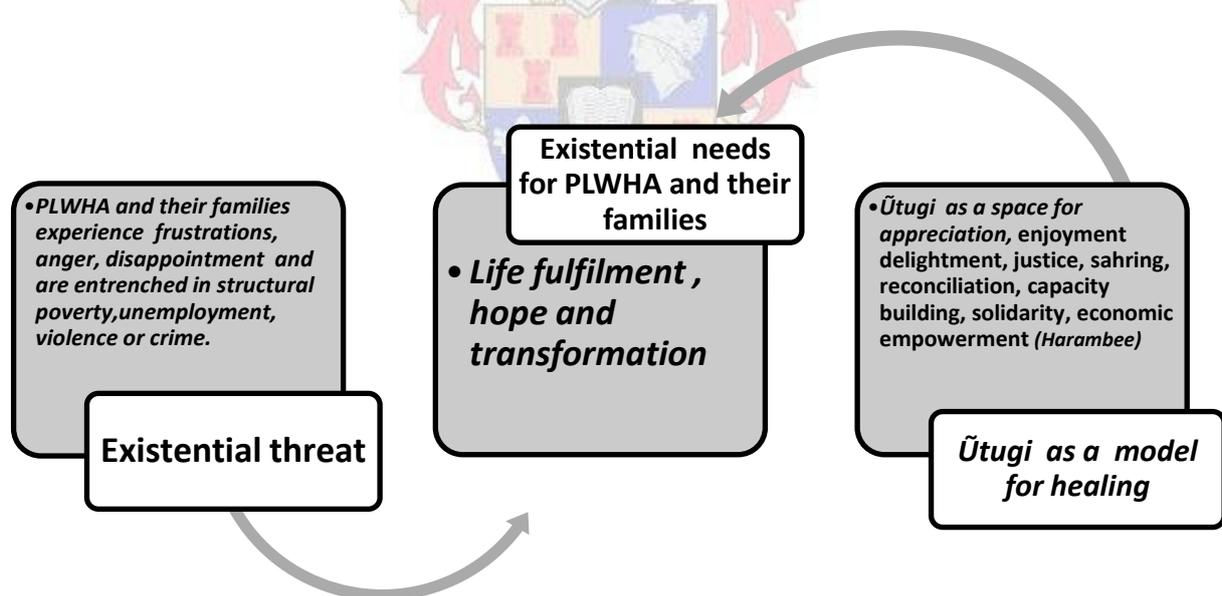
Through the principles of *Ũtugi* that accentuate appreciation, sharing, solidarity, enjoyment, justice, reconciliation, capacity building and socio-economic empowerment *(Harambee)*, PLWHA and their families could be helped to shift from their existential position of anger and disillusionment to a position of life fulfilment, hope and transformation. The two arrows in *figure 21*, demonstrate this shift of positions. The diagram also shows that by meeting their

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basic existential needs through the *Harambee* component of *Ũtugi,* appreciation, sharing, solidarity, enjoyment, delight, justice, reconciliation, capacity building and economic empowerment, hope (*Mwĩhoko)* are offered and suffering is reduced, thereby, facilitating healing. In other words, when *Ũtugi* is used to destroy the dysfunctional structure that dehumanises PLWHA, healing occurs. From the Christian perspective, Louw (2008:64) contends that the spiritual healing is related to the demolishing of dysfunctional systems and the enhancement of human dignity:

> When unfulfilled life needs are met by the transforming power of the gospel through justice and the fulfilled promises of God as revealed in the Biblical text, baptism and the Eucharist, anger can be transformed and healing can occur through the experience of gratitude and joy. This joy becomes visible where the hindrance and dehumanising structures are removed or overcome or transformed or addressed. This is because justice and human rights as represented by the norms, values and ethical framework of the Christian faith. In this regard the guarantee of the faithfulness of God to our being human plays a decisive role. This faithfulness of God is expressed in a very poignant way in the victory of God over the most hampering factor and stumbling block in life: death. "Where, o death is your victory? Where, o death is your sting?" (1 Cor. 15: 55) (Louw 2008:64).

Louw (2008:64) asserts that, in the Christian spiritual care, life fulfilment is indicated by two spiritual categories, that is, gratitude and joy. Louw (2008:64) notes that gratitude is revealed in *eucharistia*, the one that makes us aware that our human identity is established without merit or performance from the side of our being human, the one established and affirmed by the faithfulness of God alone (cf. the grace of God). While joy focuses on the fact that we are charismatic people, gifted and equipped for life through the empowerment of the Holy Spirit.

6.8. Existential threat of despair and doubt

In most cases, PLWHA and their families are faced with existential threats of despair, doubt and depression after encountering the nature and reality of their disease. As discussed already, these existential issues become a challenge, when they realise that every day they have to live with the HI virus in their bodies, and when they realise that the virus will continue to destroy their immune system until, if a vaccine is not found. It will, undoubtedly, overcome their immune system and finally lead to death. This realisation forces the PLWHA to despair and to experience meaninglessness and emptiness in their life, "a life without any destiny and vocation" (Louw 2008:65). It is interesting to note that through the *Ũtugi* component of *Harambee,* the ARVs can be made available to prolong their life and funds can be raised for their medication and kept up (e.g. Home Based Care Programmes). Likewise, with the components of *Ũtugi,* that emphasize togetherness, accommodation, solidarity, inclusiveness, sharing, belongingness, welcome and harmony with *Ngai* (God), ancestors and

the community, the PLWHA and their families can be assisted to shift from their existential position of doubt, despair and meaninglessness to a position of anticipation (hope) and meaning of life, which facilitates healing. This shift of positions is shown by the two arrows in *figure 22*.

Figure 22: From an existential position of doubt and despair to a position of anticipation of hope
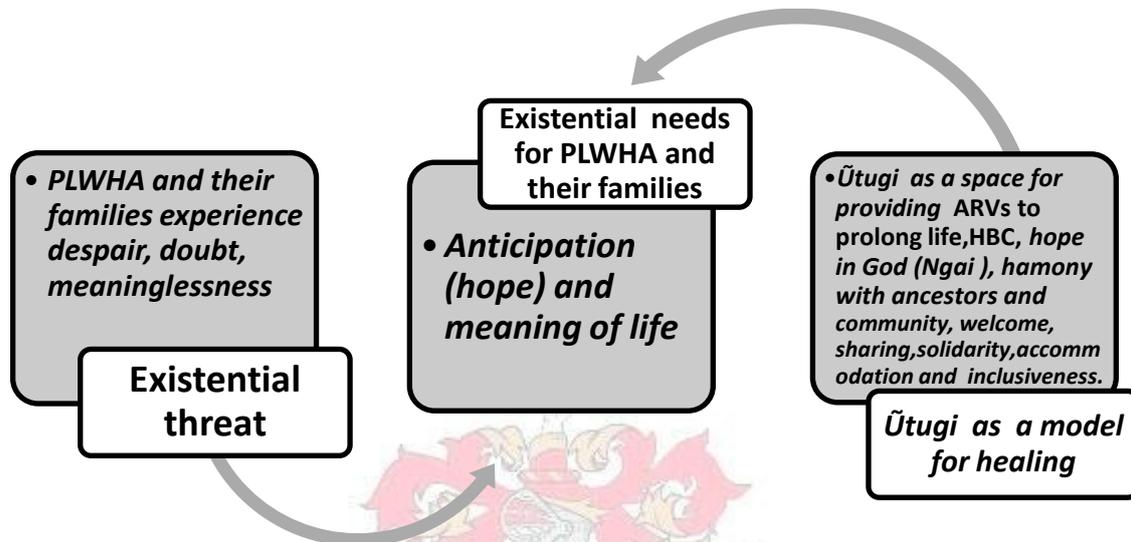
Lartey (2003:26) reminds us that there is a transcendent dimension to life and that power, grace and goodness are often not found in the obvious places. This is because mysteries of life cannot just be reduced to sociological, psychological or physiological analyses and explanations. Therefore, for harmonious life to be experienced by PLWHA and their families in the African context, harmony needs to be established between them and *Ngai*, ancestors and the community, in this case, *Ũtugi* appears to enhance this harmony (cf. Kenyatta 1938:84; Battignole 1984:30; Mugambi 1989a:198; Wachege 1992:6). Louw (2008:66) asserts that when dealing with the stage of despair that leads to meaninglessness and emptiness, a person would need anticipation in hope.

From the Christian perspective, spiritual healing means trusting in the faithfulness of God as stated in Romans 15:13, "May the God of hope fill with all joy and peace as you trust in him, so that you may overflow with hope by the power of the Spirit." As a healing process, the theory behind it is that when doubt and despair are "connected to the eschatological hope as founded by the resurrection of Christ one starts to anticipate the presence of God" and the coming of God's "kingdom", thus, creating hope (Louw 2008:66). Jürgen Moltmann states that:

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> The coming of Christ is looked for to bring the perfection of freedom to the whole of enslaved creation (Rom 8:19). In worship and in the Eucharist men are taken up into this eschatological process of the setting free of the world to be the Kingdom of glory. They celebrate this freedom in eschatological rejoicing and bring it into the world by taking up their crosses. The recollection of the suffering of the crucified rules out a view of the feast as an escape from the painful condition of earthly life... Hope in the risen Christ rules out mere lamentation over this suffering hope or denouncing its causes without joy... Joy at the presence of freedom through reconciliation is thus mixed with pain at the presence of unfreedom and hope of the world's release from it (1977:112-113).

Indeed, if there is an expectation that the current dysfunctional systems are going to be demolished, hope is created for those who are dehumanised by these systems. Again, if the PLWHA and their families anticipate that they will be among the companies of their ancestors and in fellowship with *Ngai*, then they will live in hope. Louw (2008:238) sees hope as a state of being, which "corresponds with the quality of our life and the character of ultimate goal." He also sees hope as that, which "reflects our basic attitudes, disposition and philosophy of life." Indeed, hope touches people's awareness of the future, and makes it impossible to separate the past and the present from the future. Louw (2008:238) maintains that the link between the future and the present are patience, perseverance and endurance; and a mature hope is characterised by an ability to wait. For Cimperman:

> Hope not only gives the vision, it sanctions and sustains the vision. Christian hope tells us what type of vision we have. Hope is also a prime Christian resource of the imagination. Hope point to the *telos* of Christianity and offers a horizon of our expectations in both tangible and non-tangible ways. Hope is the vision that allows us to reshape our reality in particular way. Hope imagines what could be and animates the virtues to bring life what is imagined (2005:45).

In this case, we can argue that when funds are raised through *Ũtugi* to facilitate the availability of ARVS to PLWHA and their families, the anticipation of living a longer life is envisioned (hope). As such, this gesture evokes salvation, for providing ARVS to PLWHA has soteriological significance because the ARVS change the HIV and AIDS pandemic from being death in a short term to the hope of living a little bit longer than anticipated.[300]

6.9. Existential threat of helplessness and vulnerability

As discussed earlier, owing to the long-lasting phases of the HIV and AIDS, the PLWHA and their families find themselves trapped in deprivation. Their income is reduced and even their land or property could be lost or drained by the medical expenses. That is why the PLWHA and their families may find themselves trapped within the clusters of other 'viruses' such as poverty, isolation, powerlessness, stigma, discrimination, physical weakness, violence,

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[300] In the Christian tradition, the saving act of God, which was exhibited in the resurrection of Christ, has been expressed through many different metaphors. It is beyond the scope of this study to explore details of the soteriology in the context of HIV and AIDS, and the role of ARVs as a symbol, image or category in redemption theology.

unemployment, and hunger, etc., and as a result they can experience the existential treat of helplessness and vulnerability (cf. Chambers 1983:113; Louw 2008:146). Our proposition is that, through *Ũtugi,* which gives prominence to sharing, belongingness, fellowship, protection, rehabilitation, compassionate care, togetherness, inclusiveness and socio-economic support (*Harambee*) (cf. Kenyatta 1938:10; Healey and Sybertz 1996:168; Olikenyi 2001:111), the existential threats of helplessness and vulnerability would be overcome, hence, leading to healing.

In other words, the *Ũtugi* paradigm could enable the PLWHA and their families to shift from their existential position of helplessness and vulnerability to a position of support. As such, they shift to a position where their physical needs (food, shelter, medical care and basic needs are provided), and psychological and social needs (being able to speak about their personal experience without being judged, misinterpreted, ridiculed or disputed), are provided. The two arrows in *figure 23* show this shift of positions.

Figure 23: From an existential position of helplessness and vulnerability to a position of support system
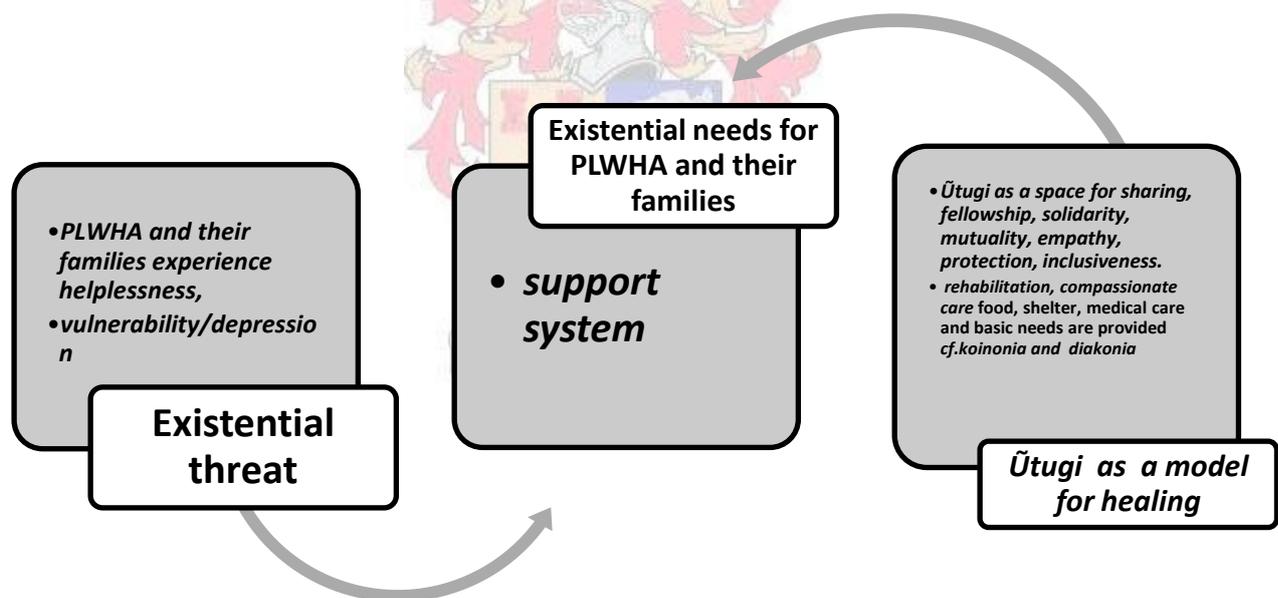
The theory is that by using the *Ũtugi* paradigms that create the space for sharing, solidarity, fellowship, protection, inclusions, compassionate care and socio-economic support (*Harambee*) to the PLWHA and their families, healing occurs. Since the HIV and AIDS pandemic is not only a biological issue, but also a cultural, socio-economic, political, gender and poverty issue, *Ũtugi* paradigm could address it communally, and in the church setting, it could be linked with Christian fellowship *(koinonia)* and *diaconia* (cf. Louw 1994:123). In the Anglican Church of Kenya, this *koinonic* community is called *Mĩaki* (fire/light), *Matũra*

(united gathering in the village), or home churches; and it signifies *Umoja* (oneness). Louw (2008:63) reminds us that people often become emotionally sick after they become victims of dysfunctional socio-economic and political systems. In such a situation, the basic existential need is "a functional and available" but also viable support system. Spiritual healing, in this condition, means the discovery of fellowship of the church as the body of Christ (*koinonia)*, where every part participates in eradicating the sufferings of the other (cf. 1 Cor 12:26; Louw 2008:66).[301]

Figure 24: *Ũtugi* paradigm and support systems
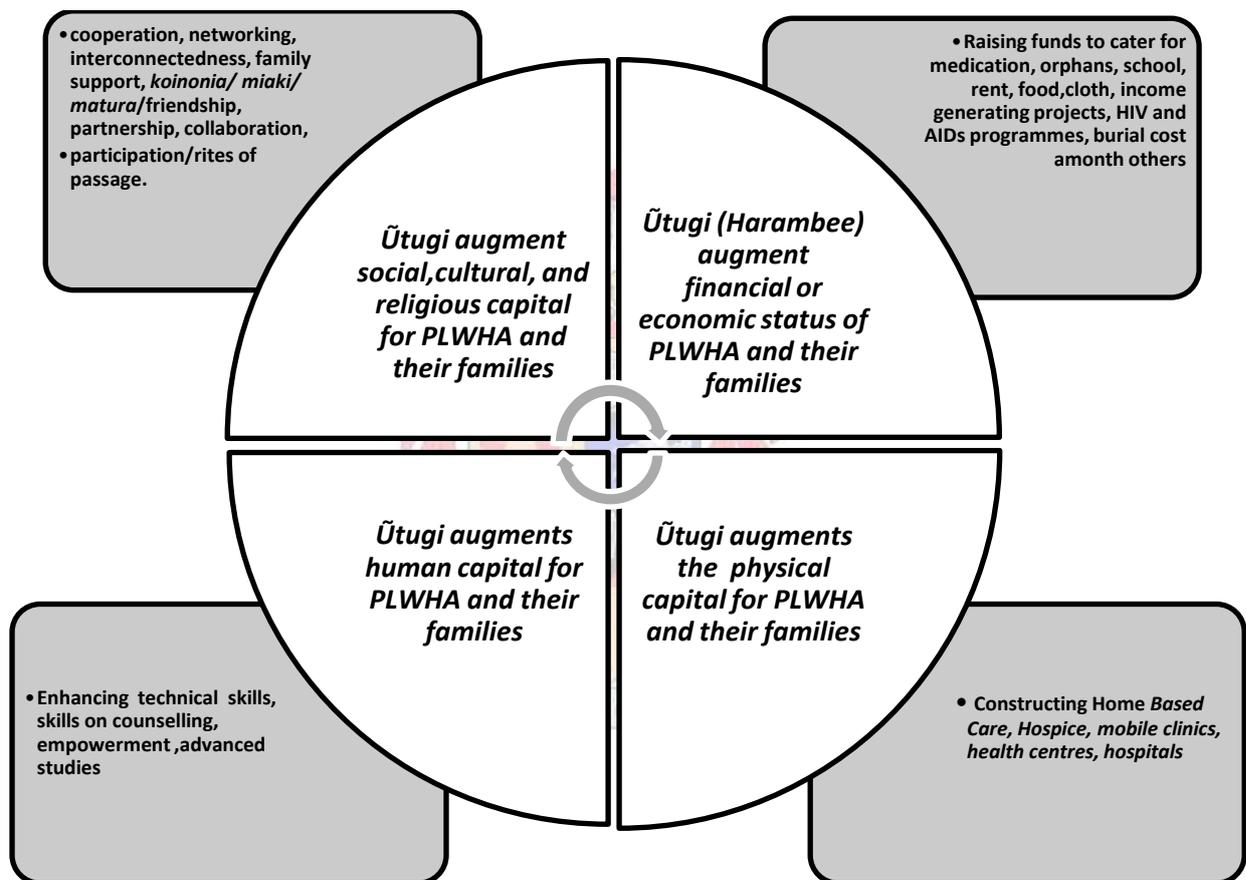
The *figure 24* shows how *Ũtugi* paradigm can provide the PLWHA and their families with support system. Here, the helplessness and vulnerability of the PLWHA and their families are connected to the concreteness of *diakonia* and *koinonia*. The *figure 24* also demonstrates how each basic component of *Ũtugi* can augment socio-economic and spiritual life of the PLWHA

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[301] Louw (1994:134) suggests that the church begin a buddy model, which means gathering PLWHA into groups where they are encouraged to become involved with society and their education processes. They should also be encouraged to start care groups, which could take over their basic needs during their terminal state. On the *diaconia* level, the church will have to educate, support and aid groups with a view of caring for PLWHA in their vicinity or area. That way, the HIV and AIDS pandemic becomes "an opportunity to demonstrate anew the authenticity of the church's charitable service and the credibility of Christian neighbourly love" (Louw 1994:134).

and their families. Therefore, within this interconnectedness and connectedness, the PLWHA and their families experience gratitude, joy and hope. Certainly, if this experience is linked to the ecclesiological praxis of the church, it can definitely offer holistic healing to the PLWHA and their families. Since the Agĩkũyũ worldview is manifested within the paradigm of *Ũtugi*, the concept of healing and sickness could be regarded as part of a system thinking, which is an inclusive process of relationships and interactions (cf. Louw 1998:73). According to Augsburger:

> [A] system is a structure in process; it is, a pattern of elements undergoing patterned events. The human person is a set of elements undergoing multiple processes in cyclical patterns as a coherent system. Thus, a system is a structure of elements related by various processes that are all interrelated and interdependent (as cited in Louw 1998:73-74).

