A STUDY OF THE SOCIAL MINISTRY OF SOME CHARISMATIC CHURCHES IN GHANA: A CASE STUDY OF THE PROVISION OF EDUCATIONAL AND HEALTHCARE SERVICES BY FOUR SELECTED CHURCHES

BY

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JULY, 2013
DECLARATION

I hereby declare that this thesis, with the exception of materials quoted from other scholarly works which have been duly acknowledged, is the original production of research work by the researcher undertaken under supervision. Any errors in this thesis are fully acknowledged as that of the researcher.

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DEDICATION

I dedicate this work to my wonderful wife Pauline, and our three sons Ariel, Emmeth, and Barak. This work is also dedicated to the memory of my late mother Madam Mercy Adjoa Anoah.
ABSTRACT

The research sought to investigate the social ministry of four selected Charismatic churches in Ghana. Specifically, it examined the underlying factors influencing the current interest of these Charismatic churches’ contribution towards the development of education and healthcare services in Ghana. Charismatic churches’ interest in social ministry is problematized due to the fact that in the past social ministry did not appear as a prominent feature in the ethos of Charismatic Christianity in Ghana. The social ministry of churches in Ghana can however be traced to the early European missionary enterprise that combined evangelization with the development of formal education and the introduction of Western medicine among others.

The research adopted the historical and phenomenological approaches as the methodologies for the study. Findings of the study were analyzed within the mission theological concept of *diakonia*. Data was gathered mainly through personal interviews with the church founders, associate pastors, church members and through participant observation in their social ministry programmes.

Among other things the research revealed that, the underlying factors influencing the selected Charismatic churches’ social ministry include the example set by the mainline churches, their re-reading of the Bible, the need to empower their members and their quest to become socially relevant. The study also revealed that what Charismatics refer to as faith healing has been redefined to include the use of medicine, whilst access to healthcare has also been made relatively easier for their members. Finally, the study also revealed that Charismatic churches’ involvement in social ministry is a growing phenomenon.

The researcher among other issues recommends that measures should be undertaken to ensure that the educational and scholarships programmes of these churches are expanded and made more accessible to cater for the poor and underprivileged in society. In the area of healthcare, administrative measures should be put in place to ensure that the healthcare programmes continue to operate long after the founders (pastor-doctors) are no longer on the scene. Church members should also regularly demand accountability and transparency regarding the operations of the social ministry to inspire confidence in the programmes. Founders of these Charismatic churches should also give the social ministry of their respective churches the free hand to operate without unnecessary interference, and the church members must be made to feel ownership of the programmes to ensure their continuous support.

In conclusion the research posits that the selected Charismatic churches re-reading of the Bible, the socio-economic challenges of the times and the quest to remain socially relevant among others has accounted for these changes.
ACKNOWLEDGEMENTS

I give thanks to the King Eternal, Immortal, Invincible, and the only wise God forever and ever, for the gift of life and for helping me to complete this work in spite of all the immense challenges I had to contend with.

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<thead>
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<th>Description</th>
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<tbody>
<tr>
<td>AG-</td>
<td>Assemblies of God</td>
</tr>
<tr>
<td>CAFM-</td>
<td>Christian Action Faith Ministry</td>
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<tr>
<td>CHAG-</td>
<td>Christian Health Association of Ghana.</td>
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<tr>
<td>CHPS-</td>
<td>Community-Based Health Planning Services.</td>
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<tr>
<td>COP-</td>
<td>Church of Pentecost</td>
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<tr>
<td>CUC-</td>
<td>Central University College.</td>
</tr>
<tr>
<td>GES-</td>
<td>Ghana Education Service.</td>
</tr>
<tr>
<td>GETHIM-</td>
<td>Great Eternal Harvest International Ministry.</td>
</tr>
<tr>
<td>GHAFES-</td>
<td>Ghana Fellowship of Evangelical Students.</td>
</tr>
<tr>
<td>GHS-</td>
<td>Ghana Health Service.</td>
</tr>
<tr>
<td>HOVCEA-</td>
<td>Hour of Visitation Choir and Evangelistic Association.</td>
</tr>
<tr>
<td>IBWC-</td>
<td>International Bible Worship Centre (now known as Royalhouse Chapel International)</td>
</tr>
<tr>
<td>ICGC-</td>
<td>International Central Gospel Church.</td>
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<tr>
<td>IMC-</td>
<td>International Missionary Conference.</td>
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<tr>
<td>LIC-</td>
<td>Life International College</td>
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<tr>
<td>LIS-</td>
<td>Life International School.</td>
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<tr>
<td>MLGC</td>
<td>Miracle Life Gospel Church.</td>
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<tr>
<td>MMC</td>
<td>Manna Mission Church</td>
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<tr>
<td>NACCC-</td>
<td>National Association of Christian and Charismatic Churches.</td>
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<td>NEA-</td>
<td>National Evangelical Association.</td>
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<tr>
<td>SAT-</td>
<td>Scholastic Aptitude Test.</td>
</tr>
<tr>
<td>SU-</td>
<td>Scripture Union.</td>
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<tr>
<td>TOEFL-</td>
<td>Test of English as a Foreign Language.</td>
</tr>
<tr>
<td>UCF-</td>
<td>University Campus Fellowship.</td>
</tr>
<tr>
<td>WASCE-</td>
<td>West Africa School Certificate Examinations.</td>
</tr>
<tr>
<td>YAFCA-</td>
<td>Youth Ambassadors for Christ Association</td>
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CHAPTER ONE
INTRODUCTION

1.1 Background

What initially began in the early part of the nineteenth century as missionary efforts to evangelize the indigenes of West Africa, including the Gold Coast, eventually took on ancillary tasks such as the establishment of schools, hospitals, agricultural extension programmes and so on. Commenting on the contribution of the Basel Mission towards the socio-economic development of this country for instance, Ernest Osafo notes that, ‘the mission’s activities were not limited to the spreading of the joyous message of the Protestant Christian faith alone, but included a decisive participation in trade, road building, the establishment of workshops and the training of artisans.’¹ Crucial tasks such as these, which are directed towards the physical development of the individual and society as a whole, are what constitute the social ministry of the Church.²

The Basel Mission, whose missionary activities began in the then Gold Coast (now Ghana) in 1828, was one of the first missionary groups to include schools in their evangelization efforts. Various reasons have been assigned for this initiative, such as equipping converts with reading and writing skills to enable them read the Bible and join in corporate worship.³ Another reason was to produce interpreters who would thus become catechists and eventual church leaders.⁴ Max Assimeng encapsulates the

⁴ P. A. Schweizer, Survivors on the Gold Coast; The Basel Missionaries in Colonial Ghana (Accra: Smartline Publishing, 2001), p.84. It was in this direction that the Basel Mission sent students such as
situation thus, ‘missionaries in Ghana and Nigeria were immediately faced with the acute problem of how to communicate the message of salvation effectively to the indigenous people. The training of a native pastorate therefore became an important concern.’

F. L. Bartels opines that as far back as the 1690’s, clergymen from the Church of England had given religious education to the children of the castle schools in Cape Coast. The objective was to prepare the candidates for baptism and clerical duties in the administration of the Royal African Company.

The Basel and Wesleyan Missions were not alone in this educational enterprise. In fact, when the Catholic Church resumed its missionary work in Elmina in 1880, under the leadership of Father August Moreau, one major tool used for evangelization was the provision of schools, especially for children. It is significant to note that, while the Wesleyan Mission for instance charged fees for their schools, the Catholic schools were free of charge and made the mission very popular. The Church schools eventually became the nurseries for the Western missionaries to raise converts for the Christian Faith. This fact is borne out somewhat by the Wesleyans who admitted that their schools apart from a few exceptions had become the nurseries of the Church.

Catholic missionary activities in the northern part of Ghana, starting from Navrongo in 1906, were

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David Asante, William Oforikai, and later also Nicholas Clerk among others to the Mission College at Basel, Switzerland.


8 Bartels, *Ghana Methodism*, p.89.
essentially a mixture of evangelization and social ministry in the areas of the provision of schools and healthcare services.\(^9\)

The provision of healthcare services which later took on a more prominent stage in mission activities was arguably an afterthought. Scientific discoveries in the area of medicine toward the latter part of the nineteenth century,\(^10\) presented the missionary some essential drugs to counter the health challenges posed by the tropics. Thus, apart from the pioneer missionaries who died shortly after arrival on the coast, all subsequent missionaries in later years carried along some medical skill\(^11\) and a chest of medicines for their personal use. The availability of scientific medical knowledge in the areas of preventive as well as curative healthcare put the missionary in a unique position to extend some medical assistance to their converts.

The fact that Christianity was associated with healthcare found resonance with African indigenous religion and culture since traditional religion has always been associated with healthcare. Harvey Cox posits that, ‘history shows that the norm in most of the cultures of humankind and over most of the millennia has been the “complementarity” of religion and healing, not their “separation”.’\(^12\) Appiah-Kubi is even more specific when he noted that, ‘Christianity has been associated with medicine and healing since its very beginning.’\(^13\) Thus the traditional western missionary churches’ involvement in healthcare and the introduction of orthodox medicine among the indigenes made the


\(^{10}\)Bartels, *Ghana Methodism*. P.27.


Christian faith more appealing and enhanced its spread. For example, Thomas Birch Freeman, the Wesleyan missionary, is said to have successfully treated the female paramount chief of Juaben, of some ailment and this achievement is said to have earned him the reputation of not being only a preacher but also a doctor.\(^\text{14}\) In this way, the Western missionary efforts in general came to stand for a mission that was poised to meet not only spiritual but also the healthcare needs of their converts. It is significant to note that, the missionaries were the main group to extend western healthcare methods in a real sense to the indigenes.\(^\text{15}\)

The provision of these services as a way to win the hearts of the people came as an eye-opener to the missionaries. Thus, instead of a frontal assault on traditional beliefs and practices in their quest to make converts, the provision of these social services made the new faith rather more appealing. Odamten corroborates this view when he noted that, ‘It seems that generally Christianity was acceptable to many because of the opportunities towards the improvement of social and economic standards it offered.’\(^\text{16}\) Subsequently, mission activities came to be characterized by a strong social ministry.

The theological basis for the social ministry of the Church is derived from the fact that, ‘true religion always has social and moral consequences.’\(^\text{17}\) Coupled with this fact, is the evidence from both the Old and New Testaments, that the community of faith must always make room to extend service of love to the needy.\(^\text{18}\) For example, according to


\(^{15}\) Addae, *History of Western Medicine*, p.23.


\(^{18}\) Maggay, *To Respond to Human Need by Loving Service (i)*, p.50.
the Catholic Social Doctrine, ‘the man to be evangelized is not an abstract being but is subject to social and economic questions… the Gospel must be preached but, the mission must show God’s love in concrete terms to those weighed down by hunger and extreme need.’ Thus, Banahene expresses the conviction that Christ invites us to see him in the deprived and those he himself wished to be identified with and whom he described in Matthew 25:35-36 as follows:

   For I was hungry and you gave Me food;
   I was thirsty and you gave Me drink;
   I was a stranger and you took Me in;
   I was naked and you clothed Me;
   I was sick and you visited Me;
   I was in prison and you came to Me.

This account, given in the gospel narrative of Matthew, is what Banahene believes highlights the concern of the Saviour and serves as theological ground to situate the rationale for the social ministry of the Church. The marriage of social ministry and mission is further reinforced by Valdir Steuernagel when he observed that, ‘the third mark of mission makes a beautiful transition between the kerygma, and the diakonia and the craving for justice: to respond to human need by loving service.’

Charismatic churches in Ghana and their progenitor the Pentecostals, much like their counterparts in other developing nations such as Latin America, have been portrayed as ‘passive, other-worldly and traditional’ among a host of other uncomplimentary titles.

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19 F. A. Mensah-Banahene, *The Catholic Social Doctrine; Some Perspectives*. (Accra: Sankofa International, 2004), p.8. see also Kwame Bediako, *Christianity in Africa; The Renewal of a Non-Western Religion* (Edinburgh: Edinburgh University Press,…), p.129. Bediako makes a case that in the past few decades, tremendous changes have taken place in Christian thinking, as there has been the recognition that the gospel is essentially holistic and directed at the whole person—physical as well as spiritual, corporate as well as individual.


This characterization stems from the perception that they do not concern themselves with the general issues of society such as social justice, poverty alleviation or healthcare for the poor etc. Their emphasis seems to be placed more on the ‘charismata’ that is; the gift of grace which manifests itself in speaking in tongues, prophecy and healing, individual prosperity, wealth and success among others. Harvey Cox notes that, ‘more ecumenical churches have criticized Pentecostals and evangelicals for being so concerned about heaven they are no earthly good… they were derided for promising people pie in the sky while turning their backs on the suffering and injustice of this present world.’

It is, however, significant to note that nowadays some Charismatic churches in Ghana are making newspaper headlines because of the social services they provide. Charismatics have been in the newspapers for engaging in various social services such as providing educational grants, clinics, medical outreach programmes and giving financial support to citizens to enable them register under the National Health Insurance Scheme, providing potable water for deprived communities, and housing facilities for orphanages among others.

What attracted research curiosity in this present study are the factors underlying the increased interest of some Charismatic churches in the social services they engage in, particularly in education and healthcare. This research particularly seeks to study the

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motivating theological undercurrents and contributions of some selected Charismatic churches towards the development of education and healthcare in Ghana.

1.2 Statement of the Problem

Emphasis on spiritual as well as physical well-being and or development of the saved (and society in general) is one that is key to missions. Historically, this understanding underlies the provision of social services of mission related churches in Ghana. However, this emphasis must be grounded in the theological teachings and practices of the Christian faith. In contemporary Ghana, some Charismatic churches are actively involved in the provision of social services (education and healthcare) as part of their ministries or side by side with them. The problem that this researcher grapples with and which is at the core of this study is how to find clarity on the underlying theological and missional factors that motivate Charismatic churches in Ghana to engage in the provision and or delivery of education and healthcare services in today’s Ghana.

1.3 Objective

The main objective of this study is to find the underlying theological and missional factors that motivate the interest of Charismatic churches in Ghana to engage in the provision and or delivery of education and healthcare services in today’s Ghana. In order to meet this overarching objective, the following specific objectives have been set.

i. Examine what mission is and the place and theological justification of social ministry in mission.

ii. Discuss the social ministry of the selected Charismatic churches in Ghana in the areas of education and healthcare.
iii. Explore the theological and missional factors motivating the provision and delivery of educational and healthcare services by the selected Charismatic churches.

1.4 Research Question

The main research question is what are the underlying factors motivating Ghanaian Charismatic churches’ provision and or delivery of educational and healthcare services in contemporary Ghana? In order to unpack this question the following specific questions have been posed:

i. What is mission and the place and theological justification of social ministry in mission?

ii. What are the selected Charismatic churches doing as social ministry in the areas of education and healthcare and

iii. What are the theological and missional factors motivating the provision and delivery of healthcare and educational services by the Charismatic churches?

1.5 Conceptual Framework

There are many scholarly discussions that have engaged issues relating to Christian Missions and Social Intervention (Social Ministry) programmes. This study will examine the issue of social ministry within the theological concept of *diakonia*. This is a concept closely associated with church missions and forcefully advanced by scholars such as Kjell Nordstokke, J. Andrew Kirk, David J. Bosch, J. S. Pobee, Cephas N. Omenyo, Emmanuel K. B. Essilfie and several other African theologians.
According to Pobee, *diakonia* is ‘a service of love inspired by the example of the life of Christ and by faith and endurance.’  

Similarly, at the Lutheran World Federation congress in Johannesburg, South Africa, under the theme ‘Prophetic Diakonia: For the Healing of The World’, *diakonia* is explained as the church’s practical and theological answer to God’s call to save creation and humankind. Thus, it is the church’s way of responding to the challenges of society.  

Furthermore, Kwame Bediako observed that, ‘the discovery of the Gospel as good news to the poor, socially oppressed and underprivileged has become a fundamental challenge for mission and theology from the Two-Thirds World.’ Thus, the gospel is obliged to provide answers leading to the alleviation of the burden of poverty imposed on the poor in their present predicament if the gospel is to be relevant.

Horace L. Fenton Jr. in his paper on ‘Mission and Social Concern’ presented at the Congress on the Church’s Worldwide Mission (1966) also admonished that, ‘an evangelism which ignores social concern is incomplete and unscriptural in nature and will be unheeded by many.’ The basis of Fenton’s argument is that the emphasis placed by mission organizations on evangelization and matters of salvation for the hereafter, to the neglect of social ministry does not appear to fully represent the message of the gospel. This is because humans created in the image of God (*imago Dei*), are material

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Diakonia Consultation_Diakonia 2002 pdf. [accessed 27 May 2013].


beings faced with existential challenges such as physical deprivation due to various factors including social injustice.

The Wheaton Declaration therefore made the following statement: ‘We reaffirm unreservedly the primacy of preaching the Gospel to every creature, and we will demonstrate anew God’s concern for social justice and human welfare.’ Similarly, the present Ghanaian charismatic ethos appears to be combining the preaching of the Word of God with social ministry. Considering the activities of the Charismatic churches, which seem to correlate with the *diakonia*, which is key to any missionary enterprise, this conceptual framework has been considered relevant. This conviction directed the selection of *diakonia* as a conceptual framework for this study.

### 1.6 Scope of Study

Neo-Pentecostal or Charismatic churches’ interest in social ministry is a growing phenomenon in contemporary Ghana. However, this study was confined to some selected Charismatic churches within the Accra, Tema and Kumasi metropolis. They are the International Central Gospel Church (Accra), Miracle Life Gospel Church (Tema), Manna Mission Church (Teshie-Accra) and the Great Eternal Harvest International Ministry (Kumasi). The sample was selected from the four case study churches on the basis of their pioneering role in contributing to the development of education and healthcare among the Charismatic Movement in Ghana, their numerical strength, their charismatic theology, their popularity and influence, and their contribution to Charismatic Christianity in Ghana.

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1.7 Methodology

There are two approaches in methodology utilized in this study, historical and phenomenological. The historical approach is applied to the construction of the social ministry of the mission churches from the early missionaries’ arrival in the then Gold Coast to contemporary times. The historical approach involves finding, using, interpreting and correlating information within primary and secondary sources in order to understand past events, whilst the phenomenological approach is used to guide the other section of the work. Phenomenology, rather than offering descriptions of the nature of reality, provides a method for investigating the way we know reality. Phenomenology involves an effort to describe the actual state of affairs as disclosed by the phenomena.

In view of this, phenomenology afforded the researcher the opportunity to suspend judgments and employ *epoche* in order to arrive at objectivity by allowing the social ministry of the selected Charismatic churches to speak for themselves. Apart from the general questionnaires that were distributed, a set of more detailed questions or statements for evaluation was prepared to elicit comprehensive insights from key primary sources and in this instance, the leadership of the Charismatic churches under review.

1.7.1 Sources of Data Collection

*Primary Sources*

In this instance the primary sources are the Christian leaders, members of the selected Charismatic churches, other Christian scholars and resource persons who have written on

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36 J. L. Cox, *Expressing the Sacred; An Introduction to the Phenomenology of Religion* (Harare: University of Zimbabwe Publications, 1992), p.15

37 Cox, *Expressing the Sacred*, pp.26-29. *Epoche* is a method or tool whereby the observer could avoid value judgments. Thus the researcher brackets out his previous ideas, thoughts, opinions or beliefs and observes the phenomenon as they appear rather than as they are understood through opinions formed prior to observation.

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missions and the Charismatic movements in Ghana. Personal interviews were also conducted. The aim of this exercise was to obtain information on a first-hand basis where possible in an attempt to ascertain Charismatic church leaders’ understanding of mission, the theological and missional factors influencing their contribution to social ministry and their particular interest in the development of education and healthcare in Ghana.

Secondary Sources
Secondary sources included published works such as books, journals articles, research papers, unpublished thesis etc., on the topic under study by theologians, Christian leaders and other Christian authors. Newspaper articles were also utilized.

1.7.2 Method of Data Collection
The data was collected through the use of open-ended questionnaires that were administered to church members to elicit information regarding the social ministry of their churches. Direct interviews were also conducted with church leaders and Pentecostal scholars to gather information on their views regarding the social ministry of Charismatic churches. The interviews involved a qualitative (asking open-ended questions) approach. Extensive literature was gathered and reviewed from various institutional libraries and other private sources. Internet sources were also consulted.

1.7.3 Population/Samples
The population consists of the lay members, leaders and associate ministers, and the founders of the selected Charismatic churches in Accra, Tema and Kumasi. The study was confined to selected Charismatic churches within the Greater Accra Region (Accra) and the Ashanti Region (Kumasi). These are the Manna Mission Church (Accra), The
Great Eternal Harvest International Ministry (Kumasi), The International Central Gospel Church (Accra) and the Miracle Life Gospel Church (Tema).

1.7.4 Sampling Methodology and Size

In this instance the target for this study is the founders of churches, associate pastors and leaders, and some church lay members. The simple random sampling method was used to collect the data and to ensure that each individual in the defined population gets an equal and independent chance of being selected as a member of the sample.\textsuperscript{38} The respondents were selected on the basis of their \textsuperscript{39} willingness to participate irrespective of their levels of education. The stratified sampling methodology\textsuperscript{40} was also used to ensure that participants were selected from representative groups within the respective Charismatic churches.

The sample consists of two hundred church members, leaders and associate pastors, and church leaders within the Manna Mission Church, the Great Eternal Harvest International Ministry, the International Central Gospel Church and the Miracle Life Gospel Church. A total of two hundred (200) participants were involved in this research. The researcher interacted with fifty (50) respondents from each of the four Charismatic churches.

\textsuperscript{39} Twumasi, \textit{Social Research}, p.23.
\textsuperscript{40} According to Twumasi, the Stratified Sampling method is a tool adopted to enable various representative groups in a sample space have equal representation in the selection. For example, in the case of the particular church, the selection of respondents must take into account groups such as the choir, prayer warriors, counseling department, evangelism team and the pastoral team etc. see Twumasi, \textit{Social Research}, p.23.
1.8 Literature Review

This study dialogues with scholars in Christian Missions and Education as well as Christian Missions and Healthcare, through their literary works and their relevance to the study. Literature on the topic therefore focuses on the following thematic areas of relevance:


   b) Pentecostal/Charismatic churches and social ministry.

In his book entitled *The History of Education in Ghana*, C.K. Graham argues that formal education in Ghana as we know it today began in 1752 when the Rev. Thomas Thompson, one of the early missionaries of the Society for the Propagation of the Gospel (SPG) came to Cape Coast. During his four (4) year stay he managed to bring education out of the castle to the natives. ‘His aim all the time was to make a trial with the natives and see what hope there would be of introducing among them the Christian religion.’ Based on this note, Graham proceeded to establish the linkage between the Christian mission and the development of formal education in Ghana. Although education in the seventeenth and eighteenth century was the ancillary function of the merchant companies, these companies considered the castle schools as a talent pool for interpreters and clerical workers for the company’s business activities. Thus, it was Rev. Thompson, the missionary, who first made the attempt to bring Christian education from the castle to the Africans, and to make the school the nursery of the Church.

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Critics of Western mission however contend that the missionaries’ main objective was not to open schools but primarily to preach the Gospel, and that the missionaries opened up schools because they saw the schools as one of the best tools for spreading the Christian faith rather than simply training their pupils to earn a living or to spread literacy.\textsuperscript{45} The work of the Basel Mission which concentrated its efforts in the interior (Akwapim Ridge), for example, does not support this view. The Basel Mission introduced various types of vocational skills to make their converts and the population self-sufficient and economically more resilient,\textsuperscript{46} pointing to the fact that, the mission was also interested in the material well-being of its converts and not formal education alone. Graham further argues that whereas the interest of the trading companies lay in educating clerks first and foremost, the missionaries were rather concerned with training teachers, artisans and preachers.\textsuperscript{47}

Noel Smith, in his book entitled \textit{The Presbyterian Church of Ghana- 1835-1960},\textsuperscript{48} seems to corroborate Graham when he noted that, in order to prevent the training given to the children from being purely ‘clerical’, the Basel Mission introduced and gained great praise for its proficiency in agriculture and crafts.\textsuperscript{49} Smith corroborates Graham’s position that the schools were originally the initiative of the Missions, but later, as their value became apparent, local communities appealed to the Missions to sponsor a school in their town or village. These schools, he contends, were thus one of the most potent factors in accelerating the pace of social change.\textsuperscript{50} Subsequently, the question regarding

\textsuperscript{47} C. K. Graham, \textit{Education in Ghana}. pp. 28-56.
\textsuperscript{49} Smith, \textit{The Presbyterian Church of Ghana}, p167.
\textsuperscript{50} Smith, \textit{The Presbyterian Church of Ghana}, p.167.
the role of the Church in social ministry was resolved when the synod of 1922 ruled that, ‘the aim of the Church should be the training of the complete life.’

Apart from serving as background study for this work, both Graham and Smith’s works provide grounds for probing the basis of the current interest being shown by Charismatic churches in the development of education in Ghana.

Commenting on Western Education and Early Nationalism, Philip Forster, in *Education and Social Change in Ghana*, asserts that the first development of nationalism in the Gold Coast was closely associated with the creation of a western-educated and urbanized minority. Thus nationalism may be regarded as the unintended outcome of Western education. Forster’s work also establishes a close relationship between Christian mission and the development of formal education and its attendant socio-political consequences. My work, however, seeks to discover the socio-economic changes the selected Charismatic churches hope to achieve with their involvement in the development of education regarding the lives of their members and society as a whole.

In the *History of Western Medicine in Ghana 1880-1960*, Stephen Addae traces the beginnings of Western Medicine in Ghana and also does a comparison of Traditional medicine and Western Medicine at the time of contact between the Europeans and Africans. The major difference between the two, according to Addae, was the lack of

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52 P. Forster, *Education and Social Change in Ghana* (London: Routledge &Kegan Paul Ltd.)
organization on the part of Traditional Medicine.\textsuperscript{55} The Europeans and other cultures founded hospitals, clinics and dispensaries or their equivalents where the sick could be attended to in an organized way, whilst no such equivalents were a part of the traditional healing methods. Europeans living in the then Gold Coast like the natives also resorted to the use of traditional medicine until the introduction of Western medicine in Ghana. It was the profitability of the slave trade and the need to deliver healthy slaves to the Americas and the Caribbean that led to the employment of ships surgeons by the slave traders. Thus, gradually the use of Western medicine started to infiltrate the West African coast. However, it was the missionaries who introduced modern medical care in a real sense to the local Africans.

Addae maintains that in keeping with the practice of the day, missionaries often doubled as lay physicians, thus Philip Quaque either provided some simple medical treatment for the young children in his charge, or used, for the purpose, the Royal West Africa Army surgeon normally resident at Cape Coast Castle.\textsuperscript{56} Rev. T. B. Freeman as a lay doctor is also on record as having successfully treated the female paramount chief of Juaben, and this caused his popularity as a doctor to soar. Thus, the mission churches performed most valuable medical work among their students and the general population at a time when there was no public health service. These social interventions/ministries enabled them to handle problems of the soul and body, and spread the humanitarian principles of Christianity.\textsuperscript{57} Addae’s work provides insights into the integration of Christian missions

\textsuperscript{55} Addae also reports that the Awunas and other tribes handled fractures in ways similar to the Ashantis, with the result that many who survived were left with horrendous deformities...hemorrhages were treated by the application of a plug of powdered roots and juices to the bleeding part. The conclusion is inescapable that African traditional healers’ knowledge of human anatomy could be written down to nil.\textit{History of Western Medicine}, pp.11-12.

