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Seeking Biomedical and Traditional Treatment Is a Spiritual Lapse Among Zionists: A Case Study of the Zion Church in Malawi*

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Abstract

The Enabling Universal and Equitable Access to Healthcare for Vulnerable People in Resource Poor Settings in Africa (Equitable) Project was conducted in Malawi, Namibia, South Africa, and the Sudan between 2009 and 2012. It was aimed at determining the challenges which vulnerable groups, such as persons with disabilities, experience when accessing health care. It also aimed at identifying non-users of health services at the community level and reasons why they were not accessing these services. The study found that members of the Zion Church do not seek treatment from public or private health facilities, or from traditional healers. Not much has been written about how members of the Zion Church in Malawi seek health care. This paper explores how members of the Zion Church seek health care during illness episodes. The study was conducted in four districts in Malawi. A total of twenty-five members and non-members of this church were interviewed to determine how they sought health care. The study found that members of the Zion Church do not use Western medicine: the church does not allow them to seek treatment either from Western health facilities or traditional healers, otherwise they risk excommunication. Senior members of the church pray for the sick, and patients also seek treatment from the Zion Church clinic, where prayers, blessed water, and amulets are used in the treatment of diseases. Non-members who seek treatment from the Zion Church Clinic are advised to first seek treatment from traditional healers and health facilities. The Zion Church clinic should be the last resort for these

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non-member patients, most of whom have been sick for a long time. After being cured, some of the non-members have been converted and joined the church. Our conclusion is that while medical pluralism exists in Malawian communities, members of the Zion Church only access treatment from their church elders and church clinics. They do not use Western medicine.

Keywords: *Zion Church; health seeking; Malawi*

Introduction

In the Holy Bible, there is a woman who suffered from hemorrhage for a long time and she was healed after touching the robe of Jesus Christ. Jesus Christ told the woman that her faith had healed her. Faith healing was part of the Ministry of Jesus Christ and the early Christian Church. The practice of faith healing was downplayed after the first three centuries in favor of secular medicine. Faith healing was, however, revived in the late 19th century by, among others, John Alexander Dowie, the founder of the Christian Catholic Church in Illinois in the United States. Dowie barred medical practitioners from entering his utopian City of Zion. People who went to him for healing were required to abandon all medical treatment and solely rely on prayer to heal them.¹ The Zion Church, as found in Africa, has its origins from people such as John Alexander Dowie.

The Constitution of the Republic of Malawi recognizes health as a human right, and it calls for the Government “to provide adequate health care, commensurate with the health needs of Malawian society and international standards of health care.”² There are many challenges, however, which affect the delivery of quality health care to the people of Malawi, and these include the critical shortage of funding for the health sector, the shortage of human resources, the shortage of medicines, and inadequate health services coverage, among others.³ While the Government of Malawi’s Ministry of Health is striving to address these key challenges in the delivery of health services so that people in Malawi can access these services, there are some cultural and religious reasons which prevent people from accessing health services. In Malawi during the implementation of the Enabling

Universal and Equitable Access to Healthcare for Vulnerable People in Resource Poor Settings in Africa (Equitable) Project, whose objective was to explore access to health care by vulnerable groups, our research team found that there were a number of people belonging to the Zion Church who did not seek care from health facilities but instead relied on prayer for healing. If prayer failed, then they would be referred to a Zion Church clinic. Members of this church reported that they do not seek treatment from health facilities but believe in prayer when they are sick. As is the case with other countries where the Zion Church is popular, for example in South Africa,⁴ the person who provides treatment in the Zion clinic is popularly known as the Prophet or Prophetess. Because of their reliance on prayer when they are ill, and also for the prevention of diseases and misfortunes, members of the Zion Church are non-users of Western medicine. This paper explores how members of the Zion Church seek health care during illness episodes.

