Getting This Off My Chest: Ethnography as a Disruptive Theological Practice
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ABSTRACT
Through an examination of one woman’s narrative of intimate partner violence, this article argues for an understanding of healing as an emerging process in the lives of women affected by violence. As such, the author argues that there is a pressing need (in both theology and practice) to hear all of women’s stories as they work through their experiences of violence and abuse, including feelings of ambivalence and uncertainty. Grounded in an ethnographic study at a homeless shelter in Atlanta, this article encourages theologians and practitioners to examine the ways that narratives of violence are heard and silenced in women’s search for healing. The author posits that the effects of violence on a life necessitates a reconceptualization of what it means to be a subject, what it means to tell a story, what it means to heal, and the role of God in bringing these things to bear.

On a cold winter night in 2008, I found myself—a second-year graduate student in practical theology and a research assistant on an interdisciplinary ethnographic project—alone in a small break room of a homeless shelter in Atlanta, Georgia, hearing one woman, Diana, tell of her journey from an abusive relationship to (relative) stability at the shelter. Over the course of two hours, I listened as she spoke about the intense physical and emotional abuse she had endured, including being raped and beaten while she was pregnant. Diana, a nineteen-year-old African-American woman, had recently come to live at the shelter because she realized that
she could no longer live with her partner, who abused her for almost all of the four years that they were together. Although, as she said, the abuse started “small,” with shoves and verbal abuse, it soon grew to such extremes (being shoved into a wall, punched, and kneed in the stomach) that she would stay with a neighbor or family member on particularly “bad” nights. After being beaten during her first two pregnancies (one of which miscarried, the second was stillborn), she felt that she had to leave her partner when her third child was born: “I took him back so many times for so many things and if I continue to do that, what’s going to be his initiative to change or to be a better person if he sees ‘I can hit her, I can cheat on her, I can cuss her out, I can do whatever I want to do and she’s not going anywhere. So why do I have to change?’ You know? That’s one of my biggest reasons for leaving him.”

My responses to Diana’s story seemed inadequate at times, “gosh,” “wow,” “Oh my God.” Yet my incredulity at how she survived all of this seemed to spur her on. Diana reflected several times on her own strength, saying that she didn’t know where it came from: “Nobody ever really sat me down and talked to me and any of that. I just had to go through a lot of stuff.” Going through “a lot of stuff” meant living through the trauma of abuse, the hope that her partner would change, and the realities of violence that occurred when he didn’t. Diana decided to leave during her third pregnancy, when a physically violent outburst by her partner led her to realize that by staying, she wasn’t helping him to “change or be a better person.” What she wants is not just a “change for me but to change for him. I’m trying to help [him].” Later in her interview, Diana revealed that she often thinks about returning to her partner, particularly if he is able to make the changes that “God wills” for his life. She felt that she could not share these reflections on her ambivalent feelings about her partner with others—particularly the women at her church or others at the shelter. Diana’s relationship with her partner was at the crux of her expressed inability to relate to others, especially the women in her church. She felt that unless she told her story the “right” way, depending on the context, it would not be heard. Although we did make it through the questions required by the project’s interview protocol, most of the interview was consumed with Diana’s need to tell her story—to talk to someone about who she was, how she felt, and where she wanted to go with her life. As she left the break room where we had been talking, she sighed with what seemed like great relief. “Thank you,” she said. “I needed to get that off my chest.”

I spent that night alone in my apartment, alternating between rage over the violence Diana endured, extreme sadness for what she suffered, and wonder at how she managed to seek wholeness and transformation in the midst of it all. I was haunted by this experience. I am haunted by this experience. For a long time, I was unsure of what made this particular interview different from the fifteen others we conducted, many of which also chronicled emotional, physical, and familial abuse. This interview felt so unsettled, perhaps because I never saw Diana again (I left for winter break and she moved out by the time I returned). However, as I return to Diana’s interview transcript (again and again), I find that it is her story itself that is so unsettling. It unsettles me as a theologian, a feminist, and a former public health practitioner. If I am honest with myself, I can
say that what I wanted for Diana is for her to be able to see and live into a liberating narrative of freedom from the violence of her abuser. I wanted to hear her say that she would never return to the man who beat her and caused such intense physical and emotional pain. Instead what I got was a story that was complicated and murky. It had no real beginning or end. Instead it was, like many narratives of violence, a story that was at some ambiguous middle point along a narrative stream that was anything but linear. It was, I believe, this state of narrative limbo that most unsettled me, causing me to re-think my understanding of what it means to be a subject, what it means to tell a story, what it means to heal, and the ways we might see the movement of God in the midst of it all.

As a practical theologian, I would argue that my theological task is to be attentive to the ways that theology—our understandings of God’s work in the world—happens in the midst of everyday life and practice. This is where I find ethnography to be most illuminating—and disconcerting—in my work. Doing ethnography reminds me that life is messy and complicated. It also can make doing theology messier and more complicated. As theologian Mary McClintock Fulkerson found in her ethnography of a multiracial Christian church, the Christian theological “zeal to find good news can slip easily into the desire to smooth out the tangle called ‘community,’ rendering it amenable to the correct theological categories.” In other words, our tendency can be to gloss over those things that make us uncomfortable. We skip over the rough, ambiguous parts of the story in an effort to illuminate the future potential of justice and worldly transformation. I would argue that it is, however, these sticky spots, these rough and knotty edges with which we must wrestle if we are, as theologians, to bear witness to the effects of violence on a life effectively. The practice of ethnography, of being with/in community, can provide the perhaps necessary disruptions of our understandings of narrative and theology, encouraging a reformulation of practice for gender-based violence that allows us to hear the complexities and ambiguities of lived experience. By shifting our attention to the ways that women live with and through violence and trauma, we might come to a better understanding of the ways that women envision healing and conceptualize the role of God and community in bringing these things to bear.

