INDEPENDENT CHURCH HEALING: THE CASE OF ST ELIJAH CUM ENLIGHTENMENT SCHOOL OF THE HOLY SPIRIT IN ZIMBABWE

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Abstract
Health and religion are closely linked. Scholars in Medicine, Social Studies and Missiology have paid a great deal of attention to African health systems. AICs in Southern Africa have studied, in particular, the relationship between Christian healing and traditional healing. Pioneer studies of these religious movements by Sundkler (1961:238-239) depict AICs as custodians of traditional culture. Seen as the revitalisation of African culture in the disguise of Christianity, they are also perceived as “bridges back to paganism” (Kealotswe 2005:1). Daneel describes this form of syncretism as transformation of “old and new” in Zionist Churches in Zimbabwe. To date, discussion has been centred on the influence of the traditional worldview to the exclusion of charismatic forms of African Christianity. This essay tries to fill this gap by exploring the relationship between the African traditional religion and Christianity by examining the aetiologies of illness and healing in a particular African independent church; the approach used is an alternative approach, phenomenology. The essay tests the contention that independent churches are not only influenced by traditional worldviews, but also integrate charismatic forms of Christianity.

1 INTRODUCTION
The essay starts by exploring the Karanga Independent Apostolic Church of the St Elijah Chikoro choMweya (School of the Holy Spirit) therapeutic system by examining the wider historical precincts of Christianisation and colonisation in Africa (Zimbabwe in our particular context). In order to ensure its relevance to contemporary religious developments, the essay also examines the terminology, the historiography of the study of new religious movements, and its traits and socio-cultural, politico-economic and religious motivating factors, all of which culminated in independence and the new religious movements and its propensity towards inter-denominalisation, urbanisation, modernisation and globalisation. The essay also tries to come to grips with the medical views

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of the new church in terms of a causal explanation, techniques for diagnosis and methods of therapy.

Christianity in Africa has had a tremendous impact on the continent, and has nurtured a new brand of African Christianity under the auspices of African independence. According to Adogame (1999:1) this scenario has created a “fulcrum for the dramatisation and experimentation of the phenomenon generally known as New Religious Movements”. Although he makes special reference to the context of West Africa, Adogame (1999:1) also observed accurately that this religious development is part of the “genius”, a “global phenomenon” which has seen the “permutation” of New Religious Movements in Africa. Studies of African Independent Churches in Southern Africa, especially independent churches in Zimbabwe, and more particularly our case study of an African Independent Church of an Apostolic model (an empirical research study based on interviews and observations among the Karanga in Zimbabwe) may be seen in this wider context as “actively engaged” in Adogame's “fervid religious dramatisation” (Adogame 1999:1) of African independence and the proliferation of New Religious Movements in Africa.

The Karanga Independent Church, which physically located in the Mberengwa district, constitutes a sub-group of African Independent Churches who identify and attend to the spiritual and physical needs of their people. They explain the practices and doctrines of the church in indigenous Shona-Karanga cultural terms. Amanze, an academic-cum-theologian, observed of African Christianity in Botswana, “The churches have developed a form of Christianity based on African experiences of human existence as well as the teachings of the universal church as contained in the Old and New Testaments.” This he calls a form of “African Christianity” (Amanze 1998:xiii).

1.1 Emergence

Independent churches are Christian bodies in Africa established as a result of African initiatives. The African Independent Church movements are part and parcel of the Independent Church movement in Africa. In this light, the Karanga Independent Church can best be understood in the context of Africa. Scholars in Christianity and Mission studies have provided various explanations for the emergence of African Independent Churches. The primary reasons, which feature prominently in the literature, are political, these being the racial bias and theological dominance of mainline churches, economic imbalances that bred migrant labour movements, a fundamental yearning for a gospel that addressed indigenous people’s socio-cultural needs, and theological interpretive disparities in religious spiritual world views.

The terminology constantly used to explain African Independent Churches throws light on our understanding of African Christian independence.

1.2 Terminology

Scholars in Church History and Missiology have indulged in “hair-splitting” as far as the terminology of African Independent Churches is concerned. Steven Hayes identified the most conspicuous problem that characterises the
discussion African Independent Churches as reflected in the synonym itself: AICs. He examines what the “I” stands for. “Some people insist it should be “independent” or “instituted” or “indigenous” (Hayes [nd]:1-2). The conception and interpretation of perspectives varies. Associations opt for the term represented by “I” and stick to it (Hayes [nd]:1). Some researchers prioritise “African Independent Churches”, rather than “Native Separatist Churches”, which is obviously tainted with vestiges of colonialism. For Hayes a church that exhibits four distinct features qualifies as an African Independent Church:

- **African Independent Churches** are bodies that have originated in Africa, and are not dependent on any religious groups outside Africa for funding, leadership or control.

- **African Initiated Churches** are those that were started as a result of African initiative in African countries, but may be affiliated to wider bodies that include non-African members.

- **African Indigenous Churches** are those that have and retain an African ethos, and whose theology has developed a distinctive flavour.

- **African Instituted Churches** whose establishment and growth have taken place on African soil (Hayes [nd]:2).