Thus, in the systemic paradigm, an individual is part of whole rather than a whole consisting of parts. The *Ũtugi* paradigm can work well with the systemic paradigm because it enhances relationships and interactions within the community and with nature. The strength of the *Ũtugi* paradigm is that a person within the system is not viewed in isolation but within a network of relationships. For everything that exists is in progress according to mutual relationship with everything else (see *figure 24*). Louw (1998:78) is of the view that, in system thinking, the pastoral care should not only take note of the individual but the position that a person holds within a relationship. Therefore, within a systemic network, components do not function according to their "nature" but according to "their position in the network" (Louw 2005:7).

In this way, when we apply the system theory to church dynamics, then we see the church as a system within a community. Therefore, in the body of Christ, the family of God and the *koinonic* community, the quality of life of the PLWHA and their families will improve because others are there with them - hence, the idea of *being there*. In other words, the church "functions in the here and now is eventually connected to our being there - *beyondness*" (Louw 2005:5). Since the Anglican Church of Kenya is found throughout the country, from rural to urban areas, and has connections to the rest of the world, she is capable of soliciting local and international resources to enhance socio-economic and spiritual transformation of the PLWHA and their families.

Hence, the church's physical and spiritual resources give her a hedge over NGOs in Kenya and, therefore, she is capable of linking the PLWHA with the local and global *koinonic*

system in which they can experience unconditional love, acceptance, care, nurture and empowerment. As we have seen in Chapter Five, *Ũtugi* could enable the Anglican Church of Kenya to provide an environment where the PLWHA could find a space for healing. Since church worship or meetings are embedded in the family system, which is made up of *Riika* (age set), *Mbarĩ* (families) and *Mũhĩrĩga* (clans)*,* the Anglican Church of Kenya, therefore, could utilise and exploit the existing *Ũtugi* principles to promote network relationships as a way of creating space for healing. For instance, the whole congregation can be involved in the care for the PLWHA and their families by feeding them spiritually (through communal Bible reading, songs and prayers), as well as physically (by providing nutritional food and celebrating Holy Communion;[302] cf. *Agape*). This could take place in their home or in their support groups. Such an act can remove fear, stigma and the feeling of being unwanted associated with the PLWHA and their families. In other words, the act could be seen as a journey with the PLWHA and their families, as in the Exodus narrative in which the Israelites were accompanied by God who was present in their struggles as they strove to dismantle structures, policies and practices, which adversely affected their lives.

Therefore, the principles of *Ũtugi* could enable the PLWHA and their families to participate in their liberation of dismantling socio-economic, political and religious structures that dehumanise them. Through the *Ũtugi* paradigm, the Anglican Church of Kenya could become a safer space where the PLWHA and their families would feel free, protected, cared for, accommodated, appreciated and unconditionally loved; this is crucial to their healing, integrity and dignity. In the next section, we shall examine the four basic anthropological components that could enable pastoral care givers to use *Ũtugi* paradigm effectively in their pastoral strategy. In fact, these anthropological components are crucial in the construction of a praxis theory for pastoral care and counselling based on *Ũtugi*. This is because the suffering that PLWHA and their families undergo forces them to raise the issue of meaning and to challenge their humanity and belief systems, thus, making pastoral anthropology imperative in the pastoral care and counselling to the PLWHA in the African context.

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[302] The Holy Communion can guarantee God's faithfulness to PLWHA and their families so that their faith becomes strengthened even when they are suffering. Louw (2008:89) explains that the Holy Communion "creates security and provides new visions and hope: patients can, via the sacrament, direct themselves anew to the future. Through Holy Communion, the sick person anticipates the dimension of victory, which brings profound peace and joy; the taste of victory in bread and wine brings hitherto unknown rest. In short, the total dimension of renewal and transcendence makes Holy Communion a vital instrument of comfort and reconciliation. Should pastoral care really wish to bring about healing, then this sacrament cannot be withheld from the sickbed."

6.10. Importance of pastoral anthropology in pastoral care and counselling

Pastoral anthropology centres on realism and attempts to interpret the human quest for meaning through the perspective of the grace and love of God (Louw 1999:140). According to Louw (1999:56), the goal of pastoral anthropology is to understand human beings hermeneutically. This means that it attempts to interpret human beings as they relate to themselves and God. It focuses on those scriptural perspectives, which instil meaning in order to help people to discover their true humanity before God as they struggle to cope with their painful life situation (Louw 1998:140; 2000:9). Louw (2005:9) further claims that the fabric of being human defines the identity and intentions of humanity. He assumes that the human soul can be reinterpreted qualitatively, thus, determining the human quest for meaning and dignity. This implies that the quest for meaning challenges the human belief systems, moral action and faith intention. For instance, the meaning, in the context of HIV and AIDS pandemic, and the suffering associated with it can have a direct bearing on the very fabric of the lives of the PLWHA and their families, thus, determining the quality of their behaviours. What this means is that, the existence or absence of suffering in the life of the PLWHA will depend on the four anthropological features: (a) their dispositions, (b) their attitudes towards life, (c) their degree of maturity, and (d) the nature of their affliction (Louw 2008:22).

As noted above, human suffering does not exclude meaning and hope. Viktor Emil Frankl has demonstrated the value of meaning in the context of existential threat. He affirms that, "meaning is possible even in spite of suffering, provided that the suffering is unavoidable" (Frankl 1984:136).[303] By finding meaning, it is possible to counteract psychological diseases, which are caused by the existential vacuum, as well as boredom. Frankl (1984:70) claims that finding meaning is only possible by incorporating experiential, creative and attitudinal values, for "once the angel in us is repressed, he turns into a demon." He insists that attitudinal values can only be developed by personal suffering, for at the bottom of the existential threat values are transcendent (Frankl 1984:70). Only our acknowledgment of

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[303] Viktor Emil Frankl was born in Vienna on March 26, 1905. He studied medicine in 1930, and was put in charge of a ward for the treatment of female suicide candidates. When the Nazis seized power in 1938, Frankl was transferred to the neurological department of the Rothschild Hospital, the only Jewish hospital in the early Nazi years. However, in 1942, he and his parents were deported to the Theresienstad concentration camp near Prague. Frankl survived the Holocaust, even though he was in four Nazi death camps including Auschwitz from 1942 to 1945. As a long-time prisoner in bestial concentration camps, Frankl found himself stripped of existence. His parents, brother, and wife were killed in camps or were sent to gas ovens, so that, except for his sister, his entire family perished in those camps. Even in the degradation and abject misery of a concentration camp, Frankl was able to exercise the most important freedom of all - the freedom to determine his own attitude and spiritual well-being. No sadistic Nazi SS guard was able to take that away from him or control the inner-life of his soul. One of the ways he found the strength to fight to stay alive and not lose hope was to think of his wife. Frankl clearly saw that it was those who had nothing to live for who died quickest in the concentration camp. As a result, he developed a revolutionary approach to psychotherapy known as logotherapy. At the core of his theory is the belief that humanity's primary motivational force is the search for meaning, and the work of the logotherapist centres on helping the patient find personal meaning in life, however, dismal the circumstances may be.

God's transcendence can bring us to *suprameaning* (and personal well-being), and turning away from God is the ultimate source of pathological human conditions. He states that meaning could be realised in three ways: (a) by creating the work or doing some work; (b) by experiencing something or encountering someone; and (c) by our attitude towards unavoidable suffering. Thus, it is possible for human beings to find meaning in life even when confronted with a hopeless situation (Frankl 1984:70). This is because human beings are capable of defying and braving even the worst conditions conceivable, for in their lives, there is: (a) love for one's children to tie to, (b) a talent to be used, and (c) lingering memories worth preserving.

Therefore, constructing a praxis theory for pastoral care and counselling to the PLWHA and their families should be aimed at helping them to cope with their suffering, for this affects their humanity as well as their spirituality. In other words, suffering affects their disposition, attitude, norms and values, thus, challenging their philosophy of life as they search for meaning in their suffering. Our position in this study is that the paradigm of *Ũtugi* can play a decisive role in helping the PLWHA and their families to put meaning into their suffering and also to facilitate trust when they encounter hopelessness (see figure 25).

Figure 25: The four anthropological component of *Ũtugi* model for healing

STAGE ONE:AFFECTIVE.

Purpose: Build contact (trust) self-insight, self-disclosure.

Human function:Experience.

Responses: Welcome,homeliness, embracement, empathy,love, support, probing, connectedness, belongingness interaction.

STAGE TWO: COGNITIVE

Purpose: Problem analysis, paraphrasing, integration of information, development of perspective

Human function: Reflection, meditation, analysis, evaluation, identification and outlining the problem

Responses: Interpretation, diagnosis, questioning, deconstruction of oppressive narratives,cultural Gods image , theodicy, dreams, Taboos

Ũtugi as a model for healing

STAGE FOUR: NORMATIVE

Organic use of scripture, discovery of meaning, awakening of hope, maturity in faith

Human function.Believing, Hoping, meaning

Responses: Edification (faith) spiritual care, empowerment, symbols,love, support, nurture

STAGE THREE: CONATIVE

Purpose: Responsible behaviour, decision making, goal setting, program design

Human function: Decision, action.

Responses: Challenging, Confrontation information,empathy, support systems

As we have already seen, *Ũtugi* as a holistic model for healing could enable the PLWHA and their families to continue living meaningfully (with support systems) even when they are living in the shadow of the valley of death. For this reason, it is important for pastoral care givers to consider the following four basic components of anthropology when constructing a praxis theory based on the *Ũtugi* paradigm. This includes the (a) *affective,* (b) *cognitive*, (c) *conative* and (d) *normative* stages as shown in *figure 25*. These anthropological components are related to the four basic human functions of life namely the experience *(affective)*, the reflection *(cognitive)*, the responsible doing *(conative)* and the beliefs or impact of meaning *(normative)* (cf. Louw 1998:352). In this case, a pastoral intervention would mean looking beyond the framework of cause and effect. Johnson affirms that, "The aim of counselling with the HIV positive individual is therefore to focus on life beyond the infection and not to dwell unnecessarily on the constraints of the disease" (as cited in Van Dyk 2008:220). Therefore, what follows is a discussion on how each of the above anthropological components can function within the *Ũtugi* model and how it can facilitate the healing of the PLWHA and their families. However, it should be noted that even though each component will be discussed separately, the model assumes that each component interrelate with the others, organically, to build an interactive process. These are areas of concern to pastoral care givers intending to use *Ũtugi* as a model for healing. The discussion will also highlight cultural factors that will be deemed important in equipping pastoral care givers to formulate relevant interventions to the PLWHA.

6.11. Affective component: Quest for a home and embracement

The first anthropological stage is the *affective component* (see *figure 25*). This is where the counselling should start, for this component is aimed at building relationship of trust. Definitely, the first characteristic feature of *Ũtugi* includes welcoming, receiving, reception and embracement of one another, which symbolise friendship, closeness, affection and togetherness. In other words, these elements of *Ũtugi* symbolise friendship, peaceful encounter and express humility and respect, which are an integral part of the African life (cf. Olikenyi 2001:111).

6.11.1. Quest for homeliness

In the practice of *Ũtugi,* it is only when the visitors are greeted and served with food and drinks that they could be asked about their names and the host could attend to their problems. During this time, the host would abandon every other undertaking in the house in order to pay

attention to the guest by making him or her to "feel at home"[304], and enjoy a friendly conversation (Moila 2002:2a; cf. Healey and Sybertz 1996:173). This element of *Ũtugi* can help us to understand how the anthropological *affective* component is linked to *Ũtugi* as a model for healing. Louw (1998:356) points out that in all counselling, the clients need to feel that the pastoral care givers are serious and that they understand them. In fact, like all other clients, PLWHA come for pastoral counselling when they are experiencing difficulties or problems in their lives. In this case, they would like to be in a space where they are welcomed, received and hugged and where their pain and struggle in life are understood. In other words, they would like to be in a space and place they can call a home *(Mũciĩ)* (cf. *oikos, Nyũmba, Thingira)*.

As a place and space where *Ũtugi* is practiced, *Mũciĩ* (see *Nyũmba, Thingira)* can be linked to a theology of home *(oikos)*. *Oikotheology* is well articulated by Andrew Warmback. Warmback (2008:169) notes that the English words "ecology" and "economy" as well as "ecumenical" are derived from the Greek word *oikos,* which simply means home or household. Using the *oikos* metaphor in his theological constructions, Warmback (2008:169) describes the relationship between economic and environmental factors and shows that the word "ecology" is concerned literally with "the home and the logic of the home" (*oikos-logos*). He sees the whole world as the house of God and argues that the resources that come from the earth (our home) should be used to improve our economy as we continue enhancing and respecting the systems that sustain life and *oikos* (earth).

Warmback (2008:169) argues that the study of "economics" can literally be construed as the rule of the household (*oikos-nomos*), while the word *nomos* simply means the rule of the household (home). Thus, God is seen as the *oikonomos* because God is the ruler of the household (earth) and all the members of the household should be made to "feel at home" when they have enough resources to sustain them as well as sustaining the earth (home). The term "homeliness", from the pastoral perspective, therefore, could be interpreted as belonging to *oikos,* to "belong to a home" or to "feel at home." In other words, it is being in a space

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[304] Brandt and Lukinovich (cited in Trainor 2001:8) note that *oikia* is the place of welcome for the journey and oikos the actual building and space. Other frequent expressions in the New Testament, which have *oikos/oikia* as their root include *oikodomeo* (to build a house, used 38 times); *oikodomeo* (the act of building, used 34 times); *oikodespotes* (master of the house, used 12 times); *oikonomos* (managing a household or family, used 10 times); *oikoumene* (the world, used 15 times); *oikonomia* (household management, used 9 times); and *oiketes* (inmate of a house, used 4 times).

where the gesture of friendship, closeness, affection, belongingness and togetherness reign. Such a space makes a person feel loved or wanted (Warmback 2008:169).

From the perspective of *Oikotheology*, the love of self and neighbours is extended to the earth (our neighbour and the *oikos*). Likewise, the earth, as *oikos,* is revered as a place of God's epiphany and its resources are respected not only for what they can provide for humanity but also for their inherent value (Warmback 2008:80). This implies that our home (the earth) should supply resources for human needs such as food, clothing and housing and it should be seen as much more than an object of human management. It is from this context that Warmback (2008:173) suggests that the alternative to poverty is not property, but a community of care. He is of the view that togetherness and solidarity within the community enable the poorest (vulnerable) to find a place they can call a home, for a community is saturated with "the wealth of friendship and gifts of neighbours" (Warmback (2008:173).

Seen from this angle, the notion of *oikos,* therefore, could be linked with the concept of *Ũtugi* that challenges oppressive systems unconditionally welcomes and loves those despised or discriminated against, as in the case of the PLWHA and their families. As in the case of *Nyũmba, Thingira* or *Mũciĩ,* where the vulnerable are welcomed, the PLWHA should be provided with an environment (systems that sustain life) that is conducive, where they are made not only to "feel at home" but also to be a part of the caring community (household) (cf. Kenyatta 1938:4, 10, 26, 46, 59). Mugambi (1992:63) observes that it was in the *Mũciĩ* a person used to get a sense of belongingness and acceptance because of the love and care shown by parents, brothers, sister, cousins and other members of the family. Moreover, if the *Mũciĩ* was not stable, the person would find it very difficult to develop a stable personality. This is because the *Mũciĩ* was intended to be a space and a place for love, care and understanding, and lack of these essential components created sickness and pathology.

Therefore*,* the *affective* stage in pastoral anthropology assumes that the pastoral care givers should ensure the sense of belongingness ("feeling at home") and care when PLWHA and their families come for counselling. This can be done by establishing an empathetic space and creating an environment where rapport can take place, for only in such an environment could the PLWHA "feel at home" and only in such a situation are they able to share their narratives without feeling judged. It also means that pastoral care givers should actively listen to the narratives of the PLWHA. In other words, pastoral care givers should pay attention to

listening, probing or questioning, clarification, reflecting, commenting, summarizing, integrating, enhancing communication skills, use of silence and immediacy. Maria Cimperman asserts that:

> Narratives necessitate presence marked by a deep and embodied listening and sharing. When we invite a guest to share her story, we must be present in all possible ways to the person. In telling her story, the quest is offering us a part of her identity. In the sharing her identity intertwines with ours; she becomes a member of our community and we a part of her community... As embodied persons we strive to open all of our senses as we hear and feel the narrative, a story that may include suffering and loss as well as survival and triumph over adversity (2005:78).

In addition to the above, pastoral care givers should draw together information about the PLWHA's ways of life, ages, extended families (family support system), clan, or villages. Similarly, they should be attentive to the PLWHA's narratives and connect them with their experience and worldview. Pastoral care givers should create trust with the PLWHA and keep confidentiality, for this is in line with the principles of *Ũtugi* as demonstrated in *Thingira,* where confidentiality and trust are upheld. This would be in line with the saying, *Ikwario Thingira itirehagwo Nyũmba* (whatever is talked or decided in *Thingira - counselling room -* is never spoken everywhere) (cf. Wachege 1992:67). This is important particularly when counselling the PLWHA and their families who have undergone rejection or stigmatisation.

Further, pastoral care givers should pay attention to every detail of body language, attitude and other gestures of the PLWHA when they share their narratives. This should help them to have an idea of their emotional state and personality and their willingness to discuss their problems. For instance, like other clients in the African context, the majority of the PLWHA, who present themselves for counselling, may be hesitant or may be unable to articulate their problems effectively because they prefer to use non-verbal communication. This is true especially of the Agĩkũyũ people who do not look directly at their senior in the eye; to do so is interpreted as disrespect, hence, they prefer non-verbal communication when discussing with their *Anene (*seniors) (Wachege 1992:17-29; cf. Kenyatta 1938:130-187; Muriuki 1974:124).

In fact, during the counselling sessions with the PLWHA, some specific personal traits may emerge. Louw (1998:356) affirms that a strong aggressive person will reveal hostility and be inclined to attack and may be critical. Likewise, a person who has often experienced disappointments will act with extreme caution and communicate suspicion. It is also known that with people who are obsessed with success, ambitiousness is very strongly associated,

and with people who have formed strong bonds, extreme dependence on parents or figures of authority is noticeable. People with an authoritarian attitude are also said to have developed "an autonomous self, while those who often make use of self-defence mechanisms (e.g. projection) reveal an apathetic self. These tendencies are significant because they often influence the person's relationship with God" (Louw 1998:356). Therefore, it is vital for pastoral care givers to understand the emotional and personality traits of the PLWHA. Louw (1998:356) asserts that understanding the feelings of the client creates comprehension and clarity, which eventually result in building a relation of trust. Certainly, it is only in the atmosphere of trust that the PLWHA can be encouraged to disclose and release themselves and enter a process of healing.

6.11.2. Quest for embracement

The *affective* stage also entails the building of relationships and embracement (see figure 25). These two elements are important in pastoral care and counselling of the PLWHA. Louw (2008:33) says that, "embracement gives space for creating the atmosphere of intimacy: unconditional love and regard", for it "is an act of human affirmation." As already seen, the paradigm of *Ũtugi* could provide such a space for embracement and affirmation. In fact, one of the characteristic features of *Ũtugi* is that the host *(Mwene Mũcii)* is required to embrace the visitors *(Mũgeni)*. Therefore, when using the *Ũtugi* model in counselling, pastoral care givers should be ready to not only embrace the narratives of the PLWHA but also embrace what is communicated through gestures. Cimperman (2005:78) contends that through the embrace of the clients' narratives, a transformative spirit emerges in this kind of sharing. By listening to the narratives of the PLWHA, the pastoral care givers are able to build relationships and connections occur. Even though the PLWHA may be suffering, their narratives could potentially become "good news", for the embrace and sharing would signify that their stories are heard and embraced. Cimperman (2005:78) believes that great freedom can emerge when clients' narrate their stories of pain, and Lartey (2003: 90) provides helpful steps that need to be followed when embracing the narratives of a client:

> A first step in listening, then is allowing oneself to be with another person and to be completely silent with them. Silence not only with one's lips but also in one's inner response-neither agreeing nor disagreeing with what they have to say. Listening openly and permitting the other person to be what they are, freely, without controlling, coercing or censoring what they say. This clearly is a skill which has to be developed and is very much more complex than the 'just listening' of everyday conversation.

Therefore, when the pastoral care givers embrace the narratives of the PLWHA and listen to them, they would simply be creating a space for healing. Miroslav Volf's *four acts in the drama of embrace* is helpful to our understanding of the value and meaning of embracement of the PLWHA and their families, a gesture which is well exhibited in the practice of *Ũtugi* and is good for creating rapport and the right environment for the narratives (cf. 3.3). As the first act in the drama of embrace, Volf (1996:40) says that (a) an embrace starts with the opening of one's arms to another, hence, creating a space for a person to feel welcomed. For this reason, the interest of that other is acknowledged and each person stands vulnerable before another. As such, one is prepared for a moment to move beyond him or herself and according to Volf (1996: 40-47), this is an open invitation. It is simply creating space for one another to enter into one's space and open arms are gesture of this welcome or invitation (Volf 1996:141; cf. 3.3).

