


Revisiting African Spirituality: A reference to Missiological Institute consultations of 1965 and 1967

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This article revisits the hope of the First and Fourth Missiological Institute (MI) consultations in 1965 and 1967 regarding the survival of African Spirituality as relevant to the daily life of South African churches. African Spirituality has played a significant role in the cultural context of Africans. In the African context, African Spirituality is intertwined with life, death, and health, which co-exist with material aspects and the economy as gracious gifts from God. The churches in South Africa and elsewhere in Africa have been challenged by the African worldview of healing and culture. Thus, Africans mostly prefer the African-centred church with more African Christianity, instead of Western Christianity. This has been a serious challenge in African church circles for centuries, even in the current 21st century. The question therefore arises whether this is a matter for the Africanisation, indigenisation, and decolonisation of the church in Africa.

Contribution: The article analyses the two MI consultations and whether the church in the 21st century has Africanised and decolonised itself in service of its African members. The study is a historical approach given the history of the MI's contribution in South Africa. The concept of African Spirituality is unpacked and contextualised within the African Independent Churches' (AIC) Zionist type churches such as the Zion Christian Church (ZCC), the St John's Apostolic Faith Mission (AFM), and other Ethiopian type churches such as Lutheran Bapedi Church and others in South Africa and African Traditional Religions (ATR). The article engages the importance of how African Spirituality differs from other spiritualities within the context of Christian spirituality.

Keywords: African Spirituality; confirmation class; COVID-19 storm; medical; Missiological Institute.

Introduction

In South Africa, Africa and elsewhere in the world, Africans live, breath and embrace African Spirituality. God and the ancestors are among Africans in everything related to spirituality. This is truly evident in the *botho/ubuntu* understanding of life. Evenson (1958:434) says that the early arrival of white missionaries in South Africa found African Spirituality, as well as the socio-economic and political situation, as being equal and more than adequate for black people. The missionaries disrupted the African way of life. The point made here is that this disruption by the missionaries is considered a serious theological offence to Africans. This disruption continued to exist in a form of dividing an organised humanity of God and his and her justice community. Mission churches¹ in South Africa were predominantly led by white missionaries with their various church doctrines. This article discusses the background of the Missiological Institute (MI), a central healing work of sacraments and healing churches methods and African methods of healing, and it concludes with a proposal that churches, health institutions and traditional healers' partnerships should seriously embrace issues of African Spirituality. The concept of African Spirituality is unpacked and contextualised within the African Independent Churches (AIC) and African Traditional Religions (ATR). The article engages the importance of how African Spirituality differs from other spiritualities within the context of Christian spirituality. There are a number of AIC in South Africa and elsewhere in the continent. The article discusses AIC Zionist type churches such as the Zion Christian Church (ZCC), ibandla lamaNazaretha, Limba's Church of Christ, the St John's Apostolic Faith Mission (AFM), and other Ethiopian type churches such as

1. Mission churches are also known as established churches, Protestant churches, traditional churches or mainline churches or mainstream churches.

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Lutheran Bapedi Church and others in South Africa (Mogashoa 2012:190–192).

What motivated the establishment of Missiological Institute?

It is essential to give an overview of the significant theological and sociological work done by MI. Missiological Institute is a research centre established at Umphumulo Lutheran Theological College (ULTC). Its purpose was to collect study materials from South African churches, specific missionary tasks and problems (Beyerhaus 1965a:1). Missiological Institute, a dialogical platform for different churches of multi-racial Southern Africa, was established in 1965 for church missions to address emerging issues (Becken 1972:1). On 29 June 1965, this research institute started its work with two theological events. At the first event, it invited all Lutheran ministers, theological students and other South African churches to participate in 'a prize-winning content' and called for essays themed 'Zionism-indigenous Christianity or renascent paganism'. The aim of this call was to critically study the fastest growing AIC around South Africa. The AIC movement was a serious challenge to Lutheran churches. This call was also an opportunity for Lutheran ministers and others from Mission churches to study the theology of AIC, as the Mission churches viewed the AIC movement as quite dangerous to the church. The second event was a First Missiological Institute Conference for all ministers from various South African churches and was held from 30 September to 06 October 1965 at ULTC. The MI Conference's theme was 'Our approach to the independent church movement in South Africa' and ministers could present their articles at the Conference. The purpose of the Conference was primarily to address missionary problems and opportunities provided by this indigenous movement (Beyerhaus 1965a:1–2). Umphumulo Lutheran Theological College established the research institute to enable the church to analyse and address South African problems. African Independent Churches theology of Africanising the church has challenged the comfortability and theology of the Mission churches. This context revealed a new theology and reaffirmed African Spirituality in service of Africans. Thus, the best method to provide solutions to Mission churches was for ULTC to establish a research centre. Mission churches viewed the AIC as dangerous to the church, but the AIC were relevant to minister from an indigenous perspective.

