

The Impact of Covid-19 Pandemic and the Challenges of the Mission of the Church as A Healing Institution: A Case Study of Tonota

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Abstract

The article examines the impact of COVID-19, a pandemic that causes crisis, confusion, trauma, and consequently changing people's lifestyles (The World Health Organisation, 2022) It also explores the impact of COVID-19 and the challenges it imposes on the mission of the church as a healing institution in a peri-urban village of Tonota in Botswana. The article particularly discusses challenges faced by the church as a healing institution and the measures it put in place in its efforts to contribute- towards the healing of those affected and infected by COVID-19 (Teti, et al, 2020). The article adopts a missiological framework that theorizes the mission of the church as a healing institution. It uses a qualitative method that adopts a phenomenological approach, as a starting point. In-depth interviews were used as a data collection tool to explore the lived experiences of the research participants selected from different churches in the village of Tonota. It must also be noted that in addition to disrupting everyday lives, the COVID-19 pandemic, as observed by Rahman and his co-researchers, affected the use of qualitative methods (Rahman et al, 2021). A thematic approach was used to analyse the qualitative data. Findings from the interviews revealed that COVID-19 had its greatest impact during lockdown, which led to the closure of churches in the village and their inability to fulfil their healing ministry to congregants and community members. Findings also reveal that members of the church were affected by COVID-19 which resulted in many deaths thus weakening the healing ministry of the church due to fear and financial inability. In conclusion, therefore, the article observes that despite these serious challenges the church encountered, different measures were put in place to help the affected congregants and the general members of the community. The article recommends that when crises like COVID-19 occur the government, the Ministry of Health and the church should work together with one purpose of healing the nation.

Keywords: COVID-19, Healing Institution, Lockdown, Mission, Pandemic, Tonota.

INTRODUCTION

The purpose of this article is to explore the impact of the COVID-19 pandemic and examine the challenges of the mission of the church as a healing institution in the era of the COVID 19 in Tonota, a peri-urban village, in the central district of Botswana in Southern Africa. In the year 2011, Tonota had a population of approximately 20,007 (Botswana Census, 2011; The Botswana National Atlas, 2011; Silitshena, & Macleod, 1992). Despite the limited demographic choice of the interviewees, efforts were made to collect and present data from diverse Christian communities in the village in a way that would add authenticity and integrity to the results and discussions of the findings. It became evident from the research that the preventive measures imposed by the Government of Botswana had to be observed by everyone, thus having a significant economic, psychological, social and religious impact, particularly on low-income individuals and the unemployed, especially the youth.

The article focuses on the ministry of the church as a healing institution during the COVID-19 pandemic era. For purposes of understanding the concept of the Church as a healing institution, the study relies on Merriam-Webster's (2021) definition of the term healing which is a process of making a person physically well, that is, restoring one back to good health, to be free from injury or disease and making the person whole again. As such healing in all its forms is important as it is considered a form of restoration, which is a key mission of the church. Although the church in Tonota made every effort to minister healing to its members and the community in general, it did not function to its full potential as a healing institution due to COVID-19 restrictions. Deaths of church leaders, pastors and ordinary members caused by COVID-19, brought fear in a social environment that was already characterized by strict protocols.

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The article, therefore, shows that the COVID-19 pandemic posed significant challenges for social institutions, notably impacting the role of the church as a healing institution. The closure of churches due to the pandemic created barriers, which denied many people access to their usual sources of healing and spiritual support. Moreover, the fear instilled among pastors, who traditionally served as vehicles of healing and comfort, led to the avoidance of physical contact with congregants affected by COVID-19. The social stigma associated with the virus resulted in sick individuals being quarantined or isolated, depriving them of the loving care they would typically receive from their families, loved ones and the church. The occurrence of deaths within the church further complicated situations, as government restrictions on funeral attendance limited the support grieving families received. As a result of these challenges, churches were constrained in fulfilling their healing ministry to their congregants and extending their support to individuals outside the church community.

