

**AN ANTHROPOLOGICAL STUDY OF HEALING PRACTICES IN AFRICAN
INITIATED CHURCHES WITH SPECIFIC REFERENCE TO A ZIONIST
CHRISTIAN CHURCH IN MARABASTAD**

by

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I declare that

AN ANTHROPOLOGICAL STUDY OF HEALING PRACTICES IN AFRICAN
INITIATED CHURCHES WITH SPECIFIC REFERENCE TO A ZIONIST CHRISTIAN
CHURCH IN MARABASTAD

is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

I further declare that I have not previously submitted this work, or part of it, for examination at Unisa for another qualification or at any other higher education institution.

.....
SIGNATURE

.....
DATE

I dedicate this study to my parents and sister,
Jack, Martha and Irma Wouters, who have
always been there for me.

ACKNOWLEDGEMENTS

I would like to respectfully and deeply thank the members of the Zion Christian Church for allowing me into their sacred environment and for opening up a whole new world to me. This exhilarating experience enabled remarkable personal growth. They helped me understand how the Zion Christian Church contributed towards people's quest for absolute health, which in an African context encompasses physical, social, spiritual and secular levels. Their assistance and that of my interpreters was pivotal in compiling this study that aims to enlighten readers on the workings of the church's successful healing ministry from an anthropological perspective.

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ABSTRACT

This study encompasses an anthropological investigation of healing practices in the Zion Christian Church with reference to the Marabastad congregation in Pretoria (Tshwane), South Africa. The Zion Christian Church functions as an extremely successful healing ministry, and can thus be characterised as a spirit-type African Initiated Church, a type known to attract members through healing activities. The concepts of ill-health, health, healing and curing are crucial to understanding the church's role, as all activities at the Zion Christian Church revolve around the attainment of absolute health. The embedded nature of healing in the church is explored through an analysis of the spatial and material aspects of the church's healing practices, including codes of conduct, roles of participants, religious services, and intangible and tangible instruments of healing. The study is further contextualised against the broader history of the emergence and growth of African Initiated Churches from the late 19th century onwards.

KEYWORDS AND PHRASES

African Initiated Churches, Zion Christian Church (ZCC), history of the ZCC, health in an anthropological perspective, healing activities, ZCC services, preachers (*baruti*), prophets (*baprôfeta*), instruments of healing, notions of causes of illness.

LIST OF ABBREVIATIONS

AFM: Apostolic Faith Mission

AIC: African Initiated Church

AME: African Methodist Episcopal Church

CCAC in Zion: Christian Catholic Apostolic Church in Zion

CCAHS in Zion: Christian Catholic Apostolic Holy Spirit Church in Zion

ZAC: Zion Apostolic Church

ZAFM: Zion Apostolic Faith Mission

ZCC: Zion Christian Church

GLOSSARY

AmaZiyoni: This is a Sotho word for Zionists.

Ba kalafo: A Pedi concept of the congregation of the Zionist Christian Church of Joseph Lekganyane as a “people of healing”.

Badimo: The Pedi word for ancestor spirits.

Baprôfeta: The Pedi word for prophets.

Baruti: The plural form of *moruti* (priest). See *moruti* for more information.

Basione: The Tshidi in the former Mafekening district use this word when they refer to Zionists.

Bonkedi: (Also referred to as *nkedi*) A Zion Christian Church dance formation for males only. The participants in this dance are characterised by Scottish-looking attire and are mostly younger men who perform in smaller groups than those groups characteristic to the *mokhukhu* formation.

Dihlare: A Sotho name for the medicines of a traditional healthcare practitioner.

Dikereke tša molau: This is a Sotho phrase that refers to Churches of the law (Ethiopian-type African Initiated Churches).

Dikereke tša Moya: This is a Sotho phrase that refers to Churches of the Spirit (Zionist-type African Initiated Churches).

Dikidišwa: The Pedi word for taboo.

Dingaka: A Pedi name for a traditional healthcare practitioner known as a diviner.

Ditaelo: The direct translation of the Pedi word *ditaelo* is commandments. Within the Zion Christian Church context the word refers to the prescriptions a person receives from a prophet during a prophesying session. The prophet receives prescriptions from the Holy Spirit and sometimes from ancestor spirits. Most members use the terms “prescriptions” and sometimes “instructions” as a direct translation of *ditaelo*.

Dithutô: The Northern Sotho word referring to the sharing of teachings or lessons.

Ditšhila: The Pedi word for dirt, but it implies ritual impurity (Mönnig 1983: 66).

Fiša: A Sotho word referring to a state of hotness or heat.

Go aramela: Prophets use this Sotho word to refer to the process of preparing stones for prescription/*ditaelo* purposes.

House of the *kgôši*: This is a guesthouse at Moria, which is used to accommodate kings and other royalty, chiefs, high government officials and sometimes white guests.

Igqira: A Xhosa word referring to a traditional healthcare practitioner known as a diviner.

Impundulu: A Xhosa name for the lightning bird known to assist witches in their evil deeds and therefore referred to in anthropology as a familiar.

Inkatha: *Inkatha* refers to a political party in South Africa, the *Inkatha* Freedom Party, and is also a Zulu word referring to a sturdily woven, circular-shaped grass coil used to carry heavy objects on the head.

Inyanga (plural: *izinyangas*): A Zulu name for a traditional healthcare practitioner known as an herbalist.

Isangoma: This is one of the names Xhosa-speakers and Zulu-speakers use to refer to a traditional healthcare practitioner known as a diviner.

Isifo: Traditionally in Zulu this word covered the three concepts of bodily illness, misfortune, and vulnerability to illness and misfortune.

Ixhwele: A Xhosa name referring to a traditional healthcare practitioner known as an herbalist.

Kalafo: The Pedi word for magical ritual cleansing.

Kgomo: A Pedi word referring to a head of cattle or great ox.

Kgôrô: This Northern Sotho word is sometimes used to refer to the *sebêšô* (see explanation further down). It is also sometimes used to refer to a Zion Christian Church court or meeting place. Occasionally members of the Zion Christina Church use the Afrikaans word *kraal* to refer to the *kgôrô* or *sebêšô*.

Kgôši: The Northern Sotho word for king.

Kgoši ya Masione: The Pedi phrase meaning “King of the Zionists”.

Kgothatšô: The Northern Sotho term meaning “to comfort”, a term used to refer to the kind of homilies that are delivered in the Zion Christian Church.

Khutane: The Northern Sotho word for “hidden”. In a Zion Christian Church context it refers to the little blue cloth that is usually placed between the black and green cloth on which the church’s badge is attached.

MaKereke oMweya: A Shona phrase that translates as Churches of the Spirit

Makgoma: A Pedi term meaning an illness resulting from contact with a ritually polluted/impure person. *Makgoma* is derived from the word *go kgoma*, which means to touch.

Manyanyatha: The characteristic white boots of men who participate in the *mokhukhu* are known as *manyanyatha* (Sotho term).

Mêêtse a thapêlô: In Northern Sotho this phrase refers to water from a natural source such as a fountain that is blessed by prayer.

Metswalle: The direct translation of the Pedi word *metswalle* is relatives.

Modimo: Sotho- (including the Pedi-speakers) and Tswana-speakers refer to God as *Modimo*.

Mogau: *Mogau* is the Northern Sotho name of the blessed pieces of paper used in healing activities. It can therefore be described as an instrument of healing. *Mogau* can be translated as “mercy”.

Mokhukhu (The plural of *mokhukhu* is **mekhukhu**): This word is a *Pedi* homonym of the word “shack” and originated during the time when Edward Lekganyane seceded from his brother Joseph’s Zion Christian Church (Anderson 2000: 173). The term *mokhukhu* refers to the characteristic church dance performed by male members. This male formation is well known for their extremely powerful rhythmic dancing and singing activities. Most male members, at one time or another, participate in the *mokhukhu*. All participants are characterised by their distinctive khaki uniforms, white boots and black caps to which the church emblem is attached.

Molato: The Northern Sotho word implying a very big mistake.

Mopedi: A Pedi word for porcupine, traditionally perceived to be their totem animal.

Moruti: The direct translation of the Northern Sotho word *moruti* is preacher. In the Zion Christian Church ZCC *Messenger*, a copy of the homily that Bishop Lekganyane (2001:6–8) presented at the September gathering at Zion City Moria a *moruti* is referred to as a priest. During my research fieldwork members, irrelevant of the language in which they conversed, usually referred to a *moruti* as a *moruti* and seldom used the term priest.

Motho ke motho ka batho: A proverb used by the Laka of Mapela specifying that “an individual is only a person through other people”.

Motšhetšhe tree: Pedi-speakers use this word to refer to a Common Cabbage Tree (*Cussonia spicata*).

Motsolo: A Pedi name for a lizard-like creature known to be used as a familiar by witches.

Mphô: This is the name of the sacred song performed at the beginning and usually at the end of a service.

Na leebana: The Northern Sotho name referring to the Zion Christian Church of the dove.

Ngaka: One of the names Zulu-speakers and Tswana-speakers use to refer to a traditional healthcare practitioner known as a diviner and used by Pedi-speakers when referring to a herbalist.

Ngozi: This is the Shona word for a vengeful spirit.

Nkedi: See explanation of **Bonkedi**.

Noku: A Pedi word for porcupine, traditionally perceived to be their totem animal.

O Modimo wa rena: This Pedi saying can be translated as “[y]ou are our God”.

Qamatha: Xhosa-speakers can refer to God as *Qamatha*.

Ramarumo: This name means “father of spears” and was given to the current Bishop of the Zion Christian Church by his father. The name *Ramarumo* has also often been used by Pedi-speakers to refer to General Jan Smuts.

Raditoro: This is the Northern Sotho word for dreamer.

Ruwadzano: Female prayer groups in the ZCC of Mutendi in Zimbabwe are known as *Ruwadzano*, a Shona name that translates as “Mothers Union”.

Sebêšô: In this area *baruti* prepare blessed liquids and many other ingredients for healing purposes on big, open fires and gas stoves. Members refer to this area as *sebêšô*, because this Northern Sotho word literally means the place where the fire is burning.

Sefifi: Traditionally when Pedi-speakers experience death in the family they are perceived to be polluted for a particular period of time, which is known as *sefifi* – translated as darkness.

Simakade: Zulu-speakers sometimes refer to God as *Simakade*.

Thikoloè: A Pondo name referring to a being known to assist witches in their evil deeds and therefore in anthropology referred to as a familiar.

Umdali: Xhosa-speakers often refer to God as *Umdali*.

Ubuthi: An Nguni word for a medicine used to hurt people.

Ukubuyisa: A Zulu term for the “calling home” ceremony (*buya* which can be translated as “come back” and *buyisa* as “bring back”) of the ancestor spirits of recently deceased family members.

Umkhuhlane: Although this word is not directly translatable into English, roughly it could be said that Zulu-speakers use it to refer to illnesses that just happen without any alternative cause such as biological deterioration as a result of old-age. However, the extent to which illnesses are perceived to just happen is uncertain.

Umvelingqangi: Zulu-speakers sometimes refer to God as *Umvelingqangi*.

Umoya: This Northern Sotho word refers to the Holy Spirit in a Zion Christian Church context.

Umuthi: An Nguni name referring to the medicines of a traditional healthcare practitioner.

UnKulunkulu: Zulu-speakers sometimes refer to God as *UnKulunkulu*.

Uthikoloshe: An Nguni term referring to a being known to assist witches in their evil deeds and therefore in anthropology referred to as a familiar.

Uyasha umkhukhu: A Zulu term that translates as a “shack is burning”.

Zion City lekgotla: Each congregation has its own Zion City *lekgotla* (Northern Sotho name for council or committee).

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CHAPTER 1

INTRODUCTION

1.1 My interest in the Zion Christian Church

The South African Zion Christian Church (ZCC) is one of the more than 6 000 African Initiated Churches (AICs) that have proliferated since the late 19th century (Anderson 2007a:2). AIC refers to all Christian churches primarily initiated and controlled by black Africans. The South African ZCC is considered to be the fastest growing and largest AIC in southern Africa. It had more than 4.9 million members in 2001, according to the census of that year, and, according to the *Daily Sun* (Khumalo 2009: 3), between 10 and 15 million members by 2009 (see Anderson 1999:285; Burger 2007:1; Comaroff 1985:238; Müller 2011:7; Nanda & Warmes 2014:285; Oosthuizen 1992:xix; Schoffeleers 1991:3).

I have been interested in the ZCC and its renowned healing ministry since the 1990s. I was employed at the Department of Education and Training and registered for my honours degree in Anthropology at the University of South Africa (Unisa). A colleague at the time was a ZCC member. We often discussed the general differences between the ZCC and other churches. He usually placed emphasis on the ZCC's healing ministry successes, in contrast to the absence of these kinds of ministries in most so-called mission churches, such as the Roman Catholic, Anglican and Protestant churches (see Oosthuizen 1992:1–2). He defined the ZCC as an African Christian Church. Being a white¹ South African, and perhaps somewhat naive, I did not realise that Christianity as I had experienced it was grounded within a western sociocultural context and is therefore characterised by western beliefs, values and norms. Consequently, I perceived the so-called African Churches to be a blending of the Christianity I knew and traditional African² religious beliefs. For this

¹ I have used the terms “black”, “coloured” (mixed race) and “white” Africans due to the absence of more appropriate value-free descriptive terminology. I am aware of the moral debate that surrounds the use of this kind of terminology. However, in this study these terms are used purely in a descriptive manner for explanatory purposes in a research context.

² When I refer to phenomena as being traditional African I mostly refer to those black African societies that live south of the Sahara who exhibit to some extent uniformity in terms of certain basic conceptions, view and practices (see section 3.3). It is also important to note that as Hammond-Tooke (1989:7–8) indicated not all black southern Africans believe or used to believe in everything I have described in this study as being traditional African, even though many do. Irrelevant of our sociocultural heritages most of us have as a result of differences in life experiences such as

same reason some researchers referred to these churches as “syncretistic religious movements”, even though most religions are characterised by syncretistic³ elements and can therefore be perceived as syncretistic religious movements (Krüger 1995:100). I started reading literature on AICs, at that stage more commonly known as African Independent Churches, and was particularly influenced by an article written by Joseph A. Omoyajowo (1988). Omoyajowo emphasised the inseparability of Christianity, or more precisely religion, and culture. Therefore, Africans ought to experience Christianity according to their own cultural traditions. He said “[t]he Word must become flesh and dwell in Africa among Africans, in an African context” (Omoyajowo 1988:80). My colleague’s statements about the ZCC became clear to me now. His friendship proved to be influential and prodded my further interest in this particular “brand” of African Zionism.

As a result of these experiences I selected the ZCC as topic for my mini-thesis as part-fulfilment of the honours degree. I conducted an extensive literature study and some face-to-face interviews with members of the ZCC over a relatively short period of time for the mini-thesis. It became apparent that most members were suspicious about any intrusion into their religious lives and were not keen on strangers participating in their services.⁴ They informed me that I needed to obtain permission from a priest (*moruti*⁵) to gain more information on the ZCC. At that point in time I was not able to accomplish this. It was clear that ZCC members had great respect for their church, its policies and leader and, accordingly, kept their religious lives private.

upbringings in the city or rural areas, kinds of education and religious orientations created our own kinds of “personal, hybrid world-views that help us to make sense of our experiences and to order our lives” (Hammond-Tooke 1989:8). Many people therefore tend to move between different sociocultural systems adopting only those aspects that improve their lives.

³ Syncretistic elements refer to those elements groups have absorbed from other traditions they are/were in close contact with and then reinterpreted to fit into a new life (Seymour-Smith 1986:274). A further critical explanation of the concept syncretism follows in section 2.2.

⁴ The word “service” is used throughout this study to indicate a formal procedure of religious worship as explained in The New Oxford Dictionary of English (Pearsall 2001:1699).

⁵ The translation of the word *moruti* is preacher according to the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:108). The *ZCC Messenger* published a copy of the homily that Bishop Lekganyane (2001:6–8) presented at the 2001 September gathering at Moria. In this homily the Bishop referred to a *moruti* as a priest. During my period of fieldwork members themselves, irrelevant of the language in which they are conversing, mainly referred to a *moruti* as a *moruti* and seldom used the term priest. According to Müller (2011:27) “the original meaning of the word is ‘teacher’, from the root *ho ruta* – to teach, with the introduction and spread of Christianity among the Sotho-Tswana people *moruti* (pl. *baruti*) has increasingly come to designate Christian ministers”.

My curiosity about this mysterious African church and its prominent healing ministry was not satisfied. I had only been able to gather information about the general aspects of the ZCC through the literature review and the interviews. Available literature on AICs is predominantly of a theological nature and not that many researchers have focused on the ZCC and its healing ministry within a specific congregation. In addition, only Comaroff (1985) and later Mosupyoe (1999) have written from a female perspective (see Kiernan 1990:14). Previous researchers, such as Sundkler (1961:220), Daneel (1974:3; 1983:27), West (1975:8, 91), Kiernan (1985:95) and Oosthuizen (1989:5) suggested that the healing element is one of the major attractions of African Zionist churches. Hanekom (1975:60), Lukhaimane (1980:62) and Anderson (1999:304; 2003:107) noted that this aspect was highlighted for ZCC members as well.

The tremendous growth rate in membership and size of the ZCC and its healing ministry combined with the lack of anthropological research conducted in this field (only Comaroff (1985), Mosupyoe (1999), Kiernan (1990), West (1975) and Hanekom (1975) are anthropologists) propelled me to register as a postgraduate student and conduct an anthropological study of the ZCC and its healing practices.

1.2 Aims and objectives

According to Turner (1967:359ff, as quoted by Comaroff 1985:182), “anthropologists have long insisted that physical disorder indexes social disruption, and that healing is a simultaneously individual and collective process” (see Steyn 1996:1). With this information in mind and through observing the rapid social change and upheaval in South Africa over the past years (before and since the elections of April 1994), the increasing number of poverty-stricken communities and the substantial crime wave, we are able to understand why cases of ill-health have increased as well. Consequently it is understandable that the need for enduring health and affordable healthcare systems has become a major preoccupation of people (see Hammond-Tooke 1989:53).

The term “biomedical system” refers to the traditional western medical system set in a western sociocultural environment, but it acknowledges the multiple contributions made by people from different social, cultural and geographical areas (see Brown

1998:108–109). The biomedical system, although effective in many ways, focuses on the individual, and its services, such as clinics, are not always in close proximity to people in rural areas or informal settlements (shantytowns) and not necessarily affordable to those who are in need (see Lukhaimane 1980:63).

People from different sociocultural backgrounds tend to perceive ill-health (discussed more fully in section 3.2) differently, including its identification and treatment. In South Africa with its diversity of cultures, this means that some people may not use the biomedical system due to not feeling at ease in biomedical surroundings or because the system cannot treat certain afflictions to the satisfaction of the patient.

The ZCC is considered to be the fastest growing and largest AIC in southern Africa (see Anderson 1999:285; Burger 2007:1; Comaroff 1985:238; Khumalo 2009:3; Oosthuizen 1992:xix; Schoffeleers 1991:3). The continuous growth rate of the ZCC seems to indicate that this church's inexpensive, religious system of healing is able to satisfy the need of its members, on an individual and collective scale (see Oosthuizen 1996:308). I, therefore, argue that understanding the ZCC's contribution to meeting the health needs of a large portion of the South African population will be enhanced by an investigation that employs an anthropological approach.

- This dissertation's main objective is the study of the ZCC's healing practices, within a given congregation.
- It explores the history and origin of healing in the ZCC to contextualise the study.
- It also attempts to define the concept of ill-health versus health and the concomitant processes of healing and curing.
- In addition, it investigates the organisational structure of the ZCC with specific reference to the spatial dimension, codes of conduct and participation in a particular congregation.

1.3 Territorial demarcation

When I decided to further my studies on the ZCC I at first had no idea of how I would gain permission to attend and hopefully participate in ZCC services. Due to my previous experiences and as Bernard (2011:268) suggested, when an anthropologist studies a hierarchically organised group or community it is best “to start at the top” (the Bishop himself or a *moruti*) “and work down”. However, this is easier said than done. Once a thorough literature study on the subject was in an advanced stage, I eagerly started planning my initial contact with the ZCC to enable my first field trip. Barbara Tedlock (1991:70) refers to this first field trip as an ethnographer’s necessary initiation or so-called “rite de passage” into an alien world that will hopefully enhance the researcher’s understanding of its workings. I knew that as an anthropologist if I was able to gain access to the ZCC to do an on-going study among its members I would have to prove my own integrity and establish rules of confidentiality at the same time.

I planned to write to the spiritual and administrative leader of the ZCC (Hanekom 1975:49), Bishop Barnabas Lekganyane, to formally request permission to study methods of healing at a ZCC congregation. If permission was granted, I planned to establish rapport with ZCC members in the Pretoria area. However, before I was able to follow this route, Mary, a domestic cleaner, who worked at our offices at Unisa and with whom I had been acquainted for quite some years, became aware of my research problem and kindly offered to introduce me to ZCC members also employed at Unisa.

Through her I met Mr M and later *Moruti* Moya with whom I, through numerous visits and conversations, established rapport. At first *Moruti* Moya was reluctant to answer questions concerning general matters of the ZCC. I then asked him about the importance of a manuscript that was given to me by a ZCC male member (Mr D). The manuscript was a photocopy of a book titled *Histori Ya Zion Christian Church* and written by A.S. Mopeli-Paulus (the publisher or date of publication were not indicated). Mr D had given it to me to help me obtain accurate data for my study. *Moruti* Moya was impressed that I had this book in my possession and consequently gave me photocopies of the ZCC Family Bible. These manuscripts, according to him,

would provide all of the information needed to successfully complete my study. He also indicated he would consider my request to attend services at his congregation.

During *Moruti* Moya's next visit, an unexpected one, he casually started asking me questions about the history of the ZCC, which I was fortunately able to answer. He then said that if I was still keen on visiting a ZCC congregation it would suit him if I could attend the next Sunday service. I was ecstatic! He recommended that Mary should accompany me on visits. The thought of her presence during my visits did make me feel more at ease and fortunately Mary seemed very proud to be chosen to accompany me. He further indicated that Mary would explain to me the dress code and the correct behavioural procedures to be followed during a Sunday service.

As a result, I did not need to request permission from the Bishop. During 2003, however, I was invited by one of the senior *baruti*⁶ of the Marabastad congregation to visit the Zion City Moria. On arrival we were summoned to meet two of the then 12 members of the Lekganyane *kgôrô* (kraal or court). The high church officials warmly welcomed *Moruti* Mampuru, Martha (my translator at that time) and I and invited us to attend the big festivals as well. The spokesperson of the Lekganyane delegation was impressed with my efforts to study the ZCC and granted me permission to continue my studies. We were invited to stay at Zion City Moria's special guesthouse, house of the *kgôši* (king) and were literally treated as royal family. I later became aware of another researcher, Adam Ashforth, who had gained permission from Zion City Moria's high officials (*lekgotla*) to conduct research. He had obtained this permission by means of a formal written request, but had to wait months for a response from the general secretary and then had to negotiate access to the ZCC by means of telephone and fax communications, which also took some time to conclude (Ashforth 2005:249).

Although I had gained access to the ZCC differently than anticipated, I was still able to follow Bernard's (2011:268) suggested top-down approach by entering the field via a senior official, namely a ZCC priest. Both my research participants, *Moruti* Moya and Mr M, were members of the Marabastad congregation. Marabastad was in

⁶ According to the Popular Northern Sotho Dictionary *baruti* is the plural form of *moruti* (Kriel, Prinsloo & Sathekge 1997:7).

relative close proximity to my home at that stage and therefore easily accessible. Purely by chance I was thus also able to follow Bernard's (2011:267) other suggestion and take in "the field site that promises to provide easy access to data". The territorial demarcation of this study is therefore the Marabastad congregation of the ZCC, which is situated a few blocks north of the inner city of the City of Tswane in Pretoria, Gauteng, South Africa (see Figure 1 below).



Figure 1: Map of South Africa indicating the location of Gauteng and then a map of Gauteng indicating the location of Marabastad

1.4 Overview of consulted literature

Although ZCC members come from different ethnic backgrounds Pedi-speakers historically dominate the church. The Pedi-speaking group is one of the strongest clans of the Northern Sotho group and they speak a dialect of Northern Sotho (Mönnig 1983:11; Müller 2011:16). Due to their dominance, the ZCC's sociocultural structure resembles to some extent that of the Pedi-speakers' traditional way of living (Anderson 1999:294; Hanekom 1975:58; Lukhaimane 1980:20; Mosupyoe 1999:15; Personal communication *Moruti* Mampuru 2003; *Moruti* Moya 1996). The anthropological studies of Hanekom (1975), Kriel (1992), Mönnig (1983) and Mosupyoe (1999) are useful for understanding the general sociocultural background of Pedi-speakers, including their perceptions of health and healing.

Barfield (2001), Comaroff (1985), Hammond-Tooke (1975 & 1989), Hanekom (1975), Herselman (1996, 2000 & 2007), Kiernan (1990), Kriel (1992), Kuper (1986), McElroy and Townsend (2009), Mönnig (1983), Mosupyoe (1999), Ngubane (1977 & 1986), Niehaus (2001 & 2006), Schapera (1953), Sobu (2011) and Thomas (1999) were the primary sources I consulted regarding the anthropological perception of ill-health and healing and as to how these concepts are perceived in an African context.

I also consulted scholars from other disciplines, such as the theologian Mbiti (1971, 1980 & 1986), the historian Lukhaimane (1980 & 1991) and religious scholars like Crafford (1996), Steyn (1996 & 2003) and Thorpe (1991) to discover more about the concept of health in an African context.

I soon became aware that few researchers focused specifically on the ZCC. However, several studies on AICs included illustrative sections on the ZCC. I have drawn on a variety of sources from different disciplines, but have focused on a few authors whose work, and sometimes lives, has affected my understanding on how the AICs, and the ZCC specifically, developed and function. These authors and their work are outlined further below.

Numerous leading publications concerning the AICs were written from a Christian missionary or theological perspective. Some of these researchers altered their original theological convictions regarding AICs over time.

The pioneering researcher on AICs and Swedish missionary Bengt Sundkler wrote the highly regarded book *Bantu prophets in South Africa* in 1948 (the second edition was released in 1961) (see Maluleke 2003:178). Sundkler investigated many and mostly Zulu-speaking AICs, most of them in rural areas. According to Comaroff (1985:168), most AIC scholars at that point had failed to understand the AIC's "broad structural significance and to their character as complex symbolic systems". Sundkler started collecting data on AICs during the late 1930s. The territorial demarcation of his study stretched from the coast of KwaZulu-Natal to Johannesburg (Sundkler 1961:14). He wrote from a western Christian perspective and concluded his first edition, for which he has been repeatedly criticised, with the apprehension that AICs, as a result of their syncretistic nature, became bridges leading members back to their traditional African religions or, as he referred to it at that stage, into "heathenism". However, in his second edition he noted that this apprehension was possibly due to his western understanding of AICs. About 15 years after his first concluding note and another visit to South Africa, he wrote that AICs were actually acting as bridges between members' "traditional religion" and a "new" religious life, which through syncretism became their own (Daneel 2007:146; Sundkler 1961:6, 297, 302). Several scholars have attempted to classify AICs; however, Sundkler (1961:37) was the first to divide them into Ethiopian and Zionist churches, and subsequently to identify a messianic-type movement as a subsection within Zionist churches. Although other scholars have refined this classification, many scholars still use and refer to some of the basic characteristics of his original classification.

John Mbiti (1971, 1980 & 1986), a Kenyan-born Anglican priest, received his doctorate in Theology at the University of Cambridge in 1963. Among other job postings he taught Religion and Theology at the Makerere University of Uganda from 1964 to 1974, and subsequently was director of the World Council of Churches' Ecumenical Institute in Switzerland. He then became a part-time professor at the University of Bern, and parish minister in Burgdorf, Switzerland. He has been a visiting professor at many universities in Europe, the USA, Canada and Australia and

has travelled widely in many countries. Although a researcher of magnitude (he gathered his fieldwork data on 300 different African peoples), he did not specifically focus on AICs, but has written numerous publications concerning traditional African religions and philosophy (Mbiti 1980:817). He has interpreted Christianity in an African context in a credible and insightful way.

GC (Pippin) Oosthuizen is another AIC researcher whose work is cross-disciplinary in nature. He was a doctor of Philosophy and Theology and head of the Department of Theology at the then University of Durban-Westville (1969–1971). He left to head up the Department of Science and Religion, which he had initiated and where he resided until his retirement in 1984. He also founded and became the director of Nermic (Research Unit for New Religious Movements and Independent Churches) at the University of Zululand, which he closed down in 1997 due to ill-health. Oosthuizen made his major contributions to the study of AICs during the 1980s and 1990s. He published and edited numerous articles and books on AICs (Smit & Kumar 2006:9–10, 16–17). His focus on AICs was mainly on Zulu-speaking Initiated Churches in KwaZulu-Natal and how these had adapted to a changing South Africa. In short, he placed specific emphasis on the AICs' ability to meet the needs of their members, especially in terms of presenting them with a place of security, healing, peace, humanity, mutual respect and material upliftment (Smit & Kumar 2006:12; Oosthuizen 1992:xxvii; 1996:308, 322–323;). Of specific importance to me was his work on the role of *The healer-prophet in Afro-Christian churches* (1992) in which he focused on their relationship with the supernatural and their treatment of ill-health as experienced in a traditional African context. I had the privilege to meet him at a South African Science and Religion Forum organised by Unisa's Research Institute for Theology and Religion in Pretoria at the Sunnyside Campus some years ago.

Another significant AIC scholar is Inus Daneel. For more than 40 years he has studied and served the Zimbabwean AICs (Daneel 2007:xiii). I spoke to him when I initially took an interest in the ZCC during the 1990s and he was kind enough to give me a copy of his book *Zionism and faith-healing in Rhodesia* (1970b). Zimbabwean-born, he grew up in a missionary family and spoke Shona fluently. He focused on the traditional religious belief system of Shona-speakers and on Shona-speaking Initiated Churches of which he emphasised the Zimbabwean ZCC of Edward

Mutendi (see section 2.7.2 for more detail on Mutendi's relationship with the ZCC). Mutendi, who for a while lived in South Africa, moved away from the South African ZCC during the reign of its first bishop, Engenas Lekganyane (Anderson 1999:292; Daneel 1971:298–299). According to Robert (2003:3), Daneel would have preferred to become an anthropologist, but became an “alternative missionary” among the Shona. He is referred to as such because he held alternative viewpoints, namely that “the existence of general revelation meant that divine purpose lay behind all religions” and he therefore viewed other religions more positively than most missionaries (Robert 2003:5). He was the first AIC researcher to conduct participant observation in the sense that he lived among his study participants. He resided as a doctoral student for a few months at the Zion City of Bishop Mutendi's ZCC. In time he came to realise that AICs “contextualised” Christianity in their own culture. During the next few years Daneel published four books (1970a, 1970b, 1971, 1974). Three of them focused on Shona-speaking Initiated Churches. He received his doctorate from the Free University of Amsterdam in Missiology in 1971. During his doctorate studies in the Netherlands he met Bishop Sundkler and was able to argue against Sundkler's interpretation of AICs as the “bridge back to heathenism” referring to them rather as “bridges toward the Christian future”. This could have influenced Sundkler's thinking and led to his change of heart (Anderson 2003:103, 105; Cuthbertson, Pretorius & Robert 2003:xi, xii, xiii, xv; Robert 2003:5, 8).

The Shona-speaking Zionists perceived Daneel, who often preached and healed through the laying-on of hands, as a prophetic leader. They named him “Bishop Moses” and he was accepted as a religious leader in an African context (Robert 2003:12). His numerous publications (including at least 13 books and more than 50 journal articles) provide an insider viewpoint and embody a grassroots approach to AICs. According to Anderson (2003:116), Daneel's most profound contribution is his continuous investigation of Christianity's Africanisation or, as he called it, “adaptation and transformation”, a theme that runs through all his publications. After collecting numerous case studies and field observations, Daneel (1974:309, as quoted by Anderson 2003:116) concluded that a major attraction of Zimbabwean AICs is the adaptation of Christianity to an African sociocultural environment. Last heard of Daneel was still among his people, as a “folk-theologian” and mediator of environmental issues (see Daneel 2007).

Another scholar of AICs whose work has a bearing on this study is Allan Anderson. Born to a London missionary family, he was raised in Zimbabwe and is a former student/protégé of Inus Daneel (Anderson 2000:1; 2003:104). He became a travelling missionary between the Northern Cape and Malawi in 1973. He resided for seven years just outside of Soshanguve (situated northwest of Pretoria, Gauteng, South Africa) with his wife. They became members of a small African-initiated Pentecostal Church. Consequently, he incorporated an insider's view into his work. He worked as a part-time lecturer at Unisa's Department of Missiology and as a researcher at Unisa's Research institute for Theology and Religion during his studies. In 1992 he received his doctorate in Missiology. Four of Anderson's books (1991, 1992, 2000 & 2001) and a variety of journal articles on the topic of AICs are of specific relevance to this study because of his references to the ZCC in Soshanguve.

Anderson conducted his fieldwork during the early 1990s focusing on African Pentecostal mission churches, African-initiated Pentecostal churches and Zionist and Apostolic AICs to which he intermittently referred to as indigenous Pentecostal-type churches (Anderson 2000:xxi, 2, 5, 6, 8, 9, 11; Daneel 2007:285). Although he wrote from a Christian theological perspective, assessing the missiological implications of the expansion of AICs, his open-mindedness towards African initiatives and the detailed nature of his work, which he presented in a narrative writing style, makes it easily accessible for interdisciplinary use. In particular his experiences, observations and descriptions of ZCC services were of great assistance in evaluating and adding to my acquired fieldwork data. He was at the completion of this study (September 2014) still a professor of Mission and Pentecostal Studies at the University of Birmingham in Britain (Anderson 2014).

Retief Müller (2011:21, 89, 95) concentrates on the ZCC, although he writes from a historical and ecumenical perspective. His book titled *African pilgrimage: Ritual travel in South Africa's Christianity of Zion* (2011) originated from "a dissertation written for Princeton Theological Seminary" (Müller 2011:vii). He conducted ethnographical fieldwork among ZCC members by means of participant observation from May to November 2005. He experienced pilgrimage as the ZCC's most distinctive characteristic and consequently placed his study in the domain of pilgrimage studies. Accompanied by ZCC members from the Mamelodi congregation, which is situated

northeast of Pretoria in Gauteng, South Africa, he visited Zion City Moria, attended a ZCC conference in Botswana and one held in Kimberly. His work had a significant bearing on my study as his field experiences and interpretations were similar to mine, despite the different focus. He obviously experienced the ZCC as a male and therefore engaged more with male members and wrote from a male's perspective. Being a skilled and engaging writer, he provided the reader with a remarkable ethnographic narrative report on the time he had spent among ZCC members.

The doctoral study of Lubeme Mafuta (2010) on the subject of theological ethics was another valuable resource. He used the ZCC as a case study in his thesis titled *Religion and development in South Africa: An investigation of the relationship between soteriology and capital development in an African Initiated Church*. Although our topics differed greatly his experiences and the fact that he conducted his fieldwork relatively recently did affect my perceptions of the ZCC. He used direct observation techniques and, as part of a team of three, conducted interviews with about 30 different ZCC members during two weeks in the summer of 2006. He focused mainly on “the broad perspective of the religious and behavioural patterns of ZCC members towards capital production” (Mafuta 2010:30). He, however, indicated that it was very difficult to find willing ZCC members to participate in his study because he did not possess a letter granting him permission for the study from the Zion City Moria (Mafuta 2010:25–26, 30, 143). Despite his time constraints and the above-mentioned limitation his personal experiences and observations were a welcome addition to my study.

Elias Lukhaimane (1980 & 1991) was a professor of History and student dean at the University of Venda, but of more significant relevance to this study, according to Naudé (1995:28), Lukhaimane was once employed as the general secretary of Bishop Joseph Lekganyane's St Engenas ZCC at least up unto 1989 (see Lukhaimane 1991:227; see Maluleke 2003:182). I could not find any further references to Lukhaimane's position in the ZCC structure. Although in this study the ZCC of Joseph's brother, Edward Lekganyane, has been emphasised, the ZCC only split in two after their father, Bishop Engenas Lekganyane (expanded on in sections 2.7.2 and 2.7.3), had died in 1948. Lukhaimane's historical study specifically focused on the period during which Engenas Lekganyane was Bishop of the ZCC (1924–

1948), in other words, before the split occurred. The importance of his work in relation to this study is that he was a member of this church and therefore his master's dissertation provided an insider's view on the ZCC and its general workings during this era.

Anthropological studies were also reviewed for this study. The following were particularly significant.

Christof Hanekom's *Krisis en kultus* (Crisis and cult) (1975) was a helpful anthropological source, especially the ethnographic description of the ZCC. His study entailed a vast territorial demarcation. Among other locations, he conducted fieldwork at the Zion City Moria and surrounding areas, Pretoria, Johannesburg, Bela Bela (previously known as Warmbad), Polokwane and Mokopane (previously known as Potgietersrus). He collected his fieldwork data during the early 1960s when he was employed as a lecturer in Anthropology at the University of the North and again during the early 1970s. He also had the opportunity to meet the late Bishop Edward Lekganyane (Hanekom 1975:64). Hanekom focused on the ZCC's origins, its specific character and composition. He attempted to analyse the ZCC's ideological-spiritual infrastructure with due allowance for its ethnographic inheritance. He regarded the ZCC as a crisis cult and concluded that it came into existence against the background of, and within, a fast-changing cultural environment. Another aspect of his evaluation I would like to emphasise is his reference to the assimilation of traditional African elements into the ZCC as a process of spontaneous syncretism. In other words, members incorporated traditional elements in the process of adjusting themselves to a new religion in an unfamiliar sociocultural environment unconsciously rather than purposefully (Hanekom 1975:5, 15–16, 112–113). Hanekom's study is not often used by scholars studying the AICs because it is written in Afrikaans.

Van Wyk's (1973) study of AICs (referred to as separatist movements) was initiated by the Dutch Reformed Church who felt that more information was needed on AICs due to their seemingly inexplicable growth rate. Van Wyk conducted this study during the 1960s covering a vast territorial demarcation. The study focused on Sotho-speaking AICs situated in the Gauteng area, Polokwane area and Sekhukhune

district of Limpopo, in and around Phuthaditjhaba (formerly Witsieshoek) in the eastern Free State, and the Rustenburg area situated in the North West. One of the numerous churches he studied was the ZCC. He included detailed descriptions of the historical relationships and internal politics of the ZCC, and recovered various personal documents of key figures in the ZCC. His work was of specific importance to this study because it provided for a better historical context for the ZCC.

During the late 1960s and early 1970s the anthropologist Martin West, a former student of Monica Wilson, conducted a comprehensive study of AICs in Soweto. He studied each AIC in relation to its particular urban environment. Already at that stage most Christian denominations were represented in Soweto (West 1975:16, 204). West himself conducted a preliminary survey of 58 churches in which he focused his attention on the leadership by conducting informal interviews and completing questionnaires. From these 58 churches he selected a further three churches for a more thorough study. This study included observations of special occasions like baptism⁷ and healing practices, interviews with ordinary members and the attendance of 18 services during which he used the technique of participant observation. During his fieldwork period he became increasingly aware of the importance of healing in AICs and therefore during the latter part of his study placed specific emphasis on healing practices. His research assistant conducted a further survey of 194 churches interviewing some leaders and asking others to complete questionnaires (West 1975:22, 205–206).

In West's book *Bishops and prophets in a black city* (1975), he placed strong emphasis on the internal organisation of AICs, and concluded that urban AICs provided their members with special means to adapt to the urban environment. His decision to conduct this particular study derived from Sundkler's *Bantu prophets in South Africa* (1948), which suggested that it would be worthwhile to make a study of AICs in an urban context (West 1975:5–6, 194). Although I consider his study exceptionally meaningful and have used it considerably, he does not refer to the

⁷ Baptism is described as "the religious rite of sprinkling water onto a person's forehead or of immersing them in water, symbolizing purification or regeneration and admission to the Christian Church" in the New Oxford Dictionary of English (Pearsal 2001:137).

ZCC often. He excluded large churches like the ZCC as their size and the fact that there were not many of them justified independent research projects (West 1975:22). The anthropologist Jean Comaroff (1985) from the University of Chicago, also a former student of Monica Wilson and later Isaac Shapera, conducted her research in the Tshidi community of the South African–Botswana borderland during the late 1960s and during the mid-1970s. Her meticulously detailed and intricate study, which examines the relationship of social practice, historical process and cultural mediation in Tshidi society, interprets the emergence of Zionist churches as positive attempts to express cultural resistance to the order imposed by European missionaries and colonialists (see Anderson 1999:286; Comaroff 1985:xi, xii, 1, 261–263). Shoffeleers (1991:2), for example, interpreted her work as an illustration of how Zionist churches represent a counterculture. In her book *Body of power, spirit of resistance: The culture and history of a South African people* (1985), she used, among other churches, the ZCC in Mafikeng to illustrate her theory. Her detailed explanations and interpretations provided deep insight into the healing ministry of the ZCC and helped me to present a more comprehensive ethnographic analysis of the Marabastad congregation’s healing activities.

James Kiernan (1990), an Irish expatriate and ex-Roman Catholic priest, was a full-time professor of Social Anthropology at the University of KwaZulu-Natal. Like West (1975), he also drew great inspiration from Sundkler’s work and commented that “the richness of material which he provides was one of the most compelling attractions which drew me as an anthropologist into this field of research” (Kiernan 1975:193). His field of research concentrated on the Zulu-speaking Initiated Churches, but specifically centred on the Zionist churches. He conducted most of his fieldwork in an urban environment, namely KwaMashu situated to the north of Durban. He published numerous journal articles on the Zulu-speaking Zionists covering a great diversity of themes. Following demands from scholars in different disciplines and apparently given the financial support and encouragement from Pippin Oosthuizen, Kiernan compiled 15 of his published journal articles in a single volume (Kiernan 1990:i, ii, 8, 14) titled *The production and management of therapeutic power in Zionist churches within a Zulu city* (1990). His work portrays an in-depth understanding, respect and sensitivity towards these people. His anthropological perspective of healing activities within an African Zionist environment was to me of specific relevance. I was

privileged to have received Kiernan's personal advice during the initial phases of this study.

Hammond-Tooke, a well-known anthropologist and author of at least 10 books as well as numerous articles, was chair of the Social Anthropology department at the University of Witwatersrand from 1970 to 1991, and editor of the journal *African Studies* for 10 years (1983–1993). His work was also significant to my understanding of healing in a traditional African context. He had, *inter alia*, an interest in traditional African healing practices and the religious ideas and beliefs in which many perceptions of health are embedded. He also investigated the relationship between traditional African and western ways of health-related thinking, as well as ways in which healing practices and beliefs have been adapted in AICs (Hammond-Tooke 1989:7; McAllister 1997:1; Kiernan 1997:57). He addresses these topics to a great extent in his book *Rituals and medicine* (1989) and indicates that he wrote the book to enlighten the general public on how black South Africans approach health-related problems. The style made the data truly accessible. His book is filled with detailed and enlightening descriptions and explanations of ideas and practices concerning health-related issues in an African context that I have gratefully incorporated into my explanations of ideas and practices concerning healing in this study

Stephné Herselman (de Villiers) (1984, 1996, 2000 & 2007) has served as chair of the department of Anthropology and Archaeology at Unisa since 2009 and was editor of the journal *Anthropology Southern Africa* from approximately 2004 to 2011. She has likewise given me insightful understandings of health-care systems in various African contexts. She has worked toward creating a greater awareness of different perceptions of sociocultural groups around health by compiling teaching materials, delivering papers and publishing across interdisciplinary boundaries. She has also kindly helped me investigate the anthropology of health care.

The anthropologist Boatamo Yvonne Mosupyoe is one of the few female scholars researching the ZCC. Her study was conducted for the degree of doctor of philosophy in Anthropology at Berkeley University and it was gender-specific in investigating the possibilities of a sexist-free environment in the ZCC. Her study is titled *How women in the ZCC of South Africa mediate patriarchy and non-sexism*

with their social development (1999). Born in South Africa she grew up with ZCC members as neighbours and with parents who strongly disapproved of the ZCC. This stirred her curiosity about the religious activities taking place at neighbouring houses. She therefore had both a personal and academic interest in this subject (Mosupyoe 1999:2–3). Mosupyoe (1999:xiii, 42, 45) initiated her academic fieldwork during 1992 mostly in Garankuwa and adjacent areas situated in and around Pretoria. She also attended a festival at Zion City Moria that made her specifically appreciate her role as anthropologist because it enabled her to participate and observe an event of such magnitude. Her work has helped me present more detailed descriptions of healing activities in the ZCC.

I also drew inspiration from the American anthropologist Linda Thomas' book *Under the Canopy: Ritual process and spiritual resilience in South Africa* (1999). Her interest in South Africa started when she was active in the anti-apartheid movement in New York, first as a seminary student at the Union Theological Seminary and later as a pastor of the United Methodist Church. In 1984 she and eight other United Methodists members visited Mozambique and South Africa in an attempt to assist people whose lives were in turmoil as a result of their given sociopolitical circumstances. The experiences she gained during this visit inspired her to return to South Africa, but this time as an anthropologist to study the Spirit-type AICs (which include Zionist-, Apostolic- and Pentecostal-type churches), particularly because they assisted marginalised people in times of social, economic and political turbulence (Thomas 1999:xxi, xxii, xxiii, xxiv). Her study focuses on healing rituals as practiced by the St John's Apostolic Faith Mission, which is a predominantly Xhosa-speaking congregation situated in Guguletu, just outside Cape Town. She conducted 24 months of fieldwork between 1991 and 1996. During this time she lived for six months among her research participants in Guguletu. Here she experienced healing rituals and interviewed many members of this church. Her ethnographic descriptions and ritual analysis, as well as the way in which she presented her research data by means of a narrative writing style, and the inclusion of some of her personal experiences was of noteworthy importance to me (Thomas 1999:xiii, xv, 124).

While conducting my literature study, I became aware of different trends in the available literature on AICs that included studies of the ZCC. The literature came

from different eras, different geographical areas and different disciplines. This presented some challenges for my own study.

Researchers working in different eras lived during different sociopolitical circumstances. This influenced their understanding and evaluations of AICs. For example, Sundkler gathered the information on which his findings were based over the period 1937–1945, many others such as Hanekom and West conducted their fieldwork during the 1960s and 1970s, Oosthuizen, Mosupye and Anderson during the 1980s and early 1990s, Thomas during the mid-1990s, and Mafuta and Müller during the 2005–2006 period. The AICs evolved immensely over decades and this too gave rise to some differences in research findings, especially concerning the presence and adaptation of traditional African elements (Steyn 1996:3).

Research results have also been influenced by the different geographical areas in which data was collected. In southern Africa, as in most other parts of the world, the ethnic identities of people or the different combination of their ethnic identities vary between different geographical areas. This will account for the presence of different traditional elements in the same type of AICs located in different areas. The sociocultural setting of rural and urban areas also differs. As noted by West (1975), AICs provide their members with special means to adapt to their specific environment. Therefore, each AIC's unique composition is to a great extent determined by the specific needs of its members. These needs differ between rural and urban locations.

Scholars of AICs originate from various disciplines, such as anthropology, theology, science and religion, religious studies and history. This leads to differences in their aims, objectives, and theoretical approaches, and consequently influences their understanding and interpretation of these churches. Sometimes the researcher's own perspectives of AICs have changed over time, as in Sundkler's interpretation of AICs in the first and second edition of his book (1948 & 1961).

To conclude, most leading researchers have used, to varying degrees, literature from a variety of disciplines, such as African studies, anthropology, history, religious studies, sociology and theology. In an attempt to present a comprehensive and integrated study of the ZCC and its healing ministry, I have had to do the same.

1.5 Fieldwork methodology

1.5.1 The research setting

I conducted fieldwork for this study during three separate phases. I first collected data during 1995, which became an introductory stage. I stopped the study in order to study *mestizo* shamanism, specifically the *vegetalistas* in Iquitos, situated in the Loreto region of the Maynas Province in Peru. A friend of mine, also an anthropologist, conducted research on this topic and invited me to re-enter the field together with him. Consequently I wanted to change the topic of my dissertation. Although I had conducted a thorough literature study, we were never able to obtain adequate funding to visit Peru.

During the introductory phase I conducted unstructured interviews with ZCC members in my office at Unisa. As mentioned earlier in this paper, I was in fact first interviewed by Mr M and later *Moruti* Moya to establish my intentions in studying the ZCC and, in particular, the focus on its healing practices. They were excited as both were of the opinion that the general public was misinformed about the ZCC and its activities and thought that this study would enlighten people about the positive effect the church has on its members. I indicated to them that possibly only a particular group of people would be interested in the research. They were not perturbed by this. I indicated that I would also like to work with female members. They considered the inclusion of female members unnecessary, but were willing to help me achieve my objective.

Once *Moruti* Moya was satisfied with my intentions and preparations for attending a ZCC service, Mary and I were allowed to attend Sunday services. Throughout this initial phase of my study I participated in service procedures and was able to conduct a combination of informal and unstructured interviews. These primarily took place before Sunday services, in my office at Unisa and at home. *Moruti* Moya, who lived only a few blocks away from me, visited me periodically to prepare me blessed liquids and to carry out other healing procedures for me. Although I did not continue with my research at that stage because I changed the topic of my study, I did present a paper on *Methodology in a religious environment: The Zion Christian Church* in

1996 at the Anthropology Southern Africa Conference at Rhodes University, Grahamstown.

I gathered the bulk of data for this study during my second period of fieldwork, which stretched over a two-year period from 2002 to 2003. Both *Moruti* Moya and Mary had retired, but I had developed a good rapport with Martie, Mary's replacement. Fortunately, she was also able to help me initiate contact with a *moruti*. She introduced me to *Moruti* Mampuru who was also a Unisa employee.

This time I was the one who regularly had to visit the *moruti* in his office at Unisa. I told him that I was an anthropologist conducting research for degree purposes at our first encounter. I explained the focus of anthropology, which seemed not to be unfamiliar to him, and that my topic entailed the healing ministry of the ZCC. He was very excited about my field of interest and told me that he had been a priest at the Marabastad congregation for the past 28 years. I informed him of my previous visits to the ZCC and that I had received help from *Moruti* Moya. He knew *Moruti* Moya and that he had retired, but said that he still worked as a priest at the Marabastad congregation. The church had moved to its own premises a few blocks north of the Marabastad bus station, which had been the original location.

As it would be favourable to have another priest as a research participant, I asked *Moruti* Mampuru if he would be willing to assist me with my research project and asked if I would be permitted to once again attend services at the Marabastad congregation. He responded positively to both requests, although he would still decide on a date to initiate my first attendance. It seemed that he first wanted to familiarise himself with my religious convictions and attitude towards life in general. After numerous conversations, during which, among other aspects, he inquired about my belief in God, and my knowledge of the Bible (my further religious affiliations did not appear to be of importance to him), he invited me to attend a Sunday service.

When I attended Sunday services during the 2002 fieldwork period *Moruti* Mampuru would usually wait for me outside the church's premises where he had already reserved a parking space for my car, which he said was protected by the ZCC. When

I arrived he would appoint a junior or senior female member, to whom I also refer as sponsors, to escort me into the church grounds and accompany me during the afternoon's activities. The sponsors advised me on correct behavioural procedures and occasionally acted as translators and advisors during prophesying sessions. I, however, regularly received guidance, advice and explanations of various activities from different male and female members including from prophets and other *baruti* who were not necessarily research participants, but just wanted to help me follow the correct procedures. Occasionally the sponsor, especially when she was a senior member, would appoint another woman to act as my sponsor, most probably because my presence restricted their movements during the service. Some of the sponsors would sometimes be slightly uncomfortable with their given task, but usually after a bit of conversation about life in general as well as informing them of my reasons for attending services they became more at ease and would assist me where and whenever needed. After a while *Moruti* Mampuru allowed me to attend Wednesday services without a sponsor which was for me a great accomplishment. These services are for female members only and are discussed more fully in section 5.2.2.

During Sunday services *Moruti* Mampuru acted as one of the official translators. He translated the different sermons, which are delivered by various *baruti* in the Pedi language, into the Zulu language. Of interest here, is that every time I attended services, even during my first period of fieldwork in 1995, someone would translate these sermons into Afrikaans. Only when the congregation was visited by special guests (outsiders), for example in April 2002 the congregation was visited by the mayor of the city of Tswane and his Highness Mantanzima (a Xhosa prince from the former Transkei), would the third language of translation be English. According to numerous research participants and other members, sermons were regularly translated into Afrikaans. They explained that most different language speakers in the Pretoria region had a working knowledge of Afrikaans and would therefore be able to understand the sermons even if they were not proficient in the Pedi or Zulu languages. Another contributing factor to the Afrikaans translations of sermons was likely due to the regular presence of a white Afrikaans speaking ZCC member and her two still school-going sons.

During my fieldwork period in 2003 I was assisted by Martha, a Pedi-speaker herself, who acted as my interpreter/translator. She was in general of great help in gathering information for this research project. I especially appreciated her assistance in validating data that I had gathered during 2002. Although her parents had been members of the ZCC since before her birth, she had never become a member or attended any services herself. Apparently her parents had never shared information on ZCC procedures or happenings with her or her brothers. This gave rise to their belief, when they were still kids, that ZCC members consumed people during services. This myth and related kinds of myths regarding the magical use of human body parts by ZCC members reoccurred regularly during conversations with non-members. Both Müller and Ashforth (2000:149, as quoted in Müller: 166) were also confronted with these kinds of beliefs. Martha, who did not believe these myths anymore, was now very curious about the procedures followed during services and as excited as I was to conduct fieldwork. We had established rapport over the many years during which she was employed as a domestic worker on the farm where I used to reside.

When I introduced her to *Moruti* Mampuru, he inquired about her interest in the ZCC and the possibility of her becoming a member. She told him that she was already a member of an Apostolic church and had no need to change denominations. Smilingly he told her that she might change her mind after she had attended a few ZCC services, but that she was welcome to accompany me on my visits either way.

Moruti Mampuru was my main link to the ZCC in Marabastad during my primary period of fieldwork (2002–2003). Over time we established a relationship of trust. During lunch hours, in his office environment at Unisa, we were able to discuss many of my experiences and observations. He would contribute further or sometimes offer different explanations or verify already received information regarding certain activities and beliefs. I was told by some of the younger *baruti* and male members at the Marabastad congregation that the older generation sometimes perceived church matters differently. I should therefore verify information given by older *baruti* with one of them, which I was generally able to do. Interestingly enough, the more senior *baruti* said the same thing about the younger generation. To me the indicated need

to verify information between different generations was an indication of the fluidity of perceptions within the ZCC community (see Müller 2011:191).

Occasionally before services I received old editions of the *ZCC Messenger* (ZCC bulletin) of which the editor-in-chief is Bishop Barnabas Lekganyane. As might be expected, this source was of great help in evaluating research data and as an additional source of information. During the latter part of my first period and especially during the second period of fieldwork I was allowed more freedom of movement. I was allowed to enter the church grounds on Sundays without *Moruti* Mampuru's presence, although when inside, just before the service started, senior women always escorted me to a special seat, usually in the front area close to them.

I carried out follow-up visits to the Marabastad congregation by participating in three services and conducting informal interviews during 2011. One of my colleagues at Unisa, Mrs T, acted as my research participant and interpreter during two of these visits. With her home language being Pedi and parents who were ZCC members as well she was a very helpful addition to my studies. During this period of research, I also conducted informal and unstructured interviews with Mrs T and other research participants in my office environment and I was able to reconfirm several of my previously gained research results and acquire new data. I only concluded the informal and unstructured interviews in 2013.

Throughout my studies it was evident that the anthropologists' most important virtues are respect, humility and patience. The ability to laugh at one's own insecurities and hardships helps as well. Throughout my extended fieldwork period I was continuously faced with the reality that the ZCC members I had met were just as Kiernan (1985:98) described the Zulu-speaking Zionists, a "gently peace loving people".

1.5.2 Research methods

This study was conducted according to the ethical guidelines and principles of conduct as adopted by *Anthropology Southern Africa* (Ross 2005:142–143). Even though my research for this study was in an advanced stage before Unisa's Research Ethics Policy was implemented, it does comply with the ethical principles set out in Unisa's policy of research ethics as accepted by the Ethics Committee of the Department of Anthropology and Archaeology in the College of Human Sciences.

1.5.2.1 The use of pseudonyms

The characteristic of secrecy is quite peculiar to the ZCC environment in comparison to other religious groupings. Lukhaimane (1980:6) indicated that members were instructed not to provide any information of the church and its workings to outsiders, but to refer enquiries to the *baruti* of their congregations. He, however, did meet *baruti* who were also instructed not to share unnecessary information with outsiders. Mafuta (2010:30) encountered similar limitations during his fieldwork. Many interview subjects wanted to see his permission letter from Zion City Moria. He and his team did not possess such a letter and consequently were declined interviews. Sometimes I was faced with this same protective measure, but I was able to inform them that I had received permission from *Moruti* Mampuru, whom most members at the Marabastad congregation knew. Now and again a *moruti* would inform me that information regarding certain practices is only given to full members of the ZCC. In order to access such information I was told that I would have to become a baptised member of the church and that I was welcome to do so. Even though I never became a member this choice did not have any obvious negative consequences.

Although senior *baruti* had granted me permission to study the ZCC and its practices, to protect participating members against the outside world and to prevent unnecessary discomfort and distress I was obliged to keep the names of my research participants confidential. Although not all of them specifically requested this kind of anonymity, as a preventive measure I have used pseudonyms for each of them throughout this study. Sundkler (1961:18), Mosupyoe (1999:46) and Thomas (1999:126), mostly for these same reasons, also saw the need to keep the anonymity of their research participants.

1.5.2.2 Participant observation

From the onset I was able to conduct participant observation. More specifically, I became a participant observer at the services of the ZCC in Marabastad. Bernard (2011:260) differentiated between an observing participant as an “insider” observing and taking notes of certain aspects of the lives of people around her/him, and a participant observer as an “outsider” only participating in certain aspects of the lives of those people being observed. As Adam Kuper (1993:63) explained, I participated “above all in order to be able to observe without intruding. Participation was less a means of observation than a means of gaining access to opportunities to observe”.

According to available literature on the ZCC, it seems that only a few researchers have used participant observation in a South African context, including Anderson (2000:xiii, 19, 148), who attended three ZCC Sunday services at the Soshanguve congregation in 1992; Mosupyoe (1999:xiii, 45), who participated in the Garankuwa ZCC congregation’s Sunday services during 1992; and Müller (2011:3, 21), who from May to November 2005 participated as “a cross-cultural observer” at the Mamelodi congregation, twice at the Zion City Moria, and travelled with members to Kimberley (Northern Cape) and Gaborone (Botswana) on occasions where the Bishop had been invited to pray for the people. Müller’s field research experiences resonate the most with mine, though as a man he engaged more with male participants.