The conceptualisation of African Spirituality

African Spirituality is both African religion and cultural heritage. 'Religion and culture are inextricably intertwined. It is in this context and background that any attempt to dichotomise African Spirituality into the sacred and the secular, the physical and the spiritual' is a serious distortion of its theology and praxis (Mtetwa 1996:22–23). For Setiloane (1980:50–51), the understanding of African Spirituality experience is not a 'dichotomy between the secular and the sacred. All life is sacred'. Mtetwa (1996) critically states:

Transformative Syncretism as a catalyst in the make-up of African Spirituality is an African theological corrective to the distortion of the African religion world view. Because syncretism has been incorrectly understood to be the 'mixing up' of sacred with the profane and thus presupposed the swallowing up of Christianity by the religious phenomena that had been labelled paganistic, the corrective is even more indispensable and pertinent. (p. 25)

The phenomena of African Spirituality is central to Africa because sacred, secular and socioeconomic forms are an integral part of a holistic life, health, God and ancestors, community and holistic healing in Africa. African Spirituality is the value, quality, and an unending place of Africans. Thus, this phenomenon is precipitated in ATR and AIC where it is lived and breathed daily. African Spirituality has continuously been visible among Africans who worship God in the mainline churches as well. Therefore, African Spirituality has always been given an ongoing raise in Africa from a holistic, all sacred life, and historical perspective.

Healing ministry is pivotal in African Spirituality among AIC such as ZCC, iBandla lamaNazaretha and Limba's Church of Christ. In the St John's Apostolic Faith Mission, bottles and buckets of water were filled and the founder of this church, Christina Nku, prayed for them for the purpose of healing and protecting people. Her church is well known as the Water Church (Mashabela 2023:4). In ZCC, forms of healing such as confessing sins, pricking, salt water and others are central not just for healing people, but also for protection and blessings in life (Mashabela 2023:4). Healing ministry is a profound principle in AIC and water and salt serve as primary elements in all independent churches. Baptism is used for healing and salvation in spiritual service of humanity. Water is not foreign among ATR, which is mainly mixed with herbs by traditional healers for healing and cleansing purpose. Traditional healers wash the sick with water in a specific river at the time of healing and cleansing. The stick is also carried by traditional healers just like AIC prophets who use it for healing.

In African Spirituality context, 'The notion of 'ancestral worship' is foreign to African people. However, researchers have imposed it upon the Africans' to distort their original indigenous worldview (Mtetwa 1996:23). Western theology and other spaces such as anthropology have distorted and disrupted African culture, rituals, and life. The concept of 'ancestral worship' by Africans is not rooted and understood among Africans in totality. This is actually un-African, unacceptable, and not a gospel in African communities. The ancestors' community cannot be abandoned by the living Africans because of their extensive legacy contributions to family and community unity and sustainability of their economic and land for an African community when they were still alive.