\textsuperscript{56} Addae, \textit{The History of Western Medicine}, p.14

\textsuperscript{57} Addae, \textit{The History of Western Medicine} pp.15-18.
and Western healthcare methods, as well as the environment for the introduction of Western medicine in the Gold Coast.

In *Man cures, God Heals: Religion and Medical Practice among the Akans of Ghana*\(^{58}\), Appiah-Kubi addresses concerns about how to provide modern medical care to a traditional Ghanaian society without doing harm to the cultural identity of the recipients. Appiah-Kubi acknowledges the immense contribution of Missionary Churches in providing scientific based medicines and advanced technology in curative methods. He however points out that these Western medical methods available in mission hospitals are not comprehensive enough in their health delivery efforts because they are one sided and ignore the spiritual and familial dimensions associated with healing and healthcare.

Coupled with the lack of comprehensive healthcare is the high cost of medical treatments in modern hospitals, which puts medical care virtually out of the reach of the ordinary Akan. According to Appiah-Kubi, ‘the emphasis of the work of the hospital once man-centred, is now disease-centred, the hospitals concern for man and his multiple needs evolved into a concern for eradicating disease from man.’\(^{59}\) Both Addae and Appiah-Kubi’s works served as background to the historical context of Christian missions and healthcare in Ghana and hence are relevant to this thesis.

In *Not by Might, nor by Power: A Pentecostal Theology of Social concern in Latin America*,\(^{60}\) Petersen discusses the relationship between Latin American Pentecostalism and social ministry. Pentecostals according to Petersen are involved in many aspects of

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\(^{59}\) Appiah-Kubi, *Man Cures, God Heals* p.127

social transformation such as politics, informal training of converts to assume leadership roles in church, training and empowering women to positions of leadership in traditionally male dominated societies among others. Petersen further maintains that Pentecostals have taken social ministry very seriously by the establishment of the Latin American Child Care Program. This programme initiated by the Assemblies of God Church, provides schools in slums and deprived areas for the poor. Pentecostals, he maintains, have identified illiteracy as the persistent cause of poverty and have thus acted to change the status quo.

The theological basis and inspiration that motivates social action are at the core of these movements; to meet the needs of the entire individual both physically and materially. Petersen argues that Latin American Pentecostals have established a relationship between divine intervention in the Pentecostal experience and the social process that promotes a linkage of theological reflection with socio-economic issues. Thus healthcare and education coupled with the support that the community gives are the means to achieving the objective of breaking the cycle of poverty.

Petersen further maintains that the theological basis for justice on which Pentecostals derive their ‘divine’ mandate is firmly rooted in the Old Testament moral tradition. According to him the Old Testament presents social justice as God’s desire for society based on the concept of the Imago Dei, the notion of covenant in forming community, and the prophetic tradition relating to social concern. Petersen also considers the jubilee teachings as relevant O.T. principles by which social action or social ministry can be instigated and guided within the context of any society. Latin American Pentecostals, Petersen argues, ‘derive further impetus for social action from the New Testament re-
reading of Luke 4:18-19\textsuperscript{61}. Thus empathy for the marginalized is directly tied to the ministry of Jesus. The message of the kingdom therefore imposes moral demands for promoting social action. The result among others is the provision of formal education as the basis for hope.\textsuperscript{62} Petersen’s work although conducted in Latin America, provides substantial bases for assessing the theological guidelines informing the selected Ghanaian Charismatic churches that are engaged in the provision of schools and healthcare programs.

In the article, “The Sprit-filled goes to School; Theological Education in African Pentecostalism,”\textsuperscript{63} Omenyo observes that Pentecostal/Charismatics have shifted from an initial position of ‘strong anti-theological, anti-academic prejudice’ to the current position of embracing and recommending theological education for their pastors and secular education for their members. Subsequently, Omenyo notes that Pentecostal/Charismatics in Ghana (and Nigeria) have set up their own Bible schools and in recent times some of these schools have been transformed into University Colleges affiliated to established secular state Universities. Examples are the Central University College which is affiliated to the University of Cape Coast, and the Pentecost University College which is also affiliated to the University of Ghana, Legon.

\textsuperscript{61} See D. Z. Niringiye, \textit{To Proclaim the Good News of the Kingdom(ii)} in Andrew Walls and Cathy Walls (eds.), \textit{Mission in the Twenty-first Century; Exploring the Five Marks of Global Mission} (London: Darton, Longman and Todd Ltd.,2008), p.13. who describes Luke 4:18-19 ‘the spirit of the Lord is upon Me, because he has anointed Me, To preach the gospel to the poor; He has sent Me to heal the brokenhearted, To proclaim liberty to the captives and recovery of sight to the blind, To set at liberty those who are oppressed; To proclaim the acceptable year of the Lord’, as the manifesto of Jesus Christ which identifies him with the poor and underprivileged. See also D.J. Bosch, \textit{Transforming Mission: Paradigm Shifts in Theology of Mission.} (New York; Orbis Books,1996), p.426. Bosch argues that such a posture is in full accord with Jesus’ understanding of his mission... who immersed himself into the altogether real circumstances of the poor, captives, blind and oppressed.\textsuperscript{62}Petersen, \textit{Not By Might or By Power}, pp.163-164.

Omenyo further observes that, the current generation of Pentecostal/Charismatics, consciously attempt to appropriate the Gospel in addressing African socio-economic issues. If one considers illiteracy as the bane of Ghana’s socio-economic development, it should stand to reason that Charismatics have ventured into education as a means of tackling a major socio-economic problem confronting the Ghanaian society. Thus, Omenyo provides us with an aspect of current trends in the Ghanaian Charismatic ethos vis-à-vis education/scholarship worthy of researching into.\(^{64}\) It is significant to note that critics of the Charismatic movement in Ghana argue that the movement over emphasizes individual prosperity to the neglect of the prosperity of the community.\(^ {65}\) However, Omenyo’s work demonstrates that Ghanaian Charismatics are engaged in social intervention programmes such as schools to reflect their concern for the good of the community as well.

The works reviewed so far indicate that there is a close relationship between Christian missions in Ghana and the development of formal education and healthcare. However, information regarding the extent to which Charismatic churches in Ghana have gone in their social ministry, their contribution to the development of education and healthcare, and the theological and missional factors influencing their social ministry is currently scanty if not totally absent. It is this lacuna among others that this thesis seeks to fill.

\(^{64}\) Omenyo, *The Spirit-Filled Goes to School*, pp.41-55.

\(^{65}\) W. Kahl, “Prosperity-Preaching in West-Africa: An Evaluation of a Contemporary Ideology from a New Testament Perspective”, *Ghana Bulletin of Theology*. (2) July 2007. Kahl argues that his study exposes prosperity preaching among Charismatics, as defined… as an unbiblical ideology. In addition, the idolization of individual business success as divine blessing, undermines Gospel values and to a certain extent African traditional values, such as justice and equality, service-in community, compassion, sharing and caring. p.24.
1.9 Significance of Study

This study is significant because although several Charismatic churches are actively engaged in the provision of social services, there is not much academic documentation that captures the contributions of these churches. This work is an attempt to focus and document social ministry as a current trend in Ghanaian Charismatic Christianity. Secondly, the findings of this research would help provide deeper insight into the reasons for the increasing interest of Charismatic churches in social development programmes in Ghana. Finally, this study will also provide some guidelines for churches that are yet to undertake such programmes.

1.10 Organization of Chapters

Chapter One serves as the general background to the study. It discusses the statement of the problem, research question and objectives of the work. The chapter further discusses the conceptual framework for the study, scope of study, methodology, literature review and the significance of the study.

Chapter Two discusses what mission is, social ministry and a historical survey of the mainline churches’ contribution to the development of education and healthcare as a pattern of social ministry. The chapter provides the theological and historical background to the study of social ministry as integral to mission.

Chapter Three discusses the social ministry of the four selected Charismatic churches, that is, the selected churches’ initiatives in providing educational and healthcare services. The chapter also explores the theological underpinnings of the Charismatic churches’ social ministry.
Chapter Four analyzes the findings of the study. It discusses the missional factors behind the social ministry of the Charismatic churches. Findings of the study are also analyzed within the conceptual framework of *diakonia*.

The final chapter discusses the summary of findings, conclusions and recommendations regarding the social ministry of the Charismatic churches as a representation of paradigmatic changes in the Ghanaian Charismatic ethos.
CHAPTER TWO
MISSION, SOCIAL MINISTRY AND MISSIONARY CHRISTIANITY IN GHANA

2.1 Introduction
This chapter discusses what mission is, mission as *missio Dei* (God’s mission), and mission as *missio ecclesiae* (mission of the Church). The chapter further discusses the concept and practice of social ministry as an essential element of missions. The practice of social ministry existed in Old Testament (OT) times in the form of social justice. The practice is also seen in the New Testament (NT) in the theological concept of *diakonia*. This chapter therefore attempts to explore social ministry in the OT as the quest for social justice, in the NT as *diakonia* in the Church, and then in the person of Christ. 

*Diakonia* is also viewed in the contemporary church.

2.2 What is Mission?
Mission has been described as God’s work in the world and the participation of the Church in that work today. It involves the very nature of God, His will for the Church and His plan for the nations.\(^6^6\) The word mission derives from the Latin word, *mitto*, “to send” and *missio*, “sending”. The word mission was first used in 1544 by the Jesuit priests Ignatius Loyola and Jacob Loyner to describe the spread of the Christian faith.\(^6^7\) According to J.S. Pobee, although the word mission does not occur in the Bible, there are equivalent Greek words that connote similar meanings. Words like *pempein* – to send

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\(^6^7\) Ott, Strauss and Tennent, *Theology of Mission*, p. xiv
and *apostellein* – to send.\(^{68}\) However, the term has been used in various ways denoting different meanings.

According to David Bosch, around the time of the Jerusalem conference of the International Missionary Conference (IMC) 1928, it became clear that most definitions were inadequate. Jerusalem coined the notion ‘comprehensive approach’ which marked a significant advance over all earlier definitions of mission.\(^{69}\) The Whitby Meeting of the IMC (1947) then used the terms *kerygma*\(^{70}\) and *koinonia*\(^{71}\) to summarize its understanding of mission. By 1952 a third element, *diakonia*, was added to the meaning of mission. The Willingen Conference (1952) added the notion ‘witness’, *martyria*\(^{72}\) as the overarching concept.\(^{73}\) One therefore observes the various definitions and understandings of the term mission. However, significant to the current research is the fact that mission is closely linked to social ministry or *diakonia*. For example, Ott, Strauss and Tennent observed that:

> until the 1950’s the term mission and missions were generally used synonymously to describe the spread of the Christian Faith, usually by missionaries—people sent by the church—with explicit calling and mandate to preach the gospel to those who had never heard and gather converts into churches. This normally included crossing geographical and cultural barriers. Often attendant to this task but, usually considered secondary or supportive of it were the establishment of schools, hospitals and orphanages and various other works of compassion and community development.\(^{74}\)

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\(^{70}\) *Kerygma* is a Greek term used to refer to proclamation. See Bosch, *Transforming Missions*, p.511.

\(^{71}\) *Koinonia* is a Greek term used to refer to fellowship or interaction among the faith community. For example E. Dovlo posits that there is a relatively high sense of *koinonia* or fellowship among members of Charismatic churches in Ghana than their mainline counterparts. During worship for instance, the pastors of Charismatic churches asks everyone to greet their neighbor and compliment them on the way they look or they also call for gestures such as ‘wave to Jesus’, ‘wave to the Holy Ghost’, etc. see E. Dovlo, *God’s Spirit and the Sunday Morning Worship-The Challenge of the Charismatic Movements*, Trinity Journal of Church and Theology, X (2000).

\(^{72}\) *Martyria* is a Greek term meaning witness. This witness is given by proclamation, fellowship and service. See Bosch, *Transforming Missions*, p.512.

\(^{73}\) Bosch, *Transforming Missions*, p. 511.

\(^{74}\) Ott, Strauss and Tennent, *Theology of Mission*, p. xv.
Contributing to the discussion on mission, Cathy Ross provided a five point marks of mission in the contemporary world. She identifies the five marks of mission as: (i) to proclaim the Good News of the Kingdom, (ii) to teach, baptize and nurture new believers, (iii) to respond to human need by loving service, (iv) to seek to transform unjust structures of society and (v) to strive to safeguard the integrity of creation and sustain and renew the life of the earth.\textsuperscript{75}

It would be observed that, Cathy Ross also makes a close linkage between what constitutes mission and social ministry when she emphasized that one of the marks of mission is to respond to human need by loving service (iii) which is, \emph{diakonia}.

\subsubsection{2.2.1 Mission as \textit{Missio Dei}}

Mission has often been justified in terms of concern for the lost or the biblical command to preach the gospel to the end of the world. However, Ott et al, argue that justifying mission on the explicit commands of the Bible makes mission a human act of obedience.\textsuperscript{76} In the mid twentieth century, mission came to be understood as God’s mission (Latin, \textit{mission Dei}),\textsuperscript{77} that is to say, mission is rooted in the divine initiative and character of God. Thus, mission is “God’s mission”. God is a missionary God, and mission is rooted in the sending activity of the Triune God-Father, Son and Holy Spirit.\textsuperscript{78} According to Bosch, it was Karl Barth who became one of the first theologians to articulate mission as an activity of God himself, at the Brandenburg Missionary Conference in 1932.\textsuperscript{79} The term \textit{missio Dei}, the Latin expression for the mission of God, is explained by John McIntosh as ‘everything God does for the communication of

\begin{footnotes}
\item[76] Ott, Strauss and Tennent, \textit{Theology of Mission}, p. 61.
\item[77] Bosch, \textit{Transforming Missions}, p.389.
\item[78] Ott, Strauss and Tennent, \textit{Theology of Mission}, p. 62.
\item[79] Bosch, \textit{Transforming Missions}, p.389.
\end{footnotes}
salvation.\textsuperscript{80} Thus, missio Dei springs from God’s boundless and matchless love for the universe He has created, and particularly for the beings within it that bear His image.\textsuperscript{81} The ultimate goal of missio Dei is, therefore, ‘the glory of God’, where God establishes His reign in the hearts of people which is evidenced by the conversion of souls and resulting in love, community, equality, diversity, mercy, compassion and justice.\textsuperscript{82}

\subsection*{2.2.2 Mission as Missio Ecclesiae}
Closely linked with the concept of the missio Dei is the mission of the church, missio ecclesiae. In our previous discussion we established the fact that mission is God’s mission, His reaching out to His created universe and the people in it who bear His image. However, God’s task of reaching out to the world has been delegated to the church. According to Ott, Strauss and Tennent, ‘After the death and resurrection of Christ came Pentecost and the Church, the new people of God was born. The resurrected Christ sends the disciples into the world with the giving of the Great Commission and the sending of the Holy Spirit. The Church today continues on this trajectory of mission.’\textsuperscript{83} Thus, the church has been sent by God with the message of the good news of salvation that also includes a restoration to dignity and social justice through loving service.

Kirk argues that instead of thinking of mission as an aspect of church life, it should rather be seen as being at the heart of the church life.\textsuperscript{84} The church is by its very nature missionary; to the extent that if it ceases to be missionary, it has not just failed in one of its tasks, but it has ceased being a church. Thus the church’s self-understanding and sense

\textsuperscript{81} Kirk, \textit{What is Mission?}, pp.27-28.
\textsuperscript{82} Kirk, \textit{What is Mission?}, p.28.
\textsuperscript{83} Ott, Strauss and Tennent, \textit{Theology of Mission}, p.73
\textsuperscript{84} Kirk, \textit{What is Mission?}, p.30.
of identity (its ecclesiology) is inherently bound up with its call to share and live out the Gospel of Jesus Christ to the ends of the earth and the end of time.\textsuperscript{85} Because the church was called into being by God Himself for His purpose, the church does not have an agenda of its own except that which God assigned it, that is, God relating to the world through the church. Therefore, ‘God’s calling to mission is a calling to service. God’s people are judged not by their formal piety but by the spontaneous compassion they show- or fail to show- to those in need with whom Jesus Christ identifies himself.’\textsuperscript{86} This implies that \textit{mission ecclesiae} must be rooted in concrete action lest it becomes mere rhetoric.\textsuperscript{87}

In the foregoing discussion we made the attempt to demonstrate that mission is an attribute of God\textsuperscript{88}, God working in the world by reaching out in love to His creation and especially the beings that bear His image. Thus God is Himself a missionary God.\textsuperscript{89} The goal of mission is the conversion of souls and a renewal of social structures that reflect love, compassion and justice.\textsuperscript{90} It is this agenda that the church has been tasked to carry. The Church does not have an agenda other than what God has assigned to her\textsuperscript{91}, thus the \textit{missio ecclesiae} is to represent the \textit{missio Dei} in the world, participating in God’s mission\textsuperscript{91} through service. The entire Bible, beginning with the story of Cain and Abel, mirrors God’s predilection for the weak and abused of human history.\textsuperscript{92} Similarly, Christ is also seen identifying Himself with the poor and underprivileged in society at the beginning of his ministry in Luke 4: 6. The direct implication is that, the church as

\textsuperscript{85} Kirk, \textit{What is Mission?}, p.30.

\textsuperscript{86} Kirk, \textit{What is Mission?}, p.32.

\textsuperscript{87} Kirk, \textit{What is Mission?}, p.38.

\textsuperscript{88} Bosch, \textit{Transforming Mission}, p.390.

\textsuperscript{89} Bosch, \textit{Transforming Mission}, p.390.

\textsuperscript{90} Kirk, \textit{What is Mission?} p. 28.


\textsuperscript{92} Bosch, \textit{Transforming Mission}, p.436
Christ’s representative has the responsibility to identify with the poor and marginalized in society and render loving service with the goal of helping humanity live in dignity as a reflection of the *Imago Dei*. Social ministry of the church therefore is the practical expression or fulfillment of the *missio Dei* and *missio ecclesiae*.

### 2.3 Social Ministry

Social ministry finds its expression in the *mission Dei*; God reaching out in love to the universe He created and the beings in it that bear His image particularly, the poor and underprivileged. Social justice according to D. J. Bosch was at the very heart of the prophetic tradition of the Old Testament. Hence social justice plays a key role in the *mission Dei* and subsequently, in the *missio ecclesiae*. It is the quest for social justice, which is an expression of God’s love, which compels the church, as the agent of the *missio Dei*, to engage in social programmes that demonstrate in practical terms the love of God towards humanity. Thus, social ministry is the practical expression in services of love that show concern and action on the behalf of the poor and marginalized in society, with the ultimate goal of helping humanity realise a life of dignity as a reflection of the *imago Dei* – the image of God which every human being possesses.

#### 2.3.1 Social Ministry as Social Justice in the Old Testament (OT)

The underlying OT principle of social justice is the affirmation of the fact that all human beings are created in the image and likeness of God (*imago Dei*). Genesis 1:26. All

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96 Kirk, *What is Mission?*, p.28.  
97 D. Petersen, *Not By Might nor By Power: A Pentecostal Theology of Social Concern in Latin America* (Cumbria: Regnum Books Int. 1996), p.213. Petersen argues that because human beings are the image-bearers of God they have a distinctive and unique value. Based upon this principle all humanity is endowed with intrinsic rights that should include a sense of dignity and the right to be treated with respect.
human beings are therefore endowed with rights that include dignity and the right to be treated with respect. A person’s poverty should not lead to degradation and disrespect. R. Dickinson summarized this view when he stated that, ‘Created in the image of God, humankind is held by Christians to have an inherent right to be treated justly and with dignity. Denial of justice and dignity, either by individuals or institutional structures, violates God’s intention or purposes in creation itself.’

According to J. Andrew Kirk, God is seen as having a preferential option for the poor who are vulnerable and are likely to face devaluation in dignity. Thus beginning with the laws concerning widows, orphans and immigrants (Ex.22:21-4; 23:9; Lev.19:33; Deut.27:19), God is seen creating a social safety net for the vulnerable. And because these people could not have any natural protection within the community, God therefore demands that the whole community should be especially responsible for them because of their precarious circumstances. God’s concern for social issues in his dealings with Israel is further reinforced by the concept of the Jubilee and Sabbatical years which were institutions intended to ensure the social protection of the poor and oppressed.

Commenting on God’s concern for social justice, J. H. Cone observed that, there is no divine grace in the OT that is bestowed on oppressors at the expense of the suffering of the poor, and that the theme of justice and Yahweh’s special concern for the poor and

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98 Petersen, Not By Might nor By Power, p.213.
101 Instructions for the Sabbatical year (Lev.25:2-7 and the Jubilee Year vv8-55) provide a complex range of theological, social, agricultural and economic matters which are inter related in those instructions. The call for a regular, ritually prescribed rest for the land develops into a discussion of just socioeconomic practices. Thus ritual practice and the practice of justice are woven together into a single way of life. James L. May (ed.) The HarperCollins Bible Commentary (New York: The Society of Biblical Literature,1998), pp163-4.
widows have a central place in Israelite prophecy. Furthermore, he stated that in almost every scene of the OT drama of salvation, the poor are defended against the rich, and the weak against the strong. Yahweh is the God of the oppressed whose revelation is identical with their liberation from bondage.102

Summarizing the concept of social justice in the OT tradition and its relationship with diakonia, Kjell Nordstokke noted that, ‘in the biblical tradition, prophecy appears as a response to divine revelation and a God-given mandate given to the prophet. The relationship between prophecy and diakonia is that both have the task of finding ways of building bridges towards renewal and transformation.’103 Thus social ministry is here redefined in terms of helping human beings find renewal and living a life of dignity, in pursuance to the attainment of the imago Dei.

2.3.2 Social Ministry as Diakonia

Diakonia has been described as ‘service of love inspired by the example of Christ and by faith and endurance.’104 The term diakonia has also been described as ‘Christian witness through service.’105 When we speak of the social ministry of the church, we mean social intervention programmes among others that the church undertakes as part of its Christian witness or diaconal work. The concept is rooted in Christ who came not to be served but to serve, and give his life as a ransom for many.

105 Dickinson, Diakonia in the Ecumenical Movement, p.403
*Diakonia* is a Greek word, used in the New Testament, but its application has been varied. Sometimes *diakonia* refers to material services to aid a particular person in need (Mark 15:41; 2Tim 1:8). In other instances, it means serving at tables (Mark 1:3; Acts 6:2). In some cases it refers to the distribution of funds to people in need (II Cor 8:19, Rom 15:25). The concept *diakonia* is derived from the Greek term *diakonos* meaning servant, attendant or minister. The institution of the *diakonos* is commonly related to the account in Acts 6:1-6 of the selection and ordination of the seven to assist the Twelve in the distribution of charitable provisions to the Hellenist widows. *The Interpreter’s Dictionary of the Bible* maintains that the Book of Acts does not use the noun ‘deacon’ of these men but rather the verb *diakonein* to describe their function of ‘serving tables’. The word deacon does not occur in Acts, but one of the seven, Philip, is called an Evangelist in Acts 21:8. The word *diakonos* is also used by Paul to describe his fellow workers and assistants in evangelizing (I Thessalonians 3:2), and Paul uses the term in describing his own ministry (I Corinthians 3:5; II Corinthians 3:6; 6:4) or the ministry of Christ (Rom. 15:8; Gal. 2:17).

The idea of service, *diakonia* and serving, *diakonein*, with particular illustration from service at table, underlies all of Jesus’ teaching about his own ministry and that of his disciples after him. The inspiration for service was the example of Christ himself who ‘came not to be served but to serve’ (Mark10:45). Commenting on Jesus’ example of true servant hood, *The Harper Collins Bible Commentary* makes the point that, in

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Bulbrick (ed.), *The Interpreter’s Dictionary* pp.785-6
contrast to the Gentile rulers ‘who lord it over them’, the disciples should strive to be ‘servants’. The basis is that the Son of Man came not to be served but to serve and to give his life as a ransom for many… power is here radically redefined in terms of self-emptying service.\textsuperscript{112}

Andrew Kirk, commenting on the role of the Church to continue the mission of Christ, by proclamation of the Word and the pursuit of social justice, makes the following observation,

following in the way of Christ quite simply requires communicating the good news of Jesus and the kingdom (Acts 28:30)--evangelism; insisting on the full participation of all people in God’s gift of life and well being--Justice; providing the resources to meet people’s needs--compassion and never using lethal violence as a means of doing God’s will--the practice of non-violence as a means of change.\textsuperscript{113}

He stated further that the Church’s mission,

in the way of Jesus Christ is thus to be an instrument of God’s righteousness and compassionate governance in the world. Thus the church is to be involved in any action that restores, even partially, wholeness to human life. In the area of physical healing it will share in the overcoming of illness by teaching and enabling a healthy way of living and in providing where otherwise not available basic health care for all. They will help to give the dignity of self-confidence through appropriate education.\textsuperscript{114}

Fullkung-Weitzel summarizes the relationship between the church and diakonia in contemporary times thus,

if Jesus is deacon then essentially and in principle the church can be nothing but deacon, in all that it does. Thus, diakonia is not an adjective, or one expression of the church’s life among others, but the expression of the very nature and life of the church itself. Diakonia is not just the consequence of the gospel but part of it just as Jesus was concerned with the preaching of the kingdom of God and healing the sick. The gospel includes proclamation and healing, forgiveness and recovery, word and deed.\textsuperscript{115}

\textsuperscript{114} Kirk, \textit{What Is Mission?}, p.54
According to the Report of the Lutheran World Federation held in Johannesburg, South Africa in 2002, *diakonia* has a large variety of connotations and meanings in contemporary theology. Diaconal work is the *praxis*, the embodiment of *diakonia*. Thus diaconal work is the way in which *diakonia* in a specific time and context is practiced.\(^{116}\)

The Church’s mandate as specified in Matthew 28:19, ‘Go ye therefore into all the world and preach the gospel…’, imposes the charge of being missionary on the church, that is, one that has been sent to serve.

### 2.4 Historical Survey of Mainline Churches’ Social Ministry

This section discusses the social ministry of the mainline churches in Ghana in relation to the development of formal education and Western medicine. The significance of this discussion is that, it provides the bases for us to explore how the mainline churches in Ghana, from their early days to contemporary times have managed to combine their evangelization activities with the provision of formal education and healthcare as social ministry. Through this combination the mainline churches have established the pattern of what it means to be church on the Ghanaian Christian landscape. The discussion is however limited to the contributions of three mainline churches (the Catholic Church, the Presbyterian Church of Ghana, and the Methodist Church, Ghana) from the missionary era to contemporary times.

\(^{116}\)[*Diakonia as Understood and Lived Out in Select LWF Member Churches* in *Prophetic Diakonia: “For the Healing of the World”*. A Report of The Lutheran World Federation. Johannesburg, South Africa, November, 2002. p.11.  Other words or terms for diaconal work used by the LWF member churches are: visible social services, deaconry; diaconate; social ministry; Lutheran community care; justice and advocacy work; the church outside the church; social work; charity; caritas; rehabilitation work; mission activity; social mission; urban mission; welfare work; health work; the prophetic action of transformation; world service; the church’s face in society; Christ’s serving hands here and now.}
2.4.1 Missionary Christianity and Education

Before the arrival of the Western Missionaries and the introduction of formal education, the indigenous people had some education, though informal, of how to survive in their environment, cultural and religious values among others that had been passed on from generations. Initial attempts to introduce formal education were the function of the Merchant Company and later the Crown or colonial government in the early nineteenth century. Serious educational expansion in the country during the first half of the nineteenth century occurred with the re-emergence of the missions or mainline churches. Mainline churches refer to the older and generally larger churches as a result of European Missionary endeavours in Ghana during the nineteenth century. Significant among these missionary societies were the Basel Evangelical Missionary Society, (now the Presbyterian Church of Ghana), the Wesleyan Methodist Missionary Society, (now The Methodist Church, Ghana), the Bremen Missionary Society, (later to become The Evangelical Presbyterian Church), and later the Catholic Church toward the latter part of the nineteenth century.