(b) The second act in Volf's (1996:40) drama of embrace is *"waiting."* He says that we cannot force an embrace because embrace takes place when one is willing to accept the embrace of the "other" and his or her aspiration to do so. Therefore, there must be a waiting for the other so that the feeling of appreciation can be created. (c) In the third act, a person closes the arm. Volf (1996:143) notes that the goal of the embrace is achieved when the arm is closed, and this is a reciprocal relationship. (d) Volf (1996:143) sees the final stage of the act as the opening of arms again. He claims that this opening of arms is necessary in order for the embrace not to cancel itself and it also enables the one embracing to let it go. Volf (1996:144,145) contends that, "the other must be let go so that her alterity, her genuine, dynamic identity may be preserved and the self must take back into itself so that its own identity, enriched by the traces that the presence of the other has left, may be preserved."

Volf's understanding of embrace is in line with the theology of the Cross, in which Christ embraced humanity, hence, opening a space for welcome to all those who are suffering and are in need of forgiveness (cf. Moltmann 1973:24). Therefore, when counselling the PLWHA, the concept of *Ũtugi* could help the pastoral care givers to realise that they have equal dignity with their clients. In other words, the reciprocity within the relationship could enable the pastoral care givers to know the meaning of being a client or what it means to be vulnerable and in the alien world of suffering (cf. Ogletree 1985:4). This is important at this stage because when the pastoral care givers allow the PLWHA to share their stories they are allowing them to enter into their space while they also enter theirs. As a result, this stage

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becomes a shared space where the PLWHA narratives of pain and suffering are heard. What transforms a praxis theory of pastoral care and counselling to the PLWHA and their families are the elements of *Ũtugi* such as love, appreciation, nurture, protection, accommodation, restoration, justice, encouragement, welcome, host, share, reconcile, accommodate, capacity building, rehabilitation, togetherness and inclusiveness.

The *Ũtugi* model suggests recognition of each person's otherness within the framework of community. It is interesting that the *Ũtugi* ingredients of welcome and reception resonate with Volf's act of embrace in which space is created for invitation, appreciation and love, thereby, space is created for the PLWHA and their counsellors to enter into one another's space. In this case, waiting is seen as signifying attentive listening to the stories of the PLWHA, embrace is seen as signifying the counsellors' presence, while opening of arms is seen as signifying "letting go" - a sign of journeying with PLWHA in their suffering and pain to the end of their journey (death). It also means offering the PLWHA shoulders on which to cry.

It is no wonder, therefore, that Carl Rogers (1961) recognised the value of embrace in counselling. Although he was greatly influenced by the humanistic philosophy of his time, he was able to surpass it by acknowledging that embracement and unconditional positive regard could contribute to healing. Rogers (1961:4) claims that the personality can be fully actualised when an individual is exposed to unconditional positive regard. The person who is being exposed to conditional positive regard may have had low self-esteem and low feelings of worth (Rogers 1961:4). However, a person who is self-actualised will be more open to experience and less defensive; he would learn to live in the moment, trust his own decision-making skills, have more life choices and become more creative (Rogers 1961:5). Rogers claims that it is after a client is exposed to the above conditions that healing can occur.[305]

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[305] The techniques used in Person-Centred Therapy (PCT) are different from those employed in other therapies. Seligman (2006:4) claims that other therapies often focus on something that the client can do during the therapy session, but in the person-centred therapy, the therapist attempts to create an environment that facilitates the process of self-awareness. This environment includes congruence, unconditional positive regard and acceptance, empathy, and reflection of feelings. (a) *Congruence:* It refers to whether or not the therapist is genuine and authentic in whatever s/he says or do. It is assumed that if the therapist is saying one thing but the body language is reflective of something else, the client is aware of this, and this can impact on his/her trust and openness in the therapeutic relationship (Seligman 2006:4). In congruence, a major role of the therapist is to be aware of his/her body language and statement or action. When there is confusion, the therapist is supposed to address that confusion with the client. (b) *Unconditional positive regard* (Rogers 1961:6; George and Cristiani 1995:90): According to Seligman (2006:5), this refers to the therapist's acceptance, respect and care for clients. This does not mean that the therapist agrees with everything said or done by the client, although the therapist should see the client as doing the best s/he can and demonstrate this by expressing concern rather than disagreeing with him or her. Unconditional positive regard allows clients to express their thoughts without feeling judged, and helps to facilitate the change process by showing they can be accepted. (c) *Empathy*: This is a skill used by person-centred therapists to show understanding of the clients' emotions. Seligman (2006:7) says that "empathy is different from sympathy in that sympathy is often seen as feeling sorry for the client whereas empathy shows understanding and allows the client to further open up." As a therapeutic model, the person-centred model is non-directive, for it allows the clients to be the focus of the therapy session

The goal of his healing model includes facilitating the client's trust and ability to be in the present moment. This allows the client to be honest in the process without feeling judged by the counsellor, promoting the client's self-awareness and self-esteem, empowering the client to change, encouraging congruence in the client's behaviour and feelings and, finally, helping people to gain the ability to manage their lives and become self-actualised (Seligman 2006:4).

6.12. Cognitive component: Deconstruction, socio-economic, cultural and spiritual diagnosis

The second anthropological stage is a cognitive component, which involves reflection and meditation on, as well as the analysis, evaluation, identification and outlining of the problems (see *figure25*). Since this stage is concerned with the person's thinking, then deconstruction of ideas and concepts occur here.

### 6.12.1. Deconstruction of the oppressive narratives

In the *Ũtugi* paradigm, *Kĩrĩra Kĩa Mũciĩ* could be used to change people's attitudes, provide skills and sustain the motivation necessary for changing behaviour to reduce their risk and vulnerability (Wanjohi 2001:21). Therefore, when developing *Ũtugi as a model* for healing, the African notion of healing and sickness needs to be put into consideration, particularly in the diagnosis process. According to Louw (2008:77), pastoral care needs to probe into the "noetic dimension and schemata of interpretation", which dominate the domain of faith and which can lead to either spiritual health (appropriateness of spiritual schemata of interpretation) or spiritual pathology (inappropriateness). Pastoral care givers with the understanding of African notion of healing and sickness could help the PLWHA to deconstruct their existing concepts or ideas that are inappropriate or pathological. In their pastoral strategy, they need to focus on the five dimensions of diagnosis, which include (a) the personal/psychological, (b) financial/economic (c) religious/ cultural, (d) physical and (e) social dimension (see *figure 26 below*). As one of the elements of *Ũtugi,* the *Kĩrĩra Kĩa Mũciĩ* could play a decisive role in addressing cognitive matters. Consequently, the pastoral care givers should use *Kĩrĩra Kĩa Mũciĩ* to evaluate the thought contents of the PLWHA before deconstructing the irrational ones. For Louw:

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without the therapist giving advice or implementing strategies or activities. On the other hand, the person-centred model can be used with individuals, groups or families (Corey 2005:6). It can also be used to treat anxiety disorders, alcoholism, psychosomatic problems, agoraphobia, interpersonal difficulties, depression, and personality disorders (Corsini and Wedding 2000:50).

> Sickness and pathology then refers to ideologies, destructive paradigms, dysfunctional systems, negative frameworks and patterns of thinking, the hosting of prejudice and fixed presuppositions which hide and protect norms and values that are harmful to our being human. Within the dynamics of human relationships, exist 'several systemic diseases' and 'social viruses.' On the other hand, health relationships and wise thinking can indeed contribute to cure and the healing of life (2008:118).

What this means is that ideologies, destructive paradigms, dysfunctional systems, negative frameworks and patterns of thinking, the hosting of prejudice and fixed presuppositions contribute to sickness and pathology. It also implies that for healing to occur, all the inappropriate concepts or ideas, which culminate in pathology or spiritual infirmities should be deconstructed or refuted.

Figure 26: *Ũtugi* as a model for healing: The five dimensions of diagnosis of PLWHA
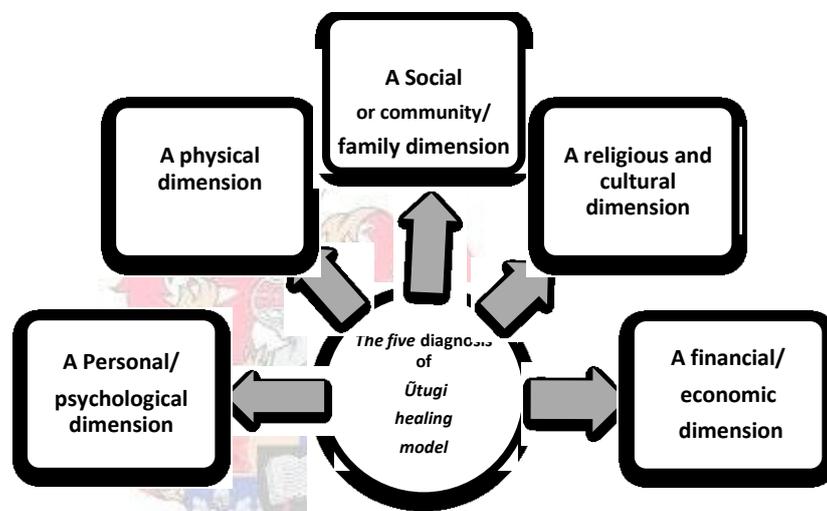
Our position is that the pastoral care givers could use *Kĩrĩra Kĩa Mũciĩ* to deconstruct inappropriate concepts in order to facilitate healing. It is noted that when the PLWHA consult pastoral care givers they often begin by relating their stories, which may consist of many painful events they have experienced with which they may like to be helped. In narrating these stories, they may also explicate the meanings they have given to these events. The stories are presented in a certain version, and it becomes crucial for pastoral care givers to be aware of these stories for they may contain more liberating aspects of their living than others, while others may be accorded a dominant position among the different stories. In most cases, the dominant stories are normally "problem-saturated" (pathological) and they are selected from the client's experience. This implies that they are influenced by the client's worldview. The *figure 27* illustrates how the worldview and experience of the PLWHA may influence the nature of the narrative that they present to the counsellor. According to Raskin (2002:4), dominant stories are informed by religious (worldview), cultural, political, historical,

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economic realities. They are influenced by the experience of the client and that is how they author their stories.

Figure 27: The influence of the client worldview

The PLWHA's worldview influencing stories
(Religious believes)

The PLWHA's experience of life influencing stories
(socio-economic and political impact)

The PLWHA's dominant stories that creates pathology
(problem saturated stories)
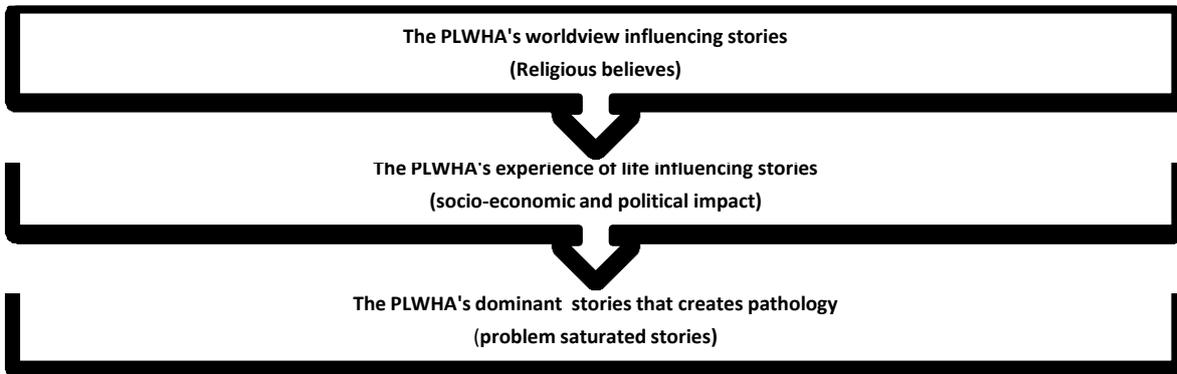
When listening to the PLWHA's narratives, the pastoral care givers should realise that they are informed by their religious worldview and influenced possibly by their cultural, social, political or economic context (*figure 27*; cf. Monk 1997:4). Therefore, the religious worldview and the cultural, social, political or economic context of the PLWHA play a decisive role in the healthy functioning of their mature faith. For instance, the perception of God (God-images) that they adopt could play a crucial role in their spiritual healing or it may create an illness (pathology) (cf. Louw 2008:95). Pastoral care givers, therefore, will need to examine those God-images that are not hospitable and those, which do not facilitate the healing of the PLWHA and, then, deconstruct them. This can be done by replacing the pathological ones with appropriate ones that could facilitate healing (Louw 2008:95).

According to Middleton and Walsh (1995:69-79), deconstruction models originated from post-modernism's suspicion of "meta-narratives" - dominant narratives that are perceived to oppress. [306] In the post-modern context, the inclination is to see dominant stories as mere rhetoric aimed at wielding oppressive power over others (Monk 1997:8). The assumption is that if these "meta narratives" (dominant stories) are deconstructed, then, all the smaller stories (the oppressed ones) that conflict with this meta-story would emerge, thereby, forcing the dominant stories to go into unconsciousness. The theory also assumes that when the client experiences discomfort, it is because these dominant but pathological stories dominate the client's mind (Freedman and Combs 1996:5).

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[306] Peter and Biesta (2009:27;89-93) note that deconstruction theories were championed by Jacques Derrida. For instance, Derrida (1997:16) is of the view that even laws that are pathological need to be deconstructed, hence, the "law as such can be deconstructed and has to be constructed. That is the condition of historicity, revolution, morals, ethics and progress. But justice is not the law. Justice is what gives us the impulse, the drive, or the movement to improve the law, that is, to deconstruct the law. Without a call for justice we would not have any interest in deconstructing the law."

For healing to occur, these oppressive narratives must be deconstructed and replaced with better stories that are life affirming and life enhancing. Therefore, the utilization of the God-images and specific understanding of these images could enable the PLWHA and their families to react constructively and positively. As a result they are helped to live, adapt and cope meaningfully with their suffering. It is important to note that, like many people other with various sicknesses, certain concepts of God may be relevant to the PLWHA as they encounter pain and emotional experiences. They may project onto God their various needs, frustrations, anger and disappointments and may perceive God in various ways. This is because being infected with the HI virus and knowing that this virus is not going to die raises difficult spiritual questions.

For instance, the PLWHA may ask, what is the meaning of life? What is the purpose of life? What is the reason for pain and suffering? What would happen at the end of life? What happens when the virus increases in the blood? Why does a person have the virus and others do not? How do the community, the church and the family perceive HIV and AIDS? Is God still caring and loving? As opposed to these pathological questions, which emanate from pathological narratives, it is assumed that during counselling, pastoral care givers could help the PLWHA to remember (retrieve) better stories or the memorable and good occasions in their lives and discuss how these events were helpful as a way of harmonising the conscious and the sub-conscious mind. In other words, the pastoral care givers should use the "better stories" to reinforce the identities of PLWHA.

When dealing with the PLWHA, the above theory can enable the pastoral care givers to suspect that some oppressive concepts, ideas or stories are inappropriately shaping their stories. In this case, the role of the pastoral care givers will be to deconstruct these concepts and replace them with an appropriate one. This can also be done by undermining the oppressive story, which is normally the dominant one, and replacing it with an identified story or experience/idea, which is normally overlooked, yet, is incompatible with the dominant/pathological narrative (cf. Monk 1997:5).[307] Therefore, the PLWHA could be helped to remember and narrate their stories in a redemptive manner that would enable them to take control of their lives and find meaning out of it. In fact, while it is true that the PLWHA are in an unfamiliar position and suffering because of the HI virus, it is clear also

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[307] In fact, this theory or approach is also used in *Narrative Therapy* in which a client is invited to give an alternative narrative, that is, s/he is invited to "re-author" another story, which is not "problem saturated" (White and Epston 1990:4; cf. Freedman and Combs 1996:5).

that when they start narrating their stories, their position changes, for they become the author and authority of their own narratives (cf. Ogletree 1985:4).

In other words, when the PLWHA are given the space to narrate their stories freely, their position shifts and they become an expert while the pastoral care givers become the learners and listeners. As such, they could be helped to change their attitude and disposition and they could be also helped to cleanse their perception filters. This means that their negative thoughts and feelings are replaced by "positive thinking and emotions" (Louw 1998:357). It is interesting to note that even in the traditional practice of *Ũtugi,* the *Thingira* (man's hut) was where the activities of deconstruction, reframing, meditation, instruction, teaching/changing people's perception, encouragement and reconciliation or *Kũhorohia* (making peace) took place. Again, it was in the *Thingira* that families were taught how to live a good life (cf. Wachege 1992:67).

6.12.2. Religious and cultural diagnosis

Since a cognitive component involves reflection and meditation on, as well as analysis, evaluation, identification and outlining of the problem, there is a need to explore the religious and cultural diagnosis, issue of theodicy, dreams and *Taboos (Mũgiro)* in *Ũtugi* as a model for healing.

6.12.2.1. God-images within the cultural context

As we have seen in Chapter Three, the Agĩkũyũ believe that the *Ngoma* become angry when traditions and customs are not observed and they may direct "misfortune on the deviates" (Kenyatta 1938:266; cf. Gichinga 2007:67).[308] Therefore, pastoral care givers should probe the PLWHA's perception of the spirits[309] and *Ngoma* as this affects their response to healing. In this regard, pastoral care givers should investigate in which type of spirits and *Ngoma* the PLWHA believe. This is because in the Agĩkũyũ spiritual world, there are several types of spirits, which include (a) the human spirits, (b) the animal spirits and (c) the nature spirits. The human spirits are dead persons older than ancestors *(Ngoma)*, which include both good spirits *(Maroho mega)* and evil spirits *(Maroho moru).* There are also a number of feminine spirits,

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[308] In African communities, whenever misfortune occurs, it is mandatory to find out the cause of it. Most communities use divination to find out the cause of a misfortune. In the Agĩkũyũ society, the elders could be consulted before going to the herbalist or diviner to enquire about the cause of a misfortune (see Kenyatta 1938:266).
[309] Many African communities believe that spirits may be upset because their natural habitat may have been tampered with e.g. trees, forest, and river, where they live may have been violated or cut down before offering an appropriate sacrifice. These acts, then, amount to trespass and a sacrifice may be required to appease the spirits (cf. Gichinga 2007:67).

which are known as *Ngoma cia aka,* that is, the spirits of women. These spirits would come and cause illnesses and havoc through powerful winds and, at times, a goat had to be sacrificed to appease them if they are very violent (cf. Kenyatta 1938:231-241).[310]

The pastoral care givers may come across the PLWHA who claim that these spirits, which include the rejected spirits of people who died through curses and who live in bushes, are engaged in a riot and that is why the HI virus have attacked them. Therefore, the pastoral care givers will need to determine whether the PLWHA maintain good relationships with these spirits and the *Ngoma* in order to diagnose the religious dimension of the lives of the PLWHA and their families. It is vital for pastoral care givers to explore the roles of these spirits and the *Ngoma* in the religious and social lives of the PLWHA.

For instance, the pastoral care givers may want to enquire how the PLWHA are being helped by these spirits and by the *Ngoma*. It is important to find out from them what they think the spirits and *Ngoma* say about their HIV status. The above may force some of the PLWHA to consult the *Mũndũ mũgo (*traditional healer).[311] Therefore, the pastoral care givers need to do the ancestral and traditional healer's diagnosis to know the position of the *Mũndũ mũgo,* the spirits and the *Ngoma* concerning the PLWHA's disease. The pastoral care givers may discover that, according to the worldview of the PLWHA, the HI virus was sent to them through witchcraft as a result of their behaviour, and this happened when the *Ngoma* withdrew their protection (cf. Buhrmann 1984:5; Ashforth 2001:6).

Similarly, the pastoral care givers may discover that the physical illness in such a context is perceived simply as a symptom of the disease, and for healing to occur, the broken relationships between the PLWHA and their *Ngoma* should be healed first as this is what is understood as the real illness (cf. Kenyatta 1938:267; Louw 2008:107). It also implies that healing must involve the healing of the body, mind and spirit of the whole community, for this is what holistic healing means (Kenyatta 1938:267; cf. Saayman and Kriel 1992:38). Louw (2008:107) describes illness, in the African context, as a sociological phenomenon because the family, the clan and the society are all affected. This background compels many Africans to believe that HIV and AIDS are caused by witchcraft even when the church and

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[310] It is surprising that, even in the realm of spirits, the issue of gender discrimination is witnessed. For instance, those spirits that are said to cause trouble are irrationally considered female. This imbalance is the product of male-dominant norms, which need to be addressed in the context of the HIV and AIDS pandemic.
[311] The plural is *Andũ Ago* (traditional healers).

the medical practitioners explain that it is caused by the HI virus. For Berinyuu, sickness in Africa is personalistic and less naturalistic:

> Personalistic implies an approach which understands illness as a result of the active purposeful intervention of an agent, who may be human (a witch or sorcerer[312]), non-human (a ghost, ancestor, or evil spirit), or supernatural (a deity or other very powerful being). The sick person literally is a victim of aggression or punishment directed specifically against him (1988:21).