In an endeavour to comprehend the phenomenon of African Independent Churches, more terms have been proposed as variables. “Separatist churches” imply they have broken away from historic churches, “Spiritual” or “Pentecostal” emphasises the Holy Spirit and the emotional renewal of Pentecost, the “Ethiopian Movement”, which emphasises African control of their own affairs in religious and secular fields. Another “renegades” from the mainline churches are Zionists and Apostolic (Pobee 2002:1).

In pursuit of a meaningful understanding of African Independent Churches, more interpretative terms have been raised, such as the “Witchcraft Eradication Movement” owing to its obsession with exorcism through the Holy Spirit. “Messianic Movements” are based on a leader of Messianic model. “Prophetic Movements” are founded on a powerful charismatic leader, a prophet. “Apostolic Churches” are centered on Christ’s apostles. “Syncretistic Movements” or “Naturalistic Movements” point to the fusion of Christian and African Traditional worldviews (Pobee 2002:1).

1.3 Characteristics

African Independent Churches have mushroomed at a tremendous rate in Africa. In 1981, sub-Saharan Africa recorded 15% of the total Christian population. The overall number of adherents is 15 million, marking a significant sharp rise in African Christian demography (Pobee 2002:1). These churches share certain characteristics, but also vary from one group to another. Some conspicuous traits of African Independent Churches are that they represent “a place to feel at home”; that they are a protest against mainline Christianity and are in pursuit of “cultural renaissance”; that their faith is centred on the Holy Spirit whose thrust is “continuity and change”; that they
are biblicist movements drawing largely from the Old and New Testaments; and that they emphasise “mysticism” and have a communalistic structure. In Zimbabwe, AICs have established ecumenical networks such as M L Daneel’s co-operational movement called Fambidzano (Move Together). African Independent Churches are African Instituted Churches or African Indigenous Churches founded by Africans without reference to mission churches. They combine African traditional religious worldviews with Christianity.

Sharp categorisation is problematic because these churches are not static but dynamic. Schisms and splintering, which are rampant in these churches, also create new parameters of perception. In order to develop more insight into the phenomenon of African Independent Churches, it is imperative that we examine the history of these new religious movements.

1.4 Historiography

The study of African Independent Churches is best understood in the religious studies depicted in the history and development of Christianity in Africa. From within their respective ideologies, scholars in several disciplines such as Social Science, History, Theology and Religious Studies (especially Christian History and Missiology) have produced a multiplicity of work explaining the origins, growth and development of this new religious experience in Africa. Adogame provides a concise survey of certain outstanding scholars who have contributed to this field of research, scholars such as Horton, Wellborn and Orgot, Peel and Barrette. These explain the phenomenon of African independence as signs of social and cultural change. Linton and Barber present the new churches as exemplifying stress and adjustive phenomena. But for Blander, Anderson, Koebben and Sundkler independent churches are based on political and socio-economic protest, especially to colonialism and apartheid (Adogame 1999:2). Whilst Oosthuizen identifies the same trend in South Africa and Amanze (1998) the same trend in Botswana, Daneel points out that social, cultural, economic, political and, above all, religious factors have led to the “sprouting” of the Shona Zion churches (which are also a sign of theological protest caused by different doctrinal interpretations in Zimbabwe’s mainline Christian churches). It is within these broad, causal explanatory models that we shall explore the proliferation of the African Independent Churches, especially St Elijah an African Independent Church among the Karanga of Mberengwa, Zimbabwe.

1.5 Typologies

In the context of Zimbabwe that impacts directly on our case study, Daneel identifies a triad of nomenclature among African Independent Churches: Ethiopian, Zionist and Apostolic. The Ethiopian type, as the name suggests, places great emphasis on Ethiopia as the cradle/citadel of Christianity, “Ethiopia shall stretch out her hand to God”. The Zionist church appeals to Mt Zion/ Zion city as the holy place, and the Apostolic Churches regard themselves as genuine models of Christ's apostles. Whilst the churches place emphasis on the various sources, they are fundamentally united by their theological thrust, the preaching of the “Good News”, and healing and casting out demons, centred on the power of the Holy Spirit. Deeply rooted in the
biblical world, these churches strive to interpret the Holy Book in the context of traditional religion and customs. For Daneel the churches produce a systematic form of syncretism which seeks to amalgamate the “old and new” in a meaningful idiom.

It is within the above broad categorisation and complex terminology of African Independent Churches that we will argue for St Elijah as belonging to the Apostolic type of AIC.

2 CHRISTIANITY IN MBERENGWA

It is within this background of Christianisation in Mberengwa that we can understand the healing trends of this independent church. After the German missionaries had done their work, missionaries from Sweden came through South Africa and established camp at Vugwi and eventually founded the first mission station at Mnene. The Evangelical Lutheran Church (ELCZ) came to Mahindi, Chatira village where the African Independent Church is located, as the result of the efforts of a prominent Swedish missionary, Bishop Albreckson Strandvick who was affectionately called VaRudo (love) because of his love for the Karanga people. Strandvick was instrumental in the establishment of the congregation at Mahindi and, ultimately became the first bishop of the Lutheran Church in Zimbabwe (Steven Shava, interview 12/08/02). Strandvick also helped to build a school in the area. Apart from recruiting teaching staff he also arranged and encouraged certain local people to train as evangelists. One such evangelist was Steven Shava, our primary focus in this part of our study, a man who eventually founded his own independent church.