Taking this as my starting point, this article explores Diana’s attempts to navigate and define what “healing” means for a domestic violence survivor in light of the various contexts and communities in which she lives. The interview on which this article is based was meant to address reproductive health and religion. Instead, it consisted of Diana’s need to speak and reflect on her experiences of domestic violence. Particularly, she felt that she was unable to share certain parts of her story—namely her ambivalence about one day returning to her abuser—with others in the homeless shelter where she lived, her family, or her church community. By starting from Diana’s story, I explore the ways that her ambivalence about returning to her abusive partner provides narrative, theological, and practical disruptions that challenge our assumptions of what violence is and how it is experienced and resisted in everyday life. This particular ethnographic encounter, where Diana’s need to “get this off my chest” outweighed whatever motives I had for our being together, provides a powerful lens for thinking about the ways those who work with women affected
by violence are (or are not) able to cultivate empathic relationships of care. I argue that to provide a widened contextual healing space for women affected by violence, we must address both: 1) the ways women affected by violence are facing complicated, ambivalent decisions about who they are as human subjects and 2) the ways that communities (particularly ecclesial communities) can best support them in these navigations.

Setting the Stage: Life at the Homeless Shelter

This article is one product of participant observation research at an Atlanta homeless shelter for the Religion and Reproductive Health Project, a collaboration between the Department of Religion and Rollins School of Public Health at Emory University. The larger project uses the strengths of ethnographic, qualitative, and quantitative methods in multiple research sites to establish a more in-depth look at the relationship between a woman’s decisions concerning her reproductive health and her faith or spirituality.

Among other research activities, researchers on this project participated for thirteen months in group discussions that residents are required to attend, on topics that include (among others) personal hygiene, Black parenting, self-esteem and body image, faith and empowerment, and “strengths and weaknesses.” Along with other researchers on the project, I conducted participant observation fieldwork and interviews as well as participated in focus groups. In the in-depth reproductive health life history interviews, women’s narratives included details about how they became pregnant, why they became pregnant, contraceptive methods used or not used (and why), and decisions concerning abortion and pregnancy timing.

This shelter serves families with young children, so all of the women we worked with have children under the age of three. Of the sixteen reproductive health interviews conducted, fifteen of them were with African-American women. This reflects the general make-up of the shelter, where most of the residents are African-American women. Most residents are single mothers; however, occasionally a woman’s partner comes to live with her at the shelter. The majority of women we interviewed at the shelter identify themselves as Christian, although only six of the women we interviewed worship regularly at a Christian church. Many of them found that the transient life of homelessness made it hard to identify and regularly attend worship services at a local church. Despite this fact, some women are able to find a supportive, stable faith community home during their time at the shelter. I attended church services with two of the women who participated in the project at evangelical, non-denominational churches in the Atlanta area. Both women encouraged me to visit their churches because they wanted us to meet and interact with their pastors, who were described by the women as caring, open, and prophetic.

The caring atmosphere described and enacted in these two congregations was, unfortunately, not what Diana met as she struggled with her own experiences of domestic violence. Diana experienced what pastoral theologian Christie Neuger has named as the “overwhelming silence…in
most of our churches and communities,” about domestic violence, despite the fact that statistics about domestic violence are increasingly publicized in television and news media outlets. Rather than seeing domestic violence as a problem that should be addressed in the faith community, “somehow, we believe these numbers don’t have much to do with us or with those we know.”

Diana’s problem was not, however, feeling that she could not tell her story or talk about abuse in her church. Instead, she felt that her church was not a place where she could share life’s entire story, particularly the part of her narrative that named her ambivalent feelings about returning to her partner, the man who abused her in the past.

**Let Me Know I’m Not by Myself: Disruptive Narratives**

Although the interviews at the homeless shelter always began with the same question, “tell me how you came to live at the shelter,” (usually followed with the response of losing a job or getting evicted) Diana began her interview with an atypical answer. She told about how she was escaping what she described as “an abusive relationship, physically, mentally.” She began by telling me about early experiences of violence in her relationship:

> Early on he’d do little stuff like just pushing and stuff but then getting into it probably about before I got pregnant with [my son], that’s when he really started trying to do more … I had a knot in the back of my head, I filed a police report and everything and I said, I got to get away because, you know, he’s like, “I’m never going to do it anymore, I’m sorry, I was drunk.” That doesn’t matter to me. You know? Because you still beating and you could do it again. So I had to leave.

Her interview chronicled the abuse she suffered from her partner (including attempts upon her life, rape, and abuse during pregnancy) and poignantly recalled the sorrows of losing two children. Diana and her partner had been friends since the young age of twelve, starting their romantic relationship when she was fifteen. He was her first boyfriend and the only man she has been intimate with in her life. In the early years of their relationship, while Diana was still in high school, she wanted to find the “fairy tale” with her partner, which she described as a happy family life with a husband and children. This belief that they would form a family and be together “forever” led Diana to become “indifferent” about whether her partner wore a condom during sex. When she went to the local hospital clinic for her annual gynecological exam, she heard from the doctors that she was “very smart and you’re in school…you don’t need to be thinking about sex and babies right now.” Once the doctors realized that she was “going to do it anyway,” they told her about contraception, STDs, and emergency contraception. As she says, “they discussed abortion, adoption, Planned Parenthood. They, they drilled it. Every time I went I had, like, a pamphlet, a whole bunch of pamphlets. So yeah, I mean, I was aware of all the risks. I was aware of everything.”

