

**THE SOCIAL IMPACT OF THE SALVATION ARMY ON CHIKANKATA  
DISTRICT OF ZAMBIA, 1945 – 2015**

**BY**

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**A Dissertation Submitted to the University of Zambia in Partial Fulfilment of  
the Requirements for the Degree of Master of Arts in History**

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## DECLARATION

I, Apex Mwanza, do hereby declare that this dissertation represents my own work and that it has not been previously submitted for a degree at this or any other university.

SIGNED \_\_\_\_\_

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**APPROVAL**

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## ABSTRACT

The central theme of this study is an examination of the social impact of the Salvation Army on Chikankata district and the responses of Africans thereto. Specifically, the study aims at identifying strategies used by the Salvation Army to convert Africans to Christianity. It also examines the Salvation Army's impact on the local people through the provision of educational and healthcare services. Using data from both primary and secondary sources, the study argues that, contrary to the popular view that missionary groups used education and medical care as principal methods of evangelism, the Salvation Army was less dependent on them. Instead, it demonstrates that the mission largely relied on African agents and the use of open-air meetings, march pasts, uniform wearing, brass bands, popular culture, congress meetings, religious rites, and the media as methods of evangelism. Further, the study establishes that the Salvation Army was an agent of social change that provided the foundation for modern primary and secondary school education, industrial and health personnel training. In so doing, the mission contributed to human resource development in the district and the country at large. The mission also contributed to the improvement of the well-being of the local people through the introduction of maternal and child health programmes as well as combating communicable and non-communicable diseases such as leprosy, tuberculosis, measles, epilepsy and HIV/AIDS. Further, the study notes that the activities of the mission in the area elicited various responses from the local people. Some groups such as *Basimalende* (Guardians of shrines), beer patrons, Jehovah's Witnesses, and the Full Gospel Mission resisted the Salvation Army's proselytisation agenda. For other locals, the presence of the Salvation Army in Chikankata provided a milieu for advancing their economic and political goals. The study further demonstrates that the war of

liberation in neighbouring Zimbabwe (Southern Rhodesia) and Zambia's liberal policies of the 1990s proved challenging to the mission's evangelical work.

**Key words:** Salvation Army, Chikankata, missionary, African conversion, education, healthcare

## **DEDICATION**

To my parents for nurturing me; my wife for the unwavering support; and my sons, Chabota and Cheelela, for you to emulate.

## ACKNOWLEDGEMENTS

This study would be incomplete if I did not express my profound gratitude to a number of individuals for their invaluable support. To begin with, my gratitude goes to my supervisor, Dr Alfred Tembo for his guidance, constructive criticism and suggestions that enabled this study to become a reality. I would also like to extend my gratitude to all members of staff of the Department of Historical and Archaeological Studies for their support.

My profound gratitude also goes to my fellow postgraduate students for their companionship and positive criticism which helped to shape this study. To my roommates, Mulenga Mwansa (Shikapaipi) and Kelvin Oggy Muombo (Replica), I thank you for your insights on this study as well as the indelible moments we shared together.

I also wish to thank workers and officials at the University of Zambia Main Library, National Archives of Zambia, Salvation Army Territorial Headquarters in Lusaka, and Chikankata Mission for granting me access to important documents.

I am deeply indebted to Mr Godfrey Hamusonde, Chimwemwe Secondary School headteacher, for the inestimable sacrifice he made towards the realisation of this study. My thanks further extend to my key informants: Isaac Chikandi, Jairos Magaya, Bexter Magaya, Isaac Mweetwa, Cramwell Mweemba, and Daniel Kalichi who volunteered to be interviewed. Without their help, this study would have been impossible. I should also like to thank Mr Oscar Mwanza and the wife for the support and hospitality rendered to me during my field research.

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## **LIST OF ACRONYMS AND ABBREVIATIONS**

AIDS	Acquired Immunodeficiency Syndrome
AMTS	AIDS Management and Training Seminars
ANC	African National Congress
ART	Antiretroviral Therapy
BBC	British Broadcasting Corporation
BELRA	British Empire Leprosy Relief Association
BSAC	British South Africa Company
CHAZ	Churches Health Association of Zambia
CIDRZ	Centre for Infectious Diseases Research in Zambia
CMML	Christian Missions in Many Lands
CMS	Christian Mission Society
CUSA	Credit Union and Savings Association
DC	Divisional Commander/District Commissioner
DMS	Director of Medical Services
ECT	Epilepsy Care Team
HIV	Human Immunodeficiency Virus
IBA	Independent Broadcasting Authority

