

## ‘THE GOOD WIFE’: A PHENOMENOLOGICAL RE-READING OF PROVERBS 31:10-31 IN THE CONTEXT OF HIV/AIDS IN ZIMBABWE<sup>1</sup>

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### Abstract

*HIV/AIDS poses a serious existential challenge in Africa. Its effects have been devastating, particularly for the disadvantaged members of society. Women, children, orphans, displaced people, prisoners and others have been negatively affected by the pandemic. Patriarchy has also compounded the vulnerability of women. Women are unable to negotiate safer sexual practices with their partners, especially in the marriage context. Religious and cultural factors have combined to dangerously expose women to HIV infection in Africa. Due to the influence of Christianity in Africa, its sacred writings have been used selectively to justify the marginalisation of women. This study offers a re-reading of Proverbs 31: 10-31. It interrogates the meaning of being “the good wife” in the context of HIV/AIDS in Zimbabwe. The first section analyses the influence of African and biblical patriarchal values and how they expose women to HIV infection. The second section explores new models for appreciating “the good wife” in the era of HIV/AIDS. The third section calls for greater action by women’s religious groups in HIV/AIDS awareness, prevention and care. Phenomenological techniques like cultivating empathy and recognising the value of religion guide the study.*

### Introduction

Judeo-Christian sacred writings have had a significant impact upon the African imagination. The availability of scripture in oral societies has led to fascinating developments in various areas of life. It was the translation of scripture into the vernacular languages that facilitated the explosion of African Independent/Initiated/Instituted Churches (AICs) in Southern Africa. In Zimbabwe, some people demonstrate their commitment to the truth through swearing by the Bible in discussions (“Bhaibheri kudai”). Such has been the influence of the Bible that Mercy Amba Oduyoye, Africa’s foremost woman theologian, charges that it has become one of the oracles Africans consult for instant solutions and responses (Oduyoye 1995: 174). A number of other African scholars have examined the status of the Bible in African Christianity (Mbiti 1986), and in Africa (West and Dube 2000).

The African context in which the Bible has been widely accepted as authoritative is characterised by high levels of HIV infection. It is the Bible that is a key resource when families visit the sick in their homes. Biblical verses are left behind as “support systems” when pastors complete their hospital visitations. Ritual specialists at funerals borrow liberally from the sacred writings to console mourners. Tombstones communicate the deceased’s favourite biblical verses. Readings from the Bible accompany memorial services at which the memory of the deceased is kept alive. Communities weary of mourning and

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burying the dead are sustained by the hope of the resurrection that is communicated by the New Testament. It is also the Bible that is used to sustain traditions and practices that suffocate African women. The coalescence of African and Israelite patriarchal traditions has left African women staring at the forces of subjugation and death.

This study examines the vulnerability of women in the context of HIV/AIDS in Zimbabwe. Whilst the tendency in African religious studies has been to proceed from the biblical text to the African setting in life, this study begins with a description of how various factors have consigned many women to lives of despair. The first section analyses the impact of HIV/AIDS on black women in Zimbabwe. The second section utilises Proverbs 31: 10-31 to explore new ways of empowering women in the context of HIV/AIDS. While the traditional reading of the text has endorsed patriarchy, I attempt a phenomenological and liberating re-reading of the text. In the third section, I maintain that women's groups in the church should be transformed into "sites of struggle" in the face of the devastating effects of HIV/AIDS.

### **Vulnerable and Carrying Multiple Burdens: Women and HIV/AIDS in Zimbabwe**

While the literature on HIV/AIDS in Zimbabwe has increased significantly since the late 1990s, there is a real danger of not realising that behind the statistics lie real people who experience real pain. Government institutions, non-governmental organisations and church-based groups have perfected the art of statistical analysis. Figures relating to the number of infected people, deaths per week, children orphaned by HIV/AIDS and others are very useful for planning purposes and highlighting the extent of the pandemic (NACP 1998). However, these figures may mask the groans, cries and lived experiences of individuals and communities. Furthermore, these figures may not tell the whole story, particularly the vulnerability of specific social groups like women.