Even though she experienced the death of two children during high school, Diana went on to finish high school and eventually finished her Certified Nursing Assistant degree at a local community college. Her desire to keep the “fairy tale” alive led her to stay with her partner during
this difficult period of both personal loss and professional progress. Although she felt that God was “giving [her] signs” to leave her abusive partner, during this period in her life, Diana turned the other way, waiting instead for “one more sign” to let her know that she needed to change. She described this period as one in which she turned away from God in order to continue to believe in the “fairy tale” offered by her partner. As we will hear later, although she knew that abuse was not a part of “God’s plan” for her life, her continued hope in her partner’s ability to change kept her in an abusive relationship.

As Diana struggled to figure her life out, she turned to others around her for advice. However, she rarely felt like others really “listened” to her, lamenting the fact that they often told her what to do or offered advice in an authoritarian way:

I would really like for somebody to be realistic and say, you know what, what you’re going through? You’re not the only one... just, you know, give examples and let me know that I’m not by myself in this struggle I’m going through. Because a lot of people, they’ll say, well this is what you need to do, you need to do this and you need to do that and just act like they’ve never experienced the feelings that I’m feeling. But if I say, yeah, I’m thinking about going back to him, [I hear], “You don’t need to go back to him”... I don’t need all of that... But a lot of people, they want to tell you what they think you should do.

Indeed, this was a common concern for other women at the shelter, who felt that they were often told what to do rather than listened to, particularly in their experiences with doctors, public health officials, and educators. As one woman said, she wants to hear from people who have been where she is, rather than those who seem to have a “perfect” life and position from which to offer prescriptive advice. Like Diana, they want someone to “let me know I’m not by myself” in navigating the complexities of life.

While other women at the shelter talked about prescriptive advice in terms of health education, poverty, and economics, Diana wanted others to listen to her as she parsed through her complicated feelings for her partner. Her relationship with her partner has a profound effect on how she sees herself and how she conceptualizes her own healing process. Like the women anthropologist Sally Engle Merry worked with in domestic violence shelters who hesitantly (and sometimes never) adopt a human rights subject position, Diana refuses to characterize her partner as a batterer. She acknowledges that people can change. This is perhaps the part of her narrative that others find so difficult to hear. Indeed, when Diana talks of telling her story at her church, she notes that she is afraid that the women there will offer her advice rather than listening to her. Merry argues that this aspect of women’s shifting subjectivity is often ignored or “coached” away in social service delivery and human rights activism around gender-based violence. Women’s adoption of various subject positions is often accomplished through a process of “trying on,” in which they test out the subject positions of “battered woman” and “good wife.” The battered woman subject position is one defined and enacted in social service and legal systems; this position requires that the woman take legal action against her partner and see him as a batterer. The good wife position is its opposite, and requires that the woman ignore, condone, or seek to change the abusive patterns while
keeping her partnership or marriage in tact. As Merry notes, these subject positions cannot exist in one woman at the same time, “indeed, women are choosing between two incompatible subject positions, one the rights-bearing subject, the other the good wife…the battered woman cannot simultaneously enact both.” In order to receive valuable services and/or community support, she must choose to project one of these positions in each particular time and place.

Diana’s narrative exemplifies the moves that women make between these two subject positions that Merry describes. She both refuses to see her partner as a batterer (acknowledging that he might change), yet she also seeks her own healing by leaving her partner and coming to live alone at the shelter. This complicated position keeps Diana from speaking to the women at her church about how she might navigate this space. If she tells these women about her experiences, and then returns to her abuser, what kind of woman is she (and what kind of a man is he)?

So, I just, I don’t know, but as far as he goes, I try to keep him saintly in everybody’s eyes because in the back of my head I’m thinking, I know everything he puts me through but I’m probably still going to end up going back to him so I don’t want to go back to him and then I told everybody all this stuff … that cause[s] confusion between me and him.

There is no space in either Diana’s relationship with the women at church or her partner for this ambivalence, so she chooses to keep the images separate in an effort to eliminate “confusion.” In her attempt to navigate what it means to be caught in the middle of her own healing and her feelings for her partner, Diana feels cut off from any sense of an empathic community that might provide much needed care. Indeed this complicated space between leaving and staying is experienced by many women affected by intimate partner violence. As Viveka Enander has noted, women who have experienced intimate partner violence feel themselves stigmatized for both leaving an abusive partner and for staying. As she writes, “In the first case, women are made responsible for keeping families together, regardless of the individual cost. In the second case, women who are subjected to male violence are made responsible for solving this difficult social problem by the individual act of leaving.”

Caught between a rock and a hard place, women can feel judged for either position they take. This sense of judgment is particularly significant if we understand leaving an abuser as long-term process that Enander and Holberg describe in three parts as breaking up, becoming free, and understanding. The process of becoming free from an abuser, where Diana was at the time of this interview, “involves release from the strong emotional bond that battered women may develop to their batterers.”