According to H. Debrunner, the Christian message reached the Gold Coast for the first time in 1471 through the efforts of the Portuguese. Missionary activities in the country from this time onwards remained sporadic and had to be abandoned several times for reasons such as unfavourable climatic conditions, health challenges, lack of personnel,

120 Forster, Education and Social Change, pp.48-49.
and the unpreparedness of the natives for the Gospel message.\textsuperscript{122} The main educational effort of the Basel Mission began in 1843 when they founded a boys’ school at Akropong.\textsuperscript{123} Prior to this, the Castle School at Cape Coast was thriving under Governor Charles McCarthy between 1822 and 1824 and produced about fourteen Africans who became the Bible Band that served as the foundation members of the Methodist church in Ghana.\textsuperscript{124} This group combined their evangelistic activities with literacy.\textsuperscript{125} Bartels however notes that it was under Rev. Thomas Birch Freeman’s leadership that the Methodist Church brought formal education from the Castle to the people.\textsuperscript{126}

According to Peter Clarke, Prior to the 1840’s the education provided by the missionaries was rather narrow in scope, consisting of learning the Scriptures, reading and writing. However, from the 1840’s attempts were made to broaden the curriculum to include subjects such as agriculture, commerce and joinery.\textsuperscript{127} Clarke argues further that the motive was, ‘to teach the people the habit of sustained application to work and this in turn should lead to a more “civilized” and economically prosperous society.’\textsuperscript{128} When Catholic missionaries re-established themselves again in Elmina, Gold Coast in 1880, their main work was in the field of education, and by 1890 they had several hundred pupils in their schools after only a few years of missionary activity due to the fact that their schools were free of charge compared to the Wesleyans.\textsuperscript{129} The Catholics can also

\textsuperscript{122}Debrunner, A History of Christianity, p.17.
\textsuperscript{124}C.K. Graham, History of Education in Ghana. p.53.
\textsuperscript{127}P. B. Clarke, West Africa and Christianity (London: Edward Arnold (Pub.) Ltd.,1986 ), p.58.
\textsuperscript{128}Clarke, West Africa and Christianity, p.58.
\textsuperscript{129}H.W. Debrunner, A History of Christianity in Ghana p.220
be credited with opening a school and carpentry workshop at Navrongo with 26 youths sent by the District Commissioner in 1907.\textsuperscript{130}

With the increase in elementary schools the indigenes of Cape Coast and Accra began to call for the provision of secondary or grammar school education in the country. It is to Rev. Freeman’s credit that in 1874 he had drawn attention to the need to provide higher education in the country.\textsuperscript{131} Adu-Boahen noted that, the Wesleyan agent in Accra also reported that, ‘the educated people of the town are asking for a higher school.’\textsuperscript{132} The challenge to provide secondary education was taken up by the Missions with the increasing support of educated Africans.\textsuperscript{133} The Wesleyans opened the first high school at Cape Coast, Mfantsipim, in 1876 and the Society for the Propagation of the Gospel also opened the St. Nicholas Grammar School, later known as Adisadel also at Cape Coast.\textsuperscript{134} The Basel mission can also be credited for its pioneering role in establishing vocational and technical schools. According to Nkansa-Kyeremateng, ‘the Basel schools were not only to train pupils to read, write and work mathematics but also to assist them to use their hands as experts in crafts and agriculture.’\textsuperscript{135}

The overriding education policy and theological guideline of most of the missions was to convert people from traditional religion to a living faith in Christ, and this they believed could be achieved if the people could read the Bible and other Christian religious material. In addition to this the missions also had the intention of preparing African

\textsuperscript{133} Kimble, \textit{A Political History of Ghana}, p.84.
\textsuperscript{134} Smith, \textit{The Presbyterian Church of Ghana}, p.175.
leaders; teachers, catechists and ministers who could eventually take over the running of the church. The idea of an indigenous ministry for West Africa was accepted in principle in the early days of active missionary work…due to the casualty rate among the early missionaries notably the Basel missionaries in Accra. The missions also held the view that education was a means to facilitate the participation of their converts in public worship apart from reading and writing. Bartels however contends that, ‘the missions used the schools as nurseries of their churches.’

The mission churches believe that God’s call to the church to be a light to the nations imposes the task of setting up schools to educate people. For instance, the Methodist Church believes that Christ’s command in Matthew 28: 19-20, ‘…make disciples of all nations and teach them to observe all that I have commanded you’, provides the biblical basis to establish schools through which the teachings of Christ could be communicated. Thus the Methodist Church maintains that, ‘to achieve the divinely appointed mission of reaching out to others and the world, the church believes the provision of formal education is crucial and inherent in this mission.’

Presently, the Presbyterian Church of Ghana (PCG), runs about 514 pre-schools, 986 primary schools, 408 Junior High Schools, twenty-seven (27) Senior High schools, five (5) Teacher Training Colleges, five (5) Vocational Institutes and one (1) University. This excludes a large number of schools currently run as private schools by local PCG leaders.

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138 Clarke, West Africa and Christianity, p.58.
139 Bartels, Ghana Methodism, p.89.
140 Very Rev. Stephen Asher (General Manager, Methodist Education Unit) Interview, 26 November 2011, Accra.
churches.¹⁴² The Methodist Church also runs 547 kindergartens, 1033 primary schools, 414 Junior High Schools and fifteen (15) second cycle institutions.¹⁴³ In a similar vein the Catholic Church as the largest provider of church initiated schools also runs about 1,366 Pre-Schools; 2,020 Primary schools; 957 Junior High Schools; 58 Senior High Schools; 9 Colleges of Education; 58 Vocational/Technical Institutes and 8 Tertiary Institutions.¹⁴⁴

### 2.4.2 Missionary Christianity and Healthcare Services

Traditional medicine before the arrival of Western medicine considered disease as ‘a state of disharmony in the whole body and even in the whole society. Thus traditional medicine considered the cause of disease as multi-factorial.’¹⁴⁵ Traditional healing methods, however, had their weaknesses as Appiah-Kubi notes that, ‘the outstanding drawback to traditional medicine was the lack of hygiene and the prevalence of superstition and irrational fears coupled with the issue of exclusiveness and secrecy.’¹⁴⁶ It was such a healthcare environment that Western medicine encountered when it was introduced rather unconsciously by the Europeans.

Stephen Addae argues that Western medicine was first unconsciously introduced to West Africa by ship’s surgeons whose duty was to ensure that healthy slaves reached the New World.¹⁴⁷ Although Western medicine was available on the Gold Coast it was the missionaries who actually provided ordinary Africans any form of medical care and

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¹⁴⁴ Catholic Educational Unit, Annual Report January to December, 2001, p.3.
¹⁴⁶ Appiah-Kubi, *Man Cures, God Heals*, p.79
¹⁴⁷ Addae, *History of Western Medicine in Ghana*, p.14
treatment. The notion that the missionary station of the day often doubled as a health centre is corroborated by Addae thus; ‘Wherever a Christian mission was established, mission schools were also established; and as a rule there was an accompanying medical service.’  

The mission churches’ interpretation of Christ’s command to his disciples in Luke 10:19, ‘…heal the sick … and say to them that the kingdom of God is come nigh unto you’, serves as the theological basis for the provision of accessible health care services for the sick. They also interpret the biblical text to mean that the provision of the health care services is a continuation of the healing ministry of Christ. The introduction of Western medicine in a real sense by the mission churches had a very significant impact on the society in general. Assimeng, commenting on the impact of Western medicine on traditional society, notes that,

equally wide-ranging has been the influence of the Christian Missionaries… on matters of health and hygiene it is quite clear that the extension of longevity or the expectation of life (that is to say, the number of years that an average person is expected to actually live), and the reduction of the death rate could not have been possible without the work of the missionary churches.

Presently, in Ghana there are four groups that provide health services in Ghana. These are the Government of Ghana, Church-related (mission) Non-Governmental organizations (NGO’s), Private Practitioners and Traditional Practitioners. The healthcare services rendered by the mainline churches have continued until the present day. In many districts, missions are in the administration of health services and government contributes to their budget by paying personnel costs. The Presbyterian Church, for instance, is a major player in health service delivery in the country. It currently operates a total of forty (40)

150 Assimeng, *Religion and Social Change in West Africa*, p. 92
health institutions in the country. This comprises Four (4) District Hospitals, Nine (9) Sub-District Primary Healthcare Outreach Programmes, Twenty-six (26) Health Centres and Clinics, Two (2) Nurses Training Colleges, One (1) Health Technical Unit and Two (2) Community Based Rehabilitation Centres (CBRs). It is significant to note that two out of the four hospitals, that is, the Bawku and Donkorkrom hospitals were handed over to the Presbyterian Church to manage by government in 1956 and 1985 respectively. These are the government recognized district hospitals in their respective areas.

Presently, the Catholic Church as the largest church provider of healthcare in Ghana, may also boast of about 32 Hospitals and 66 clinics spread all over the country. Currently, the Methodist Church also runs 2 Hospitals and 4 health services centres. All the healthcare services of the three mainline churches under review are members of the Christian Health Association of Ghana (CHAG), and as Christian health institutions, these health centres provide free medical care to the most vulnerable in the society under the ‘poor and sick’ fund. In 2008, the institutions spent a total of GHC 24,848.95 on 1116 poor patients, an average of GHC 22.27 per patient.

2.5 Conclusion

In the foregoing discussion, we made the attempt to establish the existence of a positive relationship between mission and social ministry. Thus social ministry is at the heart of mission. It is in this regard that C. N. Omenyo observes that,

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152 Presbyterian Church of Ghana (PCG), Committee on Health and Environment Report, 2010, p.5. see also Omenyo, ‘A Comparative Analysis’, for the statistics of the PCG health facilities, p.8
153 PCG Committee on Health and Environment, 2010, p.5
very early in the missionary enterprise of Protestant churches in Ghana, they were committed to holistic mission because they came to the understanding that, the salvation of the soul is meaningless unless it takes seriously the socio-economic, religious-cultural and political environment that very often enslave the soul. Subsequently, they stressed *diakonia* which means a service of love inspired by the example of Christ and by faith and endurance.\textsuperscript{157}

This understanding of what holistic mission entails is what led to the establishment of mission schools and hospitals among others across the length and breadth of this country. Thus, irrespective of how opposed one may be towards the activities of the early Christian missionaries and their respective mainline churches or how ‘culturally disruptive’ one may be tempted to see their missionary activities, the positive contribution to the development of society in the areas of education and healthcare among others is phenomenal and cannot ignored. As a result of this, the mainline churches have established the pattern of what it means to be a church in Ghana. To be a church is to be spiritually as well as socially relevant.

\textsuperscript{157} Omenyo, ‘*A Comparative Analysis*’.p.12.
CHAPTER THREE
THE SOCIAL MINISTRY OF FOUR SELECTED CHARISMATIC CHURCHES IN GHANA

3.1 Introduction

Commenting on the important role that religion plays in the development of society, Gerrie ter Harr observes that:

the idea of development (as we know it) has a genealogy in western Christian Religion. It can be seen as the secular translation of the belief that the kingdom of God, where all things will be perfect, will eventually arrive. The difference is that this future kingdom is no longer projected in heaven but that it is believed that such a utopia can be created on earth.158

According to Kingsley Larbi, Ghanaian Pentecostals/Charismatics do not advocate a ‘withdrawal from this wicked world’ in anticipation of the celestial city where believers will enjoy what society has denied them on this earth; rather, they support a constructive engagement, a radical pursuit of abundant life in the here and now through discipline, hard work and proper ritual behaviour.159 It is within this milieu that some Ghanaian Charismatic churches’ involvement in social services and programmes with specific emphasis on the development of education and healthcare services is to be understood.

Commenting on the late arrival of the social ministry of the Pentecostal/Charismatic movement, Omenyo observes that:

The Pentecostal/ Charismatic movement did not put emphasis on social services mainly because they have generally been perceived as an experiential movement. They were overly concerned with ‘sacred’/ ‘spiritual’ matters. In the past the movement tended to dichotomize the world into secular-spiritual and secular-material. In fact some did not see social ministry as their responsibility to others. Even where it was seen as a need it was ranked lower that the ‘salvation of the soul’, thus they felt the churches over indulgence in development programs is a misplaced priority.160

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In recent times however, the Ghanaian society has witnessed a shift in the attitude of Pentecostal/Charismatic churches in the area of social ministry. This chapter will attempt to discuss how some Ghanaian Charismatic churches are contributing to the provision and or delivery of education and healthcare services in Ghana. The discussion will also attempt to show that nowadays the attitude of Charismatic churches towards social ministry seems to be positive and also appears as a growing phenomenon. In this regard there shall be an attempt to briefly discuss the history, characteristics and theology of Ghanaian Charismatic Christianity generally. The discussion will advance to briefly explore the socio-economic milieu within which Charismatic churches’ social ministry evolved as well as a brief overview of the education and health situation in Ghana. This shall be followed by discussions of the individual profile of the church leaders, history of the church, the particular social ministry and the theology underlying that particular social ministry.

3.2 Brief Historical Background of Ghanaian Charismatic Christianity

According to Elom Dovlo, ‘the Christian Renewal movement since the 1900’s has been generally labeled as African, Pentecostal, Spiritual, Prophetic, Charismatic, Evangelical, Full Gospel etc. without much distinction.’\(^{161}\) It is therefore necessary to delineate clearly what we mean by Charismatic churches or ministries within the Ghanaian religious environment. Cephas Omenyo suggests a typology to represent Christian Charismatic movement in contemporary Ghana as follows:

(i) The Independent Churches originating in Ghana or from other African countries i.e. The African Independent Churches/African Indigenous churches/ African Initiated Churches.

(ii) The Classical Pentecostal movement, which began in the West in 1906 and appeared on the Ghanaian religious scene in the 1920’s. These are organized as churches such as the Assemblies of God and Pentecostal churches.

(iii) Neo-Pentecostal or Charismatic non-denominational fellowships such as the Full Gospel Business Men’s Fellowship International and the Women’s Aglow International.

(iv) Charismatic renewal groups in the mainline churches such as the Catholic Charismatic Renewal, Bible Study and Prayer Groups of the Protestant denominations.

(v) The Independent Neo-Pentecostal/ Charismatic Churches /Ministries.  

For the purposes of this discussion, Charismatic churches and those under discussion in this work shall refer to churches which fall within category number ‘v’ above.

In Ghana, according to Omenyo, Neo-Pentecostal/Charismatic churches were a direct result of the evangelical/charismatic renewal in the 1960’s and 1970’s which swept across the country.  

This evangelical/charismatic renewal led to the establishment of various Town Fellowships all over the country, and it is some of these fellowships which metamorphosed into churches or completely new and independent neo-Pentecostal churches known in Ghanaian parlance as Charismatic churches / ministries.  

Dovlo remonstrates that the evangelical fellowships existing in the country around or before 1970’s were the initial source of membership for the neo-Pentecostal churches. Some of these evangelical non-denominational associations were located in many parts of the country, especially southern Ghana. These included Agbozo’s Ghana Evangelical

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163 Omenyo, *Pentecost Outside Pentecostalism*. p. 96See also Asamoah-Gyadu, *AfricanCharismatics*,p.26. Asamoah-Gyadu seems to corroborate Omenyo’s position when he argues that the neo-Pentecostal churches came into existence or prominence from about the last three decades of the twentieth century.

Society (GES), Rev. Isaac Ababio’s Hour of Visitation Choir and Evangelistic Association (HOVCEA), Youth Ambassadors For Christ Association (YAFCA), led by Rev. Owusu Afriyie, and the National Evangelical Association (NEA).\textsuperscript{165} In addition to these were two other Christian Fellowships working among students; the Scripture Union (SU) and the University Christian Fellowship (UCF).\textsuperscript{166}

About the prevailing evangelical situation of the time, Asamoah-Gyadu argues that, in order to carry on the evangelical persuasion of SU and GHAFES members as they settled into working life, around the 1960’s, some of the early graduates began home fellowships mainly for prayer and Bible study which were mainly urban-centered and involved former members of SU and GHAFES.\textsuperscript{167} Between late 1960’s to early 1970’s these home fellowships had grown and so transformed into what eventually became known as Town Fellowships. Members came mainly from traditional mission churches to deepen their spiritual life through Bible study and communion with like-minded evangelical Christians. This spirituality was felt to be absent from the mainline churches in which they had been charged to remain and help revitalize.\textsuperscript{168}

Through the 1970’s the members of the SU and affiliate organizations were becoming more and more Pentecostal in nature and orientation, with emphasis on the baptism of the Holy Spirit with the evidence of speaking in tongues, prophecies and healing miracles. Owing to official SU position on the Holy Spirit, that every truly converted Christian had the Holy Spirit, and that there was no need for any later expression such as

\textsuperscript{165}Dovlo, ‘A Comparative Overview’. p.60.
\textsuperscript{166}Kingsley Larbi, \textit{Pentecostalism}. p.296.
\textsuperscript{168}Asmoah-Gyadu, \textit{African Charismatics}, p.103.
speaking in tongues, contrary to what was actually happening at the grassroots, a crack developed between the SU and the membership in general.\footnote{Asamoah-Gyadu, \textit{African Charismatics}, pp.103-104.}

The rise of the Charismatic churches/ministries in Ghana, therefore, was ‘a rebellion against the limitations that the leadership of the traditional evangelical movement sought to impose on charismatic outbreaks, that grassroots participants felt God was restoring to their generation.’\footnote{Asamoah-Gyadu, \textit{African Charismatics}, p.105.} The leaders of the Charismatic ministries/ churches are unanimous on the contribution of Brother Enoch Agbozo to the “\textit{Pentecostalisation}” of evangelicalism and therefore, the rise of the Charismatic ministries since many of the pioneers of the Charismatic churches in Ghana had varying degrees of influence from Agbozo’s Ghana Evangelical Society (GES).\footnote{Asamoah-Gyadu, \textit{African Charismatics}, p.111.}

Another African evangelist who influenced the rise of Ghanaian Charismatic churches was the Archbishop Benson Idahosa. Idahosa held his maiden crusade in Accra in 1977, an event which was marked by signs, wonders and great miracles. According to Asamoah-Gyadu, this crusade heightened the spiritual revival tempo in the existing evangelical fellowships, particularly in Accra and Tema.\footnote{Asamoah-Gyadu, \textit{African Charismatics}, p.111.} It is important to note that he offered scholarships to willing young men and women to prepare for the work of ministry in his All Nations Bible School. It is also significant to note that graduates of the school were encouraged to begin their own ministries. Some of the initial beneficiaries of this scholarship are Bishop Nicholas Duncan-Williams of the Christian Action Faith Ministries, Pastor Christie Doe Tetteh of the Solid Rock Chapel, Godwin Normanyo of the Fountain of Life Ministries, Charles Agyin-Asare of the Word Miracle
Church International (now Perez Chapel International), and Cephas Amartey, of the now defunct Liberty Valley Temple Ministries. Ogwu Kalu argues that Idahosa reshaped African Pentecostalism in five ways. ‘He brought the prosperity Gospel, the Episcopal polity and televangelism, mega-church with mega projects and theological education that sponsored a large group of African students who spread the faith and deliverance theology throughout the African continent.’

Kingsley Larbi posits that, it was when Duncan-Williams’ initial attempt to work with the Church of Pentecost, upon his return from Nigeria in 1978 had failed, that he began holding meetings (fellowship) with a small group of people at his father’s residence at the Airport Residential Area, Accra. According to Asamoah-Gyadu, Duncan-Williams also combined this with preaching in secondary schools in Accra and Tema. The fellowship later on moved to the Association International School car park and eventually settled at the International Student’s Hostel located at the Airport junction.

Asamoah-Gyadu seems to attribute the founding of the first Charismatic church/ ministry to Duncan-Williams. He says, ‘out of the fellowship meetings Duncan-Williams started a church, The Christian Action Faith Ministries, which was the first of its kind in Ghana.’ He stated further, that the group metamorphosed from a fellowship in May 1979 to a church in May 1980. It seems to the researcher that Duncan-Williams’ initiative to convert a fellowship to a Charismatic church is being presented by Asamoah-Gyadu as the first Charismatic church in Ghana. It is significant to note Larbi’s assertion that, prior to the establishment of the Christian Action Faith Ministries; Idahosa

173 Asamoah-Gyadu, African Charismatics, p.111
175 Kingsley Larbi, Pentecostalism, p.298
176 Asamoah-Gyadu, African Charismatics, p.112.
177 Asamoah-Gyadu, African Charismatics, p.112.
had established the Redemption Hour Faith Ministries at Laterbiokorshie, a suburb of Accra in 1978. Emmanuel Mettle was the first resident pastor, with Isaac Agyare and Ferguson Laing as assistant pastors. Larbi maintains that ‘it is evident; therefore, that Idahosa’s Redemption Hour Faith Ministries was the precursor of the neo-Pentecostal movement in Ghana.' However, Larbi seems to give some credit to Duncan-Williams’ when he noted that, ‘though Idahosa’s Redemption Hour Faith Ministries was in existence before the emergence of the Christian Action Faith Ministries, Duncan-Williams’ pioneering work defined the nature of the independent charismatic movement in Ghana in terms of its theology, liturgy, polity, and ethos.'

3.3 Characteristics and Theology of Ghanaian Charismatic Christianity

The Charismatic churches, without doubt, ‘seem to hold the centre stage of contemporary Ghanaian Christianity because of its rise, growth and theological influence. They also constitute the most significant development in Ghanaian Christianity over the last forty or so years.’ In identifying some distinguishing features of the Charismatic churches Asamoah-Gyadu observes that the identifying features include,

- a special attraction for Ghana’s ‘upwardly mobile youth’;
- a lay-oriented leadership;
- ecclesiastical office based on a person’s charismatic gifting;
- innovative use of modern media technologies;
- particular concern with church growth;
- mostly urban-centred congregations;
- a relaxed and fashion conscious dress code for members;
- absence of religious symbolism in places of worship;
- English as the principal mode of communication and an ardent desire to appear successful, reflect a modern outlook, and portray an international image.

Another distinguishing feature of Ghanaian Charismatics is the emphasis placed on “every-member ministry”, also referred to as the “priesthood of all believers”. Thus, in

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178 Kingsley Larbi, Pentecostalism. p.298.
179 Kingsley Larbi, Pentecostalism. p.298.
Ghanaian Charismatic Christianity, personal spiritual muscle for every believer is the trait of their theology and pastoral efforts. Although Charismatic churches in Ghana are mostly indigenous, they have strong ties with their counterparts in North America. Commenting on the similarities between the two, Asamoah-Gyadu says:

In sub-Saharan countries like Ghana on the other hand, the expression ‘Charismatic’ is used more in reference to the new wave of independent Pentecostal movement, who, despite their indigenous root, are greatly inspired by the North-American Neo-Pentecostal Tele-evangelistic movements with their mega-church philosophies, world dominating agenda for Christianity and religious entrepreneurial ambitions that motivate people to translate their salvation into practical everyday achievements in business, education, economics and family life.\footnote{Asamoah-Gyadu, \textit{African Charismatics}, p.1.}

Ghanaian Charismatic Christianity may be considered to be in direct continuity with its predecessor classical Pentecostalism, and as a result shares some common theological features. Commenting on the theology of Charismatic Christianity Larbi noted that, ‘where one sees a strong bond between the classic Pentecostals and the neo-Pentecostals (Charismatics) is in the area of theological understanding, especially with regard to the \textit{baptism of the Holy Spirit}. The two groups believe in a post-conversion crisis experience, referred to as “Spirit Baptism”, which is available to all believers.’\footnote{Kingsley Larbi, \textit{Pentecostalism}, p.300.}

Andre Droogers elaborating on the important role of “Spirit Baptism” in Pentecostalism and for our purposes Charismatic Christianity observed that, ‘a central place is given to the presence of the Holy Spirit as experienced in speaking in tongues, gifts of healing and prophecy, all of which has the human body as locus. These spiritual gifts or \textit{charismata} are available in principle to all the faithful through conversion and baptism of the Spirit.’\footnote{A. Droogers: \textit{Globalization and Pentecostal Success}. in Andre Corten and Ruth Marshall- Fratani (eds.), \textit{Between Babel and Pentecost; Transnational Pentecostalism in Africa and Latin America}(London: Hurst & co., 2001).p.45. See also Elom Dovlo, “God’s Spirit and the Sunday Morning Worship-The Challenge of the Charismatic Movements” in \textit{Trinity Journal of Church and Theology}. X Nos 1&2 January/July 2000. pp.7-8. Dovlo defines the Charismatics as a corporate group who emphasize a personal experience of conversion crowned by the baptism of the Holy Spirit. They believe in a resultant manifestation of Charismatic gifts or fruits of the Holy Spirit(I Cor. 12-14) Their personal and corporate spiritual activities are therefore marked with the gift of “speaking in tongues”, healing, teaching, seeing visions, prophecy, interpretation of tongues, etc.}
Prominent also in Ghanaian Charismatic theology is the ‘Faith Gospel’. According to the ‘Faith Gospel’, ‘God has met all the needs of human beings in the sufferings and death of Christ and every believer should share the victory of Christ over sin, sickness and poverty. A believer has a right to the blessings of wealth and health won by Christ and he or she can obtain these blessings merely by a positive confession of faith.’\(^{185}\) Thus the theology of the ‘Faith Gospel’ points to faith as the means to prosperity.

Ghanaian Charismatics have, however, gone further to re-interpret salvation to mean ‘transformation and empowerment’, ‘healing and deliverance’ and ‘prosperity and success’\(^{186}\). Asamoah-Gyadu observes that, ‘the key goals of salvation in Charismatic Christianity therefore includes the realization of “transformation and empowerment”, “healing and deliverance”, and “prosperity and success”.’\(^{187}\) Salvation in Charismatic theology begins with calling the world to repentance from sin and conversion to God. Those who respond become members of the body of Christ, and through the empowerment of the Holy Spirit render spiritual service to others.

In Charismatic Christianity, ‘salvation is expected to be a decisive transition, resulting in personal transformation i.e. a new life with a new lifestyle. In addition to this the transformative experience of the Holy Spirit leads to a victorious Christian living.’\(^{188}\) Charismatic Christianity also holds the belief that ‘the religious experience of salvation is the gateway to renewal and spiritual empowerment of the believer and of the believing community.’\(^{189}\) Empowerment is the verification that God can be present in the lives of believers and the Church through the power of the Holy Spirit. Thus it is through

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\(^{186}\) Asamoah-Gyadu, *African Charismatics*. p.133


empowerment that believers speak in tongues, feel confident (full of faith) to pray for healing, and feel authorized to command Satan to leave their affairs.\textsuperscript{190} It is significant to note that Charismatic theology of empowerment is limited to the ability to pray, prophesy and cast out demons through the enablement of the Holy Spirit.