The Equitable Project, upon which this paper is based, was conducted in Malawi, Namibia, South Africa and the Sudan over a period of four years. It was funded by the European Union. The study specifically explored the challenges that vulnerable populations experience to achieving universal and equitable access to healthcare. During the study both users and non-users of Western medicine were interviewed. *Users of health services* were defined as people or households who used health care services within the study sites; *non-users* were either those who were not in need of the health care services or who stopped to use services because of significant barriers. While some groups of people also described themselves as non-users (for example persons with disabilities) they stated that if the barriers that prevented them from accessing health services were addressed, they would access formal health services.⁵ One group, however, which consistently reported that they are non-users of Western medicine were members of the Zion Church and other faith groups such as the Apostolic Church. More detailed interviews were done with members of the Zion Church in order to better understand their beliefs and practices regarding health and health care.

Methodology

Twelve research assistants (RAs) were recruited to participate in data collection. They were trained February 17-23, 2010. Fieldwork was conducted in four districts, namely Rumphi in the northern region of Malawi, Ntchisi in the central region, and Phalombe and Blantyre in the southern region. Blantyre is urban while the rest are rural districts. The selection of the districts took into consideration the cultural diversity prevailing in Malawi. In each district the District Health Office helped to identify two health facilities: one belonging to the Christian Health Association in Malawi (CHAM) and the other a public facility being run by the Ministry of Health. In Malawi, public health facilities provide health services free of charge while CHAM charges user fees. CHAM is a non-profit health services provider composed of religious groups and is the largest provider of health services after the Ministry of Health.

A detailed methodology, including numbers of focus group discussions (FGDs) and in-depth interviews conducted in this study, is described elsewhere.⁶ The discussion below only focuses on FGDs and in-depth interviews conducted in one of the districts where the Zion Church was quite popular. In this district, two FGDs were conducted with members of the Zion Church. Interviews were conducted with people who sought treatment at a Zion Church clinic. This clinic also offered admission facilities for its patients. Some of the people who sought treatment at the clinic were not members of the Zion Church. In addition to this, interviews were also conducted with senior members of the Zion Church, including the Prophet. Twenty-five informants were interviewed, and the focus in these interviews was on how they sought care during illness episodes. All the names used in this article are fictitious in order to maintain anonymity of informants.

Ethical considerations

Permission to carry out the study was obtained from the National Health Sciences Research Committee, a local institutional review board whose secretariat is in Malawi's Ministry of Health. The objectives of the Equitable Project were explained to all participants in this study and informed consent was obtained from

all individual informants before the interviews and FGDs were conducted. All participants were assured of confidentiality and their participation was voluntary. They were also informed that they were free to not answer any question and withdraw at any time they liked. None of the informants refused to participate in this study.

RESULTS

This study found that members of the Zion Church do not use either traditional or Western medicines. Elsewhere, it has been reported that members of Zion Churches use herbal medicines; for example, Peltzer, in his study conducted in the northern province of South Africa, reported that ashes made from burnt offering and herbs were used in the treatment and prevention of illness.⁷ However all informants in this study reported that they did not use any medicine whenever they got ill. In this section we explore how members of the Zion Church seek health care and then the conditions under which non-Zionists can seek treatment from the Zion Church Clinic.

Seeking treatment during illness episodes

Yes, it is a sin because James 5:14–15 says “14 Is anyone among you sick? Let them call the elders of the church to pray over them and anoint them with oil in the name of the Lord. 15 And the prayer offered in faith will make the sick person well; the Lord will raise them up. If they have sinned, they will be forgiven.”⁸ So if a person takes drugs it means that person does not believe in God or he is underrating God that he cannot do anything to his sickness which is contrary to our belief [36-year-old man, member of a local Zion Church].