Although we can acknowledge (with Diana) that leaving her abusive partner was a positive and important step in her healing process, as she processes through the complex process of “breaking free” from her abuser, she lacks of a community of care that will listen to and support her. As philosopher Susan Brison writes of her own experiences and reflections on the effect of rape on the creation and maintenance of the self, “in order to recover, a trauma survivor needs to be able to control herself, control her environment (within reasonable limits), and be reconnected with humanity. Whether the latter two achievements occur depends, to a large extent, on other people.”
Practical Matters

Brison writes about her efforts to alter her environment after being raped, by taking self-defense classes and slowly beginning to feel comfortable walking alone at night. A shelter, although it imposes strict rules and limits personal freedom, has become a space in which Diana can begin to imagine a new life for herself and her son:

It was hard at first but then I just think about if I’m not here then I’d be there getting abused everyday so, you know, I kind of like it. I kind of like having the space for him [her son]. I like coming here and not seeing him and not, you know, not being around him [her partner]. It feels good on that level. But then on another level, I look at my son and I’m like, I’m sorry. He doesn’t like living in a shelter, you know, I’m sorry. And it’s a lot of rules and stuff to get used to and I have to, and I have to get used to some things. And it’s like some people here are just unpleasant and, you know, it’s a lot of females, a lot going on, and I’m not used to that because I’m just used to just going home, it’s peace and quiet until [my son’s] dad gets home from work, you know. But it takes some getting used to but I’m not upset about leaving his dad. I’m not upset about that at all.

In this way, her choice to leave her partner and live in a homeless shelter reflects her own sense of growing control over her life and her life story. However, her inability to tell that entire story prevents her from being able to reconnect with humanity on her own terms. She has no “empathic other” to listen and help her both to reconnect to humanity and to begin the process of recovery. She feels that outside of the confines of the private interview room, her story cannot be told. For many women affected by violence, to begin to heal from trauma requires the presence of someone who hears and knows what she has endured.

Healing from trauma is complicated because it relies on others, who often refuse to hear the disruptive elements of our stories. Psychologist Laurence Kirmayer argues that trauma narratives are accepted differently in different contexts, pointing to the dissociative narratives of childhood abuse (which often exist as forgotten information or gaps in knowledge) and the collective remembering of traumas like genocide and war (which can emerge as public retellings). For those whose narratives are perhaps too difficult to hear or speak in public (like rape, childhood abuse, and domestic violence), the memories become dissociated and sequestered “in a virtual space shaped by the social demand—and personal decision—to remain silent, or to speak the unspeakable only with a voice one can disown.” These memories “may be isolated from other networks of association by interpreting them as dissonant or inconsistent with self-representation and personal history.” This not-hearing of narratives of personal trauma leads the person who experienced that violence to attempt to dissociate from it, at the request (unstated or verbalized) of others and for their own self-preservation. Kirmayer argues that this produces a dissociation from the narrative of trauma “by tolerating gaps in accounts of memory, identity, and experience when they occur; by expecting such gaps and creating a place for them in the story; by hiding gaps from others with diversions; or by hiding gaps from oneself by inventing alternative selves.” Because the women in her church “tolerate” the gaps in Diana’s narrative of her “saintly” partner, and because she feels she needs to hide her experiences of fear and love for her partner, a part of herself becomes hidden.
to others. Those in her social world then come to expect this from her. It is, in some ways, much easier to deal with a unified story with expected gaps (that we refuse to hear into speech) than to confront the shadows of violence in both the survivor’s narrative and within our own lives.

Diana’s narrative offers us a glimpse of the ways that expected narrative gaps can be opened to reveal disruptions in the ways we want to hear or speak about violence. The ethnographic art of paying attention can help us to listen into those narrative gaps, allowing a complex, lived story to emerge where once we only saw a safe, unified whole. Diana’s disruption of my ethnographic goals reminds us of the disruptions of trauma in the life narrative itself. Diana’s search to integrate traumatic experience and her own feelings of ambivalence into her life story was not accomplished solely through the telling of the story itself. Rather, she also sought healing and self-integration through her relationship with God.

I Know God Will Make a Way: Disrupting Theology

As I noted earlier, Diana’s ability to seek out healing was both supported by the structured life at the shelter and hindered by her lack of a supportive community of care in her church. However, she was still able to see God at work in her life. Despite the imposition of violence and trauma, she envisioned a new and better future for herself and hoped for a similar change in her partner. I must underscore that it is only this belief that he has the capacity to change that allows Diana to consider returning to her partner. Unless he is able to change his life and relinquish violence, she knows that to return to her partner would be a violation of what “God wills” for either of their lives.

Her understanding of the ways God can and does work in the world allows Diana to hold the two subject positions Merry describes (that of “good wife” and “battered woman”) in tension. Her understanding of healing, in a sense, is dependent on her hope that there is a possibility for change and transformation for all of humanity—with God’s help. Diana was able to change because she was able, through her experience of abuse, to empathize with God:

I’ve always had my faith and my spirituality but I just got wrapped up in other things and I kind of put it on a back burner, like before [when I would] do something, I know this is wrong but [I would say] what I’m going to do when I get home is I’m going to ask forgiveness, you know. And I realized I couldn’t keep doing that because I know God is really forgiving but I know it hurts him just like it hurts me when, when [my child’s] dad will come to me and apologize, “I’m sorry, I won’t never do that to you again baby.” And he does it again. You know, I couldn’t take much more of that. So I was like, why would I treat God like that knowing that I don’t like that myself?