In Charismatic theology, salvation is also understood to mean healing from sickness and deliverance from demonic powers. This understanding is consistent with Pentecostal theology on deliverance. Thus, in Charismatic theology, according to Asamoah-Gyadu, ‘healing and deliverance provides the ritual context for articulating a response to the inevitable shortfalls existing in the “redemptive lift” expected to accompany new life in Christ.’\textsuperscript{191} Healing speaks about the regaining of health through prayer which may come with the laying on of hands and or the anointing with oil. Charismatics also associate sickness with sin and the work of demons and this should explain why healing is linked with deliverance. ‘Healing and deliverance is to be understood to mean the deployment of divine resources, that is, power and authority in the name and blood of Jesus to provide release for the demon-possessed, demon-pressed, broken, troubled and disturbed persons in order that victims may be restored to proper functioning order, that is, to health and wholeness.’\textsuperscript{192}

The underlying theory of the ‘Gospel of prosperity’ is that God rewards faithful Christians with good health, financial success and material wealth.\textsuperscript{193} Salvation in both Ghanaian traditional and biblical context has a strong existential import. Kingsley Larbi argues that,

\begin{itemize}
\item \textsuperscript{190} Asamoah-Gyadu, \textit{African Charismatics}. p.150.
\item \textsuperscript{191} Asamoah-Gyadu, \textit{African Charismatics}. p.164.
\item \textsuperscript{192} Asamoah-Gyadu, \textit{African Charismatics}. p.165.
\item \textsuperscript{193} Asamoah-Gyadu, \textit{African Charismatics}. p.202.
\end{itemize}
as one critically examines the prayers of the Akan in the traditional religious setting, one cannot help but come to the conclusion that the overriding concern is the enjoyment of “nkwa” (life). It means the enjoyment of long life, vitality, vigour and health; it means life of happiness and felicity. “Nkwa” also includes the enjoyment of “ahonyade” (prosperity, possessions), that is wealth, riches and substance including children. “Nkwa” also embodies “asomdwei”, that is a life of peace and tranquility and one free from perturbation.194

The primary motivation of Ghanaian proponents of prosperity theology according to Asmoah-Gyadu, ‘is to seek for themselves and their followers what they understand to be benefits willed to the believer by God and this, to some Charismatic pastors, implies “financial prosperity”, “material prosperity” and “spiritual prosperity”.’195 Thus the prosperity theology has been widely accepted by Ghanaian Charismatic Christianity because it resonates with traditional goals of religion as a means to realizing existential ends.196

3.4 The Context for the Emergence of Charismatic churches’ Social Ministry in Ghana

The mainstay of the Ghanaian economy has traditionally been derived from agriculture, mining, forestry and fishing. However, in recent times agriculture and mining has become the most prominent, whilst tourism has also emerged as a substantial foreign exchange earner.197 The years from 1891 to 1944 saw an increase in the growth of the cocoa industry and a consequential economic prosperity and rapid expansion in infrastructure as a result of the cocoa boom. However, by 1945 the country was experiencing serious economic depression with a fall in the world price of cocoa and the end of the Second World War.198

194 Kingsley Larbi, Pentecostalism, p 12.
196 Asamoah-Gyadu, African Charismatics, p.202
197 Omenyo, ‘A Comparative Analysis’, p.9. In addition to these the nascent oil industry has also become a substantial foreign exchange earner since 2010.
198 Kingsley Larbi, Pentecostalism, pp 31-41.
Commenting on the effects of these adverse developments, Omenyo stated that, ‘this development led to the cutting of government expenditure on education by 35% and adversely affected the country’s infrastructural and social services, particularly education and health.’ The situation around the 1970’s which coincided with the birth of the Charismatic Churches was not any better. Omenyo summarizes it thus,

inflation was running around 100% per anum and in addition to this, there was widespread corruption; fall in the world price of cocoa, collapse of the mining industry and general strikes. As a result of these economic difficulties, Ghana submitted to the conditionalities of the World Bank and the International Monetary Fund (IMF) so that from the 1980’s to 1990’s, the country was taken through various Economic Recovery Programmes (ERP) which saw some modest economic gains; a 5% economic growth and a drop in inflation from 122.85% in 1983 to about 12% in 1992. Despite these gains there was widespread poverty with 70% of Ghanaians earning less than US$ 1 a day.

Omenyo makes the striking point that, ‘the major effect of Ghana’s “inherited poverty” and dismal economic performance negatively impinges on access to essential services such as healthcare, education and potable water, particularly in the rural areas. It also made it difficult for many Ghanaians to access medical care.’ It is within such a debilitating economic environment that some Charismatic churches began to realize the need to contribute in material terms to alleviate the hardships imposed on their members and society generally.

Commenting on the seemingly passive attitude of some churches in matters relating to the material world, Beetham observes that, ‘the church has often allowed itself to be torn between two words of scripture: “Give us this day our daily bread” and “man shall not live by bread alone”.’ What is becoming apparent is that, the amalgamation of these

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199 Omenyo, ‘Comparative Analysis’. p.9
200 Omenyo, ‘Comparative Analysis’. p.10
201 Omenyo, ‘Comparative Analysis’, p.11. Omenyo describes inherited poverty as the type of poverty in which parents pass on their poverty to their children.
two situations is what Ghanaian Charismatic churches are translating into action in their social ministry.

3.4.1 Overview of the Education Situation in Ghana

The problem of infrastructure is a major challenge confronting education in Ghana. This problem was further compounded with the introduction of the free basic education in 2005. According to K. A. Togobo, after the introduction of free basic education, the numbers of school children enrolments increased significantly, yet the construction of the necessary infrastructure did not keep pace.204 Another problem confronting basic education in Ghana is the wide disparities between the rural and urban centres. An example is cited from the Bunkpurgu/ Yunyoo District of the Northern Region, where the schools are over populated and one classroom had over 134 pupils.205

Coupled with the lack of infrastructure is the lack of adequate textbooks and teachers. For example, in the West Mamprusi District, it was revealed that more than 113 classrooms in the district were without teachers at the primary level.206 Another contributor to the debate on education in Ghana, looking at government’s financial commitment to public education also presented the following statistics on the state of affairs.207 According to Katie Lepi, public expenditure on education in Ghana as percentage of total government expenditure is 24.38% as against 19.20% in South Africa, (ii) Public expenditure per pupil as percentage GDP per capita in Ghana is

204K. A. Togobo, http://www.Songhai Advisory LLP. on World Bank, IMF World Economic Outlook, FAO, NCA. The report further notes that the literacy rate among women in Ghana is 46% whilst for men it stands at 67%.
19.72% as against 18.47% in South Africa, (iii) Pupil-teacher ratio (primary) in Ghana is 31:1 as against 30.7:1 in South Africa.\textsuperscript{208} Generally, although these figures seem to indicate a better commitment of the Ghanaian government towards the development of education than their South African counterparts, the state of affairs of education in Ghana still needs a lot of support as the situation on the ground is dire, especially in the rural areas. In Ghana, as with many other African countries, education at the pre-university level is well resourced at the urban than the rural areas.

### 3.4.2 Overview of Healthcare in Ghana

In Ghana, the persistent challenges to healthcare are malaria, HIV/AIDS, maternal and infant mortality.\textsuperscript{209} Additionally, there is the shortage of health professionals and the unavailability of affordable healthcare. In Ghana, the Ministry of Health works in collaboration with the Ghana Health Service (GHS), Christian Health Association of Ghana (CHAG), and other partners to deliver health care to the citizenry. The GHS is the major partner in the arrangement supervising the activities of all Government hospitals, Clinics and Health Centres whilst the CHAG is responsible for about 42\% of the health-care needs of Ghanaians.\textsuperscript{210} Out of this number the Catholic Church is responsible for 52\%, Protestant Churches-40\% and Pentecostal/Charismatic Churches-5\%.\textsuperscript{211} According to the GHS, with the introduction of the National Health Insurance, Out Patient Department (OPD) attendance has increased steadily from 44.2\% in 2009 to 82.11\% by 2011.

\bibitem{209} Ghana Health Service Annual Report, 2011, p.28
\bibitem{210} Christian Health Association of Ghana, File:///D:/Christian Health Association of Ghana_Welcome to CHAG website.htm. The CHAG plays a complementary role to the Ministry of Health and the Ghana Health Service and is the second largest provider of health services in the country. The 183 member institutions are predominantly located in the rural (underserved) areas of the country.
\bibitem{211} Omenyo, ‘A Comparative Analysis’. p.17
In spite of both government and private efforts to mitigate healthcare challenges in the country, medical services in Ghana seem to be inadequate. Under such circumstances many Ghanaians, and especially rural dwellers, resort to the use of herbal medicine.\textsuperscript{212} The phenomenon is confirmed by the abundance of traditional healthcare providers and the many varieties of herbal medicine on the Ghanaian market. This is because the traditional medicine is relatively cheaper and easily accessible in drug stores and open markets among others.

Although the introduction of the NHIS is intended to make healthcare services accessible, many Ghanaians are however poor and unable to register for the insurance. Financial constraints are a major problem preventing access to healthcare. This fact is corroborated by the GHS, when it noted that the access gap to healthcare is financial and geographical.\textsuperscript{213} To increase access the GHS has expanded its Community-Based Health Planning and Services (CHPS) programme from 868 in 2009 to 1,675 in 2011. The patient to nurse ratio by 2011 was 1240: 1, whilst patient to doctor ratio by 2011 was 10,032:1.\textsuperscript{214} According to one UNICEF report, maternal mortality rate in Ghana by 2011 was 351 deaths per 100,000 live births whilst infant mortality and under five mortality rates by 2008 was 80 per 1000 live births.\textsuperscript{215}

HIV/AIDS continues to be a health challenge even though the rates of infection seem to be declining. In 2011 alone, a total of 16,549 cases were reported across the 10 regions

\textsuperscript{213} Ghana Health Service 2011 Annual Report. p.17
\textsuperscript{214} Ghana Health Service 2011 Annual Report. Pp.4-17
of the country with 725 fatalities.\textsuperscript{216} This notwithstanding, malaria continues to be the number one cause of death in the country. Lisa Briggs argues that approximately 33\% of all reported deaths are attributed to infectious and parasitic diseases that are preventable. She further stated that often the rural and urban poor resort to traditional healers as the only affordable and accessible form of healthcare. Thus traditional healers are the first point of call in the healthcare system in the rural areas.\textsuperscript{217}

3.5 Education as Charismatic churches’ Social Ministry in Ghana

This section discusses the efforts and or initiatives of the selected Charismatic churches towards the development of education in Ghana. It is an attempt to highlight the specific areas of education that the two Charismatic churches under discussion are directing their attention and resources. The discussion also covers the underlying theology or theologies guiding these churches’ understanding of education as well as their goals for such initiatives.

3.5.1 The Case of the International Central Gospel Church (I.C.G.C.)

The International Central Gospel Church (ICGC) is of interest in our current discussions because, among all the Charismatic churches in Ghana, this church seems to be one of the most conspicuous in providing education in Ghana. The social ministry of the ICGC since the mid-1990’s has been under the umbrella of the church’s NGO Central Aid. Central Aid, as Paul Gifford would note, ‘has been supporting good causes- for a cardio-thoracic unit, the physically handicapped, breast cancer, and the blind, and in 1998 even

Trokosi women. Gifford further stated that, Central Aid has also throughout the 1990’s given scholarships worth over 200 million Cedis to 500 brilliant but needy students, most of them Muslims. Over the years ICGC’s interest particularly in the area of education seems to have increased immensely, resulting in the establishment of the Central University College, the pre-tertiary education unit and the Daniel Institute, which has replaced ICGC’s ministerial training school. This section will attempt a review of all these educational endeavours of the ICGC. Our discussions will however commence with the profile of Rev. Dr. Otabil, the leader of the church, who although he did not personally attain the highest of education levels, shows a considerable interest in education and the role education plays in human development. The discussion further touches on the history of the church, the church’s theology of education and education as a social ministry.

3.5.1.1 Pastor Mensa Anamua Otabil and the I.C.G.C

David Mensa Anamua Otabil was born at Sekondi to Lloyd Moses Otabil of Ekumfi Adansi, Central Region and Dinah Amissah of Elmina also in the Central Region. Otabil’s father worked as a personnel officer and later as a procurement officer of the Tema Boatyard Corporation. His father, he claims, was a source of encouragement for he and for his siblings’ education. When his father suffered a stroke Otabil and his siblings’ education suffered a setback although Otabil managed to complete his Ordinary Level education at Swedru Secondary School.

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221 Kingsley Larbi, *Pentecostalism*, p.336
222 Kingsley Larbi, *Pentecostalism*, p. 336
The ICGC was born on the 24th of February 1984 and this was after Otabil had announced during the 1983 Camp meeting of the Kanda Fellowship his intention to form a church. Edwin Donkor became his assistant and an executive committee of the church was formed. However this executive committee was dissolved in 1985 as result of what appears to be operational difficulties.\textsuperscript{223} The church started its meetings at the Kanda Primary School, and as Larbi would note, moved to several other places over the years until it settled at the Baden Powell Memorial Hall near the Arts Centre, Accra in 1986. It rented and used this premises until 1996 whereupon the church finally moved to its Abossey Okai present location in December 1996.\textsuperscript{224} Some of the early key leaders who contributed to the growth and development of the church are William Obeng Darko, Eric Oduro Kwapong, Christopher Yaw Annor, Gracious Awoye, Morris Appiah and Nana Abeka Johnson.\textsuperscript{225}

ICGC’s emphasis on evangelism is one tool that contributed immensely to its numerical growth. For example in April of 1987 the church increased its membership from 700 to 1500 in just one week due to house-to-house coordinated evangelism by its members. Today, the ICGC can boast of branches all over Ghana, as well as some overseas branches in Europe and North America.\textsuperscript{226}

3.5.1.2 The ICGC and its Theology of Education

According to Larbi, the theology of ICGC on education stems from Otabil’s belief that man is not supposed to have dominion over his fellow man, and that whenever this happens it breaks God’s pattern for human interaction. In a situation of such injustice,

\textsuperscript{223} Kingsley Larbi, \textit{Pentecostalism}, p. 337
\textsuperscript{224} Kingsley Larbi, \textit{Pentecostalism}, p. 338
\textsuperscript{225} Kingsley Larbi, \textit{Pentecostalism}, p. 338
the God of justice breaks in to set the oppressed free.\textsuperscript{227} Otabil believes that the minds of the African people are hooked on the supply and superiority of the white skin and that it is almost impossible for them to conceive the thought of black people standing on their own two feet, and that this is as a result of Africa’s colonial past and the slave trade.\textsuperscript{228}

The time of ‘freedom’ has come, but this freedom, Otabil argues must of necessity begin from the liberation of the mind and unless the blackman is set free from mental slavery, though physically free he would still behave as if in bondage. Otabil argues that through massive propaganda and the control of economic and military power; Africa’s past oppressors continue to control and dominate the thinking of the African people.\textsuperscript{229}

According to Larbi, the way out of this dilemma, Otabil believes, is to highlight the importance of the black race in the plan of God. Challenging the popular notion that the black race is cursed, Otabil argues that on the contrary Ham the father of Cush was rather blessed (Gen. 9:21) and that Cush as first born, received a double blessing.\textsuperscript{230}

Otabil believes that although Abraham’s ‘Cushite’ children were disinheritent they were subsequently restored to their inheritance through their faithfulness. One of them, he maintains was Jethro, who was a priest before Aaron and a law-giver to Moses. Hobab the son of Jethro, by acting as scout and guide to Israel, won back their inheritance for Abraham’s Cushite children.\textsuperscript{231}

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\textsuperscript{227}Kingsley Larbi, \textit{Pentecostalism}, p.349.
\textsuperscript{228}Kingsley Larbi, \textit{Pentecostalism}, p.349.
\textsuperscript{229}Kingsley Larbi, \textit{Pentecostalism}, p.349
\textsuperscript{230}Kingsley Larbi, \textit{Pentecostalism}, p.350
\textsuperscript{231}Kingsley Larbi, \textit{Pentecostalism}, p.350
\end{flushleft}
Otabil further argues that the regaining of the inheritance by the Cushites was reflected when Joshua, fulfilling the promise Moses made to the Midianites, settled them with tribe of Judah thus, confirming the presence of the black people in the Promised Land. Subsequently, the Midianites featured prominently in God’s dealing with Israel.\textsuperscript{232} Otabil also believes the Magi (Matt2:1-12) were black people who were sent off to the east country by Abraham. Thus, as a result of black people’s connection to God’s plan of redemption, it was necessary for a black man (Simeon of Cyrene) to help Christ carry the cross to Calvary.\textsuperscript{233} He contends further that on the day of Pentecost, black people were present among those who heard the Gospel in their own language, and that the first Gentile to hear the gospel was the Ethiopian Eunuch and not Cornelius. In the light of these Otabil calls on today’s Cushites to change their dependency syndrome.\textsuperscript{234}

Larbi believes this idea is what influences ICGC’s theology of education. For example in Otabil’s book, ‘Four Laws of Productivity’, Larbi is of the view that Otabil believes the overall intent and purpose of God for humans is found in the first three chapters of the book of Genesis. Using Gen.1:28 as his key text, he believes the terms ‘Be fruitful’, ‘Multiply’, ‘Replenish the Earth’, ‘Subdue the Earth’, ‘Have Dominion’, are all of tremendous significance. To Otabil the charge to be ‘Fruitful’ (Gen1:28) has a deeper meaning and implication than what he sees as the traditional meaning of ‘child bearing’, which sometimes is misconstrued to mean ‘giving birth to as many children as one possibly can.’\textsuperscript{235} According to Larbi, Otabil sees the charge to be fruitful to mean ‘the act of producing’ and it applies to every area of life, and since everyone possesses a

\textsuperscript{232} Kingsley Larbi, \textit{Pentecostalism}. p350.
\textsuperscript{233} Kingsley Larbi, \textit{Pentecostalism}. p.352
\textsuperscript{234} Kingsley Larbi, \textit{Pentecostalism}. p.352
\textsuperscript{235} Kingsley Larbi, \textit{Pentecostalism}. p.354.
‘seed’, and the seed is designed to flourish, even in adversity, therefore everyone has the God-given potential to be fruitful in whatever ‘seed’ he/she has.236

Education plays a crucial role in the development of one’s seed or gift. Thus according to Otabil, ‘A teacher who has the greatest education will not be a good teacher without a gift of teaching whilst on the other hand, the gift of teaching will not make you a success unless you go ahead and get education to develop it.’237 In another development Otabil commenting on the importance of education, stated that:

we have to attack ignorance and illiteracy as though [they were] the devil himself… You are sitting there saying “Jesus is Lord, Alleluia!”… Don’t hide behind binding [ignorance] and casting it out in Jesus’ name. No, Sir, it will not be cast out. You can’t cast out ignorance in the name of Jesus. You cast out ignorance through education!238

It is this role which education plays in developing an individual’s seed or gift that seems to underlie ICGC’s theology of education. This work will thus attempt to explore how ICGC appropriates its theology of education to the development of scholarship in Ghana.

3.5.1.3 ICGC and its Educational Services

This section discusses the contribution of ICGC towards the development of education in Ghana. The discussion covers the scholarship aspect of Central Aid, Central University College, Pre-Tertiary education and the Daniel institute. The theological underpinnings of these schools establishment as well as objectives of the schools are also discussed.

(i). The Educational/ Scholarship Arm of the Central Aid

The Central Aid developed from the ICGC Educational Scholarship Scheme named Central Educational Trust which was inaugurated on the 29th December, 1988. The

236 Kingsley Larbi, Pentecostalism. p. 354.
237 Mensa Otabil; Four Laws of Productivity cited in Larbi, Pentecostalism, p. 354.
A scholarship scheme was set up to aid poor but able students to acquire secondary and vocational education. This education trust, the church claims, is the brain child of Rev. Otabil who, due to his personal experience, shares the plight of needy youth, whose educational attainment could be hindered due to financial constraints.\textsuperscript{239} The scholarships are awarded annually to needy pre-university students to help them complete secondary education and are meant to cater for all or part of the beneficiary’s school fees. The scholarship may also be applied to the payment of examination registration fees of final year students.

Qualification for the grant is open to any resident Ghanaian student between the ages of 14 and 22 years regardless of religion, and must have obtained admission to a pre-university institution. The prospective candidate must also be in dire need of financial help and is required to demonstrate ability to pursue academic ambitions. The social impact of the scholarship scheme is significant. For example by the year 2000, over 500 Ghanaian students had benefited from the scheme. The number of beneficiaries has increased to an average of 250 students each year since 2010.\textsuperscript{240} The operators of the scheme believe it is contributing positively to the development of education in Ghana because, first of all, the scholarships are open to all qualified Ghanaian students irrespective of religious affiliation. The church also believes that by paying the fees of these students, burdens are off loaded from the shoulders of needy parents who are struggling in the country’s ever present harsh socio-economic circumstances.\textsuperscript{241}

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\footnote{239 Mrs Diana Akorfa Asante (Administrative Officer of the Central Aid), Interview, 10\textsuperscript{th} March 2013.}
\footnote{240 Mrs Diana Akorfa Asante (Administrative Officer of the Central Aid), Interview, 10 March 2013. Miotso, Prampram. (Interview was conducted by researcher)}
\footnote{241 Mrs Diana Akorfa Asante, Interview, 10 March 2013. Miotso, Prampram.}
\end{footnotesize}
If one should consider the fact that without secondary education it is nearly impossible for one to proceed to the tertiary level of education in the country, Central Aid’s target of pre-University students makes a lot of sense, taking into account the fact that the minimum qualification for entering employment today is the completion of senior High school education, and a temporal employment may be a necessary stop-gap measure to the achievement of higher academic laurels. The Central Aid also proposes to build libraries in all the 10 regions of Ghana using the Church’s branches in those regions as liaison. 242

(ii). Central University College (CUC)

The beginning of the Central University College can be traced to the ICGC’s ministerial training institute which was founded in 1988 to provide short term ministerial training to ministers of the church. Rev Otabil was the president of the institute whilst Rev. William Obeng-Darko served as the first Dean. The institute was located in the garage of the house which served as the church’s former office at Dansoman. The form of training was essentially inspirational, with Rev. Otabil, Rev. Obeng-Darko and Rev. Eric Kwapong serving as the lecturers. The first graduation took place in December 1988 during the church’s Camp Meeting. 243

According Rev. Larbi, around the late 1996, the need to upgrade the college into a liberal Arts University became apparent and the purpose of expansion was basically to contribute to the manpower needs of the country. Around this time admissions into the public universities were very low and also very competitive, leaving many qualified

242 Mrs Diana Akorfa Asante, Interview, 10 March 2013, Miotso, Prampram.
243 Kingsley Larbi, Interview, 3 April 2013, Accra. (Interview was conducted by researcher).
secondary school graduates with no access.\textsuperscript{244} The upgrading of the Bible school into a liberal Arts University was met with ‘grievous challenges’.\textsuperscript{245} According to Larbi, it was strongly felt by a section of the leadership of the church that the project would be too much for the church to bear.\textsuperscript{246}

This led to the assembling of a six member team of experts on February 7, 1997 to do feasibility studies in order to establish the viability of the upgrading. Although the feasibility study proved optimistic and the church council of the Christ Temple gave an initial assent, the contest continued, and the whole idea had to be revisited from time to time with various dissenting views.

The main problem was how to raise the funds to finance the accommodation needs of the sprouting college. For example, Rev. Larbi cites a circular letter written by the church administrator to the General Overseer, Pastor Otabil, copied to Rev. E. Kingsley Larbi, Principal of the College and Rev. Edwin Donkor (General Secretary of the Church) to illustrate the point. It reads thus:

…From the above analysis, it seems to me that our resources are simply not enough to permit us to take upon ourselves the additional burden of leasing the SUNKWA LODGE for CCC this year. I must admit that the LODGE is spacious and could certainly meet the present and perhaps even the future accommodation needs of the College. The problem in my view is that its acquisition has come at a wrong time- a time when the church’s resources are over-stretched…It is my humble plea, therefore, that the acquisition of SUNKWA LODGE should be revisited. Admittedly, the lease agreement has been signed and a part-payment of $2000 has been made. But it is my considered view that if there is any way we can forego the part-payment and resile from the agreement, we should do so and cut our losses now before it is too late.\textsuperscript{247}

\textsuperscript{244} Kingsley Larbi, Interview, 3 April 2013, Accra.
\textsuperscript{245} Kingsley Larbi, Interview, 3 April 2013, Accra.
\textsuperscript{246} Kingsley Larbi, Interview, 3 April 2013, Accra.
\textsuperscript{247} Church Administrator of the International Central Gospel Church. Memo dated 20\textsuperscript{th} January 1997. Cited in the Executive Handing Over Notes of the Founding President of Central University College 11\textsuperscript{th} July 2003.p.29.
In spite of these challenges arrangements for accreditation and affiliation of the college was begun for the School of Theology and Missions and the School of Business Management and Administration in 1996. As at July 2003, B.A Theology, B.Sc. Business Administration in the following options; Human Resource Management (HRM), Accounting, Marketing, Agribusiness Management, B.A. Secretaryship and Diploma of Higher Education in Human Resource Management had received accreditation.\footnote{Executive Handing Over Notes of the Founding President (Central University College), dated Friday, 11\textsuperscript{th} July, 2003. p 29.}

In 1996, the CUC became a member of the Oral Roberts University Education Fellowship (ORUEF). Through this arrangement the Oral Roberts University (ORU) will accept transfer of students from the university on the basis of each student’s performance.\footnote{Executive Handing Over Notes, p 29.} The CUC eventually became affiliated with the University of Cape Coast (UCC) after approval by the academic board of the UCC.

Kingsley Larbi believes that, the establishment of the Central University College has impacted society positively in many ways. First of all, the University has helped many Ghanaians to obtain University education, something which was beyond the reach of many qualified students. Another way through which the Central University College has impacted society in general is the fact that its establishment galvanized other churches including the Methodist Church, Catholic Church and the Presbyterian Church to establish their own universities. Rev. Kingsley Larbi also contends that the establishment of the University has created the environment for lecturers to be paid well in both the Private and Public Universities.\footnote{Rev. Dr. Kingsley Larbi , Interview, 3 April 2013, Accra.}
(iii). **Pre-Tertiary Education**

The ICGC is also actively engaged in the provision of basic to Junior High School education at various stations where they have churches. It is intended that in the near future Senior High Schools would be included in the list.\(^{251}\) These schools are what fall under the Pre-Tertiary Education Unit of the church and are called the Central Lyceum. Presently there are about 13 of these Central Lyceum scattered across the country, from Bolgatanga in the Northern Region to Teshie and Labadi in the Greater Accra Region, and Aflao in the Volta Region to Dunkwa-on-Offin in the Western Region of Ghana.\(^{252}\)

When the researcher posed the question: How is the Central Lyceum expected to impact the society in a unique way?, the Director of Pre-tertiary Education at ICGC Head Office stated that, ‘the purpose of the Central Lyceum is to educate children so they will be prepared for the vocation to which God has called them, enabled and equipped with the competencies necessary to think Christianly and to perform skillfully in the world, equipped to be servant-leaders who impact the world as change agents.’\(^{253}\) These values, he believes, are not highlighted in the public schools.

(iv). **The Daniel Institute**

The Daniel Institute is the ministerial training institute of the ICGC which has replaced the erstwhile Central Bible College. The school was established in 2009 with the aim of training young university graduates only between the ages of 18 and 25 years for ministerial preparation and personal spiritual development. The selection of young

\(^{251}\) C. Adjei-Brown, Director of Pre-Tertiary Education, ICGC. Interview, 18 April 2013, ICGC Head Office Miotso, Prampram. (Interview was conducted by the researcher).

\(^{252}\) Adjei-Brown, Interview, 18 April 2013, Miotso, Prampram.

\(^{253}\) Adjei-Brown, Interview, 18 April 2013, Miotso, Prampram.
university graduates is desired because they are considered the future leaders of the church and their university education makes them more versatile and re-shapeable to suit the organization’s objective of preparing the next generation of church leaders. Their university education also implies that they are able to teach better what they are taught to both church and society. Each student is sponsored by the church and enjoys full scholarship; however admission is restricted to members of the church only. The reason why this institution falls under the social ministry of the church is because of the social functions which graduates of this school are expected to perform in society.

The underlying theology guiding the Daniel Institute is derived from the account of the Old Testament prophet Daniel and his three friends who served in the palace of the king of Babylon appropriating a combination of knowledge and skill, and the grace of the Spirit. Similarly, these university graduates, it is hoped, would be able to combine the biblical knowledge acquired through the one year ministerial training with the knowledge previously acquired through University education and exhibit qualities such as Daniel and his friends did at their work places as well as in the church.

