

Law, Religion, Health and Healing in Africa



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2 “SEEKING THE FACE OF GOD IN TRYING TIMES”: LAW, RELIGION AND THE COVID-19 CRISIS IN SECULAR GHANA

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INTRODUCTION

Prior to March 2020, a pertinent topic at the nexus of religion, law and politics in the Ghanaian public arena was the dispute over the ruling government’s decision to construct a Ghana National Cathedral.² This controversial project was in fulfilment of President Nana Addo Dankwa Akufo-Addo’s promise as part of his supplication to God to win the 2016 presidential election.³ The political decision to construct a national house of prayer attracted critical public debate and ultimately ended up in the Supreme Court for determination on its suitability and constitutionality.⁴ The emergence of the novel coronavirus SARS-CoV-2, which causes the disease Covid-19, however, imposed itself upon the life and faith of Ghanaians, changing the public narrative on the intricate relationship between religion, law and politics in Ghana. Indeed, the deadly virus is believed to have altered the course of nations and the world at large.⁵ On 30 January 2020, during a press briefing, the World Health Organization (WHO) declared the coronavirus outbreak a public health emergency of international concern.⁶ According to the WHO, further international spread of cases across the globe was expected. The WHO therefore urged all countries to put preparedness plan in place for containment, including active surveillance, early detection, isolation, case management, contact tracing and prevention of onward spread of the disease.

Like most of Africa and elsewhere, Ghana was unprepared for the coronavirus when it recorded its first two cases on 12 March 2020. The government was confronted with the challenge of protecting its citizens in an emergency situation, while at the

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 - 2 Tweneboah S. 2019. “Religion, Law, and the Politics of Building a National Cathedral in ‘Secular’ Ghana”, *Issues in Conflict, Human Rights and Peace* 1(1):19-34.
 - 3 “I Promised God a National Cathedral; I’m Redeeming My Pledge – Akufo-Addo”, *GhanaWeb*, 29 December 2018.
 - 4 *James Kwabena Bomfeh Jnr vrs Attorney General* (J1 14 of 2017) [2019] GHASC 2 (23 January 2019).
 - 5 Flood CM et al. 2020. “Introduction: Overview of Covid-19: Old and New Vulnerabilities”, in Flood CM et al (eds). *Vulnerable: The Law, Policy and Ethics of Covid-19*. Ottawa: University of Ottawa Press, 1-27.
 - 6 World Health Organization (WHO). 2020. “Covid-19 Public Health Emergency of International Concern (PHEIC) Global research and innovation forum Towards a research roadmap”, *WHO.int*, 12 February.

same time making sure it did not unreasonably infringe on their rights, including the rights to corporate worship, freedom of movement and public gathering. To achieve effective public health goals, however, a number of pandemic-related measures were put in place. Notable among these were quarantine of victims and mandatory lockdown for all citizens. By 15 March 2020, Ghana had recorded six cases.⁷ That night, President Akufo-Addo, in his second nationwide address on measures taken by the government to combat the coronavirus, outlined a series of pandemic-related restrictions to be implemented, including the suspension of all public gatherings, including conferences, workshops, funerals, festivals, political rallies, sporting events and religious activities, such as services in churches and mosques.⁸ Universities and schools were also closed a day after the president's announcement. The country's borders were also shut until 27 March 2022.⁹ On 30 March 2020, President Akufo-Addo issued an executive instrument, the Imposition of Restrictions (Coronavirus Disease (Covid-19) Pandemic) (No. 2) Instrument, 2020, thereby ordering the total lockdown of some major cities of the country as a measure to contain the spread of the coronavirus. These measures, to be sure, were some of the many collective mechanisms to contain this public health menace. A section of the population found wisdom in the Covid-19 safety protocols and relief programme, hailing it as the surest way to curb the menace.¹⁰ Yet these barely achieved the intended effect. For one reason, the majority of the population found these measures to be unbearable, since their livelihood depended on freedom of movement on a daily basis in search of their daily bread. Others, however, were unwilling to abide by them. As a result, the state deployed its coercive powers, using both the police and the military to seek compliance.¹¹

In its 27 March 2020 edition, the editorial of the major national newspaper, the *Daily Graphic*, was titled "Seeking the Face of God in Trying Times".¹² This editorial echoed the president's earlier call on Ghanaians to seek divine intervention in mitigating the effects of the global pandemic. In the context of Covid-19 in Ghana, religious leaders, beliefs and ritual practices have played a decisive role, necessitating a proper interrogation.

- 7 "Coronavirus: Ghana confirm four new cases of Covid-19, total cases rise catch six", *BBC*, 15 March 2020.
- 8 Ghana Ministry of Health (MoH). 2020 "President Akufo-Addo Addresses Nation On Measures Taken By Gov't To Combat The Coronavirus Pandemic", *MoH.gov.gh*, 15 March.
- 9 Mensah K. 2022. "Ghana Reopens Borders to Bolster Economy", *VOA News*, 28 March. For details of the president's speech, see, for example, Akufo-Addo NAD. 2020. "Address to the Nation by President of the Republic, Nana Addo Dankwa Akufo-Addo, on Updates to Ghana's Enhanced Response to the Coronavirus Pandemic", German Embassy of Accra, 27 March.
- 10 "Traders in Cape Coast Hail Directive on Enforcement of Covid-19 Protocols", *Ghana News Agency (GNA)*, 18 January 2021.
- 11 "Military descends on man for flouting lockdown directive", *GhanaWeb*, 30 March 2020; "Coronavirus lockdown: Woman cries after police officer hits her with a stick at CMB", *GhanaWeb*, 31 March 2020.
- 12 "Seeking the face of God in trying times", *Daily Graphic*, 27 March 2020.