However, Louw disagrees with the notion of a "personalistic system" and of a "naturalistic system", which describe illness in "impersonal and systematic terms" and in which illness is understood as coming not from "machinations of angry beings but rather from natural forces or conditions, which upset the balance of basic body element" (Louw 2008:144).

Besides probing the PLWHA's ideas of spirits and *Ngoma*, it is imperative for the pastoral care givers to explore the God-images within the cultural context of the PLWHA. The Agĩkũyũ people believe that the omnipotence of God is more powerful than spirits and human beings (Mbiti 1988:12). They also believe that all the phenomena of nature are, to some extent, "imbued with the spirit of God" (Mbiti 1988:17). Therefore, their cultural understanding of God is *Ngai* as *Mũigwanĩritha* (the compassionate one), hence, they refer to God as *Ngai wa thaa* (the God of pity) who comes to their rescue in the time of need. When there are calamities or misfortunes such as the HIV and AIDS pandemic, the people would consult their seers to inquire why *Ngai Mũigwanĩritha* is angry with them; then, they would pray and offer sacrifice to *Ngai*. Moreover, those who are deeply influenced by Christianity would go to the church to pray and give offering as a way of appeasing God. When death strikes, the Agĩkũyũ would interpret that as an indication of God's anger on the family or community, and therefore, both prayer and sacrifice would be offered to soothe God's anger. This implies that the Agĩkũyũ people see their behaviour or conduct as that, which can arouse the anger of God (*Ngai)* and by praying and sacrificing, the community believe that *Ngai* would have mercy on them (cf. Mbiti 1988:37). The community also regards misfortunes as the will of God, hence, the saying "*Nĩ ũge wa Ngai"* (it is the will of God).

Furthermore, God is perceived as a judge (*Mũtuanĩri cira)* and as one who can punish the community when they arouse his anger. However, God is also perceived as one who gives

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[312] In religion, mythology, and fiction, a sorcerer (sometimes sorceress for female) is a person who is able to use magical powers or sorcery. A synonym is warlock, a term for a male witch.

justice *(Kĩhoto)* and retribution (*Kũrĩhia*) (cf. Mbiti 1988:77). Again, God is regarded as *Mũreheri andu gĩtei kana kĩrumi* (the one who brings blessing or punishment to the people). As a result of these God-images, those who become sick and those who die or encounter misfortunes are regarded as disobeying God. In fact, this is one of the reasons that the Agĩkũyũ perceive the HIV and AIDS pandemic as a punishment from God. Therefore, the images of God as *Mũtuanĩri cira* (judge) and *Mũreheri andu gĩtei kana kĩrumi,* the one who brings blessing or punishment to the people[313] within the community should be regarded as that which can bring pathology, for it can facilitate the suffering of the PLWHA (cf. Mbiti 1988:78).

When the Agĩkũyũ experience suffering, they lament that *"Ngai ndanyendete"* (God does not love me) because they presume that love is not be expressed in words but in action. The community also assumes that "God loves them and shows his love through concrete acts and blessings" (Mbiti 1988:33), even when they do not talk of the love of God. However, they regard God as the one who can save them from poverty; therefore, a rich person is seen as blessed by God. As the source of the all things, the community believes that God supplies or withholds the needs of the people (Mbiti 1988:56, 76), and during prosperity, they see no need to pray to God as praying to God at that time is interpreted as bothering him.

While friendship is highly valued in the Agĩkũyũ society, as in many African communities, it is surprising that the Agĩkũyũ refrain from addressing God as *Mũrata* (a friend). This is influenced by their understanding of God as transcendent (one who lives far away and who cannot be reached by humans) and God's immanence (one who is near but can only be reached through other divinities). The community regards God as *Mũrũtani* (a teacher), the one who has taught the community how to cultivate and produce food and who continues to instruct the elders through dreams (Mbiti 1988:75). To them, *Ngai* is also *Mũhorerania* (a comforter), *Mwega* (good), *Mũtaithĩa* (helper), *Mũhei kĩrĩndĩ indo* (provider and giver), *Mwene Nyaga* (possessor of brightness), *Mũtugi* (hospitable) and *Mũũmbi wa indo cĩothe na Mũhei Kĩrĩndĩ indo cĩothe* (the creator and giver of all things) (Wachege 1992:46; cf. Kenyatta 1938:233-234).

It is from this understanding that the Agĩkũyũ people consider themselves as having a special relationship with *Ngai,* for *Ngai* has given them the good fertile land. They also see God as

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[313] The Agĩkũyũ regard famine as one of the means by which God punishes the people (cf. Mbiti 1988:84).

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Mwene Nyaga, the one who should be paid tribute as the giver of life, helper, provider and comforter. This special relationship with *Ngai* enables them to approach *Ngai* in trust and confidence, and without fear (Kibicho 1972:58). For this reason, it is important for the pastoral care givers to assess the cultural experience and understanding of *Ngai* by PLWHA, for this can have an impact on their healing response. Louw (2008:145-146) claims that God as a companion and God as a partner for life are the best God-images in Africa. He says:

> [D]uring the crisis of suffering, patients cannot integrate faith constructively and meaningfully in the acceptance and adaptation phase, an association between patient's negative or painful emotional experience and their perception of God is most likely. A distortion of their God concept prevents constructive application of their potential. When patient's emotional filters are blocked, their vision of God also becomes disturbed. Theologically speaking, the quest for meaning then becomes primarily, a problem of a dysfunctional belief system; it becomes a problem of perception. It is the task of the pastor to help the patient to understand and interpret God in the light of suffering and, conversely, to understand and interpret the patient and his/her experience of suffering in term of God's involvement with suffering. The patient's story must be put in touch with God's story vice versa. Where these two stories converge and the patient discovers God's faithfulness and a vision of Christ's resurrection result in the dynamic of hope. When suffering disturbs this vision, hopelessness ensures. Hope is strengthened when the patient's concept of God once again becomes constructive and positive (Louw 2008:212).

The above indicates that the inappropriate cultural God-images can bring pathology or spiritual illness. Louw (2008:146) opines that when engaging in pastoral assessment on health, the issue is not "a correct or incorrect understanding, or a good or bad concept, or on the doctrine of the church or the content of specific denominational confessions." What is important is whether the concepts or ideas "are appropriate or inappropriate in terms of spiritual and life issues concerning humanity quest for meaning" and dignity (Louw 2008:146).

6.12.2.2. Question of theodicy

The HIV and AIDS pandemic equally raises the question of evil and suffering, that is, what is traditionally known as theodicy (the relation between God's love, justice, suffering and evil).[314] Due to the suffering that the PLWHA experience, they are sometimes confronted with the "why God" and "why me" questions. In this regard, what is at stake is the issue of human dignity, integrity and faithfulness of God. Therefore, it is the work of pastoral care givers to probe the ways that suffering impact on the quest for meaning in terms of the

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[314] For more work on theodicy, see Louw (2000:25ff; 2008:223-226) and Brümmer (2006:215-244). The term theodicy comes from two Greek words, *theos,* which means "*god*", and *dike,* which means *"justice"*. The term was coined in 1710 by the German philosopher and theologian Gottfried Leibniz in his work written in French and titled, *Essais de Théodicée sur la Bonté de Dieu, la Liberté de l'homme et l'origine du Mal* (Theodicy Essays on the Goodness of God, the Freedom of Man and the Origin of Evil). The purpose of the essay was to show that the evil in the world does not conflict with the goodness of God and that, notwithstanding its many evils, the world is the best of all possible worlds. Leibniz wrote his *Théodicée* as a criticism of Pierre Bayle's *Dictionnaire Historique et Critique* and argued that the sufferings experienced in this earthly life prove that God could not be good and omnipotent.

interconnectedness of the PLWHA's identity and spirituality, and their quest for God's love and his compassionate involvement in their lives. The possible challenge that pastoral care givers is likely to face is how to help PLWHA interpret, understand, permit, and foster growth and hope in such context.

It should be noted that, in the African context, when the PLWHA wrestle with the "why God" and "why me" questions, they are not only focusing on the issue of meaning but also desiring to know "why" they are sick, "who" made them sick or who sent the HI virus. Louw (2000: 25) describes theodicy as a human attempt to justify God's goodness and God's handling of affairs, but the challenge is how to reconcile the belief in the goodness of God and God's power with evil in the world. In other words, theodicy is a justification of God in the light of evil and suffering. This therefore highlights a paradox and contradiction as to whether a person can hold the concept of God as omnipotent, omni-benevolent and promoting evil, simultaneously. Louw explains that traditional theodicy argues along the following lines:

> Does God want to prevent evil, but is unable to? (Then God is a God of love, but not almighty); Does God have the power to prevent evil, but prefers not to? (Then God is almighty, but not good; God is not a God of love); Does God have neither the power nor the will to prevent evil? (Then God have neither almighty, nor good) and Does God have the power to prevent evil but prefers evil? (Then God is the author of sin) (2008:224).

While the above position seemed doomed because it seeks a logical explanation about God and attempts to relate God with evil, in the context of HIV and AIDS, theodicy is real, for the PLWHA view it as an intrinsic part of their religious life. Brümmer (2006:232) regards the issue of theodicy as an existential and not just a mere intellectual question. He argues that what answer we choose to give to the question of theodicy depends on a normative decision about what is, for us, of the highest value and importance. For instance, is our answers pegged on the highest value of happiness (*eudaemonism*)[315] or on the absence of suffering (*negative utilitarianism*)? Although in terms of the Christian faith, Brümmer (2006:232) sees every theodicy as an attempt to pass moral judgement on the ways of God as absurd, theodicy cannot be denied because it unmasks the appropriateness of God-images and beliefs about God and the world (cf. Louw 2008:224).

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[315] *Eudaemonism* can take on various forms depending on the view we adopt of the nature of ultimate happiness. For instance, Aristotle believed that ultimate happiness entails "achieving the rational virtue of moderation while for the hedonist ultimate happiness is the experience of pleasure. According to Augustine, ultimate happiness can only be found in personal fellowship with God. Our heart is restless until it finds rest in thee" (cited in Brümmer 2006:233). On the other hand, negative utilitarianism presumes that minimizing suffering is a more useful principle in public policy than maximizing happiness (Brümmer 2006:233). In other words, minimizing suffering is more important in an absolute sense than realizing happiness.

The pastoral care givers should know that many PLWHA, attempt to understand the role of God in their suffering and they would like to know how God could be involved in their healing. This is why suffering becomes a theological problem when their understanding of God becomes inappropriate. In other words, the God-image "becomes so destructive that it is to a certain extent a hampering factor in the process of healing" (the spiritual trauma of pain) (Louw 2008:224). Likewise, when the emotional filters of the PLWHA are blocked, their perception of God also becomes disturbed. From a theological perspective, the quest for meaning in this case becomes a "problem of dysfunctional belief system" and in turn it "becomes a problem of perception" (Louw 2008:227).

The pastoral care givers, therefore, should attempt to help the PLWHA to understand and interpret God in the light of suffering and also understand and interpret God in terms of God's involvement with suffering" (Louw 2008:227). What this means is that, the "discovery of God's faithfulness and a vision of Christ's resurrection" becomes the dynamics of hope (Louw 2008:227). The way the PLWHA answer spiritual questions have intense implications for both their physical health and spirituality. As such, appropriate God-images have several implications for their response - attitude and aptitude - to the issues of infection, and eventual healing and meaning of life. Of course, the above delineation is naturally not convincing to a person who interprets sickness from a personalistic worldview. For this reason, there is a need for a paradigm shift in this understanding of healing. The counsellor will require to shift from a naturalistic understanding of disease that deals with "cause and effect" to a theological understanding, in which the "why" question is not always answered. Louw shows that there is a need to engage in the theological assessment of religious, faith and God images:

> An effective metaphor for God should express dimension of sensitivity and compassion (pathos); identification (woundedness); insight and understanding in terms of paradoxes (wise fool; as well as consolation, encouragement (*paraklesis*) and empowerment. The concept "God as a soul friend (God's friendship in term of his covenantal and compassionate faithfulness) should play an important role in pastoral communication of care and comfort (Louw 1998: 84).

This understanding is also highlighted by the *Nordic-Foccisa Core Group* in Lusaka (2004). They claim that, "in humanity's quest for greater understanding associated with HIV and AIDS, people are often inclined to revert to negative images of God, images which sometimes are provoked even by the teaching of the church." [316]

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[316] These negative images of God include that of a vindictive judge (from human understanding of divine justice), a rigid book-keeper of our mistakes, a sadistic brute who takes pleasure in our suffering, a fateful force who has determined the destinies of all, and an indifferent God who does not care about human suffering (Louw 2008:402).

6.12.2.3. Dreams and dreaming

Again, concerning religious and cultural diagnosis, pastoral care givers dealing with the PLWHA would need to probe the ways dreams influence their symbolic world.[317] This is because, like many people in Africa, some of the PLWHA believe in dreams and they are influenced by it. Guma observes that among the abaNguni:

> The experience of dreams… constitutes complex forms of healing in which manifold and ingeniously artful ways of embodying wholeness and social justice are integrated. *Ithongo* dream experience among healers is their whole philosophy of life, including ideas about causes of illness, intentionality, aesthetic in self-presentation, and moral validity (1997:13).

Guma (1997:12) relates that dreams among the abaNguni are understood as a meeting of subjective and objective realities. Mpier notes a similar instance among the Yansi of the Congo:

> Dreams occupy a prominent place in the life of the Yansi as evident from a stroll around a village in the early morning, as people are rising from sleep and recounting and discussing the dreams of the night. Prior to some undertaking, such as going on a hunt in the forest or going to the farms, people recall their dreams to assess their chances of success. When someone is ill, their dreams, as well as those of kinsmen, are carefully examined. All of which suggests that dream experiences are for the Yansi as important as, perhaps even in some circumstances more important than, those of waking life (1992:100).

Mbiti (1997:512) reminds us that dreams are a major dimension of the African life, and this has developed into a dream culture. If this were not so, dreams would not be discussed daily, they would not be taken into consideration in decision making and they would not make some people seek God's intervention to stop them from dreaming, nor would they be taken so seriously in health matters. From the Agĩkũyũ perspective, wa Thiongo (1998:17) understands the phenomenon and interpretation of dreams as having intrigued human beings from time immemorial. He assumes that a dream has the same sense (true) as that of waking thought and it is a real spiritual experience, which in "retrospect we acknowledge as a dream world" (wa Thiongo 1998:17).

In the Agĩkũyũ spirituality, some dreams are straightforward while others are rather complicated. Therefore, because dreams play a decisive role in the lives of the Agĩkũyũ, there is need for the pastoral care givers to probe, based on the cultural and religious context, what the PLWHA , see in their dreams, the symbols they see and what these symbols means to them. The pastoral care givers may be astonished by the fact that, sometimes, these dreams reveal important messages to the PLWHA, which may affect their behaviours and responses

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[317] The debate on rituals and symbols will also be explored in the next section.

to healing. On the other hand, the objects seen in the dream may be either a good or a bad omen. If it is a bad omen, it may affect the whole community, for as we have seen, African religious practice is a complex web of relationships, which creates harmony and stability for well-being and wholeness (Mbiti 1969:58-74; cf. Berinyuu 1988:5).

6.12.2.4. Taboos (*Mũgiro*) and morality

To the Agĩkũyũ people, taboos are "prohibitive reminders about uprightness in living, moral awareness and cultural adherence" (Wachege 1992:67). Taboos are placed upon contact with or use of certain kinds of foodstuffs, actions and places. The community believes that failure to observe taboos would bring catastrophe on the community. Therefore, the Agĩkũyũ institute taboos to (a) protect a person from danger or injury carelessly or intentionally inflicted, and also (b) to protect a person or the community from the anger of evil spirits. Some taboos are linked to certain actions while others are connected to some kind of food or drink.

In addition to the protection of an individual from danger or injury and evil spirits, taboos have a moral and hygienic context, thus, they cannot be dismissed as superstitions. This is because they help in maintaining community morality, dignity, and integrity while also upholding cultural purity. It is important, therefore, for pastoral care givers to explore the general concepts of taboos, spirituality and prejudices of the PLWHA. This is because what is socially acceptable or unacceptable to the Agĩkũyũ people is imparted to them when they were young. By the time they are adults, these teachings have become strongly embedded in their psyche and have significant impact on their emotional adult life, both positively and negatively. For instance, taboos may affect them negatively in the following ways: (a) force them to become perfectionists (b) develop poor self-image (c) build up anger, guilt, and shame, and (d) fear punishment.

In fact, the pastoral care givers may hear stories of how the PLWHA have being infected by the HI virus after breaking some taboos (*Mũgiro);* therefore, they ask for a cleansing ritual. In such a situation, the pastoral care giver may need to discuss with them the type of ritual that needs to be used for cleansing and healing. Ma Mpolo and Nwachuku (1991:41) explain that such rituals are important because many people in Africa are influenced by religious and cultural values. This is true because, like other sick people in the Africa context, many PLWHA and their families are usually influenced by the forces of religion and culture, which

in turn influence their perception of their HIV status. The instances mentioned above suggest that Mbiti's (1969:1) view that African people are notoriously religious is probably correct. It is no wonder that, even though many Africans have accepted Western education, many continue to hold on to the traditional worldview, which may not necessarily concern the world of magic, divinities, spirits, totems and mythical creatures as we have seen (cf. Mbiti 1969:23).

Apparently, when Western science fails, as in the case of the HIV and AIDS pandemic, or in times of crisis and social stress, majority of Africans, including the educated ones, tend to recourse to traditional religion to make sense of the situation and, hopefully, to gain strength and meaning out of the traditional worldview. As we have seen in Chapter Two, the HIV and AIDS pandemic has developed into such a huge crisis that it is important for pastoral care givers in the African context to get proper religious and cultural diagnoses when dealing with the PLWHA and their families. Louw (1998:75) asserts that people's philosophies and views of life determine their behaviour. This means that their positive conceptions lead to constructive action and their irrational thoughts and ideological perspectives have a negative effect on their relations. Therefore, it is clear that affirmation norms and values play a significant role in philosophical thinking and in the attitudes of the PLWHA and their families.

6.13. Conative component: Towards a community based action programme

The conative component is the third anthropological stage and it focuses on behaviour, action, planning and decision-making (see figure 25). In this component, factors and emotions related to the problem are explored. Louw (1998:353) holds that the relevant psycho-pastoral responses for this stage are the "diagnostic and advising-admonishing responses." Apart from these, this stage comprises of challenging confrontations and the communication of relevant information (Louw 1998:353). As seen in Chapter Three, most of the problems that the PLWHA and their families face are normally socio-economic and political and, therefore, the *Ũtugi* paradigm could play a decisive role in creating a space for empowerment and mobilising the community through action-based programmes. Furthermore, the role of the family, friends and the faith community, in the areas of support and care, cannot be underrated in the fight against the HIV and AIDS pandemic.

6.13.1. Social or community diagnosis

At the conative stage, the pastoral care givers need to explore the social or community dimension as this can influence the behaviours of the PLWHA. The pastoral care givers, who use *Ũtugi,* need to explore the social or community lives of the PLWHA and their families. Since the majority of the PLWHA are stigmatised within the society, there is a need for the pastoral care givers to engage in community diagnosis. In this case, pastoral care givers should probe the effect of stigma and discrimination on the PLWHA as well as the resulting damage to their mental and spiritual health. Due to the fact that, in Africa, sickness is systemic and relational being linked to spiritual and religious dimensions, there is a need for pastoral care givers to probe into the way in which the above deprivations cause disharmony between the PLWHA and their community or families and attempt to restore it. In this case, healing is attempted at the social or community level. Perhaps the community or family rituals such as *Kũrathima kwa Horohio* (reconciliatory blessing) could play a crucial role in reaffirming their belongingness and humanness (cf. Wachege 1992:64).

Besides, the task of pastoral care givers should also involve probing into the livelihood support systems of the PLWHA within the community. As already seen above, due to the prolonged phases of the disease, the PLWHA continue to suffer and struggle as they live within the community where they try to support their families. Nonetheless, in a country like Kenya where there are no support grants for the vulnerable, the PLWHA are left at the mercy of their community's support systems. Therefore, enquiring about the PLWHA support systems will enable pastoral care givers to place them in meaningful livelihood support systems. This is in an attempt to enhance their skills and gifts as a way of empowering them. Of course, it is clear that with proper support systems, the PLWHA can live a meaningful life without sinking into deep poverty.