During my studies I was constantly aware that being female I was treated as a female participant and consequently female members regularly assisted me. In this regard Gordon (1993:116) explained that, in trying to be as truthful and objective as possible when doing fieldwork and writing ethnography, “[t]he answer seems to be a crafted consciousness in which a woman does not deny that she is a woman and is attentive to gender in her own treatment, her own actions, and in the interactions of people in the community she is writing about”. Thus, I was conscious of the fact that being female influenced the kind of activities I participated in, the kind of knowledge that was made available to me, my observations and the way in which I was going to present my obtained data. Being female definitely gave me a better insight into female behavioural rules, regulations and activities, especially because I was automatically included into those female activities not open to male participation. Women also more easily relate to other women, particularly in a ZCC context where

women do not easily speak to men other than their husbands, *baruti* and prophets. For the same reasons, to some extent being a female will also have limited my access to and understanding of information concerning male members (see Bernard 2011:280–281; see Niehaus 2006:81).

Within the ZCC community, I was treated as a somewhat peculiar novice, which was of course the result of being a white South African and a rather tall one as well. Thus, although officially I was a junior participant, I was always seated in the front row close to the platform between the senior women, who were always smartly dressed in their yellow and green uniforms, during Sunday services. The particular sitting arrangements are discussed further in section 4.2.1. Other white female participants and members who occasionally attended Sunday Services received this same kind of treatment. Therefore, although I wanted to be as inconspicuous as possible, this was not possible due to my physical appearance. Luckily I was honoured with the friendship of other junior female participants and my interpreters were perceived as juniors as well. In many other respects I was treated as any other newcomer, strictly, but shown care and respect.

Language was an issue. The most common languages spoken at ZCC gatherings are Pedi, Zulu and occasionally Afrikaans. My family moved from the Netherlands to South Africa when I was still attending primary school, therefore my home language is Dutch. My further schooling and university education (including an honours degree) was conducted in Afrikaans. After leaving university I operated in an English and Afrikaans-speaking environment. During my sessions of participant observation conversations were most commonly conducted in Afrikaans. Lack of fluency in the Pedi or Zulu languages has affected the precision of my fieldwork data. I have tried to counteract this shortcoming by using interpreters to check my fieldwork data. That I am not a first-language English speaker and also conducted most of the research in Afrikaans might have affected how data has been conveyed in this study. I have tried to convey gathered information as accurately as possible.

As I used participant observation as my primary research tool a large percentage of my data is based on personal experiences and observations, particularly before, during and after services. Many of the descriptions used in this study reflect my perception of events and phenomena. I participated in prophesying sessions, healing

activities and other activities during services. I received concomitant explanations of activities from priests, prophets and male and female members of the congregation during this participation. These experiences provided me with the insight needed to develop informal interview questions. Kiernan (1990:iv-v) noted that as he “enjoyed robust health” during his participant observation of Zulu-speaking Zionists he was unable to participate in healing activities. Perhaps fortunately for me, the prophets indicated that my health and the protection thereof needed divine attention.

Several *baruti* had implied that using recording devices, notepads and cameras was not allowed within church premises. I had to memorise my observations and write them up afterwards. This extended the time I had to spend in the field (see Pelto & Pelto 1988:69–70). To facilitate this process, I followed Bernard’s (2011:274–275) recommendations on building an accurate memory. One of the exercises was to walk past a store window and as soon as you could not see it anymore write down all the things that were in the window. You become acutely aware of how much you do not see unless you concentrate, and “you’ll start to create mnemonic devices for remembering more of what you see” (Bernard 2011:274–275). He advised mapping the physical space in which one was practising participant observation and remembering events in historical sequence. I followed his advice. My map can be seen in section 4.2.

1.5.2.3 Interviews

I conducted a combination of informal and unstructured interviews with general research participants and semi-structured interviews with key research participants. I have used the term informal interview to refer to a normal conversation during which I did not try to control the topic of discussion and the term unstructured interview to refer to a conversation in which I tried to direct the conversation, but exercised minimum control over their responses. In other words I tried to give research participants the freedom to express themselves according to their own needs. This meant that I was not able to cover all the topics equally in all interviews.

I was mostly not able to take notes during any of the interviews, as most were conducted on church grounds where taking notes was frowned upon. Even when interviews were conducted off site, members tended to become nervous and end the

conversation if I started writing down their responses. Informal interviews usually happened where and whenever the opportunity arose. They transpired relatively naturally with due allowance for my given circumstances as an anthropologist or, more specifically, as an outsider within their religious environment. I used an interview guide and tried to cover certain topics during a specific discussion for the semi-structured interviews, and again exercised minimum control over their responses. I usually scheduled semi-structured interviews by appointment, met the interviewees at a specific place and at a certain time (Bernard 2011:157–158).

I conducted most interviews in Afrikaans as this was a language interviewees were comfortable conversing in. Only a few research participants preferred to be interviewed in English. During the second period of research (2003) my interpreter Martha would pose questions in the Pedi language as well and then translate the answers into Afrikaans. Research participants, however, tended to translate what they had told Martha in the Pedi language into Afrikaans themselves so that I would be able to understand what they were saying. Martha was of continuous assistance during these types of interviews in providing clarity on certain aspects to the participants and to me. This enabled me to a certain extent to clarify specifically what I wanted to know and to steer conversations into the preferred direction. Her presence had a positive influence on members during services, especially when they had to guide me through sensitive ritual procedures or explain certain practices and beliefs that were private in nature, such as the taboos surrounding menstruation.

There were six key research participants in particular in this study – three female and three male ZCC members. One male and one female were between 25 and 35, one male and one female were between 40 and 50 and one male and one female were between 60 and 70 years of age. Besides numerous informal conversations, I have conducted a combination of informal and unstructured interviews with approximately 24 other members who were mostly female and fell between 25 and 65 years of age. All of the research participants had received some formal schooling. I am, however, only aware of 10 that completed high school and two that had higher diplomas. Most of the general research participants were not selected according to particular criteria other than their membership of the ZCC. Many at first had approached me and engaged in general conversation. I then asked them if they would be willing to assist

me with my study of the ZCC and if they were willing I conducted an informal or unstructured interview right away.

1.5.2.4 Validation of data

To substantiate and evaluate my acquired research data, I repeatedly covered the same kind of topics using different approaches with different members (dependent on their gender, age group and seniority) during different services. I attended approximately 21 full services and participated repeatedly in various activities. I validated data with the assistance of my interpreters/translators during the second and third period of my fieldwork. To broaden my general knowledge on ZCC activities and for the purpose of a comparative analysis Martha, *Moruti* Mampuru and I attended a full day's activities (7:00 to 19:00), which included a service at the Zion City Moria. I have also compared experiences and other acquired data with available literature on the ZCC and when possible with the information presented in the available *ZCC Messengers*.

It became clear to me throughout my fieldwork that members do not always share the same perspectives on religious beliefs and practices. The ways in which members understand religious beliefs, practices and conduct within a ZCC context seem to depend on a variety of factors such as differences in levels and kinds of education and differences in world-views⁸ that exist between younger and older generations, rural and urban inhabitants, and different ethnic affiliations. Members' previous religious background and the duration of their ZCC membership can also influence their perspectives. It is not therefore possible to conclude that everything written in this study applies uniformly to all ZCC members and congregations.

My own perspectives will also have influenced my representation of this data. It was my intent to produce an accurate account of my experiences and acquired knowledge through participant observation and reviewed literature.

⁸ In this study, world-view refers to how a person perceives everything s/he is aware of, such as humans, nature, the universe and the supernatural. A shared world-view refers to a group's shared attitudes, values and beliefs (Seymour-Smith 1986:291).

1.5.2.5 Objectivity

Can any “outsider” or researcher be objective (see Anderson 2000:10)? Sundkler (1961:16) referred to himself as a white outsider in a black religious environment and therefore unable to “reach the heart of the matter”. This is relevant to my study as well as I am a white female and an outsider in the ZCC. In spite of my regular participation in services, which would definitely have reduced the problem of reactivity, I am sure most members still acted differently around and toward me because I was visibly identifiable as an outsider (see Bernard 2011:265–266).

Sundkler (1961:16) also emphasised that any researcher’s own values and ideals become intertwined into her/his research, from the data-collecting stage through to the final presentation. He thought it best to state his value premises openly. This kind of explicitness or biased approach is not allowed in anthropology. An anthropologist aims to not judge people, but rather to understand the sociocultural system in which the focus group resides in terms of the meaning that it has for the members thereof. It is therefore clear that cultural phenomena, such as values and customs, must be evaluated in terms of the culture of the society in which they are found and not according to a researcher’s own ideas, values and beliefs because this will result in a biased interpretation of the acquired data (Nanda & Warms 2014:12). This approach, known as cultural relativism, was a point of reference in my investigation of the healing practices of the ZCC (Barfield 2001:98). However, I accept and acknowledge that unconsciously my value and belief systems will have affected the outcome of this study because to obtain a state of absolute objectivity seems to be impossible (see Bernard 2011:278–279; Maluleke 2003:203).

Anderson (2000:10–11) uses various sources to show that it is impossible for a researcher to be totally detached, particularly in a religious environment. He also notes that “without the inevitable subjectivity of religious research, no human knowledge is possible”. Anderson says that for any encounter to be authentic, “a genuine and open rapport, without ulterior motives, between the researcher and those being researched who must become co-subjects and co-researcher is essential”. I have tried to apply this in my research.

1.5.2.6 Presentation of data

I integrated my own reflections on my fieldwork experiences, including my feelings and points of tension and anxiety, into my fieldwork notes and have used some of these in this study. I have personally experienced many of the events and activities recorded in this study and I am honoured to have been allowed to participate in them. This process has enriched my life.

It was therefore a natural cause of events to include myself into the ethnographic part of this study (see Thomas 1999:12). According to Tedlock (1991:77–8), this kind of presentation could be referred to as a narrative ethnography. She said that:

... [t]he author of a narrative ethnography deals with experiences, but along with these come ethnographic data, epistemological reflections on fieldwork participation, and cultural analysis. The world, in a narrative ethnography, is re-presented as perceived by a situated narrator, who is also present as a character in the story that reveals his [/her] own personality. This enables the reader to identify the consciousness which has selected and shaped the experiences within the text.

1.6 Terminology

I have included a list of abbreviations and glossary for purposes of clarity.

1.7 Structure of dissertation

This dissertation consists of six chapters and a bibliography.

Chapter 1 presents my motivation and purpose for this dissertation. I have indicated the territorial demarcation and discussed the methodology and theoretical framework that informs my investigation. I have also given an overview of consulted literature, that include references to the lives of some of the main scholars of traditional African religions and AICs that had a specific impact on my understanding of AICs.

Chapter 2 investigates the establishment and development of AICs in southern Africa. I interrogated the terminology used to refer to AICs and included a motivation for the use of the appellation AICs in this study. I further investigated different

systems of classification of AICs, rationale for the existence of AICs, and the general historical development of AICs in order to gain a better understanding of the ZCC's historical roots and composition. Lastly, I attempted to reconstruct the ZCC's history of origin enabling an understanding of how its healing ministry came into existence.

Chapter 3 interrogates the concepts of ill-health versus health and healing versus curing in an anthropological context. I further explored broad trends in traditional African healing practices in an attempt to comprehend the nature of healing practices found within Spirit-type AICs of which the ZCC is an example. In conclusion, I pay attention to the general nature of healing, specifically in Spirit-type AICs to facilitate a better understanding of healing in a ZCC context.

Chapter 4 describes my experience of the physical layout of the Marabastad congregation's church ground and the prescribed dress code on the premises. I discussed the ZCC dress code and its possible meanings and functions, as well as presenting the general code of conduct. Further, the chapter discussed participants in healing services, their roles and how they attain their status within the ZCC.

Chapter 5 outlines general service procedures in order to understand the context in which healing practices occur. I explored various facilitators and instruments of healing in this chapter. God is, however, perceived as the main source of healing. I also discussed notions of health and perceived causes of illness, including misfortunate events, to understand healing practices more thoroughly.

Chapter 6 revisits the conclusions developed in the preceding chapters and summarises and highlights the main issues in the dissertation.

CHAPTER 2

HISTORICAL SETTING

2.1 Introduction

This chapter outlines the primary processes present during the establishment and development of AICs. I clarify the terminology used by various scholars to refer to AICs, as well as motivate for the specific use of the appellation “AICs”. The distinctive characteristics of AICs make it possible to broadly classify them. I have done this by conducting a historical study of different systems of scholarly classification pertaining to AICs.

I explore the rationale for the AICs existence to explain the significant growth in membership and investigate the AIC’s general history in southern Africa to gain a historical perspective of the ZCC and the origin of its healing practices. I then attempt to reconstruct the ZCC’s unique history to gain a better understanding of its composition, including its significant healing ministry.

2.2 Sociocultural change and AICs

AICs resulted from the work of Christian missionaries who entered Africa mostly in the 19th century. Mbiti (1971:231–232) explained that missionaries from Europe and the United States of America (USA) arrived in Africa either shortly before or concurrently with colonial occupation (no specific date was given). Hence, in Africa the initial image of Christianity tended to coincide with that of colonial rule. The colonialists and the Christian missionaries were characterised by a western sociocultural orientation. Their presence in Africa led to a situation of changes in both their own sociocultural patterns and that of the Africans they interacted with. AICs originated from this interaction (Hanekom 1975:113; Kottak 2008:367–368).

This process of sociocultural change is caused by “continuous first-hand contact” between two or more autonomous societies, each characterised by its own unique sociocultural background, in this case between members of African and western societies (Kottak 2008:367). In this type of contact situation the degree of mutual influence and sociocultural change differs. Factors such as differing world-views and the circumstances of contact influence the degree and type of sociocultural change.

For example, aspects of social or political inequality will influence each group's willingness to offer, accept and reject various sociocultural elements. In this regard Hanekom (1975:10) explained that in South Africa, white adherents of Christianity did not always present Christianity in its totality to other societies and black adherents did not always accept all the Christian elements offered to them. This partial offer as well as partial acceptance of religious elements ultimately contributed to the incorporation of syncretistic elements in various AICs (Barfield 2001:1; Hanekom 1975:9–11; Kottak 2008:367–368).

Syncretism can be explained as a reaction to adaptations that have been made during a situation of comprehensive sociocultural change. Hanekom (1975:12) indicated that the term *syn-cret-ism* originated from the Greek and literally means “together-create-system” or to federate. Seymour-Smith (1986:274) more specifically described syncretism as the blending of sociocultural elements, usually religious in nature, from different societies and the reinterpretation thereof to adapt to the existing lives of the affected societies. She further argued that “[t]his is a general feature of the development of religious and cultural systems over time, as they absorb and reinterpret elements drawn from other traditions with which they are in contact”. Hanekom (1975:12) noted that in a situation of sociocultural change that is largely characterised by a unidirectional flow of sociocultural elements, syncretism indicates a blending of the old with the new by members of the old. In terms of Christianising Africans the flow of sociocultural elements largely derived from western-orientated Christianity. Syncretism in this context is viewed as the spontaneous incorporation or rather continuation and then reinterpretation of traditional African elements in order to adjust to a new religion rooted in an unfamiliar western sociocultural setting (Hanekom 1975:112–113; Kottak 2008:295). Lukhaimane (1980:40), for example, referred to the ZCC as a syncretistic movement.

I became aware while reading for this study that several scholars like Thomas (1999:82–85), Van der Veer (1994:196) and West (1975:3, 172) argued against the use of the word “syncretism” as it is sometimes used in a negative way, that is to evaluate so-called “religious impurities”. Thomas (1999:83–84), for example, encountered numerous scholars who used the term to indicate that Christianity has

been contaminated with African religious elements, ignoring the fact that western Christianity in itself is characterised by syncretistic elements.

Krüger (1995:100) spoke out against the negative connotations connected to the presence of syncretistic elements in religions by indicating that from a doctrinal perspective, Christianity originated as a syncretistic combination of Hebrew and Hellenistic elements. In addition, Thomas (1999:151) explained that Christianity has always embraced elements of pre-existing religions in particular areas; for example, in Europe certain rituals of nature religions were transformed into the celebration of Christmas. Ringgren (1969:8, as quoted by West 1975:171) pointed out that “...few religions are totally ‘pure’ or homogeneous and free from elements of syncretism or traces of encounter with other religions” (see Krüger 1995:100). Therefore, to scrutinise the purity of any religion’s composition in terms of the presence of syncretistic elements seems to be a futile exercise (Crafford 1996:2; Krüger 1995:100; Thomas 1999:151). This tendency to scrutinise, specifically ascribed to orthodox Christianity, is apparently perceived as something of the past, according to the Britannica Encyclopaedia Online (2009:1).

My aim, as an anthropologist is to understand and appreciate any religious system within the context of its given sociocultural environment, especially in terms of what it means to the adherents thereof. I have used the term syncretism as a value-free term in this study to indicate the historical origins of certain religious elements and how these elements have been reinterpreted by the concerned group to create a more meaningful acceptable life.

2.3 Terminology used to refer to AICs

For purposes of clarity I will attempt to explain the terminology used to refer to AICs over a period of time. It is important to note that these churches do not refer to themselves as African Independent or Initiated Churches (Anderson 2000:8–9). These are terms of classification and they are somewhat misleading in the sense that they were created by people who study AICs and not by members or leaders of AICs. According to West (1975:3) and Sindima (1994:130), AICs mostly refer to themselves as “African Churches”, for example, in Zulu, *amabandla amaAfrika* and in the Pedi language *dikereke tsa ma-Afrika* (also see Masuku 1996:50–1). During

my own informal interviews, which transpired many years after these researchers had completed their fieldwork, AIC members usually referred to their church as “our church” and would sometimes add its location. Only if asked specifically would they indicate the church’s precise name, which would sometimes include words such as Apostolic or Zionist. They never indicated to me as an outsider that it was an African-initiated or independent church. That would only become apparent after further investigation.

Since the commencement of AICs during the late 19th century and beginning of the 20th century researchers have used different terms to refer to African Christian churches. One of the first books written on AICs was by Reverend Allen Lea who used the appellation “Native Separatist Movements” (1926:481, as quoted in West 1975:5). Other scholars such as Hanekom (1975), Loram (1926), Mqotsi and Mkele (1946) and Van Wyk (1973) intermittently referred to AICs as “native” or “separatist” movements.

Sundkler (1961:18) criticised the use of the word native. He found that Africans did not want to be referred to as natives and he therefore used the term “bantú”, which at that time was a more acceptable word. Sundkler also disagreed with the branding of these churches as separatist movements. He perceived white secessionists who broke away from mother churches to be as much separatists as African secessionists were. Consequently, separatism cannot be viewed as a unique characteristic of AICs (also see Anderson 1991:2; Pobee & Ositelu II 1998:4). He preferred the appellation “Bantu Independent Churches” and used the word “independent” to indicate that these churches seceded from mission churches as a result of the need to function independently. Lukhaimane (1980:1) who also used the term independent used it more specifically to indicate that African churches were not under white control. According to West (1975:3) the term was not ideal at all, because it emphasised the breaking away of these churches from white Christian control, where he would have preferred an appellation that emphasised the African nature of Christianity. At that stage, however, most literature referred to African churches as African Independent Churches. Thus, to avoid confusion, he said that he had to use the term as well (see Sindima 1994:129).

During the middle 1990s the appellation “African Initiated Churches” surfaced among AIC scholars. Steyn (1996:3), for example, said that she preferred to use this term when she referred to “those Christian Churches which give a unique African expression to Christianity”. Even the World Council of Churches has over the past decade or so used the term (Anderson 2000:xvii; Cuthbertson, Pretorius & Robert 2003:vii). This term has gained increasing acceptance among scholars of anthropology, religious studies, theology and many more disciplines. I prefer the use of this term because of its emphasis on the African nature of Christianity and because it avoids the undesirable aspects of the above-mentioned terminology. In this study the term AICs applies to all Christian churches that on the whole have been initiated and are controlled by black Africans.

2.4 The classification of AICs in southern Africa

There have been several attempts to classify AICs. I will only refer to those that are of importance to this study. West (1975:16) stated that “The first and most durable classification has been that of Sundkler (1961:38–59), who distinguished between ‘Ethiopian’ and ‘Zionist’ independent churches”. He defined the Ethiopian-type independent churches (this is explored further in 2.6.1) as those which originated in secession from mission churches, mostly as a reaction against white control, and sometimes from each other, usually as a result of a struggle for power or other disputes. These types of churches are also characterised by their resemblance to the worship patterns of the parent mission churches (Anderson: 2007b:386; Daneel 1971:350; Kiernan 1990:9; M’Passou 1994:16; Sundkler 1961:53–54).

Daneel (1971:350) refined Sundkler’s classification by noting that all Shona Initiated Churches (both Ethiopian-type and Zionist-type churches) were to a greater or lesser extent characterised by dissatisfaction with former white control. Consequently, this characteristic cannot be viewed as a unique characteristic of Ethiopian-type AICs. He therefore only regarded the continuation of the original worship patterns of the parent churches as a characteristic of Ethiopian-type churches. Oosthuizen (1996:311) confirmed this viewpoint by identifying the reaction to white control or colonialism as one of three major reasons for the commencement of all AICs in southern Africa.

Sundkler's Zionist-type initiated churches comprised churches that included the words "Zion", "Apostolic", "Pentecostal" and "faith" into their titles. He said that he chose to refer to these churches as the Zionist-type because members of these churches perceived themselves as Zionists (*ama-Ziyoni*). In contrast to the Ethiopian-type churches he accentuated the syncretistic nature of the Zionist-type churches and their emphasis on the role of prophets, healing and purification rituals, speaking with tongues, and taboos (Sundkler 1961:54–55).

Sundkler (1961:302, 323) later refined his classification by emphasising a messianic-type church as a third type or rather a subsection of the Zionist-type churches. The messianic-type churches are characterised by a charismatic leader who is usually believed to have messianic characteristics. Sundkler emphasised, however, that only a limited number of such churches existed as he was only able to classify one percent of the 1 500 Zionist-type churches he had studied as being messianic in nature. He identified the ZCC as a model of the messianic-type church (West 1975:16–17).

According to Daneel (2007:146–147, 1987:187), Sundkler redefined his term messianic-type church to an iconic leadership-type church in his subsequent 1976 study, *Zulu Zion and some Swazi Zionists*. Sundkler now argued that his inclusion of the term messiah was a result of his previous more western and dogmatic approach to AICs. He continued that these kinds of charismatic leaders did not try to substitute God or the son of God, as the term messiah might have indicated, but rather tried to mirror and materialise Jesus Christ to their followers. For that reason he suggested that the classificatory term "iconic leader" would be more appropriate.

West (1975:16–20) used Sundkler's Ethiopian-Zionist dichotomy mainly because he was convinced that a new classification of AICs would not increase knowledge of these churches. He found that members of the Zionist-type AICs had a tendency to differentiate between themselves and the Ethiopian-type AICs by referring to themselves as churches of the spirit (*dikereke tsa Moya*) and the Ethiopian-type churches, who do not necessarily include the name "Ethiopian" in their titles, as churches of the law (*dikereke tsa molau*). The main reason for Ethiopian-type churches being known as churches of the law is that they do not claim special manifestations of the Holy Spirit through dreams, prophets and healing rituals. He

further identified the use of colour in church attire as a visible distinction. The Ethiopian-type churches are known for using black in their uniform, which is absent in Zionist-type churches where black is perceived as a symbol of death and disease. Zionist-type uniforms are characterised by the colour white, which to them symbolises purity and is mixed with symbolic colours such as green, blue, yellow and red (see Comaroff 1985:221–222; Turner 1968:511–512).

While West (1975:17–18) was conducting his research he noticed that members of the Zionist-type churches in general referred to themselves as Zionist or *amaZiyoni*, but if they specifically belonged to an Apostolic church they preferred to refer to themselves as Apostolic. He therefore drew a further distinction by differentiating between the Zionist-type and the Apostolic-type AICs even though their characteristics overlapped extensively. This distinction seemed to be important to the members of the Apostolic churches in Soweto who emphasised that they incorporated fewer traditional elements in their doctrines and placed more stress on general education and theological tuition for ministers. He also mentioned that he did not encounter any true messianic-type churches in Soweto and considered it an unnecessary classificatory type.

West (1975:20) concluded by saying that he regarded the Zionist-type/Ethiopian-type distinction as oversimplified and not absolute, because characteristics of particular types of churches overlapped. For example, all the churches in his survey, which included a few Ethiopian-type churches, conducted healing activities, even though this is commonly perceived to be a characteristic of Zionist-type churches. This classification did, however, broadly correspond to the situation of AICs in Soweto (West 1975:20). Several AIC scholars, like Daneel (1987:59), M'Passou (1994:16–17) and Oosthuizen (1996:309) have used this scheme of classification, although they also emphasised the difficulty of indicating a clear-cut division between different types of AICs. M'Passou (1994:16), for example, mentioned that “many of the Ethiopian Churches have become ‘Zionist’ in outlook and practice”, although the historical origins of these churches are quite distinct and can be studied as separate types along these lines (M'Passou 1994:17).

Even though Daneel (1971:285, 350; 2004:182) used the classificatory term “Ethiopian-type” churches, he preferred the term “Spirit-type” to Sundkler’s “Zionist-

type”, primarily because Zimbabwean members of these churches referred to themselves as *maKereke oMweya* (churches of the Spirit). Comaroff (1985:186–187) found this same descriptive term among the Tshidi in the former Mafikeng district. She said that Zionist-type churches in this area referred to themselves either as *Basione* (Zionists) or as *dikereke tsa moya*, which also translates as churches of the spirit. Personally I favour the classificatory term “Spirit-type AICs” because it avoids confusion concerning the kind of churches that are included under this classification, such as Zionist-, Pentecostal- and Apostolic-type AICs.

Daneel (1971:285, 350; 2004:182) differentiated between the Ethiopian-type and Spirit-type churches by classifying the first as non-prophetic churches and the latter as prophetic churches. According to him, prophetic churches are characterised by the emphasis on the work of the Holy Spirit; baptism by means of immersion into a “holy” river; strict taboos with regard to the use of medicine, certain foods and alcohol; protection against witchcraft and evil spirits; and vigorous participation and dancing activities during services that are filled with emotional outbursts. Like Sundkler, he acknowledged a third type or rather a subdivision of the Spirit-type or prophetic churches, which he also referred to as iconic leadership-type or semi-messianic-type churches, indicating Mutendi’s Zimbabwean ZCC, Lekganyane’s ZCC and Shembe’s Nazarene Baptist Church as examples of such churches (Daneel 1988:93, 110).

Kiernan (1990:9–10), although not opposed to Sundkler’s classification of AICs, suggested a more expressive and descriptive classification, namely that of a “Book-type” religion in contrast to a Spirit-type religion, where both represent features of religion and do not have separate histories of origin. The Book-type religion refers to the use of the Bible and other sacred writings, like those of founders or hymns. Within its structured organisation emphasis is placed on literacy, education and an orthodox conservative outlook on life, for example, including female subordination. In contrast, the Spirit-type churches are dominated by the work of prophets, spiritual fervour and enthusiasm, as well as spontaneous participation of members. Women are found in more prominent roles and the emphasis is on the here and now rather than on the hereafter. These two types complement each other and are sometimes kept in balance within one AIC. Usually, however, AICs tend to lean more to the one or the

other side of this scale. This classification would thus include some of the Ethiopian-type churches in his Spirit-type religion category and vice versa.

Kiernan (1990:9–10) further categorised AICs by identifying the strength of organisational ties between church headquarters and scattered congregations on the periphery. This centre-periphery scale runs as a continuum from highly centralised control to scattered autonomous congregations weakly linked with their headquarters. Kiernan's (1990:iv, 11–13) scheme of classification combines both the "Spirit/Book-type" identification and the "centre/periphery" categorisation. He, for example, classified the Zulu Zionist churches in KwaMashu as urban-centred, autonomous, local congregations, which emphasised both Book and Spirit components equally.

Lastly, I am including Anderson's (1991:2–3; 1993a:26; 2000:8–9, 27) classification system. He first used Daneel's Spirit-type appellation that includes all African churches that emphasise the work of the Holy Spirit. He came to the view that this category encompassed too many types of AICs. Therefore he created a different classification system using the term "African Pentecostalism", which included three different types of churches. The first group was the white African Pentecostal Mission Churches initiated in the early 20th century. These churches are still primarily under white control, although most members are black. The second group was the Independent Pentecostal Churches that did not differ much from the previous Pentecostal churches, but were initiated and are controlled by black Africans. He classified the third group as Indigenous Pentecostal-type Churches or just Pentecostal-type Churches. This category included Zionist- and Apostolic-type AICs, which he claimed had historical, liturgical and theological links with Pentecostal movements, are initiated and controlled by black Africans, and are highlighted as the most prominent AICs in southern Africa. He, for example, classified the ZCC as an Indigenous Pentecostal-type Church. Nevertheless, taking into account Hans-Jürgen Becken's note (in Anderson 2000:9) that South African Zionism and Pentecostal churches have long since developed in different directions, Anderson differentiated between the Zionists and Pentecostals to enable the emphasis of each type's unique character. He noted though that the semantics of the terms should not unnecessarily detain scholars because all of them were created by outsiders (Anderson's 1991:2–3; 1993a:26; 2000:8–9, 27).

Daneel (2000:xxii; 2004:182, 186–187, 189–190) questioned Anderson's independent Pentecostal-type churches appellation as it did not reflect an emic (insider viewpoint) categorisation used by the churches themselves. In addition, many of these churches have been influenced not only by European Pentecostal churches, but also by other mission churches such as the Dutch Reformed Church. He added that Pentecostal traits such as their form of worship and their emphasis on the Holy Spirit result from these churches' own interpretations of Christianity to fit into an African world-view and to satisfy African spiritual needs. Daneel (2004: 186), therefore, perceived this school of thought to be a superficial system of classification.

It is clearly a complicated task to create an adequate system of classification for AICs. Concomitant with all of the above mentioned criticisms, each AIC also has its own unique history of origin and development, and consequently unique characteristics that have direct bearing on their classification. Black African AIC leaders did not or do not necessarily concur with the scholarly or academic classifications that I have presented here. From an emic (and anthropological) perspective their own endo- or original classifications need to be accommodated. Either way, it is difficult to justify any generalisations concerning AICs. While acknowledging the mentioned shortcomings, including the danger of oversimplification, for historical and descriptive purposes I differentiate between the so-called Ethiopian-type churches and the Spirit-type churches, which include Zionist-, Pentecostal- and Apostolic-type churches.

2.5 Rationale for the initiation of AICs

A variety of causes are responsible for the proliferation of AICs. As mentioned previously each AIC originated and developed in a unique way rendering it problematic to rationalise any generalisations as to the proliferation of AICs. I will therefore attempt to outline only the most fundamental reasons for the existence of AICs from those indicated in available literature. These include adaptation in times of social change, a need for independence, a religious space that reflected traditional values and the view that the initiation of new Christian churches is normal practice as a result of the presence of numerous Christian denominations conducting evangelic work.

Steyn (1996:1) stated that social scientists have over the years “established beyond question that religious movements tend to proliferate in times of social change and turbulence”. Many African countries were subject to colonial administration and endure situations of severe conflict creating the ideal circumstances for the initiation and proliferation of AICs. According to Kiernan (1990:6–7) AICs are generally initiated to provide relief in undesirable situations, for example, during discriminatory circumstances or adaptation dilemmas during migration and urbanisation. It is during these times that people experience feelings of alienation due to the unfamiliar sociocultural surroundings and lack of access to necessary social and political mechanisms. Kiernan said that in undesirable situations like these AICs are able to restore African dignity and self-respect concurring with Sundkler who stated that AICs “are part of the struggle for the liberation of man and the realisation of personal worth” (in Kiernan 1990:7).

The need to break away from white western control is hence an obvious reason for the origination of AICs in those countries subject to colonisation. As West (1975:177) pointed out the political breakaway was significant in that it enabled African Christians to be in charge of their own churches and follow their own leaders. In addition, as already mentioned, it allowed them to Africanise Christianity, which for West was of equal importance (see Coplan 2008:101) because African Christians often feel like foreigners in mission churches that mostly do not pay heed to African values and needs (Mbiti 1971: 234).

For example, Mbiti (1971:234) explained that traditionally Africans live their whole lives in a religious world. Religious practices form the core of the traditional African world-view (see Coplan 2008: 101). According to him (1971:233–234):

[m]ission [western] Christianity has come to mean for many Africans simply a set of rules to be observed, promises to be expected in the next world, rhythmless hymns to be sung, rituals to be followed and a few other outward things. It is a Christianity which is locked up six days a week, meeting only for two hours on Sundays and perhaps once during the week. It is a Christianity which is active in a church building. The rest of the week is empty. Africans, who traditionally do not know a religious vacuum, feel that they don't get

enough religion from this type of Christianity, since it does not fill up their whole life and their understanding of the universe. ... Worship in mission churches is simply dull for most Africans. Independent Churches are an attempt to find a 'place to feel at home', not only in worship but in the whole profession and expression of Christian Faith. Beneath the umbrella of Independent Churches, African Christians can freely shed their tears, voice their sorrows, present their spiritual and physical needs, respond to the world in which they live and empty their selves before God.

It is important to consider female participation in this regard. Women in mission churches who are not church officials are usually restricted to being passive listeners (Omoyajowo 1988:80). This is not the case in AICs where, as Daneel (2007:214–215) pointed out, generally female members conduct far-reaching missionary activities by participating in special women's organisations and in healing activities (see Kiernan 1985:98). Although AICs primarily have male hierarchies of power and women are rarely allowed to become priests or ministers they do fulfil significant religious roles as wives of the priests or ministers and as prophets (Brandel-Syrier 1984:13–15; Hammond-Tooke 1989:137–138)

Anderson (1999:285, 308) concurs that a major reason for the proliferation of AICs, specifically the Spirit-type AICs, is their ability to address traditional African needs, of which he emphasised the deliverance from illness, poverty, unemployment, loneliness, evil spirits and sorcery. He drew attention to the fact that unlike mission churches traditional African religions are primarily concerned with rituals of healing and protection. Wilson (1971:114) also emphasised the preoccupation of traditional African religions with health and that the assistance most eagerly sought from early missionaries in Africa was treatment of the sick. Some missionaries initially established hospitals near the mission stations thus linking religion with healing activities and increasing their conversion rate. However, this was not general practice and it later disappeared altogether. Although several mission churches do practice healing by means of prayer and the laying on of hands, their main concern is attaining deliverance in the hereafter. AICs, in contrast, focus on providing immediate solutions to problems that are particular to a traditional African sociocultural setting and experienced by members in the here and now or, in other

words, solutions that assist in deliverance in the here and now (Anderson 1999:285; Hammond-Tooke 1989:135–136; Kiernan 1985:92).

In short, converts were exposed to two clashing world-views each with its own norms and value system. The Christian doctrine was rooted in a western world-view unfamiliar to most black African Christians. As Crafford (1996:23), Hanekom (1975:113), Mbiti (1971:233), Omoyajowo (1988:80) and Daneel (1974:309, as quoted by Anderson 2003:116) indicated, AICs largely resulted from attempts to contextualise Christianity in a new African sociocultural environment by means of mixing and adapting Christian doctrines with traditional African religious elements. As mentioned in section 2.2, this is referred to by some authors as a process of syncretism. Daneel (1974:309) also explained that “[t]his is a dynamic process with numerous variations, even within the same Church”. AICs are therefore each characterised by their own unique combination of Christian and traditional religious elements. According to West (1975:173) the mere presence of traditional elements in these churches was unacceptable to western-orientated mission churches. Members necessarily had to secede and initiate their own churches in order to practise this new African Christianity freely.

In addition, every Christian denomination, including Anglicans, Baptists, Lutherans, Protestants and Roman Catholics from the USA, Britain and Europe conducted missionary work in Africa. Africans were therefore faced with several images of Christianity and accepted the existence of different kinds of Christian theologies and practices as normal. The large variety of Protestant denominations that worked among African members cherished their denominational founders and their particular new brand of Christianity. African members, hence, viewed secessions as result of dissatisfaction about certain issues and the initiation of a new brand of Christianity as normal practice (Mbiti 1971:232–233).

Lastly, AICs did not only secede from mission churches, but also from one another. The reasons for these secessions can largely be ascribed to leadership power struggles, the legitimate succession of leaders, mismanagement of financial and administrative matters, as well as differences concerning particular religious

conceptions within such churches (Daneel 2000:328; Masuku 1996:53; West 1975:169).

2.6 A historical synopsis of AICs in South Africa

Since the late 19th century both categories of AICs, with the Spirit-type AICs more dominant, have shown a magnificent growth in number and membership. Daneel (1987:25) referred to this phenomenon as an “African spiritual or prophetic revolution”. There were about 30 AICs in South Africa in 1913 and this increased to about 3 000 in 1970. This means that about 25 percent of South Africa’s black population (about 4 million people) belonged to AICs in the early 1970s (Anderson 1999:286; West 1975:2). AICs proliferated even more over the next 20 years. According to Anderson (2007a:2) there were no less than 6 thousand AICs by 1990 with about 46 percent of the black population belonging to this type of church. The 2001 census report indicated that AICs had become the largest of all Christian groupings in South Africa (Burger 2007:1).

Although AICs comprise such a large part of South Africa’s church-attending population little has been written on their history. The available sources are sometimes vague in their descriptions of events, do not always supply dates of important happenings, and tend to contradict each other. This study should therefore be interpreted as a general outline of the historical origins of AICs in South Africa. Of importance to note is that, as M’Passou (1994:16–17) indicated, over time some Ethiopian-type churches acquired more Spirit-type characteristics and vice versa, however, both type of churches have retained their own unique histories of origin.

2.6.1 Ethiopian-type AICs in South Africa

It seems that the rise of AICs in South Africa began with the emergence of Ethiopian-type churches in the former Witwatersrand. In 1892 Reverend MM Mokone resigned from the Wesleyan Methodist Church in Johannesburg in protest against its racially discriminatory practices. He, together with other displeased members, founded the first Ethiopian-type AIC and named it the Ethiopian Church. The name Ethiopia is specifically linked to Psalm 68:31: “Ethiopia shall soon stretch out her hands unto God”. The reverend interpreted this as a promise that black African Christians established in their own independent churches would soon spread across the whole

of Africa (M'Passou 1994:10–12; Oosthuizen 1987:11; Sindima 1994:128; Sundkler 1961:39). According to Daneel (2004:184) this psalm also confirmed Mokone and his followers' argument that the Ethiopian Church is the oldest acknowledged Christian church and therefore the most valid on the continent.

The Witwatersrand, today in the Gauteng province, had already at that time become a cosmopolitan area and it had attracted many educated and influential black Africans from different ethnic backgrounds. Many enthusiastically joined this church. The leaders of smaller movements, such as Reverend K Napo and Reverend SJ Brander who had also broken away from mission churches due to political dissatisfaction, merged with Mokone's Ethiopian Church (M'Passou 1994:12; Sundkler 1961:39). The exact dates of these mergers were not indicated in the available literature on this subject.

The Wesleyan Methodist Church sent James Dwane, a Xhosa-speaking minister, to England in the early 1890s to seek financial support for the church. A quarrel on his return about the availability of this money drove him to resign from the church. In 1896 he joined Mokone's Ethiopian Church. With his superior leadership skills, Reverend Dwane soon assumed leadership of the Ethiopian Church (M'Passou 1994:12–13; Sundkler 1961:40).

Eager to obtain official recognition, the Ethiopian-type churches decided to seek affiliation with the African Methodist Episcopal Church (herein referred to as the AME) in the USA. The origins of both churches were similar. AME had originated in protest against the discriminatory measures practiced by the American Methodist Church. Reverend Dwane was chosen to negotiate this affiliation, which led to the successful incorporation of the Ethiopian Church, as well as other smaller Ethiopian-type congregations into the AME. A few years later, however, disagreement in terms of leadership positions within the AME led to the secession of Dwane's Ethiopian Church. Dwane immediately approached the South African Anglican Church, who in 1900 accepted the Ethiopian Church into their midst by creating a special *Order of Ethiopia*. However, only a small section of mainly Xhosa-speakers followed Dwane into the *Order of Ethiopia* where he remained until his death in 1916 (M'Passou 1994:13–15; Sundkler 1961:40–42).

A few Ethiopian Church members continued in the AME traditions, but most joined new Ethiopian-type AICs, which seceded and sprang up during this era. Most of these secessions were due to leadership struggles or disagreements over finances. The African Americans representing the AME in South Africa came to be perceived as outsiders who were only concerned with their own needs. This gave rise to further secessions. Reverend SJ Brander, for example, seceded in 1904 from the AME and founded the well-known Ethiopian Catholic Church in Zion that embodied a combination of Ethiopian-type and Spirit-type church characteristics. Other important examples of Ethiopian-type AICs established during this era were the African Presbyterian Church of Reverend Mzimba that originated from the Free Church of Scotland Mission as a result of financial disagreements, and the Nazareth Baptist Church or *iBandla lamaNazaretha* of the Shembe brothers, which represents the largest Ethiopian-type church in the Zulu-speaking community (M'Passou 1994:16–17; Oosthuizen 1996:311; Sundkler 1961:42–43; West 1975:163). Founder of the ZCC Bishop Engenas Lekganyane's first affiliation with a Christian church was apparently with the above-mentioned Free Church of Scotland (Kruger 1971:9; Van Wyk 1973:851).

2.6.2 Spirit-type AICs in South Africa

AIC scholars generally agree that the historical roots of the Spirit-type AICs (which include Zionist-, Pentecostal- and Apostolic-type churches) in South Africa can be traced back to the founding of the Christian Catholic Apostolic Church in Zion (herein referred to as the CCAC) with its own Zion City in Illinois, Chicago. The CCAC was founded in 1896 by John Alexander Dowie who was known as its greatest healer and its “First Apostle and General Overseer” (Sundkler 1961:48; Turner 1968:507). The CCAC was characterised by the use of faith-healing,⁹ adult baptism by threefold immersion in water, the belief that the Son of God's second coming is imminent, as well as prohibitions, among other things, on the use of medical doctors, drugs, pork, alcohol and tobacco (Hanekom 1975:38; Kiernan 1990:9; Lukhaimane 1980:14; M'Passou 1994:17, 21–22; Sundkler 1961:48, 55).

⁹ The concept of faith-healing implies that the religious conceptions of the healer and the patient are the same (Steyn 1996:5).

In South Africa, Pieter Louis Le Roux, a Dutch Reformed Church missionary, and his wife were both fascinated by faith-healing practices. They were sent as missionaries to Wakkerstroom in 1893. Seven years later Le Roux's congregation had grown to more than 2 000 mostly Zulu-speaking members. During this time Le Roux befriended and was greatly influenced by Johannes Buchler, a fellow supporter of faith-healing practices. Buchler, an ex-pastor of the Congregational Church in Johannesburg and later admirer of Dowie's CCAC, founded his own church in the old Transvaal province, currently known as Gauteng in 1895. The members of his church were mostly coloured (people of mixed race) South Africans who loved to sing hymns out of the Moravian Dutch hymn-book, *Zion Liedere*. As a result of their appreciation for this hymn-book they named their new church the *Zion Church*. In time, and as a result of Dowie's influence, this *Zion Church* began to emphasise the central role of faith-healing, adult baptism by threefold immersion and taboos against the use of alcohol, drugs and tobacco (M'Passou 1994:19–22, 28; Oosthuizen 1987:19).

During their first years of friendship Buchler send Le Roux various publications on faith-healing, among others Dowie's *Leaves of Healing*. These readings encouraged Le Roux, who had already become frustrated with the Dutch Reformed Church's protest against the use of faith-healing in the church, to resign and together with 400 fellow black South African workers and converts joined the CCAC as an affiliation. By 1905 Le Roux's CCAC congregation encompassed 5 000 black South African members (Anderson 2000:57; M'Passou 1994:21, 24; Oosthuizen 1987:13, 20). Hammond-Tooke (1989:136) explained that the central role of faith-healing in the church "found resonance in African thought" and seemed to be the reason for the significant growth in members.

Buchler, after he had become inspired reading Dowie's monthly publication, *Leaves of Healing*, started practising faith-healing. He quickly became a very successful preacher and faith-healer and travelled in this capacity all over South Africa. Among the people Buchler had healed by means of prayer was Edgar Mahon, his brother-in-law and a captain in the Salvation Army, who suffered from tuberculosis. Mahon's own miraculous healing led to him to become one of southern Africa's earliest prominent Zionist-type preachers and faith-healers. He was especially known in the Harrismith area and later in Lesotho, which was his land of origin. At first Mahon was not

associated with any particular church, but referred to himself as a Christian faith-healer and missionary. Only in 1905 did he and his fellow black South African co-workers and members build a church building, which became associated with the CCAC, although it was still mostly known as Mahon's Mission and the general public referred to his members and co-workers as Mahon's Christians. Buchler, on the other hand, over time developed a dislike for the CCAC. His influence, however, on both Le Roux and Mahon was of significant importance to the development of the Spirit-type AICs in South Africa (M'Passou 1994:19–22, 28; Oosthuizen 1987:42–43, 45–46).

In 1904 Daniel Bryant, the appointed American overseer of the CCAC in South Africa, arrived in the country. His message was rejected by the mission churches, but successfully accepted by the black South Africans whom he had contacted through Le Roux and Mahon. At Le Roux's Wakkerstroom congregation Bryant baptised 141 converts, among others Le Roux and his wife. At Mahon's congregation in Harrismith he baptised a further 60 black South African converts. Mahon and a few fellow African workers accompanied him to Lesotho where they also successfully spread the word of Zion (Anderson 2000:57; M'Passou 1994:23–25, 32-33; Oosthuizen 1987:25). According to M'Passou (1994:33), Mahon did, however, clash with some of the black African members of the already established churches in Lesotho, such as the Roman Catholic Church, the Anglican Church and the Paris Evangelicals, mostly as a result of his acceptance of polygamy. To be precise Mahon preached that the Lord welcomed everyone into His Kingdom including a man with all his wives. In spite of these negative repercussions, this particular conviction of Mahon on the whole increased the number of black African people who wanted to be baptised in his church.

These type of churches proliferated in Lesotho following the introduction of African Zionism by Mahon and his fellow workers. M'Passou (1994:35) noted during his research there that many Christians were members of Zionist-type churches in Lesotho. Mahon met Edward Motaung in Lesotho, a man known to have played a noteworthy role in the development of Spirit-type AICs among the southern Sotho- and Tswana-speaking communities. Motaung might have been one of Mahon's first CCAC converts. Both men, who quickly became close friends, had healing gifts and were charismatic religious leaders (M'Passou 1994:33). However, in 1910 Motaung discovered and in 1912 joined the Apostolic Faith Mission (AFM) of Le Roux and Ellias

Mahlangu (see next paragraph) in Johannesburg. In 1917 he established his own *Zion City* in Lesotho and named his church the Zion Apostolic Faith Mission (herein referred to as the ZAFM) (Anderson 2000:64, 66; Lukhaimane 1980:20; M'Passou 1994:33–35).

In 1908 Le Roux became involved with missionaries from the American Pentecostal church also referred to as the AFM of which a representative from the USA, John G Lake, visited South Africa (Morton 2012:100; M'Passou 1994:25). According to Anderson (2000:57, 58), Lake had a strong connection with the African-American Pentecostal Church in Azusa street, Los Angeles led by African-American William J Seymour. This interracial church spread the message of Pentecost to 50 nations within two years and had a significant influence on the development of AICs in South Africa. This church is also characterised by the central role of faith-healing. It differed, however, from the already existing Zionist-type churches in South Africa in terms of its baptism ritual. Members of this Pentecostal church referred to baptism as “Pentecost” in the Holy Spirit, which is executed by means of a single and not threefold immersion, and of which the initial evidence is the speaking in tongues. According to Anderson (2000:63) the AFM in South Africa as well as most other Zionist- and Apostolic-type AICs have retained Dowie’s original threefold immersion during baptism, but the phenomena of speaking in tongues was introduced by the African-American Pentecostal Church.

Le Roux received his Pentecost in 1908. In time some of his CCAC congregation followed in his footsteps, but many preferred to stay on or to initiate their own churches. Most probably some of the reasons for breakaways given in section 2.5 played a role in the initiation of these churches as well (see Lukhaimane 1980:15). Most of these successions created their own hybrid titles of choice, usually including different combinations of the words Zion, Pentecostal and Apostolic. Some of these new churches were characterised by Zionist- as well as Pentecostal-type traits, which according to Anderson (2000:57) made it difficult to differentiate between the early histories of the Pentecostal and Zionist-type churches. Over time, however, each developed their own dynamic traditions (Anderson 2000:63; M'Passou 1994:25–26; Oosthuizen 1987:21; Sundkler 1961:48).

Le Roux became the president of the AFM in South Africa following Lake's return to the USA in 1915 and retained this position until his death in 1943. During the latter era of his life he worked mainly among white members and had left the care of his black congregation in the hands of his black associates. During his life Le Roux influenced and inspired various outstanding leaders of the Spirit-type AICs in South Africa. According to Sundkler (1961:48, 49) Le Roux's converts and those he had influenced became the source for the entire series of the Zionist-, Pentecostal- and Apostolic-type AICs that emerged in South Africa. He identified five main offshoots, which seceded for different reasons from Le Roux and his associates between 1917 and 1920, and to which in one way or another most Zionist-, Pentecostal- and Apostolic-type AICs can trace back their roots. These offshoots were Paulo Mbilitsa's Christian Apostolic Church in Zion, Daniel Nkonyane's Christian Catholic Apostolic Holy Spirit Church in Zion (CCAHS in Zion), JG Phillips' Holy Catholic Apostolic Church in Zion, Elias Mahlangu's Zion Apostolic Church (ZAC) and Fred Luthuli's Seventh-Day Adventist church characterised by its strong Zionist-type tendencies (Anderson 2000:57; Hanekom 1975:39; M'Passou 1994:26).

According to Martin (1964:111, as quoted in Hanekom 1975:39), when black African leaders started to separate from Le Roux's AFM as well as from the churches of his associates, secessions became "...more and more 'African' among the Africans, in the sense that elements from African traditional religions were introduced and blended with Christian teachings" (see Coplan 2008:101). Hammond-Tooke (1989:136) noted that in contrast to the Ethiopian-type AICs the main objective of the Spirit-type AICs increasingly developed into the immediate deliverance, not only of physical afflictions, but from all kinds of misfortunate happenings. Herselman (2000:3) explained that misfortune in this context could indicate any kind of trouble someone is experiencing; for example, "being involved in an accident, losing crops or having one's livestock ravaged by disease" (see Comaroff 1980:645).

Elias Mahlangu, whose church was included by Sundkler (1961:48, 49) as one of the five offshoots from which most Spirit-type AICs originated, had a considerable influence on Engenas Lekganyane's growth towards the initiation of the ZCC. Mahlangu, who was baptised by Le Roux in the CCAC, was an Ndebele-speaker and fluent in many other black South African languages. Le Roux, however, from all the

African indigenous languages was only fluent in Zulu. Consequently, Mahlangu was not only Le Roux's companion, but also acted as his interpreter (M'Passou 1994:29).

When Le Roux moved to the AFM in 1908, most of the Zulu-speaking members followed Daniel Nkonyane, who initiated the CCAHS Church in Zion. In time, with the help of Mahon, Nkonyane moved his church to Charlestown near Volksrust situated in what today is known as KwaZulu-Natal from where they spread across the whole of southern Africa. Several of the other AFM members, mostly Swazi- and Ndebele-speakers, followed Elias Mahlangu to Johannesburg where he later initiated the ZAC. According to Anderson (2000:62) and Lukhaimane (1980:17) Engenas (Ignatius) Lekganyane, founder of the ZCC, seemed to have been briefly acquainted with Le Roux, but later became a member of Mahlangu's ZAC. It seems that Edward Motaung's ZAFM seceded from Mahlangu's church in 1917. Three years later Engenas Lekganyane joined Motaung who ordained him as a bishop in his ZAFM. Engenas Lekganyane seceded from Motaung's ZAFM to initiate the ZCC. The establishment of the ZCC emerged from a range of secessions as a result of various disputes such as leadership struggles and differences concerning particular religious conceptions (Anderson 2000:61–62, 69; Lukhaimane 1980:17–20; M'Passou 1994:26, 27, 29, 34; Oosthuizen 1987:22; Sundkler 1961:48–49).

Comaroff (1985:238) explains the historical importance the CCAC and its Zion City in Illinois, Chicago plays in any study of the ZCC. She (1985: 238) concluded that of all AICs:

... [t]he Zion Christian Church represents a particular transformation of the Zionist order; one which resolves the inherent tension between charisma and routine by stressing the normative to a greater extent than any other southern African group. In so doing, it comes closest to Dowie's original organisation. (see Nanda & Warmes 2014:285)

2.7 A historical synopsis of the Zion Christian Church

2.7.1 Early origins

Again, it is difficult to reconstruct historical events because, as Anderson (2000:68) notes “sources are extremely sketchy and sometimes appear contradictory”. However, the origin of the ZCC is traced back to Ignatius Barnabas Lekganyane, also popularly known as Engenas. He was born between 1880 and 1885 in Thabakgone, which is situated close to Polokwane in Limpopo. Engenas Lekganyane was, according to Van Wyk (1973:852), a Mopedi and the son of Barnabas Matseleng Lekganyane and Sefora, the daughter of Marobathota Raphela, a famous medicine-man of chief Mamabolo (see Lukhaimane 1980:9). As mentioned earlier, it seemed that Engenas’ first affiliation with organised Christianity was with the Free Church of Scotland where he was baptised in the early 1900s in Johannesburg, and soon became one of their evangelists working in the Mamabolo area close to Thabakgone (Kruger 1971:9; Van Wyk 1973:851).

Information concerning the following events is somewhat sketchy. Lukhaimane (1980:13–14) related that Engenas had suffered from an eye disorder for many years and that he had received a vision in which he was instructed to go to Johannesburg and find a church that baptised by means of threefold immersion, which would cure his eyesight (see Verwey 1995:130). The ZCC tradition still recognises this as Engenas’ first calling and it is also one of the reasons why Engenas was nicknamed *Raditoro*, which translates as the “dreamer”.

The *ZCC Messenger*, of which the current Bishop Ramarumo Lekganyane was the editor-in-chief, described this revelation as Engenas’ first step to establishing the ZCC and portrayed it as follows (Tshotlhang 2002:68):

Imagine, we as Zionists, how sacred we regard the prophecy. The history of this church tells us that the prophetess Rosinah Rabothata was instructed to tell the old-man Engenas to go and search for the church that will baptise with water and that will have the Holy Ghost. He was told to know that the Lord has raised His victory flag in Zion Ga-Mamabolo.

Of significance in this explanation of Engenas' vision is that the prophet playing a noteworthy role in the initiation of the ZCC was a female.

Anderson (1999:287) wrote that sometime during 1910 while Engenas was praying on a mountain near his home he experienced a revelation by means of a whirlwind that told him that he would be followed by a multitude of people. According to Lukhaimane (1980:23–24) Engenas experienced this specific revelation after his secession from Mahlangu's ZAC, which according to Anderson (1992:42) transpired in 1920. It is therefore not possible to indicate the exact date of this revelation. Lukhaimane (1980:23–24) gave a more detailed description of this event. He explained that God, by means of a whirlwind, blew Engenas' hat off after which Engenas asked God to do it again. The second time the hat fell upside down and was filled with leaves. This was an indication to Engenas that he would be followed by a multitude of people and the description related that the only thing Engenas was able to utter was "amen". This revelation, which is well-known to ZCC members, gave rise to the belief that when the wind is blowing during a gathering at Zion City Moria it is an indication of God's presence.

1910 is the generally accepted date of Engenas' first significant vision that prompted him to establish his own church. It is officially recognised as the date of establishment of the ZCC. ZCC members who attended services at the Marabastad congregation during 2011 wore badges proclaiming the 100th anniversary of the ZCC (Personal experiences 2011).

The abovementioned events inspired Engenas to move to Johannesburg where he befriended Pieter Le Roux, by then already a member of the AFM. According to Van Wyk (1973: 851) it seemed that he acquired some of his preaching skills from Le Roux and might have been baptised by him in 1912, but was baptised again in 1915 by Elias Mahlangu (see Anderson 1999:288). According to Lukhaimane (1980:16) Engenas' baptismal card indicated that Elias Mahlangu's baptism resulted in the healing of his eye disorder (Anderson 1992:41; Anderson 1999:287–288; Hanekom 1975:40; Kruger 1971:9–10; Lukhaimane 1980:9, 14, 16–17).

The exact date of Engenas' move back to Limpopo has not been recorded in the available references. He first resided with the AFM of Petros Maake, which was situated on a koppie known as Botshabelo close to the Maake-location. Following a dispute about a possible change of the name of the church, he joined Reverend Timothy Mamabolo's AFM in Thabakgone, which had a strong affiliation with Mahlangu's congregation. Lukhaimane (1980:18) stated that Engenas was a very powerful preacher and this resulted in the remarkable growth of the church. Still, Engenas was not yet ordained as a minister and could therefore not baptise his converts. Concurrent with Mamabolo's increasing ill-health and aging, assistance on this level became a necessity. Mahlangu therefore ordained Engenas as a minister in 1916. After Mamabolo's death in 1918 and Engenas' marriage to his first wife Salphina Rabodiba, who is also the grandmother of the present day Bishop (according to Lukhaimane (1980:18) marriage seemed to be a prerequisite for further promotion), he became the leader of Mahlangu's new ZAC (initiated in 1917) in the current Limpopo province (Anderson 2000:69; Hanekom 1975:39–40; Lukhaimane 1980:11, 18; Van Wyk 1973:853).

The relationship between Engenas and Mahlangu deteriorated soon afterwards for two apparent reasons. First, there were differences regarding certain practices. Mahlangu wanted to incorporate the customs of wearing white robes, growing of beards and removal of shoes before services. Engenas perceived these as unnecessary practices. These customs are present in many Zionist- and Apostolic-type AICs, but have never been allowed in the ZCC (Anderson 1999:288). Secondly, and probably of greater importance, Engenas was becoming a very successful and popular prophetic leader. According to Lukhaimane (1980:18–20), Engenas had an ability to foretell important events in people's lives and, as a result, members preferred him as a faith-healer. He predicted Britain's victory over Germany in 1917 and when this came true in 1918 his followers' belief that he was sent from God was further cemented. This particular prediction of Engenas is widely known by current members of the ZCC. *Moruti* Mampuru (Personal communication 2003), for example, told me that Engenas was able to see everything and used this same prediction as an example. It seems likely that the primary reason for Engenas' break with Mahlangu in 1920 was a power struggle for leadership (Anderson 1992:42).