Background of the Study

Mission of the Church

Webster (2021) defines the term mission as a ministry commissioned by a religious organization to propagate its faith or to carry on humanitarian work. Historically, the church has always acted as a healing institution from the first century early church. Jesus, for instance, saw his mission as that of bringing love and healing to needy people. When he started his ministry, he visited the synagogue and read from the book of Isaiah saying: “The Spirit of the Lord is on me, because he has anointed me to proclaim good news to the poor. He has sent me to proclaim freedom for the prisoners and recovery of sight for the blind, to set the oppressed free, to proclaim the year of the Lord’s favour” (Luke 4:18).

Johannes Verkul (1978) defines the concept of mission as the participation of the people of God in God’s action in the world. Verkul (1978) uses the term missiology to denote the religious and critical reflection on mission. Thus, the study is particularly interested in the leadership, structures, approaches, and collaboration of the church in fulfilling its healing mission mandate, especially during times of crisis. It emphasizes that the church’s mission be conducted within a specific environmental and cultural context, with Tonota village as the focal point. Drawing from Acts 6:1-7, Vhumani Magezi (2022) defines mission as a ministry commissioned by a religious organization to propagate its faith or carry on humanitarian work. In the context of COVID-19, the mission of the church is to provide comfort, encouragement, counselling and healing to the community. In the parable of the Sheep and goats (Matthew 25:31-46), Jesus for instance, calls the Church to see the healing ministry as a priority.

The Challenge of the Church as a Healing Institution Defined

The mission and ministry of the church as a healing institution has positioned it as a source of comfort for the sick, the orphans, the widows, and the poor. However, the COVID-19 pandemic posed a significant challenge as strict protocols limited physical access to church premises where people traditionally sought comfort through the ministration to the Word of God and prayer. Grundmann (2008) observes that during COVID-19, as it happened in the case of Tonota, churches were mostly closed when members and the community needed the hand and the voice of pastors the most. Grundmann (2008) also observes that government regulations during the pandemic included strict observation and adherence to these rules such as restricted attendance to a maximum of 50 registered members, church service limited to a duration of two hours, in addition to observance of social distancing of one-meter, mandatory washing and sanitising of hands and a compulsory wearing of face masks. Inevitably, these prohibitions and protocols imposed a challenge to the church members and the community at large. The Ministry of Health in Botswana (2021), as the main health provider and policy maker, emphasized to the public regarding the importance of preventative measures such as avoiding crowded places, closed spaces -and conversations, enforcing appropriate quarantine and isolation measures, proper wearing of masks, physical distancing, and frequent hand washing as part of their responsibility was key to reducing the effects of COVID-19 on the health system, economy and livelihoods of Batswana.

These protocols created a noticeable gap between the church and those who relied on it for comfort, especially the sick. The African religiosity worsened the situation, which led people to perceive churches as centres of psychological, economic and social support for the less fortunate members of society. The closure of churches

revealed a shift in societal dynamics during the COVID-19 pandemic. Traditionally, the responsibility of taking care of the needy in society and orphans was played by the family and community rather than the government. However, with the pandemic, there has been a shift of that responsibility increasingly being placed on the church, in which the church embraced the role as an institution that took care of vulnerable members of the society. The COVID-19 restrictions and especially lockdown was a devastating moment to many people and had a negative impact, as the regulation on church attendance resulted in people being returned home when maximum capacity was reached. In many cases, this was really disheartening for individuals as the church was the people's last hope of comfort and survival during this difficult period.

Constrained by the biblical teachings, such as the one that says: "Obey the government, for God is the one who has put it there. There is no government anywhere that God has not placed in power. So those who refuse to obey the law of the land are refusing to obey God, and punishment will follow" (Romans 13:1-2, NLT), churches were compelled by such scriptures to observe such restrictions. It was becoming evident that the church, which had presented itself as a healing institution needed healing itself. The fear of coronavirus had traumatized its members and leaders, especially church leaders who were instrumental in the healing ministry, succumbed to COVID-19. In fact, as based on the findings of this study, some churches were compelled to shut down as more and more people fell victim to the pandemic. While most churches eventually reopened their doors for members and the community, some individuals still harboured fear and chose not to attend church services. Thus, this situation raises an important question to be answered in the paper: "What happens to the mission of healing when the church itself becomes sick, fearful, discouraged and unavailable to act as a healing institution?" This reflects the magnitude of the challenges faced by the church in Tonota as a result of the impact of COVID-19 pandemic and its efforts to promote its healing ministry.