Diana’s relationship with God was transformed by her ability to imagine a life free from violence. As grief counselor and theorist Kenneth Doka has argued, although some who are affected by trauma may experience a severe rupture in their ability to relate to a divine source, for others, working through trauma can actually lead to what he describes as a “more resilient spirituality” that “allows individuals to confront the ambiguity and unfairness in life.” Diana’s interview chronicles
her sense of her deepening spirituality (what Doka might name as “resilience”), as experienced through her confrontation with violence and trauma. She realized that although God offered forgiveness readily, her quest for forgiveness was, in many ways, as empty as the promises her abuser made that he would change. “I’m telling him, God is giving you all these signs to stop doing this and stop doing that but you’re still doing it. You know, I looked into myself like, hold on, I’m doing the same thing. God is giving me all these signs to leave this relationship but I’m not listening.” Diana realized that by refusing to see “God’s signs” that she should leave her partner and refuse to live in the midst of violence, she was perpetuating the same empty faith she saw in her partner. She realized that God desired transformation not only for her partner—but also, importantly, for herself. As she went on to say, “You’re telling him, God’s giving you a sign…and I was like, I’m doing the same thing. So I left.” Leaving was the first step in reestablishing her relationship with a God who provides healing and offers transformation by way of a new vision, or a “sign” of things to come. As we see in her story, her partner is not the only one who needs to change. Diana is able to paradoxically navigate her own healing in a way that includes conceptualizing transformation for both herself and her abusive partner. In this way, neither person is personified as either all good or all evil. Rather, the capacity for both resides within each person.

Diana’s growing “resilient spirituality” led her to see the complex intermingling of good and evil in her life story. Indeed the presence of evil in our own lives and in the world is a difficult fact with which Christians must wrestle. As theologian Wendy Farley writes, “Christianity has taught us we suffer because we have fallen into sin and that at some level our sufferings are justified. Guilt is, perhaps, less intolerable than awareness that we inhabit a cosmos in which we are deeply and fundamentally vulnerable no matter what we do.”

Rather than trying to explain away the presence of evil or suffering in the world, we must instead turn “toward the truth of suffering, not away from it.” This call to turn toward the truth of suffering in theology is echoed in Diana’s life. In order to heal, she must face the violence in her life head-on. For Diana, this means acknowledging the fact that violence is not what God wants for her life. The suffering itself does not have the last word in her life. Rather, human life is made up of “two realities” that “fundamentally condition the experience of being human: suffering and this unsustainable good that longs for freedom.” In Diana’s narrative we see this in her desire for healing and transformation (achieved through separation from her partner) despite the intense pain and suffering she has endured:

But I really try to just show other people, you know, and I’m going through my struggles so they’re looking at me like, oh yeah, you all in church and you all into God and stuff but you’re still struggling, you know. But I’ll be like, I know God will make a way. I know that God will make a way, I’m OK.

Although she is “struggling” with the presence of violence and evil in her life, the reality of suffering is not all that is. God will also “make a way,” providing a vision for healing and wholeness in the midst of hardship.

Diana’s description of God’s ability to “make a way” speaks to and with womanist theologians’
descriptions of God’s vision for healing, wholeness, liberation, survival, and quality of life in the lives of African-American women. As theologian Monica Coleman affirms, this type of womanist theology of salvation “is not always liberation or freedom from all pain and suffering…Salvation is also survival and quality of life, and it requires the cooperation of the world in which we live. While God offers salvific resources, humanity must take advantage of these resources to effect salvation.” Coleman explores womanist and process theologies of salvation in critical correlation to determine a “postmodern womanist theology” that is able to speak to both the “problem of evil” and “declarations about survival, healing, and salvation.” This understanding of process allows Coleman to name her postmodern womanist theology as “an activity. It is a verb, a gerund. Health and wholeness come through teaching, healing, remembering, honoring, possessing, adopting, conforming, and creatively transforming. Saving. It is making a way.” Coleman expands upon womanist conceptions of making a way by emphasizing the “doing-ness” of this theological stance. It is not something that is ever finished. Rather, making a way reflects the ways that the world and God live into justice and wholeness in the “gritty, localized, and contextual” places we inhabit.

Coleman’s womanist postmodern theology of “making a way out of no way” helps us to redefine healing itself as a process. This process is reflected in Diana’s own assertions that although she is currently experiencing hardship and trial, “God will make a way” for her in and through that suffering. Diana’s narrative helps us to see that evil and suffering are realities of everyday life that must be met and worked through—not projected outside the self. She struggles with her relationship with her abusive partner—knowing that he is her son’s father, hoping that he can one day change, and yet knowing that until he does change completely she cannot be with him. Jungian theorist Edward Whitmont describes the ways that the experience of evil can be “projected in two forms: individually, in the shape of the people to whom we ascribe all the evil; and collectively, in its most general form, as the Enemy, the personification of evil. Its mythological representations are the devil, archenemy, tempter, friend, or double; or the dark or evil one of a pair of brothers or sisters.” Diana’s narrative reflects a realization that evil is not something that must be cordoned off from the self or community. Instead, she believes that the church community itself should be a place in which we can confront the reality of evil with which we struggle in our own lives:

So I started pulling away from him and started trying to work on my faith and work on my spirituality and I’d tell him things, oh, we need to go to church together. [He would say,] “I’m not ready to go to church, I’m not right yet to go to church.” I said, “That’s the time you need to be in church, when you’re not right.” I said, “God, He, He wants people like you to come to church. If we were all right, we wouldn’t need church.” You know, he was like, “Well, I don’t want to walk in no church knowing that I’m going to probably leave and drink and beer and this, this and that.” And I’m like, “well, how do you know when you go into the church, you won’t come out changed?”