The historical notion of ancestors is loved and respected by Africans. 'They have also slaughtered goats/beasts/sheep in memory of or in remembrance of their departed. The ceremony is a celebration of 'lives well lived'. The concept of

'ancestral veneration' has been embraced by the Roman Catholic Church and many African theologians (Mtetwa 1996:23). The ancestral celebration is a community development experience, which points to what God has done through ancestors. This spiritual celebration is more visible and alive in ATR, AIC, mainline churches, and recently in the African Pentecostal and Charismatic churches through the unveiling of tombstones and a Christian celebration of all saints. Mainline, Pentecostal and Charismatic churches often announce to the families of the deceased that before a deceased person can be taken to the church service the family should perform all their family cultural needs, this includes viewing the body of the deceased. Furthermore, a slaughtered goat and beast/sheep are ceremonially announced by the family to the God and ancestors, which are eventually eaten by the church members and community after burial.

Another central area of African Spirituality is that the Anglican and Roman Catholic churches use an incense during worship services. The grain incense, which is known as *impepho* is intertwined with ancestors and is used by Zulu, Swazi and Xhosa people as a herb used in religious rituals by community elders and family (Mtetwa 1996:24). There is no contradiction of the use of *impepho* or incense by the church and family. In fact, majority of African Christians visit traditional healers for healing and spiritual advice when things are not well in life. Traditional healers use *impepho* during consultation and Africans are informed to burn incense at their homes. However, churches have not embraced the concept of *impepho* to be used by African Christians; although, the church uses it. AIC churches such as iBanda lamaNazaretha encourages its church members to use *impepho* during prayer times.

A call for South African Mission churches to accept the realities of African Spirituality

South African Mission churches were unable to meet the African spiritual needs of their members. A quest for African Spirituality was a daily reality in the African context. In 1964, Mabaso (1964) said:

Can the traditional churches learn something from the Bantu Sects in South Africa? Traditional churches throughout Africa are not only concerned about the church unity, but they are also concerned about a truly indigenous church. They are looking for means by which the biblical message can be made to speak in the language and life of the African people. (p. 20)

Mission churches were called to renew themselves and to move away from their Western Church approach to an African Church approach. The need for a truly indigenous church among other issues was for Mission churches to embrace and live the realities of African Spirituality. The church in South Africa needed an urgent reading or studying and use of the Bible, by using the tools and interpretation of an African approach as opposed to the transportation of Western missionaries' reading and use of the Bible. In the 21st century, the Western Bible reading continues to paralyse the African culture and heritage because theological

institutions and universities still train theological students to read and interpret the Bible from a Western approach. The theological curriculum is basically still dominated by Western ideologies. Indeed, Mission churches have not fully answered the African spiritual realities of the Africans. The church is faced with the urgent need to indigenise itself from various doctrines such as the Lutheran doctrine, the Calvinist doctrine, and others. Thus, decolonial or indigenous conversations such as African healing, ancestors and God need to be at the heart of congregations, church conferences, seminars and general assemblies in order to address issues of African Spirituality.

A reflection about the twofold Missiological Institute consultations in 1965 and 1967

The First Missiological Institute Consultation was held at ULTC from 30 September to 06 October 1965. Its theme was 'Our approach to the Independent Church Movement in South Africa'. The MI initiated this consultation because of the fast-growing AIC Movement in South Africa. This posed a serious challenge for South African Mission churches; therefore, the consultation was a closer examination and evaluation of this church's development. Various articles were presented at the consultation on the chosen theme (Becken 1965:1). The AIC Movement 'has always formed an integral part of Church History, but hardly a very central one. It is rather considered as a collection of ecclesiastical curiosities, which make the serene treatment of doctrinal and organisational developments a bit more picturesque' (Beyerhaus 1965b:1). The consultation discovered that AIC members believe in Christ, 'religious elements in the Bible', and 'they have adapted their forms of worship and organisation to the African pattern' (Beyerhaus 1965b:5). Missiological Institute Consultation decided to establish 'a new ecumenical dialogue and fellowship' between Mission churches and the AIC (Beyerhaus 1966:6). A special discussion on the medical mission in Natal, South Africa, was held. Lutheran medical missions in South Africa – and partly in Botswana – established a joint Lutheran Medical Foundation for more efficiency of financial and medical resources. Questions were asked about the healing ministry, such as: 'What is the motif and function of the Mission Hospital and Is a medical mission the most effective inroad into the non-Christian society'? This resulted in a call for a fourth MI consultation where 'great emphasis was placed upon the African situation' as part of the church healing ministry. This consultation was held at ULTC from 19 to –27 September 1967 with the theme, 'The healing ministry of the church' (Lislerud 1967a:1). The consultation recommended that the church designs a basic educational programme regarding the sick and healthy to teach church members more about healing ministry. The church could use normal public worship services and the celebration of sacraments as an essential part of the healing ministry where church members were taught about the laying on of hands, intercessory prayer-groups at home, in church and hospitals, and praying for the sick during church services. The church could encourage traditional African medicine practices and