Commenting on the social impact of the Daniel Institute the principal of the school, Rev. Dr. Priscilla Nketia is of the view that the school poses a moral challenge to the youth, especially those in the tertiary institutions. According to her one may be young, educated, and intelligent and yet not use these talents to serve God and society in integrity. Thus, it is hoped that these young ones would exemplify the Christian character in the true sense wherever they function in the secular world.\textsuperscript{254}

\textsuperscript{254} Rev. Dr. Priscilla Nketia, Interview, 10 April 2013, Daniel Institute in Miotso, Prampram (Interview was conducted by Researcher).
Another area in which the Daniel Institute is expected to contribute to society is through chaplaincy. Rev. Nketia argues that many people serve in both private and public institutions as chaplains offering counseling and associated services without formal training in chaplaincy. The graduates of the Daniel Institute are purposely trained in this area to serve society. Apart from the traditional Bible school courses such as homiletics, hermeneutics, systematic theology and so on, more practical courses addressing contemporary issues have also been introduced on the curriculum such as: Church and the Law, Church and human rights, Prison ministry, Hospital ministry, Basic healthcare etc.\textsuperscript{255}

According to Rev. Dr. Nketia, the ICGC shares the view that education is essentially to discover truth and that a sound education will contribute to the pursuit of truth and the cultivation of the permanent principles of right and justice. Thus for the ICGC, education should help the human being to discover his Maker, regaining the image of God that was marred by the fall and twisted by continual living in rebellion against God. In that redeemed and renewed image, the human being is able also to really know who he/she is, discover what talents and abilities God has deposited in him/her, discover God’s plan for his/her life, and spend the rest of his/her life aligning those gifts and abilities towards God’s purpose for living.\textsuperscript{256}

3.5.2 The Case of the Miracle Life Gospel Church (M.L.G.C.)

Located in community 5, Tema, is the Miracle Life Gospel Church, one of the first Charismatic churches to spring up in the city during the latter part of the 1980’s. The Church is relevant for our current study because of the role it is playing in providing

\textsuperscript{255} Rev. Dr. Nketia, Interview, 10 April 2013, Miotso, Prampram.
\textsuperscript{256} Rev. Dr. Nketia, Interview, 10 April 2013, Miotso near Prampram.
education from the basic to the Senior High School level for the community and society in general. The Rev. Dr. Gordon Kisseih is the founder and leader of this church.

3.5.2.1 Rev. Dr. Gordon Kisseih and the Miracle Life Gospel Church

Rev. Gordon Kisseih is the first of five children born to his parents. According to him, whereas many people have had their concept of life shaped by the family into which they are born, a particular school attended, a teacher or a certain individual, Rev. Kisseih believes his concept of life was shaped by a combination of several factors.\(^{257}\) Although he was born into a Presbyterian family that professed Christianity, he does not consider the family as really Christian until they got born again. He is also of the view that the social circumstances of his birth and early life do not have any bearing on the social ministry of the Church he leads.\(^{258}\)

Rev. Kisseih attended Peki Secondary School for his Ordinary Level Certificate and proceeded to the Ghana Secondary School in Koforidua for Advanced Level education. He had his first degree at the Kwame Nkrumah University of Science and Technology. He also holds a post graduate degree in management and a Master of Education degree from the Oral Roberts University, Tulsa Oklahoma, U.S.A.\(^{259}\) The Miracle Life Gospel Church was established in Tema in 1987 by Rev. Dr. Gordon Kisseih. The church is the third Charismatic church to have been established in the city of Tema after the United Christian Outreach Ministries and the Christ Love Church (Love Tabernacle).

\(^{257}\) Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota. (Interview was conducted by researcher)

\(^{258}\) Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.

\(^{259}\) Biographical details gathered from Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
3.5.2.2 The Miracle Life Gospel Church and its Theology of Education

The theology of education adopted by the Miracle Life Gospel Church is founded on Proverbs 22:6. Which reads; ‘Train up a child in the way he should go, and when he is old he will not depart from It’. According to Rev. Kisseih the training the bible talks about is nothing more than education. For him, education should involve the training of the soul, spirit and body of the individual. Thus when the mind is trained through secular education the individual is better placed to understand spiritual things even better.  

Rev. Kisseih argues that for the Miracle Life Gospel Church, education is considered as the sustaining factor for Christianity.  

Citing countries such as Iran and Turkey as examples, he contends that historical evidence available indicates that these countries have had some Christian past. Thus, Christianity lost ground in those countries because Christian schools were not established in addition to the preaching of the Gospel. If that had been done, he believes the Christian heritage of those countries would have been preserved till today. According to Rev. Kisseih, if the church is to do an effective work of guiding the next generation in the Christian faith, while at the same time contributing to the development of society, it has to be through education. It is in this regard that Rev. Kisseih sees his church’s schools as part of their Christian responsibility to society. 

Rev. Kisseih also believes that education cultivates the power of reasoning so that individuals can acquire knowledge and learn how to use it to frame their choices. Using reason, the church believes people can become free from ignorance, superstition and...

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260 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
261 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
262 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
error, and thus formulate alternatives of action based on the best available knowledge in order to make intelligent and rational decisions.\textsuperscript{263}

3.5.2.3 The Miracle Life Gospel Church and its Educational Services

The Life International School, which consists of pre-school, Kindergarten, Nursery, Primary and Junior High School, was established in 1997 with 14 pupils. Rev. Kisseih maintains that the initial motivation for the establishment of the school was driven by the Church’s evangelistic efforts and secondly to serve the residents of the catchment area.\textsuperscript{264} Classes began in the church’s auditorium after the idea was bought by the board of governors of the church. Funding for the school was generated from local church resources but Rev. Kisseih admits that once in a while, he received overseas support which was not substantial.\textsuperscript{265} The school is today situated on an approximately 5-acre plot of land it acquired from the Tema Development Corporation.

Rev. Kisseih was of the opinion that the school is serving the society for the following reasons; firstly, in addition to the Ghana Education Service curriculum, the schools attaches an additional course in Christian education with the aim of instilling in the children Christian values which he argues have proven to produce morally upright and productive citizens. Secondly, the fees charged are relatively moderate and thus is accessible to parents of the lower income bracket. In addition to this the school employs graduate teachers thus ensuring that teaching is excellent.\textsuperscript{266}

\begin{footnotes}
\item[263] Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
\item[264] Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
\item[265] Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
\item[266] Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
\end{footnotes}
He reinforces this point by claiming that the school was adjudged the best in the 2012 Basic Education Certificate Examinations (BECE) in the Tema Metropolis. The school also provides buses which transport the children to and from school at very moderate cost. Furthermore, over 70% of the pupils and their parents are not members of the Church. Rev. Kisseih maintains that the very fact that the school is established in a low income catchment area in community 5 is in itself a pointer to the fact that the school is serving the society.267

The Life International College is the Senior High School arm of the church’s educational endeavours. The college was established in 2008 to offer courses in Arts, Business and Science leading to the West African School Certificate Examinations (WASCE). In addition to these the school also offers courses in SAT and TOEFL.268 This college is located on the Michel Camp-Dodowa road with a student population of about 120 students. According to Rev. Kisseih the motivation was to establish a senior high school with a very strong Christian influence as opposed to the public senior high schools.269 He believes that students in Senior High Schools are amenable to change since they are still in their formative years, and therefore influencing them with Christian values will go a long way to produce morally upright citizens in the future.

The Life International College also has in addition to the Ghana Education Service Curriculum courses in Christian education which are compulsory and are designed to answer some of the challenging questions of the youth.270 The school also offers Christian counseling and mentoring to the students, for which reason majority of the

267 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
268 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
269 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
270 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
students become born-again Christians by the time they graduate from the college. Rev. Kisseih believes the college is serving the society because it has become a model for many Senior High Schools in the country leading to the transfer of several delinquent students by parents from the public schools to the Life International College.\textsuperscript{271}

The Principal of the College is of the opinion that, the relatively moderate school fees and the flexible terms of payment available to parents makes the school a service to the society. He further stated that training students at the Senior High School level with Christian values is a sure way of ensuring that by the time they get to the University where they will enjoy much more liberty; these students are firmly grounded in moral uprightness and integrity.\textsuperscript{272}

3.6 Healthcare as Charismatic churches’ Social Ministry in Ghana

It has been said that, ‘health is public good, and for most health services, the entire community, not just a few direct beneficiaries; stand to gain because a healthier labour force is a more productive one.’\textsuperscript{273} This section discusses the healthcare services of two Charismatic churches; namely the Manna Mission Church and the Great Eternal Harvest International Ministry. The discussion also covers their theological perspective of healing and healthcare.

3.6.1 The Case of the Manna Mission Church

The Manna Mission Incorporated is essentially a charismatic church with its Ghanaian headquarters situated on a 32- acre piece of land at Teshie in the Ledzokuku-Krowor

\textsuperscript{271} Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota
\textsuperscript{272} Mr. Anthony Gasu (Principal of LIC), Interview, 26 March 2013, Tema.(Interview was conducted by researcher).
Municipality of the Greater Accra Region. The Mission has branches in Teshie Morna, Lashibi, Aporman near Abokobi, Adenta, Prampram, Ada, Swedru, Bechem in the Brong Ahafo Region and Tamale. The Manna Mission is important in the current discussion, because the social ministry of the Manna Mission, which comprises the provision of both basic education and healthcare on the said 32-acre land at Teshie, can be found the Church auditorium which seats over 500 members each Sunday, church offices, the mission hospital, the mission schools and rows of staff bungalows. The current discussion, however, will focus on the healthcare services as a social ministry delivered by the mission. The mission is led by the Rev. Dr. Seth Mensah Ablorh.

3.6.1.1 Rev. Dr. Seth Mensah Ablorh and the Manna Mission Church

The Rev. Dr. Seth Mensah Ablorh is a qualified medical doctor by profession and also the head pastor of the mission. He was born at Teshie to E. S. N. Ablorh, a clerk, farmer and alcohol distiller, and Ellen Adjelley Adjei a baker. He spent his childhood days at Kweiman a small town near Damfa at the foot of the Aburi Hills, but later came to live at Teshie where he had his basic education at the Teshie Presbyterian Primary and Middle schools. He proceeded to the Tema Secondary School for his Ordinary level secondary education, and having passed his O-level examinations gained admission to the Mfantsipim School for his Sixth form education. After the sixth form, he obtained a scholarship to study medicine in the former U. S. S. R., a course that was to run for seven years. Just two years into his studies, however, he was repatriated for smuggling Bibles from Poland to some underground churches in Russia.

274 Rev. Dr. Seth Ablorh, Interview, 26 November 2012. (Interview was conducted by researcher).

275 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
Back in Ghana he worked with the Legon Branch of the Ghana Commercial Bank until he gained admission to the Tennessee State University in Nashville, Tennessee, U.S.A., to study Medical Technology. In the U.S.A. however, he was granted admission by the Oral Roberts University to study medicine and successfully graduated in 1985. He also completed post-graduate studies in Family Medicine. Rev. Dr. Ablorh was ordained a preacher of the Gospel in 1989, by the American Healing Evangelist, Rev. Dr. Oral Roberts.  

According to Rev. Dr. Ablorh, the Manna Mission was first incorporated in Chicago with the cooperation of some friends. The initial motivation was to come back to Ghana and help the natives of his land, whose debilitating socio-economic circumstances fuelled his desire to be a medical doctor. Rev. Ablorh claims that his intention after medical training was not to come to Ghana and work with the Ministry of Health or in the Government hospitals. On the contrary, his idea was to work in a medical facility where medical care was a blend of Christ-centred compassionate healthcare and effective evangelism, coupled with strategic community development. These elements Rev. Ablorh observed were conspicuously missing from what the Ministry of Health was offering to the people.

The Manna Mission was initially incorporated in Chicago with the cooperation of some friends and was planted on the present site at Teshie in 1989, with the presence and support of the American Healing Evangelist Oral Roberts. Thus overseas financial support coupled, with the generosity of the indigenous community, which donated the 32-acre piece of land, helped to establish the Mission. In recent times, however, the

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276 Biographical details gathered from Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
277 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
278 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
Mission has had to pay for the price of about 80% of the land to families claiming ownership of various portions of the parcel of land. The hospital which came into existence one year before the Manna Mission Church was planted, began initially as a clinic in the Teshie Township, in a place known today as ‘Old Manna’. The hospital is a 40-bed medical facility offering general medical care. In addition to this, the facility also runs a nursing training school and provides scholarships for medical doctors to pursue post-graduate studies with the intention that these doctors would in turn render useful services to the society in general.

The Manna Mission Hospital has always combined prayer and orthodox medicine as its therapeutic method for healing. This position of the Mission, according to Rev. Ablorh, is partially in response to the traditional indigenous belief in the concept of cause and effect. In this regard, therefore, Rev. Ablorh seems to align himself with the traditional view, that there may be an underlying spiritual cause to an illness which manifests itself in the human body. It is in agreement with this position that Rev. Ablorh posits that sickness is more than just patho-physiological, but may also be a pointer to a spiritual disorder.

According to Rev. Ablorh, it is the recognition of the spiritual dimension to health delivery and the concrete steps taken to combine prayer and medicine in dealing with the sick that makes the Manna Mission distinct from the government hospitals. Personnel of the hospital are born-again Christians who are not just looking for a job but, gladly

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279 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
280 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
282 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
283 Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
offer compassionate Christ-centred healthcare. According to Rev. Dr. Ablorh, it is not uncommon for a doctor to offer prayers for the sick in addition to prescribing conventional medicine in the consulting room, nor is it strange to see a doctor on morning rounds offering prayers and comforting words of encouragement to patients on admission, in addition to administering orthodox medicine.\textsuperscript{284}

The hospital, until the establishment of the LEKMA Hospital at Teshie in 2009, was the main medical backbone of the whole Ledzokuku municipality. The compassionate healthcare provided by the health facility and the fact that the hospital has been treating an average of about fifty patients daily since 1989, is basis for Rev. Ablorh to draw the conclusion that, the facility has touched almost every household in the municipality.\textsuperscript{285}

To Rev. Ablorh, this feat is an irrepressible indicator that the hospital is serving the society. Moreover, the ‘sick but poor’ facility in operation at the hospital has been catering for the sick who cannot afford the cost of medical treatment long before the introduction of the National Health Insurance Scheme. Rev. Ablorh maintains that service from the hospital to the ‘sick but poor’ is also indicative of the hospital serving the society.\textsuperscript{286}

The hospital in collaboration with foreign medical missions also organizes free medical outreach programmes within and outside the municipality in the areas of eye care, dentistry and fistula repairs among others, three times every year. According to Rev. William Okyere, an associate pastor of Rev. Ablorh, these medical outreaches outside the municipality are purposely directed towards places where the Manna Mission has satellite churches. The idea is that the medical mission would be hosted by the branch

\textsuperscript{284} Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
\textsuperscript{285} Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
\textsuperscript{286} Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
church, which in turn uses the medical care on offer as an evangelization tool to win souls for the Church.\textsuperscript{287}

The Manna Mission Hospital is a member of the Christian Health Association of Ghana (CHAG). This Association, according to Rev. Ablorh, caters for the health needs of about 35\%-40\% of the total population of Ghana. Being a member of the association also means that the government of Ghana pays the salaries of about 50\%-100\% of the staff. In addition to this all medical equipment imported by the hospital enjoys a duty/tax free facility from the government. The Manna Mission Hospital currently enjoys a 70\% staff salary absorption by government. This demonstrates governments’ commitment to partner private sector institutions to enhance healthcare services in the country.

3.6.1.2 The Manna Mission Church and its Theology of Health

In response to the question whether a Charismatic church which is providing medical care is not in contravention of the widely held Charismatic churches’ belief in divine healing or Faith healing, Rev. Ablorh made references to various biblical passages to support his actions. For instance he cites the case of the woman with the issue of blood recorded in Luke 8:43, who was healed by Jesus. According to Rev. Ablorh, the fact that the woman had visited many doctors without securing any cure, coupled with the lack of any criticism of the doctors by Jesus, is an indication of Jesus’ acceptance/ recognition of the role of doctors in healthcare delivery.\textsuperscript{288}

\textsuperscript{287} Rev William Otchere (Dean of the Manna Mission Bible College), Interview, 10 January 2013, Accra. (Interview was conducted by researcher)

\textsuperscript{288} Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
Rev. Ablorh further stated that the account of the healing of the ten lepers by Jesus recorded in Luke 17:12-14, and the subsequent command to go and have themselves examined, apparently by someone conversant with healthcare is also indicative of Jesus’ recognition of the important role of medical practitioners in the healing economy of God.

To justify further the important role of medical science in the context of Christian healing, Rev. Ablorh argues that in the bible there have been instances where prayer has been combined with medicine to achieve healing. Recounting the narrative of Isaiah Chapter 38, King Hezekiah has been taken ill and is threatened with imminent death. Rev. Ablorh is of the view that in the said narrative, one can clearly see King Hezekiah offering prayers for his healing verse 2, while the prophet Isaiah recommends the application of a poultice made from fig leaves verse 21. Thus in Rev. Ablorh’s opinion, the application of the poultice made from fig leaves served as an antibiotic and was to counter the effects of a boil that had become festered.\(^{289}\)

In concluding his exposition on the complementary roles of medicine and prayer in the quest for healing, Rev. Dr. Ablorh argues strongly that contrary to the position held by some sections of Ghanaian Pentecostal/Charismatic Christians that the usage of medicine or prophylactics in the search for healing was sinful, the usage of medicine should rather be seen as consistent with the bible’s teaching on healing. To correct this theological aberration, Rev. Dr. Ablorh claims his position as an executive member of the National Association of Charismatic and Christian Churches (NACCC), has accorded him the opportunity to educate the various pastors of the Charismatic churches who are members

\(^{289}\) Rev. Dr. Seth Ablorh, Interview, 26 November 2012.
of the association on the correct and proper approach to healthcare. Rev. Ablorh suggested for example, that in administering deliverance instead of chaining a patient to a tree, the services of a medical doctor could be sought who would apply a little medicine by injection and this would calm even a violent mental case, after which prayers could be offered.

In the light of the foregoing, Rev. Ablorh is of the firm conviction that the health facility being operated under the auspices of the church is in continuation of Christ’s healing ministry. To conclude the examples from the bible, Rev. Ablorh cites the story of the Good Samaritan as told by Jesus in Luke’s Gospel to argue further, that healthcare delivery must be seen as a major component of the gospel. In the narrative of Luke 10:30-37, a Samaritan is seen attending to a sick and wounded man who has been ignored by a priest and a Levite on their way to perform religious duties. Jesus’ commendation of the Samaritan, Rev. Ablorh claims, is a pointer to the importance which Jesus attaches to caring for the sick rather than going to perform religious duties. In line with this view, Rev. Ablorh believes that healthcare delivery must be seen as a major component of the gospel.

3.6.1.3 The Manna Mission Church and its Healthcare Services

Quoting from John 6:33; ‘For the bread of God is He who came down from heaven and gives life to the world.’ The objective of the Manna Mission Church is to reach out with the word of God with skill to change society. It is in this regard, therefore, that the teachers of the Manna Mission School and personnel of the hospital are born-again
Christians who have been transformed by Christ and live exemplary lives. It is through these personnel and the compassionate Christ-centred healthcare being offered at the hospital that makes the facility a tool for evangelization.\footnote{Rev. Dr. Seth Ablorh, Interview, 26 November 2012.}

With this understanding of healing at the back of their minds, members who fall sick are encouraged to visit the hospital for medical treatment. According to Rev. William Otchere, initially church members enjoyed 15% discount on their medical bills. Currently, however, the facility is extended to those members in need and who have not registered under the National Health Insurance Scheme. Pastors can also guarantee payment for church members to receive medical treatment and payment made later or members’ medical bills can be fully absorbed by the Church.\footnote{Rev. William Otchere, Interview, 10 January 2013, Teshie, Accra.}

\textbf{3.6.2 The Case of the Great Eternal Harvest International Ministry}

The Great Eternal Harvest International Ministry (GETHIM) is a Bible-believing Charismatic church situated at Daban, a suburb of Kumasi, in the Ashanti Region of Ghana. According to the leader of the Church, Rev. Dr. Asafo-Agyei, the Church has three main objectives central to fulfilling its mission. These are first; medical missions which consists of free medical services in both urban and rural communities to meet the various health needs of the people. Second are the Church’s training programmes which are targeted at both professionals and non-professionals in the medical field. The aim is to train practitioners of basic healthcare in line with the word of God. The school of ministry which is the third in line is designed to train leaders for ministry. The GETHIM is significant for our study because this church, which has all the characteristics of a
typical Ghanaian Charismatic church, operates a hospital that shares the same compound with the headquarters of the church at Daban, a suburb of Kumasi.297

3.6.2.1 Rev. Dr. Asafo-Agyei and the Great Eternal Harvest Int. Ministry

The Rev. Dr. Asafo-Agyei Anane Frimpong was born on the 7th of March 1944 in Kumasi in the Ashanti Region of Ghana. His father, Mr. Benjamin Anane Frimpong, was a teacher who also worshipped with the Presbyterian Church. According to Dr. Asafo-Agyei, his father being a teacher meant, he ensured that all the nine children went to school. He attended the Presbyterian Boys Middle School at Adum and had his secondary education at the Presbyterian Secondary School at Odumasi Krobo. Prempeh College granted him admission to pursue his Sixth form education after his Ordinary Level examinations.

According to Rev. Dr. Asafo-Agyei, he attended the University of Ghana Medical School from 1966 to 1972, and qualified as a medical doctor in 1973. He then worked for the Ministry of Health serving at the Korle-Bu Teaching Hospital in Accra and the Komfo Anokye Teaching Hospital in Kumasi for five years before entering into private practice in 1978. In 1980 he established the Asafo-Agyei Hospital in a rented building, but, by 1988 he had completed the buildings which currently house the Asafo-Agyei Hospital at Daban a suburb of Kumasi and thus moved in.298 In 1991, he undertook a six month Haemorrhoids Specialist Training Programme at Gujarat State in India; and upon his return to Ghana began treating patients suffering from this ailment with this innovative technique called the Ring Haemorrhoidectomy (R/H).299

297 Biographical details gathered from Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi. (Interview conducted by researcher).
298 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
299 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
Rev. Dr. Asafo-Agyei’s innovative techniques for the treatment of haemorrhoids or piles was designed to prevent the condition of patients from deteriorating to what is known in medical parlance as third degree haemorrhoids, for which the only remedy available is surgery. As he put it, ‘We at the Asafo-Agyei Specialist Piles Clinic have adopted the policy that we shall prevent the condition of our patients from deteriorating to the point where they would be compelled to face the trauma of surgery.’ According to Rev. Dr. Asafo-Agyei, the treatments for the 1st and 2nd degree piles at the time were inadequate.

Dr. Asafo-Agyei for a period of fifteen years (1980-1995) was a practising Hindu, who had risen to great heights in the Hindu faith. He claims to have built the Hindu temple at Daban from his personal resources in 1995. However, it was in that same year that he abandoned the Hindu faith and returned to his Presbyterian roots. According to him after building the temple, he felt lost and found himself in tears anytime he went into the temple for worship. He interpreted that to mean God was speaking to him, so in obedience to what he perceived as the voice of God, he left the Hindu temple and never went back. Between 1996 and 1997 he attended the Oasis Bible College, an affiliate of the Oasis of Love Chapel led by Rev. Kwabena Darko. Upon the completion of his studies he was awarded a Diploma in Theology and took up a teaching appointment at the same school from 1998-2002, where he rose to become the Dean of the Bible school.

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301 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
302 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
303 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
The Great Eternal Harvest International Ministry was founded in January 2003, at Daban a suburb of Kumasi, the Ashanti Regional capital by the Rev. Dr. Asafo-Agyei, with an initial membership of eight people. Church services initially took place under a canopy but ten years down the line the church holds its services in an ultra modern auditorium which has a seating capacity of about 2000 people. The church auditorium shares the same compound with the Asafo-Agyei Hospital.

According to the Rev. Dr. Asafo-Agyei the church was born out of the morning devotion held daily at the hospital before consultations began. The name Great Eternal Harvest International Ministry was chosen to reflect the group’s concern for the souls yet to be reached with the gift of eternal life found only in Christ. Thus, underlying the church’s mission is the quest to propagate the Gospel with specific emphasis on the gift of eternal life which is by the grace of God through faith in Christ. Accordingly, all that the church does including its medical missions are geared towards winning souls for eternal life.304

3.6.2.2 The Great Eternal Harvest Int. Ministry and the Theology of Health

Rev. Osafo-Agyei of the Great Eternal Harvest International Ministry holds the view that healing as previously preached by Charismatic church leaders such as Derek Prince, Kenneth Hagin, T. L. Osborne and their Ghanaian collaborators is not an accurate representation of either what actually took place during the earthly healing ministry of Christ or the teaching of the bible.305 Rev. Asafo-Agyei elaborates his understanding of faith healing/divine healing from the story of the Good Samaritan.

…But a certain Samaritan, as he journeyed came where he was and when he saw him, he had compassion. So he went to him and bandaged his wounds, pouring on oil and wine, and he set him on his own animal, brought him to an inn, and took care of him. (Luke10:33-34).

304 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
305 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
According to Rev. Asafo-Agyei, the application of the oil and wine, which are physical elements, to the wounds of the victim of the attack, is an indication of Christ’s acceptance of medicine as a necessary ingredient in achieving healing. Rev. Asafo-Agyei argues further that the ‘inn’, where the victim was accommodated and catered for after the First Aid was applied, could be nothing more than a clinic. It is from this basis that the Great Eternal Harvest International Ministry believes that its attachment to the Asafo-Agyei Hospital is in consonance with the quest for faith healing /divine healing.\textsuperscript{306}

Rev. Dr. Asafo-Agyei is of the view that many illnesses could be prevented if people had basic knowledge of preventive healthcare methods. Thus, people fall sick because they lack this knowledge. Quoting from the book of the prophet Hosea, ‘My people perish for lack of knowledge’ (Hosea 4: 6), Rev. Asafo-Agyei further stated that knowledge about diet, personal hygiene, hereditary etc. are important requirements for maintaining good health. The Great Eternal Harvest International Ministry therefore recommends that to regain or maintain good health, a person must consume a balanced diet, maintain a regimen of bodily exercise, get sufficient rest, and avoid over-eating, excess intake of alcoholic beverages as well as fatty and salty foods.\textsuperscript{307}

Throwing further light on healing, Rev. Asafo-Agyei maintains that the Great Eternal Harvest International Ministry recognizes two forms of healing namely; physical healing and spiritual healing. Physical healing the church believes, deals with ailments that require the application of orthodox medicine such as the treatments of wounds and sores or malaria and diseases that affect the body directly. In such cases, although the church believes in Christ as healer, there is always a combination of medicine and prayer to

\textsuperscript{306} Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
\textsuperscript{307} Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
achieve healing. According to Rev. Asafo-Agyei, the church also sees the sacrament of communion as a healing instrument, which when properly appropriated, can bring about both spiritual and physical healing. Thus according to the theology of the Great Eternal Harvest International Ministry, the communion bread, which symbolizes the body of Christ, when eaten, caters for the healing of the human body whilst the wine, which symbolizes the blood of Christ, takes care of sin as well as sickness which have spiritual origins and thus requiring spiritual healing.

Spiritual healing is also required for illnesses that the doctors could not cure, and in such cases must be dealt with by prayer. The Great Eternal Harvest International Ministry also maintains that there are sicknesses that occur as a result of the consequences of sin and in such cases confession, repentance, counseling and ‘prayer of restoration’ are required to achieve healing. Rev. Asafo-Agyei however, was quick to caution that to describe ‘miraculous healing’ as the only type of healing that qualifies as faith/divine healing would be erroneous. He stated further that, there have been several instances where patients on admission at the hospital have experienced healing through prayers offered during morning devotion.