In this chapter, I examine the coronavirus pandemic as an arena of religious and legal entanglement. In spite of the constitutional insistence on the separation of law and religion, I contend, religion played a dual role as both a limiter and promoter of public health and safety. I present the state's deployment of law and the activities and operations of religious actors of society as a cardinal mode of managing the coronavirus crisis in Ghana. In doing so, I demonstrate the ambivalent nature of Ghanaian secularism, paying attention to the role of law and religion in sustaining public health and safety in Ghana. The chapter demonstrates the extent to which religious resources have forged a significant constellation of the management of the pandemic in Ghana.

RELIGION, LAW AND HEALTH CARE IN GHANA

Contemporary Ghana offers an interesting account of a state that is secular by edict but a profoundly religious society in fact.¹³ Its Constitution of Ghana 1992, which derives its authority from the sovereign will of the people, is held to be the supreme law of the land and any other law found to be inconsistent with any provision of it is void to the extent of the inconsistency. The Constitution does not give primacy to any particular religion. Even so, owing to its highly religious population, religion occupies a special place in private and public life in contemporary Ghana. In spite of the constitutional insistence of its secularity, in Ghana, as in most of Africa, a remarkable interrelationship exists between the religious, political and legal realms. Thus, the Supreme Court of Ghana affirmed the ambivalence of this interrelation in *Bomfeh vs Attorney General*, when it held that the Constitution of Ghana 1992, "while secular in nature, affirms and maintains the historical, cultural, and religious or atheist character of Ghanaian society" and argued that "secularism in the context of the Ghana Constitution must be understood to allow, and even encourage State recognition and accommodation of religion and religious identity".¹⁴

The Ghanaian Constitution gives the population a wide range of rights of universal significance. Eminently, the right to freely practice one's faith is a protected category. As a deeply religious society, matters of physical health, spiritual wholeness and healing are equally of prime concern. Given its decisive role in the political and legal maturation of society, Ghana's health care delivery is regulated by a number of constitutional, legal, policy and human rights frameworks. While the Constitution of 1992 does not expressly mention health or health care, the right to health care is guaranteed in Ghana. In truth, the state's responsibility for the health of its citizens is based on affirmative responsibility, and this is regulated by a number of legal enactments.¹⁵ Prominent among these are the Public Health Act, 2012 (Act 851), the

13 Tweneboah S. 2020. *Religion, Law, Politics and the State in Africa: Applying Legal Pluralism in Ghana*. Abingdon and New York: Routledge.

14 *James Kwabena Bomfeh Jnr vrs Attorney General* (J1 14 of 2017) [2019] GHASC 2 (23 January 2019), 18.

15 Atuguba RA. 2013. "The right to health in Ghana: Healthcare, human rights, and politics", in Zuniga JM, Marks SP and Gostin LO (eds). *Advancing the Human Rights to Health*.

Ghana Health Service and Teaching Hospitals Act, 1996 (Act 525), the Pharmacy Act, 1994 (Act 489), and the National Health Insurance Act, 2012 (Act 852). There is also the Health Institutions and Facilities Act, 2011 (Act 829), which aims to ensure the licensing and regulation of facilities. This Act also sets up the Health Facilities Regulatory Agency to supervise the activities and functioning of public and private institutions and monitor the quality of service rendered by them.

Policy interventions in the health sector via the expansion of health infrastructure, introduction of health insurance schemes, provision of free maternal health care services and other measures have been remarkable means of achieving national health goals and objectives in Ghana. Outstanding policy frameworks include the Private Health Sector Development Policy (2003), which has a fourfold objective of improving the investment climate for private health sector growth, supporting the transformation of the private health businesses to meet industry expectations, building the capacity of private health care providers and increasing opportunity for the poor to access private health care services. There is also the National Health Policy (2007) and the Health Sector Medium Term Development Plan (2010-2013), reflecting the health development agenda for the medium term, and the National Environmental Sanitation Policy (2010), which seeks to give priority to increased access to enough sanitation facilities, among others. Within the human rights framework, as noted above, Chapter Five of the Constitution of 1992 provides for a range of fundamental human rights and freedoms. In particular, Article 21 of the Constitution provides for the right to freedom of speech and expression and to freedom of thought, conscience and belief, as well as the freedom to practise any religion and to manifest such practice and the freedoms of assembly, association, information, movement, among others. In the event of an imminent emergency, however, as we shall see later, the state as a duty-bearer (an entity with the obligations or duties to uphold rights) reserves the right to temporarily curtail the enjoyment of this right.¹⁶

Health care is, therefore, a key political issue in Ghana. As a matter of fact, health-related issues, particularly the sustainability of the National Health Insurance Scheme, have been high on the political electioneering campaign agenda.¹⁷ In the last two decades, Ghana has demonstrated its commitment to the betterment of its health care delivery. Evidence of this is seen not only in the construction of health facilities, but also through increased public spending on health care.¹⁸

Oxford: Oxford University Press, 101-112.

- 16 Article 21(4) of the Constitution of Ghana provides for conditions under which the rights of citizens can be restricted including "in the interest of defence, public safety, public health or the running of essential services, on the movement or residence within Ghana of any person or persons generally". See also Section 4(1) of the Public Order Act, 1994 (Act 491).
- 17 Mubarik A. 2016. "NHIS has collapsed under Mahama-Akufo-Addo", *Pulse*, 4 September; "Stop registering your supporters on NHIS if it's collapsed – Mahama tells NPP", *GhanaWeb*, 26 October 2016.
- 18 Adua E, Frimpong K, Li X and Wang W. 2017. "Emerging issues in public health: a perspective on Ghana's healthcare expenditure, policies and outcomes", *The EPMA*

Despite the state's effort, crucial challenges continue to persist. These challenges are largely a problem of financing, access and the quality of health care services, which give rise to the existence of substantial equity gaps when it comes to access to the provision of health care.¹⁹ Inadequate medical officers, a high patient-doctor ratio and inadequate health facilities are also part of the challenges in the health sector, and funding inadequacies in health services remain a foremost challenge to health care delivery. Some studies have tried to privilege Ghana's performance in terms of its commitment to health delivery as against neighbouring countries.²⁰ The introduction of the NHIS in 2003-2004 has been found to have resulted in "high general healthcare spending and a reduced share of private and out-of-pocket spending, known as the cash-and-carry system".²¹ Among other goals, the NHIS aims to provide equity in health care coverage and promote access by the poor and vulnerable against financial risk. The proportion of the population who have access to quality health care has, therefore, improved comparatively. The 2021 census results, for example, show that 68.6% of the citizenry is covered by either the NHIS or private health care schemes. Despite these frameworks, crucial gaps continue to exist when it comes to the demand for health and the state ability to supply.

