
Reviewed by: Telesia K. Musili, University of Nairobi, telesia.musili@uonbi.ac.ke

Religion and the COVID-19 Pandemic in Southern Africa, edited by Fortune Sibanda, Tenson Muyambo, and Ezra Chitando, brings together contributors to explore a wide range of topics and provide a nuanced analysis of the role of religion in public health and politics with a specific focus on Southern Africa. The book was written during the COVID-19 lockdown and closures, closely mirrors Afrocentric thinking and experience. The book’s central argument is that religion plays a vital role in influencing the health matters of the population, both negative and positive. Religion positively facilitates how states respond to pandemics, while its fundamentalist approach can be detrimental to the containment of pandemics. Religion and politics (used here to mean power) are depicted as interrelated and interconnected in some ways towards Africa’s development. Indigenous knowledge systems analogies/metaphors representing collective consciousness, indigenous philosophies, methodologies, theories, and practices are undergirding this volume. This collection thus opens the readers’ eyes to the diversity and in-depth research undertaken on COVID-19 using African Indigenous knowledge systems, specifically focusing on the connection between pandemics, religion, politics, and public health in Southern Africa.

Southern African religious politics and public health interfaced, when COVID-19 pandemic hit, and depicted interspersed moments of cordiality and tension. Cordial relations stood out as religious, political, and public health actors shared programs, collaborated on joint actions, promoted development, and held front-door entry policies. Good rapport existed between prominent religious leaders and politicians running different governing bodies in Southern Africa. However, tensions
between these two parties also arose, for example, some Pentecostal religious leaders insisted on going ahead with large gatherings amidst social distancing preventive protocols. Other ecumenical bodies launched anti-corruption campaigns against the looting of COVID-19 funds, a phenomenon that swept most African countries. Active resistance to COVID-19 vaccines was another incidence that brought tension in the two camps, where a renowned Rastafarian religious community in South Africa was quite skeptical about the use of ‘Babylon’ manufactured COVID-19 vaccines while advocating for herbal remedies. The overarching impression in these highlighted interfaces is that religion and religious leaders are well-placed to influence their constituents in matters relating to health. Tensions between religion and science were defused when religion and religious leaders were considered critical influencers in health.

Furthermore, the pandemic prompted thought-provoking components of life’s meaning and its anticipated end. The components included the retrieval and use of images of apocalypticism, prophetic proclamations on the end of the pandemic, conspiracy theories of a plan to exterminate Africans with the hurriedly manufactured vaccines, and nuanced biblical hermeneutics that pointed to the pandemic being a punishment from God among others. The nuances highlighted in this volume point to a society in deep search of understanding the pandemic in relation to its context, identity, the meaning of life, and destiny. The rootedness of the Southern African scholars in their context stands out, even in the organization and presentation of the chapters outlined in this volume.

The book consists of seventeen (17) chapters. Even though the book has no sub-divisions, I have sub-divided the chapters into five categories for the purpose of this review. They include the introduction, African indigenous knowledge systems, context-based, inclusion-oriented chapters, and the conclusion. The opening chapter introduces new ways of understanding the complex relationships and interplay of religious beliefs, practices, the state, and society in the context of public health. Indigenous knowledge system-oriented chapters include chapters 2, 3, 5, 8, and 10. Chapter 2 explores the implications of the ethics of Ubuntu, which lies at the very heart of indigenous African values, on public health in the COVID-19 era. The social distancing protocol that was highly amplified during the pandemic is examined in chapter 3 from Ndau religious and indigenous knowledge systems. The Ndau indigenous religion is explored in chapter 4 to find out how resources embedded within it can transform death-dealing behaviors in current and future pandemic times. Chapter 5 invokes indigenous knowledge systems to highlight that the majority of Africans still frame their
understanding of disasters from within these systems. This argument reignites a long-standing debate on the relationship between religion and science. Another chapter that leans on indigenous knowledge systems is chapter 10, where the kingdom of Eswatini is explored. The chapter expounds on how religious communities, influenced by traditional cosmological orientation, understand and interpret depressing phenomena, such as the COVID-19 pandemic.