Furthermore, through the *Ũtugi* element of *Harambee,* pastoral care givers could connect the PLWHA to the community so that funds are raised to support them and address their situations. The possible challenge is how pastoral care givers could address the contextual and systemic factors that continue to perpetuate the poverty that engulfs PLWHA and their families, especially in rural areas. As we have seen in Chapter Five, the caring community should not refrain from addressing the root causes of poverty and injustice. They should confront the power structures that uphold and legitimise a dysfunctional system that brings pathology to the society. The pastoral care givers may also consider enhancing the network,

connectedness and relationships of the PLWHA with the wider community, which would encourage interaction and mutuality in the community. Such gestures lead to integration within the church, the family and the social environment (e.g. in politics). In this regard, it is important to encourage the PLWHA to be involved in matters affecting their lives and this entails helping them to be agents of their own liberation (participation in the political realm that affect their lives). Louw (1998:75) argues that the degree to which people experience security in relationships will determine, eventually, the degree of isolation, and determine whether they will have to deal with the problem of loneliness and alienation.

6.13.2. Economic (resources) diagnosis

Enhancing the security of the PLWHA means exploring the resources that are available for action and planning. The task of pastoral care givers, in this regard, entails a focus on the wellbeing of PLWHA and the resources available for their medication and up-keep. It is important for pastoral care givers to pay attention to the up-keep of the PLWHA, that is, to issues concerning their employment or income generating projects. It is known that because of poor health, the majority of the PLWHA lose their jobs or employment and become impoverished. Furthermore, it is known that the majority of the PLWHA live in rural areas and informal settlements, which are characterised by inadequate or low quality services such as lack of clean water, limited access to quality schools and health facilities and general unhygienic living conditions (cf. Barnett 2002:8; Shisana *et al* 2002; UNAIDS 2006:84). For this reason, they are profoundly affected by poverty, and with lack of finances to buy nutritional food needed to strengthen their immune systems, opportunistic diseases and the stage of AIDS are accelerated (cf. van Dyk 2008:263). This situation forces them to experience the loss of self-respect, deep anxiety and the loss of hope.

It is, therefore, the task of the pastoral care givers to connect them to financial or economic capital, as a practical intervention, if they are to live a meaningful life and encounter healing. As already examined, the *Ũtugi* support systems could play a vital role in augmenting their financial capital. This includes accessing saving credits, education, life skills or a place to live (shelters) and support groups. The possible challenge is how pastoral care givers can mobilise the PLWHA to become active players in their own finances and the growth of their own being, thus, contributing to their own social transformation.

6.13.3. Enhancement of personal capacity: Motivation, intention and lifestyle

Another area that the pastoral care givers should explore at the conative stage is the enhancement of the personal capacity of the PLWHA and this entails their personal dimension (motivation, intention and life style). In this regard, counsellors should probe the psychological support systems, opportunities to relieve stress, good working environment and personal hygiene of the PLWHA. These aspects are important to the health of the PLWHA. Therefore, the pastoral care givers would need to identify the aspects of *Ũtugi* that can address the above. In addition, pastoral care givers should find out whether the PLWHA use condoms or they engage in unsafe sexual practice. It has been observed that some of the PLWHA have deliberately engaged in unsafe sexual practice knowing very well that they would infect their partners with the HI virus. The pastoral care givers should be aware that many PLWHA engage in such kinds of behaviours, either as a completely unjust method of taking revenge upon the society or out of utter carelessness and ignorance. The pastoral care givers, therefore, should help them to live a healthy life-style since enrichment of life is one of the principles of *Ũtugi*. The pastoral care givers should also discuss with the PLWHA issues of ARVS and how to engage in physical activities such as hobbies, exercises as well as rest (passive or active). This helps the PLWHA to reduce stress, pain, weakness and dizziness. At this level, it is important for the pastoral care givers to address matters of nutrition (i.e. balanced diet).

The pastoral care givers should enquire whether the PLWHA have refused to eat the food of their ancestors. This is because, like many people in African communities, PLWHA may believe that eating certain food would cause *Thahu* (defilement), which forces them to seek cleansing from the *Mũndu Mũgo* (medicine-man/woman). Many Africans still fear that unless such rituals are performed, disaster would befall them. That is why some of the PLWHA would go without eating balanced diet even though good nutrition is crucial to their health. Therefore, it is important for pastoral care givers to discuss alternative types of food that would enable PLWHA to remain healthy. Louw (1998:75) argues that, "the degree to which people's basic needs are met will determine the measure of emotional pain and immediate frustrations." Seen from this perspective, it is clear that, on a personal level, PLWHA and their families would need spiritual, physical and emotional support, for their healing to occur. Additionally, pastoral care givers may explore ways of enabling PLWHA to discover their freedom and find ways to affirm it.

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6.14. Normative component: Quest for spiritual care (meaning and the ultimate)

The fourth anthropological stage concerns the normative component, which focuses on values as well as fostering true discernment and an understanding of the will and presence of God (see figure 25). This stage involves exploring meaningful anticipation and purposeful transcendence as a way of encouraging the process of imparting and receiving meaning, which is stimulated by growth in faith. It is also an empowerment and edification stage where counselling is concluded.

6.14.1. Spirituality and transformation

Since the normative stage is the *telic stage,* it focuses on helping people to apply their resource of faith for more purposeful action (cf. Louw 1998:353). In other words, it involves spiritual resources and relationality. During the diagnostic process, the pastoral care givers should focus on enhancing the spirituality of the PLWHA as they work towards their transformation. It would require probing whether they are comfortable with the involvement of the outside witnesses (support groups or family members) in their counselling. The outside witnesses are the people who play an external role in the family or in the society during the process of counselling. This is in line with the philosophy of *Ũtugi,* which acknowledges communal solidarity (cf. Mbiti 1969:125; Berinyuu 1988:5). The involvement of an outside witness also shows the equality and co-existence of the counsellor, the witness and the client. The outside witness would be invited to the counselling situation, to listen, to validate and to affirm the client's new story or the client's non-pathological narratives (authored stories). The act is a shift from a one-to-one person counselling to group counselling in which the family, support groups, and other important persons in the community become a part of the healing process (cf. Louw 2008:185).

However, Louw (2008:185) questions this approach and anticipates certain challenges such as how the counsellor can make contact with immediate family members who can play the role of witnesses and advisors as well as significant members of the clan. He suggests that counselling of this type should endeavour to augment and accentuate solidarity and co-responsibility among members of a local group, the fellowship of believers and the relatives within the extended family (Louw 2008:185). The advantage of such an approach to counselling is that it involves co-responsibility, which is aimed at promoting a sense of solidarity, belonging, mutual love, affection and unconditional acceptance (see *Ũtugi* principles). In other words, pastoral care givers will need to help the PLWHA to discover

their personhood and offer them the opportunity to build new relationships and a new image, and to renew their spirituality and transform themselves.

6.14.2. Rituals and symbols of spiritual growth and healing

At this stage, the pastoral care givers could use rituals and symbols in the healing of PLWHA. Pastoral anthropology typically divides rituals into three namely (a) cosmic cycle or cylindrical rituals (celebrating changes in the cosmic cycle); (b) rituals of social transition (rites of passage); and (c) rituals of misfortunes (Turner 1969:34). Since rituals are used in times of misfortune, it is important for the pastoral care givers to use it as a form of diagnosis and as a form of treatment (cf. affirmation). The rituals of social transition, which are performed at birth, puberty, weddings and funerals, could also be used in healing for they signify the transition of the individual from one stage to another (cf. Turner 1969:34). This is important especially at the end of the counselling session when clients share food to celebrate. In line with *Ũtugi,* the ritual of sharing food could take place either at the beginning or at the end of the pastoral counselling. Kiriswa (2002:23-24) sees rituals as a good element in the "growth and healing process", for it communicates love and a sense of belonging, among other things. In this respect, it is possible for the pastoral care givers to use prayers, chants, readings, Bible stories, songs, drama and the laying of hands to minister to the PLWHA to facilitate healing. Apart from these, rituals and symbols could be used to facilitate forgiveness, acceptance and reconciliation from God (cf. Kiriswa 2002:29).

Traditionally, the Agĩkũyũ treated psychological illness through ritual purifications, exorcisms and sacrifices. Therefore, the pastoral care givers should explore the possibility of using traditional rituals, which are compatible with Christian rituals in ministering healing to the PLWHA. Such rituals could be crucial in helping the PLWHA to affirm and restore their relationships with God, self and fellow human beings. Nwachuku (1994: 79-83) argues that traditional rituals and symbols are essential in pastoral care and counselling in the African context. She says that there is a need to conclude counselling sessions with such rituals as a way of "demonstrating concrete actions" (Nwachuku 1994:79-83).

6.14.3. Creative art and sculpture: The spiritual growth and healing

In addition to the above, the place of creative art and sculpture in the pastoral care and counselling of the PLWHA in African context needs to be acknowledged. Lartey (2003:29) laments that pastoral care givers in Africa tend to ignore the use of symbols such as those

found in creative art and sculpture and they prefer to use literary works, even though the use of creative art or drama can contribute to healing. Therefore, disregarding creative art and sculpture in pastoral care and counselling should be considered as impoverishment. From the pastoral perspective, these rituals may be essential in affirming what has been done or said during the counselling session.

Obviously, the pastoral care givers and the PLWHA will have to agree on the type of rituals and symbols to be used.[318] In fact, rituals provide opportunities for spiritual nourishment and reinforce the identity of the clients as consecrated individuals who are restored and loved by *Ngai*, ancestors and fellow human beings. From a Christian perspective, such consecration can also be seen as an empowering tool, which could enable the PLWHA to live meaningfully. For instance, the rituals could empower them to become involved in the work of advocacy, for it can be interpreted as commissioning them to start programmes such as the HIV prevention education. It is important for pastoral care givers to reassure the PLWHA that they would be available in the near future because, in the Agĩkũyũ context, the counselling process prepares the pastoral care givers and the clients for a life-long relationship. Such an affirmation is crucial in the context of the HIV and AIDS pandemic, for the pastoral care givers are expected to journey with the PLWHA until the end of their lives.[319]

6.14.3. Death and bereavement: Dying meaningfully with dignity

One of the challenges posed by the HIV and AIDS pandemic is that it deprives millions of people the right to die "naturally" and meaningfully. Often, the majority of PLWHA are not prepared culturally and spiritually to die of HIV and AIDS. The lack of basic necessities, as well as the fear of death and being HI positive may force them to undergo various stages of emotional reactions such as shock and denial, anger and fear, anxiety and grief.[320] In addition

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[318] Igenosa (1988:20) is of the view that there is a need to select the relevant African methods and approaches to use in healing. He asserts that the word of God should be the yardstick for measuring the relevance of these healing approaches by Christians today.

[319] Concerning the problems facing dying clients in hospitals, Hockey (1990:63) remarks that dying clients used to "be neglected and treated as non-persons for whom little could be done", and this prompted the birth of the hospice movement. In other words, the hospice movement is a reaction against the dehumanisation process involved in the neglect of dying clients. In this movement, the prominence of care is given to dying clients together with their families who are regarded as the main unit of care, while the dying clients are seen as responsible for making decision about their own treatment.

[320] Like terminally ill patients, PLWHA undergo various stages of loss and grief. Kübler-Ross (1969:34-121) describes five stages of grief, which can help pastoral care givers dealing with PLWHA to understand their loss and grief. The first stage is that of *denial and isolation*: Denial is a conscious or unconscious refusal to accept facts, information, reality, etc., relating to the situation concerned. It is a defence mechanism, which is perfectly natural. Some people can become locked in this stage when dealing with a traumatic change that can be ignored. Death, of course, is not particularly easy to avoid or evade indefinitely. Kübler-Ross (1969:34) says that the characteristic of this stage is shock, denial and scepticism (disbelief of the reality of loss). This initial denial is healthy, for it enables one to cope with any pain. This is because "denial functions as a buffer after unexpected shocking news, allowing the patient to collect himself and, with time, mobilize other, less radical, defences" (Kübler-Ross 1969:35). However, denial normally leads to isolation and may force one to isolate himself or herself from other people. The second stage is *anger*. It evolves into bitterness, hostility and resentment towards God, others and

to such existential threats, stigmatization, rejection, and the loss of social status, self-confidence and dignity, may also affect them, causing great psychological, physical, emotional and spiritual pain. Although human beings work so hard to have a quality and dignified life, human life cannot be complete without the reality of death. It is our position that human beings need quality and dignified lives even as they face death.

Therefore, the PLWHA and their families need encouragement, understanding and love, for many of them experience a sense of loss and grief and of undignified life. During the last stages of AIDS, there is a need for pastoral care givers to help them integrate death and dying into the daily pattern of life as opposed to defying and denying it.[321] By desensitizing death, the PLWHA could be helped to regain control of their lives during the last stages of AIDS. This would enable them to achieve a greater sense of balance and purpose. Accepting death as an inevitable and natural part of the life circle in the context of religious faith reduces the amount of stress and anxiety. Furthermore, understanding death could lead to transformation and help the dying person to assume responsibility for the social dimension of dying. As such, those dying could help their loved ones to prepare for the anticipated loss and enable them to prepare for a healthy grieving process. The pastoral care givers could also help the PLWHA to take charge of the practical aspects of dying by actively getting involved in their own pain management, choosing their appropriate care at the last stage of dying, preparing rituals of transition, as well as learning how to bid farewell to and impart blessings on their loved ones. The *Ũtugi* paradigm could prove helpful to the pastoral care givers in their attempt to achieve the above.

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self, resulting in self-blame, and blaming others and God. One is forced to ask, "Why me and not somebody else? (cf. theodicy). Kübler-Ross (1969:44) sees anger as adaptability to the reality of loss and desperation, and the angry person tries to gain attention, while also demanding respect, understanding, love and acceptance. The third stage is *bargaining* and it occurs when PLWHA endeavour to postpone death and attempt to strike a deal with God to extend their lives for promises made. According to Kübler-Ross (1969: 44), this is also a normal reaction to the reality of loss in an effort to reduce shock and anxiety. The fourth stage is *depression.* Depression creeps in when one experiences loss of support space (refer to healing dimension above). Therefore, at this stage, PLWHA need a lot of love, concern and empathy as they prepare to grief their loss. The last stage is *acceptance*. For PLWHA, this stage of acceptance after opening up to grief and mourning is essential for healing (Kübler-Ross 1969:44-50). It is the stage of seeking reconciliation and peace with self, others and God. However, the above does not mean that Kübler-Ross's model is appropriate for every context. Bertha G. Simos (1979:261) insists that no one uniform way of grieving could be stressed if one is to be successful in one's grief work. She defines grief in the form of a phase rather than of specific stages (Simos 1979:261). Simos (1979: 261) talks of shock, alarm and denial, acute grief and integration of the loss and grief.

[321] This is one of the most difficult challenges facing the HIV and AIDS ministry in Africa. Kiriswa (2002:86) is of the view that pastoral care and counselling to the PLWHA should aim at instilling courage, self-understanding, self-acceptance and self-love in the faith as opposed to self-rejection and condemnation. Pastoral counselling sheds light on the power of hope and re-establishes purpose in life, trust in God as opposed to despair/ hopelessness. It further utilizes personal experiences of pain, sense of loss and suffering as a means of sharing in the redemptive work of Christ who suffered, died and rose to redeem all humankind. Pastoral counselling helps AIDS patients to experience solace, support, healing and reconciliation in times of pain and/or terminal stages. Thus, it assists the AIDS patients to attain coping skills to adjust to changing circumstances in their condition. Pastoral counselling enhances and fosters a sense of prayer, communion with God and inner peace. It also reduces the sense of guilt, anxiety and stigma associated with HIV and AIDS.

The concept of *Ũtugi* assumes that, when a person falls sick, the family members, relatives, friends and neighbours would visit the sick and offer support and encouragement both to the sick person and the immediate family members. Likewise, when death is about to occur, the *Ũtugi* paradigm dictates that family members stay "around the sick, to comfort, to encourage, to bid farewell, and even to hold the body of the dying" (Mbiti 2009:162-163; cf. Kenyatta 1938:14; Mbiti 1969:149, 152).[322] As a symbol of communion, fellowship and remembrance, the *Ũtugi* paradigm is also used by the Agĩkũyũ people in the ritual of blessing (*Kũrathima)* and bidding farewell to loved ones when a person has reached the stage of dying (or is close to death). There are four ways of doing this. The first is the *Kũrathima kwa Horohio (*reconciliatory blessing), the second is the *Kũrathima na mata* (blessing with saliva)*,* while the third is the *Kũrathima na Iria* (blessing with milk), and the fourth is *Kũrathima na Ũũkĩ na Ũgĩmbĩ* (blessing with honey and millet grains).

(a) *During the Kũrathima kwa Horohio (reconciliatory blessing),* the dying persons would summon the family members for a final dialogue. They would disclose the purpose of calling them by saying, *Nĩndakinyĩrwo nĩ gũkua. Ũkai twaranirie* (I am about to die; therefore, let us discuss) (cf. Wachege 1992:60). The two elders would be called by the dying persons to act as witnesses to hear their last will and the blessing on the family. The dying would reconcile with their families and beseech them to get rid of any bitterness and enmity. To realise this, they would each take a mouthful of water, *Makabucabucia magatua thĩ* (swill and then spit on the ground) and would say, *Niĩ ndirĩ na ũru na mũndu, kana nĩ inyuĩ ciana ciakwa kana nĩ athoni kana Gĩkũyũ, ndirĩ na ũru naũ kana ũũ. Marakara macio nĩndamatua thĩ na nĩndamũrathima* (I have no ill feelings towards anybody, be it you my children, be it my in-laws, be it anyone else, I have no bitterness against anyone. I have spat all the anger I might have harboured and so, I have blessed you all) (cf. Wachege 1992:60).

If anyone had offended them or they were not in good terms with the person, the expectation is that they would call that person and embrace him/her as a sign of reconciliation. Then the dying persons would lay hands on them to symbolize a bestowal of blessing on them.

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[322] The way people think or ritualize death is culturally embedded. The *Agĩkũyũ* culture provides a framework, which enables the community to understand the process of death and dying and, ultimately, what happens afterwards. The existence of rituals relating to death is a fairly universal part of human experience. Rituals are usually public affairs, which are symbolic, in that, the behaviour or action says something about the state of affairs, particularly about the conditions of those taking part in the ritual. According to Rosenblatt (1997:4), a ritual may be understood in many different ways and the key to understanding a ritual seems to be what it defines. In terms of death and dying, the symbol would define the death, the cause of death, the dead person, the bereaved, the relationship between the dead and the bereaved, the meaning of life and major societal values.

Another way of doing this is by asking the person that they have issues with to provide a goat. After it is slaughtered and roasted, the dying persons would be given the best part of the meat (Wachege 1992:60; cf. Mbiti 1969:152). As they share the same meat, the dying persons would say, *Kaĩ ndikĩrĩ na ũndu mũrũ nguga. Twakĩrĩanĩra nyama-rĩ, ũrĩa nduagaga ndiaũnina. Nĩndakĩmũrathima inyuothe"* (I will utter nothing unpleasant. Since we have feasted together, in no way can I say anything bad. Whatever curses I used to utter, I have revoked. I have blessed you all. I am departing, at peace with all) (Wachege 1992:60).

(b) *During the Kũrathima na mata (blessing with saliva),* the dying persons share their properties among their family members. In this case, the *Marigithathi* (first-born sons) are given the responsibility of taking care of the dying person's property (Wachege 1992:60; cf. Mbiti 1969:152).[323] However, if the members of the family are to inherit something from the dying persons, especially a piece of land, then, they would indicate who is to have what, as they bless them spitting on their chest saying, "May you hold tenaciously to the work you are doing and to your properties" (Wachege 1992:60). The dying person would then spit on the chest again and say, may you be rich in fecundity. I, therefore, bless you (cf. Wachege 1992:60).

(c) *In the case of the Kũrathima na Iria (blessing with milk),* the dying persons would ask for milk, sip a mouthful and then spit it on the family members saying, *Indo ciakwa iromwenda na ithereme kũndũguothe. Nĩndamũrathima* (May my wealth favours you and spread all over. I have blessed you) (Wachege 1992:61). The Agĩkũyũ people believe that when that kind of ritual is performed, properties increase.

(d) *During the Kũrathima na Ũũkĩ na Ũgĩmbĩ (blessing with honey and millet grains),* the dying persons would take a mouthful of honey and then *Makamarathima* (spit it on the people) saying, *"Mũrociara mũthereme. Mũrogĩa thinwa na ngago. Mũrokirĩa ngaara na kamwe* (may you reproduce and increase. May you bear boys and girls. May you be numerous and exceed the mice by one, in giving birth) (Wachege 1992:61). Thereafter, the dying persons would take a mouthful of uncooked millet grains and spit it on the people *saying, "Mũroĩgĩha ta ũgĩmbĩ, nĩndamũrathima* (May you be as numerous as millet grains. I

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[323] In the *Agĩkũyũ* traditional custom, dying people have power to choose and elevate their *Marigithathi* (eldest son) on whom they would bestow the authority of stepping into their shepherding role. The other family members are supposed to accept that *Marigithathi*. They would obey him as they did the dying person. Moreover, the last words uttered by the dying person, as their last will is taken seriously and with extreme concern. It is believed that adhering to it is a serious commitment that can bring fortune, and failure to adhere to it could lead to calamities in the families (Wachege 1992:41).

have blessed you) (Wachege 1992:61). The above rituals enabled the dying persons and the family to get ready mentally and spiritually. This enabled them to face the anticipated death meaningfully and with acceptance. Therefore, these rituals are potential resources that could be used by the PLWHA to bid farewell and to bless (*Kũrathima)* their families.