In the face of the many philosophical and conceptual challenges in the health sector, most people depend on religiosity for their daily health care needs. It is imperative that Ghana operates a pluralistic health sector, recognising allopathic, traditional and alternative providers, both private and public. Despite the claims of secularity, there is a vital link between religiosity and health-seeking belief outcomes in Ghana.²² For years, most Ghanaians have relied on traditional health care delivery systems. At the state level, attempts to promote traditional medicine practices as alternative medicine are gaining prominence. Efforts to train personnel at the Kwame Nkrumah University of Science and Technology, leading to the setting up of numerous herbal outfits especially in the cities, provide a tangible fledgling alternative to orthodox medicine. Even so, the orthodox medical system has been largely privileged and encouraged by the government and the elite. As the sociologist Robert W. Wyllie has noted, the relative lack of attention to indigenous etiological theory of healing appears to emanate largely from the supposition that, "while the healers may well possess a stock of potentially useful herbal cures, their explanations of illness are hopelessly embedded in a magic-religious theory of causation which is not amenable to testing in laboratory or clinic".²³ Besides this, the continuing Pentecostal-charismatic Christian propensity to demonise the

Journal 8(3):197-206.

19 Atuguba, "The right to health in Ghana", 103; Adua et al, "Emerging issues in public health", 197.

20 Atuguba, "The right to health in Ghana", 198.

21 Atuguba, "The right to health in Ghana", 198.

22 Okyerefo MPK and Fiave DY. 2017. "Prayer and health-seeking beliefs in Ghana: understanding the 'religious space' of the urban forest", *Health Sociology Review* 26(3):308-320.

23 Wyllie RW. 1983. "Ghanaian Spiritual and Traditional Healers' Explanations of Illness: A Preliminary Survey", *Journal of Religion in Africa* 14(1):46-57.

indigenous religious fields as channels of demonic influences has cast traditional medical systems in a bad light.²⁴ In spite of this, since independence, the state has harnessed the noteworthy contribution of traditional religious medicine and its practitioners. The state has also forged a closer partnership with imported religious institutions, especially Christian and Muslim ones, in order to provide quality and accessible health care outcomes.

RELIGION AND PUBLIC HEALTH

In the public health history of Ghana, religion and politics play a major role in the healing processes of the people. In particular, the pandemic periods of the 1920s and the 1930s, which were followed by the economic recession, spurred meaningful religious interventions of interest. These periods also politicised public health care in ways that have continued to play out in recent times. This was a period when the colonial state in the Gold Coast (independent Ghana) experienced major health care challenges, such as the cerebrospinal meningitis, influenza, trypanosomiasis and onchocerciasis.²⁵ Funding inadequacies and resource constraints owing to the Great Depression, as well as certain colonial decisions, rendered many health facilities ineffective.

Despite these challenges, the positive health care outcomes of religious institutions, especially those of the missionaries, have been well documented. The historian Sean Hawkins explains that these major illnesses were treated almost exclusively as issues of public health in the Northern Territories, which were isolated from colonial policies.²⁶ That is to say, they were handled in terms of “the economic health and social stability of the Northern Territories”. In this sense, colonial interventionist policies were geared toward the colonialists’ economic interest, as the colonialists sought to limit the spread of outbreak of infectious diseases by isolating the sick. Hawkins writes: “Little or no effect was made to protect the Northern Territories from the pandemic even though their cattle which were the main economic mainstay were inoculated.”²⁷

It is within this context that the role of the missionaries can be interrogated. The success story of the missionaries during pandemic periods largely depended on their ability to recognise the convergence of spiritual and physical well-being as

24 For a discussion on the demonisation of the indigenous religious spaces, see, for example, Hackett RIJ. 2003. “Discourse of Demonization in Africa and Beyond”, *Diogenes* 50(3):61-75. See also Meyer B. 1998. “‘Make a Complete Break with the Past’: Memory and Post-Colonial Modernity in Ghanaian Pentecostalist Discourse”, *Journal of Religion in Africa* 28(3):316-348.

25 Patterson KD. 1983. “The Influenza Epidemic of 1918-19 in the Gold Coast”, *The Journal of African History* 24(4):485-502.

26 Hawkins S. 2014. *Writing and Colonialism in Northern Ghana*. Toronto: University of Toronto Press.

27 Hawkins, *Writing and Colonialism*, 199. See also Kimble D. 1963. *A Political History of Ghana, 1850-1928*. Oxford: The Clarendon Press, 533-536.

a coherent whole. As Remigius F. McCoy, a premier missionary to northwestern Ghana, has recounted: "The daily routine of the clinic would begin with a prayer aimed at reminding our patients that the curative powers of medicines and the care dispensed was a result of God's great love for them and his children."²⁸

Post-independence health care delivery continues to follow the pattern of religionisation and politicisation, details of which I provide in the ensuing sections. It is not uncommon to find health professionals engaging in morning devotions, seeking divine mercy and interventions as they start their day.²⁹ Religious organisations have complemented and even rivaled governments efforts of health care delivery in some parts of Ghana. The existence of prayer and healing centres across the country also exemplifies the extent to which religion is interspersed with issues of health care delivery. Over the years, the operations and activities of prophetic healers and healing centres have raised compelling human rights concerns.³⁰ Yet their services continue to be patronised by a section of the population exemplifying the intricate relationship between religion, healing and health. It is within this context that the coronavirus crisis must be examined.