In Zimbabwe, the HIV/AIDS pandemic has affected women disproportionately. Several socio-cultural, economic and biological factors have made women more vulnerable to HIV (Bassett and Mhloyi 1991). The biological factors relate to the larger absorbing surface of the female sexual organs, semen having higher HIV concentration and infected fluids staying longer in the female organs. Male to female transmission of HIV is therefore more efficient because of these factors. Patriarchal values and norms have ensured that the laments by women remain muzzled and muffled. Notions of masculinity, where the man is a sexual predator, have compromised married women in particular. Fidelity in marriage is defined almost exclusively as relating to women, with society looking the other way when married men pursue multiple sexual partners. Sexual abuse, biological, economic and other factors leave women vulnerable to HIV infection.

In addition to their risk of exposure, women's usually low socio-economic status and lack of power relative to men (inside or outside marriage) also makes it difficult for them to take preventive measures, whether HIV positive or not. Women have limited control to negotiate or ensure strategies to reduce the risk of HIV infection; they also have fewer means to prevent infection or slow down the development of AIDS (Woudenberg 1998:9).

The social and cultural determinants of HIV infection in women are intertwined with the role of women within relationships, families and communities. In Zimbabwe, men generally occupy dominant positions in the various spheres of life. Powerlessness among women has translated to greater exposure to HIV infection. Married women in particular have little or no power to negotiate whether, when or how sex takes place. Most men claim that culture has given them exclusive and permanent access to their wives' sexual and

reproductive rights. Tragically, most infected married women in Zimbabwe have been faithful to their husbands. Men are driving the epidemic, taking advantage of their positions in society.

A culture of silence that surrounds sex dictates that “good” women are expected to be ignorant about sex and passive in sexual interactions. While in the traditional context there were puberty rites at which sex education was imparted, alongside the teachings of aunts and grandmothers, in contemporary societies there is a big void. Both married and unmarried women are discouraged from being proactive in negotiating safer sex. Accessing treatment for sexually transmitted infections is also highly stigmatising for women in a society that has portrayed women as carriers of disease (Jackson 1999). As a consequence, many HIV infected women discover their status during pregnancy or when one of their children becomes sick with AIDS. Many women have died without being aware of their HIV status since ninety percent of People Living With HIV/AIDS (PLWHA) in Zimbabwe do not know their HIV status.

Sexual and domestic violence in Zimbabwe has worsened the vulnerability of women to HIV infection. Some men have abused the practice of paying *lobola* by claiming that “marital rape” is a contradiction in terms. Such men argue that they have “bought” their wives and are therefore free to have sex on demand. Since women’s genital tissues are easily damaged during sexual intercourse, resulting in cuts and bruises that provide entry points for the virus (Haddad 2002: 95), forced penetration increases the stakes. In Zimbabwe, many cases of fathers raping their young daughters have appeared before the courts. The belief that having sex with a virgin cures HIV has also contributed to the upsurge in rape cases involving female children.

Notions of domesticity that emerged during the colonial period and which has been reinforced by Christianity have disadvantaged women. This has been particularly pronounced in the context of HIV/AIDS in Zimbabwe. The challenge of providing care for those infected and affected by HIV/AIDS has fallen squarely on the shoulders of women because the roles undertaken go hand in hand with gender specified roles. While men as policy makers have recommended the adoption of home based care, it is women who have been tasked with the care giving. Mupedziswa (1998) outlines the gendered nature of care giving relating to HIV-infected people. He notes that, among the Shona and Ndebele, some of the roles that women perform include cleaning the house and caring for children and sick people. Related women like mothers, grandmothers, sisters, daughters and wives are preferred in care giving. Men tend to leave all the caring work to women, claiming to be breadwinners. Women heroically fulfil this role, often sacrificing their own health. In many cases married women have provided care for their sick husbands, only to be taken to their family homes when they fall sick themselves. Elderly grandmothers have also looked after children orphaned due to HIV/AIDS with meagre resources.

The “gospel” of the subordination of women have found enthusiastic supporters in both African Traditional Religions and Christianity. It is alleged that the continued existence of society is premised on the domesticity and docility of women. When faced with promiscuous and abusive husbands, women should bear the burden with resoluteness, this interpretation of the gospel asserts. Women are offered as sacrificial victims by a society that does not place any real value on their activities. Many men are willing to go and enjoy their beer and football while leaving all caring work to women. In the name of submitting to culture, tradition and religion, they claim that it is the duty of women to look after the sick.