On account of the above rituals, the majority of the Agĩkũyũ people prefer to die at home in order to be among family members and near the place of their ancestors and not to become a homeless wandering spirit upon death. As such, it is crucial for the pastoral care givers to discuss with the PLWHA the rituals they would prefer and to ask them whether they would like to die at home, in the hospice or at the hospital, bearing in mind the abovementioned concerns. While beliefs about death and dying may vary according to church denominations, in the Anglican context, those dying may request a Bible, a crucifix or a prayer book. They may also request for a vicar, a catechist or an evangelist to visit them. The vicar may listen to their last will, just as it was done, by the Agĩkũyũ traditional elders. The vicar or the pastoral care giver may also listen to their confessions and give an absolution. Some may want the vicar to anoint them with oil, give the Holy Communion, lay hands on them, pray, and also sing a hymn. Such liturgical acts enable the pastoral care givers to make God's presence a reality to the PLWHA during their last stage. For instance, when rituals such as the Holy Communion are performed, they communicate support, concern, grace, love, reconciliation and a sense of belonging. The rituals also help the PLWHA to experience forgiveness during the last stage. It is important to note that such rituals could substitute divination and other magical practices that the Agĩkũyũ traditional healers employ in healing. Kinoti (2000b:94) is of the view that the Christian prayers, counselling, rite of confession and the use of charismatic gifts (1 Cor 12:4-11) are the best methods of replacing divination and magical practices used by traditional healers in Africa.

Apart from helping the PLWHA to face death meaningfully in their final stage, the pastoral care givers should prepare their families, children, and friends for the anticipated death. As in the *Kũrathima kwa Horohio (*reconciliatory blessing)*, the *Kũrathima na mata* (blessing with saliva)*, Kũrathima na Iria* (blessing with milk) and *Kũrathima na Ũũkĩ na Ũgĩmbĩ* (blessing with honey and millet grains), the pastoral care givers could arrange how both the PLWHA who are facing death and their families could bid farewell to one other. In this respect, the pastoral care givers should also discuss and plan with the PLWHA issues concerning their money, property, or goods so that those things go to the right people when they die. The act

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includes helping them to write down legally how they wish their property and goods shared among their children and family members when they die.[324]

Besides the above rituals, the pastoral care givers may consider the use of a "memory box" as a tool for helping both the PLWHA and their families to plan and prepare for death in a formal way. In this case, both the PLWHA and their families need to be helped to create a container to store their oral message in a transcribed form and any other items that they consider important to the families in future. The container may be made of plastic or wood and once the box and the transcription of the interview are ready, the box could be filled with items such as a booklet containing the family history, photographs, family trees, audio cassettes capturing singing and messages, the audio tape of the interview, letters from parents, caregivers or children, and children's drawings.

Another option is for the PLWHA, especially those who are parents, to place information in the memory box, which contain what the children were like when they were younger, letters to each person in the family, the kind of people they hope their children would grow up to be and the values they would hold. Other information may concern the family health history, inheritance information (what the children or the spouses are entitled to when the person dies), and photographs of themselves, their home, and their children. As in the case of the *Kũrathima kwa Horohio (*reconciliatory blessing), the *Kũrathima na mata* (blessing with saliva), the *Kũrathima na Iria* (blessing with milk) and the *Kũrathima na Ũũkĩ na Ũgĩmbĩ* (blessing with honey and millet grains), the memory box could provide the family with a record of the life of the PLWHA, as well as a solid object representing their love (cf. inheritance). It may also facilitate supportive family relationships, which may lead to bonding and attachment. It may eventually foster an appreciation of one another, bringing forth positive aspects of each family member, giving positive statements and appreciating family profiles (i.e., beliefs, values, emotional warmth and support).

6.14.4. Methods of burial and funeral rites

The Agĩkũyũ's concept of death is also perceived through funeral rites and the methods used in disposing of the dead body. While some African communities bury their dead inside the

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[324] It should be noted that majority of Agĩkũyũ people do not write their will because they prefer expressing it verbally. It is supposed to be part of their final words before they die as seen in the rituals of *Kũrathima kwa Horohio (*reconciliatory blessing*)*, *Kũrathima na mata* (blessing with saliva)*, *Kũrathima na Iria* (blessing with milk), and *Kũrathima na Ũũkĩ na Ũgĩmbĩ* (blessing with honey and millet grains) (see Wachege 1992:61ff).

house where the person used to live and others bury them in the compound, the Agīkũyũ bury their dead near their homes. In the ancient time, the Agīkũyũ buried their elders in a grave dug in the bush near their village (Middleton and Kershaw 1972:60). The grave was dug by the first-born sons from different wives. The body of a man was buried on his right side with his hands under his head while the woman was buried on her left side. The body was then placed in or on an ox hide and buried facing Mount Kenya. The grave was circular in shape and the dead person's personal possessions were buried with him/her (Middleton and Kershaw 1972:60). Such possessions included their huts, which were dismantled and placed on top of the graves along with other personal items. It was assumed that such items would accompany them into the next spiritual world. The body of a person who was not an elder would be placed in the bush where he or she was left for wild animals and birds of prey to eat (Middleton and Kershaw 1972:60). Alternatively, the body could be left in huts and holes where hyenas could enter and eat the corpses (Middleton and Kershaw 1972:60; cf. Mbiti 1969:160). However, the latter practice was abandoned and, nowadays, both elders and young people are buried in wooden coffins as opposed to being wrapped in ox hides, and some are buried in a rectangular grave. As in the ancient Agīkũyũ times, most of those who die would be buried with their heads facing Mount Kenya.

It is important to note that because of the influence of Christianity, most people have stopped burying the dead with their possessions. For this reason, it is vital for the pastoral care givers to discuss with PLWHA how they would like to be buried and to advise them to write it in their will. After death, the pastoral care givers should also discuss with the family the type of liturgy they would prefer during the burial of their loved ones. In the Anglican Church of Kenya, two liturgies are in use. The new liturgy has an elaborate ecclesiastical funeral and burial rites, which recognise those who have died of HIV and AIDS (ACK 2003:176-180). The uniqueness of this service book, compared to the 1562 edition inherited from the Church of England, is that it contains various litanies, which can be used for various burial types. The prayer book contains the following order: procession to the place of burial service, opening service, opening sentences, greetings and statement of purpose, litany and psalmody, eulogy, reading of Scripture, sermon, prayer and intercession, anthem, procession to the grave, Scripture sentences, consecration of the grave, committal, blessing and dismissal (ACK 2003:164-181). The prayer said during the burial of one who has died of HI virus states:

> Lord we thank you for… We are sad that he (sic) had to suffer so much from the illness
> that afflicted his (sic) body. We agonised as we helplessly watched him (sic) fight for

dear life. We are thankful that he (sic) does not have to suffer any more because he (sic) is finally released from the pains and suffering of this life and is united with you and the angels in glory. While we prayed and wished for his (sic) physical recovery, we knew you had the perfect plan for him (sic). We have no doubt now that you have healed him completely, never to suffer these earthly pains or live in constant fear of death. Death is conquered indeed. We thank you for all who cared for him (sic). Bless the efforts of the doctors who work so hard looking for new knowledge to cure diseases and prolong lives. (Help us to be responsible stewards of our lives and to guard against dangerous behaviour that can harshly cut short our years on earth). Through Jesus Christ our Lord. Amen (ACK 2003:176).

The service prayer book is also unique in that it stipulates that, "Any traditional custom, or way of placing the body, which is not repugnant to Christian faith can be incorporated in the service" (Anglican Church of Kenya 2003:164-164). In other words, it recognises various traditional burial methods and funeral rites of all the communities in Kenya. The book also encourages church ministers to escort the bereaved family back to their home after the funeral, and stresses the need for pastoral care to them before and after the funeral. On the other hand, the book prohibits retrogressive traditional practices, which encourage expensive burials. Thus, it recommends that the resources of the bereaved families should not be consumed by mourners. Perhaps the Anglican Church of Kenya came to this conclusion after realising that funerals in Kenya have been turned into an expensive enterprise by some people. For instance, after the person dies, the body is kept for many days in the morgue to allow time for *Harambee* (fund-raising). This is particularly common in urban areas, for many people prefer to bury their dead in the rural homes (according to the custom), instead of in the urban cemeteries. For that reason, a lot of money is spent on the transportation of the body and mourners to the rural area. Much money is also spent on food that is prepared before and after the burial.

6.14.5. Encounter between Agĩkũyũ eschatology and the Christian eschatological hope

The study of eschatology in African traditional life is a fairly recent one. In his two books, Mbiti (1969) and (1988) opened the gateway for eschatological studies in the African context. Mbiti's concept of time is the basic intellectual framework through which he interprets African life and eschatology. He comes up with the theory that a society with an indefinite future in its time reckoning is bound to have developed eschatological beliefs. According to the Agĩkũyũ, when death occurs, the dead assume the status of the ancestors. As ancestors, they become the protectors of the society as well as its most feared direct critic and source of punishment (cf. Magesa 1997:48). In other words, they become the direct watchdogs of the moral behaviour of the individual, family, clan and entire community (cf. Mbiti 1969:125). The uniqueness of the Agĩkũyũ ancestors is that no serious misbehaviour or anti-life attitude among their descendants, in

thought, word and deed, escapes their gaze. They are "authority figures, who maintain the norms of social action and cause trouble when these are not obeyed" (Magesa 1997:48). Therefore, their roles are considered as relevant and inevitable and there is no end to the interwoven relationships between them and the living, for they make up a continuous process that has no end. The community notion of eschatology is that when they die they would be remembered through the visible inheritance that their descendants would receive from them and by naming their children after them (Wachege 1992:42; cf. Magesa 1997:63). [325] Their living wives or husbands would continuously be linked to their names.

Thus, the community would keep on referring to their wives as "*A tumia a mwendwo nĩ irĩ* (wives of the beloved) and to their children as "*ciana cia mũtigairĩ*" (children of the late so and so) (Wachege 1992:42). Likewise, their names and their outstanding work (their contribution to their society when they were living) to the community would be transmitted from generation to generation through narratives that praise them or through ceremonies. During these ceremonies, they are remembered by family members who slaughter a goat. As they eat the meat, they would declare that it is done in the memory of their dead (Wachege 1992:42). When the goat is slaughtered, the family would pour some of its blood as libation to the ancestors along with *Njohi* (traditional brew). As they pour the blood on the ground, the family members would mention the name of the departed, offering him/her the drink (Wachege 1992:42). This is regarded as a ritual that should be performed every time there is a feast. The Agĩkũyũ interpret this as extending *Ũtugi* to their ancestors *(maguuka)*.

Of concern to the pastoral care givers, is a situation in which some of the PLWHA die with no children of their own, for one of the qualifications of becoming an ancestor in the Agĩkũyũ tradition is having children (Mbiti 1969:108; cf. Mugambi 1989c:204). In fact, this becomes an existential threat when they realise that, without children of their own, nobody in the community will remember them after they die. This is a real challenge in the context of HIV and AIDS pandemic because the majority of those infected with the HI virus in Kenya are young people who are not yet married. Therefore, their deaths invade and disrupt the privacy and culture of dying in the Agĩkũyũ culture. Certainly, these deaths affect the whole community in a deeply personal way because of the wide network of kinship relationships

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[325] The Agni people of Côte d'Ivoire (Ivory Coast in West Africa) believe in reincarnation. They give a firstborn son the name of their parent's grandfather; a first born girl takes that of their maternal grandmother. Other children have the names of brother of the paternal grandfather, and girls those of the sisters of the grandfather of the sisters of the child's father. If a child's father dies while his wife is pregnant, the baby when born will take its father's name (Parrinder 1951: 118-119).

within the community (cf. Mbiti 2009:162-163). Furthermore, the deaths sadden the whole community because dying without children of one's own is interpreted as a gesture of exclusion from the communion of ancestors, and realising that they will never be venerated by the next generation now becomes an existential and pathological threat to them.[326] Mbiti (1988:254) observes that among the Luo of Kenya, when a girl dies before she is married the community would bury her outside the homestead, as it is believed that she has no place within her home. Worse still, if at death she was found to be a virgin, her virginity would be broken by an elderly woman before she is buried. This is because the community believes that her spirit would return to cause trouble in her home if she is buried with her virginity (Mbiti 1988:254). For this reason, there is need for the pastoral care givers to be acquainted with such challenges, which face those dying young in Africa.

It is also important for the pastoral care givers to be familiar with the African understanding of eschatology. It should be noted that although the PLWHA may fear death, which has sneaked into their lives, in the Agĩkũyũ eschatology, death is regarded as a departure from this life to the world of the living dead (ancestors). In other words, death is not the annihilation of a person (Mbiti 1969:159, 155; cf. Nkurunziza 1989:87; Mugambi 1989c:204 Moila 2002a:68), but an inevitable event that mark the entrance into the realm of ancestors. It is from this perspective that the Agĩkũyũ people do not talk of "so and so is dead", for that is termed as speaking disrespectfully or rudely. The Agĩkũyũ see life in death and, as a result, they are reluctant to call death by name. They would say so and so *"nĩarainũkire thayũ"* (calmly returned home); "*nĩaramamire kuraga"* (has slept where the rains never stop); *"nĩarathire kũgaya ng'ũndũ"* (has gone to get his portion of land); or "*nĩarathire gũkora maguuka*" (has gone to join our ancestors) (Wachege 1992:30).[327]

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[326] After the death of an unmarried person, traditionally, he or she is not accorded the final ceremony, which is normally given to those who were married, yet, this ceremony is important because it symbolizes that he or she is victorious over death. Therefore, failing to perform this ceremony for the unmarried person means that he or she has been conquered by death and would never be recalled or ceremoniously invited back into the human family.

[327] These concepts show that people are concerned with death. Mbiti (1969:159) has described how various communities in Africa regard death. For instance, among the Basoga, when a person dies, they say, 'he has breathed his last', 'he has kept quiet', he has gone', he has gone down to the grave', 'our friend was told by death to tie up his load and go', 'he is dry as if from yesterday', or 'life was snatched into two like a bristle stick.' When an old man dies, they say 'it is fair, he has died, he has eaten enough'. Of the death of a murderer or witch, they say, 'let him go, he has finished his job, another mouth has gone away.' Concerning someone who is not liked, people say that death (Walumbe) 'has beaten him', has made him finish food', has made him sleep or lie down', has made him go far away', or 'death has cut him down or forced him down.' Mbiti (1969:159) also notes that, among the Abaluyia, death or dying is described as: "sleeping' (for an old man, who dies peacefully), 'falling by oneself' (if it through suicide), 'stepping into the sheet' (since the body is wrapped or covered with a skin or banana leaves before but not for burial), 'wearing a sweater'(if killed by another person), going to the place of the dead' 'going home'; and for a hated person, 'looking for an exit' or 'lifting the leg." The Akamba use term such as "to follow the company of one's grandfather', to go home, to stop snoring, 'to be fetched or summoned', 'to empty out soul', 'to sleep for ever and ever', 'to dry up, wither or evaporate', to pass away', 'to be called', 'to reject the people', 'to reject food', 'to be received or taken way', 'to return or go back', 'to terminate, be finished or end', 'to have one's breach come to an end', 'to depart or go', 'to go where other people have gone', 'to leave, forsake or abandon', 'to collapse, come to ruins', 'to become God's property', 'to have a miscarriage' -for a person who dies at an early age (see Mbiti 1969:159).

It is interesting to note that the Agĩkũyũ do not regard the afterlife in terms of punishment or reward. Rather, the afterlife is seen as only a continuation of life, more or less, as it is in the present form. What this means is that the community sees afterlife as a space and a place where their personalities, sex distinctions, socio-economic and political statuses would be retained and their human activities reproduced (cf. Mbiti 1969:161; 1988:264). The Agĩkũyũ's understanding of the afterlife is seen, therefore, as a carbon copy of the present life even though the soul is separated from the body. For them, what is important, in the real sense, is not the afterlife as such but hope in the way they would continue to be involved in the present life of the living after death. That is the reason there is little emphasis on the nature of the afterlife, immortality, final judgement or blessing. The community believes that if there were any judgement, it would come in the course of one's earthly life (Mbiti 1988:259). Unlike the Christian understanding of eschatology, Agĩkũyũ eschatology sees the universe as that which consists of two aspects, the visible and the invisible (or the physical and the spiritual) and, in their world-view, the duration is seen as continuous with no break in actual events here and now (cf. Mugambi 1989:143).[328]

Agĩkũyũ eschatology does not focus on a distant and transcendent future, but focuses on the "past (*Zamani*) and the present (*Sasa*)" in cyclical way (see Table 6.14.5.1; cf. Mbiti 1969:15-28).[329] This means that the afterlife and the concept of personal immortality have meaning only in relation to the present life of the living community. As we have seen above, the eschatological hope enables one to enter into a world of ancestors (living dead) and to receive libation from the living relatives routinely (Mbiti 1988:269; cf. Diop 1964:25; Mbiti 1969:125; Moila 2002:68). In return, the ancestors protect the living relatives from adversaries and possible calamities. If the ancestors are forgotten, they may attack the living relatives by sending sicknesses as a way of reminding them of their duties.[330]

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[328] According to the Agĩkũyũ world-view, God and all other ontological entities exist on earth and live without end. Although there may be a shift in the mode of existence, both the visible and the invisible continue to exist on earth. As such, the Christian view of eschatology, which was introduced by missionaries through indoctrination is new. While some people accept the new world-view and have abandoned the old one, many continue to hold on to the old (cf. Mugambi 1989a:143).

[329] Mbiti (1969:15-28) considers the traditional African concept of time from an ontological perspective. He argues that the concept of time may help to explain beliefs, attitudes, practices and the general way of life of African people (Mbiti 1969:15). For Mbiti (1969:15), the African time is two-dimensional, with a long past and a present. He argues that a linear concept of time with an indefinite past, the present and an infinite future is foreign to the African thinking in which the future is absent apart from the present, i.e. up to two years. Using two Kiswahili words, Mbiti (1969:15) calls the two time dimensions *sasa* and *zamani*. He claims that both of them have quality and quantity and that the *sasa* period refers to the events that have just taken place, are taking place at the moment or are just about to take place in the near future. This implies that the *sasa* period could extend into the future for about six months or, at the most, one year. However, the *zamani* period overlaps with the *sasa* time, to some extent in the present, but it also goes far back into the past. Thus, zamani absorbs, holds, and stores all the events that have ever occurred for it is more significant than *sasa* because it stretches endlessly into the past. Mbiti (1969:16) claims that the *zamani* includes the time of myth when all the stories of creation took place and when the great and famous heroes of the past performed their exploits.

[330] Many cultures in Africa see death as the final major rite of passage. When death occurs, some of the Luo, Wataveta, Wataita, Wakamba, and Baluya communities in Kenya eat and drink as a way of celebrating the life of the departed person who is believed to have gone to the spiritual world. Mugambi (1989a:204) explains that death symbolises the transition from the "physical mode to the spiritual mode of

Table 6.14.5.1: Summary of encounter between Agīkūyū and the Christian worldview

HIV and AIDS context	Agīkūyū worldview	*Ũtugi* model	Christian worldview	Pastoral care intervention
Soteriological (change)	**Liberation**: from poverty and illness. **Right relationship:** with *Ngai,* ancestor and community. **Taboos**: responsible choice of behaviour (ethos and ethics). **Helping**: the sick, orphans and the dying.	Prevention, VCT, healing, availability of ARVS (ARVS as a symbol or image or category in redemption); address stigma and discrimination, support group, compassion, reconciliation, restoration, justice, human dignity, forgiveness, God – images in cultural setting,	**Jesus is the only way**: In him humanity receives salvation: a new state of being (becomes a new creation 2 Cor 5:17), redemption and resurrection; (responsible choice of behaviour – Christian ethics.**Freedom/deliverance** *Soteria* :a condition of redemption as the outcome of justification (being saved and deliverance, freedom from evil and sin); A person is integrated into the body of Christ, *koinonia* (**Healing and salvation**: connected to pneumatology;	Prevention,VCT, healing, availability of ARVs (ARVS as a symbol or image or category in redemption),provide support group, compassion, restoration, justice, uman dignity, forgiveness, unconditional love, *provide hospitality* to the PLWHA so as to help them shift from their positions of existential threats to a position of meaningful life with hope and transformation.
Eschatological hope (*Mwĩhoko)* **(anticipation)**	**Entering into a world** of the ancestors (living dead) and outinely receiving the libation from the living relatives; (renamed and remembered) continuation of life as it is in the present form, death is not an annihilation of a person; *Zamani* and *sasa*.	**Cultic dimensions**; assuring, memories (harmonious existence between the living community and the dead (ancestors), affirmation.	**The promise of God**: A meaningful life; the four last things- death, judgment, heaven and hell; the Day of the Lord; the kingdom of God *(basileia tou theou)*; survival of the soul; resurrection of the body (victory over death as a result of God's involvement with death), the rule or sovereignty of God.	**The presence of the kingdom of God;** cloud of witnesses (saints), affirmation.
Ecclesiological: Empowerment and mutual support; The role of the faith community.	**Communion** with ancestors; the role of dreams, drama, ritual, symbols, , creative art, drama and sculpture in healing (growth and communal life)	**Pastoral action:** Address the issue of: patriarchy, hunger, health care, housing, education, unemployment and stigma, injustice, healing, gender issues.	**Communion of saints**; sacraments; community services (*koinonia* and *diakonia) (*growth or sanctification) Live by the Spirit (the fruit- love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control (Gal. 5: 16; 22-23).	**Pastoral action**: address the issue of patriarchy, hunger, health care, housing, education, unemployment and; stigma, gender issues; Spiritual healing .