IFS	Improved Farming Scheme
LMS	London Missionary Society
MMD	Movement for Multiparty Democracy
NAZ	National Archives of Zambia
OTC	Officers' Training College
PEO	Provincial Education Officer
PMO	Provincial Medical Officer
PPAZ	Planned Parenthood Association of Zambia
RN	Registered Nurse
SAP	Structural Adjustment Programme
SASB	Salvation Army Song Book
SAWSO	Salvation Army World Service Office
SDA	Seventh-day Adventists
TB	Tuberculosis
TC	Territorial Commander
UDI	Unilateral Declaration of Independence
UK	United Kingdom
UMCA	Universities Mission to Central Africa
UNIP	United National Independence Party

USA	United States of America
WCC	World Council of Churches
WHA	World Health Assembly
YPSM	Young People's Sergeant Major
ZANU	Zimbabwe African National Union
ZAPU	Zimbabwe African People's Union
ZBS	Zambia Broadcasting Services
ZEN	Zambia Enrolled Nurse

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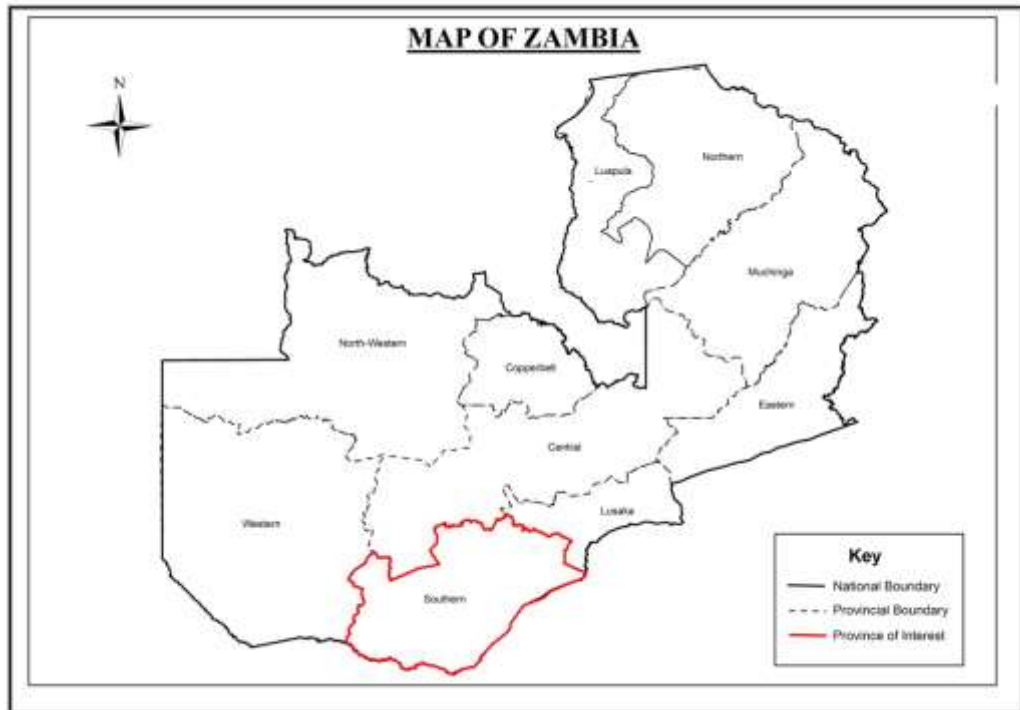
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## GLOSSARY

<i>Basilikali</i>	Police officers
<i>Basilumamba</i>	Soldiers (Members) of the Salvation Army
<i>Basimalende</i>	Guardians of shrines
<i>Inkondo Ya Lufutuko</i>	The Salvation Army in Citonga
<i>Kukomba Mizimo</i>	Worshiping of ancestral spirits
<i>Kusalazya</i>	Sexual cleansing
<i>Leza</i>	God in Citonga
<i>Lwiindi</i>	Annual thanksgiving ceremony of the Tonga people
<i>Mahuka</i>	Annual gathering of the Salvation Army
<i>Malende</i>	Shrines
<i>Mizimo</i>	Ancestral spirits
<i>Mululwe</i>	An African tree ( <i>Plumbago zeylanica</i> ) used for curing leprosy and other ailments