Objectives of the Study

To effectively investigate the identified research questions and provide focus in the collection of data, the study establishes four important specific objectives as follows:

To explore the challenges the church faced as a healing institution due to COVID-19.

To examine the impact of COVID-19 on those mostly affected by the pandemic in the church.

To discuss measures the church put in place to help heal those affected and infected by COVID-19.

To critically analyse the impact of COVID-19 on the ministry of the church as a healing institution.

Research Methodology

This research employed a qualitative design with phenomenology as its foundational framework to explore the impact of COVID-19 on the mission of the church as a healing institution in Tonota, Botswana. The qualitative approach was chosen for its ability to provide in-depth insights into the experiences and perceptions of church leaders and congregants.

The research was conducted in a village called Tonota, located in the northeastern part of Botswana, situated 45 kilometres south of Francistown. Tonota is known for its robust transportation facilities and hosts a diverse range of churches including mainline, Pentecostal, and African Independent Churches. Tonota has a total of twenty-one (21) churches, divided into three categories: mainline churches (7), Pentecostal churches (7), and African Independent Churches (7). Churches were arranged alphabetically within each category, and every second church was selected, resulting in a sample of seven churches. These included:

Mainline Churches: United Congregational Church of Southern Africa, Anglican Church.

Pentecostal Churches: SCOAN Church Ministries, Hero Healing Church Ministries.

African Independent Churches: St. John Apostolic Faith Mission of Botswana, Eloi Christian Church, Zion Christian Church.

Data collection was successfully conducted from two churches in each category (due to certain limitations), except for one, where data was collected from all three sampled churches. Purposive sampling was used to select participants, from a target population of church leaders and congregants from various denominations in Tonota. These participants ensured a diverse representation which was crucial in providing comprehensive data regarding the impacts of COVID-19 and the challenges faced by the church as a healing institution. The selection criteria for participants focused on individuals who identified as Christians and regularly attended church, including church congregants (youth aged 18-35 and elders aged 36-55), church founders, leaders, and pastors. It is important to note that four participants were chosen from each church in all three categories. Recruitment of the participants to engage in the interviews was facilitated through social media platforms such as WhatsApp, Facebook, and Twitter, adhering to COVID-19 safety measures.

Data was collected through in-depth interviews, diligently prepared to guide key informants, including pastors, church founders, and other congregants including youth and the elderly within the church to elicit detailed responses about the impact of the COVID-19 pandemic on the church's healing mission. The interview process was conducted by the researcher and the responses were accurately captured through an audio recorder with the permission of the participants. Thematic analysis was used to analyse data to identify key themes related to the research objectives. This rigorous approach ensured a comprehensive understanding of the challenges and adaptations experienced by the church during the pandemic.

Ethical Considerations

Ethical approval for the study was granted by the Office of Research and Development (ORD) at the University of Botswana which allowed for getting a research permit from the relevant government authorities. Participants were fully informed about the study's purpose, procedures, and their rights, including the right to withdraw at any time without penalty. Considering the sensitive nature of the study involving individuals who experienced grief and loss due to the COVID-19 pandemic within the church community, special interview arrangements were made. Participants were encouraged to bring a trusted companion for emotional support, and a qualified counsellor was available for assistance if needed. Confidentiality and anonymity were assured, and all data were securely stored and only accessible to the research team. Health protocols, such as wearing face masks and maintaining social distance, were strictly followed during data collection to ensure the safety of both researchers and participants.