2.1 Biography: Founder

Steven Tafa Shava was born in 1925. In 1944, he was baptised (river baptism) into the church by Linge Nordisjo. By then he had started attending school (since 1942) at Mahindi. He was advised to attend standard six at Mnene School. Eventually he went to live in Bulawayo, where he obtained employment as an office worker. Whilst plying his trade in this city he joined the Dutch church together with four other people. However, Shava felt uncomfortable worshipping in this church. Strandvick then encouraged him to start a prayer group (which eventually included fifty people) and Shava thus established an independent form of worship. Shava later left Bulawayo for work in Plumtree, where he established a worshipping community of 17 people but which soon expanded to include 600 people. Liljestrand Tonnel, another Lutheran priest, gave him the “go ahead” to do this. At one time he invited him to worship in Victoria Falls. Initially the people worshipped in a garage but eventually Tonnel built a church at Njube.

2.2 Call to profession

Recounting his dramatic call into the spiritual world in which he was initiated and now belongs, Shava recalls vividly,
I started experiencing ill health after taking some pills. My friends advised me to go to an *n'anga* for treatment but I refused. Later on, I fell sick and during sleep at night I experienced a vision. I saw a man next to a mountain calling which meant that some one was inviting me to heaven. That experience marked the beginning of my spiritual life (Steven *Shava*, interview 12/08/02).

As a member of the Lutheran Church, *Shava* exercised his spiritual powers by praying for the sick people from all walks of life, including Lutherans at his home. One day he was given a vision in his sleep that a man would come. Recalling his call, he connected this with the Mark’s gospel, “Behold I send my messenger before your face, who will prepare your way before you” (Mark 1:1-3).

Whilst reflecting upon his experience, his wife affectionately referred to as *mai* (mother), saw and told him about visitors coming. He started singing a chorus,

*Baba munozviziva zviri mumoyo mangu*  
*Mutikomborereivo tigopinda kudenga*  

(Father you know what is in my heart  
Bless us so we can go to heaven).

At this moment *Shava* remembered one of his sons, who had reported to him that he had met a prophet called Joe Ellaine *Madzimambo*. The prophet had predicted impending troubles, and particularly death, which would befall the entire family. The prophet further indicated his willingness to visit the family and solve this problem by removing the source of evil. So arrangements were then made for the visitors to come to *Shava*’s home.

Once the visitors were settled, they started work. They moved to a nearby mountain and spotted a pot tied with a necklace and an owl's tail. They removed and destroyed these objects. After this, Joe and *Ngwenya* advised *Shava* to form a church and claimed that this was a divine command, invoking 1Timothy 3:1 in support of their stance. It is against this background that St Elijah, an African Independent Church, was formed in 1991.

### 2.3 Birth of a new church

The church was formed on the day that there was a Lutheran mass at *Masvingo*, the church’s parish mission centre. On his way to church *Shava* saw three children, including *Sarudzai Shava*. He remembered that he had been told to go up the mountain with three children.

Joe came up and produced a letter with names inscribed for dead relatives at *VaChikati* (my brother)’s grave. We dug a hole from the grave and removed some bottles. We gathered in the house for prayer. In the process we saw a light of fire. Later we were advised by *Dewa*, the councillor, to register a church. When the letter
bearing the names was brought, the people chose St Elijah (Steven Shava, interview 12/08/02).

From its inception, St Elijah was linked to one apostolic church in Murehwa, from where the most influential of its leadership came. The church hierarchy established Shava as the founder and bishop of St Elijah, Joe served as the chief prophet, whilst Mai Manyanga operated as a prophetess in the church. Despite Joe’s medical profession as “surgeon”, Shava has consistently maintained an aversion to western drugs and medication.

Shava’s popularity reached tremendous heights in Mahindi in 1970-1978. During this period, multitudes visited his church and there were huge number of testimonies given by church members. Patients flocked to his home for pungwe (night vigils) and prayer sessions from areas in the Mberengwa and Shabani districts in the Midlands’s province and from Mwenezi and Chivi districts in Masvingo province. However pungwe conducted by Zwapupu (Witnesses) had become fashionable in the wake of Lutheran evangelism rife in the area. According to Shava, some people, who envied his success and popularity in Christian spiritual healing in the church reported to the then Bishop Shiri about the church’s spiritual activities. These reports seriously angered Shiri, who felt they were nothing but attempts to undermine his authority, and so he resolved to break away from the Lutheran Church. However, some people believed that Shava’s reasons for leaving the Lutheran church were primarily social and marital. His departure was also timely, since it coincided with his period of retirement as an evangelist in the Lutheran Church.