That same year Engenas visited Edward Motaung in Lesotho who seemingly knew of his arrival beforehand. Sympathetic towards Engenas' situation with Mahlangu and in admiration of his prophetic leadership qualities Motaung ordained him as a ZAFM Bishop of the northern provinces. According to Daneel (1971:297), in time differences emerged. The ZAFM had grown to proportions beyond Motaung's direct control, particularly in the northern provinces and it was therefore in dire need of reorganisation. There were complaints that Engenas did not pay enough allegiance to Motaung, especially in his attempt to reorganise the church in this area. Engenas had also breached the ZAFM constitution by marrying a second wife. At a later stage the ZAFM adapted a more lenient approach towards polygamy, but at that point in time it was perceived as a serious offence (Anderson 1992:42; Anderson 2000:69–70; Daneel 1971:297–298; Hanekom 1975:40; Kruger 1971:12; Lukhaimane 1980:20–23; Verwey 1995:130–131).

The resultant schism again resulted from a struggle for leadership and, this time, for control of a church that was growing rapidly in membership. In 1924 Engenas ended his membership of the ZAFM and initiated the ZCC. He remained a great admirer of Motaung and in memory of his mentor named his second son Edward (Anderson 1992:42; Anderson 2000:69, 70; Daneel 1971:298; Kruger 1971:12; Lukhaimane 1980:20–23).

2.7.2 Bishop Engenas Lekganyane (±1880–1948)



Figure 2: Founder of the ZCC, Bishop Engenas (Ignatius) Barnabas Lekganyane (Lukhaimane 1980:154)

Engenas Lekganyane formally initiated the ZCC at the end of 1924 or beginning of 1925 near his place of birth in the Thabakgone area of Limpopo province. Lukhaimane (1980:24–25) mentioned that Engenas retained the word “Zion” in the church’s name because of its connotation with the original church of the Old Testament. He did not want to include phrases such as Bantu or South Africa because he believed that ultimately his church would be multinational. He applied for government recognition in 1925 and claimed 926 adherents in 15 different congregations in what is known now as the provinces of Limpopo and Mpumalanga and the Germiston and Johannesburg areas, as well as in Bikita in Zimbabwe. His application was rejected (Hanekom 1975:40).

According to Anderson (1999:289) the reason for government rejecting the application was that, at that time, the authorities tended to perceive independent African churches as liberation movements, especially after followers of Enoch Mgijima clashed with the police in 1921 in what became known as the Bulhoek massacre. Police killed 163 people during this clash. Lukhaimane (1980:28), however, noted that according to his sources government had rejected the application due to lack of acceptable evidence of the existence and membership of the ZCC. This could possibly have been due to Motaung’s inclusion of Engenas’ church as an affiliate in his application for the ZAFM.

Engenas' influence spread to Zimbabwe after he baptised Samuel Mutendi in 1923. Mutendi was a fellow Zionist leader and Zimbabwean citizen. He followed Engenas following his secession from Motaung and on his return to Zimbabwe, established a ZCC there. However, there is no affiliation between the South African and Zimbabwean ZCC today. While Mutendi paid allegiance to Engenas as his friend and senior colleague he had no such relationship with Engenas' son and did not recognise his authority over himself or his Zimbabwean church (Anderson (1999:292). Consequently these two churches developed along separate lines (Daneel 2007:148; 1971:298–299).

Engenas was never able to find or build a suitable church building. He continued to preach under a *motšhetšhe* tree (Common Cabbage Tree¹⁰) and told his members that no building would in any case be big enough to accommodate the multitudes who were going to join the ZCC in the near future. Many ZCC congregations have up to this day no permanent church buildings (Lukhaimane 1980:29–30). Even the Marabastad congregation, which had a membership count of more than 1 500, used temporary structures during the periods I attended services.

In 1928 Engenas introduced a badge that members had to use for identification purposes (this is discussed further in sections 2.7.3 and 4.3). It was also perceived as an emblem of faithfulness to the church symbolising solidarity among its members and, when worn, serving as protection against evil assaults – initially specifically in urban areas (Verwey 1995:131–132).

In 1930 Engenas discontinued the practice of laying on hands because *baruti* “started to claim power the same way as Engenas did” (Lukhaimane 1980:65). It seemed that this was Engenas' way to ensure that his church did not become prone to fission and secession, the inherent tendency during those times (Comaroff 1985:238). Anderson (1999:290) also speculated that Engenas might have wanted to centralise his control to ensure that members relied solely on him as a source of healing. However, being the only person with healing abilities became problematic

¹⁰ The genus of the Common Cabbage Tree is *Cussonia* and the family is *spicata* (South African National Biodiversity Institute 2004:1).

as ZCC membership increased dramatically and he started blessing objects, such as pieces of paper, cloth, cord, walking sticks, needles and water, to be used by his *baruti* for healing and protective purposes (Lukhaimane 1980:62). Most of the original sanctified instruments of healing were still being used when I attended services (Personal experiences 2012).

During the 1930s trouble erupted between Engenas and the local chief Mamabolo. Sources indicate different reasons for the disagreement. According to Lukhaimane (1980:30–32) people treated Engenas as if he was the chief. For example, women worked Engenas' fields as a form of service and people showered him with gifts in the form of cattle, sheep and goats. Most preferred him to settle disputes as opposed to the tribal courts. It appeared to Mamabolo that Engenas aspired to become chief. Then Engenas proclaimed Wednesdays as special prayer days for women. Even today special services for women are conducted on Wednesdays (this is explored further in 5.2.2). Sometime after Engenas' proclamation the women were ordered to come and work at the chief's kraal, this time specifically on a Wednesday; however, many chose to attend the female prayers. Engenas was held accountable for those members that disregarded the chief's orders. According to Lukhaimane (1980:31–32) the latter move and Engenas' alleged aspiration to become chief led the tribal court to officially request him to leave the Thabakgone area.

Anderson's (1999:289) explanation differs slightly. He said that Engenas' dispute with Chief Mamabolo originated from Mamabolo's mistreatment of a pregnant ZCC member that resulted in a miscarriage. Hanekom (1975:40–41) also referred to this incident noting that the pregnant female member refused to work the chief's fields and consequently the *lekgotla* ordered her to be beaten. Engenas was responsible for the chief being charged with the death of this woman's unborn baby, which resulted in the court condemning the chief to a fine of R200.00. Although not Anderson or Hanekom mentioned this, maybe the pregnant woman refused to work the chief's field because it was ordered on a Wednesday and she too preferred to attend the prayer meeting.

Engenas bought a farm called Warmberg at Mphahlele in Limpopo in 1938, which became known as the ZCC's first headquarters (Müller 2011:13). He also

established a farm school on this property. In 1942 church members bought him two farms at Boyne, 50 kilometres east of today's Polokwane on the Tzaneen road. He then moved the ZCC's headquarters to this much bigger property and it became the ZCC's new special place of healing, which was then known as Zion City Moria (Anderson 1999:289; Hanekom 1975:41).

According to Lukhaimane (1980:33) Engenas was now a true *Kgoši ya Masione* or a King of the Zionists – a comparable position to that of a traditional chieftainship. Although ZCC members could not be ethnically defined they were members of the same Zion community and were often referred to as the “people of Lekganyane” (Lukhaimane 1980:163). Verwey (1995:132) indicated that the ZCC had now become a “supra-ethnic tribe of Zionists”. Accordingly Hanekom (1975:62) described the ZCC as a “church-tribe” with its leader assuming the role of a paramount chief who acted as mediator between the supernatural and his people and who had to find solutions to his people's spiritual and social, political and material dilemmas.

Engenas had become an outstanding charismatic leader known to be an exceptional healer and miracle worker. According to Lukhaimane (1980:62–63), healing the sick was the most important reason for large numbers of people joining the ZCC. Apparently, the majority of Engenas' followers became members as a result of sickness or other misfortunate happenings. All kinds of miraculous events, such as rainmaking, the blessing of harvests, healing of barren women and obtaining employment, were ascribed to him. As Anderson (1999:291) pointed out, “ZCC members believed that God had given all his powers to his chosen prophet Engenas”.

The ZCC comprised about 2 000 members in 1935. In 1942, when the ZCC was at last officially recognised by the government, its membership count had grown to 27 487 members. These members were divided between 55 congregations situated in Gauteng, the Northern Cape, Zimbabwe and Botswana (Anderson 1999:290). According to Schlosser (1958:188, as quoted in Hanekom 1975:41) the following year government sources estimated that its membership had grown to between 40 000 and 50 000 people. Lukhaimane (1980:63) suggested that this exponential

growth of the ZCC could be attributed not only to Engenas' exceptional healing abilities, but also to the shortage of clinics and hospitals in rural areas.

Engenas died on 1 June 1948 ending his ministry of healing and miracles. The leadership position was hereditary as the ZCC had taken the form of a church-tribe. In this traditional environment the ideal was that only the most senior son of the first wife would be accepted as successor. According to Lukhaimane (1980:11) Engenas had three wives, and consequently only his first wife's children were regarded as possible future leaders. It was believed that Engenas' powers would be inherited by his successors.

His oldest surviving son Barnabas died seven months after his father's death before the one-year traditional mourning period for Engenas was complete (Hanekom 1975:41; Van Wyk 1973:857). According to Lukhaimane (1980:94–95) Barnabas was dearly loved by his father's followers and his passing was a great shock to the church. Edward, now the oldest son, and then Joseph were in line for succession. However, Engenas had not publically indicated which one of the two he would have preferred to take over leadership and a leadership struggle ensued. Edward, who had been working in Durban, moved to Johannesburg after the death of his father. Joseph had remained at his father's Zion City (Anderson 1999:295; Anderson 2000:71; Hanekom 1975:41, 62–63; Lukhaimane 1980:33; Van Wyk 1973:857–858; Verwey 1995:131).

According to Anderson (1999:291) Joseph, who had gathered his own followers, took over the existing Zion City as his headquarters after the traditional year of mourning. In 1965, to honour his father as founder, he added his name to the name of the church, namely the St Engenas ZCC¹¹ (Lukhaimane 1980:95; Verwey 1995:133–134). Hanekom (1975:41) indicated that Joseph's members also referred to themselves as the people of healing or *ba kalafo* and retained the original badge, but added the well-known dove emblem. According to Van Wyk (1973:860) their use of the dove emblem gave rise to this church also being known as the ZCC *na leebana* or the ZCC of the dove. Anderson (2000:71) noted that Joseph's St

¹¹ In 2012 President Zuma and Mr Julius Malema attended the Easter festival at the St Engenas ZCC (SABC News, 8 April, 2012).

Engenas ZCC and Edward's ZCC are very similar in practices and beliefs. The Marabastad congregation where I conducted my research is an affiliation of Edward's ZCC and therefore this study focuses specifically on his dispensation of the ZCC.

2.7.3 Bishop Edward Lekganyane (1926–1967)



Figure 3: Bishop Edward Lekganyane (Hanekom 1975)

Following the official mourning period for Engenas, many of his followers asked Edward to return to the Boyne area and establish his own ZCC with a new Zion City Moria. This was located about 1.6 kilometres northeast of his father's original Zion City (Hanekom 1975:42). According to Ramogale and Galane (1997:2) it was during this time that the *mokhukhu* (this is discussed in more depth in section 4.2) came into existence. The *mokhukhu* is a dance formation for men peculiar to the ZCC. All participants of this well-known male formation are dressed in khaki uniforms, caps and white boots. In Pedi *mokhukhu* means shack.

According to Ramogale and Galane (1997:2) when Edward's followers were trying to convince him to become their leader, some of them burned the shacks of a few of Joseph's supporters while singing a Zulu song, *u yasha umkhukhu* (a shack is burning). This song originated among migrant workers based in Gauteng who were supporters of Edward. The dancing formation they initiated eventually became popular among ZCC members and in time developed into the *mokhukhu*. Lukhaimane (1980:101–102) referred to this same event, but did not mention that fire was used to destroy some of the shelters of Joseph's followers. He (1980:101) did indicate that this ZCC formation "was formed to stamp out any opposition". Of interest here is that Anderson (2000:173) proposed that this dance formation became known as the *mokhukhu* because early church members lived in shacks at Edward's Zion City Moria.

Members of Edward's ZCC can be identified by the five-pointed Star of David badge upon which the letters ZCC are engraved. The badge is pinned onto a circular black piece of cloth and again onto a rectangular dark-green piece of cloth. Hanekom (1975:42) mentioned that between these two pieces of cloth there is another smaller blue piece of cloth which is not visible to the eye. This whole badge is fixed to members' clothing on the left side of the chest.

The ZCC continued to grow under Edward's leadership. According to Schlosser (1958:197, as quoted in Hanekom 1975:42), there were at least 80 000 registered members in 1954. Edward continued the tradition of polygamy and married his first wife in 1950. Out of this union, three children – two girls and one boy – were born. Hanekom (1975:42–43) noted that although it is not possible to be sure how many wives Edward had, *Drum* magazine (1971:10) published an article in 1971 indicating he had at least 23 wives and disclosed their names. Verwey (1995:134) mentions the possibility of the same number of wives and indicates that some apparently resided in Soweto and Durban.

In 1963 Edward enrolled in the three-year course for evangelists offered at the Dutch Reformed Church's Stofberg Theological College located in close proximity to his headquarters. Although he attended classes in his chauffeur-driven black limousine and wore his big diamond ring, he bonded quite easily with other students. He became good friends with a few whom he invited to visit him at his residence in Moria. He apparently told them that he was rather lonely, because in his private life he was generally limited to interaction only with his closest advisors (Anderson 2000:71; Hanekom 1975:43). According to Anderson (1999:291) the major theological difference between Edward and his teachers was related to baptism, which he believed had to be administered by means of threefold immersion in running water. Hanekom (1975:44) mentioned another deviation in that Edward regarded baptism as a sacrament for adults only.

After finishing his evangelism course, Edward tried to place more emphasis on the teachings of the Bible. Some members criticised this approach because they believed it was at the expense of the emphasis on the workings of the Holy Spirit and

consequently rendered the church less powerful. In general it does appear that Edward relied less on his prophetic status than his father did. Anderson (2000:71) argued that this quality resulted in the ZCC losing most of its Pentecostal characteristics. As a more pragmatic, administrative leader Edward established reputable relations with the apartheid regime by inviting the government in 1965 to the Easter conference at Moria. The then Minister of Bantu Affairs attended the ceremony during which, on an apolitical note, Edward thanked the government for its guidance and indicated strongly that the ZCC was against all who tried to undermine or break the law (Anderson 1999:292; Anderson 2000:71; Hanekom 1975:44).

Edward died of a sudden heart attack in October 1967. The newspaper *World* (in Anderson 2000:72) described him as “one of the most powerful leaders who have dominated the religious scene in this generation”. Many significant leaders paid tribute to Edward, among others the then Minister of Bantu Affairs, Dr De Wet Nel. Before his death Edward had informed his children that he chose his most senior son Barnabas, the current Bishop of the ZCC, to succeed him and changed his name to Ramarumo (see Mathebula 2002:65). Ramarumo is a name that was often used by Pedi-speakers to refer to General Jan Smuts and can be translated as “father of spears” (Hanekom 1975:45). Several of my research participants, for example *Moruti* Moya (Personal communication 1995) and *Moruti* Mampuru (Personal communication 2002) gave me this same translation of the current Bishop’s name and added that his father had given him this name because he knew that his son would face difficult times. Ramarumo was only 13 years old at the time of his father’s death and therefore the ZCC was governed by superintendents until he came of age.

2.7.4 Bishop Barnabas Ramarumo Lekganyane (1954–)

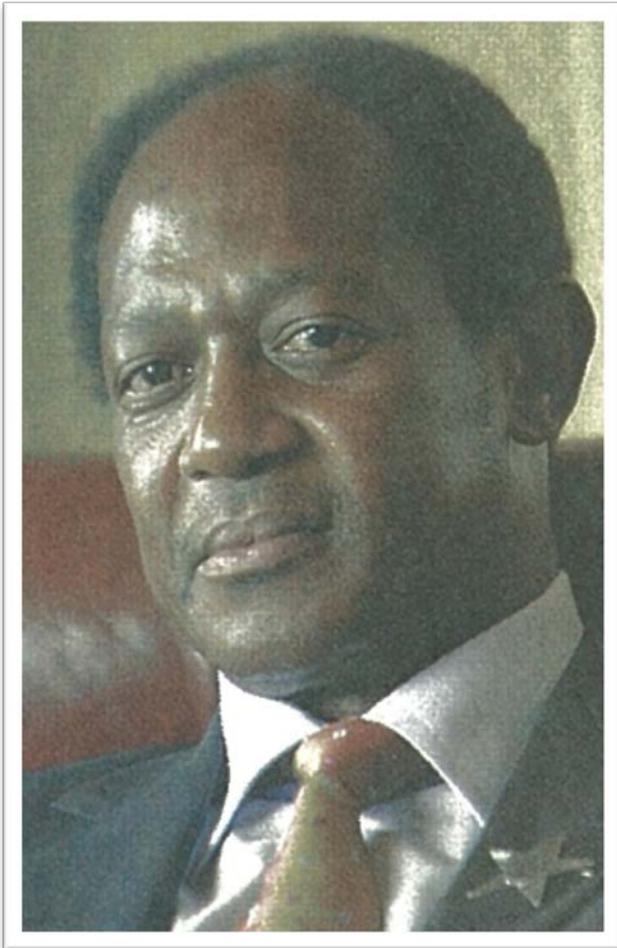


Figure 4: Bishop Barnabas Ramarumo Lekganyane (Beeld, Tuesday, 22 March 2005, p.15)

At the ZCC's 1968 Easter conference the general council confirmed Barnabas Ramarumo as the new bishop of the church, although he only became the official leader after his 21st birthday in 1975.

A superintendent, Mr L Mohale, was appointed to govern the church. He apparently tried to establish himself more permanently as the church's leader by, among other actions, dismissing many of the general council members and replacing them with acquaintances. Consequently, the general council dismissed him and asked him to leave Moria during the September conference in 1969.

Another superintendent, Mr M Lestsoalo efficiently governed the church until 1975, when Ramarumo officially became its leader (Anderson 1999:293; Hanekom 1975:46–47). I was not able to find a considerable number of sources concerning the personal life of Barnabas Ramarumo. However, Van der Merwe's (1985:22–23) investigation indicated that Barnabas Ramarumo's faith-healing ability was still the ZCC's biggest drawcard. His role as a successful religious leader is also evident from the fact that according to the 2001 census report (Burger 2007:1) the ZCC had more than 4 million members and, according to the Daily Sun (Khumalo 2009: 3), membership had increased to between 10 and 15 million people by 2009. This is a clear indication of a constant process of proliferation.

Jackson (2005:15) who attended the 2005 Easter conference as a journalist reported that members arrived from all over South Africa, as well as from Botswana, Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe. During that same conference 2 237 people were baptised and, in doing so, became new members of the ZCC. He also pointed out that according to Zion City Moria's visitor statistics 5 367 150 people had visited Zion City Moria during 2004. In an even more recent publication, Nanda and Warms (2014:285), give a figure of 9.5 million ZCC members attending the Easter and September festivals at Zion City Moria. These numbers can be seen as an indication of Barnabas Ramarumo's popularity as Bishop.

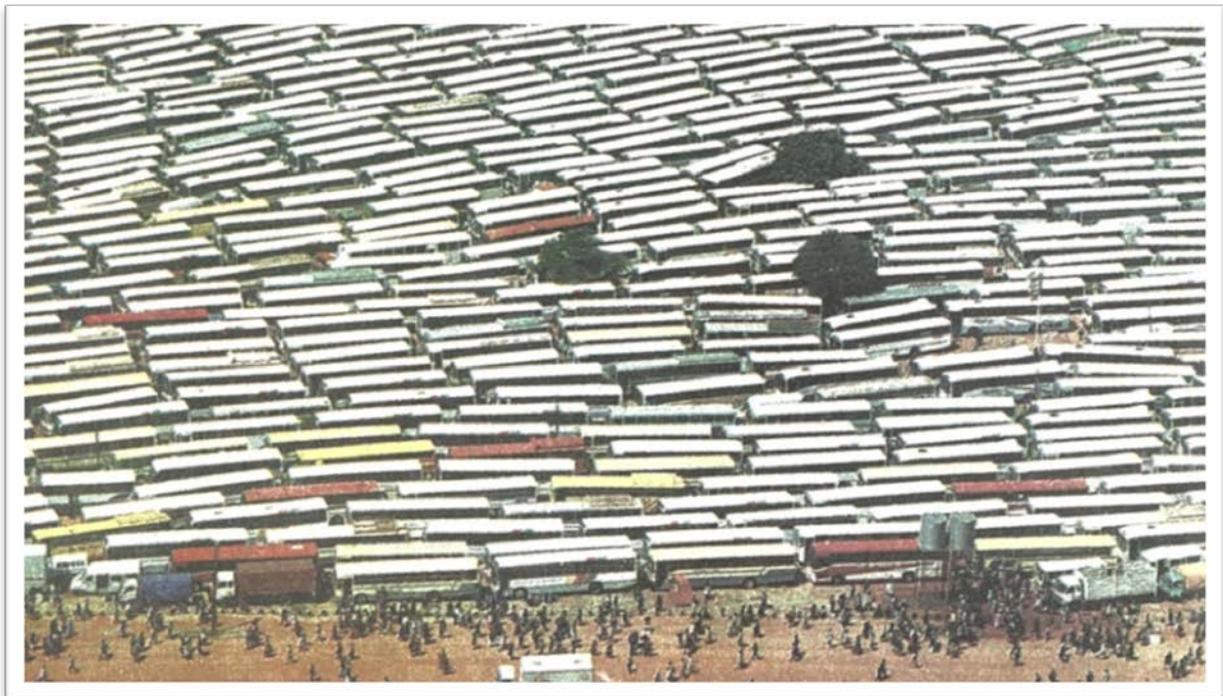


Figure 5: Buses parked at Zion City Moria during the Easter festival in 2009 (Pretoria News, Thursday 26 June 2003, p.11)

ZCC members are advised to visit Zion City Moria at least once a year preferably during the Easter or the September festivals and in doing so will receive the Bishop's direct blessings. According to Anderson (1999:297) members physically try to be as close as possible to the Bishop with the hope that some of his sacred power or, as I refer to it in this study, his life-force (this is more fully explained in section 3.3.1) will rub off on them (see Hanekom 1975:74; Verwey 1995:133). During my time in the field it became evident that a visit to the holy Zion City Moria is in general perceived as a

sacred healing experience. Irrespective of members' financial circumstances they will try their utmost to attend at least one of the festivals at Moria or otherwise visit Moria once during any other time of the year. The importance of a visit to Zion City Moria, which is believed to enhance a person's life-force and therefore the process of healing, is magnified when members are able to see the Bishop and his brass band,¹² who are always present during the important festivals (Personal communication *Moruti Moya* 1995; *Moruti Mampuru* 2003; *Moruti Mariri* 2011).

Bishop Barnabas Ramarumo, like his father, emphasises peaceful cooperation with the ruling regime. The then Minister of Bantu Affairs Dr Piet Koornhof was invited to attend a festival at Moria in 1980. In 1985 the South African State President PW Botha was invited and attended the much celebrated 75th anniversary of the ZCC during the Easter conference. Lastly, three of South Africa's most significant political leaders, Nelson Mandela, FW De Klerk and Mangosuthu Buthelezi were invited and attended the 1992 Easter festival where they addressed the multitude of members. Although Mandela especially received great ovations from the crowd, Bishop Barnabas Ramarumo was treated as the most significant leader of all. Anderson (1999:294), who was present at this momentous occasion, wrote that all three bishops of the ZCC consistently preached racial harmony and reconciliation, which again was emphasised by the Bishop Barnabas Ramarumo Lekganyane at this occasion. The Bishop pointed out that the ZCC was ultimately a church of peace therefore its members would support those leaders that champion peace and reconciliation (Anderson 1999:293–294; Anderson 2007a:4). The connection between peace and reconciliation and healing in the African context is expanded on in section 3.3.

2.8 Conclusion

AICs came into existence during a time when their members were caught up in a process of sociocultural transformation that was the result of persistent and constant contact between members of the African and western sociocultural systems. In this particular situation, members of traditional African societies converted to a religion characterised by western norms and values and this process of transformation every so often gave rise to syncretistic processes or, in short, the continuation and

¹² According to Coplan (2008:103) German and British missionaries introduced brass bands into the religious lives of people in Africa during the late 19th century.

reinterpretation of certain traditional African elements within new Christian churches. Syncretism in this particular situation can be seen as the result of spontaneous attempts by African Christians to contextualise western Christianity in their own sociocultural environment. This gave rise to the establishment of a unique African Christianity.

Scholars of these new African churches had to create classificatory terminology to indicate that this category of churches differed from western mission churches in terms of their historical origins and compositions. The study of the different terminology used to refer to AICs also disclosed scholars' different perceptions of AICs. After a thorough study of this field I decided to use the appellation African Initiated Church (AIC) mainly because it emphasises the initiation of Christianity in an African sociocultural setting.

The study of the different systems of AIC classifications indicated that although each designated category is characterised by certain general characteristics, several characteristics do overlap, and every so often there are characteristics that are unique to one particular AIC only. It is therefore difficult to justify any generalisation of AICs. This classificatory section together with the historical synopsis of the AICs highlights that each AIC came into existence as result of unique circumstances and is consequently characterised by a unique composition. For historical and descriptive purposes, however, in this study I differentiated between the so-called Ethiopian-type AICs characterised by bearing close resemblance to the patterns of their mother churches and Zionist-type AICs characterised by the placement of emphasis on healing activities and baptism by means of immersion(s) and a more African character. The ZCC is classified as a unique example of the latter. As mentioned before, the characteristics of these types of AICs are, however, not always mutually exclusive.

It appears that the essential rationale for the existence and significant growth of AICs is mainly twofold. One reason was the need of African Christians to function autonomously and the other their need to understand and experience Christianity within their own sociocultural context. With regard to the latter and of specific importance to this study is that African religions are traditionally preoccupied with the attainment of health in the here and now as opposed to western Christianity's

emphasis on the hereafter. There was therefore a strong need among African members for healing in a church environment.

It seems that historical influences contributing to the establishment of the ZCC's healing ministry are threefold. Some of the influences can be traced back to traditional African religious activities that in essence comprise rituals of healing and protection. The healing skills of Engenas Lekganyane's grandfather, a well-known traditional healer, might also have stimulated his need to find a healing church. Influences can furthermore be inferred to the traditions of various churches and their leaders with whom Engenas Lekganyane was associated. There was the Free Church of Scotland, Engenas' first affiliation with Christianity, then Pieter Le Roux's who was at first a Dutch Reformed Church missionary, then associated with the CCAC and later with the AFM, Mahlangu's ZAC, and Motaung's ZAFM, who each in their own unique way contributed to Engenas Lekganyane's growth as prophetic leader and consequently to his initiation of the ZCC. Third, but not least important, Engenas' own willpower, charismatic leadership qualities and healing abilities ultimately gave rise to the establishment of the ZCC and its renowned healing ministry. Although Edward and Barnabas Ramaruma are not as well-known for their healing abilities, it is typically accepted that Engenas' prophetic abilities were hereditary, and consequently his son and today his grandson are believed to reflect this same power, which contributed to the ZCC's popular healing ministry that is seemingly still a big drawcard.

From an anthropological perspective it now becomes necessary to discuss the important notion of healing in order to understand how and why healing has become one of the pillars of the ZCC community.

CHAPTER 3

THE ANTHROPOLOGY OF HEALING IN AFRICAN INITIATED CHURCHES

3.1 Introduction

To understand the nature of healing from an anthropological perspective it is necessary to explore the kind of conditions needing treatment. In this chapter I try to explain the concept of ill-health by investigating the kind of afflictions the concept of “ill-health” might designate. To gain a further understanding of ill-health the meaning of its corollary concept “health” is needed and thus investigated. The meanings that are attached to the concepts of curing and healing are also examined to ensure that, as far as possible, the correct terminology is used when different kinds of treatments are indicated.

AICs developed against and are active within an African sociocultural environment. In an attempt to gain a better understanding of the origination, composition and nature of healing practices found within Spirit-type AICs, specifically those that are located in southern Africa where the ZCC is predominantly active, I explore general and prevalent traditional African perspectives of healing in this region. Health-seeking beliefs are to a great extent determined by a person’s world-view, which itself is largely determined by a person’s particular sociocultural setting. I, therefore, recap notions about the broader traditional African sociocultural setting in which healing beliefs are embedded, placing emphasis on general ideas about healing, causation of illnesses and the context of healing practices.

Lastly, in an attempt to determine why Spirit-type AICs are popular, specifically as healing communities, I investigate the general nature of healing in these churches. At the same time, this study will facilitate a better perspective of healing practices of the ZCC. I aim to summarise the main features of Spirit-type AICs and then explore the context of healing practices, as well as recognised causations of illness that include various kinds of hardships.

3.2 The concepts of ill-health, health, healing and curing

The concept of ill-health, which some scholars and the public refer to as sickness, indicates a state of disease and/or illness. In generally spoken English there is little differentiation between the concepts of disease and illness. However, in the anthropological study of healthcare systems, these concepts are used to indicate slightly different conditions (Herselman 2007:62; McElroy & Townsend 2009:47; Seymour-Smith 1986:187).

Medical anthropologists¹³ describe “disease” as a physiological and/or psychological condition that indicates a malfunctioning of the human body, which is characterised by universal identifiable symptoms (Sobo 2011:15). The perception of disease as a biological phenomenon is fundamental to biomedicine,¹⁴ which characteristically confines medical explanations to scientific knowledge (Barfield 2001:122). International scholars of biomedicine have over time and by means of comprehensive scientific research compiled an inventory of all known diseases categorised by causative factors. These are the *International classification of diseases* (9th edition) and the *Diagnostic and statistical manual of mental disorders* (4th edition). Tuberculosis, for example, can be regarded as a categorised disease because its symptoms are universally recognised by biomedical practitioners and its treatment is prescribed in a standardised way as determined by scientific research (Herselman 2007:62; see also Barfield 2001:122–123; Thomas 1999:95, 98).

Illness refers to the patient’s perception and experience of ill-health and includes an individual and sociocultural dimension (Sobo 2011:15). Hence, illness usually comprises disease, but is not limited to it. A person experiences ill-health in a particular sociocultural setting that encompasses certain ideas about this condition. The meaning of ill-health is, next to individual experiences, to a large extent determined by the sociocultural circumstances in which it occurs. For that reason a condition of ill-health classified as illness may vary between societies with differing

¹³ Medical anthropologists study healthcare systems in their sociocultural contexts. This means that they cover the entire system of sociocultural factors such as religion, kinship, education, political systems and economy, which are all interrelated and therefore affect health and healing each in their own particular way (Barfield 2001:316; Herselman 2007:62; McElroy & Townsend 2009:7).

¹⁴ The term “biomedicine” is used by medical anthropologists “to refer to the tradition of scientific, biologically oriented methods of diagnosis and cure”. Biomedicine is in the generally spoken English language also known as allopathic medicine (Barfield 2001:318; Brown 1998:108–109).

sociocultural settings (Barfield 2001:256; Herselman 2007:62; McElroy & Townsend 2009:47; Steyn 1996:5).

Health constitutes the opposite of ill-health, which means that it is important to know what the concerned patients perceive as healthy. Hammond-Tooke (1989:35) explained that from a biomedical perspective an individual is perceived as being healthy when nothing is wrong with the structure and function of bodily organs and systems. This strictly confined medical explanation excludes other possible aspects of a person's life, for example, those associated with a person's emotional and/or religious life. Hammond-Tooke regarded this shortcoming as one of the main reasons for the increasing criticism of the biomedical system. Being healthy in many societies implies a state of general well-being and not just the absence of a bodily disorder.

Barfield (2001:256) explained that "according to the charter of the World Health Organization, health is not simply the absence of disease but a state of physical, social, and psychological well-being". Similarly the medical anthropologist Sobo (2011:15) defined health as "a broad construct, consisting of physical, psychological, and social wellbeing, including role functionality". Attaining health therefore implies more than the process of fixing the imbalances of the physical body, it implies restoring certain relationships as well, for example, with other people, nature and the supernatural (see MacCormack 1986:151). Being defined as healthy depends on what people within certain sociocultural circumstances perceive as normal. Illness, consequently, cannot really be understood without knowledge of the particular sociocultural setting in which it is embedded and what its corollary condition of health entails (Herselman 2000:2–3, 14).

Different meanings are also attached to the concepts of healing and curing in an anthropological context (Herselman 2007:62). Generally, practitioners of biomedicine, more commonly known as medical doctors, "cure" disease by means of clinically removing a patient's symptoms, in other words they restore the patient's biological functions to normal. In contrast, healthcare practitioners "heal" illness, which in non-biomedical healthcare systems usually includes all kinds of misfortunate happenings (see Steyn 1996:5). In this regard Thomas referred to

Foster (1976:776, as quoted in Thomas 1999:108) who emphasised that the perception of physical ill-health (disease) in non-biomedical healthcare systems “is but a special case in the explanation of all misfortune”. Healing, therefore, implies a more holistic approach than curing because it includes the restoration or healing of the equilibrium of a patient’s sociocultural relationships. It is important to note that these kinds of relationships could include any kind of undesirable situation, such as unemployment, jealousy or fights among family members or community members and problems in a person’s love life (Oosthuizen 1992:17). The health practitioner therefore has to use acceptable ideas and techniques that are embedded in the patient’s sociocultural setting. In particular this means that identification of the causes of illness and the kinds of illness and the treatment thereof have to be socioculturally acceptable to the patient. Consequently, ideas and techniques concerning healing tend to differ from those used concerning curing. Although curing is generally associated with the more clinical biomedical treatment and healing with non-biomedical indigenous or alternative¹⁵ healthcare systems, they are not necessarily always mutually exclusive (Herselman 2000:1–2).

According to Thomas (1999:95) people are inclined to make use of different healthcare systems depending upon their personal preferences. Their preferences will depend upon different kind of circumstances, such as emotional, economic and political situations. Underprivileged people, for example, might rather use their traditional healthcare system because it is more accessible and sometimes more affordable than biomedical treatment. It also happens that the biomedical practitioner is not able to satisfactorily identify and treat the socioculturally acceptable cause of an illness. Whenever a state of health is not obtained people might opt for biomedical treatment and vice-versa (see Herselman 2007:64). In this regard Hammond-Tooke (1989:8, 34) mentioned that whenever people are not satisfied with their progress in attaining health they tend to pursue different kinds of treatments irrelevant of its sociocultural setting, which could include combinations of biomedical, alternative or indigenous therapies.

¹⁵The concept of alternative health-care systems is used to refer to healing systems such as acupuncture, homeopathy, naturopathy, etc. (Hammond-Tooke 1989:34).

According to Barfield (2001:319), regardless of the healthcare system a patient uses, the patient and her/his family *have to* believe and trust in the efficacy of its healthcare practitioners and the prescribed treatment procedures to enable absolute healing. This belief, the suggestibility or therapeutic effect that is also sometimes labelled as the placebo effect, is induced by the symbolic healing processes present in all healthcare systems (Brown 1998:109; Craffert 1999:128–129; Helman 1994:200; McElroy & Townsend 2009:284).

3.3 The nature of healing in a traditional African context

There are a large variety of sociocultural groupings in Africa, each with their own unique characteristics. It is therefore problematic to generalise perspectives of healing. However, many black African societies, especially those who live mainly south of the Sahara, exhibit to greater or lesser extent uniform basic concepts, views and practices. I emphasise the latter societies in this section and attempt to indicate some of the general principles regarding healing, while acknowledging that differences in individual perspectives and between societies resulting from both diverse traditional origins and the variable impact of western sociocultural elements do occur. According to Hammond-Tooke (1989:53) traditional African perceptions of healing are based in a religious tradition (see Mbiti 1986:32). Mbiti (1971:3) and Dube (1989:117) indicate that Africans, in general, define their lives in terms of their religious beliefs. At a later stage Mbiti (1986:135) exclaimed that “[w]e could even say that ultimately all the rituals that people perform are for the welfare of the individual and society. They are in effect health rituals since they are aimed at preserving and prolonging human life”. Hence, from an anthropological perspective fully grasping the meaning of health-seeking beliefs in an African context requires a study of the broader religious setting in which they are embedded (Herselman 1996:154; Mbiti 1971:xi, xii; Thomas 1999:99).

3.3.1 The equilibrium of life

Herselman (2000:2–3) pointed out that as a result of people’s biological nature, indications of bodily disorders are manifested the same by everyone, for example, pain and fever, paralysis of certain limbs and unusual emotional outbursts of fear, anxiety or depression. Identifying the cause of a bodily disorder depends, however, on the sociocultural orientation of the patient and health practitioner. For example, a

biomedical practitioner will perceive a bodily disorder as a symptom of disease. A traditional African health practitioner, on the other hand, does not only consider the bodily disorder as a symptom of disease, but also as a symptom of disruptions in the patient's general sense of well-being or equilibrium of life (Kriel 1992:vi; see Ngubane 1977:27–28).

Health is viewed as a balanced relationship between people, nature and the supernatural from a traditional African perspective. Different kinds of misfortune will come about if this equilibrium is disturbed. Ill-health therefore not only indicates a bodily disorder, but other kinds of misfortune as well. As such, Ngubane (1986:22, 191) explained that no sharp distinction was drawn between the concepts of bodily illness, misfortune and vulnerability to illness and misfortune among traditional Zulus. They used only one word, namely *isifo*, to cover all three concepts. So not only physical ailments are in need of healing, but also other forms of hardship, such as being prone to accidents, losing one's crop due to a lack of rain and unemployment (Herselman 2007:63). In short, as Comaroff (1980:639) indicated, acts of healing in a traditional African context are not only used to restore physical health, but to heal social and spiritual disorders as well.

To facilitate a better understanding of what well-being or the equilibrium of life in traditional African cosmology¹⁶ entails I have used the foundation of Crafford's (1996:9, 13) broad outline of traditional African religious thought in which she highlighted the role of life-force. The notion of life-force often came up in the literature I consulted and during my fieldwork experiences. In the ZCC environment I have heard people refer to life-force as "power" or its Afrikaans version *krag*. Scholars of African-rooted religions, such as Oosthuizen (1992:64), every so often used the concept "vital-force" and so did Thorpe (1991:112) and Steyn (2003:78). Mbiti (1971:202–203) referred to this supernatural force mainly as a mystical power. Oosthuizen (1992:40) also used the concept life-force, so did Mulago (1969:145 as quoted in Mazibuko 1995:63), Müller (2011:123) and Hanekom (1975:67–68), though Hanekom (1975) used the Afrikaans version *lewenskrag*. The concept of life-force in this regard refers to a neutral supernatural power or force that maintains all

¹⁶ 'Cosmology' as used in this study means science or theory of the universe as indicated in The New Oxford Dictionary of English (Pearsal: 2001:414).

life and of which the Supreme Being, a distant, but omnipotent creator God¹⁷ is the provider (Hanekom 1975:67; Mbiti 1971:202; Mbiti 1986:48–53).

Crafford (1996:9, 13) explained that in traditional African religious thought humans, nature (animals and plants) and the supernatural (a Supreme Being, spirits and other spiritual beings) are perceived as a harmonious and integrated unit. The equilibrium is maintained by means of this supernatural power that she referred to as life-force. Life-force connects and is present to varying degrees in the entities of this triangle. Mazibuko (1995:63), who has a similar explanation of African religious thought, compared the entities of this triangle with the links of a chain. He said that if the harmonious flow or presence of life-force within and between the links is disturbed, illness or some other kind of misfortune occurs.

Life-force can be manipulated to some extent by spiritual and human beings. Entities of the spiritual realm, like ancestors and other spiritual beings, mediate this force between the Supreme Being and all entities on earth. Humans make use of religious or magical activities to manipulate life-force. Traditional healthcare practitioners like diviners, herbalists, priests, paramount kings and chiefs can use life-force for healing purposes, such as the attainment of health, protection and prosperity. Life-force can also be applied in a negative way to harm others usually by witches and sorcerers (this is explained more in section 3.3.2) (Crafford 1996:9, 13, 16–17; Hanekom 1975:67; Mbiti 1971:16, 202).

In traditional African religious thought it is generally accepted that each person possesses a certain amount of life-force and as such symbolises a link in the chain. If a person obtains too much life-force it is usually believed to be at the expense of others (Crafford 1996:10; Thorpe 1991:112). In this regard Kuper (1986:50) explained that among Swazi-speakers if a commoner acquired too many riches, such as cattle, it was because of evil doings such as witchcraft or sorcery, in other words it was at the expense of others. On the other hand, if a person's balanced amount of life-force has been decreased it will result in illness that includes all kinds of hardships. Only when a person possesses sufficient life-force will s/he have well-balanced health, happiness and prosperity (Crafford 1996:10; Hanekom 1975:67;

¹⁷ When the term God is used in this study, it refers to the Supreme Being.

Steyn 1996:4). According to Maimela (1991:5–6) this is why many Africans spend much of their time trying to control or manipulate life-force (see Mbiti 1971:203)

Rulers, such as paramount kings, queens and chiefs, act as connections between the Supreme Being and their community's life force and they act as mediators between their community and the ancestor- and other spirits. Such rulers are responsible for maintaining the morality of their people whereby they maintain the balance of life-force in the community. This position of extraordinary authority reflects an ambience of sacredness. It is believed that the welfare of such a ruler symbolises health and prosperity of the community. They are, therefore, believed to possess a greater amount of life-force than the normal person (Crafford 1996:17, 22; Hanekom 1975:68; Mbiti 1971:182, 184; Oosthuizen 1992:64). A good example in this regard is the person of the king of the Swazi-speakers. Although he shares some of his duties with the queen mother, the king's ancestor spirits are perceived as the most powerful, his position is accepted as "sacrosanct", and the kingdom's well-being is believed to be determined by the king's well-being, especially in terms of his power and virility (Kuper 1986:31, 61, 142).

The balanced presence of life-force within a community context is experienced as a feeling of unity, harmony, protection and prosperity. Within this community context descent (the family unit and extended family unit) plays a prominent role. A person does not find a sense of security, meaning, and purpose in isolation or as an individual, but rather as a member of her/his extended family unit, and thereafter in her/his community. Eckert, De Beer and Vorster (2001:88), for example, indicated that the Laka of Mapela, situated in Limpopo province, used the proverb *motho ke motho ka batho*, which means "that an individual is only a person through other people". It is apparent that the emphasis in African societies is on group orientation, as opposed to the western emphasis on individualism. This group approach to life relates to the African humanistic concept of *ubuntu*, which emphasises active participation and mutual assistance in community context. Mulago (1969:145, as quoted in Mazibuko 1995:63) also emphasised participation and went as far as perceiving it as the keystone of African community. It is therefore understandable that Du Toit (1998:49) concluded that in Africa it is a matter of "I participate, therefore

I am” (see Crafford 1996:9, 11; Kriel 1992:23; Maimela 1991:5; Mazibuko 1995:62; Sindima 1994:124; Thorpe 1991:110).

This characteristic community orientation among African societies was also explored by Mbiti (1971:108–109) and quoted in Kriel (1992:24) who explained in greater detail that:

[o]nly in terms of other people does the individual become conscious of his own being, his duties, his privileges and responsibilities towards himself and towards other people. When he suffers, he does not suffer alone but with the corporate group; when he rejoices, he rejoices not alone but with his kinsmen, his neighbours and his relatives whether dead or living... Whatever happens to the individual happens to the whole group, and whatever happens to the whole group happens to the individual. The individual can only say ‘I am, because we are; and since we are, therefore I am’.

It becomes clear from the quote above that community life within a traditional African context extends beyond death (Mbiti 1971). As Thorpe (1991:113) explained “[d]eath is seen merely as a further stage of life, in which a person no longer participates physically but becomes a spiritual participant as an ancestor”. Ancestor spirits are thus revered as members of the community that, because they have left this world, have more status and power than their earthly counterparts. Kriel (1992:23–24), for example, found this same phenomenon among the Northern Sotho-speakers.

West (1975:178) referred to the participation of ancestor spirits in community context as ancestor veneration and not as ancestor worship like many other authors do. His rationale for using this term is that the ancestor spirits are not worshipped the way God is, but venerated as partners in a mutual dependent relationship (see Steyn 2003:80–81). For that same reason I prefer the concept ancestor veneration and will use it throughout this study (see Sindima 1994:124, 135).

A circle symbolises the notion of well-being, equivalent to the equilibrium of life and therefore symbolises holism and harmony within group or community context. This is a primary reason why the traditional settlement patterns – encompassing the village,

the huts, cattle kraals and so on – are created in a circular form. Life within the circle represents unity, harmony, protection and prosperity, and life outside of the circle represents alienation, chaos, danger, illness and other kinds of misfortune. A prominent South African example of this kind of symbolism is the circular shaped symbol of the *Inkatha* Freedom Party (IFP), also called an *inkatha* (Crafford 1996:9). At first it represented unity among the Zulu-speakers, but today the IFP emphasises its meaning as representing the progress towards unity among a South African nation. The object that is referred to as an *inkatha* is a sturdily woven, circular grass coil used to carry heavy objects on the head (IFP: Our history 2010:1).

If the harmony within a group or community context is disrupted, or in other words the equilibrium of its life-force is disturbed, hardships such as physical illness, accidents and natural disasters will occur (see Kriel 1992:vi). The equilibrium of life-force within a community is disturbed when someone has broken a rule of conduct, violated a taboo or has shown disrespect towards her/his elders, which includes supernatural beings such as the ancestor spirits or other spirits and God. Many of these disruptions are believed to result from sorcery or witchcraft practices of which a more detailed explanation will follow in section 3.3.2. Ultimately one person's affliction has harmful repercussions for other people in the group or community context (Hammond-Tooke 1989:146; Herselman 2000:5; Mbiti 1971:210–211; Thorpe 1991:110–111).

To restore the equilibrium of life-force, to bring about healing, people revert to traditional healthcare practitioners who employ religious practices that sometimes include using magic.¹⁸ A traditional healthcare practitioner first identifies the cause of a person's affliction. In a traditional African setting, this means identifying the agent (human or supernatural) responsible for the condition. As an example, Mbiti (1971:200) explained that:

¹⁸ The manipulation of life-force to achieve personal goals is referred to as magic. Because life-force is perceived to be neutral by nature it can be applied for either good or malevolent purposes. If life-force is manipulated to the benefit of people it is known as good magic and is usually applied by traditional healthcare practitioners such as diviners and herbalists for the purpose of healing, protection and ensuring prosperity. When life-force is used to harm people it is referred to as evil magic used by witches and sorcerers. Both kinds of magic can be provided in the form of spells (magical words), actions and various kinds of medicines (Crafford 1996:16; Mbiti 1971:198, 200–202).

... a bereaved mother, whose child has died from malaria, will not be satisfied with the scientific explanation that a mosquito carrying malaria parasites stung the child and caused it to suffer and die from malaria. She will wish to know why the mosquito stung her child and not somebody else's child. The only satisfactory answer is that 'someone' sent the mosquito, or worked other evil magic against her child.

This kind of causation is not recognised in biomedicine. Therefore, when a biomedical practitioner has been consulted, the treatment is perceived as effective only for healing the symptom and not the true cause (Hammond-Tooke 1989:35; Herselman 2007:64; Mbiti 1986:134; Thorpe 1991:111).

The notion of becoming afflicted by chance, because the body has been attacked by a bacterium or virus, does not often occur. Thus, when the traditional healthcare practitioner has identified the cause of the affliction, the questions that arise in an African context, "Why me?" and "Why now?" are being answered. It is only then possible to prescribe the correct treatment. To heal the equilibrium of life, treatment will usually include various religious and sometimes magical practices and medicines, and will require the participation of family or other community members as well (Hammond-Tooke 1989:35; Herselman 2007:63; see Kriel 1992:vi; Mbiti 1986:134–135). Like Hammond-Tooke (1989:146) explained, "satisfactory healing involves not merely recovery from bodily symptoms, but the social and psychological reintegration of a patient and community".

Most people are concerned with maintaining equilibrium in the community because it will ensure everybody's well-being. Because a community's welfare is deemed more important than that of the individual a person is measured in terms of their benefit to the community. Accordingly Thorpe (1991:114, 117) found that many daily actions are directed towards attaining and maintaining equilibrium within a group context. Most people, for example, intentionally or spontaneously take part in stress-releasing and harmony-regulating activities such as cheerful conversations, dances, singing songs and other forms of art. She further noted that communal dancing and singing

activities are also perceived as preventive and healing remedies. Rites of purification are emphasised for maintenance and protective reasons and play a significant role throughout a person's life. In general, the harmonious presence of life-force or equilibrium is believed to be maintained and reinforced by means of prayers, ritual acts, sacrifices or offerings¹⁹, wisdom and moral behaviour (Crafford 1996:11; Thorpe 1991:112).

Turner (1957:2, 91–92), who studied the Ndembu society in the region today known as northern Zimbabwe from 1950 to 1954, detected a pattern in the way in which social disturbances erupt and are then fixed or healed to restore equilibrium in a group or community's life. He referred to social disturbances as social dramas. In each social drama he identified four phases that followed one another more or less in a specific order with the ultimate goal of attaining equilibrium. First, there is a breach in the normal social relations between members of a group or society or between groups or societies. Second, the disruptive situation erupts into a crisis (illnesses that include other hardships such as criminal activities or natural disasters) and might cut across a group, community or chiefdom. Third, mechanisms to remedy the undesired hardships are set into place by leading members in the community. These mechanisms may include informal advice and arbitration, more formal juridical procedures and the performance of different kinds of religious actions. The fourth and final phase consists of the reintegration of the persons or groups in conflict or the regression of crisis followed by a schism. Either way, the fourth phase resolves the crisis situation by restoring the group or community's equilibrium. Turner's exposition of how social drama is managed can be used to understand various forms of misfortune experienced in an African community context.

3.3.2 Notions about causation

From the previous discussion it becomes clear that the process of complete healing can only be undertaken if the causation of the affliction has been determined. Broadly, the following possible agents of causation can be discerned: natural causes, God, the ancestor spirits and associated spiritual beings, witchcraft, sorcery

¹⁹ Sacrifices involve the flowing of human or any other animal's blood, while offerings do not involve blood, but comprise food, drink, tobacco, money and other things that people present to the supernatural (Mbiti 1986:57, 59).

and the violation of a taboo. This section explores the setting of each of these categories (Hammond-Tooke 1989:56–57; Herselman 2007:63).

3.3.2.1 Natural causes

There are a small number of illnesses that are believed to occur as a result of natural circumstances ranging from coughs, colds, stomach disorders to serious illnesses such as malaria. Ngubane (1977:23) explained that among Zulu-speakers these kinds of illnesses are referred to as *umkhuhlane*, which is not directly translatable into English, but could roughly be interpreted as illnesses that “just happen” without any alternative cause. These conditions that “just happen” could also include various infectious diseases like measles, smallpox and tuberculosis, or biological deterioration as a result of old-age. According to Hammond-Tooke (1989:56–57) the extent to which these illnesses are perceived as being natural is uncertain, because if treatment is unsuccessful the evil deeds of witches or sorcerers could be interpreted as the source (Dube 1989:113; Herselman 2007:63).

3.3.2.2 God

Although the Supreme Being is perceived as an omnipotent and limitless creator God, it is generally believed that He withdrew after the creation and is seldom directly involved in the lives of individuals or contacted by them. Mutual communication is usually maintained by mediators such as the ancestor spirits. God does occasionally communicate with human beings usually by means of natural disasters such as droughts and floods. Although not often directly contacted, traditionally African communities have many different names for God, for example Sotho- and Tswana-speakers can refer to God as *Modimo*, Xhosa-speakers as *Umdali* or *Qamatha* and Zulu-speakers as *UnKulunkulu*, *Simakade* or *Umvelingqangi*, among other names. According to Hammond-Tooke (1989:58), “[i]t is true that illness and misfortune is sometimes said to be caused by ‘God’, but this only occurs when a more precise cause cannot be determined”. Cases of hardships such as diseases and the occurrences of unnatural deaths are usually ascribed to the evil doings of witches, sorcerers or malevolent spirits (Hammond-Tooke 1989:58; Kriel 1992:vi; Schapera 1953:59; Steyn 2003:79; Thorpe 1991:108; Turner 1968:514; Wilson 1971:32).

3.3.2.3 The ancestor spirits and associated spiritual beings

In general, traditional African religious systems place an emphasis on the veneration of ancestor spirits. It is believed that the maintenance of health is directly related to their content omnipresence because they protect the living. In a person's quest for the causation of illness that includes any other kinds of misfortune it is thus necessary to investigate the relationship with the ancestor spirits. In this regard it is important to remember that because the ancestor spirits act as mediators between God and the ancestor spirits' descendants, they are able to regulate their flow of life-force (Crafford 1996:14; Hammond-Tooke 1989:58, 63; Herselman 2007:63; Steyn 2003:81).

The ancestry of most black African societies south of the Sahara is patrilineal, that is descent flows through the father's bloodline. Therefore, communication usually occurs between descendants and ancestor spirits of their male bloodline. Hammond-Tooke (1989:61–62), however, mentioned that it has been recorded that maternal ancestors or even deceased mothers of patrilineal descendants occasionally communicate with their patrilineal family members. In general, the deceased members of a descent group, defined by their particular principle of descent reckoning, are collectively honoured as ancestor spirits. Usually only when an ancestor spirit appears in a dream or is identified by a traditional healthcare practitioner are descendants aware of a spirit's specific identity (Hammond-Tooke 1989:63).

Not all people necessarily become cherished ancestor spirits. Crafford (1996:14) indicated that in some societies, people who have committed evil deeds against the community are believed to become wandering ancestor spirits able to continue their malevolent work from the spirit world. In other societies, however, ancestor spirits are believed to be "protective and beneficent, even if they were not so during their earthly existence" (Thorpe 1991:115). In most traditional African societies, the same as among the Cape Nguni-speakers (Hammond-Tooke 1975:17–18), deceased people are honoured as ancestor spirits only if they have living descendants to do so. Mbiti (1971:26) viewed this belief as the rationale for the importance placed on marriage and procreation. Among the Pedi-speakers, for example, the status of an

ancestor spirit is increased by the total sum of descendants left on earth who are able to commemorate them (Mönnig 1983:55).

In general, it is also accepted that a person's position of authority is continued in the spirit world. The influence of a deceased king or a chief is therefore greater than that of a deceased family head (Crafford 1996:14). Kuper (1986:61) for example indicated that among Swazi-speakers the king's ancestor spirits are perceived as "the most powerful" of all their ancestor spirits. A ruler can therefore become a kind of "patron saint" and can be honoured for as much as five generations. If a ruler has played a significant role in the lives of her/his people, such as Shaka Zulu (1787-1828) the famous Zulu-speaking king and conquerer, they will be remembered and honoured among others by means of praise poetry, which is recited as part of ancestor rituals for an unlimited period of time (Crafford 1996:15).

Ancestor spirits and their descendants are bound in a situation of mutual dependency. Ancestors take care of their descendants' earthly needs by ensuring health, sending rain and fertility, preserving customs and traditions, and attending as well as providing assistance during rites of passage at birth, initiation, marriage and death, among other functions. In return, the descendants are expected to conform to the needs of their ancestor spirits, which includes performing various rituals like homestead, agricultural, life-cycle and thanksgiving rituals and conducting themselves morally. The most important virtue of moral conduct is respecting your seniors both in age and descent, both those alive and deceased (Hammond-Tooke 1989:64–65; Herselman 2000:4; Mbiti 1986:135; see Mönnig 1983:64).

When the descendants neglect to pay the ancestor spirits proper homage and respect, the harmonious relationship between the ancestor spirits and their descendants is disrupted. The implication is that the ancestor spirits withdraw their protection whereby their descendants are typically struck by misfortunate happenings usually due to the evil acts of witches or sorcerers (Hammond-Tooke 1989:64–65; see Kuper 1986:62; see Müller 2011:17). Ngubane (1977:55), for example, explained that if the calling-home ceremony among Zulu-speakers known as *ukubuyisa* (*buya* which can be translated as come back and *buyisa* as bring back) is forgotten, the ancestor spirits concerned become particularly upset. This

ceremony is conducted to invite the ancestor spirit of a recently deceased family member back into the kinship group.

Misfortune that is indirectly caused by the ancestor spirits represents (Herselman 2000:4):

... a symbolic form of communication; a constant reminder of an outstanding action; an indication that the ancestors have for some reason turned their heads and are not watching over their descendants; a form of punishment or a reminder of deviation from accepted norms...

Herselman (2000:4) further explained that illness is sometimes perceived as a calling from the ancestor spirits indicating that the person involved should become a traditional healthcare practitioner. In general, illness caused by the ancestor spirits is seldom serious and does not occur too often. Descendants have to reconcile with or adhere to the wishes of the ancestor spirits by means of ritual action to heal this affliction (Hammond-Tooke 1989:64–66; Herselman 2007:63).

3.3.2.4 Witches and sorcerers

Witchcraft and sorcery are perceived as the primary causes of illnesses that include different kinds of hardships. Ashforth (2005:86) pointed out that evil magic “though it is conceived and experienced in many different ways, is above all a form of human action that is driven by the emotion of hate, particularly as that emerges from jealousy and envy”. Kuper (1986:69), with regard to the Swazi-speakers, perceived the origin of witchcraft and sorcery practices in this same context. Any person is able to apply evil magic because it is presumed that most people will experience jealousy during one or various phases of their lives. Therefore, people’s first reaction when they experience an affliction of some sort is to suspect the evil activities of a witch or a sorcerer (Ashforth 2005:71; Hammond-Tooke 1989:73, 83).

Hammond-Tooke (1989:73) indicated that it is sometimes difficult to distinguish between witches and sorcerers, especially because people themselves do not always differentiate between these two concepts. Even so, he noted that these terms are more overly applicable in South Africa. Evans-Prichard in his well-known book

Witchcraft, oracles and magic among the Azande (1937) is usually credited for defining the anthropological distinction between witchcraft and sorcery (Buxton 1978:1). This distinction is used by various anthropologists and other researchers. For the purposes of clarity I have therefore used both concepts throughout this study (see Hammond-Tooke 1989:48, 73; see Kuper 1986:68; see Mbiti 1971:202).

The most important characteristic of witches, initially identified by Evans-Prichard (1937:387) from his studies among the Azandes, is that they are believed to have been born with the ability and the need to harm others. Niehaus (2006:78–79) referred to this same characteristic. He, however, argued in his study of the South African Lowveldt communities (in the region currently known as Mpumalanga) that it was not feasible to differentiate between a witch and a sorcerer. In one of his earlier studies he explained that even if individuals did not possess the innate ability to harm others “should they rub witchcraft substances into their blood, they could become as powerful and reckless as witches by birth” (Niehaus 2001:25). He therefore preferred to use the term witch to refer to both kinds of practitioners.

