The impact of COVID-19 on the vulnerable in households
A missional reflection from the township of Soshanguve
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Abstract
Pandemics disrupt the normal routine of life in society. Such has been the case with COVID-19. This disruption is also an opportunity to reflect on structures highlighted by this pandemic, such as households. Households became the centre of social life after the lockdown restrictions closed down businesses, schools and non-essential activities. The fragility of this centre has been exposed in communities, such as the township of Soshanguve. In this community, vulnerable members of households, namely children and women have been victims of abuse. The COVID-19 restrictions saw a surge in child neglect and intimate partner violence (IVP). Such a situation should concern the church. This article stresses that the church should put the emancipation of households at the centre of its priorities. Functional households could be an engine for building local communities and society as a whole. The church could prioritise leading by example, what it means to care well for children, empower men and women to learn to resolve differences without resorting to violence and equip men to be involved parents and spouses. Such a priority would also involve getting training in mental health which may be one of the causes of violent behaviour. This article concludes that the church has a critical role to play in empowering households to be the centre of good quality of life and contain the spread of the coronavirus. Such a role could be a practical way to design the kind of society we would like to become.

Keywords: Abuse, Build, Household, Neglect, Mental Health

1. Introduction
Pandemics disrupt the normal routine of life in society. Life as we have known it has been “disrupted by COVID-19” (Nussbaum, 2020:1). This disruption is also an opportunity to reflect on structures highlighted by this pandemic, such as households. One of the common measures countries take to minimise the spread of the...
virus has been encouraging people to stay at home. Businesses, schools and other non-essential services were temporarily closed, and households became the centre of life in society. The fragility of households in communities such as the township of Soshanguve was exposed. This is a challenging reality the church should proactively grapple with if it hopes to participate effectively in building society. Van Niekerk (2015:4) opines that “the household has always been the centre of social, economic and religious life in African culture”. It is known for its resilience in facing powerful structures such as colonialism and globalisation. It has also become a weak space where the quality of life of the vulnerable, such as women and children, is worsening. This is a pre-pandemic reality that the church needs to stop looking at as a passive observer.

This research is a reflection born from observation and conversations with neighbours from Soshanguve for four months. The author belongs to a missional team, InnerCHANGE, based in the township of Soshanguve. He is part of a team that serves different generations in that community, mainly children and teenagers. After the South African government announcement of the COVID-19 lockdown on 27 March 2020, South African residents were encouraged to stay home, except for services deemed essential. However, children and teenagers still came daily to the InnerCHANGE office, longing to be served. Children, in particular, hang at the gate throughout the day, grieving that InnerCHANGE could not serve them. When the author occasionally went out to get essential items, he could see children playing in many township streets, as was the norm before the lockdown. This observation raised the question of neighbours’ awareness of the dangers of being exposed to COVID-19 infection. During the lockdown, the author also observed an increase in domestic abuse. This raised the question about the safety of vulnerable members of a household. A final observation came from the author’s conversations with different men while in long queues for essential services. Many expressed boredom, stress and depression caused by the COVID-19 restrictions on not working and staying at home. It suggested that staying at home affected their mental well-being. From these conversations, the author wondered if the abuse vulnerable people are subjected to is connected to the mental health of the perpetrators.

These observations and insights from the conversations mentioned above have challenged the missional team the author is part of to reflect on the role the church could play to strengthen households for the well-being of local communities, society in general and the current need to contain the spread of the coronavirus. Such a reflection aims to re-establish households as the centre of good quality of life and a practical example of the kind of society we would like to become. This research scope is black African families found in the township of Soshanguve.
2. Understanding the black South African family structure

Magezi (2018:2) points out that family dynamics are changing globally because of “industrialisation and urbanisation”. This is also true in South Africa. From the context of a South African township, “a family should be understood in light of the effects of colonialism, apartheid”, with regards to migrant labourers and people working far from their homes (Rabe, 2018:3). The ramifications of this system are felt to this day when we still see many of our neighbours “removed from their families” by their employment (Rabe, 2018:4). Many of them spend countless hours to and from work. Therefore, they are mostly absent in their children’s life because of the location of their employment. There is also an existing cultural patriarchal structure in black African communities, which seems to expect women to take care of children in a family and only expect men to be the financial providers. Sultana (2010:123) understands patriarchy as “an ideology that gives power to men and legitimates the oppression of women in all sectors of society”. In this case, the culture seems to give men the power to not fully be responsible for their own families, limiting their role to financial provision. The observations mentioned above have caused household structures to deteriorate. Statistics South Africa (2020a) stresses that “the deterioration of South African family structures” causes many children to grow up without close and consistent parental guidance.