Diana, like Coleman, understands that community itself can hold redemptive power. In the presence of this divine community, you can “come out changed.”
The fact that we might “come out changed” in the midst of suffering and violence is something that Diana’s narrative helps us to see as a real possibility. It is not something that happens overnight, but rather it emerges in its own time. The fact of the violence cannot be erased, but it can be transformed with time and care. As Susan Brison writes at the close of her philosophical exploration of selfhood narrated through her own experience of rape:

What I wish most for my son is not the superhuman ability to avoid life-threatening disasters, but, rather, resilience, the capacity to carry on, alive in the present, unbound by dread or regret. Not the hard, flinty brittleness of rock, but the supple tenacity of the wind rocked bough that bends, the bursting of desire of a new mown field that can’t wait to grow back, the will to say, whatever comes, Let’s see what happens next.29

Hearing Diana’s narrative, with all of its gaps and disruptions, opens us up to a new theological understanding of healing, one in which we confront suffering head-on, and reconfigure linear narratives of progress and forgiveness (what women like Diana often hear) to re-think healing from violence as the ability to imagine a new future.

It is crucial that as theologians continue to wrestle with understandings of the meaning of healing and salvation in the world, that we keep our eyes and our ears open to the ways that they are lived and experienced, including the ways that we resist hearing into all of the gaps and silences inherent in the narrative of violence itself. By listening to these gaps in Diana’s story, we learn that healing requires an acknowledgement of suffering, urged forward by God into a new vision of future transformation. Healing is then a process that can be described as a desire to “see what happens next” and the faith that God will indeed “make a way.” This faith that “God will make a way,” for Diana, necessitates the presence of a community that will listen to and support her as she navigates through the process of healing. As I will discuss in the next section, this is not to say that women’s safety and their ability to escape situations of violence and abuse is not of paramount importance. As someone who has volunteered in a domestic violence shelter, I know that it is. As researchers on domestic violence have noted, the process of leaving an abusive partner is long and tenuous. My question is, given the difficulty and long-term nature of these navigations, how can we best support women as they navigate the process of what Evander calls “breaking free”?

What Diana helped me to realize is that in addition to theologically and politically refusing violence, we must also be willing to widen the contextual spaces for healing so that we might best support survivors of violence as they process through the ambiguity and complexity that violence forces upon a life. Because for women affected by violence, the support and care of an empathic community is critical for integration and healing, we must also pay attention not only to the ways that healing is narrated and spoken of, but the ways that it is practiced and engendered.

Getting this Off Our Chests: Disrupting Practice

The ability to imagine a new future is a daunting task, and I would like to think about the
kind of communities of care we might create that are able to hold women like Diana as they live
in the ambiguity that confronts survivors of domestic violence. For Diana, it was not speaking
about her experiences of violence in her church that was difficult. Rather, it was her fear if her
partner listened to “God’s signs,” changed his ways, and she decided to be with him again, that the
members of her church would no longer accept either of them. As she works through the process
of “breaking free,” Diana does not feel at home in her cherished community.

Of course, in most churches, domestic violence itself remains a silent problem. Elaine Lawless
has documented this silence in the Christian church around domestic violence in her ethnography
of a domestic violence shelter, where she found that women were reluctant to talk with their pastors
because they were often greeted with the mandate that wives should “submit to their husbands.”
I do not deny that domestic violence is still a silent problem in the Christian church. Rather, what I
am arguing is that there is more being silenced than the violence itself. When women are allowed
to speak of violence, their ambivalence regarding violence, healing, and forgiveness can be muted.
This is perhaps because intimate partner violence, if it is addressed at all, is usually addressed in
faith communities as a moment of crisis in which the woman needs to be removed from the abuse
(and abuser) and provided with resources to keep her safe. This response is crucial, but as Christie
Neuger argues, women often do not come to the church for pastoral or community care during the
time of crisis, but rather “as a result of the longer-term effects of the trauma.”

Women who have experienced intimate violence are not—for the most part—in distress because of “psychological or
behavioral defects,” but rather “they are in distress because (1) they have had minimal opportunity
to process and integrate a traumatic history into the rest of their lives, and (2) they have skills and
strengths that were of great help to them in surviving the violence but that now get in their way.”

As Diana navigates her relationship with her abusive partner, she fears that were she to tell the
women in her church what happened, she will hear that, “this is the only way and you got to do
it like this or else you’re going to be a bad person.” Although I did not attend church with Diana,
and therefore have not seen for myself her church’s response to intimate partner violence sur-
vivors, her fears are corroborated by Morrison, Luchok, Richter, and Parra-Medina, who found that
among the women they interviewed, almost all felt that victims of domestic abuse were described
by their families and communities as “stupid” for being unable (for whatever reason) to leave an
abuser. I am not here arguing that because of fears of stigmatization that we reject the crisis re-
sponse to intimate partner violence. Indeed many faith communities need additional education on
how to support women as they develop safety plans and eventually leave an abusive situation.