Accordingly, tradition has assigned very specific roles to women in church and society. Women have been labelled as sinners, temptresses, child bearers, servants and subordinates. Consequently, they have been limited to performing domestic tasks, serving children, the old and the sick, as nurses, nuns, mothers, sisters, fundraisers and tea makers. The Church has also laid down certain codes of conduct about women's morality and about their dress, reminding them of their roots in Paul's instructions to be submissive and obedient (Madiba 1996: 275).

### **Re-reading Proverbs 31:10-31 in the Context of HIV/AIDS in Zimbabwe**

The foregoing section has outlined the vulnerability of women in Zimbabwe to HIV infection. However, at marriage counselling sessions, weddings and other gatherings, some preachers use Proverbs 31:10-31 to call upon women to become "the good wife". The poem outlines the qualities that are to be found in a "good wife". Its popularity in the Zimbabwean context probably emerges out of the common ideals between the culture out of which the poem emerges and the receiving culture. The wife who does good to her husband, is industrious and financially astute, is celebrated in both cultures. The poem appears to praise positive qualities found in married women, although it entrenches patriarchal values. The influence of these issues on the question of womanhood has been examined in the South African context (Masenya 1996). However, before undertaking a re-reading of the text, it is necessary to locate it within its proper context.

Traditional Western scholarship has contributed a lot to our knowledge of "wisdom literature", within which the book of Proverbs is to be located. The influence of Egyptian and Mesopotamian literature has been noted (Whybray 1972: 3-7), alongside the possible contributions of Israel's own specific class of wise men whose duty it was to propound guidelines to society. While some religious themes are present, the literature tends to focus on practical issues. In addition, a universal slant may be detected whereby the message does not seek to address the specific case of Israel. It is probably this aspect that has allowed the poem on the "good wife" to be applicable to various other cultural contexts. William McKane (1970: 665) maintains that the entire poem "does make a cumulative impression, and the poet succeeds in constructing a recognizable and credible portrait of a particular kind of woman."

The "good wife" is also described in some translations as "the capable wife", "the wife of many parts" and other designations. As Whybray (1972: 184) notes: "The whole emphasis of the poem is on the benefits which the wife will bring to her husband and family by her industry and reliability." She works with willing hands and brings food from afar, while she opens her hand to the poor and the needy. The good wife brings dignity to her husband, and her children are adequately provided for. In all, the poem calls upon wives to be industrious and to execute their duties joyously. It underscores the value of married women, while restricting them to the domestic sphere. Although the good wife in the poem "considers a field and buys it" (Proverbs 31:16), her economic activities are located within the context of household chores.

This poem has proved quite popular within the various modes of Zimbabwean Christianity. These include the "mainline" churches, AICs and Pentecostal churches. Church associations such as the mothers' unions (Ruwadzano / Manyano) have used it to promote ideas about Christian domesticity, Christian wifeness, housekeeping and motherhood (Schmidt 1992: 129). Traditionalists have also affirmed this poem for its consistency with patriarchal values. It projects the image of an efficient and self-sacrificing woman who brings dignity to her husband. Her crowning moment comes when her husband

praises her, "Many women have done excellently, but you surpass them all" (Proverbs 31:29). Her value is not intrinsic, but is measured in terms of what she achieves for her husband and family. This entrenches the notion that married women should sacrifice themselves for the sake of their families. While this ideal is appealing, it says nothing about the other family members and what they should do to complement the exertions of "the good wife".

I am convinced that the reality of HIV/AIDS in Zimbabwe calls for a re-reading of this poem. As Delores Williams (1998:8) argues, re-reading means bringing in more non-traditional sources to aid in the interpretation than have been used by the leading Western exegetes. This does not entail calling for a "re-writing" of the Bible as the Zimbabwean liberation theologian Canaan Banana (1993) has done. Rather, it is a call for re-reading the Bible with African resources (West 1998). This requires grappling with the existential situation in which Africans express their being. In the specific case of women in Zimbabwe, this implies coming to terms with their vulnerability in the face of HIV/AIDS. As I have illustrated in the foregoing section, their husbands dangerously expose married women to HIV infection. How to become "good wives" in such a setting is a major challenge.