Research Findings of the Study

The primary objective of the study was to investigate the impact of COVID-19 on the mission of the church as a healing institution in Tonota. The data is presented with details of the dates of data collection, contact information, and the positions of the interviewees within their respective churches to enhance the credibility and trustworthiness of the information. Despite limited demographic options for the interviewees due to COVID-19 restrictions, we made deliberate efforts to gather data from diverse religious communities.

In the participant selection process for the interviews, no specific demographic criteria were applied. However, deliberate efforts were made to ensure diversity by including individuals from various religious communities. The interviews were conducted with individuals residing in different locations within the village and its surrounding areas. This approach was adopted to minimize the potential for biased information and to offer a more comprehensive understanding of the topic being investigated.

The research involved selecting interviewees from various locations within the village and its surrounding areas. This method aimed to minimize the potential for biased information and ensure a more comprehensive representation of perspectives. A total of twenty-eight (28) interviews were conducted, encompassing a diverse range of participants. The breakdown of the interviews conducted is as follows:

Eight (8) interviews from two out of the three selected Mainline churches, with four (4) interviewees randomly selected from the United Congregational Church of Southern Africa and the Anglican Church.

Eight (8) interviews from two out of the three selected Pentecostal churches, with four (4) interviewees randomly selected from Apostle Tshekiso Ministries and the Hero Healing Church Ministries.

Twelve (12) interviews from all three selected African Independent (Initiated) Churches, namely, St John Apostolic Faith Mission of Botswana, Eloi Christian Church, and Zion Christian Church, with four (4) participants randomly selected from each church.

The data was collected through in-depth interviews, which were acknowledged, signed, and dated by individual interviewees. The data presentation was done through narrative passages and verbatim quotes from the respondents.

Negative Impacts of COVID-19 in the Church

In the first phase of the interview process, the respondents from the selected churches were prompted to address the following question, “What are the negative challenges the church faced during COVID-19?” Notably, the inquiry shed light on the adverse impacts of the pandemic within the church, with specific reference to Tonota village. The first category of interviewees who responded to this question comprised of leaders from Apostle Tshekiso Ministries and Hero Healing Church Ministries.

An interviewee from the Hero Healing Church Ministries articulated that, “A lot of people left the church for fear of infection and because of the decision by the Church not to pray for sick people by laying on of hands” as imposed by COVID-19 protocols. In response to the aforementioned question, representatives from Apostle Tshekiso Ministries emphasized the scripture that encourages believers not to forsake the gathering with other believers. Corporate prayer and worship are seen as pivotal elements in the life of a believer. The onset of COVID-19 precipitated a national lockdown, resulting in a temporary closure of churches. Consequently, it posed a challenge to the churches as many members backslid and sought the world for upliftment and information. The Ministry of Health’s daily COVID-19 updates became a major source of information for the nation, instilling fear and prompting certain members to abandon their faith in Christ.

A church elder from the Saint John Apostolic Mission of Botswana observed that COVID-19 influenced people to doubt God’s existence, especially when some of their church members died from the disease, and members were limited by COVID-19 protocols to offer support during church funerals. Leaders from the Eloi Christian Church and the Zion Christian Church concurred that the closure of churches posed a challenge as it hindered fellowship amongst members thus weakening their faith. An interviewee from the United Congregational Church in Southern Africa observed that COVID-19 resulted in decreased attendance of church services. Similarly, an elder from the Anglican Church highlighted that the church suffered great oppression and opposition from security agents and thus could not freely congregate without interruption from the Police and the Directorate of Intelligence Security.

Positive Effects of Covid-19 in the Church

Despite the negative impacts of Covid-19 in the church, some religious denominations believe that COVID-19 yielded positive outcomes to the church. The Apostolic Tshekiso Ministries official observed that COVID-19 has led to a reaffirmation of the supremacy of Good over worldly systems and leaders.