What Diana’s story reminds us, however, is that in supporting survivors of violence, we might also
investigate what it might mean to take the time to listen to their experiences of the complicated,
ambiguous navigations of the effects of trauma on a life. This is, for me, the most haunting part
of Diana’s narrative. As she attempts to build a more “resilient spirituality,” wading through her
complicated feelings of love and animosity toward her partner, she feels she is alone. What does it
mean that the interview room—rather than the faith community—is the place where Diana is able
to “get off her chest” the difficulties she faces as she shifts betwixt and between the subject positions of “good wife” and “battered woman?”

Her interview has caused me to reflect on what it might mean to cultivate spaces where women like Diana are able to get their stories “off their chests.” As Elaine Lawless, Susan Brison, Christie Neuger, and others have argued, the ability to tell one’s story in community can help to facilitate healing and recovery. Neuger names this as the “biblical mandate of hospitality” in working with women affected by domestic violence. We are to show:

hospitality to all, but especially to strangers. And in this context when we are talking about strangers we are talking about those who are the most vulnerable...This religious tradition [of hospitality] does not allow us to respond to the victims of violence only with comfort and care. It requires that we not allow this harm to keep happening and it requires this of the whole community on behalf of all who are vulnerable.35

Hospitality entails not only immediate care for women who have survived violence; it also calls for a communal response to end that violence. Being hospitable requires naming and refusing violence and oppression. As Neuger states, “In order to heal from trauma it is necessary somehow to integrate this alien and fragmenting experience and rebuild a narrative that allows meaning to be built out of it. It is also necessary to rebuild the narrative in such a way that hope is present—hope in a life of meaning and purpose, not just survival.”36

Building on this sense of hospitality or story-telling, what I am arguing for is quite simple. It is that given the painful and complicated navigations survivors of violence face, we might think critically about the practices (and perils) of listening, particularly to stories of violence. We might ask ourselves: What is spoken? What remains silenced? Who speaks? What do they say?37 We might listen for those stories that, however painful and difficult to hear, are still not being told. What stories still need to “get off our chests?” Given that I am arguing for further reflections on practices of listening, we might ask what then, should be the response of one who hears these utterances of violence, hears them amidst and within the various contexts of women’s lives as victims, activists, survivors, and the various other labels we place upon them to make better “sense” of their stories? And what might theologians learn from these narrations and everyday experiences of living with the violence of the past?

Perhaps the first thing that we realize is that this encounter is difficult and painful. When we hear of violence, our first instinct is to brush it off, as if it could not happen to us; however, the reality is that it could. As a woman, hearing about another woman’s experiences of violence is difficult because as Brison argues, women “enter womanhood freighted with postmemories of sexual violence.” Postmemories, the “memories” women have of violence they have seen or heard about in the media and in our daily lives, “reaches into the future in the form of a fear, a kind of prememory of what, at times, seems almost inevitable: one’s own future experiences of being raped.”38 So although we might not have experienced sexual violence ourselves, we, as women, are profoundly affected by other women’s experiences of rape, and then socialized into the realization that rape is
a possibility for our own future. We hear stories like Diana’s and think, “it couldn’t happen here/now/to me/and so on.” But it can, and it does, and at some level, we know this. By giving into our desire to remain “free” from violence, we can make harmful mistakes, “we live with the unbearable by pressuring those who have been traumatized to forget and by rejecting the testimonies of those who are forced by fate to remember.” Our refusal to listen can be lethal.

Hearing of violence also thrusts us, theologically, into the unknown—where is God amidst all of this? Who will protect me? As pastoral theologian Emmanuel Lartey writes, “As we gaze into the depths of human suffering, the apparent ‘silence’ of God and how woefully inadequate our theodicies and theological explanations often are, we come to recognize just how little we know and how few answers we really have.” The situation of violence forces us to encounter our own limitations and wrestle with our conception of who God is. Serene Jones, in her eloquent reflection on theologies of the cross in light of experiences of trauma, wonders if it might be that “when sacred rhetoric meets the embedded realities of traumatic images, perhaps silence, accompanied by gesture, is the only appropriate response.” As Lartey and Jones remind us, the imposition of violence and trauma in a life affects our theologies in profound ways. Instead of proclamations of what is right and true, we are left with “unsettling and unnerving” new truths. These are that in the silence that trauma insists upon us, we might still feel or glimpse the movement of the divine—a movement that urges us toward healing and toward transformation. Like Diana, we might attune ourselves to the silences of trauma in order to discern God’s ability to “make a way” where once we saw only chaos and violence. This process (for it can only be named as such) is one that we should not have to navigate alone.

In conclusion, one might ask what we learn when we interpret Diana’s story through a theological lens? One answer to this question lies in the fact that Diana narrates her own sense of healing through her conception of who God is and how God works in the world. She is able to see a new future through her faith that “God will make a way.” To hear her story, then, means hearing Diana’s theology. This is not to say that only theologians can effectively “recognize” these categories or terms. Rather, it helps those of us who work with women affected by violence to remember that for some women to heal, a connection to a divine source is of paramount importance. For many women, an ability to see a future in which violence and suffering are worked through depends on an understanding of the ways that the divine enables and encourages that vision of future flourishing. Hearing their stories of violence necessitates engaging their theologies of healing and transformation.