Another characteristic of witches is that they are predominantly women; however, the presence of male witches is not unheard of (Evans-Prichard 1937:387; Niehaus 2006:78). Witches also typically work at night, can become invisible, change shape and are assisted in their evil deeds by servant beings or agents referred to by anthropologists as familiars. Well-known examples of familiars are the creature that resembles a small hairy man, also described as a baboon-like creature of about knee-height, believed to have ugly teeth and pronounced sexual features, known among the Nguni-speakers as *uThikoloshe* and among the Pondo-speakers as *thikoloèe*, the lightning bird known by the Xhosa-speakers as *impundulu*, and a lizard-like creature known by the Pedi-speakers as *motsolo* (Hammond-Tooke 1989:48, 73, 75; Herselman 2000: 4; Mbiti 1971:200, 202; Niehaus 2001:50)

Witches are not obviously recognisable. During the day they are perceived as common members of the community, but at night they focus their evil deeds on neighbours and members of the extended family unit (see Ashforth 2005:13). The general assumption is that witches are active only in their community because they

are only able to harm those who reside in their close vicinity (Hammond-Tooke 1989: 48, 80; Müller 2011:130).

Evans-Pritchard (1937:387) explained that in contrast to witches, sorcerers are not believed to be born with the ability or a constant need to harm others. The ability to practice sorcery can be learned by anyone at any time and it is applied for a specific purpose, for example, when jealousy or other ill-feelings disturb people's relationships. According to Hammond-Tooke (1989:78) a sorcerer's medicines typically consist of poisons or similar medicines that can be dropped in consumables or on a victim's path and bodily exuviae such as urine, stools, nail clippings, pieces of hair or the earth from footprints. Personal objects of this nature are believed to retain some mystical attachment to the owner. This means that when such personal objects are harmed by a sorcerer the owner will automatically be afflicted. It, however, is also possible for a sorcerer to harm someone with the use of magical words (spells) and actions (Hammond-Tooke 1989:73, 78–79; Herselman 2007:63; Mbiti 1971:200).

The practice of witchcraft and sorcery in Africa is perceived as evil and is heavily condemned because it upsets the equilibrium of a community. It does, however, provide communities with an explanation for the presence of evil among them (Herselman 2000:4). Witches and sorcerers are according to Mbiti (1971:200–201) “the most feared and hated members of their communities”. When such evil-doers are identified the reaction of community members is usually violent. Such a person could be punished through imposition of a fine, stoning, beating and even execution (Mbiti 1971:200–201; Herselman 2007:63). For example, among the Pedi-speakers, witchcraft was traditionally perceived “as a wrong, a *molato*, of the highest order and legally punishable with death” (Mönnig 1983:65). This kind of reaction is not something of the distant past. Niehaus (2006:93) indicated that between 1985 and 1995 more than 389 suspected witches were executed in South Africa's Limpopo province.

To prevent illnesses caused by witchcraft and sorcery traditional healthcare practitioners make use of “[c]harms, amulets, medicines drunk or rubbed into the body, articles on the roof or in the fields, cuts, knots, and many other visible and

invisible, secret and open precautions” (Mbiti 1971:201). Various rituals to cleanse people and the homesteads subject to attacks by witches and sorcerers can be performed. According to Hammond-Tooke (1989:78) “because witchcraft, in particular, works only over short distances, its effects can [also] be circumvented by the victim’s moving away to another area”. Another safeguard specifically against the use of personal objects such as bodily exuviae is to bury them in a safe place such as the homestead, under the protection of the ancestor spirits (Herselman 2007:63).

3.3.2.5 The violation of a taboo

Another cause for illnesses that include different kinds of misfortune is the violation of a taboo. A taboo is usually specific to a particular social group such as a clan or tribe. Herselman (2007:63) defined a taboo “as a prohibition that regulates people’s behaviour in specific circumstances”. These specific circumstances include when a person is in a particularly dangerous state, a state of pollution, or is ritually impure. People often acquire this state of pollution due to unavoidable circumstances such as critical changes in a person’s life-cycle, for example giving birth or menstruation. If the taboos in question are breached the person will experience an automatic mystical consequence in the form of illness. When people come within close proximity of a polluted person certain rules of conduct have to be followed otherwise they will also become polluted and contract some kind of affliction. Typically polluted people are cleansed with the use of purification rituals that usually include medicines and acts of ritual washing such as sprinkling a person with specially prepared water (Barfield 2001:385, 464; Hammond-Tooke 1989:91).

Among Pedi-speakers, for example, the word *dikidišwa* means taboo, which indicates that certain actions concerning conditions of ritual impurity (*ditšhila*) should be avoided. Examples of these conditions for women include menstruation, following an abortion or miscarriage or recent bereavement. If a man has sexual contact with such a ritually impure woman he can also become polluted and usually contracts the illness *makgoma* (from *go kgoma* which means “to touch”), which is also contagious and results in the patient fading away (see Niehaus 2001:28). Because *ditšhila* is contagious it is also taboo for a person in this condition to enter a cattle kraal, work on the lands, or to be present at any religious action or gathering. Protection against and remedy for *ditšhila* and *makgoma* is, according to Mönnig (1983:67), magical

ritual cleansing (*kalafo*) prescribed or carried out by a traditional healthcare practitioner (Kriel 1992:199; Mönnig 1983:66–68, 141).

Taboos could also include injunctions against eating certain foods. In Africa food taboos are often found in conjunction with groups that honour, venerate or respect a totem, specifically when the totem is an animal or plant. Among certain groups avoidance is practiced or the killing or eating of such a totem is prohibited and the transgression of this taboo would invoke supernatural sanctions, such as becoming ill (Barfield 2001:384; Kriel 1992:200). Mönnig (1983:234–235) indicated, for example, that the Pedi-speakers traditionally accepted the porcupine (*noku* or *mopedi*) as their totem animal and did not kill or eat it. This prohibition was subsequently supported by supernatural sanctions.

3.3.2.6 Recurrent theme of hotness versus coolness

To conclude, traditionally any kind of illness or affliction is associated with a state of heat. According to Hammond-Tooke (1989:93–99) this state of hotness or heat is translated as *fiša* among Sotho-speakers. *Fiša* could indicate physical heat, such as when someone has been in the sun for some time or has a fever, or a state of symbolic heat, for example, when a state of illness including a state of ritual impurity or misfortune is experienced (Hammond-Tooke 1989:94, 98). However it has occurred, it must be counteracted, neutralised or cooled down by applying an appropriate cooling element or medicine. This constant theme of hotness versus coolness “infuses the whole set of concepts including ancestors and witches” (Hammond-Tooke 1989:98). The main cooling substances seem to be water, chime (the green, undigested stomach contents), ash and grime. A series of other liquids such as beer, gruel, saliva and urine comprise mainly water and these can be ritually applied in different ways such as to drink it, use it in washing, by sprinkling, pouring, bathing and steaming patients or objects with it. To cool patients down they can also be submerged in running water such as rivers (Hammond-Tooke 1989:99). According to Mönnig (1983:68) the qualities of coolness are inherent in all that is good and the qualities of heat in all that is evil or bad.

In some communities this state of hotness is referred to as dirt. According to Hammond-Tooke (1989:99) this conceptualisation occurs especially among the

Nguni- and Venda-speakers. In this regard, dirt refers to a state of ritual impurity or any other state of illness similar to the concept of heat discussed above. A state of dirt is usually counteracted or cleansed by washing or the use of purgatives.

The theme of hotness versus coolness or dirt versus clean is according to Kiernan (1978:28–29) present among the Zulu-speaking Zionists and seems to be present within the ZCC community as well. The most obvious example within a ZCC context would be the abundant use of blessed living water to cool down or heal states of hotness in other words all kinds of afflictions and hardships (see section 5.3).

3.3.3 The context of healing practices

In general, when a person is experiencing an affliction of some kind s/he will first try various home remedies. If the person is still experiencing an illness a senior member of the extended family or a respected senior community member is asked to arrange a meeting with a preferred traditional healthcare practitioner. Among many black African societies south of the Sahara it seems that usually the choice is between two distinguishable categories of practitioners, namely the diviner and the herbalist. It is important to note that the roles of a diviner and an herbalist are in practice often combined in one practitioner (Steyn 2003:82). For descriptive purposes and because numerous authors have referred to them in this way I have discussed their roles separately.

Both practitioners successfully complete lengthy, formal apprenticeships, fulfil a healing, protecting and life-giving function by restoring and strengthening life-force and are perceived as respected and indispensable members of a community (Crafford 1996:16; Hammond-Tooke 1989:122–123; Herselman 2000:6–7).

3.3.3.1 Diviners

The first most widely known category of traditional healthcare practitioners is the diviner known by the Xhosa-speakers as *isangoma* or *igqira*, the Zulu-speakers as *isangoma* or *ngaka*, and the Tswana-speakers and Pedi-speakers as *ngaka*. The ancestor spirits typically call the diviner to this vocation by means of visions, dreams or illnesses that could include any kind of misfortune. The diviner is hence perceived as a person who can mediate the will and intentions of the ancestor spirits

(Herselman 2000:7–8). Using a divination method such as bone-throwing or trance, which transpires with the help of the ancestor spirits or sometimes by magical means, diviners are able to predict certain future events, detect the causes of illnesses, and prescribe the correct treatment. The patient's close kin and friends and sometimes other close connected community members are generally present during a divination session. In spite of the fact that most diviners have an extensive knowledge of medicines, in cases where the use of specific medicines is required the patient is usually referred to an herbalist (Crafford 1996:16; 114; Kiernan 1995:4; Mönnig 1983:80; Thorpe 1991:114).

3.3.3.2 Herbalists

The herbalist, called an *inyanga* by the Zulu-speakers, *ixhwele* by the Xhosa-speakers and *ngaka* by the Pedi-speakers, is ordinarily not called by the ancestor spirits, rather s/he becomes a practitioner of her/his own free will. This healthcare practitioner has specialised knowledge of plants, roots and other substances, such as seawater, lion and elephant droppings, crushed shark fin, different animal fats, as well as knowledge on the methods of preparation to strengthen, heal, protect and bring about prosperity. Some of these medicines are referred to by the Nguni-speakers as *umuthi* and by the Sotho-speakers as *dihlare* and have natural healing abilities and are used in this regard, where others are used in a magical context (Hammond-Tooke 1989:104, 118–120; Herselman 2000:8).

It is possible for an herbalist to use medicines to harm people and the medicine may even consist of human body parts. This kind of usage of medicine, however, would count as an act of sorcery and, as indicated earlier in this study, is heavily condemned by society (see Special Assignment, SABC 3: 2009/04/21). Nguni-speakers, for example, refer to these medicines as *ubuthi*, which means destructive medicines.

Herselman (2007:63) also referred to the use of human body parts by practitioners not only to harm others, but sometimes to “enhance the potency of *muti* medicines they sell to increase the wealth, health, or fertility of clients”. Although these kinds of acts are definitely not general procedure since most herbalists are considered to

work for the good of society, they make the position of an herbalist “an ambiguous one” (Hammond-Tooke 1989:104–105, 119; see Niehaus 2001:23).

In most cases the therapeutic work of herbalists bears resemblance to that of the biomedical pharmacist, and the diviner’s diagnostic expertise to that of a biomedical practitioner. As mentioned earlier, the roles of diviners and herbalists are often combined in a single healthcare practitioner (Steyn 2003:82). In general, when they exist as individually defined practitioners, diviners and herbalists are known to work in collaboration by means of referring patients to each other when the need for specific professional assistance arises (Hammond-Tooke 1989:104; Herselman 2000:7).

3.3.3.3 Treatments

When an affliction is caused by God or the ancestor spirits the remedy usually does not consist of medicines, but rather entails different types of ritual actions such as purification, strengthening, protection and thanksgiving rituals. These ritual actions could again consist of different combinations of prayers, invocations, sacrifices or offerings such as the libation of beer and snuff. Generally, these activities are characterised by the participation of members of the patient’s kinship group and/or neighbours and friends, and preferably led by the most senior male of the agnatic group who is able to attend the occasion. If the affliction was the result of sorcery or witchcraft practices, if possible, the evil-doer is identified. Treatment, as explained earlier, will typically take the form of a magical remedy in the form of medicines and various ritual actions to neutralise the evil attack and to strengthen the afflicted person against possible future attacks (Hammond-Tooke 1989:104–105, 114; Herselman 2000:7–8). According to Steyn (1996:7) the diviner, more often than not “retaliates by turning the ‘medicine’ on the conspirator”.

When an afflicted person does not experience any improvement with a given treatment it is believed that the wrong cause was identified and the idea of causation is changed. When a patient, for example, is experiencing a cough diagnosed as resulting from natural causes, but, in spite of the appropriate medicines, the condition deteriorates the idea of causation shifts to supernatural agents such as the ancestor spirits. When the idea of causation has changed the patient will typically,

and for obvious reasons, also change healthcare practitioners. In Africa, where biomedical systems, traditional healthcare systems, healing ministries such as those of the AICs and other alternative healthcare systems are simultaneously available, patients tend to move between the different systems until the preferred results have been obtained (Hammond-Tooke 1989:124; Herselman 2007:63–64; Thomas 1999:95).

Healthcare system “hopping” occurs relatively often. Many of the ZCC members I had spoken to had first consulted traditional healthcare practitioners and/or prophets of other AICs and/or biomedical practitioners, not necessarily in this order, before they had ended their quest for health in the ZCC. Not all stories of healthcare system “hopping” always end happily. Ashforth (2005:108), for example, relayed the story of Themba’s quest for health. Themba, a previously successful business man in the Johannesburg/Soweto area, experienced constant incidents of ill-health. His family, being Christians, decided that he should consult a prophet of their particular AIC. The treatment, however, was unsuccessful and as a result an *inyanga* was consulted who also failed to solve the problem. They consulted a further two *inyanga*’s and a biomedical specialist. The *izinyangas* jointly came to the conclusion that a neighbour wanted to murder him with the use of evil medicine, but they were not able to mend the situation. The laboratory tests conducted by the biomedical specialist indicated that he was HIV-positive. His family did not accept his HIV status and kept on consulting different medical doctors and *inyanga*’s, an expensive process, until he passed away. Although Themba’s quest for health was not successful, there are healthcare system “hoppers” who at some stage do obtain health.

Finally, in a traditional African context, it is believed that when a moral rule is trespassed punishment is received in the present (here and now) by means of illness that could include any other kind of misfortune. Reconciliation between the trespasser(s) and the offended person(s) or supernatural being(s) has to transpire in order for healing to take place. This explains why the Truth and Reconciliation Commission assembled after the abolition of apartheid played such a significant role in South Africa’s history. Truthful reconciliation that usually includes negotiations, the appropriate rites and medicines will inevitably restore the equilibrium of life and free a person or person(s) from its effects in the hereafter. It has now become obvious

that the hardships people experience need to be resolved in this life. The focus of traditional African religious activities is therefore centred on the deliverance of hardships in the here and now rather than in the hereafter (Crafford 1996:11; Mbiti 1971:4–5).

3.4 The nature of healing in Spirit-type AICs

The ZCC is generally classified as a Spirit-type AIC. Hence, for explanatory purposes I demarcated Spirit-type AICs in this section. In the previous chapter I indicated that each AIC came into being as a result of unique circumstances and, as such, are each characterised by a unique composition and characteristics. Therefore, even though this section attempts to indicate characteristics of Spirit-type AICs it remains difficult to justify any generalisations. Yet, scholars have indicated a number of general principles present in many Spirit-type AICs that were most likely caused by some of the fundamental needs shared by members that have been satisfied within these churches. I will highlight some of these principles in this section.

3.4.1 General characteristics of Spirit-type AICs

To enable a better understanding of the religious setting of Spirit-type AIC's I summarised some of their most distinctive features indicated by various scholars. In the previous chapter I explained that Spirit-type AICs are generally identified by others to have amalgamated to varying degrees traditional African religious elements with Christian religious beliefs enabling members to satisfy specific African sociocultural needs. Then, according to Comaroff (1985:166), a strong, inspired leader recognised as a healer rather than a minister-type is typically found at the centre of a Spirit-type AIC. This leader, who is usually referred to as a Bishop, is assisted by a hierarchy of church officials generally comprising ministers, deacons, evangelists, priests and prophets. Typically fundamental to the theology of most of these churches is the Old Testament with its legalism and dietary taboos. The abstinence from alcohol and smoking is usually also emphasised. Baptism by means of total immersion, preferably in a river and night communions are likewise mostly regarded as essential (Hammond-Tooke 1989:136; West 1975:19).

West (1975:18) distinguished as another characteristic the special significance of prescribed church attire characterised by different combinations of colours. White,

perceived to symbolise cleanliness and purity, is usually the main colour combined with other symbolic colours such as blue, green, red and yellow. Services on the whole are emotional in nature, characterised by the use of drums, dancing, singing, hand clapping, spirit possession, speaking in tongues and other ecstatic behaviour considered to be inspired by the work of the Holy Spirit. A lot of members recognise the evil acts of witches and sorcerers and accept the existence and influence of the ancestor spirits. The presence of ancestor veneration, however, does not supplant Christian beliefs because ancestor spirits are mostly considered to act as helpers of the Holy Spirit and God (Comaroff 1985:167; Hammond-Tooke 1989:142–143; West 1975:19, 184).

Hammond-Tooke (1989:136) indicated that perhaps these churches' "main characteristic is a view of salvation as primarily concerned with health and vitality in the here and now [present]". "Health and vitality" is obtained and protected by means of healing activities that are mostly conducted during church services. Steyn (1996:4) argued that these healing activities in general seem to rest "on the synthesis of early Christian healing practices and traditional indigenous [black African] healing practices" that both emphasise purification and the elimination of evil spirits. Many of these healing practices are characterised by the use of Holy water also known as blessed water (Turner 1968:509, 515). To conclude, on the whole the Holy Spirit is "believed to heal through the agency of the prophets, and also through the efforts of the congregation as a whole" (Hammond-Tooke 1989:137).

3.4.2 The setting of healing practices

When studying healing practices in a Spirit-type AIC context it is important to note that health, the same as in an traditional African context, is not only experienced as an individual matter, but as being related to the well-being of the community or in this case the congregation. The congregation, in a sense, fulfils the same role as a community by providing support, protection and security to its members. Oosthuizen (1992:41) added that real health in this context is accepted to be "a balanced relationship between a one's body, soul and spirit, between those around one, such as a harmonious relationship with the congregation and with the metaphysical forces of which God is the highest".

West (1975:92) established that a high percentage of members of Spirit-type AICs joined churches because this is where they were healed. Daneel (1974:186) found this same phenomenon in Zimbabwe saying that “[n]o single factor has been mentioned more often by members of the Spirit-type Churches as the direct reason for joining these movements than the healing treatment performed by African prophets”. Sundkler (1961:233) concluded that “[t]he Message of Healing is in fact the strongest asset of Zionist evangelisation”. The Spirit-type AICs’ prominent promise of healing seemed to have been a definitive attraction to numerous members from various religious backgrounds (see Anderson 1992:93, 98). Hence, healing practices are typically perceived to be the main reason for the tremendous membership growth rate of Spirit-type AICs.

West (1975:92) divided healing activities in Spirit-type AICs into three main modes: healing during church services, healing by immersion, and healing by means of consultation with a prophet. According to Hammond-Tooke (1989:136) the first two are continuous with Pentecostal practices, whereas consultation with a prophet shows strong similarities with the traditional African methods of healing. During the times I had attended services of the ZCC (1995, 2002–2003, 2011) I experienced mainly the first mode of healing. This mode of healing, however, included healing by means of consultation with a prophet (see Chapters 4 and 5). West’s second mode of healing, healing by immersion, is in the ZCC only done during baptism²⁰ and is not used as a repetitive mode of healing (Lukhaimane 1980:57). It is important to note that even though Ethiopian-type AICs are not perceived as healing communities in general, some are marked by healing activities. Typically, these are restricted to church services and mainly consist of healing through prayer and the laying on of hands (Steyn 1996:8).

West (1975:92) also distinguished between so-called direct and indirect healing. When the healer is aware of a specific problem the patient is experiencing, and typically with the help of the Holy Spirit (*uMoya*) prescribes treatment to heal this particular affliction, West categorised it as an act of direct healing. Indirect healing he perceived to occur when a patient did not inform the healer of a particular complaint,

²⁰ Baptism in a ZCC context is discussed in section 4.4.1.

but is healed with the help of the Holy Spirit who works through the healer and sometimes the congregation as a whole (Hammond-Tooke 1989:136; Steyn 1996:8). Although both kinds of healing are practiced in the ZCC, the latter occurs most often.

3.4.2.1 Healing during church services

The Spirit-type AIC's service, characterised by prayers for those that experience hardships, is central to its healing ministry. Continuous actions of direct and indirect healing take place, although the latter happens more often. The most common method or instrument of healing during services is perceived to be the laying on of hands accompanied with prayers. Usually patients are either called to the front of the congregation where they kneel down and are prayed for or have to stand in the middle of a circle of dancing members where they are then prayed for. Both procedures could include the laying on of hands. These healing actions are generally led by prophets who act as agents of the Holy Spirit. Sometimes the Holy Spirit is believed to utilise the congregation or performing members as agents of healing. Dancing and the singing of hymns and choruses are used as instruments to call down the Holy Spirit on patients, healers or the congregation as a whole. Even when no healing is needed members dance and sing to ensure the presence of the Holy Spirit in their midst (Hammond-Tooke 1989:136–137; Oosthuizen 1992:56; West 1975: 92–93).

The consumption of Holy water to induce healing during services is also widespread. According to West (1975:94) the AICs' procedures followed to bless and administer healing water are roughly the same. The sources of water may vary between taps and different kinds of natural origins, such as rivers, fountains and springs. During my fieldwork I became aware that when water derives from natural origins it is usually referred to as living water. Water is usually poured into big containers and then blessed by means of prayer and sometimes stirred with a sacred stick or staff. The blessing is typically carried out by a prophet or prophets and/or other senior officials of the church. Usually, blessed water is poured into glasses or other kinds of small containers for consumption at a certain time before, during or after the service. At the St John's AFM congregation of Guguletu, for example, before each service, adults and children each received a cup of blessed water for immediate consumption. Sometimes a second cup was consumed seemingly when there was a

need for extra strength and healing. The emphasis on blessed water as an instrument of healing is indicated by its Reverend who said that “[p]eople who drink the water survive when difficulties are encountered” (Thomas 1999:88).

The consumption of Holy water is not only administered for healing purposes, but is also used as a purification and protective remedy. Although it is difficult to differentiate between Holy water’s healing and purification purposes, both can generally be categorised as methods of indirect healing (Hammond-Tooke 1989:137; West 1975:94). Kiernan (1990:107) was, however, able to differentiate between these two purposes among the Zulu-speaking Zionists of KwaMashu. He (1990) said that Holy water is consumed for healing purposes only when a prophet has prescribed it as such. In general, members drink Holy water for purification purposes, especially to cleanse states of pollution or ritual impurities to enable health and prosperity.

3.4.2.2 Healing by immersion

The second main method of healing identified by West (1975:95), though not used often, is the immersion of a member in a river or a stream and sometimes even in a swimming pool. Although this method reflects the same procedures followed during baptismal practices it is understood to be a purification rite that not only cleanses, but can also heal various complaints and provide protection and strength to the patient. Hammond-Tooke (1989:137) found that it was most commonly carried out when members were possessed by evil spirits and could therefore also be interpreted as a form of exorcism executed in the name of the triune Christian God (see Daneel 2000:333–334).

According to West (1975:95) many Spirit-type churches conduct the act of baptism, and healing by means of submersion on the same day, giving rise to the idea that members frequently undergo more than one baptism. According to Daneel (2007:247), especially Zulu-speaking Zionists associate repetitive submersions with the removal of “sin, sickness and pollution”. Kiernan (1990:106), for example, witnessed how a female member of a Zulu-speaking Zionist church was immersed 34 times in rapid succession. He thought this to be an exhausting experience.

However, when he spoke to her afterwards, she told him that the immersions had actually increased her strength.

3.4.2.3 Healing by consultation with a prophet

West's (1975:92) third identified main mode of healing is by means of consultation with a prophet before, during or after services or at any other time convenient to the prophet. Prophets, who are primarily found in Spirit-type AICs have received, as indicated earlier, the special gift of the Holy Spirit/God or in other words act as agents of the Holy Spirit/God. As agents of the Holy Spirit/God they are able to recognise, explain and heal illnesses that include various kinds of misfortune, and predict future events (West 1975:98). According to Daneel (2007:219) it is also in this context that the healing powers of the biblical Jesus are introduced. West (1975:98) added that prophets are every so often assisted in their tasks by ancestor spirits, although this is not necessarily true for all AIC prophets. Not all prophets have the same abilities to prophesy as some are perceived to be more successful than others. According to Hammond-Tooke (1989:138) the presence of successful or so-called strong prophets determines to a large extent the prestige and popularity of an AIC's healing ministry (see Oosthuizen 1992:3, 28–30).

In contrast to prophets of the New Testament, AIC prophets do not preach the Word of God because this is the task of church officials, such as ministers, evangelists and priests/preachers. AIC prophets are specifically known as healers and as such follow a holistic approach, closely associated with the traditional African perception of healing, by linking “physical healing with social healing, that is the restoration of disturbed relationships, which implies those relationships which destroy socio-economic well-being” (Oosthuizen 1992:16). It is interesting to note that Kiernan (in Hammond-Tooke 1989:138) found that among Zulu-speaking Zionists “the prophet instigates the healing process and determines what should be done, but the execution of his prescription is controlled and often carried out by the minister-preacher”. Based on my own observations this is also true for the healing ministry of the ZCC in Marabastad as will be discussed later in Chapter 4 (see Kiernan 1990:154–155).

Most prophets have experienced a calling in terms of an illness, which was usually accompanied by dreams or visions, and only curable by another prophet. In general it is believed that the Holy Spirit instigates a calling. It has, however, also been recorded that ancestor spirits appeared in dreams or visions and instructed kin to go to a certain church to become prophets. Any person, regardless of their gender, who possesses the special gift of the Holy Spirit, can become a prophet. Therefore, even though Spirit-type AICs are mostly characterised by male-dominated hierarchies, women, as prophets, can play significant roles within their churches (Daneel 2007:216; Oosthuizen 1992:22–23, 31–32; Steyn 1996:8; West 1975:98–99). Of interest here, although not true for all AICs, West (1975:104) found in the Soweto area that most prophets were females. Kiernan (1990:154) indicated that among the Zulu-speaking Zionists, there is also a relatively strong presence of female prophets, but that the strongest prophets were always known to be men.

Although female prophets fulfil the same healing functions as male prophets, according to Daneel (2007:221), they tend to focus more “on women’s procreative roles and problems, such as barrenness and family conflicts deriving from such conditions, pregnancies, childbirth, and infant care”. Within a Spirit-type AIC community female members receive more support against gender discrimination, the humiliation of barrenness, and witchcraft or sorcery attacks on their fertility, pregnancies, children and family lives. Female members also receive support against accusations of witchcraft practices to which they are specifically susceptible when they show extraordinary abilities. As mentioned earlier, when found guilty of witchcraft practices, even though they might be innocent, the community could punish them even with death. In a Spirit-type AIC community women with extraordinary abilities are protected in the sense that they are usually recognised as prophets (Daneel 2007:222). AICs, therefore, become safe havens for women and, by extension, their children. The greater number of women present in AICs could be the result of these female-considerate circumstances.

Many female members aspire to become prophets, though not everyone has the ability or special gift to do so. They are then able to become prayer women, whom West (1975:98) also referred to as half-prophetesses. Prayer women usually receive authority from their church to visit the sick and pray for them. In Zimbabwe, for

example, the ZCC of Mutendi initiated female groups known as the *Ruwadzano* (Mothers Union) help the needy and pray for the sick, among other functions (Daneel 2007:218, 224–225). Although prayer women have no specific training, they can sometimes assist prophets in consultations, but are not able to prophesise themselves (West 1975:99).

Some prophets received formal training and others not. The prophets interviewed by West (1975:184) had all received training from the prophets who had healed them. Typically various ritual actions were repetitively executed during prophetic apprenticeships, such as purification rituals by means of immersions in a river, vomiting, the interpretation of dreams, and the making of offerings to ancestor spirits in a request for assistance. Some of the prophets Oosthuizen (1992:37–38) had interviewed in the greater Durban and Johannesburg area were also trained by the prophet who had healed them, though others had not received any training. His interviewees' training entailed approximately the same elements West (1975:184) had indicated in his study, though some reported that they had also received teachings of various illnesses and the treatments thereof.

The prophets who had not received any training explained that they had never been in need of training, because they received the continuous guidance and instructions of the Holy Spirit. Often, after their initial healing experiences, they had begun to speak in tongues, which is perceived as a sign of the “spirit of prophesy”. From that moment onwards it is believed that the visions and dreams experienced are injunctions from the Holy Spirit. The Holy Spirit is believed to reveal all kinds of information such as the kind of problems a patient is experiencing and instructions to provide healing. Several of Oosthuizen's (1992:37–38) research participants indicated the intermittent assistance of the ancestor spirits by means of dreams and visions during their training and/or during their usual prophetic activities.

Prophets treat a variety of ill-health symptoms, of which Hammond-Tooke (1989:139) indicated symptoms such as “stomach pains, fainting, backache, toothache and constipation, but also more general matters such as marital discord, disappointment in love, loss of memory and housing problems”. West (1975:104) noted that the methods used by prophets generally display uniform characteristics,

although the details may vary. Patients can be interviewed, given advice, prayed for and blessed in various ways. The most common healing aids or instruments are perceived to be the Bible and Holy water and could be supplemented by the use of a Holy stick and candles. The prescription of river immersions, baths, enemas, steaming and emetics are widely used. A variety of remedies can be prescribed. The following are the most common: water, water mixed with ash, seawater, ash, vinegar, vinegar mixed with sugar, sugar, lime, rosewater, Vaseline (petroleum jelly), Vaseline mixed with methylated spirits or sulphur, sulphur, milk, bicarbonate of soda, oil, methylated spirits, Epson salts, certain foods and the wearing of colour-specific vestments and cords (Oosthuizen 1992:39, 42–46, West 1975:104, 108).

Hammond-Tooke (1989:140) suggested that prophets might have introduced medicines into their treatments to satisfy their patients' psychological need for remedies with substance. Most prophets are opposed to the use of a diviner's or herbalist's medicines and therefore, possibly consciously, incorporated mostly inorganic substances that would clearly differ from those used by the diviner or herbalist. In general, the contrast between the two kinds of medicines is used to differentiate between Christian and non-Christian usage.

Although prophets are usually opposed to the use of biomedical remedies, when a patient has contracted a serious affliction such as a broken leg or arm, a prophet could suggest biomedical treatment. One of my research participants, Mr F, explained that this kind of affliction is in need of an instant remedy, which is not always possible with prophetic treatment (Personal communication 2002). Hammond-Tooke (1989:140) wrote that for roughly for that same reason most prophets interviewed by West (1975) were also not opposed to the use of biomedical treatment. A few of them, however, did perceive this course of events as a sign of a lack of faith.

Prophets are known to be extremely successful in attracting patients. West (1975:121–122) summarised the possible reasons for this popularity, which are also cited by Hammond-Tooke (1989:140) and independently indicated by Oosthuizen (1992:139). A very important reason seemed to be prophets' assertion to practise divination and healing through the power of God, thus being assisted by the greatest

of all supernatural beings. Of equal importance is prophets' ability to understand the nature of afflictions, those that are classified as biomedical diseases and especially illnesses that are embedded in traditional African sociocultural settings. To be able to heal an affliction it is necessary to know the history of the patient, in other words "how" and "why" this particular patient contracted an affliction. As indicated earlier, biomedicine is usually able to indicate scientifically how an affliction was contracted, but mostly not why this particular patient was targeted. Thus, another reason for their popularity is that a prophet, by means of Godly inspiration, is able to explain how and why this particular patient, and not somebody else, is suffering from the affliction. Because the prophet is able to understand the nature of the affliction and the reasons for its presence, s/he is able to provide a more convincing diagnosis than a biomedical practitioner. A prophet's diagnosis explains the unknown and therefore enables the patient to replace the fear of the unknown with understanding.

After a prophet has given a convincing diagnosis and explanation, the patient receives appropriate treatment. The prophet's healing repertoire includes a variety of impressive ritual actions and techniques, which are conducted in familiar surroundings perceived as more acceptable than those of biomedical practitioners who practise medicine in a clinical environment alien to the patient's usual circumstances. Because the patient is able to understand the diagnosis and therefore the reasons for a particular treatment, even if treatment is not successful, it will at least have satisfied the patient's need for appropriate treatment (Oosthuizen 1992:39; West 1975:122–123; see Herselman 2007:65). In short, it seems that the popularity of the prophets can be reduced to the fact that prophets share or at least understand, to some extent, the traditional African world-view.

3.4.3 Notions about causation

It has now become clear that the prophet's ability to indicate the cause of an affliction is of great significance to successful healing practices; first, because the treatment depends upon an affliction's specific cause and second, the cause explains the meaning of the affliction to the patient whose understanding is necessary to enable effective healing (Hammond-Tooke 1989:140). Knowledge of the notions of possible causes of illness including various kinds of misfortune, this time within the context of

Spirit-type AICs, is essential in understanding the nature of healing (Oosthuizen 1992:54).

Prophets function essentially in a paradigm of Christian thought. Afflictions of all sorts are therefore primarily interpreted as the result of sinning, and as the result of the actions of the devil and his demons or as more commonly referred to in a Spirit-type AIC context, evil spirits. The belief in the presence of evil spirits explains the consistent occurrence of exorcisms. The human agents of causation in a traditional African setting, witches and sorcerers, are also acknowledged (Hammond-Tooke 1989:141–143; Oosthuizen 1992:54, 65). According to Steyn (1996:7) when this is the case, in contrast to the traditional practitioner who turns the evil medicine on the evil doer, the prophet will locate the evil medicine in order to neutralise its negative effects and then protect the patient from further harm.

Although it has been indicated that prophets on rare occasions do point out witches, some of the ZCC members Anderson (2000:279) consulted, regarded prophets who follow this procedure to be false prophets. They said that pointing out witches spreads hatred in the community and God could not be responsible for such a destructive prophesy. Another member said that prophets are not supposed to point fingers at others, but are supposed to bring about healing. Some of the prophets that Niehaus (2001:41–42) consulted in the Mpumalanga area, had told him that “only those with witchcraft in their blood can pinpoint witches”. Prophets therefore definitely do not want to be associated with such an action.

As soon as people become members of Spirit-type AICs, they are usually without delay by means of Holy Spirit-inspired ritual action protected against evil assaults. However, if a member has committed a sin, the Holy Spirit might withdraw this protection. This means a member can again become a target of the actions of evil doers such as evil spirits, witches or sorcerers. The same as in a traditional African context, Oosthuizen (1992:54) indicated that many of the causes of afflictions caused by evil doers can be traced back to relationships of jealousy, resentment and hatred. When this kind of affliction is obtained and the prophet is able to identify its cause, s/he will provide instructions for healing that usually comprise methods of reconciliation with the supernatural and acts to cleanse and protect the member

against further evil assaults. When members acknowledge ancestor spirits, but disregard some of their needs, ancestor spirits might also withdraw their protection, which means that members will suffer the same consequences. Healing will then be obtained by means of similar ritual actions administered when the Holy Spirit has been offended. Interestingly enough, the same as in a traditional African setting, God, and in this regard the Holy Spirit or the ancestor spirits, are not believed to be directly responsible for serious afflictions (Hammond-Tooke 1989:142–143; Steyn 1996:7).

From the above discussion and according to Hammond-Tooke (1989:138–139), there are seemingly remarkable parallels between the roles of prophets and traditional African healthcare practitioners. One of the more prominent similarities was indicated by West (1975:184–186), who highlighted that both are commonly known to receive a mystical vocational calling, usually by means of an illness that can only be healed with the help of another prophet or traditional practitioner. The healer will then indicate that this affliction is a calling to become a prophet or traditional practitioner and that their health can only be restored if the calling is answered. Also of interest is that both vocations accept male and female practitioners. Both vocations tend to place emphasis on acts of purification particularly by means of vomiting and the making of offerings, during training or initiation. Both practitioners practise foretelling and healing through the power of the supernatural. On the whole, both vocations also accept witchcraft and sorcery as important causes of illness that includes various kinds of misfortune (Hammond-Tooke 1989:138–139).

Hammond-Tooke (1989:142) further indicated that as with traditional practitioners, many prophets also recognise ancestor spirits as causative agents and their appeasement as a necessity. He (1989:139) also specified that both are commonly known to treat physical symptoms, “but also more general matters such as marital discord, disappointment in love, loss of memory and housing problems”. Both practitioners are able to operate within a group context and on an individual basis, and the emotional setting of their vocations is rather similar (Hammond-Tooke 1989:138–139). Lastly, of significance is that both practitioners tend to promote health in a traditional African way, in the sense that health is not simply perceived as

the absence of disease, but as a state of physical, social, and spiritual well-being (Steyn 1996:4).

Pertinent differences between the roles of prophets and traditional practitioners are undeniably also present. Daneel (1974:224–225, as quoted in Anderson 2003:110) highlighted one as being “the medium through which extraordinary knowledge is obtained”. Prophets perform healing actions by invoking and speaking on behalf of the Holy Spirit or God, professed as the most superior of all supernatural beings, even though they might sometimes be assisted by the ancestor spirits. In contrast, traditional practitioners rely mainly on the assistance of the ancestor spirits and sometimes other magical means (Steyn 1996:4). Another significant difference that has been indicated is that the remedies used by a prophet are ultimately reliant upon the patient’s prayers and faith that the triune Christian God is responsible for their healing process or the treatment could be unsuccessful. On the other hand, the success of a traditional practitioner’s medicine is believed to depend largely on its natural or magical/impersonal supernatural contents (Daneel 1983:34; West 1975:123, 184). It is, however, important to note that the effectiveness of both the prophet’s and the traditional practitioner’s remedies are significantly enhanced by a person’s faith in such healing practices. This is for that matter true for biomedical treatments or any other treatments as well (see Craffert 1999:128; Janzen 2002:163–164).

3.5 Conclusion

In an anthropological context the concept of ill-health could refer to disease or illness. Disease is perceived as a biological phenomenon, because it specifically indicates a malfunctioning of the human body and is therefore fundamental to biomedicine, which typically confines medical explanations to scientific knowledge. Illness could also indicate a malfunction of the human body, but primarily refers to a patient’s perception and experience of ill-health that consists of a personal, but mostly a sociocultural dimension. Thus, illness could include disease but is not restricted to it. The perception of ill-health classified as illness may therefore vary between different sociocultural settings. Healing practices in an AIC context, considering their particular sociocultural circumstances, can be classified as non-biomedical healthcare systems. The concept of illness is, hence, applicable.

To understand why a person is perceived as being in need of treatment, it is important to know when a person is perceived to be healthy. The meaning of health is also determined by a patient's perception of health, which again includes a personal, but mostly a sociocultural dimension. In many societies, for example, being healthy is perceived not only as the absence of disease, but also as a state of physical, social and psychological well-being. Therefore, to understand what the concept of ill-health and its corollary condition of health entails, knowledge of its particular sociocultural setting is necessary.

In this study the concept of healing is applicable because its meaning is embedded in a particular sociocultural setting that specifies the treatment of illness, which includes all kinds of hardships characteristic to non-biomedical healthcare systems such as those found in an AIC context. Whereas curing is perceived in the context of disease, the meaning of which is fundamental to a biomedical healthcare system, and indicates that a patient's biological functions are being restored to normal. However, both actions are obviously not mutually exclusive.

In a traditional African sociocultural setting people tend to define their whole lives in terms of their religious beliefs. In this context it is understandable that health-seeking beliefs are closely associated with religious convictions. In a traditional African reality, characterised by its strong religious overtones essentially nothing harmful like illness, which includes all kinds of hardships, happens by chance. Healing practices, therefore, can only be understood with knowledge of traditional African cosmology (theory of the universe). In this study I have used the life-force scheme to explain in a simplified manner the general workings of traditional African cosmological thoughts.

In short, traditional African cosmology comprises the notion that every person, supernatural being and all aspects of nature are interconnected by means of the presence of a life-force and that a balanced presence of this life-force has to be maintained. This life-force is neutral in nature and perceived to originate from God. A disruption in the balanced presence of life-force between one of the links, which could be caused by a human or supernatural agent, will lead to some kind of illness,

such as a bodily affliction, unemployment or the failure of crops that affects the whole community. The balanced presence of life-force is experienced by a feeling of unity, harmony, protection and prosperity in the community context. Communal activities such as cheerful conversations, various forms of arts such as dancing and singing, various ritual acts such as prayers and rites of purification and protection, wisdom and moral behaviour are used to maintain and reinforce a community's equilibrium. In this regard it is important to note that in a traditional African community participating members include the living and the dead, meaning the ancestor spirits. Healing is therefore a religious act of reconciliation in an attempt to re-obtain the balanced presence and flow of life-force. Consequently, the causations and corollary treatments of illness identified by a traditional healthcare practitioner will differ from those recognised in a biomedical healthcare system.

An affliction only becomes meaningful to a patient when its cause, which imparts a specific sociocultural meaning, has been identified and this requires that the condition be attended to in an acceptable way. Usually only when this process has successfully been accomplished will the patient's effective recovery become possible. Essentially nothing happens by chance in a traditional African setting. To identify the original cause of an affliction, the questions "Why me?" and "Why now?" need to be answered. It is, therefore, understandable that a patient who derives from a traditional African sociocultural background will find it difficult to accept the individually based biomedical causation, diagnosis and treatment indicated by an allopath (biomedical practitioner) who practises in a mostly western, clinical and therefore unfamiliar and not specifically sacred setting as plausible. In many cases patients find it difficult to obtain satisfactory healing due to this uncertainty.

Spirit-type AICs are characterised by the active participation of members in church services in which healing activities are fundamental. Male and female prophets, who share or at least understand to some extent the traditional African world-view, usually assisted by other church officials like ministers or priests/preachers, play a key role in healing practices. Emphasising that they are guided by the Holy Spirit, prophets identify causes of afflictions that include those that are embedded in a traditional African sociocultural setting and subsequently provide socioculturally acceptable treatments. For patients, the identification of an acceptable causation

means that something that was unknown to them has been explained. The unknown has now become recognisable, which often results in fear being replaced by understanding, which enables the patient to accept and to be satisfied with her/his given treatment even if successful healing was not obtained.

It seems that Spirit-type AICs aim to provide Christian solutions to problems such as physical distress, unemployment, poverty, barrenness, lonesomeness, evil spirits, sorcery and witchcraft in order to assist faithful members who uphold traditional African values in the attainment of salvation especially in the here and now. In short, the popularity of the healing ministries of Spirit-type AICs appears to be connected to their ability to understand the causation of such afflictions, which then enables them to provide satisfactory explanations and treatments thereof.

With this kind of basic knowledge it is now possible to meaningfully investigate the healing practises of the ZCC as executed by members of the Marabastad congregation.

CHAPTER 4

THE NATURE OF HEALING IN A ZCC MINISTRY: SPATIAL SETTING AND CODE OF CONDUCT

4.1 Introduction

I will describe my experiences and the explanations obtained of the physical layout of the church ground to enable an anthropological understanding of the setting in which healing services are conducted. Everyone has to adhere to the correct dress code to enter the church's premises and receive healing. Different church happenings also entail different kinds of attire, such as when members participate in the choir and the *mokhukhu* (the history of which is outlined in section 2.7.3 and more detailed descriptions given in sections 4.2 and 4.3). I will attempt to describe the preferred dress code for members and non-members during different activities and happenings and to discuss the possible meanings and functions attached to the different attire, accessories and colours.

The ZCC has specific rules and regulations concerning conduct. Members and non-members who attend a service have to comply with certain rules and regulations, including various prohibitions, when entering the church grounds. Members, however, have to observe various behavioural rules and regulations outside the church grounds as well. To enable a better understanding of what a ZCC member's commitment to the church entails, and how a visitor should proceed to be able to visit the church grounds, I will discuss the general rules of conduct that I encountered during my studies.

Participants in healing services such as members, prophets and *baruti*, each fulfil a particular role. I will attempt to outline how participants acquired their status enabling them to fulfil their particular roles within a healing service. Then I will explore the Bishop's role in the ZCC as a healing community.

To conclude I want to share some of the ways in which I often unexpectedly obtained information that has been incorporated into this particular chapter and the next, which specifically deals with my ethnographic fieldwork experiences. Through informal conversations held at Unisa and often in my social environment as well

many people have tried to help me by relating some of their personal ZCC experiences or they have introduced me to ZCC members. Since these conversations were once-off experiences I have not always included the names of these helpful people as research participants. However, many times these people confirmed previously acquired data or added interesting examples of healing procedures. Then, as discussed in section 1.5.1, as a result of my participation in ZCC services, I received a considerable number of explanations about correct behavioural procedures throughout services from different helpful members who were not necessarily research participants. Because their assistance happened “on the go” I was not always able to ask their names. I underwent prophesying sessions and rituals of healing numerous times during which I received explanations from different helpful *baruti*, male and female members, and sometimes even from prophets, again without always being able to formally introduce them to this study. I also gained valuable information concerning ZCC rules and procedures during sermons when preaching *baruti* and female members who preached during Wednesday services (see section 2.7.2) lectured about the ZCC’s rules of conduct. I have cited information obtained this way as (Personal experiences/observations date/s).

4.2 Spatial setting of the Marabastad ministry

During the times I spent in the field from 2002 to 2003 and during 2011, I attended services at the ZCC of Marabastad. Marabastad is situated a few blocks north of the inner city of the City of Tshwane in Pretoria, Gauteng, South Africa (See Figure 1: Map of South Africa).

Although it is difficult to capture an exact description of the church premises I will attempt to sketch it as clearly as possible. In addition, please consult Figure 6: Layout of the church ground. At the Marabastad congregation the main services (see Chapter 5) are conducted on Sundays, Wednesday and Fridays. Healing activities, however, are not restricted to services, but are conducted on the church grounds throughout the week and wherever else it is required, for example, at a patient’s residence. As such, I was occasionally visited by *Moruti Moya* at home where he prepared blessed liquids for my consumption. The church premises can be visited every day between approximately 8:30 and 17:30. The ZCC’s healing service is free

of charge and not limited to ZCC members (see Mahafha 2002:30). Any person in need can make use of this facility irrespective of their age, gender, religious background and race as long as they adhere to the correct dress code, behavioural rules and have no malicious intent. Daneel (1974:208) also indicated that the healing ministry of the ZCC in Zimbabwe was available to the whole community. At Marabastad during weekdays, the healing ministry is typically managed by *baruti* and other church representatives who are usually either on pension, vacation (which could include a day off from work) or unemployed (Personal experiences 1996, 2002–2003, 2011).

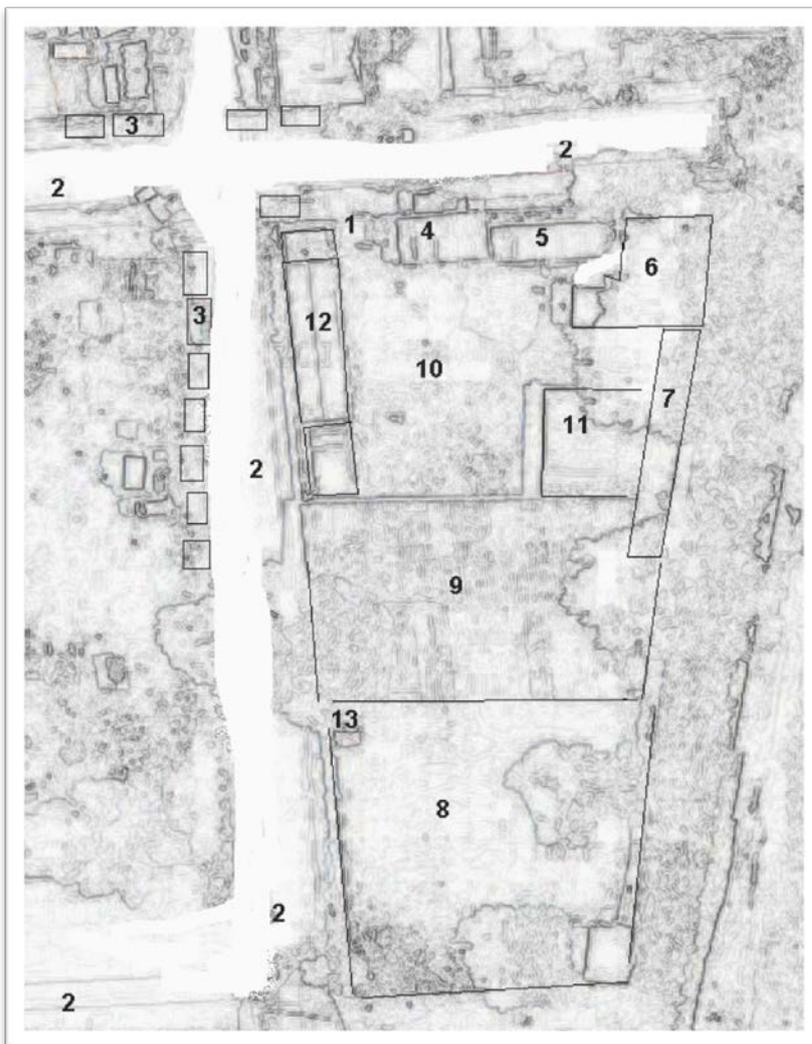


Figure 6: Layout of the church grounds

Legend of Figure 6:

- | | |
|--|--|
| 1. Gate of entrance | 8. <i>Mokhukhu's</i> place of gathering and performing area |
| 2. Parking area/ street parking | 9. Sanctuary |
| 3. Informal market stalls | 10. Open area |
| 4. Healing shelter | 11. Sheltered area where women dressed in personal clothes are also seated during services |
| 5. Ablution facilities | 12. Administration offices |
| 6. <i>Sebéšô</i> (place where the fire is burning) a referred to as <i>kgôrô</i>) | 13. Entrance to <i>mokhukhu's</i> place of gathering and performing area |
| 7. Prophesying area | |

(All items are referred to in the text as Figure 6:1, 6:2, etc.)

When you arrive at the ZCC premises in Marabastad the first structural features you will notice is a partial fence comprising a corrugated iron wall and a cement-slab wall with the entrance gate (see Figure 6:1) on its northern side. If you arrive by car you will be able to park in the parking area or on the street (see Figure 6:2) located to the western side of the premises. Although not reserved for ZCC members only, church officials take turns to keep a watchful eye on cars that are parked in this area during services. This is where *Moruti* Mampuru usually reserved a parking space for me.

Informal market stalls (see Figure 6:3), located to the northern and western side of the church premises, sell fresh vegetables and other foodstuffs like corn on the cob and freshly prepared suet dumplings. A variety of other merchandise is sold here as well; for example, many of the ingredients needed for a prophetic prescription (*ditaelo*)²¹ such as different kinds of teas, coffees, cacao, Vaseline, cooking oil popularly referred to as fish oil²², green woollen ZCC caps for women and white plastic bottles of all sizes for storage purposes of blessed liquids. On my second visit I was recognised by some of the saleswomen who welcomed me back with smiles (Personal experiences 2002). They said that attending services had a tendency to become addictive especially because of its revitalising qualities, which most of us need. After a bit of chit-chat they hurried me on to enter the church's premises, worried that I would miss out on some of the exciting procedures.

Still being an inexperienced participant I was under the impression that the women referred to the prophesying sessions as exciting mostly because this was to me an extremely exciting experience. Later, however, it became apparent that all church activities are perceived as exciting, and they most probably referred to the dance and singing activities that transpire before every service. The dance formation in

²¹ The direct translation of the word *ditaelo* is according to the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:26) instructions or commandments. In a ZCC context it is used to refer to the message coming from God, the Holy Spirit and sometimes ancestor spirits, which is mediated by a prophet and entails a prescription of some sort. Mrs T (personal communication 2011), for example, explained that prescription is in this context a more appropriate translation because it implies that certain actions are prescribed to obtain health. Irrelevant of the language members are speaking, the word *ditaelo* is usually used and only occasionally members translate it as "prescription" or "instruction" (see Anderson 1999:9).

²² When I saw some of the salesladies outside the church grounds frying fish in sunflower oil I understood why these oils are referred to as fish oil, namely the oil that is used to fry fish. Some years after this insight I read Müller (2011:81) who was also prescribed fish oil and at first could also not understand why regular sunflower oil is referred to as fish oil. His mother introduced him to the possibility that the oil is used for frying fish.

which everyone, and therefore myself as well, was welcome to join was what I first thought was called the *mphô*.²³ This is not really the name of the formation, but is the name of the commonly sung sacred church song during performances and perceived as specifically special and peculiar to the ZCC. As a visitor you quite quickly become aware that while church songs are performed some members tend to enter short trance-like states during which they make loud ejaculations of sound. This kind of behaviour is perceived as a sign of the presence of the Holy Spirit, and therefore one of the reasons why participation is perceived as such an honour.

Before any person is allowed to enter the gate it is imperative that they undergo a cleansing ritual. This cleansing rite is conducted by means of sprinkling people with *mêêtse a thapêlô*,²⁴ translated by members as blessed living water or water of prayer (see Anderson 2003:112; Lukhaimane 1980:67; Mafuta 2010:96). There is usually at least one male member on duty in front of the gate to administer this blessing.²⁵ Müller (2011:32) very appropriately referred to him as the gatekeeper, which I will do as well. The gatekeeper first splashes blessed living water from a tin once or twice onto your face, and then once or twice onto your back. Sometimes a little bit was also poured into our cupped hands, and sometimes we were given a little sip from the tin. The force with which the blessed living water is splashed onto people sometimes differs from person to person and also from visit to visit. In general participants arrive rather soaked at the other side. I have never witnessed anyone wipe the blessed living water obviously from their faces or any other part of their bodies. The blessed living water is usually left to dry by itself. Similar to Müller's (2011:27) recount of his experience, it took me some time to get used to this as the procedure has a tendency to produce a degree of bodily shock.

²³ *Moruti Mampuru* (Personal communication 2002) told me that *mphô* means gift. The same explanation is given in the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:114). More information on activities surrounding the *mphô* is given in section 5.2.1. Some scholars have referred to the *mphô* as *mpoho* such as Müller (2011:200). I, however, have used the previous spelling because *baruti* and Mrs T who had assisted me during my field research had spelled it that way. Yet, they also said that the spelling is not really of importance because the spelling differs between the different dialects of the Northern Sotho language.

²⁴ According to the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:90) *mêêtse* means water and *thapêlô* prayer (1997:158).

²⁵ During the times that I participated in ZCC services I was regularly informed that blessings are perceived as acts of cleansing, healing and protection. When I have used the word blessings in a ZCC context it therefore refers to all the latter actions.

Anderson (2000:149) referred to the cleansing ritual at the gate as the “gate test” in that if a person was experiencing an illness or any other kind of affliction this could be revealed to prophets (the gatekeepers) at the gate. Mafuta (2010:96) who cited Anderson’s research in his study consequently named this cleansing ritual the “gate test” as well. *Moruti* Mampuru (Personal communication 2002–2003) agreed that illnesses could be revealed to prophets at the gate, but that the so-called “gate test” is in essence perceived as an act of cleansing that is usually carried out by a *moruti* or any other male member who may or may not be a prophet. Lukhaimane (1980:66) corroborated this explanation, but added that it is “also done to welcome visitors”. If prophets are present at the gate they do sometimes become aware of a visitor’s afflictions. According to my own experiences, however, these revelations are not restricted to times when people enter the gate, but can transpire at any time during a person’s visit to the church grounds. This information was confirmed by various research participants (Personal communication: *Moruti* Moya 1996; Mrs A, Mrs N 2002–2003; Miss S, Mrs T, Miss H 2011; Personal experiences 1996, 2002–2003, 2011).

Daneel (1974:300) used the concept of a “gate test” in his much earlier study of Mutendi’s ZCC in Zimbabwe and this might have motivated Anderson to apply it in his study as well. Daneel (1974), however, used this concept to refer to one of the procedures carried out by the prophets before the administration of Holy Communion,²⁶ which is performed once a month. Prophets would stand outside of the gate to seek out members that had not confessed all their sins to the appointed ministers or evangelists before entering the church’s premises. The Holy Spirit would point out a disobedient member by making the prophets shake and shout viciously when they passed him or her. The prophets would then redirect this particular member to the church officials who were specifically appointed to listen to the confessions of those that had failed the “gate test” (see Daneel 2007:332).

After you have entered the gate at the Marabastad ZCC premises, when turning left, you will see against the fence a shelter (see Figure 6:4), in front of which *baruti* perform a variety of healing activities. Inside this shelter, which I refer to as the

²⁶ Holy Communion or also referred to as the Eucharist is the “Christian sacrament commemorating the Last Supper, in which bread and wine are consecrated and consumed” (Pearsal 2001: 633).

healing shelter, and behind the tables, male church officials receive patients' surplus *ditaelo* (prescription) ingredients. In general, these products have been purchased at the stalls outside the gate. Usually not the entire contents of the products, such as a packet of tea, are used to prepare prescribed medication. The names of these surplus ingredients are then together with the patients' names written in a book. If the patient needs some of these specific ingredients in the future, s/he will not have to purchase them again, but can then collect what is needed at this shelter.

At the so-called healing shelter, blessed living water poured into tins was usually made available for the purpose of immediate consumption. During one of the services when my first interpreter Martha had accompanied me, she told me that she was in immediate dire need of blessed living water. A kind *moruti* informed us that we could each help ourselves with a blessed tin at this shelter. We noticed that female members knelt on one or both knees or just bowed the upper body down slightly and then a *moruti* would hand them a tin filled with blessed living water. If nobody was available to assist, females still kneeled or bowed down and only then helped themselves to a tin of blessed living water. Male members, on the other hand, just walked up to the table and took a tin of blessed living water.

The ablution facilities (see Figure 6:5) are located on the left-hand side past the healing shelter, and the *sebêšô* (see Figure 6:6) can be seen straight ahead between the trees. Members told me that the word *sebêšô* means the place where the fire is burning (see Kriel, Prinsloo & Sathekge 1997:140). Sometimes this area is also referred to as the *kgôrô*²⁷ or *kraal*. More precisely the *sebêšô* is located in the northeastern corner of the church grounds and stretches a few metres southwards along the fence. *Baruti* and sometimes those preparing themselves to become *baruti* bless and prepare liquids for consumption and other prescribed ingredients or prescriptions in this area (see Lukhaimane 1980:67). The basic ingredient of blessed liquids is *mêêtse a thapêlô* (blessed living water or water of prayer). Water that has been blessed by means of prayer is always living water meaning that it does not come from a tap, but from natural places such as wells, fountains and rivers, and according to Mafuta (2010:95) also from the sea and rain storms. The type of water

²⁷ In the Popular Northern Sotho Dictionary it has been indicated that *kgôrô* can be translated as enclosure or court (Kriel, Prinsloo & Sathekge 1997:60).

and the location of its origin usually depend on a patient's particular *ditaelo*. During my time in the field many members received prepared blessed living water that was stored at the *sebêšô*. Again, depending on a patient's particular *ditaelo* sometimes other ingredients such as all kinds of sanctified coffees, teas, cacao, cooking oil, popularly referred to as fish oil, or salt are added. It seemed that most blessed living water to be used for consumption is first heated on a big open fire or on gas stoves, which explains why this area is referred to as the *sebêšô*. Usually only after the heating process has been completed are specific prescriptions for consumption prepared. Every time I had one of these sanctified beverages the blessed living water was lukewarm to warm, in other words it had been heated beforehand.