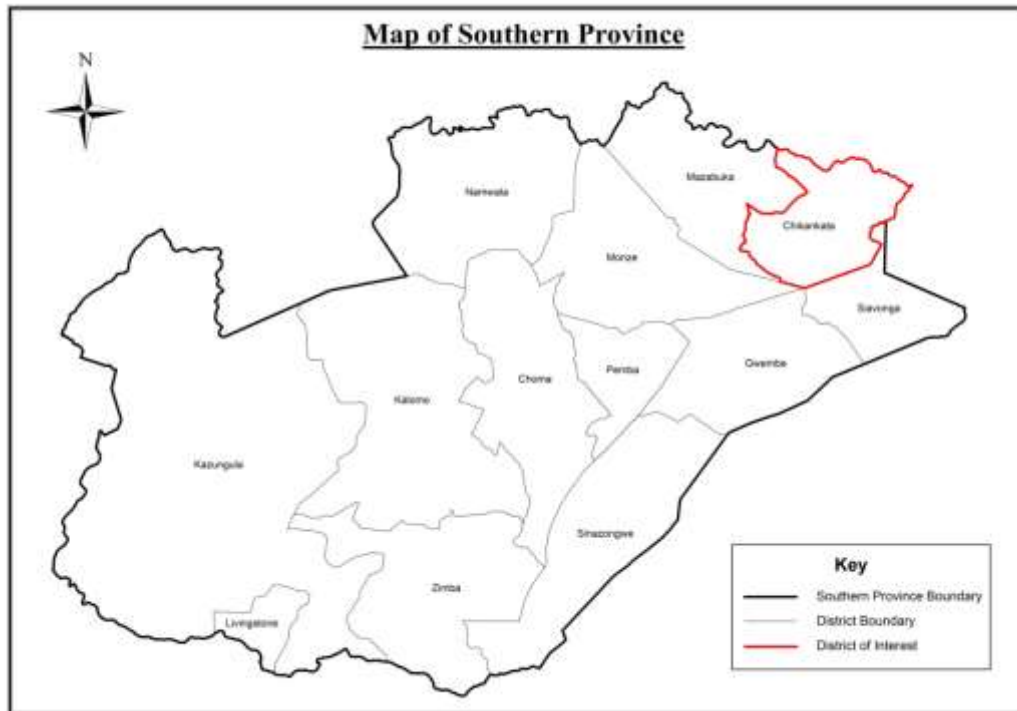
## MAPS

**MAP I: Location of Southern Province in Zambia**



Source: Twataizya Minago, Student in Geo Information Science and Earth Observation, University of Zambia, Department of Geography, 2019.

**MAP II: Location of Chikankata District in Southern Province**



Source: Twataizya Minago, Student in Geo Information Science and Earth Observation, University of Zambia, Department of Geography, 2019.

## CHAPTER ONE

### 1.1 Introduction and Historical Background

The modern era of the expansion of the Christian Church is to a large extent a consequence of the evangelical revival movement witnessed in Europe towards the end of the eighteenth century. The revival movement invigorated the formation of a number of Christian groups such as the Anglican, Catholic, Baptist, London Missionary Society (LMS), and Church Missionary Society (CMS) whose main aim was to spread the Gospel of Jesus Christ to 'heathen' parts of the world, including Africa.<sup>1</sup> In the nineteenth and twentieth centuries, a number of missionary societies came to modern Zambia, including the Salvation Army - the focus of this study.

The Salvation Army was founded by William Booth, a former minister of the Methodist New Connection Church in England in 1865. The movement was first established in the East End of London among the poor and downtrodden in society as 'The Christian Mission'. By 1878, the mission had approximately 45 stations with full-time evangelists.<sup>2</sup> In the same year, the mission changed its name to "The Salvation Army" as a Christian movement dedicated to conquering the forces of evil and winning satan's territories for Christ. As a result, the movement adopted military concepts for its members and leaders (officers). Its members were called "soldiers" with leaders assuming military ranks of Lieutenant, Captain, Major, Brigadier, Commissioner, or General. Naturally, Booth became its first General. A uniform

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<sup>1</sup>Anthony J. Dachs, 'Christian Missionary Enterprise and Sotho-Tswana Societies in the Nineteenth and Twentieth Centuries', in A.J. Dachs (ed.), *Christianity South of the Zambezi* (Gwelo: Mambo Press, 1973), p.53.