He noted that previously Muslims who visited the hospital tended to shun the morning devotions. However, when some Muslims on admission began experiencing healing, and went on to give testimonies of their healings, attitudes of Muslims who visit the hospital have changed immensely. These miraculous healings, Rev. Dr. Asafo-Agyei maintain, do not occur all the time and it would subsequently be erroneous if not presumptuous, to

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308 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
309 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
310 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
wait for such miracles. So, in the mean time, the doctor must do his job until the “miracle healing” happens.\textsuperscript{311}

Rev. Osafo Agyei presents a list of the causes of illnesses for which healing is required as: Demons, hereditary, neglecting the body through poor diet, injury, obesity, stress and depression, germs and bacteria, unworthily partaking of the communion, an unforgiving spirit which will eventually lead to cardiac problems etc. In the light of these, Rev. Asafo-Agyei is of the view that to achieve healing one must identify the cause of the illness since the cure to some of these ailments require a plain, straight forward medical intervention rather than prayer or fasting.\textsuperscript{312} With this as the basis of the church’s theology on healing, we proceed to probe the healthcare delivery services of the Great Eternal Harvest International Ministry.

3.6.2.3 The Great Eternal Harvest Int. Ministry and the Asafo-Agyei Hospital

The Asafo-Agyei Hospital was established in 1980, followed by the church, the Great Eternal Harvest International Ministry in 2003. It seems as if after over 20 years of medical practice the Rev. Dr. Asafo-Agyei came to the realization that reliance on orthodox medicine alone in bringing about healing is inadequate. The fact that he joined his medical practice to the activities of the Charismatic church he leads seems to suggest so. The Asafo-Agyei Hospital shares the about 12 acres compound with the Great Eternal Harvest International Ministry’s headquarters at Daban. The Hospital was established to offer General Health Services.

\textsuperscript{311} Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
\textsuperscript{312} Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.

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Apart from this innovative and effective method for the treatment of Piles, the hospital under the auspices of the church also organizes free medical screening once every year. Radio announcements are made in advance for about a week concerning the impending free medical screening. During this exercise, diseases are diagnosed and patients are given drug prescriptions at no cost. The hospital under the auspices of the church holds regular talk shows on Hello- FM, (radio) discussing health issues with a major emphasis on preventive methods and personal hygiene.313

The church’s health education is further extended to surrounding towns and villages through the medical and evangelism team of the church. Rev. Dr. Asafo-Agyei recalls an incident when his medical outreach team visited a prayer camp in one of the towns on the outskirts of Kumasi. A person said to be manifesting the symptoms of demon possession had been chained to a tree and was said to be undergoing deliverance. When the ‘deliverance candidate’ was subjected to some laboratory tests, typhoid fever was detected and when given medical treatment, the patient (or demon possessed) recovered dramatically over a reasonable period of time. Based on his assessment of the sanitary conditions at the prayer camp, Rev. Dr. Asafo-Agyei recommended laboratory tests for all the eight pastors of the prayer camp, and results revealed that seven out of the eight pastors including the senior pastor were all infected with varying degrees of typhoid fever. They were all referred to the Asafo-Agyei hospital for treatment and the senior pastor was on admission for three weeks.314

313 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi. (Hello FM is a Kumasi Based FM radio station which awarded Rev. Dr. Asafo-Agyei a Certificate of Appreciation for his health education on radio in May, 2006).
314 Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
The Asafo-Agyei Hospital also operates a ‘sick but poor’ facility for both church members and non-church members. According to Rev. Asafo-Agyei the hospital treats about 1000 patients free of charge annually, but was quick to emphasize that all these philanthropic acts are in line with the church’s mission to use the hospital as an evangelism tool. The fact that the Asafo-Agyei Specialist Piles Clinic is the only one of its kind in the Ashanti Region, serving the region and beyond is indicative of its immense value to the community it serves. Unlike the Manna Mission Hospital, the Asafo-Agyei Hospital is not a member of the Christian Health Association of Ghana (CHAG).\textsuperscript{315} Rev. Dr. Asafo-Agyei expressed surprise when the current researcher informed him of the benefits to be derived from being a member of CHAG, such as government paying the salaries of up to 70% of hospital staff and the tax exemptions to be enjoyed from the importation of medical equipment.

\textbf{3.7 Conclusion}

The programmes that come under the social ministry of these Charismatic churches under review may be small in comparison with that of the mainline churches. However, it is significant because, it represents a paradigm shift in the ethos of Ghanaian Charismatic Christianity. The impact of these programmes on church members and society in general is also significant in terms of providing Christian education which aims at building moral values in their pupils and students, where a vacuum was virtually created by the government’s takeover of church schools immediately after Ghana attained independence. The ICGC’s University has also created avenues for Senior High School graduates and workers to access University education where the opportunity did

\textsuperscript{315} Rev. Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
not exist by the sheer number of students who qualified yearly for admission into Public Universities *vis-a-vis* the limited spaces available.

Medical doctors/pastors of these church-operated hospitals are also combining medicine, prayer and preventive methods through education of their members and the general public in their practice thus, providing holistic healthcare and also satisfying the African worldview of healing which embraces both the material and spiritual approaches. This also represents a departure from what obtains at the government hospitals where treatment is limited to diagnoses and administration of drugs. Although these initiatives are not new to Christianity in this country, they must be seen as the maturing of Charismatic Christianity in Ghana and their quest to remain socially relevant on the Ghanaian Christian landscape.
CHAPTER FOUR
CHARISMATIC CHURCHES' PROVISION AND DELIVERY OF EDUCATION AND HEALTHCARE AS SERVICE OF LOVE (DIAKONIA)?

4.1 Introduction

In Chapter One, we established the fact that some research work conducted on Ghanaian Charismatic churches has revealed that initially, social ministry among Charismatic churches was not a popular phenomenon. However, our discussions in Chapter Three point to some changing trends, in which some Charismatic churches are actively involved in the provision of social services through their contribution to the development of education and healthcare. Therefore, there appears to be a paradigm shift in some Charismatic churches’ attitude towards social ministry.

This chapter will therefore attempt to analyze the selected Charismatic churches’ activities in the areas of education and healthcare within the context of diakonia (service of love inspired by the example of Christ). Firstly, this chapter examines the influence of the mainline churches on the changing trends in Charismatic churches’ attitude to the provision of education and healthcare. Secondly, this chapter further discusses why these selected Charismatic churches are placing emphasis on education and healthcare as a social ministry. The chapter moreover discusses how these programmes are influencing or contributing to the lives of their church members and the society as a whole. The purpose is to determine the extent to which these educational and healthcare programmes are being carried out in the spirit of diakonia.
4.2 The Influence of the Mainline churches on Charismatic churches’ Educational and Healthcare Initiatives

In Chapter Two, we discussed the fact that the mainline churches have always combined their mission activities with social ministry. The developments of formal education, and the introduction of Western medicine to the Gold Coast, for instance, were to a large extent the initiatives of the missionaries and their respective mission churches. Subsequently, these mission churches demonstrated that the good news of the gospel does not only come with spiritual blessing, but also with material or physical blessings. Thus, the mainline churches have made themselves spiritually, as well as socially relevant to the existential challenges of their converts and society in general.

4.2.1 Influence on Charismatic churches’ Education /Scholarship Initiatives

In Chapter Two, we drew the conclusion that the introduction of formal education by the mission churches brought about various positive changes to the people and society as whole. Through education, the indigenes were introduced to the skills of reading and writing, as well as the speaking of the English language, which united the country by providing a common means of communication. Education also helped to alter the political structure of the country from the local to the national level, culminating in the attainment of independence. Formal education also opened up the domestic economy by creating new avenues of work. Underlying all these efforts of the mission churches was the theological concept of diakonia. It appears that the motives of the mission churches were not profit-driven, rather they were driven by the love of Christ to render social

ministry, so that in some instances, even schools were run free of charge.\textsuperscript{317} It is important, however, to point out that other factors, such as evangelism and the winning of converts were also motivating reasons for the missions’ social ministry.

Looking at how the mainline churches have influenced society through their social ministry, it appears that the social service initiatives of the mainline churches have influenced the Charismatic churches. For instance, Rev. Kofi Otchere of the ICGC did not rule out the fact that their church’s educational programs have been influenced by the mainline churches. He confided that one of the most significant areas through which a church could contribute to the development of church members and society was through education. However, this path has already been charted by the mainline churches by the establishment of several hundreds of basic and secondary schools.\textsuperscript{318} There is no denial, therefore, of the fact that ICGC’s involvement in the provision of education is in continuity with what has been done by the mainline churches. It is believed that ICGC, having learnt from the tradition of the mainline churches, is creating the avenue for those students with the capability to pursue further education through its university.\textsuperscript{319}

Rev. Dr. Daniel Walker expressed the view that the legacy of the mission churches in Ghana is the mission schools and hospitals. According to him, what some Charismatic churches are offering by way of social ministry should be seen as a form of ‘reverse flow missionary approach.’\textsuperscript{320} In his view, the mission churches used the social ministry to

\textsuperscript{317} For example, the Catholic schools in Elmina initiated by Father August Moreau around 1882 were free of charge and led to the attraction of several hundred pupils within a short time. See Debrunner, \textit{A History of Christianity in Ghana} (Accra: Waterville Publishing House, 1967), p.220.

\textsuperscript{318} Rev. Kofi Otchere, Interview, 26 May 2013, Christ Temple, Accra. (The interview was conducted by the researcher).

\textsuperscript{319} Rev. Kofi Otchere. Interview, 26 May 2013, Christ Temple, Accra .

\textsuperscript{320} Rev. Dr. Daniel Walker is a Pentecostal Scholar and Dean of Students of The Pentecost University College, Accra. Interview was conducted on the 7th May, 2013 in his office on the premises of the Pentecost University College, Accra. (Interview was conducted by the researcher).
draw members to their churches, and it stands to reason that some of the leaders of the Charismatic churches, their parents or grandparents, may have enjoyed some of the social services provided by these mission churches. Thus, these mission churches have impacted their lives in one way or the other, and the only way to give back to society the benefits derived from these mission churches is to contribute to the development of education and healthcare. Rev. Walker is also of the view that the mission churches have impacted the current trends in Charismatic churches’ social ministries, because it was the mainline churches that created the awareness in the first place of churches contributing to the development of scholarship and healthcare in Ghana.321

Rev. Walker further remarked that in the 1980s, when government ordered all church leaders to register their churches with the Interior Ministry, government was under the impression that Pentecostal/neo-Pentecostal churches were not contributing to social development as their mainline counterparts, and made it very difficult for these to register. Thus, government action in the past against the Pentecostal/neo-Pentecostal churches could also account for the current interest of the Charismatic churches in social ministry. Therefore in his opinion, the impact of the mainline churches on the Charismatic churches’ social ministry has been positive.

4.2.2 Influence on Charismatic churches’ Healthcare Initiatives

The contribution of the mainline churches towards the development of modern healthcare in Ghana and the continuation of such efforts to the present day, from earlier discussions, have been immense. The introduction of Western medicine by the mission churches helped to improve the quality and extension of life. For example, the discovery

321 Rev. Dr. Daniel Walker, Interview, 7 May 2013, Accra.
by Sir Ronald Ross around 1890, that the Anopheles mosquito was the carrier of the malaria parasite and the subsequent introduction of appropriate preventive and curative measures, also contributed to the well-being of society.\textsuperscript{322} The mission-initiated healthcare systems were also the means by which healthcare became organized in Ghana.\textsuperscript{323} In a similar fashion to what the mission churches did in the area of education, the underlying principle of the mission churches’ contribution to the development of healthcare was the theological concept of \textit{diakonia}; service of love rendered to the needy. The motives were not profit-driven.\textsuperscript{324}

Even though it may appear that the healthcare services of Charismatic churches is in continuity with similar efforts of the mainline churches, Rev. Dr. Asafo-Agyei of the Great Eternal Harvest International Ministries expressed the view that the healthcare programme of his church is the result of his personal experience in medical practice and not as a result of any influence from the mainline churches.\textsuperscript{325} According to him, he realized from practice, that when patients came to the hospital, they could not differentiate between the physical and spiritual causation of illness. Subsequently, he realized that several of the patients had resorted to various unhygienic, ineffective and sometimes harmful methods in the frantic quest for healing. With the birth of the church, however, it became prudent to combine the preaching of the gospel with healthcare, particularly in the areas of preventive healthcare, so that church members would be properly informed on health matters from both the spiritual and medical perspectives.\textsuperscript{326}

\textsuperscript{323} See S. Addae, \textit{The Introduction of Western Medicine in Ghana1880-1960}. Addae argues that prior to the introduction of Western medicine in Ghana, the healthcare system in Ghana (then Gold Coast) was in disarray with traditional medicine having no clues about how to treat certain contagious and infectious diseases. pp 11-12
\textsuperscript{324} Omenyo, ‘A Comparative Analysis’. p.17.
\textsuperscript{325} Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
\textsuperscript{326} Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
Rev. Dr. Asafo-Agyei made the point that; the Asafo-Agyei Hospital existed over a decade before the establishment of their church. In the light of this, he would not subscribe to the notion that his church’s social ministry has been influenced by that of the mainline churches. According to him, their social ministry is a direct response to a social need within the environment in which they operate. This means that even though it is responding to a social need of the people, the healthcare initiative was not established with the understanding of *diakonia*. This position however, raises some interesting issues. For example, in Ghana, religion has always been known to associate with healthcare. It is also common knowledge that the major purveyors of Western healthcare on Ghanaian soil were the early Western missionaries who combined healthcare with the propagation of the gospel. It follows therefore that the standard had already been set by the mainline churches. Subsequently, Rev. Asafo-Agyei’s independent position does not negate the fact that his church is following in the steps or path already charted by the mainline churches.

In sharp contrast to the position of Rev. Dr. Asafo-Agyei, Rev. Dr. Ablorh of the Manna Mission Church expressed the view that there are two sources that have influenced the social ministry of his church. Rev. Ablorh studied medicine at the Oral Roberts University in the USA, where the integration of prayer and medicine was encouraged in medical practice and Christian outreach programs. On his return to Ghana after graduation, he realized that the mainline churches were already combining their church activities with healthcare delivery or prayer and medicine. These mainline churches had constituted themselves into the Christian Health Association of Ghana (CHAG), which provided healthcare to a substantial percentage of the Ghanaian population. He stated

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327 Rev. Dr. Ablorh, Interview, 5 May 2013, Teshie Accra.
that the Catholic Church in particular was miles ahead of all the other mainline churches in providing healthcare to the population, especially in the rural areas.

In the view of Rev. Ablorh, the Manna Mission Church joined the CHAG only to realize that their contribution was very small indeed. He thus posits that the healthcare ministry of the Manna Mission Church has been greatly influenced by that of the mainline churches. Rev. Ablorh further stated that, ‘Charismatic churches are learning from the mainline churches; what we are doing in the area of healthcare is in continuity with what the mainline churches have been doing for a long time.’ He further stated that other Charismatic churches such as the Lighthouse Chapel International, and some classic Pentecostal churches such as the Church of Pentecost and the Assemblies of God are members of the CHAG, and have all in his view been influenced to a large extent by the healthcare ministry of the mainline churches.

4.3 Charismatic churches’ Emphasis on Education and Healthcare

Mainline churches in Ghana have always placed emphasis on the development of education and healthcare. Some of the underlying factors that motivate their actions are theological, evangelical and socio-cultural, among others. In the ensuing discussions, we will attempt to explore the motivations behind the selected Charismatic churches’ emphasis on education and healthcare. The exploration is intended to verify whether these churches are merely following in the steps of the mainline churches or are providing answers to specific contemporary needs in the church as well as the society in general.

328 Rev. Dr. Ablorh, Interview, 5 May 2013, Teshie Accra. (Interview was conducted by the researcher.)
4.3.1 Motivation for Charismatics’ Emphasis on Education

Education is increasingly becoming one of the important areas Charismatic churches are paying attention to in their provision of social ministry. It is the level of importance that Charismatic churches assign to this aspect of their social ministry that lends itself to the discussion on, and the reason for, the emphasis on education. The selected Charismatic churches that have been studied in this research view their social ministry as representing a paradigm shift in the Charismatic ethos and the quest for social relevance. In a discussion with Rev. Dr. Ablorh of the Manna Mission Church, he made reference to the fact the mainline churches accord the Charismatic churches that are involved in social ministry a great deal of respect because, according to him, these are the marks of holistic church mission and they can see we are growing in that direction.\textsuperscript{329}

The study revealed that one of the reasons for the keen interest expressed by the Charismatic churches in providing (both secular and theological) education stems from their re-reading of the Bible. Charismatic churches are now re-interpreting\textsuperscript{330} various texts in the Bible, thus highlighting the relevance of education. For example, in chapter Three of this work, Pastor Otabil, the leader of the ICGC has re-interpreted the Genesis mandate: ‘Be fruitful, multiply and subdue the earth’ (Genesis 1:28) to mean the development of the talent(s) of every individual believer. For Pastor Otabil, development in this case includes formal education. Thus, contrary to the previous perception that Charismatics always want to escape from this world, their current concern for social ministry especially in the area of education is introducing a new Charismatic ethos. Accordingly, Donald E. Miller and Tetsunao Yamamori, authors of the work, \textit{Global

\textsuperscript{329}Rev. Dr. Ablorh, Interview 5 May, 2013.
\textsuperscript{330}Ghanaian Charismatics are prone to interpreting the Bible in such a way that the Bible can speak to challenging situations in their day to day lives including socio-economic issues. See for example C. N. Omenyo, “The Spirit Filled goes to School; Theological Education in African Pentecostalism.” \textit{Ogbomosi Journal of Theology} xiii (2) 2008. p. 46.
Pentecostalism: The New Face of Christian Social Engagement, are of the view that because:

Pentecostals (including neo-Pentecostals) have become upwardly mobile, better educated and more affluent; they have begun to view the world differently. Pentecostals no longer see the world as a place to escape – the sectarian view - but instead as a place to better. Reading the bible from the perspective of wanting to make the world a better place, Pentecostals have began to model their behavior after a Jesus who both preached the coming kingdom and healed people and ministered to their social needs.

It can therefore be argued that Ghanaian Charismatics are not exempted from this new phenomenon of emulating the example of Christ (which has been practiced by the mainline churches all along). They do not concentrate only on the kingdom, but also make attempts to alleviate the problem of illiteracy, which is identified as one of the main problems retarding the development of peoples and nations especially in the ‘Two-Thirds World’. Some Charismatic leaders such as Rev. G. Kisseih indicated that with a renewed attitude to engage society, they believe they have a responsibility to contribute to the manpower development of their churches and society in general. Thus, they have identified education as a major tool for training skilled labour which is necessary for national development.

In a similar vein, Rev. Kofi Otchere, speaking on behalf of Pastor Otabil, is of the view that education is essential for the proper running of their churches in the areas of preaching and church management. Consequently, their emphasis on education is not only for the benefit of the general society, but also for the benefit of their individual churches. Thus, their involvement in the development of education would ensure that the era when almost every existential challenge was attributed to spirits in Charismatic


332 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota.
theology is put in proper perspective. The present head of the Daniel Institute of the ICGC also expressed the opinion that, for their members to function properly in the global world the church members should be skilled and marketable candidates who would combine the wisdom and divine grace obtained from God and the secular training obtained from school. As indicated in Chapter Three, one of the criteria for the selection of candidates for admission into the Daniel Institute of the ICGC for theological and spiritual training was a first degree from a recognized university. This, in one way or the other, points to the importance they attach to secular education. Graduates of the Daniel Institute are expected to combine pastoral work with their secular work and bring their Christian values to bear on their work.

Furthermore, Charismatic churches’ involvement in the provision of education appears to have some social relevance. In this regard, Asamoah-Gyadu expresses the view that corporate organizations make themselves socially relevant by what is called Corporate Social Responsibility (CSR) as a means of addressing some of the social challenges in their locality of operation. Therefore, if the Charismatic churches are to make themselves socially relevant, it is important for society (the people) to feel their usefulness in more concrete terms besides the spiritual functions of prayer, and worship, among others. Thus, Charismatic churches’ contribution to education must be seen as a socially relevant gesture. Asamoah-Gyadu further expressed the view that as these churches grew in numbers with a corresponding increase in resources, it was expected

333 Rev. Kofi Otchere. Interview, 26 May 2013, Christ Temple, Accra. (The interview was conducted by the researcher).
334 Rev. Dr. Priscilla Nketia, Interview, 10 April 2013, Miotso, Prampram.
335 Rev. Prof. J. K. Asamoah-Gyadu, Interview, 4 May 2013, Legon. (The interview was conducted by the researcher).
336 Rev. Prof. J. K. Asamoah-Gyadu, Interview, 4 May 2013, Legon.
that some of these financial resources would be directed into social programs such as schools that would serve their members and society as a whole.

Expressing his views on the reasons why Charismatic churches are contributing to the development of education in Ghana, Rev. Kofi Otchere observed that Charismatic churches’ involvement in the provision of education comprising both the theological and secular, must be viewed as a symbol of stability and maturity of their churches.\footnote{Kofi Otchere, Interview, 26 May 2013, Christ Temple, Accra.} Rev. Otchere recalled the early days of the Charismatic churches when critics referred to them as ‘mushroom churches’, indicating the temporary nature of their existence. Apparently, the term ‘mushroom churches’ was used to refer to neo-Pentecostal churches also in Nigeria. Commenting on their emergence and growth in Nigeria, for instance, Ayegboyin says:

\begin{quote}
We observed that the New Pentecostal Churches (NPCs) that developed during this period realized this growth by undercutting the MICs and, to a large extent, by displacing the AICs. Quite a number of them started as Bible Study groups or Prayer Fellowships before they metamorphosed into all-inclusive ministries. Magnetic leaders who left Charismatic movements within the mainline churches or broke away from some established Pentecostal founded most of the ministries. A great number continue to pull the crowds and have them in their grip. What is more, they proliferate like mushrooms even though a few of them disappear just as quickly.\footnote{D. Ayegboyin, ‘Dressed in Borrowed Robes’. \textit{Ghana Bulletin of Theology}. 1 (2006), p.40.}
\end{quote}

Thus, Charismatic churches’ engagement with society, not only in spiritual matters, but in a crucial function as providers of quality education, is a notification to critics of their permanent residence on the Ghanaian religious scene. The establishment of a University by a Charismatic church should also be seen as a sign of maturity in Ghanaian Charismatic Christianity. As stated in Chapter Two, the mainline churches utilized their schools as nurseries for their church growth and subsequent stability. Thus, Charismatic churches following the examples of the mainline churches see their contribution to

\begin{thebibliography}{9}
\item Kofi Otchere, Interview, 26 May 2013, Christ Temple, Accra.
\end{thebibliography}
development of scholarship as a means to perpetuate their stay. Incidentally, the findings of this study however indicated that not all the students in the Charismatic church schools belonged to their churches or Charismatic Christianity. This notwithstanding, Charismatics are optimistic that the small percentage that share the Charismatic fervor is sufficient to guarantee them a continual place in Ghanaian Christianity.  

4.3.2 Motivation for Charismatic churches’ Emphasis on Healthcare Services

Besides their emphasis on faith healing, some Charismatic churches are also operating health centres, medical outreach programs, and health education both on radio and at Pastor’s conferences. Both churches understudy in this work operate the bulk of their healthcare services from their churches, which serve as their medical base. The two hospitals both offer out-patient as well as in-patient consultations and general medical as well as specialist care. These Charismatic churches were found to be engaged in providing healthcare to their members because, first of all, these pastors are medical doctors who hold the view that healthcare is primary to man’s survival.  

In addition to this the doctors/pastors hold the opinion that their churches could perform their tasks better if the church members were healthy and full of vitality. It seems this understanding among Charismatic pastors about the importance of good health among their members also underlies the outreach ministries of other pastors such as Bishop Dag Heward-Mills of the Lighthouse Chapel International and Dr. Ntiamoah Mensah of the Christian Professionals Fellowship.

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339 Rev. Dr. Gordon Kisseih, Interview, 5 December 2012, Achimota. (Interview was conducted by researcher)  
340 Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.  
341 Dr. Asafo-Agyei, Interview, 16 March 2013, Kumasi.
Some respondents from both churches also indicated through their answers, that the fact that their pastors are medical doctors gives them the assurance that when they find themselves in medical crisis they could obtain professional help from someone they know, so some people joined the churches basically because of the healthcare programmes of the church. It follows from responses such as these that the churches’ involvement in healthcare is contributing indirectly to numerical church growth. Thus, church growth may be counted as a good reason and consequence for these churches’ involvement in healthcare delivery.

It would be observed that socio-culturally, in African traditional societies, as Mbiti put it, the medicine men are the greatest gift, and the most useful source of help...every village in Africa has a medicine man within reach, and he is the friend of the community. He is accessible to everybody at almost all times, and comes into the picture at many points in individual and community life.\(^\text{342}\)

Responses from some church members seem to suggest that they see their pastors in a similar light as the traditional medicine man; a friend endowed with medical knowledge and spiritual power. In a summary of the duties of the medicine man in African societies in general, Mbiti writes:

First and foremost, medicine men are connected with sickness, disease and misfortune. These are generally believed to be caused by the ill-will or ill-action of one person against another, normally through the agency of witchcraft and magic. The medicine man has therefore to discover the cause of the sickness, find out who the criminal is, diagnose the nature of the disease, apply the right treatment, and supply a means of preventing the misfortune from occurring again... Thus the medicine man applies both physical and 'spiritual' (or psychological) treatment, which assures the sufferer that all is and will be well. The medicine man is in effect both doctor and pastor to the sick person.\(^\text{343}\)

The pastors of these Charismatic churches seem to find themselves in a very similar position, the difference being that these pastors combine Western medicine with prayers offered to the Christian God, whilst the traditional medicine man combines herbal medicine with supplications to the ancestors or divinities for healing. Commenting on medicine and religion, Kofi Asare-Opoku expressed the view that:

The practice of medicine is closely tied up with the practice of religion in Africa… religion in Africa covers every facet of life and helps man to cope with all the vicissitudes. It is therefore natural that matters pertaining to health not only with regard to its restoration after sickness but, also to its general preservation be not left out of religious considerations.\textsuperscript{344}

In the light of these considerations it may be argued that these Charismatic churches are fulfilling a very important socio-religious role in the lives of their members and traditional societies. Both church hospitals studied in this research are situated in traditional localities (Teshie and Kumasi), where the indigenous worldview of cause and effect on life matters are widely upheld.