Different church leaders emphasized the Bible teaching regarding the concept of not fearing the death of the flesh and to appreciate that in many instances, the Lord may allow the death of the flesh to save the soul. The leadership of Apostle Tshekiso Ministries leadership conveyed the perspective that the death of the flesh should be viewed as a gain rather than a punishment or loss. They taught that death for believers may be allowed by God to bring an end to earthly suffering and to ascend to the Mountain of the Lord, where there is everlasting peace and tranquillity. While many believers backslid during the season of COVID-19, many also came to the Lord, recognising that He is their refuge amidst adversity. The Anglican Church elder highlighted that COVID-19 fostered spiritual growth among some church members and even compelled non-believers to turn to God out of necessity imposed by the negative situation.

This sentiment was echoed by the Hero Healing Church Ministries leader, who added that the pandemic strengthened people’s faith in God and that it revived family prayer altars and rekindled their bonds. An interviewee from the United Congregational Church in Southern Africa similarly alluded that the Church generally tasted the trials experienced by the early church in the Bible, emphasizing the need for stability and

resilience amid adversity, especially to what appears to be persecution. St. John Apostolic Faith Mission in Botswana interviewee pointed out that due to COVID-19, many drew closer to God. Zion Christian Church leader highlighted the positive aspect of enhanced family unity and strengthening of family bonds due to increased time spent together during lockdown. Conversely, contrasting viewpoints were evident in that the Eloi Christian Church leader expressed a negative outlook, asserting that COVID-19 led to more harm than good.

People Mostly Affected by Covid -19 in the Church

Regarding the question of who were mostly affected by COVID-19 in the church, an elder from Hero Healing Church Ministries responded that the pastor and his assistants were mostly affected due to their dependency on the church for sustenance, and this raised challenges as the funds allocated for church expenses did not cater to their needs. Meanwhile, Apostle Tshekiso Ministries also responded that COVID-19 affected many across the board, especially the faith of newcomers in the Lord, and the little in faith who struggled to comprehend the struggles that befell them. Many joined the bandwagon of the world to accuse God of not being a loving God because they felt that He allowed the tragedies to happen. Additionally, a leader from Anglican Church alerted that the entire church community was affected by COVID-19. The United Congregational Church of Southern Africa forerunner responded that women were mostly affected due to their vulnerability to being exposed to COVID-19 in their role as primary caregivers within households.

A respondent from Zion Christian Church shed light on the distress faced by elderly people who harboured significant fear of the effects of COVID-19. An endorsed St. John Apostolic Faith Mission in Botswana member expressed concern about youth refusing to follow COVID-19 government protocols, especially during curfew time. Lastly, was an interviewee from Eloi Christian Church who highlighted the impact of COVID-19 on families of patients in the church, particularly the psychological effects as they lived in fear of losing their loved one to death, thus they experience significant trauma as a result.

Measures taken by the religious denominations to help those affected and infected by COVID-19

Responses were provided by interviewees from different churches to provide insights into the measures implemented by these religious denominations to support individuals affected and infected by COVID-19. A recognised Apostle Tshekiso Ministries leader highlighted that healing in the church extends beyond physical ailments to encompass the healing of the soul through the Gospel of salvation and counselling, which, due to COVID-19 restrictions necessitated a shift towards online ministry. This expansion of the online ministry was previously abhorred by many but has slowly been embraced even though it only benefited a few because of network issues and affordability. COVID-19 brought with it massive financial woes for individuals and nations alike. Similarly, an Anglican Church respondent added that some denominations made special arrangements for continuous access to essential activities such as feeding Save Our Souls (SOS), the elderly and other individuals with special needs. There was also an establishment of online services to reach out to the masses who were unable to attend church due to COVID-19 restriction measures. A recommended Hero Healing Church Ministries steward acknowledged efforts to visit and minister to COVID-19 patients at their homes as well as utilizing social media to preach the word of God. Correspondingly, St Apostolic Faith Mission Church in Botswana responded that prayers and encouragement were extended to affected individuals despite the restrictions by government protocols. An Eloi Christian Church interviewee stated that the restrictions limited the church's ability to fully realize its healing potential.