AIC healing methods to see how these could be incorporated in its healing ministry. Pastoral Clinical Training (PCT) could be urgently established at ULTC in cooperation with hospitals to recruit teaching staff to teach courses to theological students, pastors, and medical professionals (Lislerud 1967b:171–172).

This twofold MI consultations were used to understand the central role of African Spirituality and healing not just through hospital services and church sacraments but also as part of traditional African healing and AIC healing methods. The church healing ministry called for inclusive hospital treatment, church sacraments, intercessory prayers and African ways of healing. Pastoral Clinical Training had to be urgently established at ULTC as well as the recruitment of teaching staff to train theological students, pastors and medical professionals. Pastors were already visiting the sick at hospital for pastoral care, counselling and praying for them. This was part of PCT work before its formal academic establishment during the 1967 Consultation.

African Independent Churches embrace the African Spiritual gifts and abilities of *isangoma*, a diviner

The Church of the Nazarites in South Africa accepted an *isangoma*. The office of *isangoma* was established as a result of a calling of the ancestors. It is not an act of choice, but a divine calling of becoming a prophet. When a person receives the *isangoma* calling, her or his health is usually affected and she or he suffers physically. A person undergoes spiritual training to become an *isangoma*. The primary task of an *isangoma* is to heal the sick and to always be in contact with the ancestors through dreams and visions (Oosthuizen 1965:15–16). '*Umoya* of *isangoma* is regarded as very powerful' (Makhathini 1965:3). The *isangoma* is an African gift from God with special reference to African Spirituality and is primarily found in ATR practices. The AIC accepted and embraced *isangoma* as a true expression of African reality. The *isangoma* is consistently connected to *Umoya*, the Spirit. Thus, an *isangoma* becomes a qualified prophet after completing an African spiritual training programme. The *Umoya* plays a central role as the actual healer and liberator of the sick. The prophet always depends on the guidance and messages from the *Umoya*.

Mabaso (1964:21) states that healing is a primary manifestation of the act of the Holy Spirit. Sickness and all hardships are overcome as evil forces. The AIC are the true and common expression of the African Church as the carrier of Christian convictions. 'This is not just a church; it is a hospital' (Msomi 1967a:65–66). The spiritual context here is that being in the church means being healed by God. The AIC has become the popular faith character, which has paid serious attention to the needs of Africans regarding issues of African healing and the cultural context in South Africa and Africa. Mission and Pentecostal churches joined the AIC because they received the gracious healing of God (Mashabela 2017:2–3). Maimela (1985:71) further says 'The greatest attraction of

these churches lies in their open invitation to the Africans to bring their fears and anxieties about witches, sorcerers, bad luck, poverty, illness and all kinds of misfortune to the church leadership'. Mission and Pentecostal churches as well as theological higher education in South Africa are seriously challenged by AIC African Spirituality. The AIC are a close reflection of the African Church while the Mission and Pentecostal churches must decolonise themselves from their colonial formation and reflection. Thus, the decolonisation of these churches is informed by an urgent and serious need of African Spirituality and cultural context.