Stats SA (2020) classifies families into single-person, nuclear, extended and complex. The single person is self-explanatory. Nuclear is defined as households with parents and their children. The extended includes relatives of the nuclear. The complex has some members who are not related to the head of the household living under one roof. According to Stats SA (2020b), approximately 30.5% of black children live in nuclear families and 67.6% in extended ones. In addition, 50.2% of these children live in families where there are at least two generations, 38% of them live in families of three or more generations, and 8% of them live in families where there is a skip generation (grandparents and grandchildren). Rabe (2018:4) postulates that “a high mortality of young parents… contribute to skip-generation households” in South Africa.

In seeing many children in the streets of Soshanguve during the lockdown, one would think those children are neglected by their parents or guardians. Indeed, child neglect is a challenge in such communities. This is a widespread issue in many urban communities. Magezi (2018:2) posits that urbanisation is closely linked with “unstable families in Africa”. According to him, in the traditional African societies, “the pride and honour of parents included passing on material resources… [and] wisdom to children” (Magezi, 2018:2). With the boom of industrialisation and urbanisation, children moved away from their homesteads, got jobs and became independent from their customary ways of living. This independence
is connected to the decline in the support system from one generation to another. Puschmann and Solli (2014:2) point out that “solidarity” is weaker, and the “formation of social networks in urban areas” is harder than in rural communities. The COVID-19 lockdown has highlighted the reality of common neglect in communities such as Soshanguve. It is important to note that in places such as Soshanguve, many children are also neglected because their parents or guardians have to prioritise work over taking care of them for the survival of their household.

The church should be intentional about creating grassroots support systems for the vulnerable members of households so that employment is no longer connected to absent parenting and that people can feel like they have more trustworthy families than their biological ones. The church could use its assets, such as buildings and members, to help create caring neighbourhoods where the vulnerable members of households could experience safety, empathy and “a sense of belonging” (Louw, 2017:4). The church could also engage its neighbours about social distancing, which is an expression used during the COVID-19 pandemic to save lives. Yet, it is an existing reality that contributes to the weakening of households in communities such as Soshanguve.

3. Social distancing

The World Health Organisation (2020) recommends social distancing as a measure to minimise the spread of the coronavirus. The South African government also advises that. In Soshanguve, it has been challenging for people to stay at home. It seems children prefer being out in the streets playing with peers than staying at home. Their parents or guardians let them play outside their yard as if there was no pandemic to be worried about. When InnerCHANGE staff went out to get some essentials, they ran into some of the parents and guardians of the children we serve. Many complained about why InnerCHANGE closed its doors while children were in the streets. Such comments showed a lack of understanding of the rationale behind the government lockdown restrictions. From my observation, it seemed people did not avoid large gatherings at funerals, which are prevalent weekend events. Most of our neighbours who work use taxis to and from work. Many of the taxis the author saw did not comply with the government’s rules to transport 50% of their normal load during level 5 and 70% of their load during level 4. The commuters did not dare challenge taxi drivers about violating restrictions for lack of options or fear of being prejudiced by drivers. Even at grocery stores and social grant payments, where we saw long queues, most people did not observe the physical distancing rules.

For many families, though, there is already a social distance between parents and children. Some of that is a culture that does not encourage intergenerational
friendship. Other factors are parents' long hours of work. This social distance is also evident when parents and children are home on weekends. Many parents spend their time at home attending social support groups (known as societies), community functions (funerals, weddings and other traditional functions), watching TV, playing soccer or being in local churches for long hours. Children are expected to spend time with their peers away from their parents. They spend their time in the street or away from their family home. Therefore, as recommended by the COVID-19 regulations, staying at home was an uncomfortable measure that threatened the existing social distance between parents and their children. Children maintained it by playing in the streets, away from their parents and other adults in their households.