At the *sebêšô* other kinds of blessed objects needed for *ditaelo* purposes are also available, among others a variety of stones. In 2002 I was, for example, instructed to collect stones at the *sebêšô* for *ditaelo* purposes. More commonly, the prophet will instruct the patient to collect stones at specific areas such as a riverbank, a gravel road or from a mountaintop. Prophets occasionally also indicated the approximate sizes the stones had to be. After the stones have been collected a *moruti* will first burn them in the fire and then bless them. This procedure is usually referred to as *Go aramela*. Now the patient is instructed to put the stones into a steaming bowl and add blessed liquids. I, for example, had to add plain blessed living water. Then patients have to place a towel over their heads and inhale the steam. Members usually carry out the steaming procedures at home. Sometimes other ingredients are also added such as FG coffee or Five Roses tea and salt. This again depends on a person's particular *ditaelo* (see section 5.3).

During my 2002–2003 fieldwork period the fire and gas stoves were visible to people within the church grounds. When I returned in 2011 a corrugated wall and a stall had been built in front of the fire and gas stoves. This time only big cauldrons with blessed living water were visible behind the counter. The same as before, prophetic-prescribed ingredients that had to be prepared by church officials were handed in at the *sebêšô*.

When facing the *sebêšô*, to the right hand-side, there is another fence built parallel to the fence of the church's premises creating a rectangular area that stretches up

behind the eastern side of the sanctuary (see Figure 6:7). In this area prophets mediate patients' messages and prescriptions, referred to as *ditaelo*. For that reason, I referred to this secluded location as the prophesying area. Females and males each have their own entrance to this area. When facing the entrances from the inside, in other words from the prophets' perspective, males use the right doorway and females the one to the left. On a busy day I have seen at least 25 prophesying groups active in this area at once. A sea of ecstatic voices typically arises from this area during services. Throughout my periods of participation, it seemed that when people were called out by a prophet, the knowing that they had been chosen to receive divine guidance ignited a sense of pride as well as eagerness to learn what their divine message entailed.

At the utmost southern side of the church premises there is an enclosed area (see Figure 6:8), which is the *mokhukhu* participants' place of gathering. As I mentioned earlier, the *mokhukhu* is a ZCC dance/performance in which only male members are allowed to participate. In this area they conduct meetings and practise performances. Women are not allowed in the *mokhukhu's* place of gathering. The *mokhukhu* participants also have their own separate entrance located at the western side of the church premises. *Mokhukhu* participants are extremely committed considering that they practise and perform regularly on Fridays during the service, afterwards in the evening, Saturdays, and most Saturdays throughout the night until Sunday mornings (all night prayer services), and again during Sunday services. Sometimes they also perform during weekday evenings. Constant participation, however, is not compulsory, although many men partake on a regular basis.

The southern wall of the sanctuary (see Figure 6:9) borders on the northern side of the *mokhukhu's* meeting grounds. The eastern and western sides of the sanctuary are also walled in. There is an open space between the roof and the walls that proved to be very effective for ventilation purposes during scorching hot summer afternoons. The sanctuary's northern side is bordered with a high, rising fence. People, irrelevant of their gender, enter and leave the sanctuary through two separate gates in this fence. The sanctuary is filled with different kinds of chairs and wooden benches. During Sunday services I have witnessed between at least 600 and 800 people being seated within the sanctuary.

Inside the sanctuary, against the northern wall, there is a platform or stage. *Baruti* preach while standing on this platform during Friday and Sunday services. Usually between 10 and, I have counted as much as, 40 *baruti*, dressed in the official ZCC uniform, *mokhukhu* uniform or personal clothes are seated on this platform (see section 4.4.3 for a discussion of the role of *baruti*). *Baruti* do not necessarily stay seated throughout the entire service, but come and go as needed. Women are not allowed on the platform. If women want to talk to a *moruti* on the platform they have to kneel down to do so. I, however, have witnessed mostly senior women or women that experienced some kind of bodily affliction, going down on one knee or bowing slightly forward while communicating with a *moruti* on the platform. During female services women deliver homilies standing to the right of the platform (on the platform's western side). During general services, when facing the platform (north), women are seated in the left side (eastern side) and men in the right side (western side) of the sanctuary. Children, little boys and girls, are huddled together with their Sunday school teachers to the left of the stage (on the stage's eastern side) on special little benches facing the congregation the same as *baruti* on the stage do.

During services people are also seated outside the sanctuary, on the floor in the open area (see Figure 6:10) between the sanctuary, the *sebêšô* and the so-called healing shelter. It is in this area that the *mokhukhu*, *nkedi* and choir perform before services. A section of this open space, which borders the prophesying area, has been covered with a corrugated iron roof (see Figure 6:11). This is also where females in personal dress are usually seated during services.

When entering the gate, to your right hand side (western side) there are wooden buildings painted in the distinctive green and yellow colours of the ZCC²⁸ known as the church's administrative offices (see Figure 6:12). Typically church officials carry out various administrative activities, conduct informal and formal meetings and keep all kinds of possible instruments of healing inside such as photographs of the Bishop, church medallions, special Zion City Moria tea and coffee, and special cords (see Kruger 1971:42). Although this happened only a few times, on very busy days

²⁸ The colours green and yellow are also characteristic to the ZCC's formal attire. Both the attire and possible symbolism associated with the particular colours used in the ZCC are discussed in section 4.3.

prophets mediated my *ditaelo* and *baruti* performed the ensuing rituals of healing inside these offices.

4.3 Dress code and general code of conduct in a healing context

During the times I participated in ZCC services it seemed that the ZCC's rules of conduct, dress code, other regulations and teachings of the church are mostly taught to members by means of participation and via oral traditions. I witnessed though that articles published in the *ZCC messenger* (the official church journal) were also often used as reference in teachings. To familiarise myself with the ZCC's environment Mr D (2002), a ZCC member who also worked at Unisa, gave me photocopies of a text named '*Histori ya Zion Christian Church*' written by Mr AS Mopeli-Paulus. It did, however, not include a page with the publisher's name or date of publication. The photocopied text that was bound in book format was imprinted with the ZCC's official stamp and dated 1972. This book mostly covered the ZCC's history. I consequently had to collect the bulk of information on the ZCC's dress code and general code of conduct by means of fieldwork.

4.3.1 Dress code

To be able to enter the church premises, as mentioned in the previous section, people have to adhere to the correct dress code and to the ZCC's general code of conduct within the premises. This means that members or any other individuals when visiting the church premises must either wear their appropriate uniform or cover themselves in appropriate personal clothes. People will be ordered out of the church grounds if they do not adhere to these codes. However, when possible, senior members will stop incorrectly dressed people from entering the church grounds. The first time Martha, for example, accompanied me she did not wear a jersey or jacket. Even though I had told her that she would not be permitted into the church grounds she said that at her church this kind of attire was acceptable. One of the senior women, who noticed us waiting in front of the gate, told Martha that she had to cover her dress with a cloth, jersey or jacket otherwise she would have to wait for me outside the church grounds. Within minutes one of the salesladies at the informal market stalls gave Martha a jersey and said that she could return it after the service. Martha was amazed that the woman trusted her so easily with her belongings. She was convinced this trust was due to us attending a ZCC service.

People can only acquire the well-known official ZCC uniforms once they have been baptised. The only unbaptised people who are allowed to wear the ZCC uniform are the children of baptised members. Even when only the mother is a member she may dress her children in ZCC uniforms (Personal communication: Mrs A 2003; Mrs T, Mrs S 2011). I have often been told that the ZCC uniform and badge are only handed to a new member after the baptism ritual has been concluded (see Anderson 2000:158). Before a new uniform is worn new members prefer *baruti* to sanctify it with blessed living water right there at the baptism site or just afterwards when a *moruti* is available (Personal experiences at Moria 2003; Personal communication: Mrs T, Miss M 2011).

Some of the *baruti* who preached during the services I attended invited young people to become baptised members from the ages of 18 years old and onwards (see Mosupyoe 1999:82). Various members including a preaching *moruti* in 2002, *Moruti* Moya (Personal communication 2002), *Moruti* Mampuru (Personal communication 2002–2003) and *Moruti* Mariri (Personal communication 2011) explained that it has to be a person's own decision to become a ZCC member or a new-born in the ZCC (see Lukhaimane 1980:54; see Mosupyoe 1999:84, 86). The rationale is that becoming a baptised member entails a commitment to a new life that has to be lived according to the rules and regulations prescribed by the ZCC. Members of the ZCC community must willingly adhere to these rules and regulations. According to Kiernan (1985:98), Zionist AICs demand “the total dedication and allegiance of its members on all aspects of their lives” in order to work efficiently. Therefore, to ensure that a prospective member is fully aware of the commitment s/he is making, it is understandable that baptism is not administered at birth, but at a later stage in life.

4.3.1.1 The ZCC badge

The most important item of the ZCC attire, described by Comaroff (1985:242) as the ZCC's “icon of spiritual power”, that “...both represents Lekganyane's power and embodies it in tangible form” is the ZCC badge with its focal point a five-pointed star (Figure 7: ZCC badge). For that reason, the badge is also sometimes referred to as the star of Lekganyane. I have already given a short description of the ZCC badge in section 2.7.3, but will repeat some of it for the purposes of clarity. The ZCC badge is most easily identified by the silvery five-pointed Star of David on which the letters

ZCC are engraved. The star is attached to a round piece of black cloth that is again attached to a rectangular piece of green cloth. According to Hanekom (1975:42) a little piece of blue cloth (expanded on further in this chapter) is placed between the black and green cloth, invisible to the eye. Members pin this badge onto their clothes (uniform or personal dress) approximately above their hearts at all times, but especially during their waking hours.



Figure 7: ZCC badge (Daily Sun, Tuesday 14 April 2009, p.10)

What the ZCC badge represents can be interpreted in many different ways. According to Nchabeleng (1983:11, as cited by Müller 2011:40) the star of the badge symbolises the star referred to in the Bible's New Testament that "came from the east to show the wise men the place where Jesus was born. Because of this event, the star is believed to show people where salvation can be found, viz. Moria, Zion City".

Anderson (2000:298) described the badge as “a token of faithfulness to the church, a symbol of solidarity and unity with ZCC members everywhere”. Wearing the badge enables ZCC members to identify each other as brothers and sisters of the same ZCC family, irrespective of their ethnic affiliation. Mahafha (2002:28), for example, wrote in the *ZCC Messenger* that members of the ZCC are “one big family” who live under the supervision of God. Accordingly Lukhaimane (1980:81) stated that ZCC members are “brothers and sisters (*metswalle*)²⁹ in Christ and in the ZCC”.

To mirror how ZCC members feel about their badges some of the sayings of ZCC members were cited by Mosupyoe (1999:106): “[w]hen I see somebody wearing a badge, I feel safe”, “[s]eeing someone wearing a badge like me is like seeing my mother, brother, father or sister – no mistake there” and “[w]earing the badge gives you *khotso-peace*”. The concept of *khotso-peace* is also used in the well-known ZCC greeting shared by every ZCC member and by those who attend services regularly. In this context people greet each other by saying *khotso*, which is answered by saying *A e ate*, meaning “let it spread”. This phrase is also often uttered by *baruti* when they initiate and conclude their homilies (see Mosupyoe 1999:108).

Being able to identify each other visibly by means of the badge and keeping in mind that there are literally millions of members spread across southern Africa, members are able to assist each other wherever and whenever they are in need, for example in finding employment, transport, housing, on an accident scene or help against crime (Lukhaimane 1980:81; Mosupyoe 1999:106). I would suggest that the meaning of the ZCC badge in this regard is strongly related to the African humanistic concept of *ubuntu* (expanded on in section 3.3.1) or a kind of fellowship such as a sister- and brotherhood.

The constant presence of the ZCC badge serves as a reminder to members to comply with the ZCC rules, including the strict taboos such as abstinence from smoking, drinking and eating pork (Anderson 2000:165). By wearing the badge members become recognisable and if they do become tempted will think twice

²⁹ Lukhaimane (1980:81) used the word *metswallê* to describe the concept of brothers and sisters or relatives. In the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:93), however, *metswallê* is translated as friends and *metswalô* as relatives.

before they disobey one of the church's rules. As Mosupyoe (1999:106) said, the ZCC badge in a way "serves as disciplinary measure" and "functions as an interdict of bad behaviour". Although the badge could be easily removed in public, this is believed to not be general procedure.

Mafutu (2010:8) noted that ZCC members are in general known for their "communal and personal purity and integrity". Easily identifiable by their ZCC badges they are "preferred by many employers who recognise them as hardworking, disciplined, obedient and sober" (see Anderson 1999:1). The general tendency to associate the ZCC badge with people who are trustworthy was also indicated by Lukhaimane (1980:82). Kiernan (1985 97) ascribed these same qualities to the members of the Zionist AICs in Kwazulu-Natal. They, however, are not as easily identifiable as ZCC members because of the absence of a permanent symbol like the ZCC badge, and most probably therefore not as well-known for these qualities.

The ZCC badge is also known for its protective properties (Anderson 2000:298). Lukhaimane (1980:81) explained that at first "the badge was in itself a protective measure against criminals in urban areas". It was known that members who wore their badges were not easily attacked. It seemed that when Hanekom (1975:03) initiated his research during the 1960s the badge was already known as a symbol of protection against all kinds of misfortune such as illness, bolts of lightning, witchcraft and sorcery. Interestingly enough, his research participants had informed him that the little blue square cloth placed in-between the black and green cloth was believed to contain most of the badge's protective properties. Lukhaimane (1980:68) also referred to this blue cloth and said that it is known as *khutane* which means hidden, but added that it can be placed anywhere inside the clothes and serves "to protect individuals from assaults and lightning".

Lastly, the ZCC badge can also be used as a symbolic object of healing. According to Comaroff (1985:242), if needed, it is placed on an afflicted body part to facilitate healing. A few years ago Famke, the daughter of a couple with whom I have been friends for some time, became extremely feverish. Due to unforeseen circumstances her mother was not able to take her immediately to the clinic. The woman who was employed as their household's domestic worker was also a member of the ZCC and

asked if she could pin her ZCC emblem on Famke's clothes. She explained that she did the same when her children were sick and that this action had healed them quickly time and again. The only prerequisite for a ZCC instrument of healing to work is that a person (member or not) has to believe that ultimately God is responsible for the healing action. Famke's mother agreed and to her surprise within an hour or so Famke's body temperature had dropped to normal (see Figure 8: ZCC badge used as a tool of healing on Famke).



Figure 8: ZCC badge used as an instrument of healing on Famke (with courtesy of parents)

4.3.4.2 Men's uniforms

In contrast to the badge, the different ZCC uniforms³⁰ are gender bound and usually only worn with the purpose of attending church affairs. Mainly, three different male uniforms can be distinguished. All three uniforms are characterised by the inclusion of trousers which “in contrast with the colourful female tunics and skirts, seem to

³⁰ All the ZCC uniforms including the mokhukhu's white dancing boots can be purchased at the official Kgotso Family Store that is located in the close proximity of Marabastad (Makgobatlou 1986:12–13). *Moruti* Mampuru (Personal communication 2003) had told me that people from all over southern Africa visit this store to purchase their uniforms (see Müller 2011:81). Uniforms and other ZCC necessities can also be bought at ZCC stores situated in Zion City Moria and Podungwane or Podingwane's ZCC congregation of which the latter is located in close proximity of Lebowakgomo in Limpopo province (South Africa) and sometimes by the public referred to as little Moria.

reproduce the key gender distinctions of western apparel” (Comaroff 1985:243). The most commonly seen uniform is the *mokhukhu*'s attire that consists of a cotton khaki jacket and trousers, a yellowish-collared shirt and a brown tie (Figure 9: *Mokhukhu* uniform). A black military-like hard cap with the ZCC star attached to the front is worn together with this uniform. These caps are sometimes also worn outside the church environment. It is important to note that if the ZCC star is not attached to the front of the cap it is not perceived as a ZCC cap and by implication a person is not perceived as a true performer of the *mokhukhu* (Tshotlhang 2002:68–69).

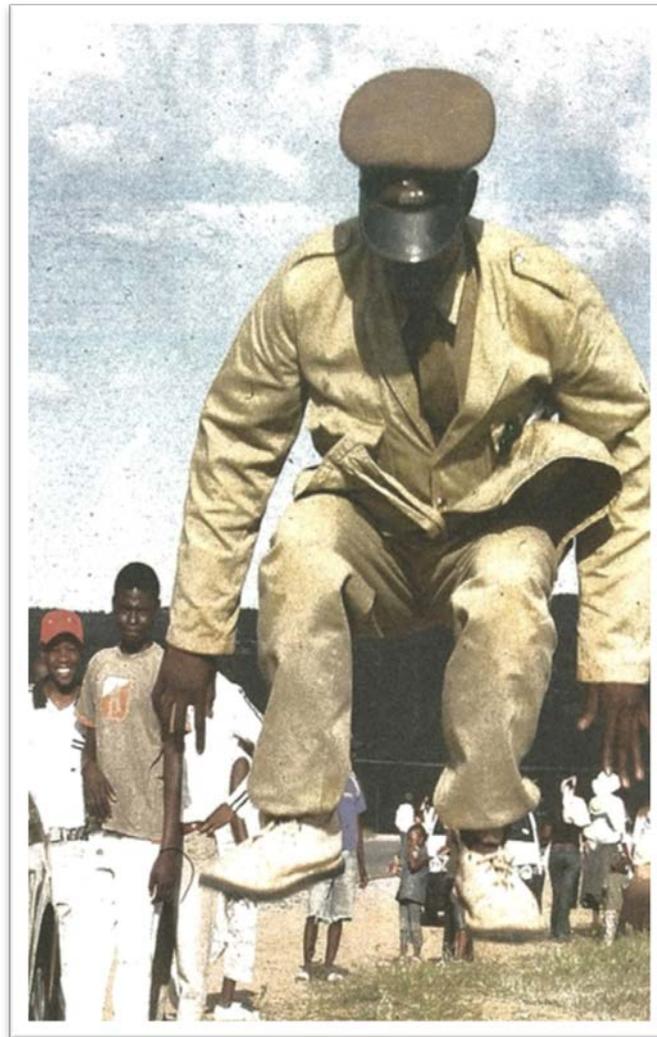


Figure 9: *Mokhukhu* uniform (Daily Sun, Thursday 9 April 2009, p.4)

Participants of the *mokhukhu* are also characterised by their unique white boots with broad black rubber soles usually made out of tyre-rubber. I was told by Mrs T and Ms S (Personal communication 2011) that these white boots are called *manyanyatha*, which in this context means *mokhukhu* dancing shoes (see Müller 2011:81). The

manyanyatha help to enhance the jumping sounds that are made during their characteristic rhythmic dance activities. Usually the *mokhukhu* performances together with the *mphô* and the female choir initiate the activities of the main services conducted on Fridays and Sundays. The *mokhukhu* members, the same as the choir, first and foremost perform to praise God. Their performances are consequently also referred to as “praising with the feet” dances (Comaroff 1985:243). Young boys that have not been baptised yet are usually dressed in the *mokhukhu*'s uniform or otherwise in personal dress (Figure 10: Young boy in *mokhukhu* attire). Comaroff (1985:242–243) described the *mokhukhu*'s attire as the official male uniform of the ZCC. It therefore seems possible that the current official ZCC attire, the bottle-green uniform, was introduced at a later stage or was not available to the members in her research area (currently known as the North-Western Province).

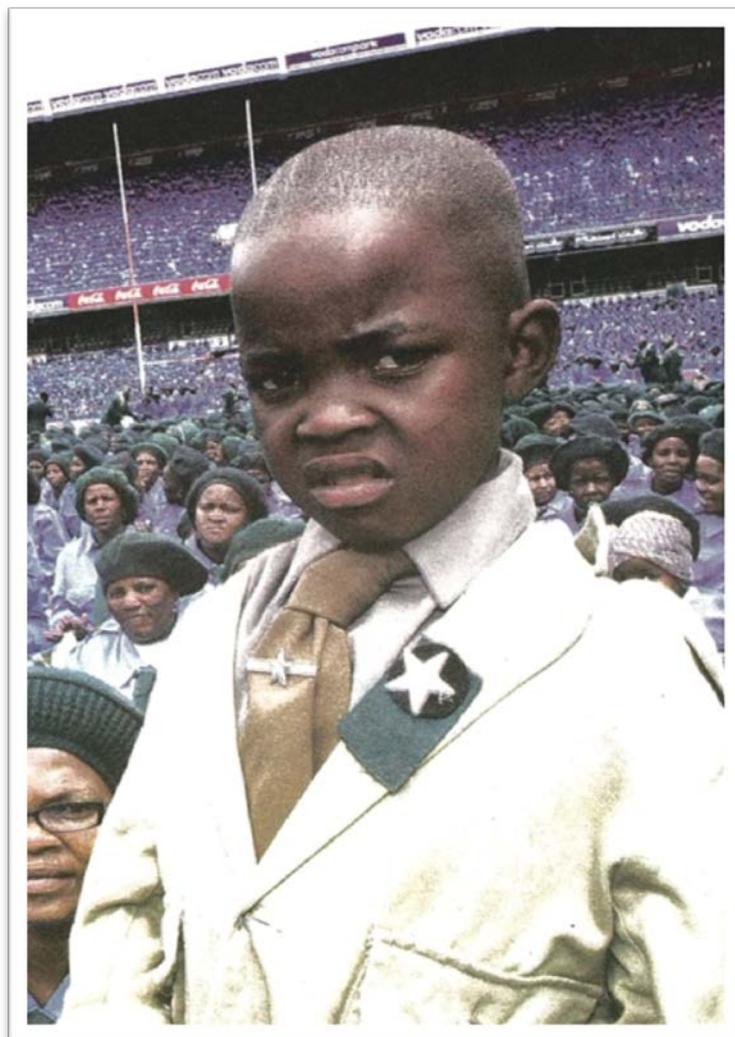


Figure 10: Young boy in *mokhukhu* attire (Daily Sun, Thursday 9 April 2009, p.16)

During services, especially on Sundays, church officials dressed in the *mokhukhu* attire typically sent around their caps to collect monetary contributions, which are utilised to fund various church activities. Here I noticed that men placed coins directly into the *mokhukhu* cap, but women dropped it in the *mokhukhu* participant's hand after which he would place it into the cap. After I had inquired about this procedure I was told that a woman is not allowed to touch a man's hat (Personal communication: *Moruti* Mampuru 2002; Mrs A 2003; Mrs H, Mrs T 2011). Mosupyoe (1999:86), who had mentioned this same prohibition, did not indicate its origination. She also wrote that men in general take their hats off when they entered a house. The same as Comaroff (1985:249), I witnessed men dressed in their *mokhukhu* attire doing this when they entered the sanctuary.

At a later stage I was told that women, in fact, may not touch any items of the ZCC male attire because it is perceived to be sacred and it might be polluted by women (more information on this follows in this section). For that reason men have to wash and iron their own attires. The women had also told me that when members (males or females) do wash their uniforms, they usually add a few drops of blessed living water to the final rinse to enhance its healing and protective properties. To protect their attire from accidental female contact men usually keep their attire separate from female family members' clothes. Mothers may only touch their sons' *mokhukhu* attires when they are not yet able to properly dress themselves or for that matter wash their own clothes. If a male uniform has been touched by a female it is preferred that it should be cleansed as soon as possible, ordinarily by sprinkling it with blessed living water. This cleansing act can be executed by a *moruti* or by members themselves.

After further inquiry it emerged that males may also not purposefully touch a female's ZCC attire. Again this prohibition seems to be in place to prevent men from becoming polluted by unclean women, but also vice-versa. I have been told that a female member's husband is, however, allowed to touch her ZCC attire. Because the ZCC uniform is perceived as a sacred dress and has to be protected against any kind of pollution it is preferred that members dressed in their ZCC attire do not make use of public transport or wear it to non-ZCC events.

If, during Sunday services, men do not participate in the *mokhukhu*, they can wear the ZCC's dark bottle-green uniform. This is perceived as the most formal and sacred uniform of the ZCC attire and is typically only worn on Sundays when the main services are conducted. This uniform consists of a dark bottle-green jacket and trousers, a white-collared shirt, a dark bottle-green tie and black shoes (Figure 11: Male members' most formal attire). The dark green jackets are characterised by brass buttons and sometimes yellow braids. The presence or absence of yellow braids is used to indicate the status of a member (see Hanekom 1975:50, 54). A *moruti*, for example, can be identified by a yellow braid on his collar, where ordinary male members are recognised by plain green collars. The presence of braids on the bottom of the sleeves is also used as an indication of a member's status. The minister of a district, for example, has two yellow stripes on the bottom of each sleeve and the Bishop has three yellow stripes.



Figure 11: Male members' most formal attire (Daily Sun, Thursday 9 April 2009, p.12)

Anderson (2000:162) argued that only older (mostly over 40 years of age), married men of the church wear the bottle green uniforms. According to my research participants, among others *Moruti Mampuru* (Personal communication 2002–2003), this uniform is the official male attire of the ZCC and therefore any baptised male member may wear it. Usually, however, younger men participate in the *mokhukhu* and therefore wear the *mokhukhu's* attire. Older men, according to *Moruti Mampuru*, do not necessarily have the energy to train as viciously as the participating members of the *mokhukhu* do. Consequently, when older male members are not dressed in personal clothes they will rather wear the bottle-green uniform. During my fieldwork

experiences I, however, have witnessed many older male members participate in the *mokhukhu* (Figure 12: Young and old *mokhukhu* participants).

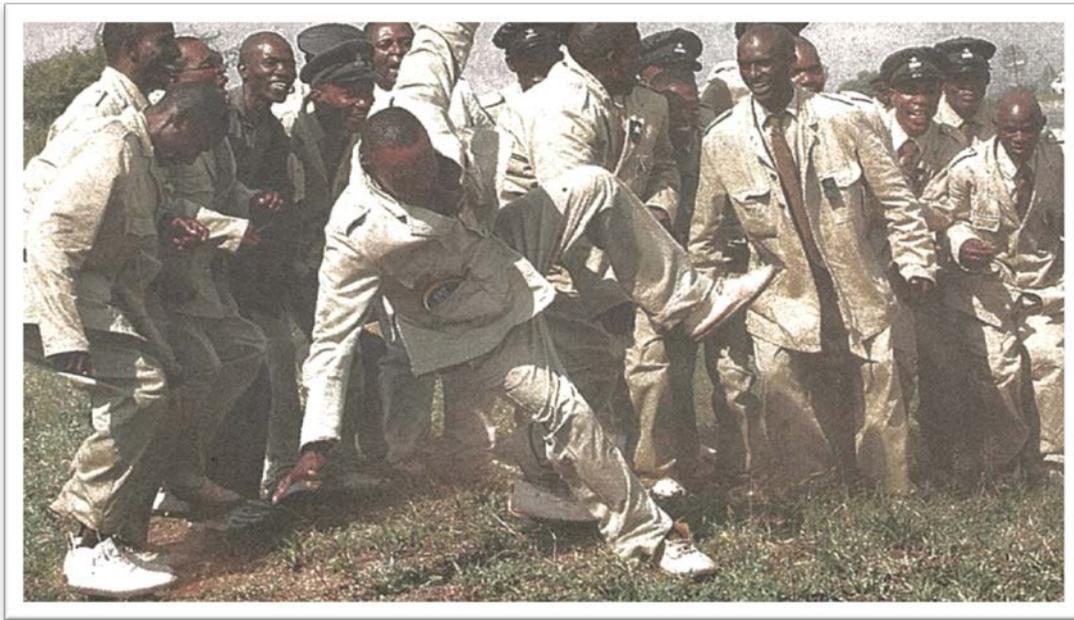


Figure 12: Young and old *mokhukhu* participants (Daily Sun, Thursday 9 April 2009, p.10)

Another uniform available to males is that of the *nkedi* (*Bonkedi*) performers (Figure 13: *Nkedi* performers). Not many references are available on the *nkedi* performers. The only academic reference I could find was that of Müller (2011:35) who saw them performing at the Mamelodi congregation close to Pretoria and at Zion City Moria. I witnessed their performances several times at the Marabastad premises (2002–2003) as well as at Zion City Moria (2003). According to my own observations (2002–2003), only when men perform the *nkedi* do they wear their uniforms. At the Marabastad congregation the *nkedi* is usually performed in small numbers, anything between five and 25 dancers. Their Scottish-looking attire consists of khaki shorts around which a Scottish kilt is wrapped, a khaki-brown military-like jacket, long beige socks, brown leather shoes and foot rattles made of leather and dried seeds.

I found a possible association between the ZCC and a Scottish influence when the first Bishop, Engenas Lekganyane, worked as a Free Church of Scotland evangelist during the early 20th century in the Mamabolo area. This was Engenas' first association with a church (see section 2.7.1). Müller (2011:110) argued that the *nkedi* attire as well as the Bishop's brass-band attire resembles "First World War images of the Gordon Highlanders giving it to some extent a seemingly old-

fashioned militaristic” character. Then another possible association I found was through James (1997a:457, 459) who did extensive research on the *kiba*, a South African migrant genre dance. The *kiba* has a traditional origin among Northern Sotho-speakers who adapted and performed this dance in the compounds and townships in and around the Johannesburg area, previously known as the Reef, and the Pretoria area since the beginning of the 20th century. Participants in the male version of the *kiba* also wear Scottish kilts. It seems that the *kiba* and the *nkedi* share a similar traditional ethnical origin, and therefore James’ (1997b:124) argument that the *kiba* most probably derived their Scottish influence from the Transvaal Scottish regiment during the 1950s might have relevance for the *nkedi* attires as well.



Figure 13: *Nkedi* performers (Beeld, Tuesday 22 March 2005, p.15)

During my fieldwork experiences (1995; 2002–2003; 2011–2012) men were always clean-shaven. According to Anderson (1999:288; 2000:162), as indicated in section 2.7.1, men are not allowed to grow beards and moustaches in the ZCC. One of the reasons why Engenas seceded from Mahlangu’s ZAC in 1920 was Mahlangu’s decision to make it compulsory for male members to grow beards. Engenas’ inclination towards clean-shaven male members is clearly a rule that has remained at least up unto the time I had ended my visits to the ZCC for this study’s purposes (2012). Men are also not allowed to cut or shave strange hairstyles, such as some of the hip-hop artists tend to do. Müller (2011:38) witnessed how *baruti* became

extremely upset with a young man because his hair was shaven “in an artistic wavelike spiralling pattern in accordance with contemporary popular fashion among young African men”.

4.3.1.3 Women’s uniforms

A variety of church uniforms each with its own functionality is also available to female members. It is preferred that women wear black shoes and, if possible, closed shoes rather than sandals. This rule, however, is not an absolute. I have witnessed women wearing various dark-coloured shoes together with their uniform and if they were wearing personal clothes some wore various coloured, closed shoes and sometimes even sandals.

The most formal and sacred female attire consists of a bottle-green, calf-length skirt, a yellow blouse with a rounded collar, a bottle-green headscarf and black or dark coloured, closed shoes (Figure 14: Most official female attire). The same as the men’s formal dark green uniform, this female attire is also only to be worn during main services. For women, main services are those conducted on Sundays and the special female services on Wednesdays.

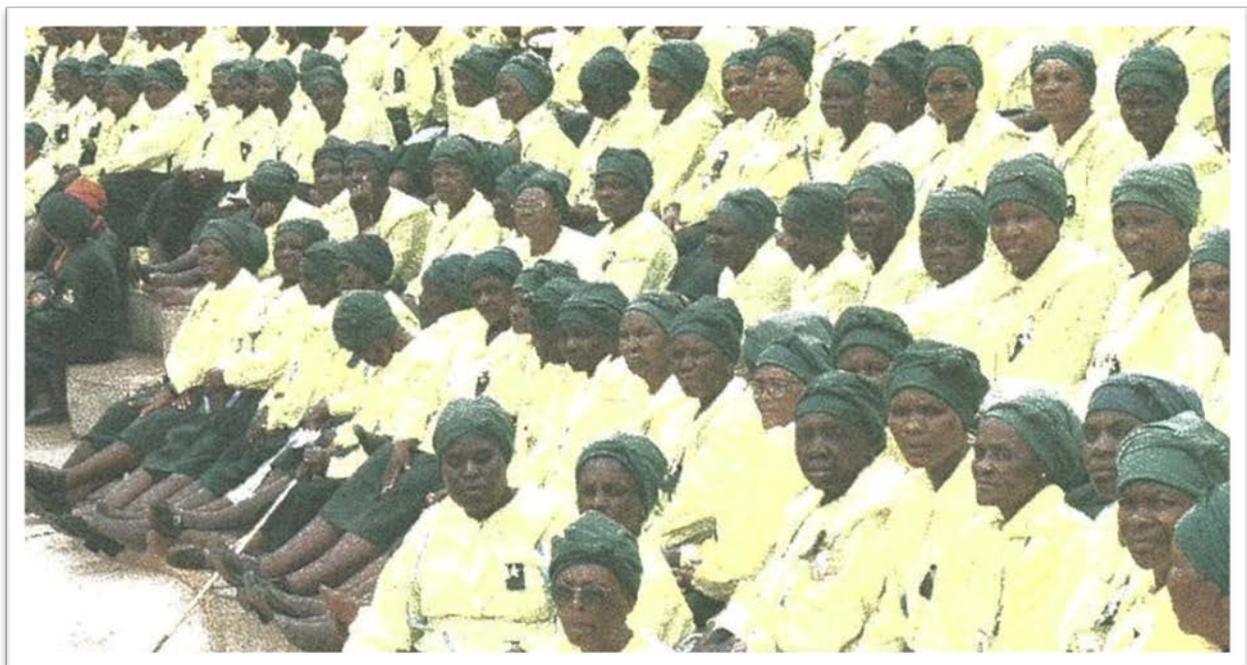


Figure 14: Most official female attire (Daily Sun, Tuesday 14 April 2009, p.8)

The yellow blouses of the formal female attire are sometimes characterised by blue trimmings. The presence of blue trimmings is an indication of a member's status. Mrs T (Personal communication 2011), for example, told me that when the blue ribbing is attached to the collar or the yellow tie, it means that the woman is a wife of a *moruti* and when the blue ribbon hangs loosely around the neck she supervises female members and visitors within the church grounds. I have seen women with blue ribbons pull down the sleeves of other female members when too much of their naked arms were exposed or fixing headgear if too much hair was visible. Some of my sleek hair every now and again slipped its cover, but would then be rectified quickly by one of these women. Sometimes, however, I also received advice from female elders without blue braids.

Anderson (2000:162) argued that the yellow and green uniforms are worn by married mothers and older women only, and the blue choir dress (a description follows below) by unmarried women. Different research participants, however, told me that the green and yellow attire can be worn by any baptised female member (young or old, with or without children, married or unmarried) because this is the official female attire of the ZCC. Then the *ditaelo* received from prophets could also prescribe this attire to any baptised female member irrelevant of their age or personal status. The yellow and green uniform, however, is perceived as the most special ZCC attire and therefore preferred to be worn by more mature women or women who have already born children, irrelevant of their marital status (Personal communication: Mrs A 2002; *Moruti* Mampuru 2003; Mrs T, Ms S & Ms H 2011).

Comaroff (1985:242–243) described the yellow and green uniform in detail and also classified it as the official ZCC attire. She, however, depicted the “tunics of bright blue” as the uniforms of the wives of church officials. At first I thought that it might be possible that during those years the uniform that is today known as the choir attire was worn by the wives of office-bearers. Hanekom (1975:109), who also conducted his fieldwork during the 1960s and 1970s, however, referred to the blue dresses as choir uniforms (Hanekom 1975:15). It is possible though that the women dressed in the blue choir uniform she had interviewed were all wives of *baruti*. However it may be that up until 2012 at the Marabastad congregation the blue dress is perceived as the ZCC's female choir attire.



Figure 15: Female choir attire (Daily Sun, Thursday 9 April 2009, p.10)

As explained above, members of the female church choir wear bright blue dresses together with bottle-green ties and berets, and preferably black or dark closed shoes (Figure 15: Female choir attire) (see Mosupyoe 1999:85). Any baptised female member, young or old, with or without children, married or unmarried, is allowed to sing in the choir. In general, however, younger women participate in the choir because, the same as the younger men in the *mokhukhu*, they typically have more energy to participate in the training/performance sessions even though they do not perform as often as members of the *mokhukhu* do. The female choir usually trains and performs during Wednesday and Friday services, on Saturdays during the mornings and the all-night prayer services, and during Sunday services. Mrs T (Personal communication 2011) told me that her mother owned both uniforms. If she wanted to sing that day in the choir she would wear the choir uniform and when not she would attend the service in her official church attire. Young girls that have not been baptised yet are usually dressed in the choir uniform or otherwise wear personal clothes (Figure 16: Young girls in church attire). I have never witnessed young unbaptised girls wearing the yellow and green uniforms.



Figure 16: Young girls in church attire (with courtesy from Mrs Dudu Skosana)

Female members can also acquire the ZCC khaki-coloured choir dresses. This dress is worn together with a brown tie, a bottle-green tunic, a green beret and dark coloured and closed shoes (Figure 17: Khaki female choir attire). According to my research participants (Personal communication: Miss S 2002; Mrs L 2003; Mrs F 2011) and my own observations (2002–2003, 2011) these outfits are worn in a less formal context than Sunday services; for example, they are worn during Friday services and when for travelling to perform at venues other than at their own congregation, such as at all-night prayer services that are conducted at the homesteads of members and at funerals.



Figure 17: Khaki female choir attire (Daily Sun, Thursday 9 April 2009, p.10)

Each congregation has a Zion City Moira *Lekgotla*, which is a court, or according to its capacities might rather be translated as a committee or council. According to *Moruti* Mampuru (Personal communication 2003) senior male and female members are members of this committee. The responsibilities of the Zion City Moira *lekgotla* varies between administrative tasks such as the handling of member's financial contributions and organising activities, such as the maintenance and development of buildings and structures on the church premises and even at the Zion City Moira. The female members of this council at the Marabastad congregation are sometimes recognised by the maroon jerseys they wear when attending services. Often they also wear distinctive greyish dresses imprinted primarily with maroon and bluish patterns (Personal observations 2002–2003).

The significance of the ZCC uniform cannot be addressed without a further explanation of its additional functionalities. Mosupyoe (1999:107) indicated that the ZCC attire “like the badges, both create and reproduce the social contract among its members”. It becomes clear quite soon after attending services that members are proud of their uniforms and by implication proud to be members of the ZCC family. It seemed that some members dressed in the ZCC attire even felt slightly superior to those dressed in personal clothes. Out of the description that will follow shortly it will

become obvious that the ZCC attire is not just any attire, it is perceived as sacred and its functionalities stretch further than adherence to an official dress code.

4.3.1.4 Implications for seating arrangements

One of the more practical functionalities of the ZCC uniform is its implication for seating arrangements, especially during Sunday services. Attendees, according to the particular attire they are wearing, each have their own allocated sitting area. Within the sanctuary (see Figure 6:9) when facing the platform the front-middle area is allocated for women dressed in ZCC official attire (yellow and green uniforms). Usually, the front rows are occupied by the most senior female members, also referred to by members as the elders, and by special visitors of which I was an example during many services. Only after I had attended several services was I allowed to sit together with other women dressed in personal clothes, although they were mostly more senior women as well.

The women dressed in choir uniforms are seated behind those dressed in the official ZCC attire. If, after they have been seated, seats are still available these may be occupied by women in personal dress. In the block immediately to the left of the platform, facing eastwards towards the side of the platform, senior female members in personal dress and in the greyish dresses with bluish and maroon patterns and maroon jerseys, are seated. As I progressed from being a special guest to a more regular visitor this was where I was allowed to sit. If enough seats were available behind these women, they were taken by junior female members in personal dress. In general, the area against the left side (western wall) of the sanctuary, facing the right side (eastern wall) is allocated for female members in personal dress. If a shortage of seats is experienced by women in yellow and green uniforms, they have the prerogative of being seated here as well. At least two thirds of the seats inside the sanctuary are reserved for women. If not enough seats are available inside the sanctuary, which was usually the case, women are seated outside on the floor, again in the left side (eastern side) of this open area (see Figure 6:10) and under the corrugated roof (see Figure 6:11).

Men are normally seated in the right side (western side) of the sanctuary. *Baruti*, many of whom will deliver homilies during the service, are dressed in various attires

and seated on the platform. The area immediately to the right (west) of the platform with the seats facing the platform is allocated for *baruti* and other senior male members dressed in the official ZCC uniform (bottle-green attire). Participants of the *mokhukhu* and, if present, the *nkedi* are seated in the area along the western wall of the sanctuary and face the eastern wall. Usually, not enough seats are available within the sanctuary to accommodate all attending *mokhukhu* and sometimes *nkedi* participants. Consequently, the remaining members are seated outside the sanctuary in the western side of this open area (see Figure 6:10). As a result of the shortage of seats, male members in personal dress generally attend Sunday services in the open space outside the sanctuary.

The sanctuary, for the purpose of attending a service, is generally, although not strictly, entered as well as evacuated according to dress code and seniority. Usually, a while before the service is initiated most of the women dressed in the official yellow and green attire and special visitors are seated in their allocated sitting area. At about the same time senior women in personal dress will start filling their seats. Usually, when most of these are seated the more junior women in personal dress fill up their allocated sitting areas. At the same time the female choir as a unit will enter the sanctuary to be seated. However, throughout this whole process members of different ranks keep trickling in.

When most women are seated, male members dressed in the dark-green uniforms will be seated in their allocated area. Hereafter the *mokhukhu* and, if present, the *nkedi* performers will enter as a unit and sit down in their allocated areas. Usually, after a communal prayer has been performed, the *baruti* will take their places on the platform. At the end of a service the congregation will exit in the approximate order they had entered the sanctuary.

4.3.1.5 Protective function and meaning of colour

A fascinating quality of the ZCC uniform is that it also fulfils a protective functionality. At various times, during prophesying sessions, I was advised to acquire the blue choir dress, because this would enhance my process of healing and protect me against further spells of misfortune (Personal experiences 2002–2003, 2011). According to *Moruti Mampuru* this kind of *ditaelo* is given to men as well, though they are instructed to participate in the *mokhukhu* and therefore have to wear the special *mokhukhu* uniform (Personal communication 2003). Comaroff (1985:205) stated that the uniforms of most Spirit-type (Zionist) AICs in South Africa are believed to be “infused with power that encases the body of the wearer like a shield”. Hence, the uniform will also enhance a feeling of safety. Kiernan (1990:112) encountered this same phenomenon among the urban Zulu Zionists. It has now become clear that the church attire is also used as an instrument of healing. In terms of the origination of this practice Mosupyoe (1999:135) wrote that one of her research participants had suggested that it could be “associated with Acts 19:12³¹ in the Bible where Paul’s clothes are used to cure the diseases”.

My prescription (*ditaelo*) to acquire the blue choir dress appears to have implied that it would be better for my health to become a baptised member because only baptised members are allowed to wear any of the ZCC uniforms. Next to becoming a baptised member wearing of the dress suggested that I had to sing in the choir. I have been told by various members, especially during Wednesday services, that the singing of sacred church songs brings about healing to the singer as well as to those to whom these songs are dedicated. The singing of church songs, but also listening to church songs is for example used as *ditaelo* as explained at section 5.2.2 (Personal experiences 2002–2003, 2011). By implication, because listening to church songs is used as an instrument of healing, singers also become actively involved in the healing process of their fellow participants and therefore I have described them as “instruments of healing” as well.

³¹ Acts 19:12 in the New Testament of the Good News Bible (1981) reads “Even handkerchiefs and aprons he had used were taken to those who were ill, and their diseases were driven away, and the evil spirits would go out of them”.

The majority of my research participants displayed no specific awareness of the exact meanings connected to each colour used in the uniforms (see Anderson 2000:163; Daneel 1974:164). Most said that khaki, green, yellow and blue are the official colours of the church and therefore sacred colours. Others explained in different words that the colours of the church enhanced the sacred process of healing, protection, peace and prosperity. According to Comaroff (1985:223) traditionally the more southern black African societies seemed to associate blue and green with “rain, water, freshness, and growth”. This explains to a certain degree the responses Mosupyoe (1999:85) received from the female ZCC members she interviewed. She (1999) said that they had told her that green symbolised “wealth and plenty”, which she interpreted to imply that “the church will continue to grow in membership and members will gain spiritual wealth”. Yellow was indicated to symbolise the sun and a flower like the sunflower, but no further explanation of its meaning was given. The blue of the choir dress was explained as representing “the clear sky and clarity of the mind”, which Mosupyoe (1999:85) interpreted as symbolising the “spiritual intelligence of ZCC members”.

Nchabeleng (1983:11 as quoted by Müller 2011:37) wrote that the original green, black and blue were chosen by the first Bishop Engenas Lekganyane and explained that:

... [t]he green symbolises the glorious green world of God in which they walk. The blue symbolises protection from physical sickness and witch-craft. Under the heavens and on earth, they are protected by the almighty God and the Bishop's power. The black piece of cloth is the mourning sign. If a family has lost a member it does not need to wear a black dress or skirt because of the presence of the black material on the breast.

Nchabeleng, however, did not explain the origins or possible symbolic meanings of the colours yellow, khaki and white.

I could not find any explanation for the khaki colour used in the ZCC attire other than in Anderson (2000:163) who noted that this colour seemingly signified “uniformity”. According to West (1975:18) most Spirit-type AICs are characterised by the colour white in their uniforms that symbolises cleanliness and purity (see Daneel 1974:163;

Turner 1968:511). In the ZCC only the *mokhukhu* boots are white. Comaroff (1985:243) argued that the boots represent an important emblem of the ZCC and being white might signify the activation of “spiritual power”. She (1985:242) further argued that the absence of white in the ZCC dress “may be associated with the more routinised form of charismatic power operant in this church; it may also be due to the fact that its members live more fully in the industrial world, and seek bolder appropriations of its large-scale secular structures”.

A general interpretation of how colours are used in Zionist AICs in Kwazulu-Natal was given by Kiernan (1991:36) who argued that:

... white and blue-green [according to him Zulu-speakers do not differentiate between blue and green] are employed in two different ways: (1) instrumentally, for the practical purpose of affirming group solidarity and group distinctiveness in situations where group parameters might possibly be blurred and eroded; (2) symbolically, to express renewal associated with healing and the recovery of health; the great renewal of Zionist incorporation in the first instance, followed by numerous complementary recoveries from exposure to sorcery.

This explanation might also have relevance for the uses of colour in the ZCC attire.

Sundkler (1961:213) had already mentioned the difficulty in finding generally accepted meanings attached to specific colours; he noted that the colours used in the attires of Spirit-type AICs are usually dictated by dreams (see Kiernan 1991:31, 35). It is, therefore, difficult to generalise the symbolic meanings of colours used in AICs, especially if the context in which these colours were decided upon is unknown (Anderson 2000:163; see West 1975:115–116). Thomas (1999:91), for example, noted that the characteristic uniform of the St John’s Apostolic Faith Mission (AFM) of Guguletu was blue and white. Mother Nku, who is the initiator and first leader of this church, had chosen these colours because they were shown to her in a vision. Due to this they were believed to have sacred healing powers.

Comaroff (1985:222) stated that “in the construction of novel formulations” she has noted that colours “simultaneously retain their earlier significance and acquire new meanings”. Mosupyoe’s (1999) research, therefore, added valuable insight into a more recent interpretation of the colours used in the ZCC attire. According to Kiernan (1991:35) it is, however, clear that “there is a need for further and more sustained research into the colour symbolism employed by modern Zionists, in the absence of which one should always be wary of drawing definitive conclusions”.

4.3.1.6 Personal clothes

As must be obvious from the above explanation, the ZCC attire is not compulsory. Men and women are allowed to wear appropriate personal clothes. When men, as either members or visitors, attend main services in personal dress they need to wear long trousers, a dress shirt covered by a jacket of some kind and formal shoes, meaning no sneakers or related kinds of informal foot wear (Personal experiences 2002–2003; see Müller 2011:111). As Anderson (2000:162) noted, this dress code has to be adhered to even during hot summer afternoons. Müller (2011:32), for example, during a scorching summer afternoon left his jacket in the car, hoping that it would go by unnoticed. The gatekeeper “firmly, although not unkindly” told him that he would not be allowed to enter if he was not appropriately dressed. I, however, observed that these rules were not as strictly applied during the combined-gender services on Wednesday mornings (see section 5.2).

When a woman, as either member or visitor, wants to attend a service in personal dress, the upper body must be covered with a dress, blouse or shirt on top of which she should wear a jacket, jersey, big scarf or blanket that has to be fastened in front by means of a zip, buttons or any other way. During services it is preferred that the arms are covered fully. I, however, have witnessed ZCC women outside the church environment wearing shorter-sleeved blouses, jackets and jerseys, which is according to Mosupyoe (1999:86) acceptable as long as the shoulders are covered. The dress or skirt is preferred to be at least calve-length, although female members do sometimes wear shorter skirts outside the church environment. Women must also cover their hair, always when they are members, but non-members definitely when attending a service or when visiting the church grounds.

Mosupyoe (1999:86) indicated that the reason for women's strict dress code is that the female body in the ZCC "symbolises God's temple and should be treated as such". Apparently her research participants indicated that "men do not have an equivalent analogy". Although men's dress code outside the church is not as strict as that of women, *Moruti Mampuru* (Personal communication 2003) indicated that the human body, both male and female, is perceived as the temple of God. Both genders have to adhere to ZCC regulations. Ramoroka (1987:21), for example, wrote in the *ZCC Messenger*, "God says: 'If anyone destroys God's temple, God will destroy him, for God's temple is sacred, and you are that temple'". Hanekom's (1975:92) research participants told him the same thing and added that this is why members may not smoke or drink alcoholic beverages.

My first research participant of this study and my interpreter, Mary, taught me the basics of the ZCC dress code. In time, I learned by means of error and trial what variations of this kind of attire were acceptable. At that stage and even during 2002–2003 I was told that none of my garments, except my shoes, were allowed to be black as it symbolises misfortune. This explanation correlates with Mosupyoe's (1999:85) findings. Kiernan (1991:27, 29) explained that the colour black in Africa is generally associated with "suffering, disease, witchcraft, sorcery and death". Sundkler (1961:214) and West (1975:177) indicated that the Zionist AICs among whom they worked also associated the colour black with death and disease. However, during my fieldwork period in 2011 some of the women were wearing black jerseys or jackets or sometimes even black skirts. I was told by helpful members that the colour black is allowed as long as it is only one item of your entire outfit. A woman's head scarf, however, may never be black. As I mentioned previously, it is preferred that women in personal dress wear closed black shoes as well, even though I have witnessed women wearing different coloured and various kinds of shoes including sandals (Personal experiences 2002–2003, 2011). I ascertained the reason for the preference of closed shoes only during my 2011 period of fieldwork, which I will explain in section 5.3.

During two special Wednesday afternoon female services in 2011, some of the female elders who presented homilies preached to the congregation about the correct dress code that female members and non-members should adhere to. We

were told that wearing trousers, even under your dress, is not allowed. Female members may never wear trousers of any kind, uncover their hair, do anything unnatural with their hair or wear make-up. One of the elders also said that it is taboo for unmarried women to look into the eyes of married men, because this might be interpreted as an invitation into their beds. It was said that visitors have to adhere to these rules within the church grounds as well. The preaching elders related that they had witnessed young and older members transgressing these rules outside the church environment. Different younger research participants such as Ms S, Ms M and Ms M (Personal communication 2011) had told me that they knew young female members who sometimes did wear make-up and trousers and did not cover their hair when going out, but would then not attach the ZCC badge to the front of their clothes. Before attending a service they would, however, cleanse themselves with blessed living water, and/or by means of confession. If someone wants to confess any *baruti* can be consulted and if possible he will conduct the confession as soon as possible or direct you to an available *moruti*.

4.3.2 Code of conduct

I was not told beforehand nor found any reference in available literature to the prohibition forbidding a woman, especially when inside the church grounds, to cross her legs when seated either in a chair or on the floor. I, however, have noticed that it is acceptable to cross your feet. The first time I sat down and wanted to cross my legs a senior woman dressed in a yellow and green uniform with a blue braid hanging around her neck appeared out of nowhere and quickly corrected my posture. She looked at me, smiled, and indicated by means of shaking her head that this was not to be done again. Throughout my visitations to the ZCC I have seen elders every now and again correcting the position of the legs of especially female visitors.

During 2002 some of my family members and friends passed away. This was naturally a considerably emotional time for me. Because *Moruti* Mampuru and I were in regular contact, I always informed him when someone close to me had died. He was always ready to console me with a few wise words. He also told me that if I was in physical contact with the body of a dead person or had attended a funeral I was not allowed to visit the church for seven consecutive days and should hereafter be

thoroughly cleansed with blessed living water by one of the church officials on gate duty. He would always emphasise that I should take enough time to heal even if it took me longer than seven days and only resume my studies when I considered myself ready to do so. The seven-day period of abstention seems continuous with the regulations of the Bible's Old Testament, specifically Numbers 19:11–16³².

Lukhaimane (1980:64) referred to this prohibition as well, specifically with regard to *baruti*. If *baruti* had been in contact with death, during their seven-day period of abstention they were not allowed to perform any religious duties. Anderson (2000:213) more specifically indicated that during the seven-day mourning period “the bereaved should stay at home, should not socialise or have sexual contact or even go to church”. He too mentioned that this period of abstention should be finished with a thorough cleansing with blessed living water. One of his research participants explained that this cleansing act removed the “darkness” from their lives.

I came upon another prohibition relating to the death of a family member when I restarted fieldwork at the Marabastad congregation during 2002. The husband of one of Martha's friends had died earlier that year. She told me that she would have loved to accompany me to the ZCC, but because she had been widowed recently was not allowed to attend services for a year. Anderson (2000:214) also encountered a ZCC widow who was observing a one-year period of mourning during which she did not attend church activities. He explained that this prohibition coincided with traditional practices, but gave no further clarification. I found a reference in Mönnig (1983:141) where he explained that traditionally among the Pedi-speakers the relatives of a diseased person were perceived to be in a condition of darkness (*sefifi*) and therefore had to follow a period of abstention. The length of this period depended on the closeness of the relationship. When a chief has died all members of the tribe had

³² Numbers 19:11-16 in the Old Testament of the Good News Bible (1981) reads “11 Whoever touches a corpse is ritually unclean for seven days. 12 He must purify himself with the water for purification on the third day and on the seventh day, and then will be clean. But if he does not purify himself on both the third and the seventh day, he will not be clean. 13 Whoever touches a corpse and does not purify himself remains unclean, because the water for purification has not been thrown over him, He defiles the Lord's Tent, and he will no longer be considered one of God's people. 14 If someone dies in a tent, anyone who is in the tent at the time of death or who enters it becomes ritually unclean for seven days. 15 Every jar and pot in the tent that has no lid on it also becomes unclean. 16 If someone touches a human bone or a grave, he becomes unclean for seven days”.

to observe a year-long mourning period, the same as when a ZCC Bishop has died (see section 2.7.2). Husbands, brothers, sisters and siblings, for example, observe a period of abstention for six months and a widow, the same as in the ZCC for a year.

I was told by female members (Personal experiences 2002–2003, 2011), who were appointed by *Moruti* Mampuru as my sponsors during services, and later again by my interpreters that I was not allowed to attend services or use *ditaelo* for seven consecutive days when I was menstruating. One of Müller's (2011:97) research participants had told him that although menstruating women were not allowed to touch ZCC products during menstruation, they were allowed to drink the Zion City Moria tea as long as it was prepared by a man. My research participants and interpreters (1995, 2002–2003, 2011–2012) told me that if I became a baptised member, I would not be allowed to wear my uniform during these days. When I asked why this prohibition was followed many told me that it is a ZCC rule and the African way, but I was also referred to the Old Testament of the Bible, Leviticus 15:19, which states that menstruating women are perceived to be ritually impure for seven consecutive days.

Lukhaimane (1980:65) related that during Bishop Engenas Lekganyane's time menstruating women were not allowed to greet a man by shaking his hand, prepare a man's food or work at businesses that were owned by ZCC members. If these women did attend services they had to keep themselves separate from all the other congregants. However, during the periods I participated in services menstrual women were not allowed to attend services at all. As I was mostly accompanied by female interpreters during services, it became quite a challenge to find days during which none of us was adhering to the menstruation prohibition. It was firmly believed that if we attended services during these forbidden days the prophets would surely find us out and send us off the church grounds. This would be extremely embarrassing and absolutely not wanted by any of us.

Kriel (1992:133–134) indicated that traditionally among the Northern Sotho-speakers this same kind of prohibition is observed. Again, from the first day of menstruation until it ends a woman is perceived to be ritually impure. To protect others she is not allowed to attend social activities, partake in any kinds of brawls, have sexual

intercourse and she should be humble and quiet and not wear new clothes or excessive jewellery. Mönnig (1983:66) explained that traditionally Pedi-speakers referred to this condition as *ditšhila*, which literally translates as dirt, but implies ritual impurity. He said that “the condition of *ditšhila* is closely connected with the critical changes of life, particularly with its beginning and its end”. Therefore, the state of pollution caused by being in contact with death is also associated with *ditšhila*. He also said that menstruating women are traditionally not allowed to enter the cattlekraal, work on agricultural lands or attend any religious activities. Among the Northern Sotho-speakers, which include the Pedi-speakers, women adhere to these avoidance rules as long as they are menstruating and therefore no specific time constraints are indicated.

Mrs J (Personal communication 2003), one of the women who acted as my sponsor during a Sunday service, told me with delight on her face that she was glad to be able to attend services again. When I asked her the reason for her absence, she explained that she had recently given birth to a beautiful baby boy. Apparently, at first she and her husband were not able to conceive, but after she had started to attend services more regularly, and followed her *ditaelo* strictly, the prophets had predicted her pregnancy and had even indicated that she would give birth to a baby boy. This baby, therefore, was her special miracle from God. She indicated that her giving birth was the reason why she was not allowed to attend services for the past three months.

Lukhaimane (1980:64–65) did not specifically refer to the latter prohibition, but mentioned that before 1930, *baruti* were not allowed to lay hands on the sick if they “lived with a woman or ate the food prepared by a woman who had just given birth (baby under three months)”, which corresponded with the timespan Mrs J had specified. According to Lukhaimane (1980:64–65) the ZCC’s restrictions associated with giving birth are based on the Old Testament of the Bible, specifically the book of Leviticus 12:1–5³³. He said that the implication of this prohibition was that *baruti*

³³ Leviticus 12:1-5 in the Old Testament of the Good News Bible (1981) reads: 1 The Lord gave Moses the following regulations 2 for the people of Israel. For seven days after a woman gives birth to a son, she is ritually unclean as she is during her monthly period. 3 On the eighth day, the child shall be circumcised. 4 Then it will be thirty-three more days before she is ritually clean from her loss of blood; she must not touch anything that is holy or enter the sacred Tent until the time of her

“became polygamists for this would enable them to stay with another wife while serving the Church as well”.