The churches play a critical role in addressing healing, which is closely related to witchcraft among other diseases in service of protecting humanity from evil. There is a lack of scholarship on the issue of witchcraft and the South African government has also not given much attention to the question of witchcraft (Masoga 2001:162–163). Equally so, Masoga (2001:176) observes 'We should first understand the defining cosmology within which witchcraft is practised. A mere bill will not resolve the problem and bring back to life the people who have become victims of witchcraft – or witch-hunts – in this country'. The National Research Foundation (NRF) saw a need to establish the indigenous knowledge systems (IKS) to seriously take the African rich knowledge into account. Its aim was to cover central issues of IKS such as issues of 'traditional medicine and health, indigenous food systems, socio-cultural systems, and arts crafts and materials' (Masoga 2003:10). The NRF included traditional healers in the fight against human immunodeficiency and/or acquired immune deficiency syndrome (HIV and/or AIDS) (Masoga 2003:10). The government and academic field in South Africa must conduct serious research on witchcraft, which destroys the philosophy of *botho/ubuntu* in the African community. The government and academia have given special attention to certain types of deceases such as malaria, HIV and/or AIDS, and cancer, but witchcraft has not been addressed as a serious disease. Witchcraft is one of the diseases that must receive an urgent response similar to coronavirus disease 2019 (COVID-19) pandemic by government and education institutions, and they need to partner with specialists such as African spiritual healers and/or traditional healers and/or diviners and the AIC. The technology of African Spirituality cannot be ignored if there is a need to address witchcraft. A common call for an IKS project with the support of the NRF must prioritise African Spirituality, which is rooted in African understanding and experiences.

African healing is inseparable from African Spirituality

African healing was a key issue that was discussed at the 1965 and 1967 MI consultations. The central African Spirituality and theology of the AIC were healing and the restoration of people. Many people declare that they joined the AIC because they were healed by God. Other people will only attend when they experience a health crisis. The healing of people is prioritised in AIC and people receive healing during kneeling prayer meetings. In the AIC,

African healing was viewed as better than hospital healing. The AIC are referred to as healing churches, *kereke ya bongaka*, the diviner's church and *dikereke tša Moya*, churches of the Spirit, and emphasis is placed on the fact that the AIC are real churches that are led by the Spirit (Häselbarth 1965:9–12). According to Msomi (1967a:66), in the AIC 'Healing is the main attraction. They don't believe that there can be a Christian community without healing'. The AIC Sunday services are incomplete without prayer for healing and the pastor laying on the hands on the sick. The congregation sings and dances while the presence of the Holy Spirit is powerfully at work to heal the sick and usually, the congregation experiences a moment when people speak in tongues (Msomi 1967a:66). People became AIC members as they have addressed the question of African healing. On the other hand, not everyone joined the AIC, some come only for purposes of healing. Among the people attracted to the AIC healing ministry were Mission churches' members. Some of them left their Mission churches to become AIC members, while others had dual membership – they only come when they are sick. There is nothing that makes an African happier than addressing her or his healing and spirituality from an African perspective. This is informed by the fact that the life of belonging to a community only makes sense when there is no sickness. The life of an African will only be completed by healthy spiritual and physical well-being. It is common that Mission church African member consult a medical doctor and a traditional healer if she or he is not healed by a given medication by a medical doctor. In the South African churches, there is saying that 'A Lutheran or an Anglican or Pentecostal member is a Lutheran or Anglican or Pentecostal by day and visit a traditional healer or an African Independent Church by night'. This implies that all Mission and Pentecostal church members attend divine services by day at their respective churches but by night they visit a traditional healer or the AIC for purposes of life consultation or healing. This is a very attractive option for church members in order for them to retain their African spiritual edification as it is a very active part of their spirituality in the 20th and 21st centuries, not just in South Africa, but in the whole African continent. Another aspect is that AIC members request Mission churches that their children may attend a year of confirmation classes, which ends with a confirmation service. This is because their children were baptised at these churches – a common occurrence among African Christians who belong to these churches but have dual membership. What is missing in Mission churches is an emphasis on healing services. According to Kgatle (2022:3), Pentecostal churches do not 'speak of salvation, only referring to repentance and conversion or simply the salvation of the souls but a multifaceted salvation'.