<sup>2</sup> Gwendoline Taylor, *William Booth: Prophet and General* (London: The Salvation Army, 1963), p.41.

similar to that of the British Navy was designed and worn by all soldiers and officers partly as a public proclamation to renounce evil.<sup>3</sup>

After 1878, the Salvation Army spread to other lands outside England. For instance, Amos Shirley and his family left England for the United States of America (USA) in 1879. There, he found employment at a silk factory in Philadelphia and began holding Salvation Army meetings in his spare time. This marked the beginning of Salvation Army work in the USA. By the 1880s, the Salvation Army had spread to Australia, France, Canada, Switzerland, India, Sri Lanka and Japan.<sup>4</sup>

In Africa, the Salvation Army's flag first flew in South Africa when Captain Francis Simmonds sailed from England and arrived in Cape Town on Saturday, 24 February 1883.<sup>5</sup> The first meeting was held in a drill hall in Cape Town attended by mostly drunkards who incessantly disrupted the meeting by whistling and yelling. However, within a few weeks 112 people had been converted to Christianity.<sup>6</sup> It was from here that the Salvation Army spread to other towns of South Africa. The cosmopolitan nature of South Africa, especially after the mineral revolution, aided the spread of the Salvation Army north of the Limpopo river. Labour migrants from Southern Rhodesia (Zimbabwe) who got converted under the Salvation Army professed their new faith and heralded its birth back home.

In 1891, General Booth met John Cecil Rhodes in Cape Town. Obsessed with the idea of a Second Rand north of the Limpopo river, Rhodes encouraged Christian missions to settle in Mashonaland, Southern Rhodesia, in order to have the civilising influence in his new domain. He thus offered over 2,400 hectares in Mazoe

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<sup>3</sup> Mary Batchelor, *Catherine Bramwell-Booth* (Leicester: Lion Publishing Plc., 1986), p.25.

<sup>4</sup> Taylor, *William Booth*, p.48.

<sup>5</sup> Taylor, *William Booth*, p.49.

<sup>6</sup> Taylor, *William Booth*, p.49.

district to the Salvation Army.<sup>7</sup> The gesture was accepted and the Salvation Army's first station in Southern Rhodesia opened in the same year, furthering the work already begun by African evangelists.

Similarly, some labour migrants from Northern Rhodesia working in Southern Rhodesian mines came under the influence of the Salvation Army and were instrumental in the setting up of unofficial outposts back home. This was the case with Matthew Chilemerere Mbiri who had left his village in the area of Syakalyabanyama in the early 1920s, crossed the Zambezi to the south to find employment in the mica mines. He became a Salvationist and upon returning to his home in the north opened the Salvation Army outpost on the Northern Rhodesian soil in 1924.<sup>8</sup> In the same year, a number of workers from the Gwembe valley, who had met the Salvation Army while working at the Grand Parade Mica Mine in Urungwe in Southern Rhodesia, returned to Northern Rhodesia as converts. As a result, the number of soldiers and outposts increased. Beverley McInnes noted that by 1926, the number of Salvation Army centres in the Gwembe valley had reached 16.<sup>9</sup> This prompted the Salvation Army Southern Rhodesian Division to officially open evangelical work in Northern Rhodesia. Thus, Gwembe became the cradle for the Salvation Army in Northern Rhodesia mainly due to its close proximity to Southern Rhodesia.

It was for this reason that the Salvation Army mission station was established at Ibbwe Munyama (Black Rock) in the hills of Gwembe north under the auspices of Scandinavian officers, Captain Ensign Jensen and his wife in 1927. McInnes

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<sup>7</sup> Peter Snelson, *Educational Development in Northern Rhodesia 1883 – 1945, Second Edition* (Lusaka: Kenneth Kaunda Foundation, 1974), p.176.

<sup>8</sup> Beverley McInnes, *The Flag Across the Zambezi: a History of The Salvation Army in the Zambia and Malawi Territory, 1922 – 1997* (Lusaka: The Salvation Army, 1997), p.9.

<sup>9</sup> McInnes, *The Flag Across the Zambezi*, p.20.

observed that Ibbwe Munyama was a ‘natural centre, a healthy place with a good water supply, lands for cultivation and all one could wish to make a good mission station’.<sup>10</sup> The place was formerly a government post whose prison foundation was still visible by then. Besides building a church hall, the Salvation Army established a primary boarding school to teach local children how to read and write. A domestic science course and a teacher training programme were also introduced.<sup>11</sup> Later a small clinic was established as a response to the many health challenges that had bedevilled the people of Gwembe north. For many years, Ibbwe Munyama settlement promised to be a place of spiritual and social solace for the local people.