Furthermore, a Zion Christian Church pioneer expressed the challenges of reaching the community and its members due to COVID-19 restrictions. The church also noted that restrictions led to discrimination within the church as those who were infected developed the spirit of isolating themselves from those who were not infected with the virus, thus limiting the church's ability to fully function as a healing institution to both affected and infected individuals. A United Congregational Church of Southern Africa leader mentioned that their branch in Tonota village was unable to play a role in ministering to affected or infected patients of COVID-19 due to the restrictions imposed.

The Effectiveness of Measures Being Taken by the Church

On reflecting on the effectiveness of measures put in place by the church to reach out to the nation during COVID-19, respondents from different denominations generally concurred that the implemented measures were effective but encountered limitations due to government restrictions. A member of Anglican Church acknowledged that individuals with access to online services derived benefits from the healing ministry of the church, whereas those without appropriate gadgets or network faced challenges. Similarly, a sanctioned leader from Apostle Tshekiso Ministries emphasised that owing to the economic meltdown brought about by the pandemic, access to the online ministry was restricted to the privileged few who can afford, thus limiting its effectiveness in outreach. Hero Healing Church Ministries interviewee responded that the measures were very effective in uplifting many people's faith. In the same way, an Eloi Christian Church elder confirmed that the church's implemented measures were successful in reviving people's faith through online church services. Particularly, many young people began to know about God through social networking platforms like Facebook. An interviewee from the United Congregational Church in Southern Africa explained that the church's effectiveness was limited due to legal restrictions on its operations.

Interviewees from the Zion Christian Church and St John Apostolic Faith in Botswana emphasized the effectiveness of measures within churches as many individuals began to run to God during times of fear and the church welcomed and supported them when challenged. Through the use of social media, the church established small home cells for guidance and comfort to many, providing a source of warmth and comfort to many.

Other Possible Initiatives of Support

In examining the potential initiatives of support beyond those undertaken by the church in response to the COVID-19 pandemic, several observations were made. The United Congregational Church of Southern Africa responded by highlighting the potential of the church to increase the provision of social services, emotional support and counselling to help those affected by COVID-19, especially in the Tonota Village where home visits by pastors were restricted due to infection concerns. Correspondingly, a St John Apostolic Faith Mission in Botswana interviewee underscored the possibility of utilizing the church as a sanctuary for counselling, praying for the sick and a general place of comfort, but that was not the case. The Hero Healing Church Ministries' leader explained the necessity of the church in implementing a broadcasting program for healing and increasing the delivery of healing sermons. In a similar vein, the Eloi Christian Church frontrunner reflected that even during COVID-19, there should have been a collaboration between pastors and healthcare professionals, advocating for more in-person prayer sessions with infected individuals to address their spiritual and psychological needs. By the same token, Zion Christian Church responded that the church needed to intensify its prayers and work hand in hand with the Ministry of Health. The Anglican Church respondent suggested that church leaders should have conducted hospital and home visits for prayer and COVID-19 sensitization, utilised media platforms for intensive interdenominational prayers and dissemination of prevention measures and provided each congregation with a WIFI router to facilitate access. Lastly, Apostle Tshekiso Ministries leader commented that the church was predominantly caught napping by the advent of COVID-19 as their reaction was like that of the world. The leader stressed the importance of the church to remain vigilant and prayerful as unexpected challenges arise such as in the manner described by Jesus when he said, 'watch and pray'. The leader also highlighted the importance of learning from the pandemic and urged the church to be spiritually prepared to face future uncertainties especially as it revealed a need for the church to prioritize prayer, the spread of the gospel, and understanding the current times according to the Bible.

Data Discussion and Analysis

This section focuses on the analysis of findings regarding the impact of COVID-19 and the challenges faced by the church as a healing institution in the village of Tonota. The primary objective is to examine these findings and provide a comprehensive understanding of the relationship between COVID-19 and the church's ministry of healing. The analysis aligns with the research objectives and discusses findings within the broader context of

existing knowledge about COVID-19 and the church's role in Botswana. The thematic analysis method was adopted to qualitatively analyze interview results and respond to the research objectives.