The church could sensitively challenge this existing generational social distance. Many local churches are guilty of this mindset and are known for suppressing the voices of women, young people and children. They are often regarded as immature beings who cannot “influence” others positively (Aziz, 2020:1). The church should practically elevate them as valuable stakeholders for its building and the building of households and society in general. Local churches could exemplify their intent through the quality of childcare they provide, for instance. InnerCHANGE is learning to do that and has been training ordinary community members through some of its programmes.

4. Childcare

During school holidays, most school-going children spend their day in the street playing with peers. Many of them are exposed to negative things. As a response to this reality, InnerCHANGE organises day-long holiday programmes to keep children out of the streets and disciple them. However, due to COVID-19 restrictions, InnerCHANGE could not organise holiday programmes. On regular weeks, InnerCHANGE runs different programmes for community children. During school days, the children InnerCHANGE serve navigate between three spaces daily: home, school and at least one of our programmes. The imposition of the lockdown meant now that they could not go to school, couldn’t come to any of our programmes, and they couldn’t play with their friends. They could only be at home, where some parents or guardians did not know how to keep them away from the street. Hence, many children were playing in the streets all day long. Therefore, they can be categorised as neglected. Ward et al., (2016) define neglect as “the failure of a child’s caregivers to provide them with the appropriate care to promote their healthy development and well-being”. Neglect can also be a lack of provision of emotional support, even though there may be good material support. It is the failure to provide to a child either health care, access to education, appropriate emotional engagement, or adequate living conditions, and abandoning them.
Casey (2015:410) posits that many neglected children have emotional problems, such as “anxiety and low self-esteem, problematic behaviour, educational underachievement, and adverse peer and social relationships”. Seeing many children running around and being exposed to the coronavirus infection led many societal leaders to call for schools to be re-open for the children’s well-being. They stressed that children are among the least vulnerable group in terms of death due to COVID-19 infection. “They are less likely to get sick if infected, have milder disease, and are probably less infectious than adults” (Broughton, 2020). Schools could also be the best settings that can promote their development as social beings. “The development of their sense of self has been proven by neuroscience to rely on interaction with others” (Meyer, 2020). They rely on interactions with peers “to know who they are and where they fit in the world” (Meyer, 2020). The isolation that could result from staying at home, away from their many peers from school, could “lead to anxiety and depression and a general loss of a sense of well-being for both young children and teenagers” (Meyer, 2020).

The church could play the role of engaging parents and guardians so that childcare could be at the centre of the preoccupation of different stakeholders in a community. It could model childcare through the expert knowledge of some of its members in a community that has normalised child neglect, in giving “a place, space and voice to children” in shaping the life and activities of a local church. Many congregations in Soshanguve don’t hold children-specific services. These congregations are also guilty of child neglect, although unintentionally. Many children have to sit in services where the content is primarily geared towards adults. This reality may explain why children and teenagers leave local churches as soon as they can make independent decisions by their parents or guardians. “The child who is not embraced by the village will burn it”, says an African proverb. The church is a stakeholder within the village which neglected children could burn.

Congregations could also run regular parenting classes to equip parents and guardians to take good care of their children. They have social workers, psychologists, nurses and other professionals who could help run those classes. Local churches could also sensibly engage in conversations with their members and community members about an existing cultural belief that sees having children as a blessing. The author believes that this is true in many ways. However, questions could be asked if having children without the adequate support is a blessing. Would it be a blessing to have children who will be neglected because the parents are not emotionally ready to assume their parental responsibility? Some conversations leading to the deconstruction or reconstruction of such a cultural belief could challenge a change of behaviour needed to minimise child neglect. COVID-19 has highlighted not only the abuse of children, but also that of other vulnerable members of households.
5. Domestic violence