However, Ibbwe Munyama proved difficult to access due to its terrain. In addition, the completion of the Lusaka-Salisbury (Harare) highway in 1944 left the mission disconnected from the main road. People from around the mission sought settlement along the new route. There was only the rough ox-cart track that joined Ibbwe to the Lusaka-Chirundu road.<sup>12</sup> In 1945, therefore, the Ibbwe Munyama mission was relocated to Mapangazya on the plateau in Chief Mwenda’s area which had room for expansion to make it more accessible than before. The mission was located 40 and 80 miles from Mazabuka and Lusaka, respectively. It was then renamed “Chikankata Mission” after headman Charlie Kanankamana who provided the land for its establishment.<sup>13</sup> It is believed that Kanankamana was a great hunter

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<sup>10</sup> McInnes, *The Flag Across the Zambezi*, p.18.

<sup>11</sup> Snelson, *Educational Development in Northern Rhodesia*, p.176.

<sup>12</sup> McInnes, *The Flag Across the Zambezi*, p.36.

<sup>13</sup> Chikankata district, the focus of this study, was up until 2011 part of Mazabuka district in the Southern Province of Zambia. The operation of the Salvation Army at Chikankata during this period of study includes some areas which are presently under the districts of Gwembe, Monze, Siavonga and Mazabuka. See Map II.

who earned himself a praise name of *Chikankata* (the one who breaks the bones of animals).<sup>14</sup>

The relocation of the Ibbwe Munyama Mission meant transfer of the primary boarding school, teacher training institute and a clinic. In place of a clinic, however, a hospital was constructed and officially opened by Sir John Waddington, Governor of Northern Rhodesia, in May 1947.<sup>15</sup> The mission provided spiritual, educational, and healthcare services to Mwenda chiefdom and others on the periphery such as Sinadambwe, Sikoongo, Simamba, Naluama, Sianjalika and Mwanachingwala.

In order to win African converts in the district, the Salvation Army employed a number of strategies that were influenced by its background, organisation, principles, financing, and period of entry into colonial Zambia. Unlike early missions such as the Catholics who arrived in the late 19<sup>th</sup> century and relied mainly on education and medical services as tools for evangelism, the Salvation Army came to depend heavily on African agents as forerunners of the Gospel in Chikankata. This strategy was coupled with the use of open-air revivals, march pasts, uniform wearing, brass bands, timbrel displays, congress meetings, and the media. According to Booth, the purpose of such methods was to ‘capture the attention’ of potential converts to the Salvation Army.<sup>16</sup> By the late 1950s, the mission had over 40 centres in Chikankata.<sup>17</sup>

However, the mission’s evangelical work in Chikankata was not without challenges as it faced opposition from *Basimalende* (Guardians of shrines), beer

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<sup>14</sup> McInnes, *The Flag Across the Zambezi*, p.70.

<sup>15</sup> R. Kemp, ‘The Origins of Christian Mission Societies in Zambia’, Master of Theology Dissertation, Melbourne College of Divinity, 1979, p.41.

<sup>16</sup> Andrew M. Eason, ‘All Things to All People to Save Some: Salvation Army Missionary Work among the Zulus of Victorian Natal’, *Journal of Southern African Studies*, Vol. 35, No. 1 (March 2009), p.11.

<sup>17</sup> McInnes, *The Flag Across the Zambezi*, p.146.

parties, Jehovah's Witnesses, and the Full-Gospel Mission. In post-colonial Zambia, the Salvation Army encountered another challenge - the war of liberation in neighbouring Zimbabwe. Further, the dawn of a new political dispensation after 1990 created new complexities on the youth thereby hampering the Salvation Army's evangelical work.<sup>18</sup>

With regard to the provision of social services, the Salvation Army helped in laying a strong foundation for modern education in the district. This was achieved through the establishment of primary, secondary, and trades schools as well as institutions for the training of health personnel. In addition, the Salvation Army provided healthcare services to the local people through its hospital and outreach programmes.

The response of the local people to the provision of such social services was generally good although there were some pockets of resistance from certain quarters of society such as the Jehovah's Witnesses. In addition, the locals took advantage of the presence of the mission to advance their own economic and political ends. Local farmers, for instance, appropriated cheap labour from the mission's schools. In the early 1950s, members of the African National Congress (ANC) used the schools as political mobilisation arenas.<sup>19</sup> This was in a bid to strengthen the African political voice against the Central African Federation which was introduced by the colonial government in 1953.

However, there has been a conspiracy of silence among scholars on the social contribution of Christian societies such as the Salvation Army which came to

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<sup>18</sup> McInnes, *The Flag Across the Zambezi*, p.128.