Initially, I thought that my responses to Diana were absurdly inadequate. A response of “hmm” hardly seems helpful to someone who has endured years of trauma and abuse. However, it is perhaps these ethnographic silences that allowed Diana the space to tell her story, as difficult and painful as it was for me to hear. In these practices of listening to those things that still need to “get off our chests,” we might begin to hear the growth of spiritual resilience in the midst of trauma. We might also hear pain and ambiguity. With Diana we might hear that although suffering and trauma
exist and disrupt our sense of self, we can still envision a new future that continues to emerge. The beauty and the challenge of this type of ethnographic, theological reflection is that we won’t know it until we hear/see it. As anthropologist Veena Das asserts, “when faced with the kind of trauma that violence insists upon us, we have to be engaged in decisions that shape the way that we come to understand our place in the world.”

I argue that through ethnographic disruptions, like those I experienced with Diana and other women at the shelter, we might—as theologians and practitioners—re-think our own “place in the world.” We might widen our conception of what it means to be a person who tells a story so that she might heal. As we do this, we become better able to bear witness to both the complicated navigations of violence and the imaginative transformations of healing as they are narrated and lived.

Notes

1 Acknowledgements: I am so thankful to the women who shared their life experiences and stories with me throughout the project and the shelter staff members who gave their full support to this work. This research is based on an interview I conducted while working as a research assistant for the Religion and Public Health Collaborative at Emory University. The ethnographic component of our interdisciplinary project on women’s reproductive agency was conducted primarily by Dr. Iman Roushdy-Hammady (principal investigator) and myself, under the supervision of Dr. Don Seeman in the Emory Department of Religion. We also worked closely with Dr. Winifred Thompson, Dr. Laura Gaydos and Dr. Carol Hogue from Rollins School of Public Health. I am grateful to all the members of the research team for their mentorship and collegiality. I would also like to thank Don Seeman, Emmanuel Lartey, and Carol Lakey Hess for their comments on various drafts of this article, and Iman Roushdy Hammady for being such a wonderful “on the ground” ethnographic instructor.

2 All names and identifying information have been changed to ensure confidentiality for project participants.

3 In this paper, I write from my own perspective informed by my feminist commitments and Christian practical theological approach. I also hope that the comments made here can prove helpful for those working outside of a Christian or theological context.

4 As Mary McClintock Fulkerson states, “in contrast with the definition of normative memory or systematic or philosophical judgment, the practical theological task has to do with the way Christian faith occurs as a contemporary situation” (7). I understand the practical theological task in these terms, as theology that is birthed out of a particular focus on lived experiences and contexts. Practical theology can also be defined in terms of its connection to and contribution to Christian ministry and practice. See for example Dorothy C. Bass and Craig Dykstra, For Life Abundant: Practical Theology, Theological Education, and Christian Ministry (Grand Rapids, MI: William B. Eerdmans Publishing Company, 2008).


6 The shelter’s name has been kept confidential. Families reside at this shelter an average of nine months,
so although shelter stay is temporary, the shelter provides longer-term housing than most emergency assistance shelters in the Atlanta area. The shelter offers many services for the families in its residence, including counseling services (individual counseling and weekly “safe group” sessions), intensive job skills training, financial planning assistance, child care, and five-years of “After Care” assistance for families that leave (this includes housing assistance, help finding furniture, free child-care for six months, and periodic home visits).


8 Diana did not always feel that the other women at the shelter were supportive. Particularly, she felt disconnected from the other women because of her Christian faith and refusal to use swear words. We attended several group sessions where the women shared the problems they had with communal living, which included small disagreements over things like chores and bathroom time. Nevertheless, many women at the shelter were able to find support and care from other women there, however tenuous such support and good will might have been.

9 Sally Engle Merry, *Human Rights and Gender Violence Translating International Law into Local Justice* (Chicago, IL: University of Chicago Press, 2006), 191

10 As Sally Engle Merry describes, most programmatic responses to gender violence in the United States and internationally revolve around social services responses and human rights advocacy. Merry found that the same social service programs were implemented in the five countries in which she worked. These included “criminalization, provision of social services, public education, and survey research.” See Merry, 138-9.

11 Ibid., 156.


13 Ibid.

14 Ibid., 22.


16 Ibid., 61


18 Ibid., 181.

19 Ibid.


22 Ibid.

23 Ibid., 21


25 Ibid., 8.

26 Ibid., 169.

27 Ibid.


29 Brison, 117.


32 Ibid.

33 Cited by Evander, 8.

34 The Faith Trust Institute is one organization that is helping faith communities to break the silence around intimate partner violence and sexual assault. Find out more about their work, including information on trainings and educational programs at [www.faithtrustinstitute.org](http://www.faithtrustinstitute.org).

35 Neuger, *Counseling Women*, 104.

36 Ibid., 106-7.

37 It is important to note that education and advocacy also have a clear role to play in ending gender-based violence. Christie Neuger, Pamela Cooper-White, and James Poling have written extensively on pastoral responses to violence that include both hearing women’s stories and holding perpetrators accountable (through advocacy and in church practices). See Christie Cozad Neuger, “Narratives of Harm”; Pamela Cooper-White, *The Cry of Tamar: Violence Against Women and the Church’s Response* (Minneapolis: Fortress Press, 1995); and James Poling, *The Abuse of Power: A Theological Problem* (Nashville: Abingdon Press, 1991). For the purposes of this article, I am paying attention to the ways that women narrate and navigate situations of violence and how/if they are heard in these navigations.

38 Brison, 87.
Hardison-Moody, *Getting This Off My Chest*

39 Ibid., 57.

40 Ibid.


43 Ibid., 97.