Since a good wife is more precious than jewels (Proverbs 31:10), the onus is upon those who interact with her to appreciate her value. In Zimbabwe, many urban homes are virtually "little prisons" because of the security features that have been erected. House owners have gone to great lengths to protect their valuables. If "the good wife" surpasses these items, the husband's sense of security concerning his wife should be accentuated. He should avoid having multiple sexual partners, and to engage in safer sexual practices such as condom use. Since "the heart of her husband trusts in her" (Proverbs 31:11), the husband in turn should be truthful to his wife. In the Zimbabwean context, too many husbands have betrayed their wives' fidelity by pursuing numerous other sexual partners. While wives have been called upon to do no harm to their husbands all the days of their lives (Proverbs 31:12), husbands have not reciprocated. Many parents have mourned at the burial of their married daughters that their children would have been "murdered" by their unfaithful husbands. While refraining from harming husbands is noble, the reality of HIV/AIDS demands that wives protect themselves from infection. Powerlessness in negotiating safer sex in the marriage context has meant that husbands have brought harm to their wives in most instances.

The wife's capacity to provide food and care for the household is extolled in both the poem and traditional culture. However, the adoption of the Economic Structural Adjustment Programme (ESAP) by the government of Zimbabwe in the 1990s has seriously curtailed the ability of women to feed their families (Gibbon 1995). The shortage of basic commodities has meant that many women spend long hours in winding queues. Hyperinflation has seen women failing to buy necessities for the upkeep of the home. Consequently, many married women have resorted to cross-border trading. Their destinations have included South Africa and Botswana within the Southern African region, and as far as Dubai, the United Kingdom and other far away places. In these foreign countries the women's vulnerability to rape is increased by virtue of being "outsiders". Labels of "prostitute", "loose and dangerous woman" accompany these brave women in temporary economic exile and back home. Some men in host countries have taken advantage of some of these women because of their dominant economic positions. During their absence, some husbands have pursued other sexual partners, increasing the risk of exposure to HIV infection.

It has been observed that, "HIV spreads fastest in conditions of poverty, powerlessness and lack of information" (Qakisa 2002:81). Being "the good wife" in the Zimbabwean context of HIV/AIDS entails actively seeking knowledge about the pandemic. Married women are called upon to be proactive in coming to terms with their vulnerability to HIV infection. Granted that many factors militate against women's access to information, it is crucial that they acquire the relevant information relating to HIV/AIDS. Empowerment of women implies equipping them with the necessary economic skills to resist oppressive patriarchal beliefs and practices that convey messages of pain and death.

Women have almost exclusively provided care for sick individuals in the era of HIV/AIDS. In traditional interpretations of the poem, this is in line with what it entails to be "the good wife". This is premised on a rigid division of labour where men look for resources while women feed and bath the sick. Many women have performed this onerous task of looking after sick and dying relations with meagre resources. Male children and husbands have generally avoided care giving in HIV/AIDS contexts in Zimbabwe. The justification is normally sought in appealing to gender roles. However, there is need for a review of this trend as more people fall sick and women are already failing to cope. A critical approach is also required if the ideology of patriarchy is to be challenged.

Role stereotyping allows one to presume that separate is equal. To justify specific roles and activities appropriate to men and to distinguish them from other specific roles and activities appropriate to women is subtle sexual discrimination. Such a perspective allows one to deny that the role and activities of one sex are superior to that of the other, while at the same time not allowing persons to choose their role and activities (Laffey 1990: 83).

HIV/AIDS in Zimbabwe calls for a radical reinterpretation of what it means to be a virtuous wife. The poem in the book of Proverbs offers lofty ideals that married women may aspire to achieve. However, the number of women infected by HIV through their husbands cries out for engagement with oppressive cultural practices. Women should not be viewed as sacrificial victims in the struggle against HIV/AIDS. Some preachers have used the poem to imply that women should be willing to surrender their lives in order to be deemed "good wives". As women continue to look for food for children orphaned due to HIV/AIDS, national bodies that receive funds such as the National Aids Council (NAC) should be called to account. How is it possible for billions of dollars to be accumulated and yet there is no marked improvement in the welfare of women and children? Should resources collected in the name of the poor and the vulnerable be used to purchase trendy vehicles? In such circumstances, "the good wife" is one who challenges corruption in high places and demands accountability. She should prophetically champion the rights of the downtrodden and outcasts. The women's groups in the church should actively participate in the empowerment of women in the context of HIV/AIDS in Zimbabwe.