The approach to healing in the St Elijah church is not without problems. First, the close alliance with African traditional religious beliefs and methods of healing gives the faith community a somewhat schizophrenic stance. This has led to divisions and accusations of witchcraft. There are also differences of opinion over social and financial matters. St Elijah has recently split into two main sections: Shava and Joe. Some members felt that Joe had become unpopular as a prophet, both in the family and in the church. Shava then broke from Joe and he and his family formed a new church, the Enlightenment Mission. Though rooted in the St Elijah church, Enlightenment Mission revamped its leadership structures, appointing Steven Shava as chairperson, and Venson Shava his son as bishop. Mai Manyanga retained her position as prophetess, thus opening the healing ministry to both men and women.

Second, St Elijah’s shunning of western medicine has serious implications for the church. For example, there is no immunisation from diseases such as measles. Also, what tends to happen is that church leaders, who are usually urban working class men, secretly go to hospital for treatment whilst rural women continue to suffer from the lack of scientific medical care.

Despite its problems, St Elijah church has rapidly boosted its membership both in Chatira and other villages. It has been registered under its new name and has devised new strategies. With its stronghold in Harare, the church has come to grips with modern techniques of evangelisation and, to a large extent,
has embraced Pentecostal ideologies. Joe still operates as the prophet in St Elijah in *Murehwa*.

### 2.4 Relationship with other churches

So far there is no clear evidence of established links with other independent churches. But it is important to note that when the church conducts its prayer sessions it is open to all and sundry from every denomination. As typical of many new religious movements in Africa, St Elijah has also experienced schisms most of which are sparked by leadership crises and most of which are based on the administration of the church’s finances, constitutional problems and, of course, sexual offences.

St Elijah Church consists of an amalgamation of Lutheran and apostolic doctrines. Some of the church’s most popular hymns are taken from the Lutheran hymnbook, *nziyo*, with minor or moderate modifications. It has also adopted the Lutheran almanac and appears to use the Lutheran calendar. The church’s theology also reflects, to a large extent, Pentecostal or charismatic ideological traits that characterise urban Pentecostalism. This is probably because the church’s stronghold is now Harare, where most of its active leadership are employed. One may, in fact, regard the church as being devoid of any systematic theology. But its potential warrants the adoption of a new name, New Enlightenment. In other words, St Elijah is altering the old paradigm of independence and is "dangling" between traditional patterns of independence and charismatics.

### 2.5 Regional and international outreach

St Elijah exhibits a remarkably spirited mission that transcends its local geographical boundaries of Chatira. As a result of its aggressive evangelisation campaign, the church has penetrated *Masvingo* provinces in *Mwenezi*, and the Mashonaland East province, especially *Rusape*. In fact, as a result, the church has filtered across the borders into nearby countries such as Malawi, where the church’s “spin doctor” Venson, has mingled church programmes with business ventures in *Blantyre* and *Lilongwe*. Plans are in the pipeline to penetrate other countries starting in the regions of Zambia, Botswana, South Africa, Mozambique and Tanzania. It is also anticipated that the church could establish global connections as a result of migrant infiltration into the United Kingdom (UK) and the United States of America (USA).

The above exposition of the nature, origin and development of African Independent churches in Africa, *Zimbabwe* and *Mberengwa* provides, I believe, an adequate background to the whole issue of health and illness in this church. In the next part we shall explore the causes, diagnosis and healing in St Elijah *Chikoro choMweya*.

### 3 CAUSES OF ILLNESS AND DISEASE

Amongst Afro-Christian church members, mild illnesses such as headaches and coughs are taken casually. But when an illness or disease persists, then it is imperative to seek the cause. The prophets are the people in St Elijah who
handle serious illness. A prophetess in the church, Mai Manyanga, and other women, attend to patients who complain of stomach troubles as a result of poisoning, infertility, epilepsy and spirit possession (Venson Shava, interview 30/08/89). Joe, the chief prophet, deals with special cases such as zvipengo (mental illnesses), nhuta (cancer), zvipusha (fits), and other complex diseases which modern medical science cannot cure (Joe Ellaine Madzimambo, interview 03/01/91). However, their understanding of the causes of these serious diseases calls for attention. In this system, which is a therapeutic system, the patient and the healer share a common worldview that enables therapy to be particularly meaningful to the patient.

For members of the Apostolic Church, the world can only be properly interpreted in terms of spirits. Empirical, physical causes are seen from a spiritual perspective. The result is a shift from a simplistic causal explanation to a spiritual, metaphysical explanation. The causes of illness and disease in this Afro-Christian Church are thus interpreted from the Karanga’s traditional psyche.

Diseases are perceived as the work of malignant spirits.

Spirits take their orders from Satan to torment the people. In their cunning, some of these spirits claim to be guardian ancestors and seek propitiation ... Other spirits are well versed in family histories (Kurungama Shava, interview 15/08/90).

In other words, illness and disease can be traced to evil spirits masquerading as ancestor spirits.