During 2003 one of the *baruti* who delivered a homily during a Sunday service also told us that women who had just given birth were not allowed to attend services. He explained that they first had to get rid of all the blood and dirt associated with the birthing process. Again this perception of dirt seems to be closely related to the Pedi-speakers traditional concepts of *ditšhila* (dirt or ritual impurity). In a traditional context, the same as when a woman is menstruating, during this abstention period a woman is not allowed to enter the cattle-kraal, work on agricultural lands or attend any religious activities. The mothers’ period of seclusion is however not measured in months, but ends when the baby’s umbilical cord has fallen off (Mönnig 1983:68, 102).

Another prohibition came to my attention when I accepted an invitation to visit the Zion City Moria. Martha, the woman who had acted as my interpreter during 2003, was instructed by *moruti* Mampuru to confer all the correct procedures to be followed when visiting the Zion City Moria. They both accompanied me on this visit. Obviously, all the above-mentioned regulations had to be adhered to. Martha, however, also whispered into my ear that we were not allowed sexual intercourse for seven days before we entered the Holy City. During 2011, I befriended two women who, to my good fortune, had been ZCC members. This enabled me to casually converse about my research and reconfirm some of my research results. One of the women, Mrs S, used to reside at Zion City Moria. Both confirmed that they used to adhere to this rule of sexual abstinence before they entered the Holy City (Personal communication: Mrs S and Ms M 2011).

4.4 Participants during a healing service

4.4.1 Membership and the role of baptism

Even though it was estimated that in 2009 there were between 10 and 15 million members in the ZCC (Khumalo 2009:3), Mosupyoe (1999:83) indicated that during

purification is completed. ⁵ For fourteen days after a woman gives birth to a daughter, she is ritually unclean, as she is during her monthly period. Then it will be sixty-six more days before she is ritually clean from her loss of blood”.

her time in the field (early 1990s) obtaining membership was not a quick process. She explained that in general a prospective member had to be informally coached for a period of time before s/he was allowed to become a baptised member (a short description of this coaching process is supplied later in this section). During my time in the field, any person, irrelevant of their gender or ethnic affiliation, was welcome to “apply” for membership of the ZCC. As Hanekom (1975:27) indicated, a prospective member’s previous religious background was not of importance. I was told various times that if I wanted to become a baptised member I just had to inform a *moruti*. I therefore came to the same conclusion as Lukhaimane (1980:77) that the ZCC perceives all people to be children of God and therefore everyone is welcome.

There are a few reasons why a person might not be allowed to become a baptised member. First, when individuals are too young as one can only be baptised from the age of 18 years and older. If one or both parents of a child are members s/he may wear the official ZCC attire and badge until s/he reaches the age of 18. I was told by various members that if an individual does not want to be baptised at this age the ZCC attire and badge have to be returned. Youth younger than 18 who want to attend ZCC gatherings, and consequently participate in healing activities, but have no parental connection to the ZCC, are allowed to do so. I was, however, told that they are not allowed to wear the ZCC attire and badge until they have been baptised.

Mosupyoe (1999:83) noted another reason for the refusal of baptised membership is when a prospective member does not conform to the prescribed rules and regulations of the ZCC during her/his period of informal coaching or as she referred to it “sponsorship” According to my own experiences, during this initial time of participation a person is made aware of the ZCC rules and regulations by different knowledgeable members. Members themselves, however, do not refer to this process as a sponsorship. Mosupyoe (1999:83) went on to say that one of the prerequisites to successfully completion of a “sponsorship” is the regular attendance of church services and meetings. She said that this so-called sponsorship is organised when a person, irrelevant of her/his gender, has informed a *moruti* that s/he would like to become a baptised member. The sponsors assigned by this *moruti* will then guide the prospective member informally through the church’s teachings,

rules and regulations. Usually men guide prospective male members and women prospective female members.

According to Mosupyoe (1999:83) the period of informal training could take up to three months and even longer if sponsors are not happy with the prospective member's performance. As soon as sponsors are satisfied with the trainee's ability to participate meaningfully in religious activities on a regular basis, the prospective member is questioned by elders, again a woman by women and a man by men. After this process is successfully completed the minister of a congregation has to give his final approval before baptism can be administered. According to Lukhaimane (1980:77), however, during the days of Bishop Engenas Lekganyane (1910–1948) prospective members were “not seriously tested or questioned in any way”. Hanekom (1975:61) also did not refer to any kind of informal or for that matter formal training enabling a person to become a baptised member. He did mention that during his time in the field (1960s-1970s) people seemingly were not catechised³⁴ before baptism.

During conversations on baptism, especially with *baruti*, I was referred to the New Testament of the Bible, Mathew 3:13–17³⁵ and Mark 1:9–11³⁶ repeatedly. The same as Müller (2011:38), I found that baptism was enshrouded in much more secrecy than any of the other healing acts conducted within the church grounds. *Moruti Mampuru* (Personal communication 2003), however, did share some information concerning baptism with me. He said that the only way to perform baptism is by means of threefold immersion preferably in living running water such as a river. Lukhaimane (1980:54) noted that sometimes people used to be baptised in dams as well. Baptism by means of threefold immersion follows that of John Alexander

³⁴ According to the New Oxford Dictionary of English (Pearsal 2001: 288) catechism is a summary of the principles of a religion in the form of questions and answers.

³⁵ Matthew 3:13-17 in the New Testament of the Good News Bible (1981) reads “13 At the time Jesus arrived from Galilee and came to John at the Jordan to be baptized by him. 14 But John tried to make him change his mind. ‘I ought to be baptized by you,’ John said, ‘and yet you have come to me!’ 15 But Jesus answered him, ‘Let it be so for now. For in this way we shall do all that God requires.’ So John agreed. 16 As soon as Jesus was baptized, he came up out of the water. Then heaven was opened to him, and he saw the Spirit of God coming down like a dove and alighting on him. 17 Then a voice said from heaven, ‘This is my own dear Son, with whom I am pleased.’”

³⁶ Mark 1:9-11 in the New Testament of the Good News Bible (1981) reads “9 Not long afterwards Jesus came from Nazareth in the province of Galilee, and was baptized by John in the Jordan. 10 As soon as Jesus came up out of the water, he saw heaven opening and the Spirit coming down on him like a dove. 11 And a voice came from heaven, ‘You are my own dear Son. I am pleased with you.’”

Dowie's early CCAC in Zion (CCAC) in the USA (see section 2.6.2). Like *Moruti Mampuru* (Personal communication 2003) said, any other form of baptism is regarded as meaningless (Mosupyoe 1999:82–84). *Moruti Mampuru* (Personal communication 2003) also explained to me that when John baptised Jesus Christ, some of his life-force (he used the Afrikaans word *krag*) was bestowed upon the water. Therefore, if you are baptised in this same way, in other words by means of triune immersion in a river, you will also receive some of Jesus' life-force. Zulu-speaking Zionists, Kiernan (1978:29) explained, also consider baptism to increase a person's *Umoya*³⁷ (life-force/power). According to Daneel (2007:231) the water for the duration of baptism is perceived as the Jordan River of the Bible in which Jesus was baptised and, as such, baptism is perceived as the participation in the body of Christ. It is therefore understandable that Lukhaimane (1980:56) wrote that “[t]o members of the ZCC there was one way of getting to Jesus Christ: through baptism in water”.

The same as in the ZCC of Mutendi in Zimbabwe (Daneel 1974:206), baptism is perceived as a prerequisite for the attainment of absolute health (Personal communication: *Moruti Moya* 1996; *Moruti Mampuru* 2002–2003; *Moruti Mariri* 2011). Although improvements in health are definitely possible before baptism, it is suggested that only after baptism “the Holy Spirit begin[s] to function effectively in the patient” (Daneel 1974:206; see Daneel 2007:231). According to Daneel (1974:206) this seems to be a subtle way to convince possible converts to become baptised members. Anderson's (2000:158) research participants emphasised the necessity for baptism as well. One of them told him that “just as Jesus Christ had to be baptised by immersion in water before he received the Spirit and began doing miracles, so a person who is not baptised in this way shouldn't expect to receive the Spirit or do anything for God”. Just to emphasise this perception I have quoted Mahafha (2002:28) as well, who stated in the *ZCC Messenger* that only after baptism “are we all inspired by the Holy Spirit”.

³⁷ The Zulu term *Umoya* is associated with wind, air or breath and has since the arrival of Christianity been associated with the spirit. “There are different degrees of *Umoya* power working within a Zionist congregation, which are revealed in transactions entered into the course of healing work. *Umoya* therefore stands for a whole “technology” of mystical powers” (Kiernan 1978:28).

As soon as prospective converts are ready to be baptised, but before they are allowed to enter the water, they have to confess all their sins to a *moruti*. I have heard this being stated by various *baruti* who delivered homilies during services and was confirmed by *Moruti* Mariri (Personal communication 2011), Lukhaimane (1980:55) and Mahafha (2002:30). According to Daneel (2007:257), confession is a means to purify people to make them worthy to enter the waters of baptism. After baptism a convert is perceived to be a new-born in the ZCC, meaning that they have been cleansed of all previous sins (the concept of sin is expanded on in section 5.4) (Anderson 2000:58). In this regard, one of the preaching *baruti* during a Sunday sermon in 2002 told the congregation that as soon as members have been baptised they should try their very best not to trespass any of God's rules or the ZCC's regulations, because the ZCC baptises people only once (see Hanekom 1975:91). He, however, added that if you do commit sins, to be cleansed you will have to confess them to a *moruti*. He said that confession must be seen as an "instrument to talk the sins you have committed out of your system". At the Marabastad congregation, on Sundays usually *baruti* were available in front of the gate to administer this sacrament. This sacrament, however, can be administered inside the church grounds as well or wherever the *baruti* see fit. The same as in Mutendi's ZCC confessions are perceived as an instrument to purify members not only before they are baptised, but also before they enter the church grounds, sanctuary or partake in any healing activities (Daneel 2007:257).

According to Mosupyoe (1999:84) the act of baptism is carried out by a *moruti*. Only men are allowed to become *baruti*, only they have the power to initiate a person to full membership of the ZCC or, as she explained, to guide a person through a symbolic death followed by a rebirth into the ZCC community.

In section 3.4.2 I mentioned that some AICs also use the act of baptism as a cleansing ritual or an act of purification and therefore people were allowed to be "baptised" more than once (see Daneel 2007:247). As already mentioned, this is not acceptable in a ZCC context. Lukhaimane (1980:57) explained that baptism in the ZCC is "understood to be a sacrament of forgiveness of sins and not a purification rite". Theoretically speaking, if an individual was already baptised and became the target of witchcraft or sorcery, consequently stricken by illness or any other kind of

misfortune, baptism would not be used to bring about healing. There are various other methods of healing available in the ZCC to treat these kinds of afflictions.

The Marabastad congregation baptise their members in the Apies River, at an unknown location to non-members, somewhere in the City of Tshwane. I was not allowed to witness a baptism as I was not a member. Several *baruti* who had acted as my interpreters during prophesying sessions told me that if I wanted to become a baptised member, this would be executed at a sacred crystal-clear river somewhere in the mountains above Zion City Moria. In general traditional kings, other royal members, chiefs, high officials of government and white people are baptised in this Holy River at that particular spot. The *Kwenane* River, also known as the Klein Krokodil River, runs through the Zion City Moria. Members, who reside in a close proximity to Zion City Moria or are able to travel there, are usually baptised in this river. The same as Müller's (2011:123) research participants, the participants I had spoken to said that it is preferred to receive baptism at Zion City Moria, because its sacred river "is considered to be particular potent and filled with life force". I was unfortunately not able to confirm if the first-mentioned crystal-clear river and the *Kwenane* River is the same river (Personal communication: Mrs A 2003; Ms H 2011; Personal experiences 2003, 2011).

The act of baptism is often spoken about during general services. Typically at the end of services, people who want to be baptised are asked to approach the platform. Usually anything between two and 20 people and sometimes even more come forward and are then each blessed with a *mogau*.³⁸ The preaching *moruti* will then proudly announce how many prospective converts the ZCC had gained, as well as the number of people that had been baptised that day.

³⁸ *Mogau* is the Northern Sotho name given to the sanctified paper that is used to perform certain healing activities. A *mogau* can therefore be described as a symbolic object or instrument of healing. According to the Kriel, Prinsloo & Sathekge (1997:98) *mogau* means mercy. The participants I had encountered used the word *mogau* mostly because the Marabastad area where I conducted my research is dominated by Pedi-speakers. Some, however, do refer to *mogau* as *mohau*. According to the South African Multi-language Dictionary and Phrase Book (Reynierse 1991:300) *mohau* is the Southern Sotho (Sesotho) translation of *mogau*. A more thorough explanation of these blessed pieces of paper follows in section 5.3.

Now that a participant has become a baptised member of the ZCC, s/he is allowed to acquire the formal ZCC attire and participate in the ZCC's formal formations, such as the *mokhukhu* and the choir. As explained in sections 4.3 and 5.2, ZCC formations call down the work of the Holy Spirit and provide healing to the participant, to those to whom performances are dedicated and to some extent to observers as well. Even though participation in the *mphô* also generates healing, performing in the formal ZCC formations is perceived as more powerful and a great honour.

4.4.2 Prophets

Kiernan (1985:95) wrote that African Zionists commonly accept that illness, which includes various kinds of misfortune, is ultimately caused by some sort of social disturbance. As explained in section 3.3.1, social disturbances can be translated as disturbances in life-force, the source of which is considered to be God. Serving as a quick reminder, life-force is perceived to be present in the in- and out-flow between humans, nature and the supernatural (God, the ancestor spirits and other spirits). Zionist prophets, with the help of the Holy Spirit and sometimes ancestor spirits, are able to identify the disturbance in life-force, and prescribe an appropriate treatment to restore the balanced presence of life-force or maintain the social equilibrium. This holistic approach reflects the nature of illness and healing in a traditional African context (Anderson 1999:298; Kriel 1992:469).

In short, prophets (*baprôfeta*) in the ZCC are those male and female members who mediate messages from God, the Holy Spirit and sometimes the ancestor spirits with as source the Holy Spirit (Anderson 2003:108, 1999:302; Daneel 2007:219). The task of a prophet was explained by one of Anderson's (1993b:3) research participants as follows:

... [a] prophet reveals someone's problems when you go to him. He will be able to tell me deep secrets about my condition when I am sick. I should therefore not tell him what I am suffering from; he must be able to tell me exactly what I am undergoing and give me the remedy to heal the sickness troubling me.

As Daneel (2007:219) indicated, of importance here is that this kind of “prophetic diagnosis attempts to determine the traditionally perceived causation of affliction”. This information corresponds with Kiernan’s (1990:154) findings among the Zulu-speaking Zionists. Daneel (1974:214) consequently referred to this process as diagnostic prophecies or diagnostic spells of prophecies.

It is important to note that prophets do not only diagnose current causes of people’s problems, but also predict future potential problems (Daneel 1974:216; 1988:26 as quoted in Anderson 2000:282). I have experienced this myself at the Marabastad congregation when prophets in 2003 and again in 2011 predicted that I would have an accident if my car was not appropriately cleansed and protected. At each occasion *baruti* treated my car with the suitable actions and blessings (see section 5.3 for more information in this regard).

As I have already indicated, prophets can be either male or female. Generally, members explained the reason for accepting both male and female prophets is that this was God’s choice, because He is the one who bestows upon them the ability to prophesy. Comaroff (1985:246) argued that “[t]he fact that anyone of either sex may be the involuntary medium of a revelation has acted as a levelling mechanism within the hierarchical framework of the church” especially because only men are allowed to become *baruti*.³⁹

My research informants had given me the impression that prophets did not receive any particular formal training. Members can become prophets from the moment they have been immersed into the river during baptism and received the Holy Spirit. It was explained to me that a member just spontaneously slips into a diagnostic spell of prophesy and from thereon is perceived as a prophet (Personal communication: *Moruti* Mampuru 2003; Mrs R 2002; Mrs J 2003; Mrs M 2011). Consequently, it seemed that prophets are not taught any particular healing procedures. I was told that prophets will receive all appropriate information when filled with the Holy Spirit.

³⁹ An explanation of how *baruti* are chosen follows in section 4.4.3.

According to Mosupyoe (1999:88–89) members who exhibited the appropriate skills for becoming a prophet had to report to an elder and would then be allowed to enter a few months of apprenticeship. She said that both prospective male and female prophets had to be coached by a male prophet during which time they would be tested to ensure that they did have the ability to prophesy. She reported that males were only allowed to become prophets when they were 21 years or older and female members only after menopause. I, however, once encountered a young female prophet mediating *ditaelo* with a baby tied to her back and have witnessed many other young adult women prophesying during my years in the field. Anderson (1999:298; 2000:278; 2003:108) did as well.

It seemed that prophets typically had no recollection of what they had prophesied. This I became aware of after my own prophesying sessions. I would thank prophets afterwards and sometimes asked them to repeat or explain some of the given *ditaelo*. Time and again they would stare at me as if they did not know what I was talking about. When I told *Moruti* Mampuru (Personal communication 2002) about my experiences he was the first to enlighten me about prophets' inability to remember the *ditaelo* they had mediated. According to Daneel (1974:214) a prophet is not supposed to know what the Spirit reveals to her/him. Consequently, during prophesying sessions prophets have to be assisted by interpreters who are able to recall, explain and sometimes translate the *ditaelo*. Every now and again, especially male interpreters would ask us to wait outside the prophesying area because they wanted to write down my prescriptions and explain some of the *ditaelo* details I had to follow. This did not only happen to me, but to other attendees as well. My research assistant Martha was always very adamant in assisting interpreters remembering some of the finer details of my prescriptions. In general *baruti* and any other members, either male or female, can act as interpreters during prophesying sessions.

Although I have not witnessed this phenomenon often, prophets sometimes prophesy in tongues, which nobody is able to understand. Van Wyk (1973:875) reported this same phenomenon among members in the ZCC congregation he had attended. *Moruti* Mampuru (Personal communication 2003) explained that this kind of message is not translatable as they have prophesied some of God's secrets. To

speak in tongues is therefore perceived as a great honour. According to Anderson (2000:251), in contrast to many other Spirit-type AICs where any member is generally able to speak in tongues, in the ZCC this phenomenon is usually characteristic to prophets only.

My own experience of the work of prophets was restricted to the church grounds in Marabastad and to Zion City Moria. In general, I was not able to identify prophets if they were not visibly inspired or in the process of conducting a prophesying session. Prophets do not wear any specific clothing or badge that indicates their status. Sometimes prophets, who become inspired with the Holy Spirit and therefore are in a trance-like state, are characterised by hiccups, snorting, crying, breathing deeply and/or twisting their bodies in various ways. On other occasions, prophets show no visible indication of their inspired state other than summoning you to follow them into the prophesying area. According to Anderson (1999:297; 2003:108), who experienced the same kind of prophetic activities during his visits to the ZCC in Soshanguve, this kind of manifestation of the Holy Spirit is similar to those that were experienced in biblical times.

Prophets make use of two forms of consultation: prophetic consultations on request and spontaneous prophetic consultations, which can seemingly occur at any given time, but are most notably seen and experienced before, during and sometimes after services. Prophetic consultation on request transpires when a person is experiencing some kind of affliction and is in need of immediate assistance. S/he can then specifically request a prophet's consultation. At the Marabastad congregation on days when services are conducted, people can be seen waiting in gender-segregated queues in front of the entrance to the prophesying area to consult one of the prophets present. The same as when a person is summoned by a prophet, patients do not inform the prophet of their particular affliction, but wait for the prophet's inspired state to tell them what the problem is, indicate the problem's causation and the necessary treatment thereof. Although I have not experienced this treatment myself, I have witnessed the queues of people waiting for assistance and being prophesied to within the same area I have received my *ditaelo*. If needed, a prophet's immediate assistance can also be acquired by asking a *moruti* to organise

a prophetic consultation with one of the available prophets (Personal communication: *Moruti Mampuru* 2003; *Mrs T* 2012; Personal experiences 2002–2003, 2011).

Spontaneous prophetic consultations transpire on a regular basis on days when services are conducted. Prophets become inspired and will walk in-between members to seek out the individual that is in need of a divine message. When the individual is identified, a male prophet will usually clap his hands and then point with one hand or both hands held together or nod at the relevant individual (male or female) indicating that he has to be followed. A female prophet follows the same procedures when she summons another female. When she summons a male member, however, the procedures differ slightly. She will kneel down on one knee or on both knees, or will bow slightly forward and then usually will clap her hands and point at the specific male member with one hand or both hands sometimes clasped together.

Everyone, within the ZCC environment respects prophets immensely, regardless of their gender. This respect for prophets is as old as the ZCC itself. One of the first prophets of note was a female prophet. In this regard, as referred to in section 2.7.1, Tshotlhang (2002:68) wrote in the *ZCC Messenger* that the prophetess Rosinah Rabothata initially instructed Engenas Lekganyane to search for a church that baptised with water and where the Holy Spirit was active. Many members consequently regard the prophetess Rosinah Rabothata's instructions as one of the first prophetic acts leading towards the establishment of the ZCC.

When an individual is summoned by a male or female prophet, all activities are postponed until *ditaelo* have been revealed. As Anderson (2000:278) explained "women prophets play a prominent role, as this is the office in which they are usually unrestricted". If a female prophet, for example, indicates that she needs to reveal a senior male member's *ditaelo*, even if this senior male member happens to be a *moruti* seated on the stage, he will follow her immediately without any hesitation.

After being singled out an individual will follow the prophet into the secluded prophesying area (see Figure 6:7) adjacent to the sanctuary. A little group is now formed, comprising the prophet, the chosen participant, and at least one interpreter.

Everyone will sit down on their knees, bottoms as close as possible to their ankles and heads huddled together. Participants' hands are usually placed on the outside of each knee, fingers pointing outwards as well. This seemed to be a natural way of kneeling down on the floor. It is now that the prophet will provide the chosen person with Godly-inspired advice. Sometimes the *ditaelo* is uttered in a very emotional way, for example, with bodily tremors, snorts, heavy breathing, crying or speaking out loud and fast, and other times it seems to transpire like a normal conversation. The given message usually entails an explanation of a particular situation in your life at present or maybe one in the future and how to correct this situation. A prescription could entail purification rituals such as being cleansed by a *moruti* with blessed living water or with the smoke of a burning *mogau*. The *Baruti* usually perform these and other kinds of healing acts (these are expanded on in section 5.3) in front of the healing shelter (see Figure 6:4). *Ditaelo* could also include instructions such as to pray more often or at specific times, to read the Bible more often and sometimes indicating specific verses, to drink blessed tea, coffee or water regularly, to eat certain foods, to visit Zion City Moria and to start participating in the choir or if you are a male in the *mokhukhu* (Personal experiences 1996, 2002–2003, 2011).

It is commonly believed that prescriptions (*ditaelo*) should be kept secret and strictly followed (Personal experiences 1995–1996, 2002–2003, 2011; see Anderson 1992:103). Nevertheless, *Moruti* Mampuru and several other research participants did occasionally share some aspects of their *ditaelo* mainly for explanatory purposes. The same happened to Daneel (1974:217).

A prophetic consultation in the ZCC, as described earlier, is usually a private affair. Typically only the prophet and one or two interpreters are present at a session. Anderson (2000:281) reported that this is not always the case in other Zionist AICs. Sometimes people's personal prophecies are given in front of the whole congregation and can cause the afflicted individual embarrassment. One of his research participants told him that after your secrets are revealed to everybody "[p]eople look at you and know all your problems ... it stops you from being proud in the church when you are exposed in this way". The ZCC, however, protects its people from this kind of exposure.

I have encountered the process of spontaneous prophetic consultation on many occasions over the past years. In the beginning, I was called out more often than most other attendees, which might be interpreted as being due to the fact that I was a white visitor. My research interpreters, however, were always black South Africans, and were summoned as much as I was. Then, the longer we participated the less we were summoned. It therefore seems that visitors, irrelevant of the physical appearances, in general are summoned more often than regular attendees. I would argue that the reason for this is that newcomers usually visit the ZCC because they are in need of healing, and therefore need more prophetic attention than regular attendees (see Müller 2011:66).

I have received a variety of prophetic messages during prophesying sessions. Prophets have told me that I was welcomed by God in the ZCC and that I should not be scared because I will find the help I was looking for. Prophets also told me that they hoped we would be able to visit the Zion City Moria together where we would then pray side by side with Bishop Barnabas Lekganyane. These same kinds of messages were given to my interpreters. I have received many prophecies concerning my physical health, emotional well-being, family affairs, and predictions of possible future misfortunate events if I was not protected and cleansed correctly. It has also happened that a mentioned physical ailment was applicable to a close family member of my interpreter Martha in 2003. Even so, she was instructed to follow her *ditaelo* strictly because that would ensure the healing of her afflicted family member. I sat in on her prophetic consultation because we thought the prophet wanted to see me and she usually accompanied me on my prophetic consultations. The prophet, however, showed no objection to my presence in her session.

I have also received messages from deceased family members, among others, from my grandmother. By implication, she is perceived as one of my ancestor spirits. I was surprised by these messages, because they entailed information that was only known to my immediate family members (Personal experiences 2002–2003). The day I received her message, the prophet said that it was the birthday of the ancestor spirit present. That day happened to be my grandmother's birthday. He also said that I used to bring her lots of flowers, which was true. Mrs A (Personal communication 2003), one of the few white ZCC female members, related a similar revelation. A

prophet had seen her deceased grandfather standing behind her and had given her an exact description of his physical appearances. The message she had received from her grandfather also entailed information that was only known to her family members.

My interpreter Martha was told during another prophesying session (2003) that she should stop secretly smoking cigarettes, because it had a bad effect on her health. She was deeply shocked, because she had never told anyone that she occasionally smoked. When we went home she said that although she firmly believed in the ZCC's healing abilities, she did not want to become a member, because "the prophets see too much". Anderson (1993b:4) experienced a similar revelation. One of his research participants was told by a prophet during a prophesying session that he was stealing from his employer and that if he did not stop stealing he would be jailed. This ZCC member, shocked by the prophet's revelation, apparently stopped stealing immediately.

During my fieldwork period I met a number of ZCC members who were not members of the Marabastad congregation, but visited Marabastad occasionally. Not wearing a ZCC uniform and most probably being white, they would usually walk straight up to me and tell me that they were visitors to this congregation as well. We would quite easily engage into conversation. Most of them were members of ZCC congregations in the greater Johannesburg area. When I inquired about the reason for their visit, the majority of them answered that Marabastad is known for its "strong prophets" and is therefore very popular among members of other congregations. Daneel (1974:214) also referred to prophets that were perceived as more "reliable" than others. According to him "a distinction is made between the various gradations of enlightenment by the Holy Spirit". As stated in section 3.4.2, Hammond-Tooke (1989:138) mentioned that "the prestige and popularity of a Zionist congregation depends to a large extent on the presence in its organization of 'strong' prophets". It therefore seems reasonable to assume that Marabastad's popularity is, among others, the result of the presence of many so-called "strong prophets". Of course, most members will argue that the strongest prophets reside at Zion City Moria (Personal experience 1996, 2002–2003, 2011–2012).

According to Hanekom (1975:63) traditionally African people were accustomed to the constant presence of the ancestor spirits who formed an integrative part of their daily lives. Among converts, this created a need for a direct spiritual and physical link with God. In western Christianity, in many cases God is felt to be too far removed as He did not form an integrative and active part of their daily lives. He further explained that in the ZCC the need for a direct link with God has been filled by the Bishop because he is perceived as God's special messenger. During my fieldwork activities it has become apparent that God's immediate and direct presence is not only experienced through the Bishop, but also through the prophets and their prophecies. Although prophets do sometimes converse with spirits of deceased family members (ancestor spirits), mediumship⁴⁰ is believed to be executed with the help of the Holy Spirit. One of Lukhaimane's (1980:25) research participants, for example, had told him that prophets are perceived "to be God's eyes in the church". I therefore argue that God is experienced as being in direct contact with each member, not only by means of the Bishop, but also by means of the prophets, who are in members' constant and immediate presence, and their prophecies. I therefore tend to agree with Müller (2011:65) who considered the prophesy ministry "a key element in the ZCC world, and perhaps one of the main reasons for the church's popularity in South Africa".

4.4.3 Baruti (priests)

Authors did not always differentiate between the role of a prophet and that of a priest. In this regard Anderson (2003:108), for example, wrote that prophets "are the ones who must pray for the sick and dispense holy water and other symbolic healing objects as the need arises" (also Anderson 1999:301). According to my fieldwork experiences that role is fulfilled by the priests (*baruti*). As referred to in section 3.4.2.3 according to Kiernan (in Hammond-Tooke 1989:138) among the Zulu-speaking Zionists "preacher and prophet exercise two separate but complementary roles in the running of the church". He added that "although prophets are important in the explanation of illness, the actual treatment of illness is the concern of the minister-preacher". Consequently, "...[p]rophet and preacher form the essential partnership which is the core of Zionist social organization" (Kiernan 1990:154). This is exactly how healing in the ZCC transpired. It is, however, possible that a *moruti*

⁴⁰ A medium in this context refers to a person who is believed to be able to contact the spirits of the dead (Pearsal 2001:1151).

could be a prophet as well, because as explained earlier, any baptised ZCC member can become a prophet. Although I have not encountered someone with this kind of status, one of Müller's research participants fulfilled the roles of both a *moruti* and a prophet (2011:91).

Baruti are the key ZCC members that carry out acts of healing (see Kruger 1971:42). *Baruti's* roles as healers entails a variety of activities from performing treatments such as cleansing people with a burning *mogau* or with blessed living water to the blessing of living water or prescribed foodstuffs, preparing other blessed liquids, and executing special blessings on outfits, cars, houses, etc. In short *baruti* are the ones who execute the *ditaelo* that people received from the prophets. As mentioned in section 4.2, I was in the fortunate position to be visited by a *moruti* at home where he prepared my prescribed liquids in my own kitchen. More often than not, however, this is done at the *sebêšô* (see Figure 6:6). It has also happened that a *moruti* who was treating me decided that I was also in need of blessed tea and accordingly prepared me a bottle without a prophet's specific *ditaelo*.

Baruti do not only prepare medicines and treat those that need healing and protection, they are also the general preachers of the church and lead all kinds of religious gatherings, such as services, funerals and all-night prayer services, administer sacraments such as baptism and Holy Communion, and listen to confessions. Although women cannot become *baruti* they do preach during female services on Wednesdays and *moruti* Mampuru had told me that they have their own timeslots at funerals usually until 14:30 (Personal communication: *Moruti* Mampuru 2003; Personal communication: Mrs T 2011; Hanekom 1975:50).

During a combined-gender service the *baruti* going to preach that day each conduct a homily. Sometimes these homilies are referred to as *dithutô*, which means the sharing of teachings or lessons. According to Lukhaimane (1980:47) the ZCC's particular kind of preaching could also be described as *kgothatšô*, which means to comfort because they attempt to comfort people facing all kinds of difficulties.

Homilies can include testimonials of miraculous healings, short readings from the Bible or a reference to a Bible verse upon which they expound enthusiastically by

means of telling stories based upon their own lives or the lives of those known to them within their own sociocultural surroundings. This manner of presenting teachings seems to enable members to more easily understand and apply rules and regulations within their own lives because they are continuous with the preaching *baruti's* lives. *Baruti* tended to focus on topics such as healing, the power and authority of God, the Holy Spirit and Christ, and the Zion City Moria. They usually also prayed for the healing of all kinds of worldly problems. I have heard requests such as “please help the leaders of the world in the attainment of peace”, “please help African leaders in their fight against poverty”, “please help those that are afflicted with Aids”, “please help learners and students with their preparations for examinations” or for help with any other difficulties that are experienced (see Müller 2011:49).

Baruti are responsible for all kinds of announcements during services such as funeral arrangements, messages from Zion City Moria and the Bishop. Members who have been successfully healed sometimes send letters of appreciation to the church's secretariat. These letters are presented by *baruti* during services. Every so often appreciative members or non-members make contributions to the church, which can include all kinds of useful products such as packets of toilet paper, envelopes and notepads which can be used to note down *ditaelo*. *Baruti* present these products together with the contributors' names during services to thank them publically.

Baruti and sometimes junior church officials manage the church grounds and organise the church's daily activities. They try to spend as much time as possible at the church grounds, mostly because they perceive this as their duty as religious leaders of the ZCC community and this is, like *Moruti* Mampuru said, where they find real content (Personal communication 2002). The responsibility of being leaders of the ZCC community is taken very seriously and perceived as a real honour. The feeling of contentment seems to be related to the perception that the premises of the church is a religious, therefore, sacred setting where they feel safe and at home and are able to obtain and maintain their own well-being as well as the well-being of others (Personal communication: *Moruti* Moya 1996; *Moruti* Mampuru 2003; Personal experiences 1995–1996, 2002–2003, 2011).

The *baruti* with whom I had established contact did not receive any kind of remuneration in return for the performance of their religious duties. Müller (2011:53) found this to be true among the *baruti* of the Mamelodi congregations as well. Most *baruti* had full-time outside employment. Their duties as *baruti* were carried out after hours, on weekends and during holidays. As soon as they became pensioners and if they still lived in the vicinity, they would spend most days at the church grounds. Kruger (1971:31) noted too that during the time he was conducting research (1960s) *baruti* were not remunerated for their religious duties. According to Kiernan (1985:91) ministers of the Zulu-speaking Zionists did receive a little financial support from their congregations, but not nearly enough to support themselves and their families. Consequently, in order to survive they also had to rely on full-time employment outside the church.

In general, and throughout my research I have rarely found it necessary to differentiate between different ranks of *baruti*. Sometimes members did refer to their elders, and to the secretary and minister of the congregation, which I have indicated as such. According to my experiences, in general members tend to refer to church officials who preach the Gospel and perform healing activities, although they have different rankings, as *baruti* (see Kruger 1971:31).

A few scholars referred to church officials as priests/preachers and prophets. Mosupyoe (1999:86–87), however, talked about priests and high priests, although she did not explain what each of their duties entailed. Schlosser (in Kruger 1971:31) referred to local preachers and ministers, which could be, according to Kruger, the same as priests and high priests. Comaroff (1985:240) explained that local congregations among the Tshidi are directed by *baruti*, which included according to her ministers, prophets, a secretary and a treasurer. Kruger (1971:35–36) and Hanekom (1975:50) indicated a further differentiation between *baruti*, namely ministers (presiding and local ministers), evangelists, elders/presbyters and deacons. It seemed that all of them are allowed to preach and perform acts of healing. It is just in the performance of other duties that their responsibilities differ. To shortly indicate the differences in *baruti*'s additional responsibilities I have used Hanekom's (1975:50) depiction of church officials, mostly because of the length of

time he had spent in the field and the wide range of ZCC congregations he had covered. He explained that next to preaching and performing acts of healing, the ministers are responsible for administering baptism, Holy Communion and listening to confessions. Their green uniforms are characterised by two yellow stripes at the end of each sleeve. The evangelist can administer baptism and listen to confessions. Their green uniform has one yellow stripe at the end of each sleeve. Elders are allowed to administer baptism. They are recognised by a yellow stripe on the pocket of the jacket of their green uniform. Lastly, the deacons wear a yellow stripe on the collar of their green uniform. Hanekom (1975:50), however, was not sure if they were allowed to administer baptism.

As mentioned earlier, only male ZCC members can become *baruti* (Mosupyoe 1999:86). I was told by *Moruti* Moya (Personal communication 1996), *Moruti* Mampuru (Personal communication 2003) and Mrs T (Personal communication 2011) that male members have to be married before they can become *baruti*. The only literature reference I could find concerning the appointment and training of *baruti* was Mosupyoe (1999:114) who wrote that only the Bishop is allowed to ordain *baruti*. However, the following information was related to me by *Moruti* Moya (Personal communication 1996) and *Moruti* Mampuru (Personal communication 2003): A male member has to be a member of the ZCC for approximately five years before he can be ordained as a *moruti* by the Bishop. Every five years the Bishop and his council send a notice to all the ZCC congregations to inform them that the time has come to ordain new *baruti*. The ministers of the various congregations now have to indicate which male members are respectable and competent candidates. Accordingly the Bishop and his council select a date on which the chosen members are requested to visit the Zion City Moria. Literally thousands of *baruti*-to-be attend this designated sermon. At 18:00 the Bishop starts with the humungous task of ordaining each member as *moruti* by the laying-on of his hands and prayer. This sermon usually only concludes in the early hours of the next morning.

It seemed that *baruti* did not receive any formal training. During their years as devoted ZCC members they would have already started to assist their congregation in fulfilling certain tasks such as administering the cleansing ritual at the gate, the distribution of blessed liquids and acting as assistants during prophesying sessions.

They are also taught by senior *baruti* on what has to be done when administering sacraments of the church. Kruger (1971:31), for example, indicated that during the time he conducted fieldwork a condition for being ordained as a *moruti* was that a male member had to be able to recite the baptism formula, which is inspired from the scripture of Matthew 28:19. As soon as they are ordained as *baruti*, experienced *baruti* continue their informal training where and whenever it is needed (Personal communication: *Moruti Moya* 1996; *Moruti Mampuru* 2003).

As mentioned earlier, *baruti*, the same as other ZCC members, are allowed to practice polygamy. According to Lukhaimane (1980:84) polygamy is perceived as a “God-created mode of life”. He said that *baruti* who felt they had to defend polygamy usually indicated that polygamy occurred even in Jesus’ family history. He further wrote that practically most African societies practise polygamy. ZCC members are therefore proud to belong to a church that accommodates their African customs. Baloyi (2002:56) noted this same perception in the *ZCC Messenger*.

Mosupyoe (1999:99) also indicated that *barutis*’ choice to become polygamists facilitates their duties as religious leaders and then referred to Lukhaimane’s explanation to which I referred in section 4.3 as well. For purposes of clarity, Lukhaimane (1980:64–65) said that during the times when men are not allowed to be in close vicinity of their wives, such as when they have given birth or are menstruating, a *moruti* is able to stay with one of his other wives enabling him to continuously serve the church. Not one of my research participants was married to more than one wife. Not that this implies polygamy is something of the past, but it seems that especially due to economic disparity and the emancipation of women it is not practised as extensively as it was in the past (Anderson 1991:101; Personal experiences 1995–1996, 2002–2003, 2011). This is, however, not an absolute statement and will definitely need further research for future reference.

4.4.4 The Bishop

The Bishop is the axis of the ZCC. He is perceived as the human origin of all healing, God’s chosen prophet and therefore “the chief mediator among mediators with the Holy Spirit” (Comaroff 1985:238). The Bishop represents the highest authority in spiritual matters and administrative matters (Anderson 1992:102; Hanekom

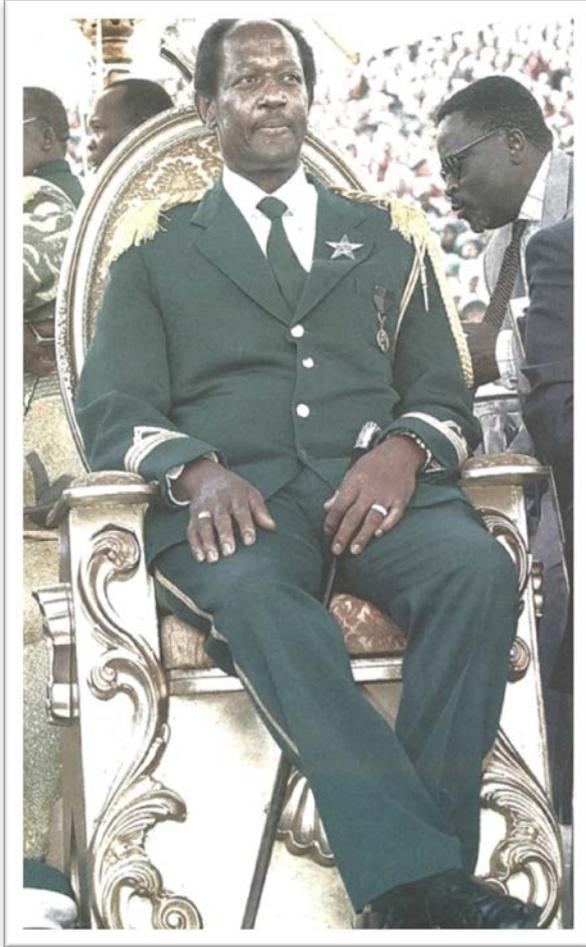


Figure 18: His Grace Bishop Barnabas Ramarumo Lekganyane (Daily Sun, Thursday 9 April 2009, p.2)

1985:66). Similar to a traditional paramount chief, the Bishop is expected to find solutions for his people's spiritual, social, material and political problems (Hanekom 1975:62). In the fulfilment of his duties, again similar to a traditional paramount chief, he is assisted by a family inner council, mostly comprising brothers and uncles, and by an advisory council comprising elders who are also mostly blood relatives (Hanekom 1985:50; Lukhaimane 1980:25–26; Mosupyoe 1999:115). Similarly, as indicated by Mosupyoe (1999:105) “[s]uccession in the church depends in practice, if not in theory, to a great extent, on Bapedi succession rules”. Therefore, in line

with a patrilineal society, succession is

transferred to the eldest surviving son of the Bishop's first wife (see Comaroff 1985:240; Lukhaimane 1980:97). Members accordingly accepted that Engenas passed his prophetic and healing powers after his death to his son Edward and Edward after his death to his son, the current Bishop Barnabas Ramarumo (Anderson 1999:295). As mentioned in section 2.7.2, it is therefore understandable that Lukhaimane (1980:33) described the Bishop as a true “*Kgoši ya Masiona* (King of the Zionist)” (Figure 18: His Grace Bishop Barnabas Ramarumo Lekganyane).

The Bishop is perceived as the ZCC's most successful healer having the strongest life-force of all (Hanekom 1975:71; Müller 2011:194). The Bishop is renowned for his omniscience and the ability to heal a variety of afflictions such as barrenness among women, unemployment and droughts. In fact, in times of drought people come from all over southern Africa, such as from Botswana and Mozambique, to sing, dance and pray for rain together with the Bishop. The Lekganyanes have always been

known for their strong rainmaking abilities by means of prayer (Anderson 1999:297; Hanekom 1975:65, 99; Mosupyoe 1999:136). The Bishop, usually with a big voluntary following, upon invitation, travels to areas where help is needed and usually rain is on that list. Kubayi (1990:27), in this regard, referred in the *ZCC Messenger* to the time when Ramarumo visited Qwa-Qwa in the Free State, which at that stage had already experienced a few months of drought. When he arrived in Qwa-Qwa it started to rain and only stopped after he had left the next day. The same happened when the Bishop visited Kimberly in 2005 and later that year Gaborone in Botswana. Müller (2011:156, 170–171), who had accompanied the Bishop's following on both occasions, said that everyone was convinced the Bishop's presence had resulted in the gift of much-needed rain.

The Bishop is also known to deliver his members from bondage including the powers of sorcerers, witches and the latter's familiars (see section 3.3.2 for more information), such as the *tokoloshe* (Anderson 1999:136; Lukhaimane 1980:63; Müller 2011:51). Müller (2011d), for example, heard a *moruti* say that under the protection of the Bishop he felt completely safe from witchcraft.

Members related to Mosupyoe's (1999:135) recount that Engenas had healed a cripple in Johannesburg with the help of his walking stick and the music from his brass band. They told her that Engenas' grandson, the current Bishop Barnabas Ramarumo, is known for the performance of similar miracles. Of significance in this regard is that beside the walking stick's function as an instrument of healing, the Bishop's brass band is by many members considered to be the ZCC formation with the strongest healing powers (see Müller 2011:167). I, for instance, was prescribed by a prophet during 2002 to attend a performance of the Bishop's brass band because they would have a more powerful healing effect on me than the performances of the local ZCC formations. On a more interpretative level, the Bishop's performance of healing miracles is a clear indication that he does not only fulfil the role of a prophet, but also the functions of a *moruti*.

Daneel (1974:188) wrote that Mutendi, the late Bishop of the ZCC in Zimbabwe, was also well-known for the performances of miracles. He, for example, was even accredited with the resurrection of the daughter of an important headman. Mutendi

never took credit for his healing abilities, but always emphasised that he was only able to perform miracles because of the power of God. He explained that God used him as an instrument to perform miracles. The same is true for the bishops of the ZCC in South Africa (Anderson 1999:296; Müller 2011:123).

The emphasis on the Bishop's role as mediator between God and his people, as healer and worker of other miracles gives the mere observer an impression of a messianic appearance (see section 2.4). Indeed the term "messiah" is used in a variety of contexts. Kubayi (1990:27), for example, reported in the *ZCC Messenger* that he perceived Ramarumo Lekganyane as their current-day messiah. To corroborate this statement he indicated the similarities between Jesus and Lekganyane:

First of all, it is a well-known fact that Jesus was a religious Messiah, and not a political Messiah. I think I shall be quite right to state that our present mediator is not a political mediator. He is the peace-maker. He is a king of peace. As a result, he expects his followers to be peace-makers at all times. Secondly Jesus used to heal the sick when he was on earth. This function is fulfilled by our mediator. He also heals the sick. Thirdly Jesus used to travel from one place to another, spreading the word of God and also doing miracles. Our mediator also travels from one country to another. ... At each of these places miracles occurred.

Hanekom (1975:69–70) reported that a number of the members he had interviewed also perceived the Bishop to be their messiah. The reason for this they said was that the Bishop strives to rescue people from earthly bondage or, as Anderson (1999:289) explained, strives to liberate people "from the old life of trouble, sickness, oppression, evil spirits, sorcery and poverty". Lukhaimane (1980:40, 42) in his dissertation also described Lekganyane as a messiah, although he used the concept in a slightly different context. He wrote that "Engenas fulfilled the same functions between God and man that the *badimo* [ancestor spirits] had done in traditional religion. He was a messiah, a prophet for his followers". Both Anderson (1999:296) and Hanekom (1985:70), however, reported that the Lekganyanes themselves firmly denied messianic titles. I would suggest that this denial should be interpreted in the

context in which these conversations were conducted, meaning that they referred to Messiah in the Christian sense where Jesus is perceived as the only Messiah and not in the literal sense describing a liberator of a group of people as explained in the New Oxford Dictionary of English (Pearsall 2001:1162).

It is important that outside observers should be careful of making a reductive analysis of these expressions and give due consideration to the context in which they were made. Literal interpretations, especially from a western perspective where the emphasis falls on so-called facts can be very misleading. Daneel (2007:145) explained that many black Africans who speak their mother tongue have a “subtle and ambiguous manner of speaking that together with the use of analogy makes a literal translation in the western sense impossible”. He used the example of the saying “a car is *ngozi* (a vengeful spirit)” and explained that this “does not mean that the two are identical, but that a car can be the cause of death and therefore, like the *ngozi* spirit, is dangerous”. In this same regard the statement of members “Lekganyane is God”, cannot be perceived as deification of the Bishop. According to Hanekom (1975:69) traditionally African people addressed traditional leaders and other important people as “*O Modimo wa rena*” (You are our God). This saying, in much the same way as those with regard to Lekganyane being a messiah, are mostly intended in the analogical sense reflecting respect to someone of importance. Therefore, from Daneel’s (2007:147, 152) perspective the designation of the leader as being the image or reflection of Christ is reflective of iconic leadership rather than so-called messianic leadership. See section 2.4 for an explanation of iconic leadership-type movements.

Van Wyk (1986:411 as cited in Müller 2011:146) too referred to the perception that it sometimes seems that members perceive the ruling Bishop to be God. According to him the bishop is rather seen “as an essential link between God and humanity, which is why prayer is addressed to the God of Engenas and Edward”. Van Wyk did not include Barnabas because Barnabas was at that stage not yet the Bishop of the ZCC (see Hanekom 1975:87). During the times I attended services, when prayers were addressed to the God of the ZCC bishops, the names of all three consecutive bishops were always uttered.

Sometimes preaching *baruti* started their homilies with the words “I greet you in three names” and would then name “Engenas, Edward, and Barnabas”. Again, these expressions reflect respect to the bishops of the ZCC. Müller (2011:61) too experienced the greeting in the three names of the bishops during services of the Mamelodi congregation. However, the same as at the Marabastad services, *baruti* at the Mamelodi congregation also often commenced their homilies with “a greeting in the name of our Lord Jesus Christ”.

Many members perceive the ancestor spirits of the two departed bishops as protective entities. Next to the abovementioned context, I have heard numerous testimonials during Wednesday afternoon services where female members related that they had been saved and protected by the ancestor spirits of the first two bishops (Personal experiences 2002–2003, 2011). This belief seems to be closely related to the traditional custom of ancestor veneration (Hanekom 1975:71; Müller 2011:189). It is in this regard, like West (1975:178) explained, important to note that ancestor spirits are not worshipped the way God is, but venerated as partners in a mutual dependent relationship (see an explanation in section 3.3.2).

During services *baruti* often equate the Bishop with *kgomo* which means head of cattle or great ox (see Müller 2011:71; Personal Experiences 2002–2003, 2011). For example in the *ZCC Messenger Zungu* (2002:64) addressed the Bishop by saying “To our Right Reverend Bishop B E Lekganyane I’d love to say ‘*Kgomo*’. I know that you are the true mediator and link between the Zionists and God”. According to Comaroff (1985:247) the symbolic association people make between Lekganyane and a “great ox” recalls “the multiple capacities of cattle in most indigenous [black] African societies south of the Sahara – the ‘God with the wet nose’”. The concept *kgomo* is thus also used to reflect respect to the Bishop.

The charismatic Bishop of the ZCC resides at the Holy Zion City of Moria of which legends of its healing magnificence are widespread (Comaroff 1985:240; Masilela 2001:30–32). It is believed that Zion City Moria is “imbued as it is with the spirit and power of the Bishop and his direct ancestors” (Müller 2011:10). I had been told repetitively by members about its ever-present miraculous qualities and peaceful energy, which I was able to experience during my visit in 2003. To me it seemed

people experienced a kind of euphoria being allowed at Zion City Moria and in the close proximity of the Bishop and his residence (Personal experiences 2002–2003, 2011). According to Häselbarth (1965:65–66 as quoted in Hanekom 1975:68) many people in their quest for life-force visit Zion City Moria because life-force is abundantly available and they can get as much as they need. Sometimes people’s *ditaelo* could prescribe them to go and stay at the Holy City for a specific period of time, especially when they are in need of extra care and healing. Mrs S (Personal communication 2011), for example, stayed at Zion City Moria for nearly three months and left only a while after she had completely been healed.



Figure 19: The Mountain of Zion City Moria (Daily Sun, Thursday 9 April 2009, p.3)

The name Zion City Moria itself is of great significance. Comaroff (1985:239) explained that “Moriah” was a biblical name for Jerusalem (2 Chronicles 3:1⁴¹), more specifically the mountain on which the great temple was built. She further argued that the original centre of the first Christians as depicted in the Bible’s Old Testament (Genesis 12:6; 22:2⁴²) was located to the north at Mount Moriah. Zion City Moria,

⁴¹ 2 Chronicles 3:1 in the Old Testament of the Good News Bible (1981) reads “King David, Solomon’s father, had already prepared a place for the Temple. It was in Jerusalem, on Mount Moriah, the place which Araunah the Jebusite had used as a threshing-place”.

⁴² Genesis 12:6 in the Old Testament of the Good News Bible (1981) reads “When they arrived in Canaan, 6 Abram travelled through the land until he came to the sacred tree of Moreh, the holy place at Shechem. (At that time the Canaanites were still living in the land.)

Genesis 22:2 in the Old Testament of the Good News Bible (1981) reads “‘Take your son,’ God said, ‘your only son, Isaac, whom you love so much, and go to the land of Moriah. There on a mountain that I will show you, offer him as a sacrifice to me.’”

perceived as a reestablishment of the original Holy place of the Bible, is located against a mound known as Mount Zion or *Thaba Sione*, in the north of Limpopo province (see Masilela 2001:30; Müller 2011:57, 101). *Moruti* Mampuru (Personal communication 2003) related that many ZCC members were highly disappointed when the name Northern Province was changed to the province of Limpopo, specifically because Northern Province was a stronger indication of Zion City Moria's original heritage. According to Anderson (1999:290) what makes this new Jerusalem of even greater significance is that it is not located in some far-away country or in the past, but in the present, in the here and now, and it is relatively easily accessible to all who reside in the southern African region.

Zion City Moria is also renowned for its secular magnificence, including the Bishop's mansion, his expensive fleet of cars and the city's infrastructure, which enables millions of members to visit each year. Although members can visit the Holy City any day of the year and attend regular services as much as they want, it is specifically during the three major festivals that millions of members from all over southern Africa flock to Zion City Moria. During festivals most members stay the entire weekend usually without much sleep. If they do want to catch up on some sleep they will typically take a quick nap in their cars or buses. The first festival is the Easter gathering (*kopano*). The second one is on the first Sunday of September, which is perceived as the beginning of the new planting season and sometimes also referred to as the New Year's festival (Speech of Bishop BE Lekganyane in the *ZCC Messenger* 2001:6–8). The third one is Christmas. During each of these weekends the Bishop personally leads the Sunday service, which is perceived as the highlight of each gathering (Hanekom 1975:54–55; Müller 2011:9; Personal experiences 1996, 2002–2003, 2011).

The ZCC is known to be an apolitical community. As indicated earlier in this section, Kubayi (1990:27) described the Bishop as a religious and not a political leader. He is perceived as God's chosen peacemaker (Hanekom 1975:115). All three bishops have always emphasised peaceful cooperation with the ruling regime, even during apartheid as explained in section 2.7 (Anderson 1999:293, 294; Anderson 2007a:4;

Müller 2011:15). The ZCC also strives towards peace on a global level. Mangena (2002:58), for example, wrote “[f]ellow Christians as the universal peace specialists: Let us pray for GLOBAL PEACE, for this unstable planet. Peace be unto you in the name of ‘God’s chosen Chief Architects of Peace, Bishop Engenas, Edward and Barnabas Lekganyane. Kgotsol!” The Bishop is known to regularly speak about social issues such as HIV/Aids, corruption in the civil service, gender-based violence and child molestation. He said at a ZCC conference in Kimberley (2005) that ZCC members involved in child molestation would immediately be suspended from the ZCC (Müller 2011:155, 177). Members, therefore, perceive the Bishop to play a prominent part in the healing process of the social equilibrium of southern Africa and, as far as possible, globally as well.

The Bishop is known as a skilled businessman and owns, together with other family members, several successful businesses. I was told by *Moruti Mampuru* (Personal communication 2003) that the Bishop owns a bus company, among other companies, that is used as official transport for members across South Africa to attend services and festivals at the Zion City Moria for a relatively cheap rate. In combination with the monetary donations of members, the Bishop and the church are financially extremely well-off satisfying members’ need for a grand Bishop (Comaroff 1985:238; Hanekom 1975:66).

The need for a grand leader and the church’s display of material wealth is according to Kiernan (1985:91–92) imperative in many AICs. He explained that a person’s future in the hereafter is not perceived as important as a person’s wellbeing in the present. Although emphasis is placed on health and harmony, financial success is perceived as an “external index of inner spiritual power”. Therefore, when members shower their leader with monetary and other gifts, the gifts are regarded as an indication of their own spiritual prowess. The more the church and Bishop display financial wealth, the more members become convinced that adherence to the church will eventually secure their financial wellbeing. The Bishop’s and the church’s financial display will consequently also attract more and more members. In this regard Tshotlhang (2002:68) wrote in the *ZCC Messenger* “[w]e all know, if we are true members of this church, that it is the greatest wish of our Bishop to see each and every one of us being somebody in life. We also know that he has shown us the

way to achieving that goal". Hence, members do not so much focus on the past, the future or the hereafter but set their sights on achieving rewards in the present. It is therefore clear that the Bishop's financial display of wealth constitutes "an important aspect of the church's apparatus of power" (Comaroff 1985:238).

It is important to note that the link between spiritual and material wellbeing is not a sign of a modern capitalistic approach to life. Kiernan (1985:92) explained that it is continuous with the traditional religious pattern in Africa "in terms of which the maintenance of a good relationship with deceased ancestors is a guarantee of protection, stability, good health, fecundity and prosperity".

The Bishop also plunges some of the church's riches back into the community. Trusts, for example, have been created to alleviate poverty and to enhance education among members. The Bishop heads an educational trust that is managed by the Kganye group, a company owned by the ZCC Chamber of Commerce (Müller 2011:122; see Mosupyoe 1999:43). Mosotho (2002:40–45) wrote an article on the Kganye Educational Fund Trust in the *ZCC Messenger* in which he exclaimed that "education is the vessel of our wisdom ... [r]emember your future is our pride". Kganye also runs enrichment classes for learners, helping the children of ZCC members to pass their grades. Throughout the *ZCC Messenger* articles have been written on the importance of education. Advertisements of different universities are published here as well. A special ZCC College named the Marobathota College is situated across the road from the Zion City Moria and it is held in high regard by all its members. Every time I had attended services, prayers were regularly directed towards blessing those busy with examinations.

It definitely seems that the Bishop with the help of his church officials attempts to create opportunities for members to better themselves on spiritual, social, educational and material levels enabling them to adapt to a fast-changing world.

4.5 Conclusion

On the days that services are conducted, everyone arriving at the church grounds is welcomed by busy, informal street vendors located on the northern and western sides. The vendors sell, among other products, various *ditaelo* ingredients and

special containers needed if blessed living water (*meetse a thapelo*) is required for home usage. People are heard greeting each other, mainly by saying *khotso* (peace) that is answered with *A e ate* (let it spread). The feeling of visiting a sacred venue is set when the gates are entered and the “gatekeepers” welcome everybody by cleansing them with blessed living water. The open-plan layout of the church grounds allows participants to easily identify the areas they need to visit, such as the prophesying area, healing shelter, *sebêšô*, sanctuary and administration buildings. Inside *baruti* can be seen administering healing actions, prophets visibly move around identifying people in need of divine care, a sea of inspired voices and sounds reminds people of the presence of the Holy Spirit, the smell of the fires in the *sebêšô* is an indication that sanctified remedies are being prepared, and performances of the ZCC formations spreads a feeling of sacredness amongst all. The ZCC formations, which are the *mphô*, choir, *mokhukhu* and the *nkedi* perform to praise God and are perceived as instruments of healing. This whole setting speaks of healing activities and creates an atmosphere in which many participants deriving from an African sociocultural background easily feel at home. The message given to participants in this setting is that in this church the attainment of health is a divine priority.

To be able to enter the ZCC’s sacred healing setting participants have to adhere to the ZCC dress code and behavioural rules and regulations. The same as in a traditional African context, disrespect in any way will disturb life’s equilibrium and corrupt the health of those involved. It is therefore imperative that these rules are observed. The ZCC badge and uniforms are perceived to be sacred, protecting the wearers against misfortune and they are used as instruments of healing. Even the colours of the different attires symbolises healing on different levels. Yet, the ZCC uniforms and badge can only be worn by baptised members or by children of baptised members. It is not compulsory to be a baptised member to participate or even receive healing, even though strict rules with regard to personal dress also have to be adhered to. The reason for the strict dress code is indicated as God’s will, because according to the Bible the human body is perceived as God’s temple and should be treated as such. This same reason is given for the prohibitions on drinking alcohol, smoking tobacco and eating pork. Even though baptism is not a prerequisite to participate and receive healing, it is believed that baptism is needed to obtain

maximum health, mostly because only a baptised member is able to receive the Holy Spirit in full.