This means that, hope is experienced when there is harmonious existence between the living community and the dead (ancestors), for both depend on each other. This relationship has

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existence." Just like the Christian faith, African belief does not view death as the end of human life. It is no wonder that Martin Luther King described death as "a democracy for all of the people..." It is a "comma that punctuates life to more lofty significance" (Mutugi 2001:54). Hence, "death is not a blind alley that leads the human race into a state of nothingness, but an open door which leads" humanity into life eternal (Mutugi 2001:54). This view is well cemented in African cosmology.

powerful moral, religious and psychological dimensions and it plays a decisive role in the everyday life of the Agĩkũyũ people.

From the above, we can draw a number of conclusions concerning Agĩkũyũ eschatology: (a) First is that, the Agĩkũyũ perceive the dead person as joining the company of the departed, and the only major change is the decay of the physical body while the spirit shifts to another state of existence. This means that the human life is not terminated by death since the community regards life as an endless continuum, and as a transition (Diop 1964:25; cf. Mbiti 1969:125; Dickson 1984:193. (b) Second, they regard the dead person as going 'home', for in this life, people are on a pilgrimage to the real "home', which is the afterlife. This implies that the community members see themselves as in transit from the terrestrial world (physical life) to the celestial world (spiritual life). (c) Third, the community appreciates that death is an individual affair that also affects the whole community, and nobody can obstruct it nor cure it. Therefore, deaths as rites of passage connote meaningful transformations in the life cycle.

When dealing with the PLWHA in their last stage of life, the pastoral care givers should consider exploring both Agĩkũyũ eschatology and Christian eschatology (see Table 6.14.5.1). In fact, the Christian eschatology is crucial to the PLWHA, who are dying unmarried or young, for it offers them the hope of new life beyond death.[331] The remembrance of Christ's journey to death and through death to resurrection is at the heart of the Christian faith and it is in line with theology of eschatological hope. A theology of hope addresses those old questions about the purpose of life and the meaning of death; and Christian answers to those questions proceed from Jesus' death and resurrection. The Christian hope depicts a new state of being, salvation and resurrection. Therefore, if by faith, the PLWHA appreciate the resurrection power of Jesus Christ who guarantees life, which cannot be destroyed by the HI virus, then all those who dies, unmarried or married, old or young could be assured of life. Louw (2008:546) affirms that, "hope in resurrection has no opposite. For life and for death it is connected to the content of faith: the faithfulness of God. The principle in pastoral care for

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[331] Richard D. Dobbins understands death and dying in the following terms: **Real**-Life has two terminal points, birth and death, and if we are going to prepare for death and dying realistically, we must acknowledge that just as there was a time when we came into this world, there will be a time when we leave this world. **Inevitable**-somewhere between the morbidity that some people have and being preoccupied with the whole process of death and dying, there is a good, wholesome reality where we realize death and dying are part of living. **Personal**-It is not easy to see death as personal. We know that we will die someday, but we have an uncanny ability of seeing it happening to everyone but us. **Providential**-Death is providential, which simply means that God is in charge of it. (God) was in charge of our birth. Realizing that (God) is in charge of our death lessens the anxiety of dying: "*Yea, though I walk through the valley of the shadow of death, I will fear no evil: for thou art with me*" (Psalm 23:4). **Not Terminal**-Believers are looking forward to the coming of the Lord: "*For the Lord himself shall descend from heaven with a shout, with the voice of the archangel, and with the trump of God: and the dead in Christ shall rise first: Then we who are alive and remain shall be caught up together with them in the clouds, to meet the Lord in the air: and so shall we ever be with the Lord*" (1 Thess 4:16-17) – see http://www.ninetyandnine.com/Archives/20060626/ephemera.htm-8th May 2010.

the dying is a theological statement about life and hope: not where there is life there is hope, but where there is hope, life flourishes." Louw (2000:75) sees the Cross of Christ and the cross of the Christian as belonging together, for the Cross of Christ reveals the nature (the how) of the relationship between God and humanity. He claims that Christ's suffering cannot be separated from God's suffering, for it is a discovery of divine identification, which has shed new light on the human quest for meaning in suffering (Louw 2000:76).

Traditionally, the Christian notion of eschatology revolves on the theme of judgement, heaven (life lived freely in the presence of God) and hell (deliberate alienation from God - the eschatological partner of death) (see Table 6.14.5.1). While some theologians see it as inappropriate categories of thought for contemporary theology, the issues of heaven and hell have remained a part of the Anglican doctrine. Therefore, it is difficult for the dying Anglicans to ignore its place in terms of eschatology. However, in an attempt to re-interpret it, some see the suffering (horrors) witnessed in our world (e.g. HIV and AIDS, the gas chambers of Auschwitz, August 7, 1998 terrorist bombing in Nairobi by Al-Qaeda)[332] as the hell that has visited us. Hence, they claim that there is no need of another hell. It is from that background that theologians of the *Kreuztheologie* movement (e.g. Moltmann) have called for a theology that can directly respond to the issues of hell in our time. Moltmann (1974:211-214) is of the view that God is most clearly seen as God on the Cross, which is a paradigm for all human suffering and death. Of course, Moltmann's perspective was influenced by Luther's *theologia crucis*. Likewise, Norman Pittenger (1970:23), one of the proponents of *Process Theology* suggests that God cannot turn a blind eye to what is wrong with things, for that would be sentimentalising God's love, whereas it is precisely this "appraisal" that gives humanity the hope of salvation. The above implies that, without God's direct involvement, human life is without hope and without fulfilment. As such, the Cross of Christ creates a vivid understanding of Christian hope, for it identifies God in human suffering; an event that challenges all attempts to spiritualise the meaning of salvation.

From the Christian perspective, the power of resurrection is the central image of hope and the concept of the resurrection of the dead cannot be separated from the quest for the realization of the salvation of God, which brings justice and life. For Louw (1998:59) eschatology links the two concepts of death and life, and fear and hope with the cross and the resurrection. This

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[332] Al-Qaeda is an Islamic extremist organisation that claimed responsibility for the bombing of Nairobi in August 1998.

implies that the relation between the cross and resurrection is complete, when the resurrection message focus to the eschatology of the cross. Therefore the understandings of the Agĩkũyũ and the Christian's worldview from the perspective of soteriological, eschatological hope (*Mwĩhoko),* and ecclesiological is crucial to pastoral care givers and the PLWHA. This is summarised in the table 6.14.5.1 above. Concerning hope for life after death and liturgy of life Louw (2008:544) explains that:

> [It] depend on one's understanding of eternal life and heaven. Theologically, eternal life implies a unique quality of life guaranteed by God's faithfulness. Eternal life is the infallibility of God's grace as proven in Jesus Christ's death and resurrection. Life hereafter is not a projection of our passion for permanence. Eternal life is part of the promises of a living God. How it will be and exactly what it is, we do not know. The shortest formula for life hereafter and eternal life is: communion with God.

From the Christian perspective, life is what conquers death and instigates an eschatological hope. As such, those who die in Christ are able to die peacefully, meaningfully and with dignity, for they perceive their entire lives as complete. For them, death is an entry into enternal life together with Christ who annihilated death. Death becomes life in the fullness of an encounter with the resurrected Christ, and the sting (destructive power and absolute finality) is removed from death (1 Cor 15:55) (see table 6.14.5.1). Therefore, when dealing with the PLWHA at their last stage of life, the pastoral care givers should explore the unseen dimension of true life or life beyond death, and help them to interpret it as an eschatological event.

6.15. Conclusion

This chapter has attempted to formulate a praxis theory for pastoral care and counselling to the PLWHA and their families, which is based on the basic elements of *Ũtugi*. Drawing from Louw's existential model for Christian spiritual healing, the chapter has evaluated *Ũtugi* as a model for healing. The chapter argued that the concept of *Ũtugi* could play a decisive role in the transformation of a theory for pastoral care to provide healing and a support system to the PLWHA and their families. It has been shown that the principles of *Ũtugi,* which could offer a praxis theory for pastoral care and counselling to the PLWHA and their families include love, care, nurturing, accommodativeness, compassion, welcome, appreciation, forgiveness, encouragement reconciliation, protection, restoration, rehabilitation, enjoyment, justice, support, sharing, togetherness, inclusiveness, socio-economic (*Harambee*) empowerment, and harmony with *Ngai* (God), ancestors and community solidarity. The above elements of *Ũtugi* could enable the PLWHA and their families to shift from their positions of existential threat to a position where they could experience more meaningful lives with hope and transformation. It has been affirmed that:

(a) With the element of *Ũtugi,* which shows love, care, nurturing, protection, accommodativeness, welcome, sharing, reconciliation, togetherness, inclusiveness and compassion, the PLWHA and their families could be helped to shift their existential position of anxiety, rejection and stigma to a position of intimacy and being loved and, of self-actualisation.

(b) With the element of *Ũtugi* that stresses forgiveness, welcome, encouragement, reconciliation, protection, sharing, restoration, justice and rehabilitation, the PLWHA and their families could be helped to shift from their existential position of guilt and shame to a position of freedom and deliverance (liberation).

(c) With the element of *Ũtugi* that accentuates appreciation, enjoyment delight, justice, reconciliation, capacity building and socio- economic empowerment, the PLWHA could be helped to shift from their existential position of anger and disillusionment to a position of fulfilment, direction and transformation.

(d) With the element of *Ũtugi* that emphasizes togetherness, accommodation, inclusiveness, sharing, belongingness, welcome, and harmony with *Ngai* (God), ancestors and the community, the PLWHA and their families could be assisted to shift from their existential position of doubt and despair to a position of anticipation of hope and meaning of life.

(e) With the element of *Ũtugi* that gives prominence to sharing, belongingness, fellowship, protection, rehabilitation, compassionate care, togetherness and inclusiveness, the PLWHA and their families could be helped to shift from their position of helplessness and vulnerability to a position where their physical needs are met (through support systems).

The chapter noted that the existence or absence of suffering in the life of the PLWHA would depend on the four anthropological features:
    (a) their disposition,
    (b) their attitudes towards life,
    (c) the degree of maturity and
    (d) the nature of their affliction.
The chapter also unveiled how the anthropological components of the affective, cognitive, conative and normative stages could help the pastoral care givers to assess and explore the

existential threats facing the PLWHA and their families. It affirmed that in the first stage of the affective component, *Ũtugi* could play a decisive role in creating a space for healing through characteristic features such as welcome, reception and embracement of one another, which symbolise friendship, closeness, affection and togetherness. In the second stage, which is the cognitive component, it has been proposed that the *Kĩrĩra Kĩa Mũciĩ* entrenched in *Ũtugi* could help the pastoral care givers to evaluate the thought contents of the PLWHA and deconstruct their oppressive narratives (the irrational ones). The chapter further revealed that the way the PLWHA respond to the existential threats would be determined by the quality of the maturity of their faith, the content of their belief system (worldview), the normative dimension of their life, the value system, and the nature of their relationships with God, friends, community and environment. Concerning the third stage, the conative component, we have argued that the *Ũtugi* paradigm could play a crucial role in creating a space for empowerment and mobilising the community to take action in the care for the PLWHA and their families. It has been affirmed that there is a need for pastoral care givers to consider the enhancement of networking, connectedness and the relationships of the PLWHA with the wider community. This includes encouraging behaviour change, interaction and mutuality within their community.

In the fourth stage, the normative component, the focus is on values, fostering true discernment and an understanding of the will and presence of God. This stage is *telic* and is geared towards helping people to apply their resource of faith for more purposeful action while it is involved in exploring meaningful anticipation and purposeful transcendence as a way of encouraging the process of imparting and receiving meaning, which is stimulated by growth in faith. The chapter has enabled us to consider *Ũtugi* as a potential healing tool, which the pastoral care givers can use to complement other types of counselling when dealing with the PLWHA in the church. To this end, the chapter has prepared us for the conclusion of the whole study, to which we now turn.

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CHAPTER SEVEN

CONCLUSION AND RECOMMENDATIONS

7.1. Introduction

From the onset of this study, we have endeavoured to examine the concept of *Ũtugi* in relation to the HIV and AIDS pandemic and its contribution to the ecclesial praxis of the Anglican Church of Kenya. This concern has arisen out of the need for the Anglican Church of Kenya to marshal *Ũtugi* (traditional resources) to complement the Christian hospitality (church resources) in the fight against the HIV and AIDS pandemic. By employing a hermeneutical tool as a praxis approach to pastoral care and counselling to interpret theological and the Agĩkũyũ cultural concepts and by using a non-empirical research method (a qualitative research) based on conceptual analysis, which was enriched by a participatory observation method of fifteen years of active pastoral ministry, and by using pastoral care and counselling to dialogue with social, cultural, political and historical events, the study has explored critically the role of *Ũtugi* in the context of HIV and AIDS and its appropriateness as a tool for pastoral care and counselling in the Anglican Church of Kenya. The study has attempted to answer the following research question: In which way could the Agĩkũyũ concept of *Ũtugi* be used to create a healing space and to reframe the prevailing ecclesiological paradigms applied by the Anglican Church of Kenya in order to be relevant and contextual in her endeavour to respond to the challenges posed by the HIV and AIDS pandemic in the twenty-first century? This final chapter will provide a summary of the research findings before giving some suggestions and recommendations.

7.2. Summary and research findings

The first chapter was an introduction, which launched the study by providing the background, the statement of the problem, limitations of the research, objectives, methodology, hypothesis, research ethics, conceptual analysis, the definition of terms and the chapter's outline. Presented below is a summary of the discussions in the last five chapters as well as the findings from the study.

7.2.1. Chapter Two

The second chapter is a discussion of the context of the HIV and AIDS pandemic in Kenya, and in Africa, in general. It identified and diagnosed the reality of the HIV and AIDS pandemic in the Kenyan society and affirmed that the pandemic has permeated practically

every dimension of the Kenyan life. As a result, many people are affected psychologically, spiritually, physically, socially and economically. It has been argued that there are some cultural practices of the Agĩkũyũ such as *Ũtugi* that need to be encouraged and reinforced, for what they teach are fundamental to human dignity and are not detrimental to the prevention of HIV and AIDS. It was noted that such traditional resources could complement Christian resources such as the Christian hospitality. The study revealed that in Kenya:

(a) Stigma and discrimination, which thrive within the community, are two of the factors that facilitate the spread of the HI virus. Both result in social injustice and expose the most marginalized members of the society to greater vulnerability.

(b) The HI virus is also transmitted through sexual intercourse, as well as through *Mother to Child* mode; but women are susceptible because of their physical and biological make up.

(c) The HI virus spreads faster in the context of other 'viruses' such as poverty, gender inequality, violence, human rights' abuse, child abuse, ethnic conflicts, national and international injustice, discrimination against women, bad politics, poorly managed healthcare and delays in offering antiretroviral treatment.

(d) The HIV and AIDS pandemic has forced the church and the society to question their attitude towards women for they are the most marginalised group in the Kenyan society.

7.2.2. Chapter Three

The third chapter outlined the mythological factors, history, nature, characteristics, meaning and principles of *Ũtugi* (a traditional resource) among the Agĩkũyũ. The discussion demonstrated how *Ũtugi* was used from ancient times, through the colonial period, to the post-colonial period of the Kenyatta, Moi and Kibaki eras. A background description was provided of the centrality of *Ũtugi* in the cultural, social, political, economic, moral and religious practices of the Agĩkũyũ. The study found that:

(a) Through *Ũtugi,* the communities in Kenya are capable of sharing their scarce resources, thus, revealing a wealth and richness, normally underrated by the church in her fight against the HIV and AIDS pandemic.

(b) As an indigenous paradigm, *Ũtugi's* components of love, care, nurture, accommodativeness, compassion, welcome, appreciation, forgiveness, encouragement, reconciliation, protection, restoration, justice, rehabilitation, enjoyment, justice, capacity building, support, sharing, togetherness, inclusiveness, socio-economic empowerment

(through *Harambee*), and solidarity are capable of creating the physical, social, economical, psychological, moral and spiritual support systems needed to bring healing to the PLWHA and their families.

(c) *Ũtugi* is entrenched in *Kĩrĩra Kĩa Mũciĩ* (family education) and it permeates all sectors of life making it difficult to distinguish between its sacred and secular dimensions.

7.2.3. Chapter Four

The fourth chapter traced the practice of the Christian hospitality (church resource). It explored the meaning, the linguistic root and the role of hospitality in the Jewish, the Greek and Roman societies. The discussion described the different dimensions of hospitality in these cultures. Hospitality was practiced as public hospitality (state hospitality), temple hospitality (designed to facilitate pilgrimages to holy places), commercial hospitality (that enabled travellers to obtain food and lodging for a fee) and private hospitality (a moral virtue). As in the case of *Ũtugi,* where the woman's hut is used as a place of communing with *Ngoma* (ancestors) and *Ngai*, it has been noted that Jewish, Greek and Roman *theoxenic* hospitality is common where human beings provided hospitality to God, gods, heroes and various semi-divine guests.

Furthermore, the ancient Christian hospitality was enormously influenced by ancient Jewish, Greek and Roman societies, although the Christian hospitality was reconfigured by Jesus to include the sick, the injured, widows, orphans, sojourners, strangers, the aged, slaves, prisoners, the poor and the hungry. The reconfiguration became the theological basis for adopting an inclusive model, which enabled the Early Church to interculturate hospitality in her ecclesial praxis. From this angle, it could be regarded as a praiseworthy virtue, a gift of the spirit and a charismatic act impelled by that love, which constitutes the special gift of divine grace by which the covenant community of the New Israel is built up and perfected (cf.1 Cor 8:1; 12:7; Eph 4:12; Col 3:14; 1 Pet 4:10).

It was further noted that the Christian hospitality, as practiced in mainstream Christianity, was reconfigured differently in different eras. During the time of Emperor Constantine, it was reconfigured from caring for the vulnerable to a public service that was institutionalised, systematised and integrated in church institutions. In the postmodern world, it shifted to include care for the vulnerable in separate institutions with professionals who provided paid

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services. This shift was a departure from ancient Christian hospitality, which had the community and the household as its foundation. The study also found that:

(a) Both the ancient Christian hospitality and *Ũtugi* advocate respect for human dignity and focus on the empowerment of the underprivileged.

(b) The Christian hospitality is a biblical, religious, theological and ecclesial resource, which could be complemented by *Ũtugi* to fight the HIV and AIDS pandemic in the Kenyan context.

(c) As a social phenomenon, the basic foundation (framework) of the Christian hospitality is *koinonia* (κοινωνία). It entails fellowship, sharing in common or communion, community, partnership, participation and solidarity.

(d) Christian hospitality is best practiced within the *Body of Christ* where there is compassion, mutuality, radical welcome of all, which is determined by the Spirit.

(e) There are tensions and paradoxes, continuities and discontinuities between Christian hospitality and *Ũtugi*. In terms of continuities, the Christian hospitality and *Ũtugi* encourage: (i) The spirit of sharing, love, partnership, participation, appreciation and solidarity; (ii) accommodativeness, care, support, embrace, togetherness, inclusiveness, nurture, compassion, welcome, socio-economic and community solidarity; (iii) networking, reconciliation, restoration, forgiveness, and reorganisation of different gifts and talents, which are vital in the fight against the HIV and AIDS pandemic; (iv) justice, protection, rehabilitation, and enjoyment. Moreover, both the Christian hospitality and *Ũtugi* share a common vision of community and recognise the liberation of the vulnerable.

(f) In terms of discontinuities, the following observations have been made: (i) *Ũtugi,* unlike the Christian hospitality, is practiced by people who are biologically or genetically related (family members) in *Riikas* (age sets), *Mbarĩs* (families) and *Mũhĩrĩga* (clans); (ii) those who practice Christian hospitality are transformed and justified, hence, they have attained their qualification, not by birth as in the case of *Ũtugi,* but by virtue of dying and rising with Christ; (iii) the Christian hospitality is an expression of the gracious gift of God to humanity, unlike *Ũtugi*; (iv) the Christian hospitality is practiced by those who are members of the *family of God,* the partakers of the new life in Christ, who are initiated into a forgiving, accepting and healing community; For through Christ's death, resurrection and forgiveness, they are reconciled with God; (v) The love demonstrated in *Ũtugi* is based on the blood relationship within the same family, while that demonstrated

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in the Christian hospitality is based on the unconditional love that was exhibited by Jesus; (vi) Unlike the Christian hospitality, the practice of *Ũtugi* is based on the need for communal and societal "equilibrium" that demands a certain way of life (behaviour) and actions, which are enhanced by sanctions (taboos) and by means of certain measures of censure; (vii) Likewise, the "*body*" that practices *Ũtugi* carries the connotation of communal and social units while "the body" that practices the Christian hospitality is ecclesial - "the *body of Christ*"; (viii) Unlike in *Ũtugi*, those who practice the Christian hospitality are an eschatological community, the new creation led by the Spirit, which exists already in the present world (the church) and anticipates perfection in the age to come.