The informant who said the above words grew up as a member of the Catholic Church. In 1999 he was influenced by his grandfather to join the Zion Church. He, as did other members of the Zion Church, viewed the use of medication during illness episodes as a sin because it demonstrated lack of faith in God. The scriptures (e.g., James 5:14-15) are clear on what Zionists should do during illness episodes. According to informants in this study, there are three different types of Zion Churches in Malawi. The first one plays instruments such as harps, drums and violins. Such

instruments are collectively referred to as *lingakas* in local language. This type of Zionism is called *Zion ya malingaka* and its members don't go to the hospital when they are sick; they depend on prayers during illness episodes and are allowed to marry only one wife. The second type of Zionism is called *Zion ya Bata* meaning "the Zion that is peaceful (*bata*)."⁹ These Zionists don't dance or use musical instruments, and they seek treatment from health facilities in addition to prayers. They are also allowed to marry more than one wife. The third type is *Zion ya Spirit*, and its members believe in the Holy Spirit as written in the Book of Matthew in the Holy Bible, where Jesus said "I will send you the Holy Spirit."⁹ Members of *Zion ya Spirit* also don't go to the hospital when they are sick, and they use instruments when they are singing.

The members of the Zion Church who participated in this study belong to the *Malingaka* type of Zion. They rely on prayer conducted by a church elder, as is written in the Bible. The church elder prays for the sick person and gives him or her some blessed water. The patient becomes healed after taking the water. Informants emphasized that the healing depended on one's faith. The prayers and the drinking of blessed water continue until the patient is healed. Informants reported that if the patient did not get well, then he or she would be referred to the Zion Church clinic where a Prophet is resident for further management of the illness as was the case with Salome:

In 2010 Salome and her four children were affected by the measles outbreak. When symptoms of measles such as rash and fever appeared, she told her husband to pray for her since he was an elder of the Zion Church and she was given blessed water to take. When she could not be healed she was taken to a Zion Church clinic where the Prophet prayed for her and gave her amulets (*mbota*) to wear in addition to drinking blessed water. After one week of being prayed for and drinking blessed water, she was healed. She attributed her sickness, and that of her children, to her sins and her lack of faith. She stressed that it was only her husband in her household who did not get sick, and never gets sick, because he is strong in faith and does not sin. She explained that sickness is believed to be as a result of sin and lack of faith. Her children are affected by the faith of their parents.¹⁰

Prayers and amulets are used to treat diseases, but without faith, one cannot be healed. In terms of diagnosis, informants said that the Prophet consults the Holy Spirit in order to find out what the patient is suffering from. In addition to making the patient drink blessed water, such water can also be warmed, and, using a white and red cloth, hot compression can be applied on the patient. None of the informants, however, explained why a white and red cloth is used. One woman aged 30-49 explained that the members of the Zion Church used prayer because Jesus Christ never used to take patients to the hospital for treatment, but he prayed for them.

The *mbota* are provided in different colors, and each color is supposed to heal a particular disease. According to Zionists, if a person does not get well after being prayed for, it means that particular person has not repented his or her sins. In case of children, his or her parents are supposed to repent. Some participants in an FGD with female members of the Zion Church also said that sometimes a person may not be after being prayed for, and they attributed this to God's plan that the person be sick, and even die, if God wants him or her to die.

During cases of serious illness, some members of the Zion Church have sought treatment from the health facilities. Informants said that such people had not fully repented to God, and that they had been excommunicated from the church. Some informants did mention that there had been many cases of excommunication because some Zion members had chosen to go to the hospital during illness episodes. If people who have been excommunicated want to go back to Zion, then they are put on observation for some time before being readmitted into the church. During the period one is excommunicated, he or she is not allowed to wear robes worn by members or even touch the instruments, such as the drums that they use when singing, until they repent their sins and are forgiven. In this study informants reported that members of the Zion Church, as members of the community, also visit health facilities in order to see relatives, friends, and neighbors who have been admitted. They do not go to health facilities to seek health care or even pray for the people who are admitted. The Prophet explained that praying for people who are admitted in hospital would not be helpful because they are already taking Western medicine, which Zionists do not

believe in. Hence, such prayers cannot work unless they stop taking medicine and have faith in the healing powers of prayer.