CORONAVIRUS AND THE LAW: ACT 1012 AND MORE

In a 15 March 2020 national address on measures taken by Ghana's government to combat the coronavirus pandemic, President Akufo-Addo hinted that he had directed the attorney general to introduce "emergency legislation" to mitigate the spread of the coronavirus, relevant portion of which I cite below.

I have directed the Attorney General to submit, immediately, to Parliament emergency legislation, in accordance with Article 21 (4) (c) & (d) of the Constitution of the Republic, to embody these measures, and I have further directed the Minister for Health to exercise his powers, under section 169 of the Public Health Act, 2012 (Act 851), by the immediate issuance of an Executive Instrument, to govern the relevant measures. I call upon Parliament to support the Executive in this national endeavour.³¹

The result of this directive was the enactment of the Imposition of Restrictions Act, 2020 (Act 1012) by Parliament within five days. The president assented to the bill, and the day after, the Act 1012 was published in the gazette and entered into force. Act 1012, thus, became the government of Ghana's main legal instrument in the fight against the coronavirus pandemic. It provides for powers to impose

²⁸ McCoy RF. 1988. *Great Things Happen: A Personal Memoir of the First Christian Missionary among the Dagaabas and Sissalas of Northwest Ghana*. Montreal: Society of the Missionaries of Africa, 58.

²⁹ Adugbire BA and Aziato L. 2020. "Surgical Patients' Perception of Spirituality on the Outcome of Surgery in Northern Ghana", *Journal of Holistic Nursing* (1):19-29.

³⁰ Tweneboah S. 2015. "Pentecostalism, Witchdemonic Accusations, and Symbolic Violence in Ghana: Some Human Rights Concerns", *Pneuma* 37(3):375-393.

³¹ The Presidency, Republic of Ghana. 2020. "President Akufo-Addo Addresses Nation on Measures Taken by Gov't to Combat the Coronavirus Pandemic", 15 March.

restrictions on persons, to give effect to paragraphs (c), (d) and (e) of clause (4) of Article 21 of the Constitution of Ghana 1992 in the event or imminence of an emergency, disaster or similar circumstance to ensure public safety, public health and protection. Crucially, it recommends sanctions for violating any provisions therein. Section 6 especially recommends that: “A person who fails to comply with a restriction imposed under the Executive Instrument issued under subsection (1) of section 2 commits an offence and is liable on summary conviction to a fine of not less than one thousand penalty units and not more than five thousand penalty units or to a term of imprisonment of not less than four years and not more than ten years or to both.”

Act 1012 received mixed reactions from Ghanaians. Some commended the president for being proactive, hailing him for taking bold steps to control the situation.³² For example, to help further alleviate the implications of the lockdown, the government introduced a number of interventions including free water and electricity programmes.³³ Under the Coronavirus Alleviation Programme (CAP), the government also provided cash donations to specific beneficiaries and also collaborated with some faith-based organisations to distribute food items to poorest and vulnerable families and households affected by the lockdown.³⁴ Even so, there were also severe criticisms from the population, particularly from minority Members of Parliament, legal experts and interested Ghanaians, regarding its procedures, nature, form and content.³⁵ These criticisms, to be sure, were a combination of facts, emotion and political calculation. Procedurally, Act 1012 has been accused of being a product of rushed procedure, raising issues over its constitutionality and expressly regarding “the procedural propriety of using a voice vote in Parliament”.³⁶ Principally, the minority in Parliament challenged the legal reasoning of using a voice count to decide on a crucial bill of that nature and indicated their resolve to file an action in the Supreme Court to seek an interpretation of Article 104 of the Constitution which specifies the conduct of votes in the Parliament.³⁷

Experts have also suggested that Act 1012 was not necessary, since there were already specific national and international laws that limited governments potential excesses

32 “Pentecostal and Charismatic Council Commends Directive to Ban Church Activities over Coronavirus”, *Sendwestafrica.org*, 3 April; “Traders in Cape Coast hail directive on enforcement of Covid-19 protocols”, *Ghana News Agency (GNA)*, 18 January 2021.

33 Asare K and Donkor J. 2020. “Ghanaians to Enjoy Free Water, Electricity for 3 More Months”, *The Ghanaian Times*, 24 July.

34 Lartey NI. 2020. “Covid-19 Lockdown: Government Announces Free Food for over 400 000 Ghanaians”, *Citi Newsroom*, 6 April.

35 Addadzi-Koom ME. 2022. “Quasi-state of emergency: assessing the constitutionality of Ghana’s legislative response to Covid-19”, *The Theory and Practice of Legislation* 8(3):311-327.

36 Addadzi-Koom, “Quasi-state of emergency”, 313.

37 Mordy JT. 2020. “Minority Signals Supreme Court action after rushed Restriction Bill Approval”, *MyJoyonline*, 20 March.

and violations of human rights.³⁸ The minority in Parliament saw Act 1012 as out of touch with the realities that the coronavirus crisis presented. They contended that the specific concerns about Covid-19 could have been dealt with using the Constitution and Public Health Act, 1994 (Act 851), which makes provisions for quarantine and restriction of movement. Besides, they described Act 1012 as too broad in scope. While it sought to specifically address the coronavirus crisis, according to the minority, there was no mention of coronavirus.³⁹ For other critics, the Act hardly did justice to ordinary Ghanaians, whose plights had already been exacerbated by the pandemic. Because many people's sustenance depended on daily hustles, the lockdown was seen as a limitation to their livelihood. Some, therefore, described it as draconian and a recipe for other abuses.⁴⁰ The punishment for violating this law was, moreover, deemed by some as unduly harsh. Given the social and economic situation of the majority of the people, the measures put in place by the state to achieve public health goals were seen as draconian to some citizens. As a result, such people largely came into conflict with law enforcement agencies, particularly the police and the military. There were reports of these security agencies exceeding their mandate and abusing the rights of innocent citizens.⁴¹