The ZCC attire is only worn to ZCC gatherings such as services and funerals. The ZCC badge, however, is a permanent symbol worn by members day and night reflecting their faithfulness to the church, and has many other advantages such as providing them with protection against evil, serving as a reminder to comply with the church rules, and enabling members to identify each other whenever in need. Members, for example, are known to assist each other when employment is required, transport is needed, at an accident scene or against crime. It is therefore evident that members of the ZCC act like members of one big family or community, irrespective of their language and ethnical differences. This phenomenon seems to be strongly related to the African humanistic concept of *ubuntu* that emphasises active participation and mutual assistance in community context, in this case in a ZCC community context.

The ZCC attire is subject to particular rules and prohibitions. They are, for example, gender-specific, formation-specific and status-specific. Seating arrangements within the sanctuary are also organised according to members' attire. A participant therefore immediately becomes aware that more females than males are seated inside the sanctuary. Most of the times, the sanctuary is not big enough to contain all participants. The overflow of participants is therefore seated outside, and again seating arrangements are mostly gender- and attire-specific. Stages of an individual's lifecycle play a prominent role in a members' attire. When members, for example, have been in contact with birth, menstruation or death the ZCC attire may not be worn or touched for a certain period of time. When an individual is polluted this way, they may also not attend services. Hence, the ZCC attire with its different functions plays a prominent role in the healing ministry of the ZCC.

There are also various other rules of conduct that have to be adhered to by non-members within the church grounds and by members throughout their lives. In general when participants become baptised members the rules and regulations they have to follow results in a specific way of living characteristic to the ZCC community. In facilitating participants to make a considered decision in becoming respectful

members of the ZCC, it helps that baptism is only conducted at the age of 18 years or older.

Throughout this chapter it has become clear that many rules of conduct are gender-bound and therefore have different implications for male and female participants. It has also come to light that many of the ZCC's prohibitions and regulations have twofold origins, that is to say the Bible, more so the Old Testament, and traditional African lifestyles. It is, however, understandable that most ZCC's regulations and prohibitions have been slightly adapted to fit into a lifestyle peculiar to modern southern Africa ZCC communities, such as those that are related to the dress code of participants.

Each attendee in a ZCC service, as a result of their participation, fulfils a specific role. As visitor you are allowed to participate in the *mphô*, receive prescriptions (*ditaelo*) prophesised by the prophets and treatments from the *baruti*, but cannot participate in the formal ZCC formations, known to provide extraordinary healing to the participants, to those to whom performances are dedicated and to observers. It is also not possible to become a prophet or a *moruti*. Ultimately, as mentioned earlier, the attainment of full health is made possible on becoming a baptised member. I would therefore argue that baptism is the most important sacrament used in the ZCC to enable the attainment of health in all spheres of life.

In the ZCC the only correct way of conducting baptism is by threefold immersion, preferably in living running water such as a river, in the same way it was done by John Alexander Dowie's early Christian Catholic Apostolic Church in Zion (CCAC). A person can only enter the waters of baptism after confession. It is generally believed that immersion during baptism enhances a person's life-force. It was explained to me that when Jesus was baptised by John, some of his life-force imbued the water. Therefore, by being baptised this same way members too will receive some of Jesus' life-force. It is also accepted that just as Jesus received the Holy Spirit when he was baptised, members will receive the Holy Spirit when they are baptised.

From the moment a person has entered the baptism water it is possible for either sex to receive the ability to prophesy. It is, however, believed that some prophets receive

stronger abilities than others. During the times I attended services I was told various times that Marabastad was known for its strong prophets, though Zion City Moria had the reputation for having the strongest prophets of all. It was obvious that all members respect prophets immensely irrelevant of their sex. Because only men can become *baruti*, the potential for females to become prophets can be perceived as a gender-levelling mechanism.

The way prophets manifest the Holy Spirit is seemingly similar to Biblical prophetic activities. In a ZCC context prophecies are focused on determining the traditionally perceived causation of affliction and prescribing the necessary remedies. Sometimes the possibility of misfortune is predicted if not remedied in time. The messages the prophets prophesy derive from God, the Holy Spirit and sometimes ancestor spirits, with the source being the Holy Spirit. Again, similar to many other AICs, members feel safe because the evils of traditional African cosmology are being identified and treated and people are immediately protected against possible further bolts of misfortune.

It has been argued that traditionally African people, used to the constant presence of ancestor spirits linking them directly with God, missed this link in western Christianity. The Bishop, perceived as God's special messenger, has been indicated to fulfil this function to a great extent. I argue that God's immediate presence is not only experienced through the Bishop, but also through prophecies of the prophets. The church ground is open seven days a week enabling members to visit whenever in need of divine intervention. Members therefore experience God's direct presence by means of prophecies on a fairly regular basis. Hence, the prophetic ability of the ZCC ministry could be another important reason for the ZCC's constant growth rate.

Baruti are the ones actually responsible for the treatment of afflictions or in other words executing people's *ditaelo*. Consequently, prophets and *baruti* form essential partnerships in the healing ministry of the church. In short, *baruti* prepare sanctified remedies, treat people that need healing and protection, preach during general services, lead services and funerals, and administer sacraments such as baptism, Holy Communion and confessions. It is important to note that although only males can become *baruti*, females are allowed to preach during their special Wednesday

afternoon services and at specific intervals at funerals. This acts as another gender-levelling mechanism.

When the responsibilities of *baruti* are taken into account they can be perceived as the fathers of the church. Accordingly, only married male members are considered by the Bishop to be ordained as *baruti*. ZCC members including *baruti* are allowed to practise polygamy. This practice is defended by the fact that even in Jesus' family history polygamy occurred. Then the practice of polygamy does facilitate a *moruti's* duties. If one of the wives, for example, becomes polluted as a result of menstruation or the birthing process, they can stay with another wife and still be able to fulfil their religious duties perceived as crucial by most. To many members the acceptance of this practice also emphasises that they belong to a church that accommodates their African customs.

The Bishop of the ZCC is perceived as God's main chosen mediator, extraordinary healer, miracle worker and leader. He is expected to find solutions to his people's spiritual, social, material and political problems. The Bishop's role as leader relates to some extent to that of a traditional paramount chief. Among others, they are both assisted by family inner councils and their positions are inherited according to patrilineal succession rules, it is therefore passed to the oldest son of the first wife. In this way the prophetic and healing abilities have been passed from the first Bishop Engenas to Edward and now to the current Bishop Barnabas Lekganyane. As a result, the Bishop is sometimes referred to as King of the Zionists.

Being perceived as God's chosen prophet and healer, the Bishop is known to deliver his members from the burden of witchcraft and sorcery, one of the main causative agents of illness in a traditional African context. Therefore, the same as in a traditional African context, illness automatically includes a variety of misfortunate events, such as barrenness, droughts, unemployment, poverty and loneliness, which the Bishop is able to heal. The first Bishop Engenas Lekganyane introduced various sanctified instruments of healing to enable *baruti* at different congregations throughout southern Africa to treat afflicted people who were not able to consult the Bishop personally. Today most of these instruments of healing are still in use.

The same as with a traditional king or chief, and being such a profound leader, it is believed that the Bishop empowers very strong life-force. This is one of the main reasons why people always try to be as close as possible to him, hoping to gain some of his life-force and be healed by his presence. All three leaders, however, have always attributed their healing powers to God seeing themselves as instruments or facilitators of healing. The current Bishop resides at Zion City Moria, which is also believed to be imbued with life-force attracting people from all over Africa to experience its magnificence.

Although a person's life in the hereafter is emphasised, it is not perceived as important as a person's wellbeing in the here and now, which is a continuation of the traditional African emphasis on the present. Although the attainment of health and harmony are stressed, financial success is perceived as an indication of a person's inner spiritual power. It is therefore imperative to members that the Bishop and church display grandness and material wealth. They are able to do so as a result of the donations they receive and because the Bishop and his councils are known to run numerous successful businesses. The link between spiritual and material wellbeing is also a continuation with traditional African religious perceptions, in terms of which good relations with the ancestor spirits assure protection, good health and prosperity. Then again it is important for members to be able to shower the Bishop and church with monetary and other gifts, because this is regarded as an indication of their own spiritual prowess.

The ZCC is known to use its riches to enhance empowerment among its members. For example, trusts have been set in place to create educational advantages and alleviate poverty. The Bishop is also known by his members for working towards peace on local and global levels. On the whole it seems that the Bishop and his councils work towards creating opportunities for members to better themselves on spiritual, social, educational and material levels.

Since I have experienced the space and ritual setting of services in Marabastad, I will illustrate in the next chapter what healing in this context consists of.

CHAPTER 5

THE NATURE OF HEALING IN A ZCC MINISTRY: THE HEALING SERVICE

5.1 Introduction

Due to my participative role, I became aware that each service is infused with acts of healing from the moment people arrive at the church ground until they leave. The following description of the general procedures followed during Sunday, Wednesday and Friday services enables a deeper understanding of these healing activities.

God (*Modimo*) is perceived as the main source of healing; however, acts of healing include the use of sanctified instruments. This chapter discusses these instruments of healing, the use of which I observed while participating in services and read about in my literature review. It is important to understand the ZCC concept of health as it relates directly to the kinds of afflictions experienced and the perceived causes of these afflictions. In this chapter I, therefore, investigate notions of health in a ZCC context and discuss the perceived causes. I recount my observations of proceedings at services in the present tense as much as possible to convey the immediacy and intensity of the experience.

5.2 Main healing services at the church grounds

In the late 1930s Bishop Engenas Lekganyane decided that the main services were to be conducted on Fridays and Sundays and the special female services on Wednesdays. This arrangement was still in place when Lukhaimane (1980:31) conducted his research during the 1970s and when I attended services up until 2012 (Personal experiences 2012). The *mokhukhu* participants also have a special service conducted on Friday evenings after the main service concludes. This service appears to be the male version of the special Wednesday service for women. I was not able to participate in *mokhukhu* services being female and therefore I focused on the Wednesday services.

Smaller services are also conducted on the church grounds. I, for example, witnessed a smaller, more informal service for both men and women on Wednesday mornings. All-night prayer services are regularly held on Saturday nights, although usually at the homesteads of members. All services are perceived as healing

services and characterised by the same kind of healing activities. However, in this study I focused on the three major services in which I was able to participate: the main services on Sundays and Fridays and the special female services on Wednesdays.

5.2.1 The main services

The organisational structure of Sunday and Friday services are similar. The main service is on Sunday and, as a greater number of people do not work on that day, attendance is high. Members wear their official ZCC attire for this service. Men dress green or khaki uniforms and women in green and yellow attire or blue choir dresses. Women are also allowed to wear this attire during Wednesday afternoon services. Members mainly dress in personal clothes for the slightly less formal Friday services and even the choir members appear in their less formal khaki attire. During the Friday service, the *baruti* announce at whose homestead the all-night Saturday prayer service will be held. I have chosen to give a description of the more comprehensive Sunday service.

5.2.1.1 Sunday services

When I was attending church services in Marabastad the main services⁴³ began at about 14:30 and concluded at 17:00. People generally arrive from 13:00 onwards with some coming even earlier. They would already be in high spirits by the time I arrived, because, as I was told numerous times, they were able to experience the presence of the healing powers of the Holy Spirit. This well-known ZCC phenomenon was one of the main reasons why Martha, my interpreter during 2003, was so eager to accompany me. She had heard so much about the ZCC's strong healing ministry that she wanted to experience it for herself.

Some people move around quietly or engage in friendly and polite conversations and others participate in the *mphô* (discussed more fully in section 4.2) before the service started. The smell of freshly made suet dumplings, achar (spicy pickled fruits or vegetables), grilled corn on the cob and other foodstuffs cooked at the stalls outside the church ground fills the air. Typically, the fires at the *sebêšô* will fill up the church

⁴³ When I attended the main services on Wednesdays (special female services) they also started at 14:30 and concluded approximately at 17:00 (see section 5.2.2).

grounds with smoke. The buzz at the church ground clearly reflects peoples' excitement at being able to attend a service at this congregation.

The mphô

People start to perform the *mphô*, usually as soon as enough attendees are present, calling down the presence of the Holy Spirit. The *mphô* is mostly initiated outside the gate and participants move inside when one of the senior members indicates them to do so. As mentioned in section 4.2, *Moruti Moya* (Personal communication 1996) and *Moruti Mampuru* (Personal communication 2003) had told me that *mphô* literally means "gift", which is in line with the translation given in Kriel, Prinsloo and Sathekge (1997:114). Nchabeleng (1983:35–36 as cited in Müller 2011:34) referred to the *mphô* as well, but like Hanekom (1975:104) spelt it *mphoho*. The singing involves the rhythmic repetition of the word *mphô*, accompanied by the clapping of hands, swaying of the body and men periodically stamping their boots. During Sunday services up to a few hundred attendees can partake in this formation, which understandably has a breathtaking effect on all those present.

The formation that performs the *mphô* is easily identifiable because, in contrast to other formations, it includes men and women and they do not need to wear specific ZCC attire. Even visitors are allowed to participate in this sacred event. Not wanting to intrude, Martha (and later Mrs T) and myself usually danced on the periphery. Like Müller (2011:34), I experienced participation as "somewhat hypnotic", which made me feel more at ease.

A more senior *Moruti* typically initiates the *mphô* performance. Participants start to form a circle configuration and fall in with the leading *moruti's* chanting song. In general, one half of the circle comprises men and the other half women. Those dressed in formal ZCC attire participate separately from those dressed in personal clothing. The separation according to gender and attire appears to be a way to ensure that nobody becomes polluted.

Occasionally one or more male and/or female participant is invited to dance in the middle of the circle, although each gender generally keeps to their own half. Sometimes a senior *moruti* invites members to dance in the middle, and other times

the member in the middle requests the next person to dance in the centre. When men dance in the middle, they usually dance more vigorously than women using jumping movements.

The ZCC male and female dance motions seemed to correspond with the traditional Pedi-speaker dances. Mönnig (1983:104) noted that ZCC male dancers have been known to include long, halting jumps in their dances. ZCC participants leading the *mokhukhu* make use of a staff and/or a whip whereas Pedi-speakers traditionally use an assegai. Female dance motions, both among traditional Pedi-speakers and ZCC members are characterised by more shuffling movements. Nchabeleng (1983:35–36 as cited in Müller 2011:34) also referred to this similarity.

Comaroff (1985:245–246) referred to the *mphô* dances, but did not give it a specific name. Male and female participants formed separate, but adjacent circles at the ZCC congregation she attended. She described the dance style as “less like the concentric form of indigenous ritual, and more eclectic and expressive of the panethnic organization of the church itself”. She, however, depicted the “rhythm of the chant [as] clearly indigenous”. In this regard it is important to remember that Comaroff conducted her study mainly among the Tshidi, a Tswana-speaking community, which might explain why she interpreted their dance styles as less traditional. The fact that males and females performed separately might result from changes over time or differences in performances might occur between different congregations, especially if located in areas where people of differing ethnic backgrounds reside.

The Female choir

Tshotlhang (2002:68) wrote in the *ZCC Messenger* that all the ZCC songs are “prophecies and sacred” and should be treated as such. According to Comaroff (1985:245–246) all songs sung in the ZCC come from a special compilation named *Songs of Zion*. This compilation is printed at the Zion City Moria and translated into different southern African languages. Interestingly enough, Martha, my interpreter during 2003, was able to sing along with many church songs even though she was a

member of an Apostolic AIC. She said that several of these songs were sung in her church, though their tempo was quicker.

Members told me that performing sacred church songs is, in effect, praying and it calls down the Holy Spirit. Participation is therefore believed to generate healing. When an individual is allowed to dance in the middle of the circle, the Holy Spirit's power is focused on her/him allowing her/him to obtain even more healing power or life-force. Dancing in the middle of this sacred circle is therefore understandably a privileged healing experience (Personal experiences 1996: 2002–2003, 2011). However, it is important to note that participation in any ZCC dance is believed to bring “power, protection and healing to the participant” (Anderson 1992:101; 2000:165).

In general, from between 13:00 and 14:00, but sometimes earlier as well, the female choir dressed in their blue uniforms start to perform outside the church grounds. They also rhythmically sing and dance in a circle formation, but configure into other formations, such as rectangular ones. They clap hands in some of their performances and make different kinds of hand movements and gestures. In contrast to the *mphô* they are a female formation only and only full members, dressed in their choir attire, may participate and they perform in a more organised and formal manner.

I noticed that occasionally the female choir performed in a star-like formation around a big heap of handbags outside the gate (see figure 20). This star-like formation is first shaped by approximately 10 women (this number depends on the number of choir members present) who form a circle around the handbags. Then other choir members queue behind each one of these women. After this formation is formed, a *moruti* will bless the handbags with blessed living water to cleanse, protect and enable prosperity. After some time the choir women who are closest to the heap of handbags will start to pick up the bags, hold them up in the air, enabling the owners to recognise and collect their belongings. When all the handbags have been retrieved, the choir will usually form a linear formation and, while singing, move towards the entrance of the church's premises.

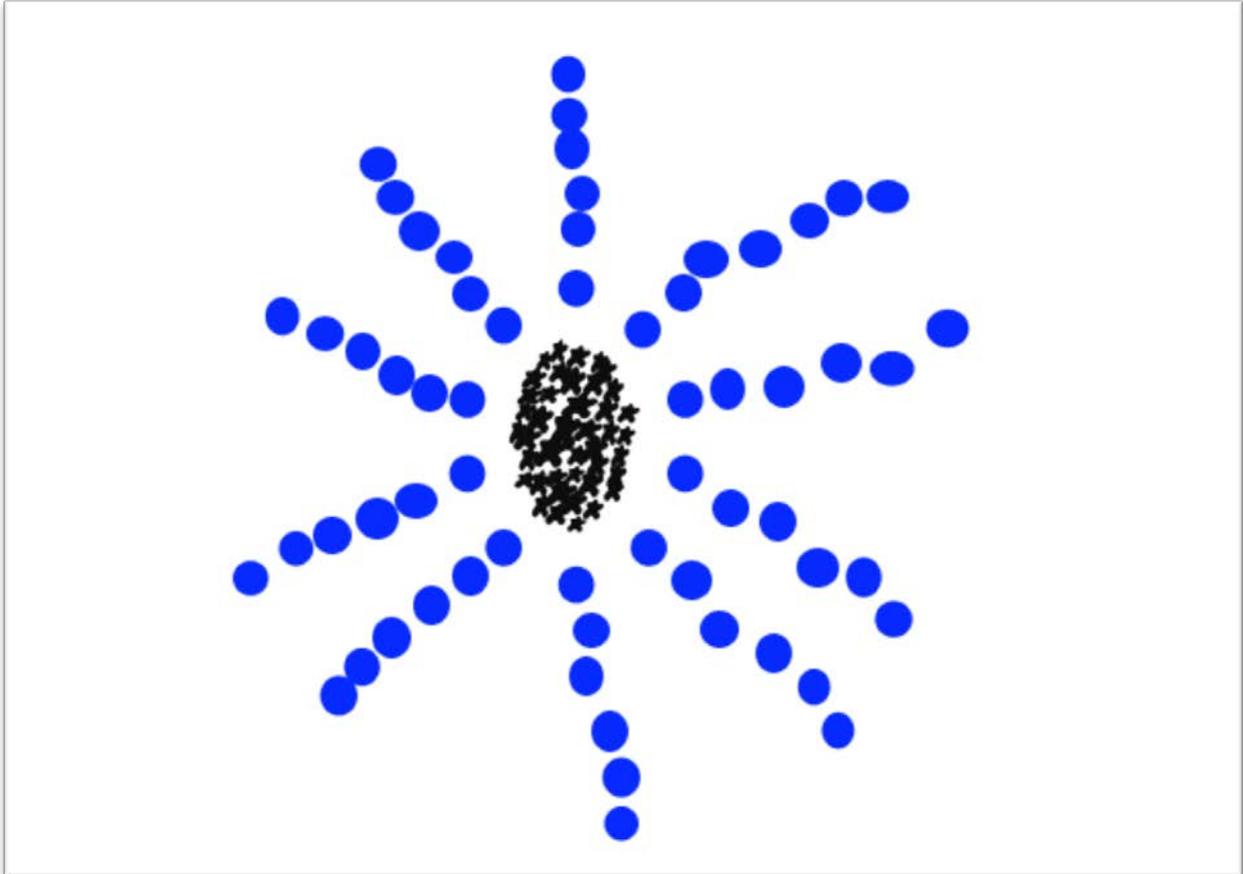


Figure 20: A schematic aerial view of the choir's star-like formation when the handbags of female participants are blessed

Legend of Figure 20:

- The blue dots represent choir participants who are facing the handbags in the middle of the formation.
- The cluster of black stars represents the heap of handbags belonging to the participants.

When the female choir enters the church grounds, the gatekeeper ordinarily administers the cleansing ritual by sprinkling a group of women with blessed living water, a much quicker procedure than treating each individually. Typically, inside the church grounds the choir will perform in the open area in front of the sanctuary. A senior member normally indicates when the choir has to stop their performances. They will then enter the sanctuary to be seated at their allocated sitting area.

The mokhukhu and Bonkedi

The *mokhukhu* participants usually initiate their performances within their own enclosed area behind the sanctuary of the church. If the *mokhukhu* participants are not already present within the church grounds, they will now enter the gate.

Upon my arrival, every now and again the *Bonkedi* (also known as *nkedi*) dancers would be performing within the church grounds. These young men, who seemed to vary in age between their early teens and early twenties, were always engaged in very intricate and vigorous dances, with lots of quick stamps with their feet and other jumping movements. They are easily identifiable by their distinctive dress code that comprises khaki shorts around which Scottish kind of kilts are wrapped, short, brown military-like jackets with long sleeves, long socks and rattles made out of dried seeds strapped around their ankles. Witnessing the *Bonkedi*'s passionate and energetic performances is an amazing experience.

Like the female choir, the *mokhukhu* participants were usually also cleansed at the gate in a group context. The characteristic rhythmic stamping of their boots and sporadically group jumping up and down, combined with their deep singing voices, dominated all sounds within the church's premises. Generally a senior member holding a walking stick in his one hand and a whip in his other hand would dance in front or in the middle of the formation. Lukhaimane (1980:67) explained that the sanctified walking sticks are used to protect members against misfortune. Anderson (2000:273) said that both are used for protective purposes. These sanctified instruments of healing are waved up and about in the air or beaten together to keep the rhythm of the dancers. Every now and again participants simulated the leader's movements. Usually during Sunday services a couple of hundred dancers partook in the *mokhukhu* causing observers to feel an undeniable rush of energy and emotion.

The *mokhukhu* is also performed in the open area in front of the sanctuary. Members of the *Bonkedi* and *mokhukhu* perform separately for a short while and then join each other after which they enter the sanctuary in a very orderly manner, softly singing or humming until they are inside. As soon as they enter the sanctuary they take off their hats and seat themselves at their allocated spaces.

It is a great honour to have been allowed to experience the performances of the *nkedi* and the *mokhukhu* participants. It becomes understandable why ZCC members are so proud to participate in their formations once you have attended the ZCC formation performances, including those of the *mphô* and the female choir.

Commencing the service

Members do not need to be at the church grounds at any specific time to be able to attend the service. They, however, always have to undergo the cleansing ritual at the gate. Attendees respectfully wait to be cleansed and blessed, despite this being a time-consuming process due to the many people wanting to enter the church grounds. Only occasionally were attendees allowed to enter together with the choir or in large groups and so to be blessed all at once.

The prophets can at any time call an individual out for a spontaneous prophesying session (see section 4.4.2). *Baruti* begin blessing all kinds of ingredients and preparing sanctified liquids for *ditaelo* purposes at the *sebêšô* from the early morning. Throughout the day they treat people in front of the healing shelter, visible to all who are present inside the church grounds. The treatment administered by the *baruti* is typically prescribed by that particular person's *ditaelo*. *Ditaelo*, however, could also include other prescribed actions. These are discussed in section 5.3.

The *baruti* administer healing treatments throughout the service and people often wait patiently and respectfully in long lines for treatment. I noted that sometimes members did not stay for the entire service, but came primarily to receive a healing treatment or consult a prophet.

Blessed living water is well-known for its multiple healing purposes and, as such, can also be used for household purposes (see section 5.3 for more information on blessed living water). The church supplies large quantities of blessed living water at no charge. Attendees can fill bottles and containers at any time at the healing shelter and the *sebêšô*. Martha and I took a transparent, bluish-coloured bottle along on an initial visit to Marabastad, but were denied the blessed living water as it may only be poured into white or completely transparent plastic bottles, such as those used for milk or by Coca Cola. My current understanding is that the ZCC perceives coloured bottles, other than white plastic ones, as negatively affecting the blessed living water. It is now possible to buy white plastic bottles from the informal vendors outside the gate.

I was usually seated in the front row between senior female members dressed in yellow and green uniforms or to the left of the platform against the eastern wall with senior women wearing personal clothes by the time the *mokhukhu* and *nkedi* participants entered the sanctuary. The Sunday school teachers, mostly female, and the children were always seated directly to the left of the platform on their special little benches facing the congregation. The Sunday school started at 10:00 in the morning and continued up until the afternoon service. The children are allowed to wear uniforms as their parents are ZCC members. The girls wear choir uniforms and the boys the *mokhukhu* uniform, although some wore personal clothes. Girls' hair was always covered the same as was all attending females' hair.

A senior *moruti* begins the service by asking the female choir to stand up and sing. Subsequently, he or another *moruti* welcomes everyone and leads the congregation into song. The *moruti* initiates a communal prayer by uttering the words *a re rapela Modimo*, meaning "let us pray to God". Most attendees go down on their knees with their backs close to their heels and their faces close to the floor. Only a few, usually the elderly or those that do not have enough space to kneel down, stay seated and bow their upper bodies down. Each person prays their own prayer aloud engulfing the whole sanctuary in a sea of murmurings and mutterings. The *baruti* sometimes repeat small verses, praises and sometimes say *khotso* (peace) to which the people will answer *A e ate* (may it spread), or "amen". The communal prayer continues for some time until the leading *moruti* ends it by saying out aloud a drawn-out "amen".

Kiernan (1985:95) explained that "power [is] generated by communal prayer and its source is the Holy Spirit". For that reason the power of communal prayer is believed to be much stronger than that of individual prayer. Some attendees enter a trancelike state and others can be heard crying while asking the Holy Spirit to assist them in overcoming earthly obstacles. Communal prayers are therefore also perceived as a chance to ask God for personal assistance under amplified sacred circumstances and are seen as a special instrument of healing.

Baruti sit down on their chairs upon the platform either before the official opening of the service or after the communal prayers. They are dressed in green uniforms,

mokhukhu attire or in personal attire. Each *baruti* is given a chance to conduct a homily if they desire. They usually do this in Pedi or Northern Sotho and, after each few sentences a *moruti* translates the homily into Zulu and another into English or Afrikaans. The third language of translation is usually Afrikaans. Only when special guests, such as the mayor of Tshwane, attended a service, was the third language of translation English. Müller (2011:39, 50) encountered the same translation process at the Mamelodi congregation, though the second language Zulu was sometimes interchanged with Tsonga, and the third language was always English to accommodate him and his family. Each *moruti* discusses a subject that he considers to be relevant and important. Many prayers are directed to matters the *baruti* deem of importance, including for people experiencing problems on a local and global scale. A ZCC service, therefore, not only focuses on healing attendees, but also on healing or helping their families, communities or those they know to be in need. This enables attendees to participate in the process of healing on a grand scale. In this way attendees also become instruments of healing, which seems to enhance their feelings of self-worth and self-respect.

The *baruti* occasionally make humorous remarks concerning all kinds of matters throughout the services causing the congregation to laugh together. On one occasion, a *moruti* who had found two ZCC badges asked members if the badges belonged to anyone they knew. When no-one answered, he said that maybe he should give them to some of the visitors thus ensuring their return to the church, at which everyone roared with laughter as becoming a member without being baptised is without precedent. We were slightly embarrassed, but appreciative that they wanted us to return to the church.

Prophets, throughout the service, move in between attendees summoning those in need of divine healing regardless of the procedures that are in progress. Even though a lot of attendees stay seated throughout the service, many move around in the church grounds because they have been summoned to attend a prophesying session, more specifically described as a spontaneous prophetic consultation. During prophetic consultation people receive *ditaelo* (prescriptions) to follow. Prescriptions could include products that have to be bought outside the gate at the stalls or at the administrative offices, which is usually done immediately. The

acquired products are given to the *baruti* at the *sebêšô* to be blessed and prepared according to the given *ditaelo*. If there are any surplus ingredients these have to be handed in at the healing shelter. Many people's *ditaelo* include prescriptions to receive particular healing procedures. *Baruti* administer the prescribed healing procedures at the healing shelter or at the administrative offices. In summary, services are not quiet happenings, but rather eventful gatherings engulfed in a sea of voices and ecstatic murmurings, although everybody always behaves in a respectful and composed manner.

People wanting to be baptised and those recently baptised are asked to come to the front of the sanctuary just before the end of the service. A *moruti* blesses each one with a *mogau* by patting the blessed paper repeatedly on their heads, against their arms and sometimes on their stomachs. Their names are written in a book afterwards (see Müller 2011:37).

A person's *ditaelo* (prescriptions) could also require the congregation or the choir to sing her/him a specific church song. People with this kind of *ditaelo* are now asked to come to the front of the sanctuary. Usually, while the afflicted attendees are kneeling the congregation or female choir will sing them the required *ditaelo* song or songs. All those that participate in singing prescribed songs become instruments of healing, which gives another sacred reason for participation.

General announcements follow including reading letters of appreciation from fellow members who have been successfully healed and reminders of upcoming events, such as funerals and festivals at the Zion City Moria.

The service concludes with singing followed by a communal prayer and another song, during which everyone leaves the sanctuary and most attendees leave the premises. Fresh vegetable and food vendors wait outside the gate, as do many taxis.

5.2.1.2 Wednesday services

A more informal combined-gender service is offered on Wednesday mornings. I observed these services during 2002, 2003, 2011 and 2012 when arriving early to participate in the special women's service. Attendees, including the *baruti*, are dressed in personal attire. Apparently many of those that attend this Wednesday service work in the informal sector or are unemployed and thus have a more flexible schedule. In contrast to the main services, many of the women covered themselves in blankets and many of the men, including the *baruti*, wore overalls and gumboots for this service. Following the service, a *moruti* claps his hands rhythmically and sings the *mphô* indicating that any willing attendees of the prior as well as the next service can commence this performance. The *mphô* is performed by men and women, although most participating attendees are females.

The special women's service begins at 14:30. There are, however, men moving around the church grounds. *Baruti* and other church officials are active in and around the administration offices, at the healing shelter and the *sebêšô*. In the prophesying area both female and male prophets are engaged in prophesying sessions. Only female prophets, though, are allowed inside the sanctuary when the female service is in progress. However, when a female attendee moves outside the sanctuary male prophets are able to approach if they are in need of *ditaelo*. The same types of activities that take place during the Sunday and Friday services occur during the women's service and people move around between the prophesying area, the *sebêšô*, the healing shelter, the administration offices and the market stalls outside the church grounds. There are, however, less people present for this service.

I noticed that many women used the ablution facilities to change because they often came straight from work to attend this service. During casual conversations, I was told that these women had made their employers aware of how important this special service was to them and consequently they were allowed to leave early on Wednesday afternoons. Although some of them were not always able to attend every Wednesday afternoon service, they tried to attend as often as possible. In general female attendees seemed to be very proud of this service and made it known to me that its special character was not really comparable to any other service. Kiernan's (1985:266) remark that "Zionist women tend to radiate a sense of

security which is the envy of most other women” seems to also be true for ZCC women.

I had participated in Wednesday services during 2002 and 2003 and observed that by 2011 the number of attendees had tripled or even quadrupled. During 2002 and 2003, for example, only the middle section in front of the platform was filled with women, in 2011 and 2012 the whole sanctuary was full. There were also many more *baruti* and prophets present.

In 2002 and 2003 male church officials had poured blessed tea into a variety of tins that were placed on long tables sometimes inside and sometimes outside the sanctuary. Before the *mphô* was performed and the service conducted women generally gathered around these tables, enjoyed a tin of blessed tea and engaged in pleasant conversations. Blessed tea was always served without sugar or milk. It was usually during these tea times that women approached me to ask my reasons for attending services and what I did for a living. If time permitted I informed them that I was a Unisa employee and student in the process of studying the healing activities of the ZCC. In general, the response was positive. The majority were surprised that I was aware of the ZCC's strong healing ministry. Some of the women would advise me to drink more tea as it would help me dance with more confidence. Some also encouraged me to join the choir, which of course implied that I had to become a baptised member. The women would encourage me to sing along with the *mphô* and with church songs they sang during the service even though I was not a member. The reason given to me numerous times was that singing is a gift from God and therefore good for everybody. During one of the Wednesday afternoon services in 2011, women were even so kind to sing an Afrikaans church song so that my sister, who accompanied us that day, and I could sing along. In 2011 there were too many attendees to be served sanctified tea before the service. Blessed living water for immediate consumption was, however, available at the healing shelter, the same as during Sunday services.

In general, women always seemed to be proud of their ZCC association and most of them freely told me a bit about their lives, which usually entailed some kind of miraculous healing experience. I, however, was never told the exact healing

procedures (*ditaelo*) they had followed. Many of the women I had spoken to had become members of the ZCC because of fertility problems and they had been advised by family members or friends that they would find answers to their problems when attending ZCC services. The women I had met who had previously been infertile had all followed their *ditaelo* strictly and consequently believed that they had been blessed with healthy offspring. Others had told me of incidences when they had experienced illnesses that medical doctors or traditional African healers (healthcare practitioners) were not able to identify or heal. Again, after they had followed their prophetic prescriptions strictly, which sometimes included a prolonged stay at the Zion City Moria (anything from one week to three months), they regained their health. It was regularly indicated that these illnesses were the result of other people's evil doings, although they never mentioned the words sorcery or witchcraft. However, they told me that since becoming members of the ZCC they were protected against these kinds of evil assaults and now lived healthy good lives (Personal experiences 1996, 2002–2003, 2011).

Müller (2011:40) mentioned that “many people appear to be drawn to the ZCC in the hope of finding employment through its extensive social network, or, as it is perhaps more generally understood, as a result of the *blessings* that seem to accrue to members of this church”. I received accounts from several previously unemployed women that had found employment after joining the ZCC. Lukhaimane (1980:73) noted similar testimonies among his research participants. Although some of the women with whom I spoke were at that stage still unemployed, they were convinced that this situation would change in the near future. They were especially inspired by other female members' positive testimonies delivered during these Wednesday afternoon services.

I also spoke to female members who were born into ZCC families. Several of these told me they had been able to convert troubled family members and friends by means of prayer and had changed their lives for the good. Each of these long-time ZCC members was convinced that they would never endure any serious illness, would always appear to be much younger than they were and that they had many healthy children due to their membership of the ZCC. Usually they were surprised to hear that I was childless. In spite of telling them that I did not want children they

would insist on praying for me, asking God to give me my own offspring. My preference for being childless was frequently confronted with the words that “it makes God happy when women bear children, it will therefore make you happy as well”.

Normally, at about 14:25 a *moruti* indicated that attendees had to stop performing the *mphô*. At this stage the majority of members were already seated, but those who were still active outside now entered the sanctuary. Senior female members usually guided the last attendees to their seats. I was typically directed by one of the senior female members to sit in the first or second row of the middle section between other senior female members. In general, exactly at 14:30 two *baruti*, the only men present in the sanctuary, would initiate the service. Sometimes they delivered their opening address while standing upon the platform and other times in front of it. Speakers used microphones during Sunday services, but preaching attendees had to rely on the strength of their voices during Wednesday services. The two *baruti* would typically address the congregation and this was briefly followed by communal singing of a church song. One of the *baruti* would then bless the congregation with a burning *mogau* exchanged between his hands until it nearly burnt to ashes and then he would drop it to the floor. Their address concluded with a communal prayer after which they leave the sanctuary while the congregation sings.

Wednesday services comprise testimonies delivered by female members and sometimes non-members. I, for example, have also been invited to deliver a testimony. As explained earlier in this chapter, female members are not allowed to stand on the platform, but are usually positioned to its right. The senior female members are mostly responsible for the organisation of testimonies during the service. A woman can request to deliver a testimony before the service is initiated and sometimes even during the service. If unsure about whom to address for permission, fellow attendees will quickly direct you to the correct person. The senior women also indicate who may speak next and sometimes even specify when a testimony has to be concluded.

Two additional types of testimonies are generally delivered besides the preaching by senior female members, which often focused on adherence to the dress code and

behavioural rules. The first type of testimony usually comprises a story about the presenter's life and the problems she and/or her family or friends are experiencing. These kinds of problems or afflictions could include cases of barrenness, alcoholism or drunkenness, drug abuse or physical abuse, husbands that have disappeared or enjoyed the company of many other women and were not spending much time at home, financial constraints and all kinds of physical ailments. Usually a speaker will ask the congregation to pray for her and/or the afflicted people. As communal prayer is believed to be stronger than individual prayer it is perceived as a very powerful instrument of healing. It also enables members to share their burden with fellow attendees and receive in this way much-needed emotional support. To be given a chance to deliver this kind of testimony is therefore a great privilege.

The other type of testimony entails the sharing of miraculous happenings and healings. Typically God, the Holy Spirit, the church, the Bishop or bishops are thanked and praised enthusiastically. The testimonies I have witnessed included stories about successful childbirth, finding employment, husbands becoming supportive partners, corrupted teenagers turning around their lives, ailments being healed and surviving of accidents with no or minor wounds. The speaker usually requested the congregation to praise and thank God, the Bishop and the church by means of a prayer and/or a church song at the end of such a testimony.

Speakers often became emotional and sometimes displayed ecstatic behaviour. Many of the listeners become visibly and audibly sympathetic towards the speaker. During my attendance several attendees would enthusiastically praise God, the Holy Spirit, the church or the Bishop when miraculous happenings had been shared or they gasped loud when horrifying stories were revealed. These kinds of free-flowing, expressive testimonials seemed to help attendees to experience a reprieve from turmoil in their lives and obtain a sense of hope. The knowledge that they were not facing their troubles alone, but had fellow ZCC community members that shared in their despair and supported them in their struggles, seemed to visibly strengthen participants.

Verses from the Bible were sometimes read during testimonies and those who wished to do so expounded upon the Scriptures. There appeared to be no special

regulations around proceedings regarding the addressing of fellow female members. After the speaker had finished her testimony, a hymn was usually sung initiated by the speaker or any other, usually, senior female member. The next speaker would move to the front during the song and when ready, signalled the congregation to stop singing. Often though, speakers waited until the hymn was finished before they initiated their testimonies.

Occasionally, before and during services, female members will collect voluntary monetary contributions at a table placed in the western side of the sanctuary and more recently also outside the sanctuary. Women usually queue in two different lines, dependent on whether they are dressed in personal clothes or in ZCC attire. Donations mainly consisted of coins. This kind of donation is sometimes prescribed by a person's *ditaelo*. Both kinds of donations are usually accompanied by prayers. A donation can consequently also be perceived as an instrument of personal healing. A more thorough explanation of this healing action will follow in section 5.3.

Women make donations by kneeling down on both knees and then placing the money on the table. During Friday and Sunday services when these kinds of monetary contributions are also made, men place money on the table while standing in an upright position. According to *Moruti* Moya (Personal communication 1996), *Moruti* Mampuru (Personal communication 2003) and Mrs T (Personal communication 2011) this money is ploughed back into the ZCC community to assist elderly, sick and poor people, among other projects, and into the ZCC bursary fund. A *moruti* will occasionally come bless and, in that way, cleanse donations by sprinkling blessed living water on top of them before the service is initiated.

Although this did not happen every Wednesday, often two *baruti* would enter the sanctuary at about 16:30. They, however, always first requested one of the senior female members to meet them outside the sanctuary where they informed her of their intent and asked permission to enter. Permission was always granted. While standing upon the platform, the *baruti* showed members lost items hoping to find the rightful owners, announced the deaths of members and asked for contributions to assist the afflicted families in covering extra funeral costs, such as the purchasing of flowers and food for visiting family members, among other actions. Often a cloth was

placed upon the platform where contributions could be made. As customary, women went down on their knees to place the money upon the cloth. At other times little bowls were passed around in which all who were able donated their contributions.

The same as during Sunday and Friday services, some attendees' *ditaelo* entailed that the congregation or sometimes specifically the female choir had to sing them a specific church song. Typically, when the *baruti* had left, these attendees would move to the front where they awaited on their knees the performance of their prescribed church songs. The choir usually performed the prescribed church songs in a standing position, moving rhythmically along with the beat of the song. Each woman is given a chance to inform the senior female member in charge of her prescribed song. Sometimes a few attendees required the same song. This is then performed only once.

If it was still early enough another testimony or speech would be delivered. At about 16:50, usually the same two *baruti* would re-enter the sanctuary to adjourn the service procedures. First the one *moruti* would deliver a short homily and then lead a communal prayer during which everyone kneeled or bowed down. His session concluded with the singing of a church song. Now the other *moruti* would usually deliver a short homily ending it with a prayer during which everybody would stand up and close their eyes. Finally, a church song is sung during which the congregation rhythmically claps hands and moves in a very orderly manner out of the sanctuary. The same as during Friday and Sunday services the first to leave the sanctuary generally are seniors and those who wear the official ZCC attire, followed by the female choir and then those dressed in personal clothes.

On a regular basis, when the service was still in progress, *baruti* and/or other male church officials prepare big containers with heated blessed living water. Some of this blessed living water is poured into cup-sized tins placed on a table close to the healing shelter, ready for consumption. Right throughout the service, but mostly afterwards, women queue behind this table to acquire blessed living water. Some women would pour the water into their own containers for home usage, and others would enjoy a tin of blessed living water within the church's premises.

5.3 Instruments of healing

Throughout this chapter it has become clear that in the ZCC community the ultimate source of healing is perceived to be God and that the Bishop (see section 4.4.4) is perceived as the primary healer. I therefore argue in this study that the Bishop is the ZCC's main instrument or facilitator of healing. After him healing responsibilities are diverted to the prophets (see section 4.4.2) and *baruti* (see section 4.4.3) who by means of their complementary healing roles also become facilitators of healing. They mostly conduct face-to-face healing activities and assist ZCC community members, visitors and other non-members throughout southern Africa. I argue then that members (see section 4.4.1) and other participants also become facilitators of healing when they participate in prayers, church songs, ZCC dance formations – including the Bishop's brass band (see section 4.4.4), because, as explained in the previous sections, these activities are also used to enable healing. Facilitators of healing make use not only of intangible instruments of healing such as those already mentioned, but also of various tangible instruments. I will now discuss the tangible instruments of healing that I encountered during my participation in ZCC activities and discovered in the literature available to me.

Tangible instruments of healing are used throughout the service mostly to fulfil a person's *ditaelo*. As explained in section 4.4.2, a person's *ditaelo* normally includes more than one prescription, meaning that different instruments of healing have to be used to treat a person's illness, which can include various kinds of hardships.

It is important to remember that prophetic consultations and consequently *ditaelo* are perceived as sacred and private affairs and not easily shared. I have experienced prophetic consultations over the past years on numerous occasions, but because of its sacred nature have only revealed some of the general trends. Each person's *ditaelo* is unique to their specific situation. Even though some of my diagnoses of afflictions, for example for headaches, were similar, the prescriptions I had to follow usually differed. My interpreters during prophesying sessions explained that the causes (explained in section 5.4) of a particular affliction could differ and therefore a different prescription has to be followed.

Blessed objects used as instruments of healing were introduced into the ZCC shortly after initiation of the church. In section 2.7.2 and section 4.4.4 I explain the reasons for introducing instruments of healing. Most of the instruments of healing introduced by Bishop Engenas were, as far as I was able to confirm, still in use when I participated in services.

5.3.1 Blessed living water and other ingredients

Lukhaimane (1980:66) perceived blessed living water (*meetse a thapelo*) as one of the ZCC's main "tangible" instruments of healing. Anderson (2000:295), Hanekom (1975:99) and Müller (2011:114) each independently came to the same conclusion and it seemed to be true for the duration I attended services at the Marabastad congregation and the Zion City Moria. For *ditaelo* purposes prophets usually indicated the water source to be used, for example, it should be taken from a spring, a specific river or where two rivers become one or the sea and sometimes water from the *sebêšô's* reservoirs (Lukhaimane 1980:67; Personal communication: *Moruti Moya* 1996; *Moruti Mampuru* 2002).

The first time I encountered the use of blessed living water was when I was cleansed at the gate of the Marabastad congregation. As explained in section 4.2 attendees are thoroughly cleansed by being splashed with blessed living water each time they visit the church's premises. A person's *ditaelo* could also include a prescription to be cleansed this way. I usually received this kind of *ditaelo* when I had not visited the church grounds for a long time (Personal experiences 1996, 2002–2003, 2011).

Ditaelo can also include the drinking of a big tin of blessed living water given to the patient by a *moruti*. I experienced this method of healing several times. I was told that this treatment is a blessing and was made aware that, depending on the afflicted person's particular situation, its primary purpose is to cleanse, heal, protect, and boost a person's ability to live a prosperous life. Various illnesses, including cases of misfortune, are treated this way. Sometimes I had to drink a whole tin of lukewarm blessed living water all at once. Usually I was allowed to hold the tin while drinking its contents, but sometimes not. A *moruti* would then hold the cup to my lips and pour the blessed contents carefully into my mouth. Several times at Moria (Personal experiences 2003) my *ditaelo* included the drinking of a one-litre jug of blessed living

water. The jug was, however, always handed to me and I could empty it at my discretion.

Sometimes a person's prescription includes the drinking of blessed living water at regular intervals at home. Among other reasons, this is when bottles of blessed living water are given for home usage. Prescribed liquids are regularly mixed with other ingredients, such as specific brands and kinds of teas like Joko, Five Roses, Ceylon, specially blessed Zion City Moria tea, Rooi Bos (an indigenous South African tea) and Hamburg tea (an anti-constipation tea), coffees such as specially blessed Zion City Moria coffee also referred to as coffee "with" or "of the photograph", FG and Trekker coffee, cacao, and cooking oil, which is more commonly referred to as fish oil and salt. Salt is usually added to induce vomiting, which Anderson (2000:294) explained is done "to remove not only physical sickness but spiritual defilement also" (see Lukhaimane 1980:67). I, however, have never experienced this kind of treatment. Sometimes blessed living water is used in conjunction with products such as Maltabella porridge (sorghum), KLIM milk, Vaseline and/or blessed stones (Personal experiences 1995–1996, 2002–2003, 2011). I have provided a few examples of how products can be prescribed from my experiences.

For one of my prophetic prescriptions I had to buy Joko tea, cocoa powder and so-called fish oil. I could go and buy these products outside at the informal market stalls or use my own if I had with me. Usually when I needed to purchase anything outside the gate a *moruti* would accompany me ensuring that I acquired the correct ingredients. It is during these times that I became aware that what is referred to as fish oil is usually sunflower oil or any other cooking oil. As usual, I had to take all the ingredients to the healing shelter where a senior male member wrote each product's name into the stock book, and then to the *sebêšô* where *baruti* prepared my sanctified prescription usually in conjunction with blessed living water. Sometimes the tea, coffee and cacao mixtures are prepared quite a bit stronger than when used for ordinary home usage and other times it is specifically instructed that the prepared healing mixture should not be strong at all. I received this specific sanctified mixture in a two-litre Coca Cola bottle and was reminded that I should drink a little bit at least once a day, but could drink more if I had a need to do so until the prepared prescription was finished.

One of my *ditaelo* included the instruction to acquire coffee “of the photograph”, meaning special Zion City Moria coffee. I was advised to rub the coffee all over my body, but had to concentrate specifically on my legs. I also needed to wear three blue ribbons and three white ones around my middle for as long as needed. This prophet concluded my *ditaelo* by saying that it would be best for my overall state of well-being to acquire the blue choir dress. As indicated earlier this can only be worn by baptised members, which reaffirms the perception that baptism is the ultimate sacrament in a person’s quest for health.

At another time my prophetic instructions indicated that I had to buy Hamburg tea, FG coffee, Trekker coffee and salt. Again, after we had purchased the ingredients outside the gate they had to be handled by the *baruti* or other senior male members at the healing shelter. I was also instructed to fill a two-litre bottle with water that derived from the area in a river specifically where it was joined by another river. I was told to scoop the water where the river flowed slower than at the other areas. When I returned with my bottle of special water to the next service, *baruti* at the *sebêšô* prepared my prescription by adding tiny proportions of my previously acquired and blessed ingredients. Again I had to drink a little bit of this prescription once a day and every day until it was finished.

I also received a prescription that consisted of a two-litre bottle filled with cold Joko tea and a two-litre bottle filled with hot Joko tea. Prescriptions usually prescribe the exact kind of tea and brand that has to be used. I was told by my interpreter, in hushed voice, that the prophet had said to pour a little bit of each tea into a little bowl and then dilute it with boiled water. I could drink it after it had cooled down. I had to face the direction in which the sun rises (east) while drinking the blessed tea. I was instructed to drink at least two to three bowls of this sanctified tea daily. This procedure would “heal my heart that talks too much” (dissatisfaction with my personal circumstances).

My interpreter (Mrs T) wore sandals during one of our 2011 visits. When she was called out for a prophesying session it became clear to me why sandals were not preferred footwear. Her *ditaelo* entailed that blessed coffee had to be poured into her shoes to protect her specifically against evil medicine that was buried in the ground

or floor. Of course, the blessed liquid was not contained very well in her sandals and she was told to rather wear closed shoes in the future. She told me that *baruti* sometimes also mixed the coffee with special salt bought at Moria and then poured it into the afflicted individual's shoes. Anderson (2000:273) referred to this same procedure, although he indicated the use of blessed tea leaves.

At another time, for cleansing and protection purposes I was instructed to acquire ZCC Vaseline. I had to massage my body and face with the Vaseline every time I had bathed or showered for three consecutive days and if needed even longer. The prophet said that it would be preferred if I could wash myself regularly with water from a spring or river, and then apply the Vaseline. The wide use of Vaseline among female members became apparent during a Wednesday female service we had attended in 2011. One of the senior female speakers told the congregation that the only acceptable beautifying product among ZCC members was Vaseline. This prescription correlates with the prohibition on the use of make-up and hair colouring products, etc. (see section 4.3).

I have also been instructed to find stones at different locations. Once, I had to collect two stones from the foot of a hill and another one from a river, specifically where the river is joined by another river. The stones were then burned and blessed by a *moruti* at the *sebêšô* in the procedure referred to as *Go aramela*. I was also given blessed living water that I had to pour together with hot water over the stones placed in a bowl. With a towel over my head I had to inhale the vapour of this sanctified remedy at least once a day (Personal experiences 2003). At another time I had to find one stone from a river, one from a little mountain or hill and another from a gravel road. They also had to be burned and blessed by *baruti* at the *sebêšô*. This prescription included blessed Zion City Moria tea sometimes referred to as *taelo* tea or tea of the photograph. I was instructed to place the sanctified stones in a bucket and then pour the sanctified tea together with hot water over the stones. Again with a towel over my head I had to inhale the vapour at least once a day (Personal experiences 2011; see Muller 2011:73, 153). Finding my own instruments of healing and thereby participating actively in my own healing process gave me a satisfying feeling of accomplishment on all occasions.

I have been prescribed Maltabella porridge (sorghum) at various times that I had to eat together with a cup of specially blessed tea in the mornings. Muller (2011:81) was also instructed to eat Maltabella porridge, though he had to add a few drops of so-called fish oil. During one of these prophesying sessions I was told that I was experiencing abdominal pains that seemed to be caused by the presence of something like a little crocodile in my stomach. At that stage of my life I was diagnosed with a stomach ulcer. For this prescription I was honoured with a visit from the *moruti* at home where he prepared me a few litres of blessed tea and blessed my porridge. Apart from drinking the blessed tea together with the Maltabella porridge in the mornings he told me that I could drink it whenever I thought I was in need. He told me to pour only a little bit of this tea into a cup after which I had to dilute it with normal and, if I wanted to, heated tap water.

During Müller's (2011:110, 136) visit to the Zion City Moria he received *ditaelo* that prescribed him to drink long-life milk that would help him get rid of harmful bacteria in his stomach. During my attendance I have never been prescribed milk, which again seems to be an indication that prescriptions are unique to each person's personal circumstances.

As explained in section 5.2.2, blessed living water for home usage without a prophet's prescription is given free of charge. Lukhaimane (1980:67) said that because of its strong healing properties many members preferred to drink warm blessed living water when they woke up in the morning and before they went to bed in the evening. According to *Moruti* Mampuru (Personal communication 2003) many members still followed this same procedure. My interpreter Martha drank blessed living water whenever she was given a chance. She had told me that the ZCC's blessed living water was known to be "very strong" and that it was impossible to drink too much (Personal communication 2003). For example, when we visited Zion City Moria in 2003 I saw her drink litres and litres of blessed living water throughout the day.

Members also use blessed living water without prescription to cleanse and protect themselves and loved ones against all kinds of hardships mostly caused by witchcraft and sorcery (Mafuta 2010:96). I was told by research participants and

other service participants that they added blessed living water to their washing, in their pots when cooking, when washing themselves and sometimes they sprinkled themselves after they had committed some kind of transgression, with the intent to protect, cleanse and heal. Members also sprinkle blessed living water on any other food, clothes, schoolbooks, in, on and around their homes and pour it into their cars' radiators and water tanks to ensure safe journeys (see Mafuta 2010:96). According to Lukhaimane (1980:67), sand was sometimes added to blessed living water when it was used to protect homes, businesses and crops.

Lukhaimane (1980:66) explained that the emphasis placed on blessed water, especially for purification purposes by sprinkling people or objects, is continuous with traditional African practices. Anderson (2000:294) also perceived that blessed living water "is seen to represent cleansing and purification from evil, sin, sickness and ritual pollution, concepts carried over from traditional thought". The use of blessed water, however, is not only continuous with traditional African practices, but also with Christian practices. During one of the services I had attended in 2003 a preaching *moruti* used the Bible's Old Testament, Ezekiel 36:25⁴⁴ to explain the importance of the use of blessed living water.

5.3.2 Blessed pieces of paper (*mogau*)

During the times I attended services another often-used tangible instrument of healing was the *mogau*. As explained earlier, the *mogau* is a ZCC-sanctified piece of paper. *Moruti* Mampuru (Personal communication 2003) and *Moruti* Moya (Personal communication 1996) told me that *mogau* in a ZCC context means "mercy" as indicated in the Popular Northern Sotho Dictionary (Kriel, Prinsloo & Sathekge 1997:98). The *mogau* is used in different kinds of treatment procedures. Several *baruti* who treated me during services told me that the *mogau* is used to bless people in a similar way to blessed living water. Only after further enquiry they explained that this blessing is usually directed with the intent to cleanse, heal, protect and to enable prosperity. It is, as is blessed living water, used to treat a variety of afflictions.

⁴⁴ Ezekiel 36:25 in the Old Testament of the Good News Bible (1981) reads "I will sprinkle clean water on you and make you clean from all your idols and everything else that has defiled you".

One of the first *mogau* procedures I witnessed was when *baruti* opened and afterwards concluded the service procedures with a blessing. A *moruti* conducts this blessing by juggling a burning *mogau* between his hands until it is too hot to handle and then drops it to the floor where it is burned to ashes (see section 5.2).

A *mogau* treatment that *baruti* regularly administered to afflicted individuals was the smoking procedure. The *mogau*, usually shaped into a roll or cone, is set alight and then waved around the patient. Although similar hand movements are used the smoke is not always dispensed in exactly the same way. Most of the times the burning *mogau* is first moved along the body, then the shoulders and lastly around the head. Sometimes, however, I witnessed that the smoke is waved around a patient's shoulders and head only. At the end of the procedure the *moruti* also juggles the *mogau* between his hands until it is too hot to handle and then drops it to the floor where it will burn to ashes. When Anderson (1999:301) experienced this treatment the last bit of burning *mogau* was placed into his hands and although he did not mention any further procedures I presume he also had to juggle it between his hands and then had to drop it to the floor. Although I have received this kind of treatment numerous times, I was never instructed to hold the last bit of the burning *mogau* myself. This seemed to be due to the prescription that women are not allowed to touch a *mogau*. A burning *mogau* is also sometimes used in car blessings, as described later in this section.

The technique of using the smoke of a burning *mogau* to treat people is according to Hanekom (1975:101) to some extent continuous with Northern Sotho-speakers traditional practices. Traditionally, however, the smoke of a campfire is used. He explained that patients are held close to the fire enabling them to inhale the smoke for healing purposes.

Another treatment procedure *baruti* administered is when one, or I have counted up to three, strips of *mogau* are placed on top of each other and then pressed against different parts of a patient's body. Usually a *moruti* will press the *mogau* once or a couple of times against a person's head, shoulders, arms, breastbone, stomach and legs, sometimes upper and lower legs, in that approximate sequence. On one occasion I was treated by two *baruti* at the same time; one treated my body parts on

my left side and the other at the same time my body parts on my right side. Although *baruti* do not always follow the exact same procedures, the above-described sequence was usually applied (Personal experiences 1995–1996, 2002–2003, 2011).

Mogau are sometimes also given for the purposes of home treatment. If a patient is, for example, experiencing stomach cramps, the prophets' *ditaelo* could prescribe the patient to press the *mogau* against the stomach several times a day. According to Hanekom's (1975:101) experience in the field only the household head was allowed to apply the *mogau* against the afflicted body part of his family members. In a patriarchal society, such as those of the Pedi- and other Northern Sotho-speakers, the household head is traditionally a male. Hanekom (1975), however, did not specifically state that women were forbidden to touch the *mogau*. Mr F (Personal communication 2002) was kind enough to have shown me the *mogau* that he had received to treat his afflictions. His *mogau* had a ZCC stamp. Mr F told me specifically that women were not allowed to touch the *mogau*. He said that if I had to be treated this way only a male member of my family or preferably a *moruti* was allowed to press the *mogau* against my afflicted body parts. He also said I would be afflicted with some kind of bodily illness if I touched a *mogau* on purpose. During the latter part of my fieldwork female participants confirmed that it was taboo for women to touch a *mogau*. However, they said that if a female had touched a *mogau* on purpose she would not necessarily become physically ill, but would be polluted and would definitely have to be cleansed by a *moruti*. It therefore seems that up until 2012 it was still the duty of a male to apply a *mogau* as an instrument of healing.