<sup>19</sup> For details on African Resistance, See, National Archives of Zambia (hereafter N.A.Z.), SP4/2/117, Mazabuka Tour Reports, 1956; N.A.Z., MH1/3/143, Leprologist Tours, Southern Province, 1962; and N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from the Chikankata Hospital Superintendent to the Director of Medical Services, 16 February, 1961.

modern Zambia after the pioneering missionaries such as the Catholics and Adventists. This silence is surprising given the enormous attention scholars have given to the strategies of conversion and social contribution of early missionary societies in Zambia. This study, therefore, seeks to fill this gap by examining the social impact of the Salvation Army on Chikankata district.

## **1.2 Objectives of the Study**

The objectives of the study were to:

1. identify the strategies used by the Salvation Army to convert Africans to Christianity in Chikankata district and the challenges faced in the process;
2. examine the impact of the Salvation Army in the provision of educational services in Chikankata district and the response of Africans thereto; and
3. investigate the impact of the Salvation Army in the provision of healthcare services in Chikankata district and how Africans responded to this.

## **1.3 Statement of the Problem**

Despite a plethora of literature on the missionary enterprise in Zambia, scholars have given little attention to the social contribution of latter missionary societies which entered the country during the post-First World War era. Scholars such as Brendan Carmody, Paul Landau, James Naali, and Absalom Mhoswa who focused on the early and more pronounced groups such as the Catholics, London Missionary Society (LMS) and Seventh Day Adventists, observed that education and medical care were the main tools of winning African converts to Christianity.<sup>20</sup>

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<sup>20</sup> For details, See, Brendan P. Carmody, *Conversion and Jesuit Schooling in Zambia* (Leiden: E.J. Brill, 1992), p.9; Paul S. Landau, 'Explaining Surgical Evangelism in Colonial Southern Africa: Teeth, Pain and Faith', *Journal of African History*, Vol. 37, No. 2 (1996), pp.261-281; James H. Naali, 'A History of the Pilgrim Wesleyan Missionary Society in Choma District, 1930 – 1990', M.A.

Contrary to this widely-held view, this study demonstrates that Africans themselves were active agents in the spread of the Salvation Army in Chikankata district. This was coupled with the use of unique strategies of conversion such as open-air meetings, march pasts, uniform wearing, brass bands, timbrel displays, popular culture, and congress meetings. Furthermore, the study examines the provision of educational and healthcare services by the Salvation Army and the response of Africans thereto - an area that has been neglected by existing scholarship.

#### **1.4 Rationale**

The study is justified on the premise that there has been little historical study on the social impact of the Salvation Army on the people of Chikankata district. This is despite the mission being in existence for over seventy years - providing spiritual, educational, and healthcare services to the local people. It is further hoped that the study will lead to an appreciation of the work of latter missionary groups whose contribution to education and health has been eclipsed by early and more pronounced societies. In doing so, the study will augment existing literature on the missionary enterprise in Zambia.

#### **1.5 Study Period**

The year 1945 was chosen as a starting point because it signals the beginning of Chikankata as successor to Ibbwe Munyama Mission. The study ends at 2015 as that year marked seventy years of the mission's work in Chikankata. The year also heralded the genesis of a new era in the history of the Salvation Army in Zambia

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Dissertation, University of Zambia, 2003, p.8; and Absalom M. Mhoswa, 'A Study of the Educational Contribution of the Jesuit Mission at Chikuni and Adventist Mission at Rusangu, 1905 – 1964', M.Ed. Dissertation, University of Zambia, 1980, p. 81-102.

following the appointment of the first ever Zambian, Colonel Margaret Siamoya, to the highest rank of Territorial Commander for the country.

## 1.6 Literature Review

Although there is an abundance of literature on the Salvation Army internationally, little has been done on Zambia, and Chikankata mission in particular. To compensate for this limitation, literature on other missionary societies dealing with conversion, education, and healthcare provision in Central Africa was examined.

In understanding the history of the Salvation Army, its organisation, and methods of conversion, the works of Gwendoline Taylor, Diane Winston, Lillian Taiz, and Harold Hill were valuable to the present study.<sup>21</sup> These scholars argued that the foundation of the Salvation Army was as a consequence of the American revival of the 1840s and the influence of the Wesleyan Methodist on young William and Catherine Booth. They further observed that the Booths' views on theology, organisation, non-sectarian, aggressive revivalism, lay participation, and the Wesleyan discipline of behaviour were adopted before the Salvation Army was founded in 1865 and hardly changed even in the twentieth century. These studies further noted that the period after 1878 saw the Salvation Army spread to other parts of the world outside England. Hill, for example, observed that in the 1880s alone, the Salvation Army was planted in more than twenty countries using open air meetings, popular culture, march parades, brass bands, lay participation, public confession of