Chapters that interrogated the impacts of COVID-19 contextually while leaning on particular topical issues include chapters 6, 7, 8, 9, and 11. Chapter 6 evaluates state regulations enacted to curb the spread of coronavirus over and against the constitutionally guaranteed human rights and freedoms in order to determine the constitutional justification of the enacted regulations in South Africa. The negative influence of religion in the management of infectious pandemics is presented in chapters 7 and 8. In chapter 7, cyberbullying in virtual spaces is said to have intensified amongst the younger generation. Technology compromised the spirit of Ubuntu amongst families, instead of enhancing inter-generational sharing and mentorship. The digital divide stood out not only among the rich and poor but also between the younger and the aged. Chapter 8 presents Tanzania’s unique approach to COVID-19. The late President John Magufuli appropriated religion as a significant tool in counteracting the spread and impact of coronavirus in the country. The governmental fundamentalist approach of a contagious pandemic not only costed the president his dear life but also allowed Tanzanians to reevaluate their strengths and social structures and localize standard measures towards the pandemic according to their conditions and available resources. The Tanzanian president employed religion to deny the existence of COVID-19 and asserted that Tanzanians had been praying and fasting for God to save them from the pandemic, and God had answered. According to him, COVID-19 had been eliminated by God. Chapter 9 presents Kenya’s initial response to the pandemic. Religious prophecies from the religious leaders that reduced the pandemic to a mere spiritual matter were problematic, prompting the government to struggle to address the pandemic. The Zambian case is presented in chapter eleven, where the focus is on the place of religion in the fight against the COVID-19 pandemic, as exemplified by the Church Umbrella bodies in the country. It is recommended that religion and religious actors remain key stakeholders in public health matters.

The deliberate inclusion of distinct groups and concerns about how they managed the pandemic is tackled in chapters 13, 14, 15, and 16. Chapter 13 explores the challenges faced by persons with disabilities, where Makomborero Allen Bowa points out that navigating community and institutional barriers are often challenging for persons with
disabilities. The pandemic made the existing challenges against persons with disabilities more complex and called upon the church and governments to take appropriate action and guard against their further marginalization and stigmatization. He calls for a liberative reading of the Bible and upscaled efforts from other governmental and non-governmental stakeholders. In Chapter 14, Edmore Dube outlines how Muslims in Zimbabwe coped well with COVID-19 restrictions since the Quran and the Sunnah of the Prophet have directives on restrictive and controlled movements in the event of a pandemic. Chapter 15 by Fortune Sibanda deals with Rastafari communities in Zimbabwe and Malawi and their COVID-19 management tactics. Often stigmatized, demonized, and criminalized, the group embraced human diversity and hence divergence of ideologies to drive positive and complementary actions in the face of the pandemic.

Further, in chapter 16, Molly Manyonganise brings gender politics into the mix, where COVID-19 was said to have worn the face of a woman. The pandemic, Manyonganise argues, exposed and exacerbated the existing inequalities that put, among other groups, girls and women at increased risk of gender-based violence (GBV). Women’s care work, often unpaid, doubled amidst violence, thus endangering their lives even further. The concluding chapter foregrounds the complexity of the relationship between religion and development. Ezra Chitando contends that the relationship goes beyond the dichotomies of positive or negative. Chitando asserts that multiple factors overlap and intersect as African nations continue with their quest for development, prompting what he refers to as a ‘re-marriage’ between religion and development and an emerging field of academic engagement.

As it is not possible to discuss each chapter in this review, I will focus on what I perceive to be the foundational thought frame that emerges from the contributions detailing African identity and rootedness. However, the breadth of essays and themes is to be commended, for it ensures that the book paints a picture of how COVID-19 was managed in Southern Africa. Indigenous knowledge systems refer to total knowledge and practices used to manage human life’s socio-cultural, socio-economic, ecological, and spiritual dimensions. Being deeply grounded in these knowledge systems denotes a sense of belonging, originality, and attachment that gives one an identity. Indigeneity, as it has been understood, underscores deeply engrained identities, the collective memory of symbols and rituals, moral narratives, gendered identities, worldviews and cosmologies, and economic and political imaginations that are socialized and internalized within one’s original space (Adogame 2021). The dichotomies of indigenous versus modern are drawn from colonial escapades and have come to form a worldview
with which African people struggle to understand themselves and their phenomena. Colonizing predictions of the grave impact of COVID-19 on the African continent attest to this mentality. Nonetheless, waves of decolonial and postcolonial worldviews continue to sweep through the African continent, unmasking and understanding the importance of their rootedness and identity, as is revealed in this book.