Healing, deliverance and prosperity are theological concepts, which form a multifaceted salvation. The Pentecostal church places an emphasis on issues of healing and deliverance, but if its members are not healed or delivered, they visit traditional healers or the AIC for healing. Pentecostal church

members also request Mission churches to baptise or register their children for Confirmation Class. Sometimes, Mission church members leave their churches to join a new Mission church or a Pentecostal church, although some Pentecostal members leave their church to join a Mission church. There is therefore an exchange of church membership across churches in South Africa. All South African churches must call an African spiritual conference to discuss the question of why their members are preferring dual church membership or leave a particular church to join another one. This conference should critically discuss the fact that churches have spiritual gaps which are central for Africans. Theological institutions and universities where theology and African Spirituality are taught must also take part in this initiative.

Unfinished business: Prayer and the laying on of hands

What is a theological rationale about intercessory prayers and the laying on of hands in the context of healing? Intercessory prayers were very central in Mission churches to the ministry of healing. Intercessory prayers for the sick originated from Jesus Christ praying for the sick without their presence. Congregations' intercessory prayers for the sick imply knowing the name of the ill persons and their specific needs, and are regarded as a public healing service. Congregations have their own intercessory prayer groups. This type of healing does not replace medical procedures or indicates that medical methods were unable to heal. Intercessory prayer accompanies the use of hospital medicine and a complete healing must be accompanied by God (Wilkinson 1967:137–138). Intercessory prayer was implemented because of a prayer request, which was specific to God's healing. This is a common practice at home cell groups and church services and during hospital visits. People give testimony about these type of services where others were being healed and blessed.

The laying on of hands remains a reality in the Mission churches and spirituality as the Spirit is at work. Spiritual healing is a collective of the laying on of hands and exorcising demons, which was not practised in Mission churches. Lutheran pastors are directly or indirectly opposed to pastors who strongly believe in this type of healing. They are accused of being influenced by the traditional practices of the AIC. When they put emphasis on spiritual healing, they are accused of disrespecting their Lutheran doctrine (Malidzhi 1992:56). The question of spiritual healing causes unnecessary division between those who support it and those who are against it. Healing for Africans remains a real issue, which calls for the church to unite in the service of the healing. Not only the Lutheran Church is wrestling with this issue of the laying on of hands but also other Mission churches in South Africa and across Africa. The emphasis on spiritual healing supports and is aligned to various Mission church doctrines rather than disrespecting them. The purpose of laying on of hands is to heal and is informed by *sola scriptura* – scripture alone. The AIC are profoundly biblical and comfortable with this

type of healing method. The laying on of hands was prohibited during the COVID-19 pandemic because it would have spread the disease. It was not even recommended to use personal protective equipment (PPE) during the laying on of hands. Post-COVID-19, the church is partly returning to its previous ways including normalising the laying on of hands. Mission churches are called to accept the practice of the laying on of hands for spiritual healing. Africans believe that this is for the fulfilment of their African Spirituality.

Makgoba (2014:48) critically challenges African Anglicans with his words 'There is still much to be done on questions around Christian faith, which draws on the best Anglican tradition and African culture'. This is similar to the needs of all South African churches.

The church sacraments as a great potential healing

The sacraments of baptism and Holy Communion have great healing potential for the ministry of the church. The Word and sacraments are centred on the sick with special references to healing services (Wilkinson 1967:136). Lutheran teachings declare that a true church is a space where the Word of God is preached, and sacraments are rightly ministered. In the AIC, adult baptism is emphasised by immersion compared with the Lutheran infant or adult baptism. Adult baptism in AIC is linked to the baptism of Jesus Christ in the river Jordan; thus, the AIC doctrine rejects other baptismal forms. In baptism, water was blessed with prayer and the touching of a stick of a church leader, there is the confession of sins and the ritual of vomiting or being pricked with a needle, with no prior baptismal class instruction and confession of creed. This ritual is not about the forgiveness of sins, but a purification process (Häselbarth 1965:9). Baptism is used as healing for Africans (Moripe 1996:18). *Amanzi aphilayo*, living waters was known as baptism (Berglund 1969:5). Baptism is an assurance of healing in the AIC circles (Häselbarth 1965:9). In the AIC, baptism is not associated with monetary costs unlike in Mission and Pentecostals churches (Mashabela 2017:4). In the AIC, the sacrament of baptism is in practice centred on Jesus Christ with strict immersion and no baptism of children. Only the church leader uses the stick to bless water for baptism and to baptise adults. This is the same as a pastor in Mission churches who is allowed to baptise, but of course without a stick to bless the water. According to the AIC doctrine, baptism is a free gift of God; thus, there is the assurance of receiving God's healing.