In addition to the treatment of illnesses, the Zion Church clinic also offers delivery services for pregnant women. Informants mentioned that pregnant women generally do not experience problems when delivering at the Zion Church clinic, even those who previously delivered by caesarean section (C-section) at health facilities. One senior member of the church gave an example of one woman belonging to their church who delivered by C-section at the health facilities (before she joined the Zion Church), and when she had a third caesarean, she was told not to get pregnant again by health workers. When she joined the Zion Church and explained her predicament, she was advised to get pregnant and she has been delivering in a normal way at the Zion Church clinic.

In general, most people who sought treatment at the Zion Church clinic were quite happy with the outcomes as shown by the case below:

Chisomo's son suffered from epilepsy, and she has gone with him to different public and private health facilities, traditional healers, and other faith healers, but he was not cured. After two years, she went with him to the Zion Church clinic, where she saw tremendous improvement in her son: before going to the Zion Church clinic, her son would have fits 5 times a day and could not speak, urinate or defecate. After a few days of arrival at the Zion Church clinic, he vomited black stuff and started walking, urinating, and was able to eat—things she had not seen the previous two years.¹¹

People access treatment at the Zion Church clinic free of charge. A prophet explained that when patients are healed and discharged, some of them return to the clinic with gifts or money on their own as a token of appreciation. The clinic has admission facilities. Those admitted are not provided with food, and every patient and his or her guardian have to provide food for themselves. Free accommodation, however, is offered to those admitted. While some senior members of the church said that health services are provided free of charge, it was learnt from clients that on admission a fee of MK600.00 (equivalent to about US \$3 at the time of data collection) is paid by the client.

Other health services provided by the clinic

Treatment of open fractures

Participants in this study said that, just like other diseases, people with fractures are prayed for, and they don't go to health facilities for treatment. Sometimes patients with fractures drink blessed water. This water is also used for washing the wound or as hot compress together with prayers until the patient is healed. Zionists do not go to the hospital, even if they have fractures and have lost a lot of blood. In order to replace the blood, they are given a bottle of *Cherry Plum* or *Coca Cola*. *Cherry Plum* is a fizzy drink just like Coca-Cola. In an FGD with women, participants said that in cases where people suffer from anemia, the Prophet just prays for *Cherry Plum* or *Coca-Cola*, and these drinks are given to the patient to drink, after which they are healed. One of the church elders, Eliza, said that she was once involved in a car accident but survived without any medication:

In 2000, Eliza was involved in a head on collision accident. Many people died, but she survived. She was found unconscious under one of the vehicles involved in the accident. There was a Zionist on the scene who took her to her house, where she gained consciousness. She was prayed for and received both hot and cold compress using blessed water and she was healed without going to the hospital even though she sustained some fractures.¹²

There were some Zionists, however, who said that they would go to the hospital if they sustained a fracture. For example a 30-year-old man said that if he sustained a fracture he would go to the hospital for treatment as he believed that such cases are better handled by health facilities in addition to prayers. This man said that if he went to the hospital, he would automatically be excommunicated, but he would not mind because his life would be at stake; he would do anything to get well, even if it meant being excommunicated. For those involved in accidents and require amputation, the Zionists accept that this can be done in a hospital environment, as amputation is not perceived as a form of medication. However, patients requiring such services are not supposed to take any form of medication, including injections. The amputation should, therefore, be performed without use of drugs or injection.

Treatment of diseases caused by witchcraft

While members of the Zion Church also believe in biomedical causes of diseases (such as malaria being transmitted by mosquitoes, hence the need for utilization of mosquito nets), they also believe that diseases can also be caused by witchcraft, hence the need to fight against such diseases, as demonstrated by the following informant:

Paulo is 26 years old. He comes from one of the districts in central Malawi, suffers from severe heart palpitations, and reported that, most of the time, he is unconscious. He had spent 3 months at the Zion Church clinic at the time he was interviewed. He was told by the Prophet that he had been bewitched: he was given a rotten piece of meat while he was asleep, and that, through *magic*, his life was taken away from him and hidden elsewhere. He believed that the life he had would be taken away anytime. Since he started treatment at the clinic he has not improved. The Prophet would like to go with him to his home to remove charms planted by witches from his house. The problem, however, is that he has no transport money for himself, the Prophet, and two pastors to travel with him.