7.2.4. Chapter Five

The fifth chapter assessed the appropriation of *Ũtugi* as a tool for pastoral care and counselling in the Anglican ecclesial praxis. The chapter traced the origin of the Anglican Church of Kenya noting that with Kenya's independence, *Harambee* (a component of *Ũtugi*) was adopted by the Anglican Church of Kenya to augment her financial capital, as a result of which many health centres, hospitals, schools and churches were built. Furthermore, even though the church used *Harambee* to initiate the above programmes, it did not succeed in using *Ũtugi* as a tool for pastoral ministry due to her exclusive ecclesiological models, which were inherited from and heavily influenced by the Western philosophy that underrated local cultures and traditional heritage.

It was shown that the exclusive "top-down," hierarchical episcopal model, inherited from colonial Christianity that centralised power in the bishop, disempowered the congregation. Hence, the chapter called for the replacement of the above model with an inclusive ecclesiological model that could involve the whole congregation in the care of the PLWHA and their families. It is argued that *Ũtugi* could help the church to shift from the ecclesiological paradigms of exclusiveness to the paradigms of accommodativeness, sharing, inclusiveness and embrace. Thus, *Ũtugi* could help in reframing the existing ecclesial praxis of the Anglican Church of Kenya in the following ways:

(a) Through the *Ũtugi* component of *Kĩrĩra kĩa mũciĩ,* the church could deconstruct the institutionalized and internalized patriarchy, power imbalance and gender inequality within the church and society.

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(b) Through *Kĩrĩra kĩa mũciĩ,* the church could dismantle her dysfunctional ecclesial hierarchy of exclusivity and shift to a more inclusive one, which is not pyramidal but circular in nature. This is because an inclusive ecclesiology could facilitate the embrace, accommodation and appreciation of the PLWHA and their families.

(c) Through *Kĩrĩra kĩa mũciĩ,* the church could engage the whole community and the PLWHA in the HIV and AIDS prevention education programmes in order to help them make informed decisions concerning their lives.

(d) Through *Harambee,* the church could augment the physical, financial, social, psychological and spiritual capitals of the PLWHA and their families. With funds collected through *Harambee,* PLWHA and their families could be empowered with life skills, and obtain proper medical care and the starting capital for engaging in self-employment. In other words, through *Harambee* "group savings", credit and insurance programs for the PLWHA and their families could be organised. The children orphaned by the HIV and AIDS pandemic would be able to benefit also from the funds raised through *Harambee*. In this case, the PLWHA and their families would experience emotional support, motivation, affirmation, high self-esteem and self-perception, and spiritual strengthening.

(e) With the *Ũtugi* components that focus on care, love, nurture, co-operation, networking, interconnectedness, family support, friendship, partnership, collaboration, communality, participation and sharing, the Anglican Church of Kenya could construct an effective small support group system, *Home Based Care Programmes* and *Parish hospices*. These components would also enable the church to mobilise the congregation to become a community of care that offers adequate shelter, nutritional food, household tools and equipment, water and sanitation, and hygienic home-environment.

(f) With the elements of communality (solidarity), relationality, communal care, participation, networking and interconnectedness (relationality) in *Ũtugi,* the church could engage in advocacy, thereby, challenging government policies that directly or indirectly perpetuate injustice against PLWHA and their families.

7.2.5. Chapter Six

In the sixth chapter, we attempted to formulate a praxis theory for pastoral care and counselling to the PLWHA and their families using the basic elements of *Ũtugi.* The thesis endorsed Louw's existential model for Christian spiritual healing as an adequate tool for assessing the appropriateness of *Ũtugi* as a model for healing the PLWHA and their families. The study noted that:

(a) *Ũtugi* has the capacity to deal with the existential threat of anxiety, guilt and shame, disillusionment and anger, despair and doubt as well as the helplessness and vulnerability facing the PLWHA and their families.

(b) With the element of *Ũtugi* that shows love, care, nurture protection, accommodativeness, welcome, sharing, reconciliation, togetherness, inclusiveness and compassion, the PLWHA and their families could be helped to shift from their existential position of anxiety, rejection and stigma to a position of intimacy, acceptance and self-actualisation.

(c) With the element of *Ũtugi* that incorporates forgiveness, welcome, encouragement, reconciliation, protection, sharing, restoration, justice and rehabilitation, the PLWHA and their families could be helped to shift from their existential position of guilt and shame to a position of freedom and deliverance (liberation).

(d) With the element of *Ũtugi* that accentuates appreciation, enjoyment, justice, reconciliation, capacity building and socio-economic empowerment, the PLWHA could be helped to shift from their existential position of anger and disillusionment to a position of fulfilment, direction and transformation.

(e) With the element of *Ũtugi* that emphasizes togetherness, accommodativeness, inclusiveness, sharing, belongingness, welcome, and harmony with *Ngai* (God), ancestors and the community, the PLWHA and their families could be assisted to shift from their existential position of doubt and despair to a position of anticipation, hope and meaning.

(f) With the element of *Ũtugi* that gives prominence to sharing, sense of belonging, fellowship, protection, rehabilitation, compassionate care, togetherness and inclusiveness, the PLWHA and their families could be helped to shift from their position of helplessness and vulnerability to a position where their physical needs are met (support systems).

(g) With the element of *Ũtugi* that offers psychological, emotional, economic, social and spiritual support needed by the PLWHA and their families, *Ũtugi* could become a useful tool for healing and fighting stigma and discrimination associated with the HIV and AIDS pandemic.

(h) *Ũtugi* could be employed as a praxis theory for pastoral care and counselling that would provide healing and support systems for the PLWHA and their families based on its paradigm of love, care, nurture, accommodativeness compassion, welcome, appreciation, forgiveness, encouragement, solidarity, reconciliation, protection, restoration, justice, rehabilitation, enjoyment, justice, capacity building, support, sharing, togetherness, inclusiveness, socio-economic empowerment (through *Harambee)*, and harmony with *Ngai* (God) and ancestors.

(i) When developing a pastoral care and counselling model based on *Ũtugi,* the pastoral care givers should consider the anthropological component of affective, cognitive, conative and normative stages to enable the PLWHA and their families shift from their position of existential threat to a position where they could experience a more meaningful life with hope and transformation.

(j) At the *affective* stage, *Ũtugi* could play a critical role in creating a space for healing through such characteristic features as welcome, reception and embracing one another, which symbolise friendship, closeness, affection and togetherness.

(k) At the *cognitive* stage, the *Kĩrĩra Kĩa Mũciĩ* entrenched in *Ũtugi* could help the pastoral care givers to evaluate the thought contents of the PLWHA and deconstruct their oppressive narratives (the irrational ones). This is because the way the PLWHA respond to their existential threat is determined by the quality of the maturity their faith, the content of their belief systems (worldview), the normative dimension of their lives, their value systems, the nature of their relationships with God, friends, family and the environment.

(l) At the *conative* stage*,* the *Ũtugi* paradigm could enable pastoral care givers to provide the PLWHA with support systems, empowerment and community network, connectedness, behaviour change, interaction and mutuality.

(m) At the *normative* stage*,* the *Ũtugi* paradigm could help the PLWHA to foster and explore true discernment, meaningful anticipation and purposeful transcendence. This is because care and counselling, from the *Ũtugi* perspective, are not fragmented into separate stages, but they transcend all areas of life. As such, it is proposed in this study that *Ũtugi* could serve as a credible model for healing the PLWHA and their families, and the Anglican Church of Kenya could consider using it to complement Christian hospitality in her ecclesial praxis.

7.3. Suggestions and recommendations

As we approach the end of this research, we would like to make some recommendations and suggestions below.

7.3.1. Depatriarchalisation of patriarchy

Even though, in principle, *Ũtugi* is an inclusive practice in which the strength, gifts, talents and assets of individuals and communities are acknowledged and the contribution of each person is valued and recognised, it could be a big challenge to a society that practices and is

informed by patriarchy. Likewise, *Ũtugi* could be a challenge to communities where the social hierarchy excludes or marginalizes certain groups. For instance, women have been marginalised for a long time and they have suffered from cultural and spiritual imperialism, female circumcision, cultural and identity diffusion, poverty engendered by globalisation, neo-colonial structures, widowhood, inheritance laws, and the tragedy of the HIV and AIDS pandemic, among other issues. Therefore, further research needs to be done on the ways *Ũtugi* could be used to deconstruct the patriarchy that promotes the spread of the HIV and AIDS pandemic in Kenya. Such research should be aimed at helping the church to involve men in gender equality advocacy, and forging collaborations and alliances between themselves and HIV infected men in order to encourage other men to change their negative attitudes and behaviour towards women. Again, women should be empowered, economically, for the lack of economic power makes women easy prey to HI virus, oppression, exploitation, marginalisation, and discrimination, which result in gross injustice.

7.3.2. Power and inclusive participation

As a way of life, *Ũtugi* could create an opportunity for women and all those who are marginalised in the community to engage in the fight against HIV and AIDS. In fact, *Ũtugi,* as a lived practice, does not deal directly with issues of power relations that dehumanise vulnerable groups. This is because *Ũtugi* focuses on the power to act in the shared interests of the common good of the community. Consequently, there is a need for the church to engage in a radical transformation, from the hierarchical concept of power, to power as a category of sympathy, humanisation and identification that demonstrates God's compassion in suffering. Moreover, the church will need to foster inclusive participation of everyone in the community. One of the challenges facing *Ũtugi* is the tendency to romanticize it, thus, making it a philosophy for excluding others who do not belong to the Agĩkũyũ society. The concern is that, if used negatively, it can be a tool for excluding others, even members of the same community, especially those who not belong to the same *Riika* (age set), *Mbarĩ* (families*)* or *Mũhĩrĩga* (clan). Another overriding concern lies in the use of *Ũtugi* as a popular, mystified ideological concept, which was witnessed when the Kenyan political élites endeavoured to manipulate *Harambeee* during the Moi era.

7.3.3. Care of the bereaved

Another challenge is how to use the *Ũtugi* paradigm in a context where death is attributed to something or someone.[333] In some communities in Kenya, as in some other African societies, the mourning period is four days for a woman and five days for a man, during which sympathisers camp in the home of the bereaved. However, today, some take advantage of these four or five days to feast endlessly, regardless of the future economic needs of the bereaved. Thus, we support the effort of the Anglican Church of Kenya in challenging these retrogressive practices, for they are against the practice of authentic *Ũtugi*. If feasting is to be prolonged during mourning, then, the community, and not the bereaved, should contribute in that respect, for this is what *Ũtugi* dictates-to be there for one another.

7.3.4. *Ũtugi* as a tool for pastoral care and counselling

Since the Anglican clergy and lay readers are seen as leaders by the grassroots and are expected to be role models in the society, they should learn to use *Ũtugi* in the HIV and AIDS programmes. They should be trained as counsellors to use *Ũtugi* effectively as a tool for pastoral care and counselling to the PLWHA and their families. Moreover, since most Anglican clergy members and lay readers who are HIV positive find it difficult to disclose their HIV status because of stigma, through *Ũtugi,* the needed space could be provided for them. As we have seen, the *Ũtugi* paradigm could enable the PLWHA to shift from their position of helplessness and vulnerability to a position where their physical, psychological and social needs are met. In other words, *Ũtugi* is capable of offering these church leaders a space where they are able to speak about their personal experiences of the HIV and AIDS without being judged, misinterpreted, ridiculed or challenged. Otherwise, how would they disclose their HIV status or publicly support the PLWHA without being seen as immoral and being disciplined by the Church?

The inclusivity exhibited in *Ũtugi* could play a crucial role in fighting the stigma associated with the HIV and AIDS pandemic and could be welcomed and accommodated by both the church and the society. This is because clergy members living with the HI virus could become role models when undertaking the task of destigmatisation. It has been noted that no

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[333] According to Wa Ilunga (1978:162), "If someone dies, there will always be reason or causes given. Often, someone must be at fault, preferably the wife in case of a husband's death. It is as if family had to find a victim on which it might discharge its hostility in the face of death, as if wife had to suffer and thus atone for the death of her husband. Even though Christian husbands as death approaches often express the desire that their wives be not abused and even though the last wishes of a dying person are sacrosanct according to all our traditions, it is not uncommon to see the family even fury on the surviving wife."

Kenyan Anglican priests or bishops has ever publicly come out to disclose that he or she is HIV-positive. With the solidarity experienced in *Ũtugi,* HIV-positive clergy members could be encouraged to disclose their HIV status. In fact, clergy members need to secure a space where they are assured that their service in the church could continue even though they are HIV-positive.

7.3.5. Formation of HIV and AIDS desks

For an effective fight against the HIV and AIDS pandemic, there is a need for the establishment of HIV and AIDS departments in all the Anglican dioceses. Even though many of the dioceses already have HIV and AIDS desks, they lack full-time HIV and AIDS co-ordinators. Such personnel are very important especially in co-ordinating Diocesan, Archdeaconry, Denary and Parish level HIV programmes. For *Ũtugi* based HIV programmes to be effective, each level should have a co-ordinator in order to ensure that every group is involved. The co-ordinators could engage in HIV workshops, prevention education programmes, support groups, educated Home-Based Care programmes, and catering for orphans, vulnerable children and widows. Again, *Ũtugi* in the form of *Harambee* could be used to finance these programmes.

7.3.6. Creating a community of care

The Anglican Church of Kenya will be required to equip effectively her adherents to engage in pastoral care and counselling of PLWHA. In this case more clergy ate needed and bishops should ensure that every clergy is trained on the HIV and AIDS ministry. Otherwise, how can the church with a membership of about 3,711,890 continue to be served by only 1,555 clergy members? Besides, the majority of these few clergy members are not trained in the HIV and AIDS ministry. This also means that the curriculum used in the Provincial Theological Colleges to prepare clergy for pastoral ministry need to be contextualised, so that church leaders who are produced can be competent to face the challenges posed by the HIV pandemic. With proper training of both the clergy and congregation, the church would be able to establish a community of care, whereby, the majority of her members could learn to engage in pastoral care and counselling to orphans, widows, grandparents, and PLWHA within their communities. Furthermore, the church will need to teach whole congregations how to offer pastoral care to the bereaved, the dying and those who are faced with hopelessness. The church will also need to learn how to start and manage the VCT centres, *Home Based Care* programmes (HBCs) and *Hospice Care* (HC), deal with stigma and

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discrimination, and mobilise the community to offer compassionate care, acceptance and unconditional love. It would involve engaging the PLWHA in the life of the church and allowing them to participate in the creation of awareness in the community. The church will also need to stress mutuality of care in contrast to the formal and hierarchical ecclesiological praxis.

7.3.7. Urgency of ecumenism, networking and collaboration

If the Anglican Church of Kenya would be effective in the fight against HIV and AIDS, she would need to engage urgently and wisely with the NGOs, CBOs, government, other church denominations and private sector, which are also trying to restore hope to PLWHA and their families and to fight the HIV and AIDS pandemic. The power of ecumenical bodies cannot be underrated in the fight against HIV and AIDS, for Christians have the moral obligation to fight and resist dehumanisation of humanity within the society, collectively. As already discussed, *Ũtugi* principles could enable the Anglican Church to network with other religious groups to fight for adequate social security, protection, equality, education, health services, food security, improvement of the socio-cultural and economic environment and the political stability needed by PLWHA and their families in Kenya. Equally, the church, NGOs and the government should strengthen the factors that promote the participation of PLWHA in social-political and economic structures and in decision making at all levels; these should also include women, for they are more vulnerable to HIV and AIDS than men.

7.3.8. Engaging in prophetic ministry

It is now clear that after voting out President Moi and the emergence of President Mwai Kibaki in 2002, the Anglican Church of Kenya seems to have sat on the periphery and even supported Kibaki's regime blindly. However, in the context of the HIV and AIDS pandemic and with a clear understanding of the provisions embedded in *Ũtugi,* the Anglican Church of Kenya needs to be proactive in order to recover her lost prophetic ministry and rediscover speaking with and for the voiceless and the vulnerable. The Anglican Church of Kenya needs to be a part of a larger continuum of individuals, churches, religious groups, NGOs and activists who are openly fighting for the right of PLWHA. In order to become a beacon for the rest of the society, the Anglican Church should challenge the dysfunctional structures, systems and institutions that perpetuate political instability, poverty and advance the spread of the HI virus.

As a faith community and as the conscience of the society, the challenge facing the church is the risk of losing her moral power to guide others if she is not an exemplary social institution in the fight against the HIV and AIDS pandemic. Furthermore, her task in this case will also be God's agent of reconciliation and restoration in the world. In other words, as agent of reconciliation and restoration, she will be compelled to deal with issues of public policy, engage the government in the implementation of the new Kenyan constitution and helping the PLWHA and their families to overcome the comprehensive experience of vulnerability that they face within their community.

7.3.9. Soliciting funds for HIV and AIDS programmes

Through the *Ũtugi* paradigm, funds could be raised to train African pastors on how to contextualise pastoral care and counselling in the context of the HIV and AIDS pandemic, as well as to build centres for contextual pastoral theology, pastoral care and counselling. Again, through *Ũtugi,* the Anglican Church could raise funds and establish trust funds for orphans and for the education of children infected and affected by the HIV and AIDS pandemic. Thus, more studies need to be conducted that would help the church to interculturate traditional resources to complement available church resources in the fight against the pandemic. Indeed, the church will have to learn to mobilise internal as well as external resources if the fight against the HIV and AIDS pandemic is to be won. This is because in each community, traditional recourses are available that could be used to address illness, death and the issues of community formation.
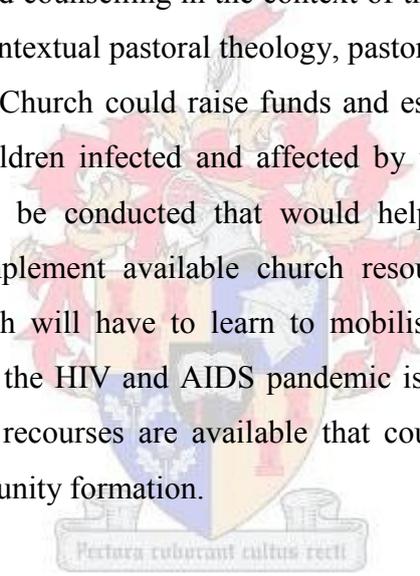
7.3.10. Doing research in the future

The church will need to engage in the publication of more literature related to HIV and AIDS, in HIV and AIDS research at community level, and in contextual Bible study and preaching in the church and in local community groups. Further, the church has a responsibility to design ways of incorporating the rites of passage, as illustrated in *Kĩrĩra kĩa mũciĩ,* in her pastoral care and counselling programmes. Seen in this light, additional empirical research based should be encouraged in order to obtain the subjective experiences and perspectives of the PLWHA (on the *Ũtugi* paradigm). Based on the theories explored in this study, such future research should be mediated by in-depth and semi-structured interviews with both the church and the PLWHA, particularly in Central Kenya. Similar researches should be encouraged in other African communities as a way of finding traditional

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(local) resources, which could complement church resources in the fight against the HIV and AIDS pandemic.

In bringing this study to a close, we would like to affirm that the *Ũtugi* paradigm is an appropriate model for the Anglican Church of Kenya to use in the pastoral care and counselling of PLWHA and their families for the following reasons:

(a) *Ũtugi* could complement Christian hospitality to network and help the church to carry the burden of the PLWHA (cf. Gal. 6:2), thus, sharing their joy and comfort, and journeying with them in their pain, sorrow and healing.

(b) It is contextual, for it is culturally rooted. Therefore, it is relevant to local communities.

(c) It could help in transforming the existing ecclesial praxis of the Anglican Church of Kenya.

(d) *Ũtugi* could also enable the PLWHA to shift from the position of existential threat to a position of love, care, support system, accommodativeness, liberation and hope.

In this holistic approach, the church could empower the PLWHA and their families, by incorporating them in their support systems to promote self-reliance, for instance, through access to employment and suitable working conditions. Consequently, the church will begin to make the twenty-first century a century of hope for millions of people who are walking through the valley of the shadow of death. Such gestures would enable the church to become a visible force of transformation and the space for love, hope, appreciation, accommodativeness and healing. Thus, it would become a sign of the kingdom of God, a proleptic disclosure of the messianic banquet in the midst of suffering, and a light and salt in the context of the HIV and AIDS pandemic (cf. Matthew 5:13-17).

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