In the Mission churches, baptism is used for the forgiveness of sins. Prior to baptism, there is a class instruction and during baptism, is a confession (Häselbarth 1965:9). Children and adults are baptised to receive forgiveness of sins and a promise of redemption granted by Jesus Christ; baptism is also regarded as healing. The water of God is used as divine water connected to the Word of God (Voges

1969:21). Baptism restores the dignity of a baptised believer permanently. The notion of baptism in the Mission churches space is that God has never been absent in any event of baptism and Holy Communion. The Mission churches spiritual emphasis of Holy Communion is a means of God's grace to heal the human body and spirit. This sacrament is the centre of the gift of God to heal the person in totality.

The sacraments of baptism and Holy Communion are the means of grace and healing of the human body and spirit (Msomi 1967b:142). During public worship, the administration of Holy Communion is not just about forgiveness but also the healing ministry for the sick (Lislerud 1967b:171–172). According to Häselbarth (1965:9), in AIC such as ZCC 'Holy Communion is not administered, firstly because it has no parallel in the African traditional religion; secondly, because it reminds the Christian of Christ's darkest hour and sacrifice and not of his glory'. For Lukhaimane (1991:233), in ZCC 'The Holy Communion: This was administered at Boyne. The wine symbolized the blood of Christ, while the bread symbolized the flesh'. African Independent Churches of the Ethiopian church type, Native Congregational Church (NCC), Lutheran Bapedi Church (LBC), and African Methodist Episcopal Church (AMEC) celebrate Holy Communion as a means of grace (Mogashoa 2012:180–182). Holy Communion is celebrated in some AIC such as ZCC, TM, NCC, LBC and AMEC, while in most of them such as iBandla lamaNazaretha it is not celebrated.

Pastoral clinical training methods of healing

Some people reject medical and psychological healing and only believe in spiritual healing (Malidzhi 1992:56–57). Lutheran indigenous churches were responsible for medical and welfare work. Pastors and evangelists used PCT to visit and minister to the sick in hospitals and their homes, but they also ministered to non-Lutheran members. Congregants visited the sick at hospital and their homes to pray for them (Sovik 1961:i, 99). No sick person can heal without the necessary healing team of doctors, nurses, psychologists, and a hospital chaplain as endowed gifts and discipline by God's healing and liberating grace (Msomi 1967b:142). The role of PCT was implemented within the context of the pastoral care and counselling model, with praying and ministering Holy Communion at the core while visiting the sick. The Mission churches emphasised medical healing as part of evangelisation in hospitals and at homes. The evangelisation at hospitals were also used to minister to all people. This PCT module was used by all Mission churches in service of humanity. The chaplain hospital ministry was urgently needed at the breakout of COVID-19 to minister not only to the sick but also to the doctors and nurses who were highly traumatised by the COVID-19 pandemic. These medical professionals were regarded as essential workers in service of a community of the sick.

Coronavirus disease 2019 storm and healing: What is the response of the *isangoma* regarding the COVID-19 storm?

The impact of the COVID-19 pandemic cannot be ignored in this study because the study is concerned with issues of African healing. During the historical research of the COVID-19 pandemic within the conversation of South African people, the COVID-19 pandemic was named according to an indigenous language phrase, *Isifo sebanoyi* [aeroplane disease]. This implies that the coronavirus was transported to South Africa through people who flew into the country. Another claim was that COVID-19 was first found in Wuhan, China, on 17 November 2019 and detected in South Africa in March 2020 (Masoga 2020:3). South Africa was also affected by this COVID-19 storm, which led to more poverty, death, gender-based violence (GBV) and unemployment. The breakout of COVID-19 has become irrelevant to the spiritual and economical lives of South Africans. It has come at a time when South Africans are challenging their government to rebuild a united prosperous society. The African spiritual healers have also questioned the existence of *Isifo sebanoyi*, although these spiritual essential workers are also affected by *Isifo sebanoyi*.