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<sup>21</sup> Taylor, *William Booth: Prophet and General*, pp.14-50; Diane Winston, *Red-Hot and Righteous: the Urban Religion of the Salvation Army* (Cambridge: Harvard University Press, 1999), p.13; Lillian Taiz, *Hallelujah Lads and Lasses: Remaking the Salvation Army in America, 1880 – 1930* (Chapel Hill and London: The University of North Carolina Press, 2001), p.19; and Harold Hill, *Saved to Save and Saved to Serve: Perspectives on the Salvation Army History* (Eugene: Wipf and Stock Publishers, 2017), p.5.

sin and uniform wearing as tools of evangelism.<sup>22</sup> These works were significant to this study in that they provided a broader understanding of the history and operations of the Salvation Army as well as its methods of evangelism since its early days.

On the other hand, Norman H. Murdoch rejected the official position on the early beginnings of the Salvation Army given by the above scholars. He argued that William Booth's strategies were not all-too powerful and thus failed to garner enough support in the East End of London which was dominated by the poor masses. As a result, he turned to West London where the majority of the people were well-to-do. He further noted that the early failures of the mission propelled Booth to reform his mission to an autocratic system in 1877 and adopted military ranks, uniform and drills.<sup>23</sup> Furthermore, Murdoch observed that the inefficiency of the mission's early conversion strategies such as open-air revivals compelled Booth to introduce social service provision by soliciting donations from individuals, organisations, and states. It was this move, the argument continues, that made the Salvation Army to become a world-wide movement and an agent of imperial powers. Murdoch's work helped the current study to appreciate the competing views on the methods of conversion employed by the founders of the Salvation Army.

The views of Murdoch resonate with those of Emily A. Berry who studied the activities of the Salvation Army in India. Berry argued that in England as well as India, the Salvation Army both reflected nineteenth-century British culture and challenged its norms of propriety, religious worship, and service. She further noted that the Salvationists in India had a particularly complex and dynamic relationship with imperial authorities. Initially perceived as a threat to the peace of the empire,

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<sup>22</sup> Hill, *Saved to Save and Saved to Serve*, p.16.

<sup>23</sup> Norman H. Murdoch, *Origins of the Salvation Army* (Eugene: Wipf and Stock Publishers, 2014), p.2.

the first Salvation Army missionaries in India faced legal persecutions, but over time became agents of the colonial state. Like Murdoch, Berry contended that through a variety of social service projects, the organisation proved its utility to imperial authorities and became a recipient of government subsidies. Most notably, the Salvationists collaborated with the colonial police to create settlements for members of the so-called criminal ethnic groups of India.<sup>24</sup> Berry's work was important to the present study as it demonstrated how the Salvation Army's relationship with the colonial state helped to further its enterprise. The study also demonstrated that the growth of the Salvation Army partly depended on its ability to provide social services to the local people within its sphere of influence as was the case in Chikankata.<sup>25</sup>

Many of the studies cited above glorify the role of Western evangelists in the spread of the Salvation Army, and give little thought to the contribution of African agents who pioneered the church's evangelisation on the continent. In filling this gap, scholars such as Bengt Sundkler and Christopher Steed, Andrew M. Eason, and Isaac Boapeah illuminated the role played by African evangelists towards the growth of the mission in some selected African countries. Sundkler and Steed observed that the development of the Salvation Army in western Kenya depended on the involvement of Africans for both material support and evangelisation. For instance, Chief Amiani of the Tikiri community, a former convert of the American Friends Mission, became a devoted propagandist for the Army and its drums, built a large

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<sup>24</sup> Emily A. Berry, 'From Criminals to Caretakers: The Salvation Army in India, 1882 – 1914', Ph.D. Thesis, Northern University, 2008, p.2.

<sup>25</sup> Bengt Sundkler and Christopher Steed, *A History of the Church in Africa* (Cambridge: CUP, 2000), p.893; Andrew M. Eason, 'All Things to All People to Save Some: Salvation Army Missionary Work among the Zulus of Victorian Natal', *Journal of Southern African Studies*, Vol. 35, No. 1 (March 2009), pp.7-27; and Isaac Boapeah, 'The History of the Salvation Army in Ghana, 1922 – 2006', MPhil. Dissertation, University of Ghana, 2010, p.45.

church and played the role of a laity pastor.<sup>26</sup> In Ghana, Isaac Boapeah paid a glowing tribute to King Hudson Amoako Atta of Agona Duaka in the central region of Ghana, for introducing the Salvation Army there. He observed that the mission established a number of medical and rehabilitation centres thus widening its catchment area for new converts.<sup>27</sup> For Eason, he noted that the growth of the Salvation Army in Natal province of South Africa was as a result of the mission's policy of cultural adaptation and acceptance of polygyny.<sup>28</sup> These works proved useful to the present study as they demonstrated the Salvation Army's methodological flexibility as an efficient weapon of evangelism. But none of these works made any reference to Zambia – an aspect the current study investigates.