Challenges Faced by the Church as a Healing Institution

The findings reveal that the COVID-19 pandemic imposed numerous difficulties on the church. The increase in deaths led to heightened fear among congregants, with some questioning the existence of God. The study observed that the closure of churches significantly limited the church's healing mission, making it challenging to provide physical comfort to individuals with limited faith, including new converts. While online church services were available, financial constraints and a lack of technological expertise hindered access for many of the congregants.

The findings indicated that the pandemic had a predominantly negative impact on the church, triggering a nationwide lockdown and subsequent church closures. This resulted in a sense of spiritual drought and a noticeable decline in church attendance and membership.

Implications of Church Closures

The closure of churches posed a significant challenge to their role as healing institutions during the pandemic. In Tonota, there were instances where authorities resorted to using force to prevent religious gatherings, exacerbating the impact of church closures. Consequently, government restrictions and social tensions related to religion remained stable due to the absence of church activities. The pandemic affected various religions, leading to the cancellation of worship services, Sunday schools, and other religious activities.

Adaptations such as live-streaming and interactive sessions via platforms like Zoom and WhatsApp were adopted. Zammit (2020) highlighted the swift shift from in-person to online worship, marking a significant disruption in religious practices in Botswana. Online services, however, did not fully satisfy congregants' needs for physical presence and community interaction, especially in the context of Botswana where people associate physical church attendance with being religious.

Death of Church Members – A Devastating Experience

The study highlighted the devastating impact of COVID-19 on the church and community, particularly through the loss of church members. The pandemic instilled fear, especially when ministers known for their healing abilities were affected and some died of COVID-19. This fear led some individuals to seek alternative healing sources, such as traditional healers and contributed to a decline in church attendance and membership. Wang (2022) emphasized that contrary to expectations, the pandemic led to a drastic decrease in turning to religion for answers and consolation in Tonota. This is supported by David (2023), who found that the pandemic had a long-term decline in worship attendance patterns, particularly among young, single individuals in America. Similar trends were observed in Tonota, where youth preferred online services due to lingering trauma. The Anglican Church, The Apostle Tshakiso Ministries, and Hero Healing Church Ministries believe that many people have lost trust in the church because it seemed inaccessible during their times of need. They also confirmed that it was mostly youth who preferred online church services.

The Most Affected by the COVID-19 Pandemic

The pandemic had a widespread impact on the church community in various aspects of life. Church workers faced job losses, leading to financial hardships that affected the church's obligations. The pandemic also resulted in many orphans, widowed women, and suicides within the church community. Pastoral care became more challenging due to limited face-to-face interactions and religious rituals had to be suspended to comply with COVID regulations. Worship services were moved to online platforms due to a decline in church attendance, thus reducing the sense of community and fellowship.

The findings also revealed that all church members were affected by COVID-19. Young people were particularly affected, displaying resistance to government policies and experiencing job losses and financial hardships, which subsequently destabilized church finances. David (2023) highlighted the ongoing challenges

in integrating young people facing socio-economic crisis into the church, urging deliberate actions to mitigate long-lasting impacts of the pandemic.

Measures for Healing the Affected and Infected

Despite these challenges, churches made significant efforts to contribute to national healing. They utilized online platforms for prayers, donated essential items, provided counselling services and extended required support to those mostly affected by COVID-19, particularly the less privileged. Churches collaborated with the Ministry of Health to educate the public on COVID-19 prevention measures and offered their premises as isolation facilities.

Online services, despite some drawbacks, proved beneficial during the pandemic. They allowed more people to attend church from the comfort of their homes, schools, and workplaces allowing even for those traumatized by COVID-19-related deaths to continuously engage with the church. The Anglican Church leader believed that online services helped reach those unable to attend physical gatherings due to restrictions. Additionally, Zoom church meetings benefited individuals with disabilities.