Most respondents said that their health had improved since they started getting treatment at the Zion Church clinic. However, Paulo's health did not improve.

Treating non-members: the experience of healing and conversion to Zionism

It is not only members of the Zion Church who seek treatment at Zion Church clinics. In 2011, it was observed that a significant proportion of the people seeking care at the clinic were not members of the Zion Church. They had heard about the clinic from friends and other community members. The following case of Chikondi and her daughter illustrates that non-members of the Zion Church first seek treatment from traditional healers and health facilities, and if they fail to be cured, then they visit the Zion Church clinic for treatment:

Chikondi's -16-year-old daughter, Jane, had been suffering from cerebral malaria for more than three years. Chikondi went with her daughter to the nearest government health facility

for two weeks, after which she was referred to a district hospital where she was admitted for another two weeks, but there was no improvement. She tried herbal medicines alongside modern medicine purchased from shops, and again there was no improvement. In 2009, she visited the Zion Church clinic after being advised by a friend. It took one week of continuous prayers, massaging, and the use of *mbota* around the neck, wrist, and ankles for her to observe changes in her daughter's health. At the time of interview in 2011, the child was able to talk but still did not walk properly, since the problems was very serious.

In a discussion with the Prophet, he reported that non-members of the Zion Church were advised that they should first visit the health facilities and traditional healers; the Zion Church clinic should be their last resort. Non-members who had previously sought treatment at the Zion Church clinic could start seeking care from this clinic. The Prophet explained that non-Zionists believe in taking medication from the hospital or traditional healers; hence, they must start with what they believe in first. One informant said that non-members of the Zion Church are also advised that they are not supposed to take medicine within the premises of the clinic, as the mixing of formal drugs and prayers does not yield the intended results.

When non-members are healed through prayer, their faith in God is strengthened, as was the case with Hawa, a 50-year-old woman:

Hawa got married in 1977 and has nine children. Both Hawa and her family are devoted members of the Anglican Church. She says that she had complications with her last three deliveries. She started feeling pain in the stomach when walking. The pains grew worse after the last birth and she was advised to *close* the womb. In 1995, she went to a large referral hospital belonging to CHAM where she was told she had stomach ulcers and was given pain killers. In 1997, Hawa's problems grew worse: she had back problems and could not go to the toilet. The large CHAM Hospital referred her to Lilongwe Central Hospital where scanning was done but they could not trace any problems. She then started going to traditional healers but was not helped. After suffering for three years without going to the hospitals, she resumed and went to another CHAM Hospital where she was again referred to Lilongwe Central Hospital. At this place, they

discovered precancerous cells and they burned them thinking that the problem would stop. Then the doctors decided, with her consent, to remove her womb because they thought that this was the cause of her suffering. When the womb was removed her problems grew worse. The hospitals said they tried, but it seemed there was nothing they could do to make her better. She grew seriously ill, and that's when she visited the Zion Church clinic in 2009, where she was asked if hospitals and traditional healers had failed to cure her. She then underwent hot compressions followed by drinking blessed water and prayers. She was given a piece of cloth on which was written *Yesu salephera* (Jesus never fails), which she wore till the day she was being interviewed. She was discharged in 2010. She goes to the Zion Church clinic regularly for check-up and she claims that she has been healed.

There were quite a number of informants who said that they were born and grew up within the Zion Church, and they have never known any other church. Others, especially women, said that they joined the Zion Church after they got married to men who already belonged to this church. For example, Mary, a 34-year-old woman, grew up in the Presbyterian church but got married to a man who was a church elder in the Zion Church:

Mary joined the Zion Church because of marriage. She told her husband that she would try to cope with the faith, and if she failed, she would go back to being a Presbyterian member. She was also not sure in the first year of their marriage, as she did not see herself living without taking medicine. The other thing was that she was used to putting on jewelry and making up her hair, which is taboo in the *malingaka* type of Zion. Her first year of being a Zion member was difficult, but she eventually caught up with the faith of Zion Church.