Some critics also complained that Act 1012 did not have any expiry date on when its provisions would be lifted. Besides, the Act was seen as too general and also as giving the president broad powers to restrict constitutionally guaranteed rights without recourse to parliamentary oversight. Specifically, while Section 7 provides for a definition of "disaster", as noted, the Act did not, in any way, mention Covid-19 as its reference point. This suggests that any president could invoke this under different situations. Furthermore, the critics argued, Ghana already has laws that can be used to address the issue at hand. For example, the Emergency Powers Act, 1994 (Act 472), provides for the declaration of emergency under certain circumstances. Section 5(2)(b) of this Act provides that in periods of an emergency affecting the whole or a part of the country, the president may order the: (1) detention of persons or the restriction of movement of persons, (2) deportation and expulsion from the Republic of a person who is not a citizen, (3) taking possession or control of a property on behalf of the Republic, (4) acquisition of property, (5) searching of premises without a warrant, (6) payment of compensation to a person affected by an action taken under the emergency, (7) arrest, trial and punishment of a person for breach of an instrument, order or a declaration related to the state of emergency and (8) suspension of the operation of law. Similarly, the Constitution of 1992 also makes provisions for emergencies, including public health

38 See, for example, Appiagyei-Atua K. 2020. "Emergency without a State of Emergency: Effect of Imposition of Restrictions Act, 2020 on rights of Ghanaians", *MyJoyOnline*, 2 April.

39 Gakpo JO. 2020. "Imposition of Restriction Bill 2020 worse than State of Emergency – Muntaka", *MyJoyOnline*, 19 March.

40 Gakpo JO. 2020. "Imposition of Restriction Bill 2020".

41 "Military descends on man for flouting lockdown directive", *GhanaWeb*, 30 March 2020; "Woman cries after police officer hits her with a stick", *GhanaWeb*, 31 March 2020.

emergencies. In view of these provisions, some have interpreted the attempt to enact a new law to invoke a quarantine or isolation order as a trump card to justify restricting people's movement.⁴²

Another significant legal instrument related to the Covid-19 pandemic is the introduction of the Electronic Communications System Instrument, 2020 (EI 63). EI 63 sought to establish an emergency communications system with the distinct aim of contact-tracing all persons who may be potentially infected through contact with an infected person. This instrument has equally been criticised as a trump card for possible mass surveillance by the ruling government. There are, of course, considerable challenges associated with the implementation and enforcement of this instrument. EI 63 precisely breaches Article 18(2) of the Constitution. That article provides that no person shall be subjected to intrusion with the privacy of their home, property, correspondence or communication except in accordance with law and as may be necessary in a free and democratic society for public safety or the economic well-being of the country, for the protection of health or morals, for the prevention of disorder or crime or for the protection of the rights or freedoms of others. Cognisance of the fact that the courts have previously ruled against violation of privacy of communication in Ghana, some have described the EI 63 as "a step backward" as far as the right to privacy in Ghana is concerned.⁴³

Like Act 1012, the legal validity of EI 63 has, thus, been effectively questioned. It has been criticised as having no basis in law. Some have dubbed it as *ultra vires*, an illegality.⁴⁴ In the view of critics, the EI 63 was framed on legally non-existent grounds. It is argued that the Act's attempt to impose order in society did not satisfy the exception contemplated under Article 21(4). It was seen as an attempt to compromise the privacy of the citizenry.

LAW AND RELIGIOUS AMBIVALENCE: "SEEKING THE FACE OF GOD IN TRYING TIMES"

Recent analysis of the coronavirus crisis has shown the relationship between the pandemic and conspiracy thinking. Indeed, a cardinal outcome of the pandemic has been the rise of various types of conspiracy beliefs.⁴⁵ In a pervasively religious society, the pandemic pandered to a series of coronavirus conspiracy beliefs and reliance on religiosity. On 19 March 2020, President Akufo-Addo convened a breakfast prayer session at the seat of government with representatives of the

42 Appiagyei-Atua, "Emergency without a State of Emergency".

43 Appiagyei-Atua, "Emergency without a State of Emergency".

44 Asare J. 2020. "Establishment of Emergency Communications Instrument, 2020 (E.I. 63); A Dangerous Illegality", *Ghana Law Hub*, 26 May.

45 Stephens M. 2020. "A geospatial infodemic: Mapping Twitter conspiracy theories of Covid-19", *Dialogues in Human Geography* 10(2):276-281; Łowicki P et al. 2022. "Does religion predict coronavirus conspiracy beliefs? Centrality of religiosity, religious fundamentalism, and Covid-19 conspiracy beliefs", *Personality and Individual Differences* 187:1-9.

major Christian groups in Ghana.⁴⁶ The goal of this meeting was to implore divine mercy and intervention in the face of the spread of the coronavirus pandemic. The president explained that the call for prayer for the nation was motivated by his strong conviction in divine healing power and the saving grace of the maker of heaven and earth. Furthermore, the president's address relied on biblical passages to paint a picture of profound hope owing to the faith the Ghanaian people have in the Almighty, that the country will be better able to mitigate the pandemic for, as he said, "this too will pass."⁴⁷ This meeting was followed by another one hosted for Muslim clerics led by the Vice President, Mahamudu Bawumia, who is himself a Muslim. A national day of fasting and prayer was also set for 25 March 2020 to seek divine intervention against the coronavirus pandemic.

On 22 March 2020, President Akufo-Addo, as part of his usual update on the coronavirus pandemic, declared 25 March 2020 as a national day of fasting and prayer to God to protect the nation and save it from the coronavirus crisis.⁴⁸ This was followed by another national prayer on 27 March 2020 organised by Muslims and attended by the vice president. The president reiterated the popular Ghanaian belief in the links between the spiritual and physical dimensions of healing. He entreated all Ghanaians to pray "to God to protect our nation and save us from this pandemic".⁴⁹ This episode reaffirms the general notion that healing and health are interspersed with divine intervention – *Onyame ne oyaresafoɔ* (God is the healer).