InnerCHANGE also noted an increase in domestic violence during the COVID-19 lockdown. Women were the majority of the victims, and men were the majority of perpetrators. The World Health Organisation (2020) stresses that “violence against women tends to increase in any emergency, including epidemics. Stress, and the disruption of social and protective networks” tend to expose women to violence”. The increase in domestic violence in our community is one of the challenges COVID-19 brought. This challenge seems to also occur in other countries. The United Nations Population Fund (2020) estimates that a three-month COVID-19 lockdown results in “a 20% rise in intimate partner violence (IPV) throughout the world. In total, the report predicts at least 15 million additional cases of IPV will occur as a result of the COVID-19 lockdowns”. These predictions show that the South African government’s COVID-19 measures of staying at home to contain the spread of the virus infection have an unintended negative impact on households where domestic violence occurs. Children are also the victims of such a negative impact. The World Health Organisation argues (2020) that “as family members spend more time in close contact and household stress intensifies, and the risk grows even greater when families have to cope with potential economic or job losses”. Stanley (2020) postulates that IPV is more likely (and more severe) in households that are “economically distressed”. Today COVID-19 has caused unprecedented job losses. This increase in domestic violence has been noticeable in a community that already experiences significant domestic violence.

The regulations about social distancing also enabled many perpetrators to abuse their victims safely. Stanley (2020) points out that “social isolation is one of the most common tactics employed by perpetrators of IPV”. They isolate their partners from their network of family, friends, neighbours and colleagues so that they can have total control over their environment. Social distancing recommendations have made it easy for abusers to be in control of their partners without the fear of being called out by one of the partner's networks. These abusers can silence them through isolation. Dube (2018:232) points out that “silence is more often than not a sign of oppression for the subjugated are denied the right to speak and to be heard”. Sometimes material and spiritual powers are used to buy the silence of abuse victims.

The pandemic is stressful for everyone, and it is easy for people in power to lash out their stress at the people close to them, such as a spouse or children. COVID-19, in particular, is a novel virus which scientists are still trying to figure out. Updates from experts in virology and epidemiology about its mode of transmission and how to protect oneself from it are sometimes contradictory. This led Stanley (2020) to state that COVID-19 “ignites the unknown… and we are often left in an
ongoing state of risk and worry, triggering an overexposure of the stress hormone cortisol”. Additionally, “elevations in stress hormones have long been associated with increased aggression” (Stanley, 2020).

Many people in our community run to alcohol to alleviate their stress. Alcohol was prohibited for two months during lockdown levels 5 and 4. It was allowed after two months of restriction. The queues to bottle stores were unimaginably long when the prohibition was lifted. This reality told how dependent many people are on alcohol. Communities known for excessive alcohol usage tend to have high percentages of domestic violence. Alcohol has an “inhibitory effect on aggression”; many of its abusers tend to be violent (Stanley, 2020). Hence alcohol abuse is a crucial predictor of IPV.

The increase in incidents of IPV in communities such as Soshanguve and elsewhere in the country led the president of South Africa, Cyril Ramaphosa (2020), to state that “the country battles another deadly epidemic of gender-based violence” alongside COVID-19. According to Eye Witness News (EWN, 2020), “more than 120,000 victims rang the national helpline for abused women and children in the first three weeks after the lockdown started on 27 March 2020 – double the usual volume of calls”. According to the South African police statistics, “a woman is killed every 3 hours in South Africa, a rate five times the world average” (EWN, 2020). In addition, “more than 110 rapes are reported to the police per day” (EWN, 2020).

The abuse of women affects the community in places like Soshanguve. The majority of heads of households are women in Soshanguve. Many are also trusted and reliable household and community leaders compared to men. Women also constitute the “majority of local church members” (Kasomo, 2010). Yet, they seem to be victims of many prejudices both in their homes and at church. In many forums, they are prejudiced both as Christians “and as a social compliance issue” (Chisale, 2018:7). One of the issues is connected to the value of submission, which is often times overemphasised at the expense of women and children. The interpretation of this value sometimes forces women to remain silent even when they need to speak up. Abused women tend also to be abusive to their children and vulnerable people around them. As this saying goes; the oppressed tend to become oppressors when they have power. This saying seems true as the author observes the behaviour of many abused women in his community.