Mary explained that she has since embraced the doctrines of the church, and she does not take any medication, she does not put on jewelry, and she does not plait or treat her hair (with chemicals) because, according to the word of God, they do not want to look like “*the people of this world who decorate themselves.*”¹³ In terms of food, informants said that members of the Zion Church do not eat foods such as pork because this is prohibited as it is written in Leviticus 11 of the Holy Bible. There were, however, others who said that they joined the church after experiencing healing.

Joseph, a 45-year-old man joined the Zion Church from a Presbyterian Church in 1987 after a miraculous recovery of his wife from persistent miscarriage:

Joseph's wife experienced two miscarriages and was referred to a district hospital by a local health center. At the hospital, his wife was advised never to have children, otherwise she risked death. This did not please Joseph since, in the village, children are a source of social status and a sign of wealth. He needed more children, but there was no way out. After recollecting many testimonies from his neighbors who patrons of the Zion Church, he went to the Zion Church in 1987, and after prayers, his wife was able to have children again. This made him to join the Zion Church.

Healing is an important aspect of the Zion Church. It has contributed to people leaving their churches and joining the Zion Church. In most cases, members of the Zion Church said that there is nothing that they want to be changed in order for them to access Western medicine. They believe that God is a healing God.

Discussion

Before the coming of missionaries in the 18th century, people in Malawi, as is the case with other African countries, relied on self-medication with herbs and consulting herbalists and diviners during illness episodes. Herbalists administer herbal therapeutic regimens to their patients based on symptomatology. Diviners, on the other hand, are guided largely by ancestral, family, or foreign spirits in order to determine the cause of illness and the therapeutic regimen they are supposed to administer to their patients.¹⁴ The use of traditional medicine is as popular today as it was a century ago, and the World Health Organization (WHO) estimates that 80 percent of the population in Africa use traditional medicine.¹⁵ In Africa, people will also resort to the purchase of medicine from both informal and formal pharmacies and visiting health facilities at different levels of health care. Lastly, as the current study has demonstrated, people also seek health care from the Zion Church during illness episodes. There is, therefore, a multiplicity of therapeutic options, comprising not only multiple choices of therapy but also multiple categories of healers and multiple conceptions of disease and illness.¹⁶ In such pluralistic medical systems, patterns

of resort, which Young defines as “the paths people make as they pick and choose their ways from one sector of the medical system to another, in pursuit of diagnosis, cures, and other medical services,”¹⁷ can either be simultaneous or sequential. The choice of where one will seek treatment will depend on a number of factors, such as level of education, socio-economic status, the perceived cause of the disease, cost of therapeutic intervention, and membership in specific religious organizations, such as the African Independent Churches (AICs).¹⁸

During the 19th century, AICs emerged, which syncretized traditional African religion with European Christianity. AICs are founded by Africans who break away from missionary or Western founded churches, seeking to practice Christianity in a manner that embraces an African worldview. AICs are characterized by healing practices that use African ways of healing.¹⁹ The Zion Church, as is being practiced in Malawi and other African countries, is an example of the AICs and, as is the case with all AICs, healing constitutes a major area of emphasis.²⁰ This study has shown that members of the Zion Church can only consult their church elders and their Prophet during illness episodes: they are not allowed to take either traditional or Western medicines, as they risk excommunication from the church if they do. For members of the Zion Church, their choice of therapy is very restricted; hence, for them medical pluralism does not exist.

It has generally been argued that the incorporation and popularization of healing in AICs has contributed to their rapid growth.²¹ The non-members of the Zion Church who sought treatment from the Zion Church clinic were told to first seek care from health facilities and traditional healers before resorting to the Zion clinic. As has been demonstrated, most of the informants said that their health status greatly improved or that they were healed completely once they started consulting the Prophet. Quite a number of these informants indicated that they had joined the Zion Church after experiencing healing. We, therefore, see that, while the Zion Church does not force people to join, the experience of healing is a major attraction. Most of the patients admitted at the clinic, especially non-Zionists, had suffered for a long time, just as Frankenberg and Leeson described the *nganga's* patients in Lusaka.²²