In this Independent Church, spirits that take possession of the living are those of people who died in sin and went to hell. Since they have been denied unity with God, the source of existence, they are desperate in their search for a place to rest. In their quest for belonging, they cause illness and misfortune so that the unwilling host will succumb to their wishes. Indeed, sometimes these spirits are the direct cause of death. That these spirits are experiencing the anguish of hell is evident when they speak through mediums. Their recurrent theme is: *Kwatabva kunopisa, tipeiwo mvura* (We come from a hot area, give us some water) (Charles Chabikwa, interview 23/09/93). These spirits cause diseases such as madness, convulsions, epilepsy, haemorrhage, paralysis and many others. As a result, the members of the Church are engaged in a bitter struggle against these spirits because they cause the afflicted person to lose his or her faith in God. Through the power of the Holy Spirit, the prophets in the Church identify such spirits and they are duly exorcised (Charles Chabikwa, interview 23/09/93).

St Elijah Chikoro Chomweya members believe that illness and disease are the work of Satan, the archenemy of God, malignant spirits and witchcraft. As far as malignant spirits are concerned, it is apparent that St Elijah members do not accept the traditional African understanding of *vadzimu* (ancestor spirits). I say this because St Elijah Church lumps ancestor spirits together with *mashavi* (external spirits), *ngozi* (vindictive spirits) and numerous *mweya yakaipa* (evil spirits) as being manifestations of the devil.
In this Afro-Christian Church, belief in witchcraft is prevalent. Many members attribute serious illnesses and diseases to the activities of witches, wizards and sorcerers.

Witches use harmful herbs to poison their victims. In most cases the victim dies of stomach pains. Sometimes witches are magical means to inflict harm. A witch may use a pin to prick a portrait or human carving whilst uttering an incantation and the intended victim will then suffer some form of harm.

Chitsinga (rheumatism), a terrible disease is the speciality of the sorcerers, evil men. Witchcraft and sorcery, along with malignant spirits, are one of the causes of illness and disease.

Adherents of the Apostolic Church of St. Elijah Chikoro Chomweya believe that only those who have not been exposed to the true light are prone to illness. Illness can be traced to a lack of faith in God. “God protects His own” (Bethwell Mabika, interview 22/10/90). According to the Apostolic Church bishop, lack of faith in God is a potential cause of illness amongst humanity generally. The bishop believes that whoever upholds Christian values in their fullness is unlikely to suffer from illness. This conviction has, as its scriptural base, final chapter of Mark’s Gospel: “Those who believe shall be saved; those who do not believe shall be condemned” (Mark 16:16). As such, his concept of salvation is the “here-and-now” and, membership in his Church safeguards against illness and misfortune (Ephraim Hove, interview 10/04/90).

The leadership of the Independent Church identifies another major cause of illness and disease, this being positive suffering as a direct consequence of contravening the laws of God. Here, illness is a punishment from God for sins such as incest, adultery, jealousy and hypocrisy. As a result all Church members, from the doorkeeper to the chief prophet, are susceptible to illness resulting from sin. All members who break the dietary regulations, for instance, are afflicted with illness. These regulations are clearly stipulated in Leviticus Chapter 11 and include prohibitions against eating pork, mice and other “unclean” foodstuffs. God’s punishment may be anything from a mild headache to serious illness. Confession is a prerequisite for therapy (Eliphas Zhou, interview 02/03/91).

So far, it is clear that adherents of the Karanga Independent Church attribute illness and disease to malignant spirits controlled by Satan; to malicious witches, wizards or sorcerers and their familiars; to a lack of faith in God; and to a contravention of God’s law. The explanations of illness and disease given by AICs seem to correspond, in most cases, to traditional theories of causation and to traditional perceptions of illness, disease and health.

4 DIAGNOSIS OF ILLNESS AND DISEASE

In St Elijah Chikoro Chomweya, diagnosis is the preserve of the prophets. The methods of diagnosis employed are different from those of western doctors, although a parallel can be drawn with the n’anga’s diagnosis. The ability to discern the nature and cause of illness is a rare gift. Not all members have been bestowed with such a gift and any new claimants are subject to penetrating
scrutiny from fellow prophets. A prerequisite is that the Church member should be very prayerful, meditative and lead an exemplary Christian life. The prophet Joe experienced a call, the pattern of which was on the same lines as the call of the biblical prophets. He had a dream in which a bearded man in white garments gave him a rod with which he was to heal the sick. A period of sickness followed and in a delirium, he woke up to find a rod by his bedside. He has been using this rod ever since when he attends to the sick.

The power of diagnosis and healing are part of the gifts of the Holy Spirit (1 Corinthians 12:1-10) … A person who fasts and prays steadfastly is well disposed to receive such a gift. Under the inspiration of the Holy Spirit, the prophet can vheneka (enlighten) on an illness, foretell and prevent (Ngwenya, interview 27/03/90).

Just like other diagnosticians, the prophet admits that some illnesses are difficult to identify. Sometimes he can identify the illness and affect a cure simply by looking at the patient. However, some illnesses are difficult to diagnose because of their spiritual nature. Thus, when the prophets give a diagnosis, they first have to encounter the spirit world.