The church could play a role in equipping and conscientising its members and the local community on issues of IPV. It needs to dismantle its patriarchal structure as a starting point constructively. Van Wyk (2018:1) argues, for instance, that the language we use in churches is mostly “gender-exclusive”, which reinforces the common belief that women are inferior to men. The church also needs to equip women to proactively engage in some issues that may make them vulnerable to
abuse, such as being financially dependent on men. It must, rather, encourage a spirit of interdependency. Another issue seems to be related to giving birth. Childbearing seems to be at the centre of many new relationships between two adults in the community of Soshanguve. This appears to be true in the context of marriage and mostly out of it. This longing to have a child in a relationship may put a woman in a vulnerable position if there is no proper preparation and training for both partners. Pregnancy comes with many hormonal changes that many men may not be aware of, and many women may not know how to explain. These hormonal changes may have an impact on the mood of women; thus, men may not know how to interact (Marcus, 2018:80). This has sometimes resulted in violence against women. The author also witnessed many couples split up because of mood swings when the woman was pregnant. Childbearing also comes with a financial cost that many men are not prepared for. In cases where the child is born out of wedlock, which is the majority of cases in our community, there seems to be an assumption that a child will be taken care of by the government through a child grant. The latter is not enough to cover the monthly expenses or maintenance of a child. Thus, causing disagreements and fights between couples. Fighting occurs because men generally do not prioritise the responsibility to maintain their child(ren). Some women have lost their lives in those fights. The magistrate court of the township of Soshanguve is packed daily with women wanting the fathers of their children to comply with their obligation to maintain their children through a court order. Childbearing, if not well planned, also puts women in a vulnerable position of losing a job or not being able to get a job because they have to take care of their baby. Therefore, they become financially dependent on their spouse, leading to IPV.

The church should also engage the perpetrators of IPV in stressing that differences or grievances can be resolved amicably. Violence has been normalised in many settings in South Africa. It is often seen as a legitimate response to grievances. Mashau (2019:2) points out that there is a “general violent culture in South Africa”, and households are not spared from it. The church could engage perpetrators in a loving and compassionate way to deeply understand how to help them and the victims. Sometimes, perpetrators’ act of violence is an expression of their brokenness that needs healing. Hence, the church needs to include men in its engagement with IPV.

6. The inclusion of men in solution-seeking

The majority of perpetrators of IPV are men. Their victims are women and children. A lot of men in Soshanguve need to be challenged to become builders of functional households intentionally. Many of them are absent role players, although they may live in the same home with their spouse and children. Statistics South Africa
(2020a) estimates that more than “61% of children” don’t share the same household with their biological fathers. Freeks (2018:4) adds that “father-absenteeism is a phenomenon that does not only occur in local communities but is a worldwide tendency”. Carstens (2014) stresses that “families worldwide suffer immensely due to this fatherhood problem”. Present fathers “play a unique role in the development of their children’s behaviour, life choices, relationships and self-esteem” (Freeks, 2018:4). In the South African context, Statistics South Africa (2020b) states that 63% of suicides happen in households without a father; 70% of offenders in secure care centres (prisons for under 18 years old) come from households without fathers; 80% of rape cases are perpetrated by men with displaced anger towards the absence of a father in their lives; 85% of children with behavioural issues come from fatherless households and 71% of children who do not finish school come from such homes; and 90% of children who live on the street as homeless also come from households where there is no father. The above-mentioned statistics suggest a link between the absence of a father in a household and many maladies local communities such as Soshanguve suffer.

Globally, South Africa has “one highest figure of father absenteeism”, which has a negative consequence on the health of households (Freeks, 2018:5). However, “various reasons” explain this (Rabe, 2016:121-128):

- The death of biological fathers. Statistics South Africa (2020b) states that approximately “16.2% of children’s fathers” have passed away.
- A lot of adults, including fathers, live away from their households because of the location of their employment.
- Many fathers work long hours and are factually absent, although they may live in the same house as their children.
- A lot of men are uncertain about their paternity. Many children are born out of wedlock, which makes the uncertainty of paternity prominent.
- Fathers desert their children more than mothers.
- The law seems to be an enabler of the father’s absence. For example, the author experienced this reality by being denied to collect a birth certificate or passport of his child when he was alone at home affairs. However, that has never been the case with his wife.