### **Sites of Struggle? Women's Groups and HIV/AIDS Awareness**

The story of Christianity in Zimbabwe and, indeed, in Africa, would be incomplete without acknowledging the special role of women. The emergence of women's groups during the colonial period facilitated the expansion of Christianity, although most of the historiographies do not capture this important theme (Verstraelen 2002: 30). The church in Zimbabwe today is thriving mainly due to the vibrancy of women's groups. In their colourful and varied uniforms, they express their faith in a dynamic and lively manner. They have composed hymns and popular choruses, while their social services have ameliorated suffering in both the rural and urban areas. However, these groups have not been empowering to women in the context of HIV/AIDS. They continue to endorse traditional

readings of “the good wife” and to promote the gospel of docility and domesticity. I am convinced that if they were to adopt a more liberating perspective and shake off the inherited traditions, women’s groups could become the vanguard in the quest to empower women in the struggle against HIV/AIDS.

Pentecostal churches in Zimbabwe have generally followed the “mainline” churches by having women’s organisations, although these tend to be urban-based. The Gracious Woman organisation is affiliated to the Zimbabwe Assemblies of God Africa (ZAOGA), while the Precious Stones organisation operates within the Family of God church. Although they have attracted many young and educated women, their discourses of femininity tend to endorse “the good wife” ideology. They encourage women to “submit” to their husbands and describe marriage as “God’s ministry.” Married women are encouraged to update their sexual skills in order to prevent their husbands from keeping mistresses to make up for the inadequacies of the matrimonial bedroom (Mate 2002: 556-558).

Women’s church organisations have played an important role in caring for PLWHA. They have been organising hospital visitations, as well as visiting the sick in the home-based care programmes. In the rural areas some groups have been imparting lessons relating to HIV/AIDS (Chitando 1998), while undertaking projects to support children orphaned by the pandemic. However, the teaching concerning HIV/AIDS has tended to be highly moralistic, overlooking the impact of determinants such as age, gender, economic status and others. It is important that these groups be equipped with the relevant skills to enable them to approach issues in a more critical manner.

Women’s church organisations in Zimbabwe offer an ideal platform for engaging in a liberating re-reading of the Bible. While academic theologians may grapple with historical-critical approaches, women’s groups require knowledge that is practical. Amidst the explosion of information relating to HIV/AIDS, the majority of women remain vulnerable to infection. Where the emphasis has been on being “good wives” and behaviour change, women continue to be raped and abused inside and outside marriage. Relevant studies of the Bible in such contexts should grapple with the real fears and dangers that women face.

It is a tragedy for communities of faith to celebrate the prominent role of women’s groups in the burial rites of one of their members. To marvel at the latest funeral songs composed by women’s groups testifies to the failure of the church to promote abundant life. The task of religious studies and theology in a Zimbabwean context should be to promote liberating approaches to sacred writings and critical attitudes to oppressive beliefs and practices. Women’s religious groups should be equipped-with the active participation of the women themselves-to challenge forces of death in the era of HIV/AIDS. Through re-reading the Bible, participating in struggles for life and tapping positive cultural values, women’s organisations can constitute the frontline in defying HIV/AIDS in Zimbabwe. It is only when women are recognised as full human beings with the same rights and privileges as their male counterparts that the ideal of “the good wife” proffered in Proverbs 31: 10-31 may be realised.

## **Conclusion**

The Bible remains a key text within Zimbabwean Christianity in its various forms and shades. Specific sections of this text, such as the poem on “the good wife” resonate with indigenous patriarchal traditions. However, the reality of HIV/AIDS and the vulnerability of women call for a re-reading of the text. Instead of endorsing values and practices that condemn women to deaths that are preventable and capable of being postponed, there is a need to emphasise alternative relationships within families and communities. In this study I

have argued that the Zimbabwean context requires new visions of “the good wife” as one who strives to be protect herself in the face of HIV/AIDS. I have outlined how multiple forces have contrived to deny many women fulfilling lives. I also highlighted the potential that women’s organisations possess in transforming the lives of women. Various actors need to pool resources to break the covenant of violence against women (Maluleke and Nadar 2002) and to ensure that no woman will curse the day of her birth. Instead, women will enjoy health and well-being – which is the focus of the various religions of the world.

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