Traditional African healers were also affected by COVID-19 as they were unable to meet and monitor sick people in order to heal them from spiritual attacks of witchcraft because of the various lockdowns enforced by the South Africa government. Churches, non-essential businesses, teaching institutes and other institutions were closed and people were banned from walking anywhere. In 2020, people basically spent most of their time at home. Medical doctors referred some of their patients to traditional healers to heal them from illnesses associated with witchcraft diseases. The COVID-19 has put sick people at a high risk of death and has worsened some diseases. Traditional healers were afraid to meet their patients as they could be arrested because of the new COVID-19 rules, as implemented by the South African government. Traditional healers had to engage with God and their ancestors with Sepedi phrases such as:

re kgopela ba face, badimo ba gabo rena le Modimo, gore ba re fe pheko ya go a lafa bolwetše,

[we are appealing to our ancestors and God to give us a cure for this disease.]

Traditional healers are registered at the Interim Traditional Health Practitioners Council, which is registered with the South African government's health department to regulate, manage and train traditional health practitioners in South Africa. The understanding is that traditional healers are legal healthcare workers as they are registered at the Interim Traditional Health Practitioners Council. The South African government recognises the essential role they play in African communities. Thus, the government is supposed to give necessary help to mitigate COVID-19 (Maluleka 2020:12).

The context is that *Isifo sebanoyi*, traditional healers, are passionate about healing the sick. It was difficult for them to practice their profession given the conditions of COVID-19. It was even more painful to them that they could not even cure their clients who were affected by diseases related to witchcraft. Surely, these essential workers in the African communities were supposed to be given PPE by the South African government in order to heal the sick. The South African government was supposed to commit itself to this because it is their task to protect human lives. However, they had only prioritised the services of healthcare workers in hospitals and gave them PPE to protect them – the traditional healers were not treated as equal to hospital or clinical healthcare workers. The government has been challenged by traditional healers who recommended methods of African healing to COVID-19 and requested to be provided with PPE, but without success. Thus, the government violated the traditional healers' workers' rights to serve African communities as essential workers.

Furthermore, because of the COVID-19 conditions, humanity was dependent on services of essential workers. 'Praise for the heroic work being done by health-care workers to save lives worldwide in dangerous, exhausting conditions is everywhere' (Lancet 2020:1). However, some essential workers were unprotected because of the failure of government to supply PPE. This has led to the deaths of a lot of these healthcare workers (Lancet 2020:1). Coronavirus disease 2019 created serious damage to and fear in society as well as for healthcare workers who are faced with very traumatic working conditions. This has affected South Africans and its healthcare workers including educators and other essential workers. Some healthcare workers have been given PPE but they received neither counselling nor care. In this context, the churches who were still having chaplains as essential workers at hospitals, could have provided prayer, pastoral care and counselling to these traumatised healthcare workers and COVID-19 patients. This would have eased the burden of healthcare workers who were traumatised by the deaths of colleagues and patients and had to cope with strenuous work demands.

Conclusion

This study has investigated the essential role of African healing in conversations with the churches of South Africa. The partnership of all churches and God's gift given to traditional healers are the central themes. Coronavirus disease 2019 also received attention. It is important that all churches must prioritise the liberating of African Spirituality. South African churches are urgently called to research and provide new liturgies and theology on African healing and spirituality. South African health sectors are called to urgently cooperate with the IKSs of traditional healers. It is equally important to appoint experts who have been researching and working on issues of African Spirituality such as healing, death and life to assist the church and government in this regard.

The indigenous church movement and traditional healers offer a new theology that emerges in Africa, which must be embraced and used by all churches in South Africa. The AIC theology must be viewed as a contribution to an ecumenical theology to strengthen church theology and spirituality. Various churches' methods of healing must be embraced by all churches. Western medical and African healing approaches are equally essential and should be used to heal African communities.

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The author has declared that no competing interest exists.

Author's contributions

J.K.M. is the sole author of this research article.

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