On 27 March 2020, the *Daily Graphic* in its editorial, "Seeking the Face of God in Trying Times", implored Ghanaians to turn to God's mercy and intervention to avert the dangers of the pandemic. The editorial reminded readers of the president's earlier call on 22 March 2020, and it indicated the newspaper's deep support for this call. Given the crucial role that belief in prayer plays in health and healing, the editorial called on the need to hold national prayer days biannually instead of it being a once-off event.⁵⁰ Framing the virus as divine design presupposes that divine surgery must to be applied. Thus, the editorial reminded Ghanaians that the antidote to the disease was a complete knowledge of the wisdom of God. Citing the biblical passage of Joel 2:12, it beseeched Ghanaians to return to God with all their heart, with fasting and weeping and mourning. Again, it referred to Proverbs 1:7 to remind Ghanaians that "the fear of the Lord is the beginning of knowledge, but fools despise wisdom and instruction." What this means is that the coronavirus crisis was seen as a divine design and a consequence of human evil deeds. The crisis was, hence, interpreted as an inescapable divine sanction. The editorial, therefore,

46 Dapatem DA and Nunoo C. 2020. "These aren't normal times: Seek God's face for restoration – President tells Christians over Covid-19", *Daily Graphic*, 20 March.

47 Dapatem and Nunoo, "These aren't normal times".

48 Yeboah I. 2020. "Coronavirus: Ghana to observe national day of fasting and prayer", *Daily Graphic*, 22 March.

49 Dapatem and Nunoo, "These aren't normal times".

50 "Seeking the face of God in trying times", *Daily Graphic*, 27 March 2020.

threw its decisive support behind the idea that the disease was a symptom of people's sinful ways.

Like the old Israel, Ghana has variously been labelled as God's favourite society.⁵¹ Yet as the society flourishes, complacency and false security continue to set in, leading to trust in institutions instead of divine will. This leads to evil deeds, abomination, dishonesty, social injustice, and other ills becoming rife in society. In this sense, the virus was deemed to be unmistakable evidence of the evils of a once blessed society that has been estranged from God. In such a trying epoch of national and global history, the answer to the divine epidemiology lies not primarily in strengthening the political and economic base, but rather in returning to God and seeking his face. The pandemic, then, was seen as an opportunity given to mankind for the reformation and reorientation of their lives and relationships with one another. As the editorial noted, "we should be honest, forgiving and show love, care and compassion for one another. As a nation, it seems we have all sinned and come short of the glory of God. The church and the Mosque, as a body, cannot escape blame in this whole enterprise of abomination. It is time to do away with injustice."⁵²

Significantly, however, the outbreak of the pandemic also led to public discourse on the role of religion, especially Pentecostal-charismatic Christianity in the Ghanaian public arena. It is important to remember that over the years, pastor-prophets have been particularly active in the public domain and the actions and forms in which their activities and operations take have become a matter of concern. Prophetic healers are prominent in Ghana's public arena, owing to their claims to protect people from contracting certain diseases and their claims of power to heal those who already have specified diseases. This, indeed, is a key reason for the attraction of prayer and healing centres, despite reports of grave human rights concerns.⁵³ Over the years, it has been a tradition for prophetic actors to predict impending catastrophes of the year, especially during their New Year Eve's watchnight service. In this sense, for pastor-prophets to miss this global pandemic was quite ironic to some observers. The emergence of the virus, therefore, renewed the public anxiety over the supposed relevance of prophetic men and women of God. Many ridiculed them for their inability to predict the disease. Others also accused them of falling short of healing victims of the virus or offering protection. For example, as J. Kwabena Asamoah-Gyadu, a Ghanaian scholar of African Pentecostalism, has noted regarding the coronavirus pandemic, "The fact that most of the personalities

51 Asamoah-Gyadu JK. 2013. "'God Bless our Homeland Ghana': Religion and Politics in a Post-Colonial African State", in Omenyo CN and Anum EB (eds). *Trajectories of Religion in Africa Essays in Honour of John S. Pobee*. Leiden: Brill, 163-185.

52 "Seeking the face of God in trying times".

53 Human Rights Watch. 2012. "'Like a Death Sentence': Abuses against Persons with Mental Disabilities in Ghana", *Human Rights Watch*, October.

to face misfortune tend to be high profile public figures has led to suspicion that these so-called prophetic utterances are nothing but prophetic blackmailing for material gain."⁵⁴

RELIGIOUS ACTORS AND THE FIGHT AGAINST CORONAVIRUS

In his 15 March 2020 nationwide address, President Akufo-Addo directed the suspension of public gatherings, including gatherings for religious purposes. He further declared that establishments, such as supermarkets, shopping malls, restaurants, night clubs, hotels and drinking spots, should observe enhanced hygiene procedures by providing, among other things, hand sanitisers, running water and soap for washing of hands.⁵⁵ This directive initially did not go well with many Ghanaians, especially those in the charismatic churches.⁵⁶

A key legal function of religious institutions that is largely ignored in the religion-state discussion is that they are useful in explaining vital state decisions to members and advising congregants to adhere to the coronavirus pandemic safety protocols. To demonstrate their commitment, religious institutions all over the country, apart from isolated incidents, complied with the ban on public gatherings. Most religious organisations resorted to livestreaming, radio and television services to reach out to their members. Through the use of social media, religious groups supported the government's safety measures and urged their congregation to strictly adhere to the president's directive and other public health regulations. Most religious groups enacted a "No mask, No entry" policy. These measures, to be sure, went a long way towards limiting the spread of the virus emanating from close contact infection. The office of the National Chief Imam supported the president's directive and further urged Muslims to use two days to pray and fast for the nation.

In fact, when on 31 May 2020 the ban limiting public gathering to twenty-five people was lifted, to demonstrate its full effort to contain the spread of the virus, some religious organisations decided not to congregate for religious services and continued to monitor the situation.⁵⁷ The Christian Council of Ghana, for example, admonished its congregants to exercise restraint in the reopening of churches, as they needed time for proper preparation and strategising. It stressed on the need to plan, train and educate members before opening the churches for services.