In diagnosis, the prophet is simply an instrument of the Holy Spirit. The Holy Spirit is the power through which the identification of an illness and its cure take place. After the patient's relatives have brought him or her to Church to consult a prophet, the congregation sings songs, calling upon the Holy Spirit. The Holy Spirit then possesses the prophet and he/she speaks in tongues. Diagnosis then proceeds under inspiration and the cause of illness is identified. If a witch causes the illness or disease and she is in the vicinity, she is brought to the scene. In Mberengwa, there are numerous incidents where the prophets' call upon a witch to roonora (undo witchcraft) and the patient recovers shortly thereafter. If the witch is identified and she tries to play games, she may be severely beaten up until she complies with prophetic instructions. However, the prophets normally avoid explicit accusations since they risk arrest under the Witchcraft Suppression Act. Some prophets also use the "boomerang" technique where the illness is transferred from the patient to the witch.

If the cause of illness is a malignant spirit, identification is quite easy. The guiding concept is the incompatibility of good and evil. In dramatic confrontation between these two forces, the evil spirits give themselves up as they cannot match the power of the Holy Spirit. As they behaved when confronted with the commands of Jesus, so today they cry out when the awesome power of the Holy Spirit bears upon them. Patients who are afflicted by evil spirits groan shriek and scream when the prophet either lays hands or points his holy staff at them. The spirits identify themselves, confess their past actions and appeal for mercy. In other words, the prophetic diagnosis mainly involves possession by the Holy Spirit, who is the diagnostic agent.

Some prophets in the Church carry out diagnosis whilst dreaming. Whilst this method is very similar to that of some traditional n'angas, the prophets insist that the Holy Spirit alone guides their dreams. Whilst the diviners' midzimu or shavi are instrumental in their diagnosis, the prophets claim to be under the aegis of the Holy Spirit alone when they give their diagnosis.
The prophet-healer plays a crucial role in the diagnosis of the causes of serious ailments presented by patients and their relatives. Significantly, the Independent Church prophet concurs with his/her clients on the causal factors and perceptions of illness and health. The prophet thus becomes a special mediator between the divine and the human, because he claims to possess supernatural powers derived directly from God. Like his traditional counterpart, the prophet is able to explain, in meaningful terms, the source of illness, disease and misfortune; he then provides treatment that may be simple but spectacular in its results.

5 METHODS OF THERAPY

The Karanga Afro-Christian healing activities are numerous and varied but all are dominated by the figure of the prophet. These religious functionaries carry out the task of administering therapy as part of their pastoral work. They command profound respect, particularly Independent Church prophets in the main Apostolic and Zionist Churches who heal free of charge. The rationale here is that the prophets received without paying and so should not demand a fee for their services. God’s work should not involve profiteering.

Healing is open to both sexes in the Spirit-type Church. Moral uprightness and a strong prayer life are the hallmarks of the prophet. A sound knowledge of the Bible, although not a must, is an advantage. The mode of healing adopted by the prophet depends on the nature of the illness presented to him (Maphosa, interview 30/05/90). Thus, the Karanga Independent Church prophets have a variety of methods of healing that include prayer, exorcism, laying on of hands, expressions of faith, confession, immersion and extraction of disease-causing objects.

In cases involving patients tormented by the evil malignant spirits, prayer alone may suffice. In these cases, the prophet prays over the patient whilst the congregation sings. Silent prayer cannot overwhelm demons. Instead, cries and loud voices can cause the spirit to depart from the patient (Samson Shava, interview 15/08/90).

In exorcisms effected by Afro-Christian prophets, patients achieve almost unbelievable feats. There is a case at Chegato where a seven-year-old girl was exorcised by prophets from St Elijah Chikoro Chomweya of a persistent evil spirit; this evil spirit was that of her grandmothers, who was believed to have been a witch. The spirit threatened the prophets that, if they insisted on driving it out, it would cause bloodshed. The prophets responded by saying that the Holy Spirit was the ultimate Spirit of the cosmos and would protect everyone in the room. Upon hearing this, the possessed child, much to the amazement and shock of those present, lifted a huge burning log from the fireplace and threw it at the prophets. Fortunately, they had anticipated such a move and were able to dodge it. The senior prophet then drew out his sacred staff and pointed it at the child, who then fell upon the ground. The evil spirit was driven out.

Some prophets use the laying on of hands as their means of effecting healing. These prophets simply pray for their patients and then place the right hand, the
symbol of power and goodness, on the top of the patient’s head, so that the Holy Spirit can act through them and effect healing. Other prophets touch the patient and, if it is a case of possession, the patient is shaken vigorously, forcing the evil spirit to depart (Pindukai Shava, interview 24/12/90).

The Apostolic Church has serious reservations about people who seek treatment in hospitals. The guiding ideology of the Church is that God is able to do everything. There is no need, therefore, to use medicine or go to a hospital for treatment. In fact, this is tantamount to questioning God’s power. Efforts to use medicine are viewed as a futileendeavour to alter a person’s destiny. This ideological thrust has had a huge impact on therapy. According to the Apostolic Church, all chronic illnesses such as epilepsy, tuberculosis and cancer can be healed through resolute and unflinching faith (Bigger Matambo, interview 30/08/89).