The COVID-19 pandemic presented a playing arena for such unmasking. For instance, the chapter on exploring the ethics of *Ubuntu* in the era of COVID-19 by Beatrice Okyere-Manu and Stephen Nkansah Morgan points to traditional practices of solidarity, reciprocity, and mutualism with which people safeguard and uphold each other during a pandemic. This concern for the other, which is practiced communally and widely amongst many different indigenous peoples’ communities, is key to these communities’ resilience and ability to maintain their traditional cultures while adapting to the restrictions brought about by the pandemic. One such example is the chapter on the Ndau community in chapters 3 and 4. In Chapter 3, Tenson Muyambo examines social distancing in the context of COVID-19 in Zimbabwe from Ndau religious knowledge systems. Muyambo utilizes the Sankofa bird symbol, imploring an understanding of returning to our roots. The Sankofa symbol calls for adopting what is known and blending it with what is unknown, a concept that emerged to forge a better solution and adherence to the call of social distancing. One such act is appropriated in the Ndau customary greetings and conduct at funerals which is characterized by clapping, implying that implementing social distancing through avoidance of handshakes and hugs in line with the COVID-19 preventive measures was never a problem. Muyambo challenges the colonial imposition of social distancing as though it was a new concept meant to infringe on people’s freedom. In the preceding chapter, ‘Coping with the Coronavirus (COVID-19): Resources from Ndau Indigenous Religion’, we note that the Ndau people invoke spiritual capital enshrined in their notion of collective existence to provide a framework for solidarity and active compassion. As such, social distancing is no longer perceived as an infringement of any freedom but as a stoic forbearing with one’s relations.

Indigenous religious worldviews that embrace collectivism and communality in Eswatini and among the Ndau community attest to the value of solidarity as an ethical worldview that binds communities together beyond the living. Therefore, indigenous religious worldviews and science are not conflicting disciplines, but they overlap once examined from a decolonial perspective. Indigenous knowledge and science can complement each other. Most African countries appropriated several herbs to manage COVID-19, notable of which Madagascar developed
a herbal concoction which they believed could cure the disease. The World Health Organization and different nations’ ought to avoid battles of superiority and monopolized ownership of knowledge and patents as we struggle to survive in an environment that is depleting every day. Traditional medicine consists of knowledge received from the past and handed down from generation to generation, including curative herbs.

Cognizant of their potential, Sibanda acknowledges the need for ‘Just One Earth’ and a ‘collective consciousness’ to attack the pandemic (226). Drawing from Rastafarianism, Elder Ras Sakara requests all to ‘plant more trees and herbs, which purify [the] air that makes our environment more habitable’, a call that would promote human flourishing. Using plants or animal products to make conventional medicine scientifically points to a learned skill from indigenous systems. Thus science and indigenous knowledge are probably closer to each other, with indigenous knowledge being the foundation for scientifically proven knowledge. Indigenous knowledge and modern science complement each other and, until now, have convincingly been demonstrated in research on herbal medicine. From the preceding, respect for indigenous advances by the medical governing bodies is a worthy course in ensuring research progression. The health crisis and economic recession caused by coronavirus are evident in Africa and the globe. The concern for a healthy globe calls for concerted efforts, regardless of their type or origin, provided they depict preventive and curative traits. This implores the need for further research and disclosing supportive alternatives in indigenous knowledge systems, including religion. Indigenous knowledge has been a springboard for the innovation of medicine and pharmaceutical products from time immemorial. Africa’s quest to partner, albeit in a little way, is a promising return to their identity and rootedness, a sign of overcoming the colonial mentality of thriving on aid always.

Despite the positivity displayed throughout the book on revisiting the Indigenous Knowledge systems, and especially using herbs to manage the coronavirus and other pandemics, the volume misses a chapter on the intersection of COVID-19 and the ecosystem. Given that the coronavirus is classified as a zoonotic virus, a chapter on the intersection of ecology, pandemics, and health would have done justice to the book. As the COVID-19 containment battle ensued, it was noted that women were at the helm of leadership in different institutions, carrying out effective and inclusive COVID-19 responses. For instance, the success of women leaders such as Germany’s Angela Merkel, New Zealand’s Jacinda Ardern, Denmark’s Mette Frederiksen, Taiwan’s Tsai Ing-wen, and Finland’s Sanna Marin in containing coronavirus in their countries prompts a rethink on women leadership. A deliberate engagement in the role of religious women/women’s leadership in responding
to pandemics is crucial in academic circles. Inclusive leadership, where women occupy decision-making positions, not necessarily relegating them to frontline service delivery, would further prompt critical analysis of the reading and deployment of sacred texts (for example, the Bible and the Quran) explaining the origins, meaning, and ending of the pandemic. Nevertheless, Religion and the COVID-19 Pandemic in Southern Africa is a thought-provoking and groundbreaking book. It highlights contextual thought frames for managing contagious pandemics destabilizing a continent’s economic and health development, as well as the role of religion in this endeavor. Undoubtedly, these insights would steer sound preparedness in the event of another contagious pandemic of this nature and magnitude. The book is, therefore, well-worth reading to all audiences; students, medical doctors, researchers, religious leaders, and political leaders. It is a call to inclusion, not exclusion.

References