Commenting on the subject of cause and effect in the traditional setting, Rev. Dr. Ablorh gave the example of a hypothetical Mr. Mensah, a fisherman who is mending his nets with his colleagues under a tree. According to Rev. Ablorh, Mr. Mensah would want answers as to why a piece of dead wood branch would fall on him and not the other person. To him there must be a reason, and various reasons may be assigned to this. Consequently, Mr. Mensah would visit the traditional medicine man for some herbs to heal the wound if he sustained one and also find out who was behind it and why.\textsuperscript{345} Ayegboyin corroborates this traditional African worldview even among Charismatics when he stated that, ‘on the causes of sicknesses and diseases, as with AICs, the neo-

\textsuperscript{345} Rev. Dr. Ablorh’s position represents a general worldview of Africans. See John Mbiti, \textit{African Religions and Philosophy}, p.165. Mbiti makes a similar illustration which seems to corroborate Rev. Ablorh.
Pentecostal churches accept the commonly-held traditional view that sickness may be caused by the machinations of witches, sorcerers and implacable enemies.\(^{346}\) It is within this socio-religious environment that the Church hospitals operate, and that makes the combination of medicine (which is supposed to heal the wound) and prayer (a spiritual exercise that is supposed to counter any spiritual activity of an enemy) more relevant to the people.\(^{347}\)

Theological reasons may also be assigned for the engagement of Charismatic churches’ in healthcare delivery. In Chapter Three, one outstanding theology of Charismatic churches is the ‘Faith Gospel’ which states among others, that through the sufferings and death of Christ, the believer has dominion over sin, sickness and poverty. From this theology flows the faith healing doctrine. The term ‘Faith Healing’ is used in reference to the belief by some Christians that God heals people through the power of the Holy Spirit, often involving the laying on of hands. It is also called supernatural healing, divine healing and miracle healing.\(^{348}\)

Asamoah-Gyadu describes faith healing among the Charismatics as an anti-medicine doctrine that regards the use of medicine and prophylactic substances for the healing of sickness and disease as sin.\(^{349}\) Discussing the practice of what seems to be faith healing among Ghanaian Charismatics, Asamoah-Gyadu stated further that, generally no serious

\(^{347}\) Rev. Dr. Ablorh, Interview, 26 November 2012, Teshie-Accra.
\(^{348}\) See for example D. Prince, *Foundation Series; Laying on of hands, Resurrection from the Dead, Eternal Judgement* (Reading: Cox &Wyman Ltd., 1986), pp.15-20. Derek Prince uses Jesus’ commands to the disciples as recorded in Mark 16:17-18 ‘…in my name …they will lay hands on the sick and they will recover’, as a means whereby physical healing may be ministered to those who are sick. He also uses James 5:14-15 as another biblical mandate to minister Faith Healing. ‘Is any one among you sick? Let him call for the elders of the church and let them pray over him, anointing him with oil in the name of the Lord, and the prayer of faith will save the sick…’
Charismatic could either claim to live a sickness-free life or abstained from the use of medicine completely.\textsuperscript{350} He claims that although these doctrines were being propagated in the Charismatic churches, and the Church leaders could lay claim to some form of sickness-free life as a result of faith healing at one point in time, he believes that their relative sickness-free life must be attributed to the fact these church leaders were young and generally enjoyed the good health that comes with youthfulness. The situation is not the same today, as many of these Charismatic church leaders are middle-aged and are now confronted with the realities of aging and have thus revised their theology of faith healing to include the use of medicine.\textsuperscript{351}

It appears that Charismatic churches are involved in the provision of healthcare and Western medicine in particular because of their re-reading of the Bible. In Chapter Three of this study, the pastors/doctors interviewed both made reference to the same biblical text relating to the ‘Good Samaritan’ to justify the combination of medicine and prayer in their quest for healing.\textsuperscript{352} Although both pastors/doctors acknowledged their belief in miracle healing, they also shared a common opinion that medicine has its place in the healing economy of God. Thus, Ghanaian Charismatics are interpreting faith healing within the context of their peculiar situation into what may be termed as ‘Indigenized Faith Healing’.

The study also revealed that in addition to catering to the health needs of church members, these health facilities were open to the general public, and healthcare was extended to all who sought it, provided they could pay for the services. Until the

\textsuperscript{350} Rev.Prof. Asamoah-Gyadu, Interview, 4 May 2013.
\textsuperscript{351} Rev.Prof. Asamoah-Gyadu, Interview, 4 May 2013.
\textsuperscript{352} Both Rev. Dr Ablorh and Rev. Dr. Asafo Agyei in their interviews made reference to the story of the Good Samaritan in justifying the use of western medicine in combination with prayer.
introduction of the National Health Insurance Scheme (NHIS), these health centres operated as private business entities even though they are attached to churches. Fees charged are similar to those of other private hospitals in the metropolis. Free medical screening and treatment are however, offered when medical outreaches are organized by the churches. It is significant that although these health centres are privately owned, they all operate a ‘poor-but-sick’ facility. This is a facility that enables patients who cannot afford their medical bills to be catered for, free of charge.

In Chapter Two, we made reference to the mission hospitals of the mainline churches also offering the ‘poor-but-sick’ facility. It would be difficult to draw a conclusion that these Charismatic churches are involved in the provision of healthcare mainly for profit purposes. Mbiti commenting on the status of the medicine man even in traditional African societies says, ‘…in modern towns one still finds or hear of medicine men some of whom are quite prosperous both professionally and economically.’\(^{353}\) That is, payment for healthcare is not a strange phenomenon nor is it seen as exploitative by church members who utilize those facilities. It stands to reason therefore that these health centres should also make some wherewithal as reward for their services.

### 4.4 Impact of Charismatic churches’ Provision of Education and Healthcare on church Members

In Chapter Two, we discussed how the educational and healthcare initiatives of the mainline churches influenced the lives of their members. Being Christian became synonymous with being educated. Similarly, being in school also meant an introduction to Western medicine. In our previous discussion, we mentioned that the children in the

care of Rev. Philip Quaque were also given some form of medical attention in addition to formal education. In the ensuing discussion, we will attempt to probe how the educational and healthcare initiatives of the selected Charismatic churches have impacted the lives of their members.

4.4.1 The Impact of Educational Services on church members (Education)

How education, whether theological or secular, came to be looked down upon by Charismatic churches in the early days of the movement is open to various interpretations. It may be argued that because some of the pioneers of the Charismatic movement in Ghana, such as Duncan-Williams, Mensa Otabil, Agyin-Asare among others, did not have education beyond the secondary level, they did not encourage their members to either regard or pursue higher education. The irony, however, is that the majority of the members of the Charismatic Movement were themselves Scripture Union (SU) members in secondary schools and students of the tertiary institutions who were members of the University Campus Fellowship (UCF), and understood the full meaning of higher education.

The impact of the Charismatic churches’ educational initiatives on their members was revealed through responses from the questionnaires administered to church members. Almost all the respondents gave positive responses to the importance of education and the impact education has had on their individual lives. Those who have personally benefitted from the church school, especially the university, spoke of the fact that the university has opened an avenue for them to upgrade their knowledge and academic qualifications resulting in promotions in their work places. Some respondents were of the

view that the more you learn the more you earn so the opportunity created by the church
to enable church members upgrade themselves academically has had a positive impact
on their lives. Others, too, were appreciative of the fact that their children who could not
gain admission into the public universities, even though they had qualified, are now in
their church’s university. Still others expressed their appreciation about the fact that even
when their children gained admission into the public university; they were offered
courses that they (both parent and child) did not like. However, by attending the church’s
university, they could choose the courses of their own choice.

There were no limitations imposed as a result of religious affiliation or inclination.
Thus, accessibility to study at the church’s university, as well as the other pre-university
schools operated by the Charismatic churches, was very flexible. In granting access
however to students who applied to study at the university for instance, it seems the entry
requirements were in some cases lowered, prompting the National Accreditation Board
to order the dismissal of several hundreds of students from the Central University
College (CUC), in 2012.356

The question of the affordability of these church schools provoked mixed reactions from
the respondents. Opinions were divided among those who felt they were expensive,
moderately affordable, and affordable. In the case of the basic school for instance, and
in this case the Life International Schools, the responses that the fees are expensive may
be explained by fact that the school is situated in a low income area, and the initial
students of the school were children from low income backgrounds. To such parents, the

356 Available at News.peacefmonline/education/201206/120896.php (accessed 3/04/2013). It must be
pointed out that other private universities were also affected to varying degrees. This included the
Methodist University College, Christ Apostolic University, Pentecost University College among others.
current fees charged are expensive, whilst other parents who fall within the middle income bracket, and subsequently live outside the catchment area of the school and are also bringing their children to this school, consider the schools fees as moderate. Some of these parents are church members, while others are not.

In the case of affordability regarding the private university education, responses from the questionnaires administered pointed to a sharply divided opinion between those who felt the fees were too high and those who also felt it was moderate. Respondents who are members of the church felt that the fees were moderate whilst non-church members argued that the fees were too high. A good percentage of the student population is made up of workers, who are employed by both the public and the private sectors, some of whom are church members. The fact that these mature students are salary earners and are able to make arrangements with the accounts office for their fees to be paid by installment over a period of three months or the duration of the semester may explain their favourable response to the question of affordability.

However, it stands to reason that those on the other side, who fall within that category of students who are denied the opportunity to write their end of semester exams as a result of outstanding fees, may consider the fees too high. In addition to this, a comparison of the fees of other private universities in the country also indicates that Central University College charges fees that are relatively high. It is a matter of public record that students have protested against the high cost of fees charged at the Central University for various reasons. For example, the Daily Graphic of Friday, November 19, 2012

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357 See Table III on page 115 for a comparison of fees of other private universities in Ghana.
published an article by a 4\textsuperscript{th} year student of the university protesting against some of these high fees. Among other things, the student made the following observation:

\begin{quote}
…it is sad to note, however, that this university is condoning and encouraging some disgraceful acts all in the name of “Raising Transformational Leaders with Faith, Integrity and Excellence”… the school has made it a habit to oppress students with exorbitant fees, with no tangible explanation for the rise in the cost of living on campus. It appears CUC is an island on its own, with its own autocratic policies and life threatening rules that aim at one thing; ‘Extortion’.\end{quote}

The author continued to complain about increase in fees for a portion of students and a two-tier penalty of about GHC 175.00 for the late payment of fees. In the light of such protest, which to all intents, may be a representative view of a sizeable number of students, the response by a section of respondents that the fees are affordable appears quite questionable. However, it may be argued that the favourable response to the question of affordability given by some of these respondents (church members) is a subtle attempt to give the school, and for that matter the church, a good face. On the other hand, it could also be asserted that some of the respondents are genuinely in a position to pay by virtue of their financial status.

Funding for all these church schools programs are initially sourced from the church members through fund raisings and donations. In a gesture that seems like a reward for their contributions, CUC for example offers half scholarship to all students of the School of Theology and Missions. These Charismatic churches also offer some scholarships to students at the secondary level. For example, in Chapter Three, reference was made to the ICGC’s Central Aid Scholarship Program, which sponsors the fees of needy but capable students at the Senior High School level. Responses from the questionnaire

\begin{footnote}{Daily Graphic, Friday, November 19, 2010. p.10.}

\end{footnote}
indicate that several of the respondents have relatives, or know of church members who have been beneficiaries of the scheme.

From data gathered, it does look as if financial considerations may be one of the reasons for the Charismatic churches’ interest in contributing towards the development of education in Ghana, although none of the church leaders or their representatives interviewed gave that as a reason. A comparison of the average fees charged at the basic school (Primary 1-6) is presented for some selected schools in the Tema metropolis.

**Table 1: Some Primary schools in Tema and fees charged per term.**

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Average Fees per term (GH¢)</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Paul Methodist Primary School</td>
<td>200.00</td>
</tr>
<tr>
<td>St. John Bosco Catholic Primary School</td>
<td>35.00</td>
</tr>
<tr>
<td>Presbyterian Primary School</td>
<td>350.00</td>
</tr>
<tr>
<td>Creator Primary Schools</td>
<td>450.00</td>
</tr>
<tr>
<td>Life International Schools (LIS)Primary</td>
<td>460.00</td>
</tr>
</tbody>
</table>

*Source: Field Data-2013*

From Table 1, it can be seen that LIS charges fees which are similar to Creator schools, a privately-owned school. St. Paul Methodist Primary School which, as the name goes, belongs to the Methodist Church, is charging less than half of what LIS, the Charismatic church school, charges. According to the headmaster of the school Mr. James Mensah, although the Church runs the school as a private entity, due consideration is given to parents who fall in the lower income bracket and would want private tuition for their
children, thus the moderate fees. He further explained that the fees are what the school utilizes to pay teachers’ salaries and maintenance of school infrastructure.\textsuperscript{359}

It would also be seen from the table that the basic school belonging to the Catholic Church charges token fees. This is explained by the fact that the Catholic Church school is affiliated with the Government of Ghana through the Ghana Education Service (GES), and as such, the teachers are provided and paid for by the GES. Subsequently, the school is allowed to charge only token fees in the form of levies agreed upon by the PTA to cater for ICT training and other miscellaneous needs.\textsuperscript{360} However, the Presbyterian Church school charges fees close to that of the private schools. This is explained by the fact that the Presbyterian Church runs this school as a private school, employing and paying its teachers’ salaries above that of the GES teachers.

Mention has already been made in Chapter Three of the performance of LIS at the BECE of 2012. The school authorities claim their teachers are mostly university graduates. Although this may hold true for the Junior High School (JHS), and for which reason they may charge fees like any other private school (JHS), the teachers of the primary school were not university graduates but trained teachers of the Teacher Training Colleges and former Senior High School (SHS) students. It was however observed that the school premises were kept very clean. The fact remains however, that the LIS of the Miracle Life Gospel Church, a Charismatic church in Tema, is being run purely as a private profit-oriented institution.\textsuperscript{361}

\textsuperscript{359} Interview with headmaster of St. Paul’s Basic School, Mr. John Mensah was conducted on the 31st May, 2013 at the school premises in Community1, Tema ( interview was conducted by the researcher)
\textsuperscript{360} Mrs. Rose Annor, Interview, (Head teacher of St. John Bosco Primary School), 31 May, 2013.
\textsuperscript{361} View expressed by a church member on condition of anonymity. The church member confirmed that initial funding for the school project came from the church members’ contribution but presently, the school
Table II below shows the fees of LIC in contrast with other private and church schools in the Senior High School category in Tema. With the exception of LIC, all the other schools are day schools. This fact notwithstanding, the fees of LIC seems rather exhorbitant.

**Table II:** Some Church Senior High Schools in Tema and their fees per term

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Average Fees per term (GH¢)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presbyterian Senior High School (PRESECO) (day)</td>
<td>230.00</td>
</tr>
<tr>
<td>St. Paul Methodist Day Senior High School</td>
<td>240.00</td>
</tr>
<tr>
<td>Our Lady of Mercy (OLAM) Catholic School (day)</td>
<td>240.00</td>
</tr>
<tr>
<td>Life International College (boarding)</td>
<td>2,100.00</td>
</tr>
<tr>
<td>Tema High School (day)</td>
<td>450.00</td>
</tr>
</tbody>
</table>

**Source:** Field Data-2013

The table III below shows the fees per semester of CUC in contrast with some private church initiated universities in Ghana and their fees per semester.

**Table III:** Some church initiated private universities and the fees per semester.

<table>
<thead>
<tr>
<th>Name of University</th>
<th>Average Fees per semester (GH¢)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methodist University College</td>
<td>1,450.00</td>
</tr>
<tr>
<td>Presbyterian University College</td>
<td>1,450.00</td>
</tr>
<tr>
<td>Catholic University College</td>
<td>1,400.00</td>
</tr>
<tr>
<td>Central University College $^{363}$</td>
<td>1,800.00</td>
</tr>
<tr>
<td>Regent University College of Science and Technology</td>
<td>1,000.00</td>
</tr>
</tbody>
</table>

**Source:** Field Data-2013

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$^{362}$ The Life International College operates a boarding house system; however, their fees are relatively high.

$^{363}$ Students of the School of Theology and Missions at the Central University College pay about GH¢1,400.00 per semester, a discount of about 12%.

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Although the fees charged by these church schools are relatively higher than others in the same category, as with any organization that engages with the society, whether philanthropic or profit oriented, the availability of funding is crucial to its survival. In the case where the support coming from the church is not substantial, it stands to reason that some of these church schools would be found charging high fees.

One of the outstanding findings made by Stacey Tucker, regarding Pentecostals’ involvement in social ministry, was the fact that, ‘congregation size, income and access to resources are influential in a Pentecostal church participating in social ministry.’ Thus, although these Charismatic churches are not as large as some of the mainline churches that have very large membership and a corresponding large financial base, making it possible for them to subsidize the fees of their students or operate at break-even, the researcher is of the view that Charismatic churches can also charge fees that are affordable if they have diakonia in mind as a guiding principle. As the situation stands presently, the Charismatic churches’ provision of education does not fulfill the spirit and expression of diakonia. However, to make their schools affordable, Charismatic churches, like some of their Baptist counterparts, could also enter into partnership with various international philanthropic organizations that are willing to support such initiatives, provided there is transparency and accountability on the part of the recipient institution.

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365 In a discussion with Pastor Alfred Ofosu-Asante of the Ebenezer Baptist Church at Teshie Nungua Estates on the 4th October, 2012, (this Baptist Church runs a Basic to Junior High School, The Ebenezer Baptist School Complex on the church premises and charges fees that are approximately half of what the Life International School charges.) he opined that his church’s school fees are low because of the partnership that existed between his church school and a Dutch NGO (The Oikonomos Foundation) prior to the global economic crunch of 2010, which supported the running of the school. Although the overseas funding has ceased, the church continues to charge low fees, which according to Pastor Alfred, is intended to help the children in the locality gain access to quality, but affordable basic education.
4.4.2 Impact of Healthcare Services on Church Members (Health)

In Chapter Two, we established the fact that the introduction of Western medicine in the local situation impacted the lives of both church members and society positively. This was reflected in the changing attitudes, and its resultant improvement in the lives of the people. In attempting to explain the impact of the Charismatic churches’ healthcare programs on the church members, various issues surfaced as findings through the questionnaires administered, and through informal conversation with some church members. Some respondents indicated that the church’s interest in healthcare has brought new insights into their understanding of faith healing. This new insight into faith healing some respondents pointed out, was not for personal consumption only, but also had application in their evangelization efforts. According to some, the naivety of believing that every illness they encounter in the course of evangelization is to be dealt with through prayer alone, has been revised. These days, even when they pray for sick people, they encourage them to visit the hospital for check-ups.

Through informal conversations with respondent church members of the Great Eternal Harvest International Ministry (GETHIM), another issue that has been resolved is fasting for healing when one is sick. This practice has been determined to be dangerous, and a practice that can lead to early death, especially when the body has already been weakened by illness. In line with this, respondents have resolved that when they experience what seems to be no answer to their prayers for healing, blaming themselves for what they perceive as ‘lack of faith’ is untenable. Subsequently, they have resolved to take advantage of the church’s health facilities as God also works through doctors to bring about healing.
It is significant to note that another important impact on church members through the churches’ healthcare programmes was the linkage made by some respondents between Western medicine and traditional medicine. The linkage is that if prayer can be combined with Western medicine in the quest for healing, then similarly, prayer can also be combined with traditional herbal medicine in the quest for healing. To some respondents herbal medicine is good. On the other hand however, Rev. Dr. Asafo-Agyei did not give any approval for the use of herbal medicine. Owing to the churches’ health education programmes that goes on in the church and on radio, some respondents indicated that there is awareness about things that promote good health such as proper dieting, exercise and sufficient rest. Respondents also indicated that they are leading health conscious lives that aim at disease prevention.  

Respondents from both churches indicated that they have relatively easy access to healthcare, and moreover, the healthcare is also relatively affordable. The relatively easy access and affordability of these health services by the church members may also be attributed to the introduction of the National Health Insurance Scheme (NHIS), the effect of which was discussed previously. Prior to the introduction of the NHIS, church members who could not afford the cost of medical bills, took advantage of the medical outreach programs where free medical screening, free medicines and sometimes even free surgeries are conducted to obtain healthcare.

Mention has already been made in Chapter Four of seriously ill members who could only attend the hospital for treatment upon guarantee from any of the associate pastors. It is important to note that another challenge to healthcare that Appiah-Kubi highlighted was

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the high cost of medical treatment in the hospitals. Thus, the Charismatics seem to have found a way of making healthcare affordable to their members and society. Commenting on the accessibility of the church’s healthcare program, Rev. Dr. Asafo-Agyei, speaking in a rather low tone said, ‘Although I cannot announce free medical care from the pulpit, I cannot also turn away any church member who reports sick at the health centre without an NHIS card or any money.’

4.5 Social Ministry of Charismatic churches As Diakonia

In Chapter Two, we established the fact that diakonia is at the heart of what it means to be a church on a mission. The mission that the church undertakes is God’s mission; God reaching out in love to the universe He created, and particularly to the human beings who bear His image. Because Christ Himself came into the world to serve, the church as Christ’s representative on earth must follow Christ’s example of witnessing through service. In Chapter Two, we undertook a historical survey of some mission churches in social ministry, providing schools and health centres, all in the spirit and expression of diakonia. In recent years, we have witnessed various church missions, including the AIC’s, actively engaging in social ministry. Similarly, some Charismatic churches have also taken up the challenge to be socially relevant by their engagement in social ministry.

Kjell Nordstokke argues that diaconal action always implies concretely responding to situations of suffering, need and injustice. A recent publication of the World Council of Churches (WCC), states that diakonia is a term often used by Christian and church-related organizations to describe the work they do in response to the Biblical mandate to

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367 Appiah-Kubi, Man Cures, God Heals, p. 77.
368 Rev. Dr. Asafo-Agyei, granted the interview on the 16th march, 2013 at Kumasi. (Interview was conducted by researcher).
369 K. Nordstokke, Reflections on the Theology of Diakonia, p.224
do justice and respond to those who are poor.\textsuperscript{370} Subsequently, \textit{diakonia} has been defined as the active expression of Christian witness in response to the needs and challenges of the community in which Christians and the Church live.\textsuperscript{371}

Until recently, Charismatic churches in Ghana were not seen as engaging in social ministry. Their overriding concern was ‘on material prosperity, breakthroughs, power, health, wealth and success as indicators of God’s favour.’\textsuperscript{372} Charismatic churches did not consider even theological education as important, much less secular education. As Omenyo noted, ‘the attitude of African Pentecostals to academic theology was one of utter disdain, they perceived academic theology as anti-spirit that accounted for the negative growth of the mainline churches and referred to the main seminary of the mainline/historic protestant churches as cemetery’.\textsuperscript{373} In a similar fashion, Charismatics did not place any emphasis on the need to establish any health centres due to their belief and interpretation of faith/divine healing.

In Ghanaian Pentecostal/Charismatic Christianity, the idea of faith-healing can be traced to the Apostle Peter Anim, founder of the Apostolic Faith Mission, and later the Christ Apostolic Church. The underlying theology of faith-healing is derived from Isaiah 53:5, ‘...and by his stripes we were healed’ and I Peter 2:24. Charismatics also base their faith-healing practice on Mark 16:17, ‘In My name… they will lay hands on the sick and they will recover.’\textsuperscript{374} Charismatics interpret these texts to mean the avoidance of all

\textsuperscript{370} Cited in K. Nordstokke, \textit{Reflections on the Theology of Diakonia}, p.226
\textsuperscript{371} Cited in K. Nordstokke, \textit{Reflections on the Theology of Diakonia}, p.226
\textsuperscript{372} J. K. Asamoah-Gyadu, ‘From “Calvary Road” to “Harvesters International”: An African Perspective on the Cross and the Gospel of Prosperity’.
\textsuperscript{373} C. N. Omenyo, ‘The Spirit Filled goes to School, Theological Education in African Pentecostalism’.
\textsuperscript{374} See D. Prince, \textit{Foundation Series, Vol III, Laying on of Hands, Resurrection of the Dead, Eternal
prophylactics, but rather dependence on prayer, and in some instances a combination of prayer and fasting, to appropriate healing. In recent years however, Charismatics have modified their understanding of faith healing to include the combination of medicine and prayer. This notwithstanding, only a few Charismatic churches have established health centres to cater for the health needs of their members and society as a whole.

We established in Chapter Two, that in Ghana, the mainline churches have set the pattern of what it means to do mission within the local context, with their marriage of evangelization and social ministry. This means that to be relevant in the Ghanaian religious context as a church, the church must actively engage in social ministry, responding to the needs of its members and society. In the area of education, Miracle Life Gospel Church for example, engaged itself in the provision of basic education when the church realized the need for a Christian school within its catchment area of low income earners. Considering the initial intake of pupils, and the low fees that were charged at the beginning, it appears that the church’s action was in response to the needs and challenges of the community in which the church lives. This was a clear case of diaconal action.

However, in recent times Life International Schools(LIS) of the Miracle Life Gospel Church, has assumed the status of a high class school, and is charging fees that are well beyond the means of the underprivileged and low income earners within its vicinity. Even the few scholarships that the church grants are limited to the children of the

Judgement (Reading: Cox and Wyman Ltd., 1986). Pp.15-20. Rev. Prince also makes reference to James 5:14-15 where the application of the anointing oil in the name of the Lord is combined with prayer to appropriate divine healing. He also argues that God expects every sick Christian to seek Him first, for healing through faith and by spiritual means. p.17. See also Rev. James Nii Aponsah, Dynamics of Faith, (Accra:Advocate Publishing Ltd., 2006),pp.105-106. Rev. Aponsah narrates an example of the faith healing of a young woman through prayer after being diagnosed with breast cancer.
church’s own pastors. Such a school, although it is meeting a certain need in the society by its mere existence, when measured against the theological concept of *diakonia*, fails to meet the full expectations of a church actively expressing Christian witness in response to the needs and challenges of the community in which it lives. Although it can be argued that both LIS and Life International College (LIC) require adequate funding to operate, which cannot be disputed, the fees charged are relatively high considering the fact that other church schools in the same category have found ways and means of making their fees less expensive.

In a similar fashion, the International Central Gospel Church (ICGC), entered into the provision of tertiary education at a time when several thousands of Ghanaian students, who had qualified to enter the university, could not find admission at the nations’ few public universities. The creation of the Central University College (CUC) was, in the first place, a response to a social need and an attempt to mediate social justice. However, over the years the fees that the CUC charges its students has placed accessibility beyond the reach of many of its own members, as well as qualified but needy students in the society in general. From the table showing some selected private universities and their respective fees charged per semester in our previous discussion, CUC charges fees that are higher than all other universities in its category. CUC has become to a large extent a profit-oriented institution.

It may also be argued that Charismatic churches that are engaged in the provision of education are also in a prestige-building program to enhance their image, and not necessarily to relieve the needy in society. CUC is advertised during the beginning of each academic year in the electronic and print media as an educational initiative of
ICGC. A member of ICGC also informed this researcher that on a recent visit to one of ICGC’s churches in the USA, Otabil stated that with the kind of contribution the church is making towards the development of education in Ghana, the government would not dare touch the church.³⁷⁵ It can therefore be argued that the educational services rendered by these Charismatic churches, are not being done in the spirit of diakonia. This conclusion is based on the fact that for diaconal work to take place, the action must seek to do justice and respond to those who are poor.³⁷⁶

Mainline churches in Ghana have traditionally extended their social ministry to the rural areas where poverty and deprivation is endemic, and the support that is expected from the government is not always forthcoming, or inadequate, or both. Whilst it can be argued that the social ministries of the mainline churches are driven by the need to support the underprivileged, that is to say diakonia,³⁷⁷ the same cannot be said of the educational initiatives of the Charismatic churches.

Presently, the Catholic and Presbyterian churches have both established their universities outside the capital. The Catholic University is situated at Fiapre in the Brong-Ahafo Region, whilst the Presbyterian University is cited at Abetifi, Kwahu in the Eastern Region with proposed campuses at Agogo and Akropong. None of these towns are even regional capitals. These are deliberate attempts by these mainline churches to bring university education close to the rural folk. On the contrary, Charismatic churches like ICGC and Action Chapel International (ACI) have sited their universities in the urban

³⁷⁵ The church member who claims he was present at the said meeting is a Ghanaian resident in the USA.
³⁷⁷ A recent World Council of Churches (WCC) publication states that diakonia is a term often used by Christian and church related organizations to describe the work they do in response to the biblical mandate to do justice and respond to those who are poor. Cited from K. Nordstokke, Reflections on the Theology of Diakonia, p.226
centres. Omenyo, assigning reasons for the urban-centred nature of Charismatic churches’ projects, noted that, ‘it has been observed that due to the policy of financial sustainability, Pentecostal/Charismatic projects are mostly cited in the urban areas where patrons of the projects can afford to pay for the cost of the services they enjoy.’