The Church emphasises healing because Jesus’s earthly ministry centred on curing people’s illness and disease. See, for example, the healing of the blind man at Bethsaida (Mark 8:22-26) and the paralytic at Capernaum (Matthew 9:1-8; Luke 5:18-26). Moreover, Jesus systematically cured ailments of various kinds, including demon-possession, fever, leprosy, epilepsy, physical disorders, and even injury (Luke 22:50, 51). Jesus also had the power to deal with serious psychiatric disorders; for example, he healed a madman who lived in the cemetery (Mark 5:15). He also had the power to raise the dead (John 11:44). As a result, the Apostolic Faith Church firmly believes that AIDS included, can be cured in the Church in the name of Christ.

The only real hindrance to a quick recovery lies with the patient. The guilt or sin committed by the individual patient and obvious circumstances or factors giving rise to specific complaints must be exposed (Sarudzai Shava, interview 15/10/89). The patient’s confession is thus necessary, but sufficient, for healing to occur. As in the traditional experience, confession turns out to be a mode of therapy.

Healing can be effected by the use of blessed water, oil and other items. Blessed water is especially recommended. In this sense “blessed” means that it has been prayed over. Water that has been prayed over or blessed by the prophet is holy and extremely effective. It is sprinkled on the patient and he or she is given some to drink (Vafi Shava, interview 02/01/90).

Members of the Apostolic Church, before joining this church, have often moved from one denomination to another. They find their home in this Church because it combats all the forces of evil bent on unsettling humanity. Prophets in this Church attend to illnesses ranging from dizziness, head and stomach aches, madness, rheumatism, tuberculosis and many others, all of which are caused by evil spirits and witches. The two main elements of therapy are water and oil. The patient drinks and bathes in the blessed water, and the holy oils are applied after prayers. Significantly, water and oil are valued essentially as holy, cleansing and thus efficacious. Furthermore, after therapy, the prophet impresses upon the patient the need for frequent prayer in this troubled world. Failure to do so, warn the prophet, will leave the patient vulnerable and the devil may then inflict upon him or her, a more serious illness (Edmore Shumba, interview 03/09/90).
In the case of serious illnesses and diseases caused by malignant spirits and witches, immersion is frequently employed for healing, usually early in the morning after a night vigil. The form is essentially similar to that for “baptism”. Here, “baptism” is not a rite of admission, but a means of therapy. The practice is regarded as a re-enactment of the healing at the pool of Bethsaida (John 5:1ff). Starting with congregational singing, dancing and praying, this event takes place at the Jorodhani (Jordan), a selected pool within the Ngezi River. The prophet immerses the patients one by one. Believers may also consider this as a purification rite during which both the patients and the entire congregation are cleansed of evil and given protection against evil powers. The temporal and spatial factors in the context of immersion are particularly important. The period at which the event is held is in the morning, indicating coolness, one of the conditions required for the restoration of health. The Jordan pool is believed to have cool and curative waters. Water thus plays an important role in the healing ministry of the Apostolic Church. The water may also be used to protect the home against evil forces let loose by witches and wizards. On the whole, the therapeutic process revolves around the prayerfulness and fasting of the healer (Kurungama Shava, interview 17/06/90).

Another popular method of healing employed by the Karanga prophets entails the extraction of disease-causing objects. These foreign objects, which are taken out of the patients’ bodies, may be living or dormant. They are attributed to malicious witches and sorcerers who are intent on causing people serious injury. Pricking, sucking or rubbing the ailing spot on the patient’s body extracts such objects. Alternatively, the patient may be enclosed in smoke or steam and urged to inhale in order to release the offending objects. In other words, Karanga Afro-Christians believe that the elimination of the undesirable objects guarantees therapy.

Church adherents firmly believe that witches and sorcerers have the potential to plant even more powerful medicines or objects within or surrounding homesteads in order to cause chronic illness, misfortune and death. The nature of such harmful objects varies. Prominent types include medicated horns; concoctions wrapped in pieces of clothes; insects and reptiles; human flesh; packages of human blood and excreta. The only person who should attempt to remove the menacing items is the prophet. He neutralises the dangerous objects by sprinkling holy water on them, thereby rendering them useless, or demolishes them completely by burning. Significantly, the disease-causing objects consist of undesirable, harmful and poisonous material representing evil and destruction. The colour black, which is associated with the bulk of disease-causing objects, indicates the nocturnal and the bad, the time during which evil is perpetrated by witches and sorcerers in an endeavour to include death and destabilise the health and well-being of the Karanga community (Lonnex Shava, interview 18/12/90).

The Afro-Christian Church thus places its central emphasis on the healing power of the Holy Spirit. This is the sole legitimate power in the world and before it all other spirits are rendered powerless. The Church strongly opposes the use of western medicine or consulting the n’anga. Prayer, exorcism, laying on of hands, expression of faith, use of holy water, immersion and extraction, are sufficient
mechanisms to restore the health of a patient. As mentioned above, resorting to western medicine is seen as fighting against the will of God and undermining his power. As a result, the Church resists all attempts at immunisation by the Ministry of Health. However this has had a detrimental effect on some believers’ lives.