Some patients who were hospitalized stayed at the clinic for a long time, and they prayed in the Zion Church every day, hence increasing their likelihood of being converted. Missionary medicine, as can also be said about the treatment and other services offered at the Zion Church clinic, in a way, was perceived as a tool to convert or draw the African patient to the love of God. Long-term periods of hospitalization, as is the case with Zion Church clinic in central Malawi, provided an opportunity for preaching the word of God. Vaughan claims that some patients were forced to remain in the hospital even after being cured in order to convert them to Christianity.²³

In addition to healing, the AICs, such as the Zion Church in Malawi, are also popular because they have incorporated elements of African traditional forms of healing. As Ingstad points out from her work in Botswana, “the prophets (*maprofiti*) base their healing practices on concepts of sickness and misfortune that are traditional to a large extent.”²⁴ Earlier an example was given of Paulo who was informed by the Prophet that he was bewitched. There were ways of dealing with cases of witchcraft in the Zion Church. Paulo was supposed to return home with the Prophet and two Zion pastors to cleanse his house of witchcraft. The role of the Zion Church in the fight against witchcraft has been well documented by Ashforth, who did his research in Soweto in South Africa.²⁵ At the time of data collection Paulo was being treated for a disease caused by witchcraft.

In order to determine what a patient is suffering from and an appropriate action that should be taken, the Prophet in the Zion Church divines with the help of the Holy Spirit. This has also been reported in Zimbabwe and in South Africa.²⁶ The fundamental difference with the diviners in the traditional African context is that these divine with the help of the ancestral and other spirits.²⁷ It is also not everyone who can become a prophet or diviner: it is the Holy Spirit which calls prophets to embark on healing of the sick,²⁸ as was the case with Prophet who manned the Zion Church clinic that was visited during this study. Even though diviners were not interviewed in this study, they too are called to their profession by ancestral spirits, as has been reported in Malawi and in South Africa.²⁹

In addition to divination and healing, these AICs are also involved in the prevention of disease and misfortune caused by

witchcraft and evil spirits, which is not a mainline concern of Western Christian churches. In South Africa, the Zion Christian church fortifies houses against witchcraft and administers individual protective medicines.³⁰ As we saw earlier, Paulo, who had been ill for some time with heart palpitations, was supposed to go home with the Prophetess in order to deal with issues of witchcraft.

Conclusion

The Government of Malawi, through the Ministry of Health, despite prevailing health system challenges, tries to increase access to health services for all people in Malawi. Some of the initiatives that Government has put in place are the continued construction of health facilities in underserved areas to improve access, in terms of distance; scaling up of the training of human resources for health and putting in place innovative retention mechanisms; and the introduction of service level agreements with CHAM facilities in which the Ministry of Health through District Health Offices pay CHAM facilities to enable Malawians access free health facilities.³¹ While such initiatives are taking place, there are still groups of people who, for some reason, do not access the formal health care services. Members of the Zion Church, as has been described in this paper, constitute one of the major groups which do not use Western medicine. Zionists say that there is nothing that will make them use Western medicine: they believe that they will be healed through prayers. As far as the Zionists are concerned, in addition to prayer, the use of blessed water and amulets are of central importance in the prevention and treatment of disease. Healing through these means is what characterizes the Zion Church. Daneel reminds us that “the use of medicines in the Zion Church is not allowed, and visits to the hospital for medication are considered a lapse in the spiritual life of the Zionists and is further perceived as a form of infidelity.”³²