Although Omenyo may be right in his assessment, it must however be borne in mind that these Charismatic churches themselves are urban-centered churches that are relatively young and have hardly spread to the rural areas.

Notwithstanding the above, another point worth noting is that although these Charismatic church schools may not be successful in converting people to the Christian faith, these schools have a broader and more profound socio-economic implication for the society, such as contributing to the individual, as well as manpower development of the nation, thus fulfilling an aspect of *diakonia*.

In the area of healthcare, we stated in Chapter Four that the attitude of Charismatics to healing and wellness was the belief in what they held as faith-healing. Various reasons have been assigned for the belief in faith-healing among Charismatics. Some of the reasons for church members’ belief and practice in faith healing are religious, cultural, economic and social.

Both Dr. Ablorh and Dr. Asafo-Agyei represent a redefinition of faith-healing. Although in Charismatic theology, the notion of faith healing is prominent, in practice none of the respondents thought that faith-healing was against the use of medicine. According to Dr. Ablorh, faith-healing is the restoration of health by the divine source (Jesus Christ) but

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For a full discussion on these factors see Evelyn Efua Arhin-Sam, *Ghanaian Pentecostal Medical Doctors in Faith Healing*. M.Phil. thesis (University of Ghana, Legon, 2011).pp81-84.
this restoration is done through various means, which includes medicine and medical doctors. Although the Charismatic churches engaged in the provision of education may be seen as profit-oriented, and may thus not pass as participating fully in the spirit and expression of *diakonia*, the case of the Charismatic churches in healthcare services is quite different.

According to some respondents from both churches, the introduction of the National Health Insurance Scheme (NHIS) has also contributed to the relatively easy access to healthcare by church members. Prior to the NHIS, these pastors had already identified the health needs of their localities, and the relief their health centres could bring to their localities with the citing of the health centres in those places. The ‘poor but sick’ facility available at both hospitals also represents their appreciation of the concept of *diakonia*. Coupled with this is the holistic approach to healing that is offered at these health institutions. Both churches regularly organize medical outreach programmes with support from pharmaceutical companies and donors, to serve the health needs of their members and communities, where satellite churches exist, or a new one is anticipated.

In all these instances, free medical screening and affordable healthcare are offered. We speak of affordable, because where there are referrals to the health centres for further treatment or surgery, due consideration is given to the patient’s ability to pay, and charges are minimized to reflect compassionate healthcare. These churches consciously present the gospel with their healthcare services, thus presenting, in a sense, holistic mission. In Chapter Two of this study, we established the fact that the early missionaries combined their evangelization with the provision of healthcare, thus setting

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380 Rev. Dr. Ablorh, Interview, 26 November 2012, Teshie-Accra.
381 Rev. Dr. Ablorh, Interview, 26 November 2012, Teshie-Accra.
the pattern of relationship between Christian mission in Ghana and healthcare. Why has it taken Charismatic churches in Ghana these long years to admit that healthcare/hospitals are necessary to make the presentation of the gospel complete? A member of one of the Charismatic churches suggested that it was to escape responsibility, which was why the churches emphasized faith healing, even though the leaders always sought the best medical treatments available in this country and overseas. This demonstrates the fact that some leaders of Charismatic churches are not sincere with the realities on the ground as far as healthcare is concerned.

Although today, the towns in which both Manna Mission Hospital and The Asafo-Agyei Hospital are located may be municipalities, the situation in 1989 and 1980 when these hospitals were respectively established, was completely different. Teshie, the home of the Manna Mission Hospital and one of the traditional homes of the Ga ethnic group in Ghana, was a deprived town, which lacked many of the basic amenities such as pipe borne water, proper sanitary conditions, and healthcare centres, among others. Until the establishment of the LEKMA Hospital in 2009, the Manna Mission Hospital was the only hospital serving the whole of Teshie and its environs. The selection of this town to site the hospital, and the reasons advanced by Dr. Ablorh, among which was to serve the poor fishing community, must be seen as an act that was done in the spirit of *diakonia*. Thus, from the very beginning, the social ministry of Manna Mission Church had *diakonia* as the underlying driving force.

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382 In 1992, Rev. William Obeng-Darko, the immediate Senior Associate Minister to Pastor Otabil was sponsored by the ICGC to undergo medical treatment in London for some renal problems. Although, today the ICGC takes contributions from its members, and raises funds through programmes such as ‘health walk’ to support the Cardio-thoracic unit and the Children’s Clinic of the Korle-bu Teaching Hospital in Accra, the church does not operate a single clinic in any part of the country.
A similar situation cannot be said to have characterized the citing of the Asafo-Agyei Hospital within the Daban locality of Kumasi. This is because at that time (1980) there was no church attached to the hospital. However, with the coming into being of the church, the health centre is serving the community as well as the church members in the spirit of *diakonia*, through the periodic organization of free medical outreaches to the rural areas, with sponsorship from pharmaceutical companies and other philanthropic organizations, in their attempt to extend healthcare to the poor. It is also significant to note that both of these churches conduct health education on radio with specific emphasis on preventive healthcare.

In Chapter One, reference was made to Kwame Bediako’s argument that the gospel is good news to the poor. Situating Bediako’s expectations of what the gospel must do for the materially poor and underprivileged within the context of our current discussion, the Charismatic churches that are operating healthcare centres are giving hope to the poor and are making the gospel truly good news. On the other hand, the Charismatic churches that are operating schools cannot be said to either represent good news or justice to the poor, because their schools are being run on the basis of, ‘ability to pay’, thus marginalizing the poor and underprivileged.

What has become obvious is that these Charismatic churches are not oblivious to the poor and inadequate educational facilities, or the inadequate healthcare facilities referred to in Chapter Three of this study. In Chapter Three of this study, we indicated that at the basic level, there is a shortfall in educational infrastructure, as well as shortage of

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383 See K. Bediako, *Christianity in Africa: The Renewal of A Non-Western Religion*. p.144. he argues that it is important to understand how the discovery of the Gospel as good news to the poor-by which is meant the materially poor, socially oppressed and underprivileged- has become a fundamental challenge for mission and theology from the Two-Thirds World.
adequate textbooks and teachers in the country, especially in the rural areas. At the tertiary level, there was lack of access for many students who had qualified to enter the university. It can therefore be said that although the efforts of the Charismatic churches may be relatively small, they alleviate the burden on government in one way or the other.

Similarly, in the area of healthcare, we established in Chapter Three that the healthcare delivery system in the country is woefully inadequate, with malaria, infant and maternal mortality being the leading causes of death in the country. Thus, the contributions of these Charismatic churches to the healthcare needs of the society cannot be glossed over.

4.6 Conclusion

This study and analyses of the social ministry of the four selected Charismatic churches has shown that the provision of educational and healthcare services by these churches has been motivated by theological, sociological and economic factors among others. In the area of education, the quest to empower their members and make them productive citizens, as well as these churches’ quest to remain socially relevant, seems to be guiding their actions. However, the educational initiatives undertaken by these Charismatic churches do not seem to be driven by the spirit of *diakonia*, as profit appears to be a major motivating factor.

On the other hand however, the activities of the Charismatic churches, providing healthcare, appears to be driven presently by the spirit of *diakonia*, although the health services provided by the GETHIM, unlike the Manna Mission Church, began initially as a profit oriented institution.
CHAPTER FIVE
SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

The selected Charismatic churches’ involvement in social ministry has been evaluated from various scholarly perspectives. In the past, Charismatics were not known to engage themselves in social intervention programmes. This apathetic attitude to social ministry stemmed from the fact that the Charismatic movement is an experiential movement that lays a lot of emphasis on the charismata, that is, the need for its followers to experience the gifts of grace manifested in speaking in tongues, prophecy and divine healing among others. The Charismatic movement also concerned itself with the second coming of Christ and the urgency to prepare souls for His coming.

However, the depressing socio-economic circumstances of the country, coupled with the poor conditions of education and healthcare, seems to be stimulating action from the Charismatic churches. This changing trend may be described as a transition from social passivism to diaconal action. This concluding chapter endeavours to highlight the extent to which some Charismatic churches have contributed to the development of education and healthcare in Ghana, and some of the assigned reasons for their social intervention programmes. The discussion also covers some of the challenges and progress made by these selected Charismatic churches so far. It concludes with suggestions and recommendations for Charismatic churches in general on the new approaches to sustained social ministry in their mission activities.
5.2 Summary of Findings

The social ministry of the community of faith has been traced to the prophetic ministry of the Old Testament days, during which time social ministry was represented as the quest for social justice and the God-given privilege for all humans to live a dignified life, reflecting the *imago Dei*. In the New Testament, we see Jesus making a case for social ministry by His constant reference to the Old Testament prophets, His own identification with the poor and marginalized, and His subsequent diaconal work.³⁸⁴

Ghana in the pre and post independence times, witnessed various Christian missions such as the Catholic and Protestant churches actively engaging in social ministry in the spirit of *diakonia*. For these Christian missions, social ministry is what makes the good news of the gospel meaningful and complete. The effect of these churches’ social ministry has been immense and varied; altering the social structure, as well as the economic and political fortunes of the people of this country, particularly through the introduction of formal education and Western medicine. Subsequently, the mainline churches have set the pattern for what it means to be a church engaged in missions. In consonance with the example set by the mainline churches in Ghana, Charismatic churches have also been involved in social ministry, though belatedly, in varying degrees, to reflect their response to the existential challenges facing their members and society on a daily basis. This enterprise has taken place in the areas of education and healthcare.

The study found out that ICGC seems to concentrate more attention on its university than the basic schools. MLGC on the other hand is focused on basic to the pre-tertiary schools. The study also revealed that the schools being run by these two Charismatic churches are basically profit-oriented. The schools do not seem to be running with the poor and less privileged in mind, since their fees make them virtually inaccessible to low-income earners. ICGC for instance, has a scholarship scheme for Senior High School (SHS) students (both current and prospective) that spans the duration of the three year course at the SHS, but the amount of money involved in the grant per term is less than 20% of what that same beneficiary would have to pay as fees per semester, were he/she to pursue university education at CUC. The scholarship scheme of MLGC on the other hand, is restricted to three children of the church’s full-time pastors only. Since there is no mechanism in place to cater for the poor and marginalised in their own churches and society, the social ministry of ICGC and MLGC cannot be said to either reflect the spirit or expression of *diakonia*.

Although the study was limited to ICGC and MLGC in matters relating to education, the study also revealed that the incidence of Charismatic churches operating schools was a growing phenomenon. Some of these Charismatic churches are the Manna Mission Church, Christian Action Faith Ministry and The Winners’ Chapel, Ghana. However, these other schools are being run as high class schools, and do not fall within the ambit of *diakonia*.

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385 The current researcher visited one of ICGC’s basic schools called Central Lyceum at Teshie-Nungua Estates and found the school not as flourishing as some nearby schools such as Maple Leaf School on the same street. According to a department leader of the Teshie-Nungua branch of the church (Hosanna Temple), when the school’s inauguration was announced in church two years ago, the pastor said that every parent who enrolled his/her child in the school would have to buy a $2000 computer for the child and pay fees of about $400-$500 dollars per term. It is therefore not surprising that the school is not flourishing; apparently their target was the rich and not the underprivileged. This enterprise falls short of the standards required by the spirit of *diakonia*. 
The study of Charismatic churches in healthcare (Manna Mission Church and GETHIM) revealed that both of these Charismatic churches are providing relatively accessible and affordable healthcare for their members and the society as a whole. The pastors of both churches are medical doctors who combine their pastoral work with their medical practice. The healthcare services offered by these two churches under consideration did not appear to be profit driven. The reason is that the doctor/pastors saw their roles in healthcare delivery as a divinely-mandated task, the goal of which was to ultimately witness about Christ.

Secondly, there were other avenues available by which the sick, including church members and non-members, could access healthcare. These avenues included the church’s medical outreach programmes and a guarantee from a pastor of the church or from the head pastor himself in emergency situations. The introduction of the National Health Insurance Scheme (NHIS) has also made hospital attendance easier for the church members. The church members are also taken through health education periodically on preventive healthcare in the church, during their ‘health awareness week’ programmes. These two church leaders also host radio programmes through which they educate the public on matters relating to health, in their evangelization efforts.\(^\text{386}\)

Furthermore, the study found out that there is what seems to be a redefinition of faith healing among these doctor-pastors. For them, faith healing is the restoration of health by the divine source (Jesus Christ) through various means including medicine and medical doctors, although they do not discount the laying on of hands and prayer when the need arises. Finally, the study discovered that the incidence of Charismatic churches operating

\(^{386}\) Rev. Dr. Asafo-Agyei preaches on Hello FM in Kumasi, while Rev. Dr. Ablorh preaches on Sunny FM in Accra.
hospitals was a growing phenomenon in the city of Accra. Lighthouse Chapel International (LCI) runs a hospital at North Kaneshie, Christian Professional Fellowship (CPF) another Charismatic church also runs a clinic at Achimota, specializing in women’s healthcare needs. The pastors of these churches (LCI and CPF) are both medical doctors. The Love Community Chapel, another Charismatic church located at Bubuashie in Accra, also runs a hospital (The Love Community Hospital), even though the pastor is not a medical doctor.

5.2.1 Fulfilling the Objectives of the Thesis

This study set out to achieve the following:

(i) Examine what mission is and the place and theological justification of social ministry in mission.

(ii) Discuss the social ministry of the selected Charismatic churches in Ghana in the areas of education and healthcare.

(iii) Explore the theological and missionary factors motivating the provision and delivery of educational and healthcare services by the selected Charismatic churches.

The question of what mission is and the place and theological justification of social ministry in mission has been discussed extensively in Chapter Two where, holistic mission has been identified as mission Dei. Inherent in missio Dei (God’s mission) is social ministry, which was traced from the OT tradition as the quest for social justice, and in the NT as diakonia. Underlying mission is God’s desire for humankind to live in dignity and reflect the imago Dei. Thus, social ministry is at the heart of mission.
The discussion of the social ministry of the four selected Charismatic churches has been addressed in Chapter Three, where the education and healthcare initiatives of the selected Charismatic churches play the key role of their social ministry. This has earned them some respect even among their critics. Others, such as Rev. Dr. Ablorh, also see the social ministries of the Charismatic churches as signifying their maturing into full churches in mission.

The theological and missional factors, motivating the provision and or delivery of educational and healthcare services by the selected Charismatic churches have been discussed in Chapters Three and Four. In the area of education, the study found out that the motivating factors for Charismatics providing educational service is as a result of their re-reading of the Bible. To the Charismatics, education is empowerment essential for their members to function effectively and productively in society. Education to them is also a means of instilling Christian and moral values in pupils and students. However, financial considerations also serve as a motivating factor for their provision of these educational services.

In the area of healthcare, the study found out that these Charismatic churches’ emphasis on healthcare was in the spirit of diakonia and Christian service that is, witnessing through service, especially through their medical outreach programmes. These churches have also made healthcare readily accessible to their members. They also emphasized healthcare as their social ministry because the pastors of these churches are medical doctors who felt the need to give the question of faith healing a proper interpretation within our local context. The study also found out that the Charismatic churches’
contribution to the development of education and healthcare in Ghana was to them a quest for social relevance.

5.3 General Conclusion

This thesis focused on the social ministry of some selected Charismatic churches in Ghana, particularly in the areas of education and healthcare. Social ministry is inferred from Chapters One and Two, to mean the service of love inspired by the example of Christ, or witnessing through Christian service; an idea grounded in the theological concept of diakonia, which finds expression in mission. Data for this work was basically gathered and analyzed through interviews, participant observation, and review of literature, biographical study and secondary sources.

Factors motivating the social ministry of the selected Charismatic churches including theological and missionary underpinning were achieved through a study of the education and healthcare initiatives of four selected Charismatic churches actively engaged in social ministry. It was realized that the selected Charismatic churches’ re-reading of the Bible, the socio-economic challenges of contemporary times and the quest to remain socially relevant, as well as to improve the lives of their members, has accounted for these initiatives.

5.4 Recommendations

Since the education initiatives of these Charismatic churches were primarily funded through the contributions of church members, it is recommended that the current scholarship programmes in place should be expanded and made more accessible, and that the process of selection of beneficiaries should also be made transparent, such as pertains
in some of the mainline churches. For instance, in the case of the Methodist Church, Ghana, two (2) bursaries to study at the Methodist University are granted annually to prospective candidates of each of the seventeen (17) dioceses across the country,\textsuperscript{387} thus making the church members feel ownership of the educational programmes of the church.

In the area of healthcare, it is recommended that the Charismatic churches under review should put in place adequate administrative measures to ensure that their programmes continue to operate even after the founders (who constitute the main driving force behind such programmes) who are also pastor-doctors, are no longer in place to manage the affairs of the healthcare programmes.

Moreover, owing to the fact that the medical outreach programmes undertaken by these Charismatic churches often comprise free screening, medication and surgeries, thus meeting the medical needs of the poor, and also fulfilling the spirit and expression of diakonia, it is also recommended that such programmes, should be undertaken more regularly to help the poor and underprivileged in both the church and society.

Church members or their representatives must regularly demand accountability and transparency of the church’s social ministry, to inspire confidence in the programmes. Church founders must also endeavour to give the social ministry of their churches the free hand to operate without unnecessary interference. Presently, the impression many church members have is that the church founders ‘own’ the social ministry, which does not augur well for the sustenance of the programmes.

\textsuperscript{387}Very Rev. Stephen Asher (General Manager, Methodist Education Unit) Interview, 26 November 2011, Accra.
Finally, it is recommended that as an area for further study, a comparative study of the social ministry of Charismatic churches and their mainline counterparts be undertaken to throw light on measures that could be adopted by the Charismatic churches, or any interested group(s), to ensure the expansion and sustainability of such programmes.
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APPENDICES

Appendix A

The University of Ghana
Department for the study of Religions
Charismatic Churches Contributing to the Development of Education in Ghana

Questionnaire for Church Members/Education

A. BIO DATA:
Gender: Male ☐ Female ☐
Age Range: 18-29 ☐ 30-45 ☐ 46-55 ☐ 56 and above ☐
Educational Background: Basic ☐ Second cycle ☐ Tertiary ☐

B.
1. How long have you been a member of this church, and why?

____________________________________________________________________
____________________________________________________________________

2. Do you know of any areas through which your church is contributing to the development of society in general?

____________________________________________________________________
____________________________________________________________________

3. What in your opinion is the contribution of your church to the development of education in Ghana?

____________________________________________________________________
____________________________________________________________________

Please tick the areas/levels of education where your church is concerned:
Basic ☐ Secondary ☐ Tertiary ☐

4. In your opinion, do you think the scholarship/educational activities of your church is helping church members and society in general? If yes, in which unique way?

____________________________________________________________________
If not, why not?
____________________________________________________________________

5. Why is your church placing emphasis on education, and not any other social service?

____________________________________________________________________
____________________________________________________________________

University of Ghana          http://ugspace.ug.edu.gh
6. How is your church financing all these educational projects?
_______________________________________________________________________
_______________________________________________________________________
7. What are the benefits your church hopes to derive from all these scholarship/educational activities?
_______________________________________________________________________
_______________________________________________________________________
8. How sustainable are these educational endeavours?
_______________________________________________________________________
9. Have you or any relative benefitted from any of the church’s educational/scholarship endeavours? 
   Yes [ ]  No [ ]  If yes, in which way?
_______________________________________________________________________
_______________________________________________________________________
10. How affordable/accessible are these church schools?
_______________________________________________________________________
11. Can you think of any Biblical reasons why your church should be involved in providing education/scholarship?
_______________________________________________________________________
_______________________________________________________________________
C. Do you know of any other Charismatic church(es) which contribute to the development of society? 
   Yes [ ]  No [ ]  If yes, who are they?
_______________________________________________________________________
In which way(s)?
_______________________________________________________________________
Any other comments: _______________________________________________________
____________ Thank you very much
Appendix B

The University of Ghana - Department for the Study of Religions

This interview is designed by an M.Phil. Student of the University of Ghana, Department for the study of Religions, currently writing a thesis on the topic: **A Study of the Social Ministry of some selected Charismatic churches in Ghana**

The aim of this interview is to find out why, when, and how some Charismatic churches have ventured into the provision of healthcare. The outcome of this interview is solely for academic purposes.

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**INTERVIEW SCHEDULE FOR PASTORS OF CHARISMATIC CHURCHES INVOLVED IN HEALTHCARE DELIVERY**

**PERSONAL DETAILS**

**BIOGRAPHICAL INFORMATION**

Could you kindly comment on the following:

1. Your parental and family background.
2. The social and cultural circumstances surrounding your birth place and early life.
3. Your educational path, challenges, opportunities and achievements

**SOCIAL MINISTRY**

1. What is the general scope of your church’s social ministry?
2. What were the circumstances or the factors that led to the establishment of your medical facility?
3. Did you have a board or team that deliberated on the viability and relevance of the project and were they optimistic? Are some of the team members alive today?
4. What were some of the initial challenges such as housing the facility, location, land acquisition and funding, and how were these challenges resolved? Did you receive any overseas support?
5. Is the hospital a tool for evangelization? If yes, please explain.
6. In your opinion, what is the uniqueness of your medical facility in relation to other private and Government hospitals?
7. What are the theological underpinnings guiding this social action?
8. What evidence would you point at to indicate that members of your church feel that the church is serving them through the hospital?
9. What impact do you think the hospital is having on the society in general?
10. Is your church’s involvement in the provision of healthcare not a departure from Pentecostal-Charismatic theology of divine healing? Please explain your answer.
11. Is your hospital a member of the Christian Health Association of Ghana? Please explain your answer.
12. What is the relationship between your hospital and the Ministry of Health?
13. Please throw some light on the general and specialty areas of operation of this hospital.
14. Does this hospital have any facility for the sick but needy, and if so, what is the extent of the facility and why?
15. Do you see the involvement of your church/ministry in healthcare delivery as a continuation of Christ’s healing ministry? If yes, in what way?

Thank you very much
Appendix C

QUESTIONNAIRE FOR CHURCH MEMBERS/ HEALTHCARE

A. BIO DATA:
Gender:  Male □  Female □
Age Range:  18-29 □  30-45 □  46-55 □  56 and above □
Educational Background:  Basic □  Second cycle □  Tertiary □

B.
1. Do you know of any areas through which your church is contributing to the development of society in general?
_____________________________________________________________________________
__________________________________________________________________________________

2. What, in your opinion, is the contribution of your church towards the development of healthcare in Ghana?
_____________________________________________________________________________
__________________________________________________________________________________

3. In your opinion, do think the healthcare services of your church are helping church members and society in general? Yes □  No □ If yes, in which unique way?
_____________________________________________________________________________
__________________________________________________________________________________
If not, why not?
_____________________________________________________________________________
__________________________________________________________________________________

4. Why is your church placing emphasis on healthcare and not any other social service?
_____________________________________________________________________________
__________________________________________________________________________________

5. How is your church able to finance its healthcare services?
_____________________________________________________________________________
__________________________________________________________________________________

6. What are the benefits your church hopes to derive from all these healthcare services?
_____________________________________________________________________________
__________________________________________________________________________________
7. How sustainable are these healthcare endeavours?

8. Have you or any relative benefitted from any of the church’s healthcare endeavours?  
   Yes [ ]  No [ ]  If yes, in which way?

9. How affordable/accessible are these health services?

10. Can you think of any Biblical reasons why your church should be involved in providing healthcare?

C.  
Do you know of any other charismatic church(es) which contribute to the development of society?  
   Yes [ ]  No [ ]  If yes, who are they?

   In which way(s)?

Any other comments

Thank you very much.
Appendix D

CHARISMATIC CHURCHES CONTRIBUTING TO THE DEVELOPMENT OF EDUCATION IN GHANA

QUESTIONNAIRE FOR CHURCH MEMBERS

A. BIO DATA:
   Gender: Male □ Female □
   Age Range: 18-29 □ 30-45 □ 46-55 □ 56 and above □
   Educational Background: Basic □ Second cycle □ Tertiary □

B.

1. Do you know of any areas through which your church is contributing to the development of society in general?
   ________________________________________________________________
   __________________________________________________________________

2. What, in your opinion, is the contribution of your church towards the development of education/scholarship in Ghana?
   ________________________________________________________________
   __________________________________________________________________

3. In your opinion, do you think the educational/scholarship activities of your church are helping church members and society in general? Yes □ No □ If yes, in which unique way?
   ________________________________________________________________
   __________________________________________________________________
   If not, why not?
   ________________________________________________________________
   __________________________________________________________________

4. Why is your church placing emphasis on education and not any other social service?
   ________________________________________________________________
   __________________________________________________________________

5. How is your church able to finance its educational/scholarship activities?
   ________________________________________________________________
   __________________________________________________________________

6. What are the benefits your church hopes to derive from all these educational/scholarship activities?
   ________________________________________________________________
   __________________________________________________________________
7. How sustainable are these educational/scholarship endeavours?

________________________________________________________________________
________________________________________________________________________

8. Have you or any relative benefitted from any of the church’s educational/scholarship endeavours? Yes [ ] No [ ] If yes, in which way?
________________________________________________________________________
________________________________________________________________________

9. How affordable/accessible are these church schools?
________________________________________________________________________
________________________________________________________________________

10. Can you think of any Biblical reasons why your church should be involved in providing education?
________________________________________________________________________
________________________________________________________________________

C.

Do you know of any other Charismatic church(es) contributing to the development of society? Yes [ ] No [ ] If yes, who are they?
________________________________________________________________________
________________________________________________________________________
In which way(s)?
________________________________________________________________________
________________________________________________________________________

Any other comments
________________________________________________________________________
________________________________________________________________________

Thank you very much.
Appendix E
THE UNIVERSITY OF GHANA,
DEPARTMENT FOR THE STUDY OF RELIGIONS

INTERVIEW SCHEDULE FOR PASTORS OF CHARISMATIC CHURCHES
INVOLVED IN THE PROVISION OF EDUCATION [SCHOLARSHIP]

This interview is designed by an M. Phil. student of the University of Ghana, Department for the Study of Religions, currently writing a thesis on the topic: A Study of the Social Ministry of some selected Charismatic churches in Ghana. The aim of this research is to find out why, when, and how, some Charismatic churches have ventured into the provision of education/scholarship at various levels of the educational ladder.

The outcome of this interview is purely for academic purposes.

PERSONAL DETAILS

BIOGRAPHICAL INFORMATION

Could you kindly comment on the following:

1. Your parental and family background.
2. The social and cultural circumstances surrounding your birthplace and early life.
3. Your educational path, challenges, opportunities and achievements.

CHURCH AND EDUCATION

1. What were the motivating circumstances or factors that led to the establishment of the church’s educational institutions?
2. Did you have a board or team that deliberated on the viability and relevance of the project, and were they optimistic? Who were they and are some of them alive today?
3. What were some of the initial challenges - such as housing the facility, location, land acquisition and funding, and how were these challenges resolved? Did you receive any overseas support?
4. Is the school a tool for evangelization? If yes, please explain.
5. In your opinion, what is the uniqueness of your school in relation to the public Universities?
6. What are the theological ideas backing your church’s involvement in this social action?
7. Do you hold the view that all Christian denominations should run their own mission schools? Please give reasons for your answer.
8. Your school has been involved in the award of scholarships to needy but brilliant pre-tertiary students. What is the next step in the church’s educational drive?

9. What evidence would you point at to indicate that the members of your church feel that the church is serving them through the school?

10. What impact do you think your school is having on society in general?

11. Seeing your school today, in what ways do you think the original mission is on course and what are some of the future plans for the school?

Thank you very much