6 SUMMARY OF THE INDEPENDENT CHURCH THERAPY

The Independent Church understands serious illness and disease as having a spiritual and personal cause. Witches are believed to be a leading force causing illness and death. Evil malignant spirits are seen as messengers of the devil and they also cause illness and disease. Contravening God’s law culminates in dire consequences for both the health of the individual and the community. In diagnosis, a dominant spirit, perceived as the Holy Spirit, inspires the Church’s prophets. This is believed to be the sole legitimate power in the world that can be trusted to identify illnesses and their causes. In healing, the forms include prayer, exorcism, laying on of hands, expressions of faith, confession, immersion and extraction of disease-causing objects. According to Daneel (1977), like its traditional counterpart, the Afro-Christian Church’s therapeutic system heals the majority of the Karanga.

As we have seen, traditional thought patterns have been carried over and have influenced the outlook of the Afro-Christian Church in Mberengwa. Whilst Christian orthodox beliefs are clearly perceptible among the believers and, in their view, qualifies them as being fully Christian, these operate in ways specifically aimed at preserving believers’ health and well-being.

It is their evaluation of the role of the ancestors that distinguishes the Afro-Christian Church from traditionalists. Whilst traditional society acknowledges ancestral rites, in the Afro-Christian Church this is flatly denied and ancestors are relegated to the realm of evil spirits. The Holy Spirit assumes a central role and this gives a new meaning to the concept of the spiritual order.

The Afro-Christian Church prophet and the n’anga, however, share basically the same worldview. Their main concern is to identify the cause of illness, which is an intrusion, and to restore the health of the individual. Significantly, the domain of the prophet, like that of the n’anga, is not limited to treatment of illness only. Both the n’anga and the prophet address misfortune and issues of ill-health and work towards the prevention and eradication of both. Thus, alongside the traditional diviner-healer, the prophet-healer is an obvious option within society as a source for diagnosing and eradicating illness and misfortune. Whilst the sources of inspiration are clearly different between the n’anga and the prophet, the interpretation of the causes of illness and diagnosis follow basically the same pattern; diagnosis is followed by the restoration of the patient’s health.

Prophetic healing, especially extraction of disease-causing objects, has as its direct parallel the extraction of such objects by the n’anga. The major difference lies in the setting. In prophetic healing a prayer session is held prior to the healing. The type of the objects extracted, are similar and common to both healing systems. Differences arise, however, after the healing has been performed. Whilst the n’anga normally prescribes protective medicine to ward off
any possible future attacks, the prophet has quite different recommendations. The prophet sets aside two tasks for the patient in order to facilitate the restoration of health. These are confession of guilt and intensive prayer. Confession is a prerequisite for healing because the patient at peace with himself or herself and with God and who is cleansed is better disposed for the action of the Holy Spirit. Healing by immersion is also geared towards cleansing to enable the patient to become a member of the church. In all cases, healing is an essential feature of the indigenous Afro-Christian Church.

Alongside the diviner-healer, the prophet/prophetess is regarded as a skilled therapist. Sharing the same cosmological perspectives as his/her clients, the prophet is able to penetrate the Karanga thought-world and this result in healing that is holistic. The use of holy water, smearing of oil and burning of sacred paper as a defensive mechanism in the Afro-Christian Church may be paralleled by the use of charms and amulets in the traditional practice. Sprinkling of holy water around the homestead has also its parallels in traditional religion where the homestead is “fenced” against witchcraft through protective items. Even though such protection assumes new meaning because of the changed setting, the underlying concern still persists.

In all of the cases described, either among traditionalists or in the Afro-Christian Church, what emerges as essential among the Karanga is the desire to preserve health and well-being in a dangerous world populated by the forces of evil. This close association of illness with spiritual forces confirms a general observation in this study that, in all of its forms, Karanga religion is characterised by a central preoccupation to maintain health and well-being and to restore it when a breakdown in someone’s general good fortune occurs. This preoccupation with health and well-being is reminiscent of traditional worldviews, but also includes charismatic traits.

WORKS CONSULTED


**Interviews conducted by the author**

Bishop V Shava: 30/08/89 Chatira, Mberengwa
Mr B Matambo: 30/08/89 Chatira, Mberengwa
Ms S Shava: 15/10/89 Chatira, Mberengwa
Mr V Shava: 02/01/90 Chatira, Mberengwa
Prophet Ngwenya: 27/03/90, Harare
Mr E Hove: 10/04/90 Mhari, Mberengwa.
Mr Maphosa: 30/05/90, Mahindi, Mberengwa
Mr K Shava: 16/06/90 Chatira, Mberengwa
Mr K Shava: 15/08/90 Chatira, Mberengwa
Mr S Shava: 15/08/90 Chatira, Mberengwa
Mrs Shumba: 30/09/90 Madhende, Mberengwa
Mr B Mabika: 22/10/90 Makandangwena, Mberengwa
Elder, L Shava: 18/12/90 Chatira, Mberengwa
Ms P Shava: 24/12/90 Chatira, Mberengwa
Prophet J E Madzimambo: 30/01/91, Chatira, Mberengwa
E Zhou: 02/03/91 Madhende, Mberengwa
Mr C Chabikwa: 23/09/93 Mahindi, Mberengwa.
Evangelist S Shava: 12/08/02 Chatira, Mberengwa