Rabe (2018:4-5) postulates that “an absent biological father does thus not necessarily mean an uncaring father”. Congregations could be part of the solution to this problem by training its male members to be missional fathers. The latter implies fathers who “live sacrificial lives for the sake of their families and catering for the needs of others” as well as their fellow community members (Freeks, 2018:3). These fathers would teach their children to know and fear God as well as expose them “to the needs of others in the world (Freeks, 2018:3). Congregations should
also consider collaborating with other institutions to raise awareness about the men’s critical role in steering the well-being of a household and a local community. They could, for instance, teach as abnormal the many derogatory and sexual comments men have been accustomed to making at any woman passing by. They can also challenge the common pressure put on men to have money in order to be in a relationship with a woman. This pressure even trickles down to teenagers. Financial provision is critical for the running of a household. However, this should not be the sole responsibility of men. The power that comes with money has sometimes led to IPV. The latter may also be caused by mental illness, which may encourage people to disassociate love with care and associate it with abuse.

7. Mental health

This article wonders if the many IPV experienced in Soshanguve is not connected to mental illnesses. This is not to excuse for violent behaviour, but an attempt to be holistic in understanding and participating in bringing an end to IPV. Marcus (2018:202) states that “mental illnesses are common in South Africa and around the world. Every year, about one in six adults have serious mental health problems. About 30 in 100 (30%) adults have a lifetime risk of mental illness”. Despite its high prevalence, it “is a neglected part of the healthcare system. Most people with mental illness do not get professional medical and psychological help” (Marcus, 2018:202). Yet, research shows that mental illness is a “serious problem” in urban areas such as Soshanguve because of the living conditions and the lack of social and family support many residents experiences (Fetzer et al., 2020). For example, “two studies in India revealed that 65% of the urban poor feel depressed and 33% have trouble to sleep at night”. The rapid increase in the COVID-19 infections in South Africa is causing fear in people, which could lead to stress and anxiety. The WHO (2020) points out that “fear, worry and stress are normal responses to perceived or real threats, and at times when we are faced with uncertainty or the unknown”, such as the current pandemic season. Connected to these uncertain times are changes to people’s daily routines, such as working from home, temporary unemployment, home-schooling of children, and restrictions on different social interactions. There is also a growing problem of stigmatisation and discrimination in the community for those who have tested positive for COVID-19. Such a problem usually leads to feelings of rejection. There could also be feelings of fear and anxiety of infection of family members caring for a loved one who is quarantined or isolated. The WHO (2020) advises the management of stress during COVID-19 in the following ways:

- Have a balanced diet, prioritise rest by getting enough sleep every day and be physically active.
- Do an energy-giving activity every day.
Be intentional about minimising the use of alcohol, drugs, caffeine or nicotine because they usually lead to lower mood, anxiety, insomnia and aggression as their effects wear off.

All these pieces of advice apply both to men and women because both genders are equally vulnerable to mental illness during this pandemic season. According to the National Institute of Mental Health (2020), “men with mental illnesses are less likely” to pursue treatment or to be vulnerable about what is happening inside them than women. They are more likely to act out, which is sometimes expressed in violent and aggressive behaviours towards people around them.

Congregations should be intentional about raising mental health awareness from within and their local community. They could do so by partnering with organisations such as Health Care Fellowship (HCF), Christian Medical Fellowship (CMF) and Hospivision, which have excellent tools to train ordinary people. These organisations are always open to going to local churches or missional teams to conduct workshops to raise awareness for physical and mental health care. Women and children would feel safe in a household without violent and aggressive behaviours. They would willingly stay at home in the company of their loved ones, which could help contain the spread of the coronavirus.

8. Conclusion

This article reflected on the role the church could play in strengthening households. The COVID-19 lockdown put households at the centre of social life since all activities in the country were shut down, except essential services. The lockdown highlighted an existing problem of households of the township of Soshanguve being places where children are neglected, and domestic abuse occurs a lot. The church has a critical role to play in strengthening households so that they can become functional and safe for all its members. The process of achieving this goal should involve men, who are usually the perpetrators of IPV, to be part of the solution. It should consider mental illness, which could be one of the causes of child neglect and gender-based violence. Such involvement would make households a safe place to be, which would help in the containment of the spread of the coronavirus.

References


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