To alleviate the situation, in April 2020, the government passed the Covid-19 National Trust Fund Act, 2020 (Act 1013) to establish a coronavirus fund. The aim of this

54 Asamoah-Gyadu JK. 2020. "Dealing with a spiritual virus: whither the prophet?", *Religious Matters*, 13 April.

55 The Presidency, "President Akufo-Addo Addresses Nation".

56 "Coronavirus: Pastor Arrested for Contravening Ban on Social Gatherings", *Daily Graphic*, 18 March 2020; Donkor KD. 2020. "Coronavirus: Pastor Arrested Again for Flouting Ban on Social Gatherings", *Daily Graphic*, 22 March.

57 Kuatsinu JE. 2020. "Easing of restrictions on religious activities: Churches reluctant to congregate for worship", *Ghanaian Times*, 4 June.

trust fund was to marshal the necessary funds to complement the government's efforts to address the coronavirus crisis in Ghana. Religious organisations, as part of their commitment towards addressing the pandemic, contributed towards this fund. For example, the Ghana Catholic Bishops' Conference donated an amount of GH¢700 000 (about USD12 200) into the fund.⁵⁸ Similar cash and other donations were made by other religious organisations. In his mid-year budget review presented to parliament on 23 July 2020, the finance minister noted the contribution of religious organisations in Ghana thus:

Mr. Speaker, the Church of Pentecost, as a humanitarian gesture, and in keeping with recent social partnership arrangements, offered the Pentecost Convention Centre at Gomoa Fetteh as an isolation centre for infected persons. Similarly, the Catholic Church released a host of its facilities located across the country to house and treat infected persons. The 140-bed capacity Ghanaman Soccer Centre in Prampram, owned by the Ghana Football Association, also served as an isolation centre. The work of the traditional churches, Charismatic, Pentecostal churches and our Islamic leaders continue to uphold our people.⁵⁹

The above statement, to be sure, exemplifies the contribution of religious organisations and how they impact policy and decision-making in society.

As previously mentioned, Ghana's initial level of preparedness towards the coronavirus crisis was weak. A key accusation against the government was that frontline healthcare workers lacked priority medical devices and other pandemic medical supplies. For example, doctors at the Department of Accident and Emergency Unit of the Korle Bu Teaching Hospital on 2 April 2020 expressed their dissatisfaction and threatened to go on strike over poor level of readiness to combat the coronavirus pandemic.⁶⁰ In a memo to the Head of Department of the Unit, the aggrieved doctors lamented that management has "woefully failed" to provide the necessary protection they required to work including the provision of protective personal equipment.

To ameliorate the situation, religious institutions assisted the government by leveraging their resources. For instance, the National Catholic Secretariat, in collaboration with Caritas Ghana, which is an important Relief and Humanitarian Agency of Ghana Catholic Bishops' Conference, instituted a nine-month National Response Plan for Covid-19. The aim was to appeal to its members, Catholic organisations, and businesses to donate protective equipment and other medical supplies to support Catholic frontline healthcare workers in the Church's 46 hospitals and the 83 clinics

58 Mayaki B. 2020. "Bishops in Ghana donate to National Covid-19 Fund", *Vatican News*, 4 May.

59 Ofori-Atta K. 2020. "Mid-Year Review of the Budget Statement and Economic Policy of the Government of Ghana & Supplementary Estimate for the 2020 Financial Year". Presentation to Parliament of Ghana, 23 July.

60 "Korle-Bu doctors threaten to strike over poor coronavirus preparedness", *GhanaWeb*, 2 April.

across the country.⁶¹ Similarly, on 30 April 2020, the Church of Jesus Christ of Latter-day Saints, in partnership with Project Hope, a health and humanitarian relief organisation of global repute, donated to the Ghana Health Service relief items that included 400 000 surgical nose masks and 30 000 isolation gowns.⁶² Significantly, as seen in the finance minister's statement on the 2020 Mid-Year Budget Review, religious institutions devoted their facilities to serve as isolation centres.

Religion contributed essentially to the fight against the coronavirus pandemic. While the disease was seen as a mundane affair in many respects, in the fight against its spiritual effects, spiritual intervention became cardinal. Traditional religious functionaries sought spiritual intervention through the performance of certain rituals. In May 2020, it was reported that authorities of the Aflao Traditional Council, in the Volta region of Ghana, performed rituals to ward off the virus from entering their communities. According to media reportage, led by the traditional priest in Aflao, a town on Ghana's border with Togo, the authorities offered a black goat as a sacrifice to the deities who were believed to be the causal agents of the coronavirus crisis. The goal of this ritual was to prevent the virus from entering through any of the three entry and exit points in the area. Like the prophetic actors of Christianity, the traditional authorities believed that the virus was a plague visited on the population by the deities as a result of the ban on libation and other traditional rituals along with other Ghanaian public events.⁶³ Some traditional priests also predicted the disappearance of the virus following the performance of some rituals to the deities. For instance, on 28 March 2020, the media reported that an elder at the Zakadza shrine, popularly known in Ghana as the Nogokpo shrine, predicted that the pandemic would vanish from the shores of Ghana and, indeed, Africa on 19 April 2020 after they had invoked the mystical powers of the shrine to cleanse the land of the pandemic.⁶⁴ Some traditional authorities connected to the shrine, however, issued a disclaimer arguing that the prediction was a self-opinion of the elder.⁶⁵

Notwithstanding the positive contributions of religious organisations, beliefs, imaginations, rituals and practices were also used to frustrate state efforts to manage the pandemic. Unsurprisingly, in defiance of the executive order and advice and warning of public healthcare workers, some churches continued to organise

61 "Church in Ghana Appeals for Protective Gear to Aid Catholic Hospitals Battling Covid-19", *AciAfrica.org*, 31 March.