Notes

- ¹ Margaret M. Poloma, "Old Wine, New Wineskins: The Rise of Healing Rooms in Revival Pentecostalism," *PNEUMA: The Journal of the Society for Pentecostal Studies* 28, no. 1 (2005): 59-71.
- ² Government of Malawi, *The Constitution of the Republic of Malawi* (Lilongwe: Government of Malawi, 1994), Section 13(c). Chapter III, Page 4.
- ³ Ministry of Health, *Health Sector Strategic Plan 2011-2016* (Lilongwe: Ministry of Health, 2011), 30-34.
- ⁴ Karl Peltzer, "Faith Healing for Mental and Social Disorders in the Northern Province (South Africa)," *Journal of Religion in Africa* 29, no. 3 (1999): 388; Adam Ashforth, *Madumo: A Man Bewitched* (Capetown: David Phillips, 2000), 144-156.
- ⁵ Alister Munthali and Cecilia Makupe, *Exploring Access to and Delivery of Healthcare Services in Malawi* (Zomba: Centre for Social Research, 2011).
- ⁶ Munthali and Makupe, 5-6.
- ⁷ Peltzer, 391-398.
- ⁸ International Bible Society, *Holy Bible* (Colorado Springs, Colorado: International Bible Society, 1984), John 5:14-15.
- ⁹ American Bible Society, *Holy Bible* (New York: American Bible Society, 1996, John 16:5-7).
- ¹⁰ Study participant.
- ¹¹ Study participant.
- ¹² Study participant.
- ¹³ This is a direct quote from the interview. The interviewee did not cite any verse.
- ¹⁴ Ashforth, *Madumo*, 204-210; Gordon L. Chavunduka, *Traditional Medicine in Modern Zimbabwe* (Harare: University of Zimbabwe Publications, 1997), 42-67.
- ¹⁵ World Health Organization, *WHO Traditional Medicine Strategy 2002-2005* (Geneva: WHO, 2002), 1.
- ¹⁶ L. Jan Slikkerveer, *Plural Medical Societies in the Horn of Africa: The Legacy of "Sheikh" Hypocrites* (London and New York: Kegan Paul International, 1990).
- ¹⁷ Allan Young, "The Relevance of Traditional Medical Cultures to Modern Primary Health Care," *Social Science and Medicine* 17, no. 16 (1983): 1205-1211.
- ¹⁸ Alister Munthali, "Making Therapeutic Choices in African Societies," in *Health and Health Care in Malawi: Access and Choices*, ed. Peter Mvula. (Zomba: OSSREA Malawi Chapter – University of Malawi, 2006), 4.
- ¹⁹ Muhammed Haron and Kipton E. Jensen, "Religion, Identity and Public Health in Botswana," *African Identities* 6, no. 2 (2008): 183-198.
- ²⁰ Ashforth, 144-156.
- ²¹ Jim Kiernan, "The Zionist Congregation Over Time: Continuity and Change in Social Composition and Structure," *African Studies* 55, no. 2 (1996): 69-88; Michael F. C. Bourdillon, *Where Are the Ancestors: Changing Culture in Zimbabwe* (Harare: University of Zimbabwe Publications, 1997), 90.

- ²² Ronald Frankenberg and Joyce Leeson, "Disease, Illness and Sickness: Social Aspects of the Choice of Healer in a Lusaka Suburb," in *Social Anthropology and Medicine*, ed. J. B. Loudon. (London: Academic Press, 1976), 223-258.
- ²³ Megan Vaughan, *Curing Their Ills: Colonial Power and African Illness* (Cambridge: Polity Press, 1991).
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- ²⁵ Ashforth, 144-156.
- ²⁶ Marthinus L. Daneel, *Zionism and Faith-Healing in Rhodesia: Aspects of Independent Churches* (Hague and Paris: Mouton, 1970), 40; Ashforth, 144-156.
- ²⁷ Chavunduka, 42-67; Paul Courtright, "Eye Care Knowledge and Practices Among Malawian Traditional Healers and the Development of Collaborative Blindness Prevention Programmes," *Social Science and Medicine* 4, no. 11 (1995): 1569-1575.
- ²⁸ Peltzer, 390.
- ²⁹ Steven Friedson, *Dancing Prophets: Musical Experience in Tumbuka Healing* (Chicago: University of Chicago Press, 1996), 10; Ashforth, 204-210.
- ³⁰ Ashforth, 144-156.
- ³¹ Ministry of Health, 34.
- ³² Daneel, 53.

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