Lukhaimane (1980:65) explained that historically the *mogau* was at first provided by Engenas in the form of blessed pieces of khaki cloth. As membership increased this proved to be too expensive and the khaki cloth was replaced with blessed pieces of green paper, khaki-coloured paper or newspaper. Hanekom (1975:101) wrote that *mogau* used to be sanctified at the Zion City Moria. This was according to *Moruti* Mampuru still common practice during the times I attended services (Personal communication 2003). He explained that members usually gathered old newspapers and other off-cuts of paper during the week. All these papers are dropped off at the premises of the ZCC in Mamelodi. When enough papers have been collected, they

are sent to the Zion City Moria. He said that congregations across South Africa follow these same procedures. At Moria, the Bishop and some of his chosen *baruti* then bless the gathered papers. Today the sanctified papers are cut into strips by a machine especially purchased for this purpose. Finally the *mogau* are sent back to congregations all over South Africa to be used as instruments of healing.

5.3.3 Sanctified cords, *khutane* and ZCC attire

Sanctified cords of different colours are also used as instruments of healing. If people are in need of sanctified cords it is usually indicated in their *ditaelo*. Sanctified cords of different colours are mostly worn around the waist, although sometimes also around other body parts (Personal experiences 2002; Mafuta 2010:95–97). According to Lukhaimane (1980:68), these cords or strips of cloth are worn to safeguard people from witchcraft and sorcery, and are not supposed to be washed with any detergent. In this same regard the *khutane* (blue square cloth in-between ZCC badge and its green and black cloths) can be mentioned as it is also used for protective purposes. And then, as mentioned in section 4.3, the wearing of particular ZCC attire can also be prescribed for protection and healing purposes.

5.3.4 Sanctified medallions, photographs and copper strings

Sometimes *ditaelo* includes the acquisition of a ZCC medallion engraved with the Bishop's face or a photograph of the Bishop to be hung in the afflicted person's house. Both are perceived as safeguards against evil. Members in general see it as a great honour to own these instruments of healing (Kruger 1971:42; Personal experiences 2002, 2011). Sanctified strings of copper wire are prescribed to protect the household members and their dwelling against witchcraft, sorcery and lightning. Usually the copper strings are fastened to a household's gate (Hanekom 1975:103; Müller 2011:104).

These sanctified instruments of healing can be acquired at the administrative offices located next to the gate while the service is still in progress or at any other time when the church grounds are open to visitors (Personal experiences 2002–2003, 2011).

5.3.5 Pricking with needles

Pricking with needles on different parts of the body is another method of healing (Kruger 1971:42; Müller 2011:123). I, however, have never witnessed or experienced this method myself. According to Lukhaimane (1980:66) pricking with sanctified

needles was done to remove impure blood especially when a patient was experiencing pain. It is therefore necessary that blood flows when a person is pricked. According to Mr F (Personal communication 2002) people are usually pricked in the hands, arms, legs and sometimes in the nostrils (see Lukhaimane 1980:66; Müller 2011:123). He said that after he had been pricked in the nose the headaches that had plagued him disappeared. Müller (2011:123) explained that this kind of healing is commonly referred to as “the injection of God”.

According to Lukhaimane (1980: 66) the so-called injection of God has a twofold origin. On the one side it was taken over from the Apostolic tradition, but slightly adapted. On the other side, it also has a traditional origin. He explained that medicine men used to cut patients if they were experiencing pain, such as headaches and eye disorders (see Kriel 1992:471). Lukhaimane (1980:66) indicated that pricking in a ZCC context is mostly done to help elderly people. Important to note is that Maaga (1989:11–12) explicitly indicated in the *ZCC Messenger* that only certain *baruti* are allowed to prick people and that the needles are sterilised at all times in order to prevent the spreading of contagious diseases such as HIV/Aids. According to Müller’s (2011:123) research participant this was still common practice during his time in the field.

5.3.6 Money

Money within a healing context is also perceived as an instrument of healing. Usually after prophesying sessions, *baruti* and other interpreters explained my *ditaelo* in great detail to me. On such an occasion I was told that when I have to make a monetary contribution I should accompany it with a prayer asking God for help with whatever my loved ones and I were in need of. This prayer procedure was not only applicable to my *ditaelo* donations, but also to voluntary donations. When I asked how much money would be favourable I was told that the amount of money was not of importance. It was the action of giving that counted, because in return I would receive. When we visited the Zion City Moria we were able to donate money in the drums positioned throughout the city. Here too *Moruti* Mampuru told us that we should accompany our donations with prayers requesting God’s assistance. Both *Moruti* Mampuru and Martha were of the opinion that this procedure was much more powerful when executed at the Holy Zion City than at the local Marabastad

congregation. The reason for the strength of prayer at Moria was apparently the presence of the Bishop's powerful life-force (again they used the Afrikaans term *krag*) and because it was God's chosen city.

I was instructed a few times to donate money during prophesying sessions, always only a little at a time. Once, for example, I was told that my family was experiencing internal difficulties, which was true. Part of my *ditaelo* included the placement of a R1 (South African Rand) coin on the little table outside the sanctuary that had to be accompanied with a prayer from my heart asking God for help in this regard. I was also instructed to place all the bad experiences that we were enduring with my thoughts into the coin and in that way God would help me get rid of them (see Müller 2011:81, 84–85). Males executed these prayer procedures standing upright. Being female I had to donate and pray on my knees.

A little table was usually placed somewhere just outside the entrance of the sanctuary during Sunday and Friday services. Generally nobody specifically attended this little table. I witnessed, however, that one of the *baruti* would every now and again come to bless and cleanse the contributions through the sprinkling of blessed living water.

As mentioned in section 4.4.4, the donated money from the different congregations is to some extent ploughed back into the ZCC community to empower the impoverished, among other actions, and heal their unfortunate circumstances. In this way money also acts as an instrument of healing (see Comaroff 1985:253).

Müller (2011:84–85) referred to Kiernan (1988:455–456) who cited Jean Comaroff's (1985:236) interpretation of ritualised monetary contributions in a Zionist context. She said that "money becomes a vehicle, in the ritual context, for regaining control over the self in the gift, a personalised contribution to the fund of power of the collectivity". Kiernan, however, argued that this might be true for the Tshidi among whom the Comaroffs worked, but not so much for the Zulu-speaking Zionists who "are concerned less with aspects of a depleted self than with the social parameters of the religious collectivity"; they rather transformed money into a vehicle "to serve their own organizational needs". Müller (2011:84) then argued in line with Kiernan's

interpretation that in the coin prophecies, money is definitely transformed into something else, into a vehicle, but perhaps rather “more literally for carrying messages to the Bishop, thereby affirming, if anything, the sender’s dependency on Barnabas’s benevolence”. It seems difficult to generalise as all of these interpretations are true to some extent depending on members’ circumstances. I could add that, according to my personal experiences, money was used as a so-called “vehicle” to carry messages to God.

5.3.7 Report writing

Another instrument of healing sometimes included in *ditaelo* is “report writing” where the afflicted person writes all her/his concerns and wishes on a piece of paper and ask the Bishop for his blessings before submitting at the indicated congregation. Müller (2011:85–86) considered the ritualised coin donations to be an oral version of the report-writing instructions. He, consequently, argued that “[f]rom the members’ point of view, it is clearly not about the money, but about the message it delivers to the Bishop”.

5.3.8 The Bible and personal prayers

The Bible is also used as an instrument of healing. Most members I spoke to perceived it as the most important book of all. Being female I especially noticed female members bringing along their Bibles whenever they visited the church grounds. Usually they had highlighted verses that had specific meaning to them and made little notes in the side lines. My perception of the Bible being used as an instrument of healing was triggered during one of my prophesying sessions. A prophetess had told me that I “worried too much”. Part of my *ditaelo* was to acquire a Bible to keep with me at all times. Every time my “heart would worry”, I had to randomly open the Bible and read a verse or two. She concluded by saying that I should not be worried, because God did hear my prayers. I should therefore pray as much as possible.

The personal prayers of individual members are obviously also perceived as instruments of healing and sometimes prescribed in *ditaelo*. I, for example, have been instructed to ask God every night before I go to sleep to wake me up at 24:00 and again at 3:00 or 4:00. At these indicated times I had to pray for healing and protection. When I asked the interpreters if I would really wake up at these strange

hours during the night, they were all convinced I would, because they had all been able to follow these same kinds of procedures.

Back to the Bible as an instrument of healing, the church also has a special ZCC Family Bible to help members through times of turmoil. *Moruti Moya* had kindly given me a few photocopied pages of the ZCC Family Bible as an addition to my gathered research data. Although there was no indication of the date of publication it did show that it had been bound by the *Nasionale Boekdrukkery* in the Cape Province. Each verse was written in the first column in the Northern Sotho language, in the next column into English and the third column in the Zulu language. The introduction to the ZCC Family Bible was written by Bishop Barnabas Edward Lekganyane or as indicated on the photocopies “By His Grace the Right Rev Bishop B.E. Lekganyane” (ZCC Family Bible). In the introduction the Bishop indicated a few chapters and verses that members could use to help with the healing of specific afflictions:

“Bereaved (Matthew 5:4, II Corinthians 1:3, 4)

Depressed (Psalm 34)

Conscious of sin (Proverbs 28:13)

Anxious (Psalm 46, Matthew 6: 19-34, Philipians 4: 6)

Doubting (Matthew 8:26, Hebrews 11)

Facing a Crisis (Psalm 121, Matthew 6:25–34)

Faith Fail (Psalm 42:5, Hebrews 11)

Lonely (Psalm 23, Hebrews 13:5, 6)

Needing God (Psalm 27:1–6, Psalm 91)

Needing Guidance (Psalm 32:8, Proverbs 3:5, 6)

Needing rules for living (Romans 12)

Tempted (Psalm 1, Psalm 139:23, 24, Matthew 26:41)

Sorrow (Matthew 5:4, John 14:1–18, II Corinthians 1:3–4)”

The Bishop concluded with the words: “Finally, read them to be wise, believe them to be safe and practise them to be holy. I hope we shall ALL enjoy the Z.C.C. Family Bible”.

5.3.9 Whip and staff

The whip and staff are also used as sanctified instruments of healing. As indicated earlier Lukhaimane (1980:67) referred specifically to the walking sticks that are blessed for the purpose of protection against any kind of misfortune. Anderson (2000:273) specifically indicated the use of both instruments by *baruti* as protection at night against *tsotsis* (thugs). He added that the crack of a whip is used to render the *tokoloshe* powerless. Apart from use during *mokhukhu* performances, I have also witnessed staffs and whips being used during car blessings, usually in combination with blessed living water.

Ditaelo that prescribes a car blessing is usually followed when a prophet has received a revelation concerning the possibility of a car accident or theft. For example, Müller (2011:77) was told that his car needed a special blessing because the place they “were going was known for the presence of unfriendly *badimo*” (ancestor spirits). *Baruti* usually conduct car protection blessings to prevent unfortunate happenings. *Moruti* Mampuru (Personal communication 2002) told me that for a person’s own good these procedures should be administered as soon as possible, even immediately when the service is still in progress.

In 2003 I was summoned by a prophet who prophesised that evil intent was focused on my car. I was instructed to drive my car immediately into the church’s premises and to park it in front of the administrative offices. *Baruti* told me to open my car doors, the bonnet and boot. I had to be seated in my car during the healing procedures. Firstly, a *moruti* walked counter clockwise around my car and sprinkled it all over and inside with blessed living water. As I was seated in the car, I was sprinkled as well. He also sprinkled the car’s engine and poured some blessed living water into the radiator. After he had finished, two other *baruti* took over, one equipped with a blessed whip and the other with a blessed staff. They each walked in opposite directions around my car. The one *moruti* with the whip walked counter clockwise during which he rapidly moved the whip up in the air making explosive cracking sounds and so chased away possible evil. The other *moruti* walked clockwise and lightly tapped my car all over with the staff. After these actions were concluded and I had thanked them for their efforts, I was told that I could park my car outside again. *Moruti* Mampuru (Personal communication 2003) later told me that he

was not as fortunate as I was in the sense that the last time his car had to be treated he was instructed to fetch his own living water from a particular source. His car was therefore only treated after he had acquired the specified living water a few days later.

In 2011 I received *ditaelo* that also included the prediction of a possible car accident if the correct procedures were not followed. Again I was instructed by *baruti* to park my car in front of the administrative offices inside the church grounds. And again I had to open all my car doors, bonnet and boot and had to be seated inside. A *moruti* used a bucket of blessed living water and sprinkled the outside of my car and me while circling clockwise around it. Blessed living water was sprinkled onto the engine and poured into the radiator, and now also into the wiper-fluid reservoir. This time, however, *baruti* did not use the sanctified whip and staff.

Müller (2011:76–77) experienced different procedures in this regard. For example, on one occasion a burning *mogau* (the newspaper kind) was used to treat the inside of his car. Just before it was finished burning it was given to him to juggle from hand to hand until it had burnt to ashes. Another time, mainly the interior of his car was treated, but this time the *moruti* sprinkled it with blessed living water from a can. The *moruti*, however, also concluded the blessing by pouring the remainder of the sacred water into Müller's car's radiator and wiper-fluid container.

Sometimes *baruti* administered car blessings without any given *ditaelo*. During our visit to Zion City Moria in 2003 a *moruti* informed me that he was going to administer a blessing to ensure us a safe return journey. I really appreciated his gesture and thanked him beforehand. He nodded kindly and performed approximately the same procedures as the second blessing administered to my car (2011). He, however, administered the procedures while walking anticlockwise around my car. Although the drivers of the other cars that were parked in the guesthouse's parking lot were absent he blessed their cars as well. Yet, because the cars were locked he only sprinkled blessed living water on the outside of their cars. I was again amazed by the inherent good will found among so many ZCC members.

5.3.10 Biomedicine

Contrary to popular belief, during my periods of participation it became apparent that ZCC members under certain circumstances are allowed to make use of biomedicines and hospitals. Even though my personal *ditaelo* never included any form of biomedicine, a prophet had told me that I could use pain medication if it was really necessary (Personal Experiences 2011). In the *ZCC Messenger* I also noticed advertisements of Grand-pa headache powders (*ZCC Messenger* 2001:23). According to *Moruti* Makena (Personal communication 2003) there is even a pharmacy and an ambulance service adjacent to Moria whose services are made available to members in dire physical discomfort. For example, Mr F (Personal communication 2002) told me that if you have broken your arm, you will first have to be fixed by medical practitioners and then *ditaelo* can be used to remove the possible original cause and for quick and efficient healing (see Müller 2011:104). However, *Moruti* Moya and *Moruti* Mampuru had informed me that it was preferred that biomedical medication and *ditaelo* were not used at the same time. It is interesting to note that during Hanekom's (1975:91) fieldwork it was indicated that the use of biomedicine was not allowed.

Instruments of healing, in general, are affordable. Even if an individual does not have a reasonable income, s/he will still be able to acquire with ease most instruments of healing prescribed in *ditaelo*. I might add that throughout my years of participation *baruti* have several times given me bottles with blessed liquids such as teas, coffees and sometimes mixtures of different ingredients without *ditaelo* and without me having to supply the ingredients. I have seen more than a few fellow participants receive these gifts of goodwill as well.

Throughout this section it has become clear that the healing procedures prescribed by people's *ditaelo* are each time to some extent unique and that *baruti* to some extent also use their own integrity in administering a person's *ditaelo*. Although certain instruments of healing can definitely be connected to certain actions, for example copper wires to protect homes against the assaults of witches and sorcerers, I have not attempted the compilation of a list of causes, afflictions and the possibility of particular treatments thereof (see Lukhaimane 1980:76–77). All instruments of healing of which the application depends on a person's *ditaelo* are

used with the intent to cleanse, heal, protect and bless people with abundance. For this study's purpose I agree with Müller (2011:76) who argued that "[t]he important thing in prophesy is in any case not the details of the procedure, but rather achieving the desired outcome".

To conclude, while participating at services, I did not encounter members that questioned the ZCC's instruments of healing or in other words their *ditaelo*. *Ditaelo* is usually followed faithfully with the belief that in this way God will help people regain their health. It is of course possible to assume that there are people who were not able to obtain health in the ZCC environment and so were not attending ZCC services anymore. However, the ZCC membership count is still growing. Therefore, those not able to find good health for whatever reason are constantly replaced by newcomers. Although the 2011 census form did not include any questions about religion, there are currently about 60 million people in South Africa and if there are between 10 and 15 million ZCC members it means that at least one sixth of the country's population are members of the ZCC (Khumalo 2009:3). It therefore seems relatively safe to presume that at least one sixth of the population is satisfied with the ZCC's healing services.

5.4 Notions of health and causes of illness

Throughout this study it has become evident that the ZCC's perception of health relates to the traditional African concept of health (see section 3.3.1). Health, in a ZCC context, refers specifically to physical and mental health, and to a person's general sense of well-being, which includes healthy relationships with others, both the living and those in the spirit world, and secular success. Summarised in Müller's (2011:195) words, "the implications for health in a ZCC context are both material and spiritual, both vertical and horizontal, both individual and communal".

In the ZCC possible agents of causation are to some extent also similar to those identified in traditional African situations (see section 3.3.2). Beyond God, and in some cases ancestor and associated spirits, the main causation agents are perceived as evil assaults by witches, sorcerers and sometimes evil spirits – also referred to as demons or the work of the devil. One of the ZCC's main attractions is

the widely held belief that it offers effective protection against these kinds of evil assaults (Kruger 1971:43; Lukhaimane 1980:63; Müller 2011:19, 51).

Similar to other AICs, members function within a paradigm of Christian thought. Sin, as depicted in the Bible, is therefore also perceived as an agent of sufferings. Among ZCC members the concept of sin includes the transgression of ZCC rules and prohibitions, which in some cases overlap with traditional taboos as explained in section 4.3 (Hanekom 1975:96, 101; Kruger 1971:43; Müller 2011:51–52).

The concept of sin or the transgression of behavioural rules includes all anti-social behaviour that disturbs relationships with others, both the living and those in the spirit world (Müller 2011:195). Examples of such behaviour are murder, theft, adultery, not helping those that are in need, laziness, humiliating others, malicious gossip and disrespectful behaviour towards your elders – both the living and the dead. The ZCC, similar to a traditional African context, places significant emphasis on the dignified and respectful treatment of those older than oneself, those of direct descent, the living and the dead (Hammond-Tooke 1989:65; Hanekom 1975:92–93).

The transgression of dietary taboos is encompassed in the concept of sin and is therefore also a possible agent of causation. As discussed in section 4.3, ZCC members have to avoid alcohol and tobacco primarily as the human body is perceived as God's temple and so should not be polluted with these harmful substances. Eating pork is also prohibited (Anderson 2000:165). *Moruti* Makena (Personal Communication 2002) told me that this prohibition is in line with the laws of Moses as written in the Bible's Old Testament. According to Hanekom (1975:92), the pork prohibition, however, also overlaps with a traditional taboo. The present day Zion City Moria is located in the Mamabolo area where the first Bishop Engenas Lekganyane was born (Anderson 2000:68; Lukhaimane 1980:9). The traditional totem animal of the Mamabolo is the wild pig (*kolobe*). Consequently, they were prohibited to kill or eat the *kolobe* (see Müller 2011:72). According to Hanekom (1975:92), no real differentiation was made between the wild pig and a domesticated pig; hence this prohibition is applicable to the domesticated pig as well. This taboo therefore seems to be supported by both traditional and Biblical prescriptions.

During my participation in ZCC services (1996, 2002–2003, 2011) I heard *baruti* preach that to protect people from evil forces known to cause misfortune, members were prohibited to consult traditional African medicine men or women (healers or healthcare practitioners), use traditional African medicines, or attend initiation schools. If members did possess traditional medicine they were advised or rather instructed to bring it to the church where it would be destroyed under the guidance of the Holy Spirit. It is therefore strictly forbidden to become involved not only in the negative application of life-force, such as used in witchcraft and sorcery, but also in the positive application of life-force as is done by traditional healers (Anderson 2000:208–209; Hanekom 1975:91; Müller 2011:51–52). Sundkler (1948:218 in Müller 2011:72), who conducted most of his research among Zulu-speaking Zionists, argued that the pork prohibition was also closely related to the sanction against consulting traditional healers. He explained that traditional Zulu-speaking healers “cherished the fat of pork which would let the ancestor spirit move easily in the being of the diviner”. He, consequently, assumed that because eating pork communicated the *isangoma* practice it was prohibited.

Afflictions, whatever their cause, are experienced in the present therefore members seek deliverance from these unfortunate circumstances in the present. The forgiveness of sins in preparation for a blissful afterlife is therefore not as heavily emphasised (Müller 2011:197). In Anderson’s (2000:142) words, one of the ZCC’s main aims is to “address practical needs such as sickness, poverty, unemployment, loneliness, evil spirits and sorcery [and witchcraft]” by means of offering “a Christian response to the built-in threats of African traditional cosmology, particularly in the healing sessions, when the nature and cause of the disease are given at the same time” (see Anderson 2000:274). Healing activities are therefore directed to obtaining deliverance from sin, evil assaults and consequently resultant afflictions in the present. In short, healing in a ZCC context focuses on attaining an overall state of health and the protection thereof (Daneel 2000:333; Hanekom 1975:94; Müller 2011:194, 197).

5.5 Conclusion

Continuous acts of healing occur throughout service procedures. Everybody is cleansed by the gatekeepers on entry to the church grounds. ZCC formations perform, providing healing to the performers and listeners both outside and inside the church grounds. Prophets continuously prophesy divine messages to those in need, and concurrently the *baruti* treat those in need. *Baruti* also continually conduct confessions that are perceived as necessary cleansing acts enabling healing. Blessed living water is made available to those in need of extra cleansing, protection and healing throughout the service. Attendees participate in communal prayers providing healing to all those mentioned in the prayers. Everyone participates in the singing of church songs, which are also perceived as prayers and so are also instruments of healing. Monetary donations, even if only a one-cent coin, are contributed with the intent to bring healing to the donator and/or loved ones. Instruments of healing such as church medallions, cords and photographs of the Bishop can be acquired at the administrative offices and are effective immediately. If vehicles are polluted and consequently could endanger the lives of passengers they are cleansed and protected inside the church ground.

If newcomers stricken by misfortune were in doubt about the possibility of being healed, testimonials delivered by *baruti* during combined-gender services and by female speakers during Wednesday services would give them the confidence that it is absolutely possible to attain good health.

The ZCC is widely known for using a variety of sanctified instruments of healing. In general God is perceived as the ultimate source of healing. In this study I have therefore argued that first the Bishop as the chosen mediator and then his prophets and *baruti* followed by ordinary service participants are all facilitators or instruments of healing. Ordinary participants become instruments of healing mostly by means of using intangible instruments of healing such as individual and communal prayers, church songs and ZCC dances. Most tangible instruments of healing seemed to be used when they have been prescribed in a person's *ditaelo* or been given to participants by *baruti* to use with a specific healing purpose.

Tangible instruments of healing I encountered during my studies included blessed living water, which is used independently or mixed with ingredients that have been sanctified such as different kinds and brands of tea, coffees, cacao, cooking oil popularly referred to as fish oil, salt, Maltabella porridge (sorghum), Nestle's KLIM full-cream milk, Vaseline, blessed paper known as *mogau*, special stones, cords, special medallions, photographs of the Bishop, copper strings, needles, to some extent money, report writing, the Bible, and blessed whips and staffs.

It seems that several instruments of healing are rooted in a unique ZCC tradition. Others originated from uses described in the Bible or from other churches, and concurrently too have traditional African roots. Only some have either a Biblical or traditional African origin. Irrelevant of their origins, most instruments of healing have been adapted to a lesser or greater extent to an African Christian healing setting. Throughout this study it has also become apparent that often male and female participants are prescribed to handle instruments of healing differently, again emphasising gender-particular roles present in the ZCC's healing ministry.

As mentioned earlier the concept of health in a ZCC context is closely related to the traditional African concept of health. Health in this regard is perceived as a general state of well-being that includes physical, mental and spiritual health, healthy relationships with others – both the living and the dead – and material success.

As has become evident, notions about the causes of misfortune in the ZCC are also closely related to the traditional African notions about causation. The main difference is that ZCC members live in a paradigm of Christian thought, therefore sin as depicted in the Bible, actions of the devil and the transgression of other ZCC rules and regulations are also perceived as agents of misery. In short, causes for sufferings could be the consequence of God's or the ancestors' discontentment, sin – which includes the transgressions of various ZCC behavioural rules, the actions of witches, sorcerers, evil spirits and the devil. Members experience afflictions in the here and now. Delivery from misfortunate experiences is therefore needed in the present. Hence, people seek the forgiveness of sins mostly to obtain health in the here and now rather than in preparation for a blissful afterlife.

It is evident that the ZCC seeks Christian solutions to problems that members experience in the present by identifying the root causes of the problems, which overlap to some extent with traditional African ideas of causation. Similar to a traditional African healing situation a participant receives in one healing session the identification and cause of an affliction, the necessary treatment to obtain an overall state of health and protection against possible further assaults. When health has been corrupted because life's equilibrium has been disturbed members believe that the prophets and *baruti* from the ZCC healing ministry will do their utmost best to help them restore it again.

It became evident that the nature of healing as I have described it is tightly interwoven with the service. Although people can receive individual prophetic consultations and concurrent healing repertoires during normal days of the week, a bigger variety of tangible and intangible instruments of healing is used during services. One can therefore say that in order to understand healing in the context of the ZCC one needs to attend services and familiarise oneself with the ritual setting.

CHAPTER 6

CONCLUSION

This study has analysed, interpreted, contextualised and explained various themes relating to AICs in southern Africa with a particular focus on the ZCC. It has used relevant literature complemented with fieldwork experiences to provide an overview and more in-depth look at the ZCC. I summarised the essence of the explored themes in each chapter and here revisit these conclusions to round off the developed perspective.

My interest in the ZCC was initiated by reports of its successful healing ministry, hence my focus on a micro-community of ZCC members in Marabastad, located in Pretoria's central business district. It seemed apparent that the size of the ZCC's congregation and the continuous growth thereof proved that this church satisfied most of its member's health needs. The ZCC's healing ministry serves millions of members. However, there is not much literature available that investigates the micro-workings of a ZCC congregation or indicates the finer details of its attraction to members. A solution to this lack seemed to be an anthropological study conducted through ethnographical fieldwork and using participant observation as the main tool in combination with informal, unstructured and semi-structured interviews. In addition, a thorough literature review provided an historical framework for the origins of the ZCC in South Africa.

My literature review revealed that many scholars classified the ZCC as an AIC (see Anderson (2000), Daneel (2007), Mosupyoe (1999) and Müller (2011)) distinguishing it from the western-orientated churches in terms of origin and composition. Over time scholars have used different terminology to refer to AICs, each one disclosing a particular perception of these churches. After a thorough literature study I decided to use the appellation AICs, as many of the more recent scholars do, primarily because it emphasises the African nature of Christianity. I have used the appellation AICs in this study to refer to churches that have been initiated and are controlled by black Africans. In the field, however, it became evident that members of these churches do not refer to themselves as members of AICs, but they rather use their church's officially designated name. Because the ZCC's history is intertwined with that of

other AICs and I wanted to place the ZCC's origin and composition in the wider southern African AIC context, I also explored the general background of AICs.

AICs developed as a direct result of continuous contact between members of western Christian churches and members of traditional African religions mostly during the 20th century. The introduced notion of Christianity was accompanied by western values and norms, which were mostly alien to members of traditional African societies. Church members thus needed to contextualise Christianity in a new African sociocultural environment. They did this by adapting, to various degrees, Christian doctrines with traditional African religious norms and values. This development was sometimes characterised by spontaneous syncretistic processes that several religious scholars have indicated is a natural characteristic of most religions. Through this adaptation numerous AICs established a unique African Christianity of which the ZCC is a remarkable example.

Literally thousands of AICs are present in southern Africa. Scholars have attempted to classify the different types of AICs to gain a better understanding of how they work. As a result it has become clear that each AIC originated and developed in a unique way making it difficult to justify any generalisations. Consequently, these classification systems have been extensively criticised by various scholars. I acknowledge the dangers of oversimplification and that defining characteristics are not necessarily mutually exclusive, but for historical and descriptive purposes I differentiated in this study between the so-called Ethiopian-type churches, known to have similar patterns as their parent churches, and the Spirit-type churches that place stronger emphasis on their African nature, and are usually characterised by an emphasis on the work of the Holy Spirit, the presence of prophets, healing rituals, speaking with tongues and taboos. The name Spirit-type AICs includes Zionist-, Pentecostal- and Apostolic-type churches. The ZCC is described as an example of a Spirit-type AIC.

Many scholars, such as Anderson (1999), Coplan (2008), Daneel (1974, 2007), Kiernan (1985, 1990), Masuku (1996), Mbiti (1971), Omoyajowo (1988), Steyn (1996) and West (1975), have attempted to unravel the rationale for the initiation of AICs. Again because AICs are each characterised by their own unique history of

origin it is difficult to justify generalisations. Drawing on available literature I presented the most obvious reasons, such as the need for black Africans to function independently and govern their own churches and the need for members to Africanise Christianity. The absence of healing activities in western Christian churches also played a role because healing activities play a central role in traditional African religions. It is predominantly Spirit-type AICs that address this need.

From dates given by scholars such as M'Passou (1994), Oosthuizen (1987) and Sundkler (1961) it appears that the Ethiopian-type churches were the first AICs initiated in southern Africa and they originated mainly in protest against discriminatory practices. It has been indicated that the first Ethiopian AIC was initiated by Reverend Mokone and his co-workers who broke away from the Wesleyan Methodist Church in Johannesburg during the late 1900s. Soon others in that area followed their example and joined Reverend Mokone's Ethiopian Church. A few years later under Reverend Dwane's leadership and after a short association with the AME Church of the USA, this church was incorporated as a separate order into the South African Anglican Church. Many followers, however, choose not to follow Dwane and seceded to form their own AICs. Thereafter many groups seceded creating a whole spectrum of Ethiopian-type AICs, usually resulting from financial and/or administrative disagreements and leadership struggles.

Most Spirit-type AICs can trace back their historical roots in one way or another to Reverend Dowie. He initiated the CCAC and its Zion City in Illinois, Chicago also during the late 1900s. The emphasis in this church was placed on healing, adult baptism by threefold immersion and various prohibitions such as the use of medical doctors, drugs, pork, alcohol and tobacco. At first by means of the CCAC's monthly publication *Leaves of Healing* and later by Daniel Bryant, its American overseer in South Africa, South African missionaries such as Pieter Le Roux, Buchler and Mahon were influenced and together with Bryant spread this church's traditions to the local populations. In 1908, however, Le Roux became a member of the AFM. The AFM also emphasised the central role of baptism and healing activities, though they referred to baptism as Pentecost and performed it by means of single immersion. A number of Le Roux's co-workers and members preferred not to follow

him. Some continued in the CCAC's tradition and others initiated their own churches. As members seceded from the original mission churches and again from newly initiated churches they continued to place emphasis on the main characteristics such as the role of the Holy Spirit, prophets, healing and adult baptism by means of immersion that derived from the CCAC and AFM. It also seemed that the majority of these further secessions became more and more African in character.

The initiator of the ZCC, Bishop Engenas (Ignatius) Lekganyane was the son of Pedi-speakers born in Thabakgone, a village that is situated in the area currently known as Limpopo province. He had been exposed to traditional healing activities from a young age, more so because his mother's father was one of the chief's well-known traditional healers. His seemingly first Christian affiliation while working as an evangelist was with the Free Church of Scotland. After visionary experiences in which he was instructed to find a church that would heal his eye disorder, to baptise by means of immersions and that he would be followed by a multitude of people, he moved to Johannesburg. As a result the indicated date of these visions, 1910, is generally perceived as the ZCC's date of initiation. When Engenas arrived in Johannesburg he was for a while associated with Pieter Le Roux. Le Roux's teachings encompassed influences from the Dutch Reform Church, the CCAC in Zion and the AFM. He was later baptised in the ZAC of Mahlangu, Le Roux's ex-co-worker, translator and companion. After he had seceded from the ZAC he was baptised in Motaung's Zion Apostolic faith Mission (ZAFM) where he gained quick recognition for his prophetic abilities and was ordained a bishop.

Especially during Engenas' last two affiliations with Christianity he became more and more known as a profound charismatic leader and prophetic healer. The various influences that gave rise to the establishment of the ZCC and its well-known healing ministry could therefore be categorised as coming from three different origins. These were to some degree influences derived from the traditional African healing environment, from Engenas Lekganyane's various Christian affiliations and most certainly as a result of his own profound leadership and prophetic healing abilities. The Bishop's position is hereditary and it is believed that his qualities as an extraordinary prophetic healing leader are also hereditary. It is therefore believed that Edward, his son and Barnabas, his grandson and current Bishop of the ZCC

encompass these same abilities. Their success as prophetic healing leaders is evident in the ZCC's constant growth over time and its reputation as one of the biggest healing churches in Southern Africa.

Healing is a constant theme in the history of the Spirit-type AICs, the Bishops of the ZCC and the ZCC. From an anthropological perspective it has become evident that the understanding of the concept healing sometimes differs between societies. With this study's emphasis on healing it was important to investigate how anthropologists interpret the meanings of the concept healing and related terminology. In a biomedical context "health" generally implies the absence of biological inconsistencies referred to as "diseases", but in some societies such as a traditional African and AIC context "health" implies physical, social and psychological well-being. This means that when someone has the flu, is unemployed, has a failure of crops or is single and lonely that "healing" is needed. The concept used to refer to this inconsistency is "illness" and although it could include disease it is not limited to this sociocultural dimension. In contrast to the wording "healing an illness", "curing" is generally used in a biomedical context when an individual is experiencing a biological malfunctioning referred to as a "disease". The actions described by healing and curing, however, are not mutually exclusive.

Religious beliefs and practices form the core of community life in a traditional African setting. It is therefore understandable that health-seeking beliefs are deeply embedded in such a society's religious convictions. In general, traditional African cosmology outlines the notion that humans, nature and the supernatural are interconnected by means of a life-force that is neutral in nature, but derives from God. The harmonious presence of life-force ensures good health, happiness, protection and prosperity on an individual basis, but also in a community context. When humans, usually by means of acts of witchcraft, sorcery or other immoral behaviour or supernatural agents such as dissatisfied ancestor spirits, disrupt this life-force's equilibrium it will result in illness, which includes various forms of misfortune. In order to heal this situation effectively, healthcare practitioners need to diagnose its original cause, in other words identify its disruptive agent(s) and accordingly prescribe a particular treatment that usually entails some form of reconciliation between the trespasser(s) and the offender(s).

It has now become clear why an indicated cause, diagnosis and treatment of a traditional practitioner will often differ from a biomedical practitioner's findings and prescriptions. Generally a biomedical practitioner's treatment of ill-health is perceived to be effective only in treating the symptom and not the original cause. For a patient to re-obtain a state of health it is necessary that s/he understands the indicated cause that imparts a specific sociocultural meaning and is consequently treated in a socioculturally acceptable way. It has been proved repetitively that a person's faith in treatments significantly enhances her/his healing progress. It is therefore understandable that patients who derive from a traditional African sociocultural background find it difficult to regain their health when treated by a biomedical practitioner in a western-orientated clinical environment that basically has little or no resemblance to a traditional African sacred healing setting.

In Spirit-type AICs, sometimes also referred to as healing communities, members are known to participate actively in services that are intertwined with healing activities. Prophets assisted by church officials, such as priests, preachers or ministers, function in a paradigm of Christian thought and therefore practise healing through the power of the Holy Spirit. In a traditional African context participation in community context extends beyond death. When the need arises, those who have passed on and are now spiritual participants (ancestor spirits) assist church officials in the healing process that transpires in the name of God, the Holy Spirit and His Son. Since church officials share or at least understand to some extent the traditional African world-view, they have the ability to explain "by whom" and "why" patients were targeted, and subsequently provide socioculturally acceptable treatments even if successful healing is not obtained. It therefore seems that Spirit-type AICs aim to provide Christian solutions to problems that are experienced in a traditional African sociocultural context. Faithful members who uphold traditional African values are assisted in the name of the Holy Spirit when they experience a bodily disorder and when they are unemployed, impoverished, barren, lonely and/or have trouble with evil spirits, sorcery and witchcraft. There is therefore a tendency, similar to that in a traditional African context, to place emphasis on salvation in the here and now more than in the hereafter.

The prophets and assisting church officials' ability to understand the holistic nature of afflictions, especially those that are embedded in traditional African sociocultural settings, and consequently prescribe socioculturally acceptable treatments seems to be an important contribution to the popularity of these churches.

Against this basic background information the healing ministry of the ZCC as executed by the Marabastad congregation has been investigated. Exploring the physical layout of the church ground it became clear that it accommodated the primary needs for sacred healing activities. The premises have been walled in making it a private communal healing experience. However, inside participants are quite easily able to identify the areas where they need to go when they are in need of healing. On arrival at the church ground everyone is greeted by informal street vendors on the outside who sell mostly manufactured products that might be needed for *ditaelo* purposes and various refreshments. On entering the premises the gatekeeper welcomes and cleanses everyone with blessed living water. The sacred sound of ZCC formations performing prophecies and prayers typically engulf the premises in sound long before the service is commenced. Prophets are visibly moving around on the premises available to those in need of divine interventions. Prophetic consultations are noticeably conducted at the prophesying area throughout the day. Consequently, the voices of prophets filled with Holy Spirit-inspired sounds immerse the church ground in recurrent waves. In and around the administration buildings there are always *baruti* present, ready to treat whatever illness has been identified. *Baruti* usually fulfil their healing repertoires in front of the healing shelter, which is visible to all attendees. The smoke of fire at the *sebêšô*, slightly concealed by trees and a shelter, informs participants that blessed prescriptions are being prepared, which includes the much sought-after remedy of blessed living water that is freely available to participants. For attendees, even more so for those who uphold traditional African values and norms, the church ground setting mirrors a sacred environment focused on the attainment of health.

To be able to enter the church premises and participate in service activities both members and non-members have to adhere to a strict dress code and a set of behavioural rules and regulations. I have been told that the human body is perceived as God's temple and has to be treated accordingly, as indicated in the Bible.

Therefore, the ZCC prohibitions, such as the consumption of alcohol and pork, the smoking of tobacco and adherence to the strict dress code, are perceived as measures to protect the human body. In this same regard it also came to my attention that members are not allowed to enhance their natural attributes by cutting their hair in extravagant styles, colouring it or wearing makeup, for example.

Anyone is welcome to attend a healing service or just visit the church premises if they adhere to the abovementioned rules and regulations and have no malicious intent. If in need, any visitor can receive a prophetic diagnosis and accompanying treatment that usually include acts of cleansing and protection. They are also allowed to participate in the *mphô*, but not in the ZCC's special choir and *mokhukhu* performances. To obtain permission to partake in these formations an individual has to become a baptised member.

Health, the same as in a traditional African context, is holistically perceived as a person's physical, psychological and social well-being, in other words it includes a person's relationships with others, both the living and those in the spirit world. Acts of disrespect in any way will disrupt life's equilibrium and corrupt the health of those involved. To prevent hardships or further hardships it is therefore understandable that prescribed rules and regulations have to be strictly adhered to.

People are only allowed to wear the ZCC uniforms, including the badge, when they have been baptised. Baptism is administered from 18 years of age only enabling prospective members to consciously choose to devote their lives to a ZCC lifestyle. However, children of baptised members are allowed to wear gender-specific ZCC formation attires – girls the choir uniform and boys the *mokhukhu* attire. However, if they do not choose to become baptised members when they reach the age of 18 years they have to return their uniforms and badges.

It is perceived as a great honour to be allowed to become a full member and hence being able to own ZCC attire of which the importance is enhanced by its multiple functionalities. Although the ZCC attire is only worn to ZCC events, a member is allowed to wear the badge permanently and visibly to indicate their devotion to the church. In South Africa there is a general tendency to perceive ZCC members as

hard-working loyal members of society. For that reason the badge seems to enhance members' chances of obtaining employment. The badge, however, does not only symbolise a member's devotion and affiliation with the ZCC, but also serves as protection against evil, as an instrument of healing, and a reminder to comply with the church's prescriptions, and as a means to identify and assist each other whenever in need. Members, being able to recognise and assist each other, act as siblings of one big family or members of a big community where differences in languages and ethnic affiliations are irrelevant. The qualities that are described by the African humanistic concept *ubuntu* – active participation and mutual assistance in community context – are clearly present in the ZCC community context.

The ZCC uniform is perceived as sacred attire that acts as an official dress code, but then again also acts as an instrument of healing and protects the wearer against further bouts of misfortune. Prophets, for instance, are known to prescribe specific church attire in their healing treatments. Even the different colours are known to enhance healing on different levels. It is understandable that uniforms, playing such a significant role in the healing ministry of the ZCC, are subject to particular rules and prohibitions. The attire is, for example, gender-specific, formation-specific and status-specific. Many of the procedures, including the seating arrangements during services, are also prescribed by a person's particular dress code. Stages of an individual's lifecycle such as birth, menstruation and death are perceived as agents of pollution. Those that have been polluted this way may not wear their attire for a certain period of time or attend services and have to be cleansed after their period of abstention.

It became obvious from my observations during services that many procedures are executed differently by male and female participants. Many rules of conduct are therefore gender specific. Also of significance is that most rules of conduct that include prohibitions seem to be rooted both in Biblical (mostly Old Testament) and traditional African traditions even though they have been adapted to some extent to fit into a modern lifestyle of southern African ZCC communities.

Participants in a healing service, in line with their status of visitors, normal members, prophets and *baruti*, each fulfil a particular role. As mentioned earlier, at entry level a

visitor is able to attend services, participate in the *mphô*, and receive prophetic prescriptions and *barutis'* concurrent treatments. If a visitor is satisfied with the progress s/he is making, a further step in an individual's quest for health would be to become a baptised member. Baptism in itself is perceived as a powerful tool of healing, enabling the Holy Spirit to work effectively in the patient and increase her/his life-force. Being a baptised member the participant is allowed to obtain the sacred ZCC attire and badge that will further protect and increase their level of well-being, and to participate in the choir or *mokhukhu*, which are also known for their powerful healing effects. Baptism is required to gain access to the highest forms of healing in a ZCC environment and obtain absolute and for that reason I argue that baptism is the most important sacrament in an individual's quest for health.

Baruti indicated that the importance of baptism is to be found in the Bible, Mathew 3:13–17 and Mark 1:9–11. People have to confess their sins to a *moruti* before they enter the water, which is preferred to be living water following the example of Jesus' baptism. Threefold immersion, however, is believed to be the only correct way of conducting baptism, the same as was done by the CCAC of John Alexander Dowie. By being baptised by a ZCC *moruti*, it is accepted that the sins of prospective members will be forgiven and their life-force increased because they will receive the Holy Spirit. A number of members also believe they will receive some of Jesus' life-force imbued in the water during his baptism. After baptism a member is therefore perceived to be a new-born in the ZCC community.

It was explained to me that only from baptism onwards does God bestow upon some the ability to heal by means of prophesy. With the help of the Holy Spirit prophets sometimes relay messages from the ancestor spirits. Prophets, being either male or female, are known to be able to identify the traditional African cause of illness, in other words, who was responsible and why life-force was disrupted, and therefore can prescribe socioculturally acceptable treatments. The same as in many other AICs this prophetic ability seems to be one of the more important reasons why the ZCC's healing ministry is so successful.

There is a perceived differentiation in prophets' abilities to relay messages and healing instructions (*ditaelo*) from God or the ancestor spirits. The strongest prophets

are believed to reside at Zion City Moria, though many members of the Marabastad congregation believe that they have been blessed with numerous strong prophets as well. Even though prophets are not recognised by a particular dress code, they are immensely respected for the healing role they fulfil in the church environment. In contrast to *baruti* who are males only, the acceptance of both men and women as prophets could be identified as a gender-levelling mechanism in the church's hierarchical framework.

Prophets by means of their Holy Spirit-inspired messages link people directly with God. It has been argued that members who derive from a traditional African setting and were used to the constant presence of ancestor spirits linking them with God missed this intimate connection in many western Christian churches. The Bishop as God's special messenger has been indicated to fulfil this function. I, however, argue that not only the Bishop, but also the prophets satisfy the need for regular divine intervention and this is possibly another important reason for the popularity of the ZCC's healing ministry.

After prophets have delivered Godly-inspired healing instructions the *baruti* execute the healing procedures. The core of the ZCC's healing ministry is therefore characterised by the crucial partnership that exists between the prophets and *baruti*. *Baruti's* healing repertoires, which are also known to cleanse and protect, entail the use of prayers and a variety of sanctified healing instruments. They are known to treat people and their belongings, such as their homes, cars and clothes. *Baruti* are also the ones who bless instruments of healing and prepare the sanctified remedies. In general, *baruti* are the main preachers of the church, they lead general services and funerals and they administer sacraments. Women do, however, deliver homilies during special female services on Wednesday afternoons that the first Bishop Engenas Lekganyane had proclaimed as a female prayer day, and during their own timeslots at funerals, acting as another gender-levelling mechanism in the church's hierarchical framework.

The Bishop ordains only married men as *baruti* and I have been told only after they have been faithful members of the church for at least five consecutive years. In accommodation of their African customs men are allowed to practice polygamy.

From a biblical perspective it has been argued that even in Jesus' genealogy polygamy occurred. This custom is of specific significance to *baruti*, because they are not allowed to fulfil their religious duties when they are in contact with a woman who has just given birth, but by being able to move in with another wife they can continue with their religious duties.

The Bishop is the axis of the ZCC. As leader, he is the main link between God and his members and the most profound healer of all. To some extent in the same manner as a traditional paramount chief, the Bishop controls not only all spiritual matters, but also all administrative matters of the ZCC. In his decision-making process he is likewise assisted by inner councils. Further similarities in function are that his position, though this does include his prophetic gifts, is inherited according to patrilineal succession rules, he is expected to find solutions to his people's spiritual, social, material and political problems, and he is showered with gifts. It is therefore understandable that the Bishop is sometimes referred to as the "King of the Zionists".

The Bishop is known to be an extraordinary prophet and healer having performed various miracles and saved many from hardships, such as barrenness, droughts, unemployment, poverty and loneliness. It is accepted that he can heal illnesses caused by witchcraft and sorcery and protect people against further onslaughts. Even though the Bishop and his predecessor have always attributed their abilities to God, they are sometimes referred to as messiahs or given other godlike descriptions, which should be interpreted in the particular sociocultural context. African indigenous languages tend to address profound leaders with exaggerated names that are intended in an analogical sense to reflect respect. When members refer to Lekganyane as their messiah or God it should therefore not be perceived as deification, but in an analogical sense as a form of respect.

The Bishop resides at the Holy Zion City Moria where it is believed that the Holy Spirit is active and that the location is imbued with the Bishop and his predecessors' extraordinary life-force. The Bishop's strong life-force is sought after by his members, as with traditional African leaders. They try to get as close as possible to him with the hope that they can absorb some of his life-force, which would assist them in their quest for absolute health. If contact with the Bishop is not possible a

mere visit to the church's well-known headquarters is also believed to increase a person's life-force. It is therefore understandable that millions of members regularly travel great distances to be able to experience the healing magnificence of Zion City Moria.

The same as in many AICs, the Bishop's display of "grandness" and material wealth is a very important aspect of the church's representation of spiritual power. Even though the hereafter is emphasised, its importance is not always as much emphasised as the attainment of well-being in the here and now. Everybody strives toward the attainment of health and harmony. Financial success, however, is regarded as an indication of a person's inner spiritual power. The churches display of riches is therefore an indication of the Bishop's spiritual prowess and convinces members that devotion to the church will eventually secure them financial success as well. Consequently, the Bishop's display of financial success will attract more and more members. Then again the ability of members to make donations to the church is regarded as an indication of their own spiritual competence. The link between spiritual prowess and material success seems to be rooted in traditional African religious thought where a successful relationship with the supernatural (ancestor spirits) guarantees good health, protection and prosperity.

The Bishop and his advisory councils, many of whom are skilled business people, also use the ZCC's financial prosperity to empower ZCC members, by, among other initiatives, alleviating poverty and enhancing educational opportunities. In his speeches, the Bishop regularly encourages peaceful coexistence and adherence to moral rules and conduct. In summary it seems that the Bishop and his church officials try to work towards the betterment of their members on spiritual, social, educational and material levels or, in other words, the attainment of maximum health as understood in a traditional African context.

On a micro-level again, due to my participation in services, it became clear that when healing is perceived from a traditional African perspective, service procedures are engulfed in healing activities. To begin with the ZCC attire specifically worn to attend services brings healing to its wearers. Arriving at the church ground most people greet each other proudly by saying *khotso* ("peace") that is answered with *A e ate* ("let it spread"), a definite requirement for good health. Usually attendees are already

performing the *mphô*. Anyone who has dressed appropriately, though ZCC attire is not a prerequisite, is allowed to participate. The same as in the formal ZCC formations the *mphô* calls down the Holy Spirit and provides healing to the participants and observers. When the *mokhukhu* performers and, from time to time, the *nkedi* dancers arrive at the premises, their powerful performances, which are known as “praising with the feet” dances, fill the whole area with their sacred healing sounds. The choir, when performing outside the church ground, often perform a special handbag blessing for those women present, emphasising the importance the church places on healing domestic issues.

Upon entering the church ground everybody is welcomed and cleansed by the gatekeeper and from that point, whenever needed throughout the service procedures, people are able to receive prophetic instructions. As soon as people have received *ditaelo* blessed prescriptions are prepared at the *sebêšô* and treatments are carried out by *baruti*. Confessions are also continuously conducted, cleansing participants to enhance successful healing. Monetary donations symbolise reciprocity – by giving, irrelevant of the amount, you will receive. This combined with prayers for good health also acts as instruments of healing. Instruments of healing that could be prescribed by a person’s *ditaelo* such a church medallions, cords and photographs of the Bishop are available at the administrative offices and ingredients for remedies at the informal market stalls outside the gate. Throughout the service those in need of extra healing receive free blessed living water. As soon as a prophet has indicated that someone’s vehicle has been polluted endangering the health of those involved, *baruti* as quickly as possible cleanse and protect it inside the church ground. Even though it is usually extremely busy on the days services are conducted and many are in need of healing, everyone always respectfully awaits their turn to be treated.

While the abovementioned activities are all in progress, the service is commenced. Typically the choir initiates this event by performing a sacred church song rooting the service even more in its healing character. Then another act of healing is performed by a *moruti* who blesses the congregation. Now the whole congregation participates in the singing of a church song involving everyone in the healing repertoires. This is followed by a communal prayer known to create extra-strong healing power with its

source the Holy Spirit. A communal prayer gives every single individual a chance to request divine healing under amplified sacred circumstances.

Both *baruti* during general services and female speakers during Wednesday services deliver homilies that include prayers requesting help for those who are experiencing hardships on personal, local and global scales. By participating in these prayers attendees too participate in the healing process of these afflicted people, therefore again engaging as instruments of healing. Next to teachings on codes of conduct that have to be adhered to in a person's quest for health, testimonials of miraculous healings are regularly delivered given those stricken by misfortune assurance that in the ZCC community the attainment of health is within their reach.

It has now become clear that from the time people arrive at the church grounds until they leave again most actions witnessed or undertaken are directed at the attainment of good health and the protection thereof, in other words are aimed at restoring and maintaining the social equilibrium. It is therefore understandable that ZCC services are by many perceived as healing services. This brings to mind that the purpose of religious actions in the ZCC resemble to a great extent that of traditional African religious actions described by Mbiti (1986:135) as ultimately being performed to preserve and prolong human life and are therefore in effect all healing rituals.

This study has also brought to the foreground that healing in the ZCC is a joint venture. Everybody to some extent participates in healing activities. Ultimately, God is perceived as the original source of healing and from there the Bishop as his primary mediator and a variety of facilitators or instruments of healing contribute to people's attainment of health. I have therefore argued that the most important instrument of healing is the Bishop, followed by his prophets and *baruti*, then ordinary members of the church, and lastly visiting participants. Ordinary members and visiting participants become instruments of healing mostly through using intangible instruments of healing, such as individual and communal prayers, and by performing of church songs and dances. Tangible instruments of healing are usually used in accordance with a person's *ditaelo* or when a *moruti* prescribes it with a

specific healing purpose. Sometimes, however, people do use tangible instruments of healing on their own accord.

Shortly after the initiation of the ZCC, Bishop Engenas Lekganyane introduced tangible instruments of healing enabling *baruti* to treat people wherever and whenever needed, making it possible for the church to grow beyond its original borders. Many of the tangible instruments of healing are blessed by *baruti* at their own congregations. Though, instruments of healing such as *mogau*, specially blessed Zion City Moria tea and coffee that are known for their extraordinary healing qualities, are still blessed at the church headquarter keeping congregations connected to their main healing facilitator.

During my studies I have encountered a great variety of tangible instruments of healing. The most well-known and often used tangible instrument of healing seems to be blessed living water (*meetse a thapelo*). On its own it can be consumed, sprinkled, splashed or poured onto people and objects, and added to foods, drinks and washing. It is also used in conjunction with other ingredients that usually have been sanctified like different kinds of tea such as Zion City Moria tea, Joko, Five Roses, Ceylon, Rooi Bos (an indigenous South African tea) and Hamburg tea (an anti-constipation tea); coffees such as Zion City Moria coffee, FG and Trekker coffee; then ingredients such as cacao, cooking oil popularly referred to as fish oil, salt, Maltabella porridge (sorghum), KLIM milk, Vaseline, special stones, cords, special medallions, photographs of the Bishop, copper strings, needles, to some extent money, report writing, the Bible, blessed whips and staffs, and blessed paper known as *mogau*. The *mogau* seems to be used nearly as often as blessed living water, also for the treatment of people and objects, and mostly by means of a pressing procedure or by burning it following different techniques.

Tangible instruments of healing are generally handled differently by male and female participants and therefore subject to gender-particular roles. On the whole, *baruti* are the main handlers of tangible instruments of healing, being the ones who bless and prepare prescriptions and execute most treatments at the church grounds. Women, however, do execute several of their own prescriptions given for home usage.

Again, the same as with most rules of conduct, the use of a variety of instruments of healing seems to be rooted both in Biblical and traditional African traditions. Only a few have either a Christian or traditional African origin. Many, however, also have a unique ZCC origin, and all of them have been adapted to a greater or lesser extent to fit a contemporary African Zion Christian healing environment.

Overall, in the ZCC the attainment of health as perceived in a traditional African context is affordable, even for those who don't earn a regular income. The emphasis is placed on following your *ditaelo* strictly, which includes adherence to the ZCC rules of conduct, knowing that in this way God will help you regain your health. Even though not everybody necessarily finds absolute health in the ZCC community, the success rate of its healing ministry is emphasised by its relentless growth rate since inception.

Identifying the possible causes for a compromised state of health enabled an even better understanding of healing actions. Even though members function in a paradigm of Christian thought, the same as for the concept of health, ideas about causes of hardships are to some extent also related to those rooted in traditional African traditions. Consequently, agents of causation include God and sometimes the ancestor spirits, the transgression of behavioural rules that include sin, as depicted in the Bible and the ZCC's code of conduct, and the much-dreaded actions of witches, sorcerers and sometimes evil spirits who in a Christian context are regularly referred to as demons or the devil. With regard to the latter, members specifically indicated that they felt safe belonging to the ZCC as they are known to offer effective protection against these kinds of evil assaults. Of interest to note here is that traditional healthcare practitioners on the whole are perceived as taboo and are not to be consulted. In cases of emergencies it is, however, permitted to make use of the biomedical system.

Misfortunate experiences, such as disease, are experienced in the present. Members, therefore, want disruptive situations to be healed in the present. Since transgressing behavioural rules, which include sin, is perceived as a cause of hardships, they need to be dealt with in the present. Truthful reconciliation in this regard will inevitably bring about healing and free people from its effects in the

hereafter. Members, therefore, seek forgiveness primarily in an attempt to obtain a state of wellbeing in this life rather than in the hereafter.

As has become evident, the ZCC's healing activities that stem from a paradigm of Christian thought are directed at obtaining immediate deliverance from hardships that disturb life's equilibrium, such as disease, poverty, unemployment and loneliness, by identifying the root cause of the problem in which the feared traditional African agents of causation are recognised. The same as in a traditional African healing situation, though in this regard assisted by the Holy Spirit, the patient receives in one healing session the identification and cause of an infliction, prescriptions needed to obtain health and protection against possible further evil assaults.

Participants of services of their own free will become ZCC members. On the whole, members seemed to be proud to participate in the religious healing activities of their congregation where their traditional African norms and values anchored in vertical and horizontal relationships are acknowledged, and by knowing that every action is directed towards the attainment of their wellbeing and the protection thereof. The ZCC therefore clearly has the ability to meet the needs of its members in terms of healing in an African, therefore holistic, context by also presenting them with a place of security, peace, humanity, mutual respect and material upliftment. The ZCC community not only provides its members with a spiritual and practical resource in times of need, but also plays a preventive role in health by creating a safe-haven where they can to some extent escape their daily stress, and receive encouragement to become empowered towards successful survival in a fast-changing world.

This study was a mere anthropological introduction into the healing world of participants in ZCC services of one particular congregation. My intent with this study was to enhance an understanding of the ZCC's contribution to meeting the health needs of a large portion of the South African population and, as such, facilitating mutual understanding, respect and cooperation between members of the South African nation. I conducted and compiled this study as an outsider not fluent in the Pedi language. It would therefore be possible to obtain deeper meanings of healing activities in this context if a scholar was fluent in the Pedi language and maybe more

of an insider. This study was conducted in a highly populated urban area. Another possible area of further research would therefore be the investigation of a congregation's healing activities in a rural area faced with different challenges not of an urban nature.

The active observations, participations, descriptions, ethnographies and conclusion emerged from a well-known, medium-sized and intensely participative ZCC congregation in Marabastad. There were numerous advantages to conducting an anthropological study of healing activities at one particular congregation and more specifically at the Marabastad congregation. Most importantly, by regularly participating in the activities of one particular congregation, members' reaction to my presence in their sacred environment was minimised to some extent. Consequently, I was mostly treated as a junior participant, and therefore received lots of guidance from my fellow participants. It also made me feel more at ease knowing the rules of conduct and so not offending people with my presence. Feeling reasonably comfortable enabled me to quite easily converse with my fellow participants and observe the finer details of procedures of healing activities. Marabastad is known by many locals for its strong healing ministry and it is even visited by many non-members in times of need. Everyone I spoke to at Zion City Moria spoke with respect of the Marabastad congregation. It is therefore possible to conclude that this congregation is representative of the ZCC's healing ministry. Marabastad is also located in the close vicinity of my employer, Unisa. Being an anthropologist I needed to earn the trust of my research participants, which is only possible with regular contact. Being in such close proximity I was able to establish rapport with many of the research participants in my work situation enabling regular contact in and outside the church environment. Its relative close proximity to my own residence also enabled me to visit the congregation repeatedly over a long time span. As a result, keeping in mind that the ZCC is a very close-knit and closed group, I was able to conduct fieldwork in a respectful, but also relatively relaxed, free-flowing and natural way. This anthropological study enabled me to gain an understanding of how the ZCC's healing ministry is experienced and appreciated by its members and other participants on a grassroots level.

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