62 "The Church of Jesus Christ of Latter-day Saints in partnership with Project Hope, donate Covid-19 protective gear to the Ghana Health Service", *The Church of Jesus Christ of Latter-day Saints News*, 12 May 2020.

63 Bless P. 2020. "Aflao Traditional Council offers sacrifices to stop Coronavirus", *Celebritiesbuzz.com*, 30 March.

64 "Coronavirus will disappear April 19 – Nogokpo Shrine", *Ghana News Agency (GNA)*, 28 March 2020.

65 Kpodo E. 2020. "Somey reacts to 'Coronavirus will disappear on April 19' Comment", *Ghana News Agency (GNA)*, 16 April.

services, leading to conflict between the churches and law enforcement agents.⁶⁶ Of particular interest to the tension between religion, law and public health safety was the violation of the pandemic-related measures by the members of the Christ Embassy Church.

On 30 April 2021, a video circulated and trending in social media depicted the gathering of the youth of Christ Embassy Church. In the said video the non-masked youth of the church were seen in an ecstatic mood, screaming, chanting and dancing as part of their youth evangelism event dubbed the “Pneumatic Night.”⁶⁷ This attracted substantial public disapproval and agitation. In a statement, Occupy Ghana, a pressure group, questioned why the event was allowed to go on in the first place given the position of the church’s leader, Pastor Chris Oyakhilome, regarding the coronavirus pandemic.⁶⁸ Oyakhilome had been accused of holding a fundamentalist and coronavirus conspiracy theory, asserting that the coronavirus crisis was “planned” by a power wielding cartel. On 31 March 2021, the UK government imposed a fine of £125 000 on LoveWorld Television Ministry, a television network owned by Oyakhilome’s church for airing inaccurate and potentially harmful positions regarding the coronavirus pandemic, a claim which was seen as a breach of UK’s broadcasting code.⁶⁹ Oyakhilome had also previously been accused of encouraging his members to ignore the Covid-19 protocol. Following public agitation, on 2 May 2021, the Ghana Police Service, through Director of Public Affairs Sheilla Kessie Abayie-Buckman, issued a press release hinting that it was investigating the said act because it was worrying and “putting the entire country at risk of spreading Covid-19”.⁷⁰ Four members of the church were subsequently held responsible and arraigned before court.⁷¹

Thus, in spite of religious resources serving as coping mechanism in the management of the coronavirus pandemic, they also contributed to frustrating the scientific measures put in place to mitigate the pandemic. For example, given that the closure of the churches had an impact on freedoms of religion, expression, and association, some leaders threatened that continued closure would lead to the visitation of God’s wrath. Reverend Christian Kwabena Andrews, popularly known as Osofo Kyiri Abosom, is noted to have sent strong warning to Ghana’s president regarding the closure of Churches. According to the Osofo Kyiri Abosom, God had told him

66 “Coronavirus: Pastor Arrested”; Donkor, “Coronavirus: Pastor Arrested Again”.

67 “Police investigate Christ Embassy for flouting Covid-19 protocols”, *Daily Graphic*, 3 May 2021.

68 “Deal with Christ Embassy Church leaders over COVID-spreader event – Occupy Ghana”, *GhanaWeb*, 2 May 2021.

69 Sweney M. 2021. “Christian TV channel fined by Ofcom over Covid conspiracy theories”, *The Guardian*, 6 October.

70 Ghana Police Service. 2021. “Christ Embassy Youth Church’s ‘Pneumatic Night’”, *Facebook*, 2 May. [<https://www.facebook.com/GhPoliceService/photos/a.525861720942535/1622039361324760/?type=3&source=57>]

71 Ullo SD. 2021. “Four granted bail after arrest over Covid-19 breaches at Christ Embassy’s event”, *Citinewsroom.com*, 7 May.

that perilous consequences awaited the leaders of the country should they fail to open the churches within a week's time.⁷² Such attitudes, surely, frustrated efforts at containing the coronavirus crisis.

CONCLUSION

While a secular state, the Republic of Ghana has demonstrated a noteworthy amount of what might be called "strategic secularism." Despite being a professed secular state, religious resources in the form of actors, beliefs and ritual practices function decisively in the public domain. Religion has in diverse ways been used to direct, detect and influence many of the public decisions of legal and political importance, sometimes undercutting the political and legal maturation of the state. As a pervasively religious society, Ghana is a nation where religion plays a vital role in the healing and health delivery processes of the people. Due to its political and legal value, religion has been decisive in the management of the ongoing coronavirus crisis.

This chapter has brought to light the ways in which religious resources and law forged a vital constellation of the management of the pandemic in Ghana. The chapter has also shown how in its quest to contain the coronavirus pandemic, the state of Ghana put in place a wide range of public health safety measures including a ban on public gatherings and social intervention policies. To further mitigate the spread of the virus, these measures were supplemented with legislative instruments, significant among which is the enactment of the Imposition of Restrictions (Coronavirus Disease (Covid-19) Pandemic) (No.2) Instrument, 2020. This law, which mandates a partial lockdown in some parts of the country, had certain consequential effects, as it restricted movement in the affected areas. This situation brought some citizens into direct confrontation with law enforcement agencies. Despite this, the law and other measures put in place collectively contributed to the successful management of the Covid-19 crisis.

In particular, this chapter has noted precise challenges associated with these measures, especially when it comes to restrictions on religious gathering, focusing on the degree to which religious institutions in Ghana have played an ambivalent role in mitigating the coronavirus pandemic. Importantly, they have been useful in combatting the pandemic largely through: (1) their cooperation with and adherence to the Covid-19 preventive measures, (2) assisting state agencies in educating their members on the pandemic safety measure and (3) the provisioning of humanitarian services including cash donations and logistics. These measures have made their own unique contribution towards the management of the disease. Yet, despite these contributions, religious resources also frustrated the efforts to mitigate the crisis presented by the coronavirus.

⁷² Bantie R. 2020. "Generational curse will befall on Ghana if Akufo Addo fails to open churches by Sunday", *BBC Ghana*, 8 May.