Impact of COVID-19 on the Church

The findings demonstrated both positive and negative impacts of COVID-19 on the church as a healing institution. The pandemic challenged pastors to step out of their comfort zones by moving beyond traditional preaching roles and acting as missionaries, representing Christ on earth. Despite the challenges posed by COVID-19, it allowed the church to embark on a new spiritual dimension as a healing institution. Madigele and Amanze (2022: 172-185) argued that the church, as a gathering of people rather than a physical building, could continue its mission despite closures. The present literature shows the origin of the church as a healing institution and in fact, a hospital is used as a metaphor. This view aligns with Arul (2016) who adequately discussed it and emphasized healing and wholeness as central to Christ's ministry of preaching, teaching and healing. Arul points out that Jesus preached about the Kingdom of God and also healed many people who were sick and suffering, wounded and broken-hearted.

The COVID-19 pandemic has posed significant challenges for social institutions including the church which is considered a healing institution. It imposed barriers that hindered the church's healing ministry. Fear among pastors limited physical contact with congregants, and government restrictions on funeral attendance compounded the challenges. The social stigma associated with the virus further contributed to the isolation and lack of care for sick individuals, particularly within their families and church communities. Restrictions on funeral attendance also limited the support available to grieving families, hindering the church's role in providing comfort during times of loss. In response to the closure of the physical places of worship, churches were compelled to adopt new strategies to fulfil their mission, such as digital services, which opened new avenues for worship and outreach. Due to the COVID-19 national lockdown, religious gatherings and the traditional celebrations of Easter and Pentecost had been banned and this as a result, mandated the adoption of electronic platforms for prayer, worship, and community engagement, leading to the emergence of the digital church. Despite the challenges posed by the pandemic, the electronic platforms also presented opportunities for reaching diverse audiences and impacting communities beyond the traditional scope of the church. Pillay (2020) states that electronic platforms provide the possibility of reaching the unchurched and people of other faiths, which is the primary purpose of the church, to win converts, impact communities and to equip, train and lead them into the mission field.

The literature has consistently highlighted the significance of healing in the proclamation of the Gospel throughout the history of Christianity. The COVID-19 pandemic underscored the crucial role of the church in providing healing and care to the sick, emphasizing its indispensable mission within society. This necessitated a strategic alignment of missiology and the church's mission to diligently and reverently fulfil God's plan and mission, particularly in the face of the challenges imposed by the pandemic.

CONCLUSION

The article examined the role of the church as a healing institution in the face of COVID-19, particularly in the village in the village of Tonota. The impact of COVID-19 created serious obstacles for the ministry of the church as a healing institution. While the implementation of the preventative measures by the government of Botswana through the Ministry of Health and Wellness affected everyone, it was observed that the majority of victims were from lower socio-economic groups seem to greatly benefit from the healing, counselling and comforting ministry of the church.

These findings suggest and support the necessity for the government, the church and community leaders to develop tailored solutions to address pandemic challenges at different socioeconomic levels. It is also important for the government to take into consideration the role played by religious communities in addressing the socio-economic and religious needs of people. The church, as a healing institution, should have been treated like a hospital, where people go to receive psychological, social and spiritual counselling and healing. Based on the aforementioned conclusions, the article further provides the following recommendations:

The church should be actively supported in offering a clear biblical perspective on pandemics like COVID-19 to enhance the government's understanding of such situations.

Strengthened collaboration between the church and government in preparation for future crises.

Church ministers and pastors should receive training and authorization to visit COVID-19 patients in hospitals, even during lockdowns, to provide spiritual support for those who rely on faith and hope and instil a fighting spirit among people battling with the COVID-19 infection.

Allowing the church to visit families who have lost loved ones, particularly orphans and widowed women, is crucial to providing emotional and spiritual support as well as intensive comfort during such difficult times.

The church should continue to engage in fervent prayer, propagate the gospel of salvation, and deepen its understanding of seasons and times, as prophesied in the word of God. Vigilance and a comprehensive understanding of the word of God are crucial in adapting to changing seasons and times in alignment with God's long-standing prophecies recorded in the books of John and Daniel.

Overall, the article emphasizes the importance of recognizing the church as a vital institution for providing holistic support and care, especially during times of crisis such as the COVID-19 pandemic.

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