Whereas the above studies focused on the growth of the Salvation Army and its methods of conversion, there are also competing views among scholars on the general missionary enterprise in Central Africa which enriched the present study. For example, supporters of colonialism in Africa such as Michael Gelfand, Lewis Gann and Peter Duignan, and Bruce Gilley ardently stressed that missionaries were forerunners of white influence in Central Africa.<sup>29</sup> These studies eulogised the work of European missionaries especially in the provision of educational and healthcare services as something remarkable that ever happened to central Africa. They argue that Africa was on the verge of extinction due to diseases but for European medicine. For instance, Gann and Duignan contended that Christian medics were bearers of a superior system of healing and civilisation and wanted to convert Africans to

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<sup>26</sup> Sundkler and Steed, *A History of the Church in Africa*, p.893.

<sup>27</sup> Boapeah, 'The History of the Salvation Army in Ghana', p.45.

<sup>28</sup> Eason, 'All Things to All People to Save Some', p.7.

<sup>29</sup> Michael Gelfand, *Medicine and the Christian Missions in Rhodesia, 1857-1930* (London: Basil Blackwell, 1957), p.35; and Lewis H. Gann, *A History of Northern Rhodesia: Early Days to 1953* (London: Chatto and Windus, 1964), p.49.

missionary medicine, Christianity as well as the Western way of life.<sup>30</sup> This view is supported by Gelfand who observed that the efficacy and superiority of European medicine improved relations between missionaries and Africans.<sup>31</sup> In another study, Gelfand noted that the colonial state and various missionary groups cooperated in providing medical services to improve the health of Africans.<sup>32</sup> These works were significant to the present study as they provided useful insights into the role played by evangelical medics in their quest to improve the health of Africans – something this study attempts to do.

Bruce Gilley, a more recent supporter of colonialism, is of the view that the civilising mission heralded by missionaries, without scare-quotes, led to improvements in living conditions for most Third World peoples during most episodes of Western colonialism. He further noted that countries that embraced their colonial inheritance, by and large, did better than those that spurned it. Gilley suggested that colonialism can be recovered by weak and fragile states today in three ways: by reclaiming colonial modes of governance; by recolonising some areas; and by creating new Western colonies.<sup>33</sup> Although the arguments by Gelfand, Gann, Duignan and Gilley are helpful in appreciating dissenting views on the missionary enterprise, they have not escaped criticism from other scholars. Its proponents have been accused of attempting to justify the wrongs committed by colonial governments against Africans. Unlike the aforementioned scholars who occluded African agency in their discourse, the present study attempts to show that Africans played a major role in the growth of the Salvation Army in Chikankata district.

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<sup>30</sup> L.H. Gann and P. Duignan, *Burden of Empire: an Appraisal of Western Colonialism in Africa South of the Sahara* (London: Pall Mall Press, 1967), p.283.

<sup>31</sup> Michael Gelfand, 'Medicine and the Christian Missions in Rhodesia 1857 – 1930', in J.A. Dachs (ed.), *Christianity South of the Zambezi* (Gwelo: Mambo Press, 1973), pp.109-124.

<sup>32</sup> Michael Gelfand, *Northern Rhodesia in the Days of the Charter: a Medical and Social Study, 1878 – 1924* (Oxford: Basil Blackwell, 1961).

<sup>33</sup> Bruce Gilley, 'The Case for Colonialism', *Third World Quarterly* (2017), p.2.

Writing in the 1970s, scholars such as Henry S. Meebelo, Walter Rodney, Ado K. Tiberondwa, and Karen Fields rejected the thesis advanced by those in support of colonialism. To the contrary, they projected missionaries as agents of colonialism.<sup>34</sup> For example, Meebelo noted that David Livingstone was only a forerunner of many more Europeans of the same persuasion who came to destroy the very foundations upon which Bemba power was based.<sup>35</sup> He observed that Chief Chitika's compromising reaction to White Fathers was only the beginning of a process by which Bemba chiefs were, one after another, to fall prey to the twin forces of religion and commerce which were the vanguards of colonialism.<sup>36</sup> In the same way, Karen Fields observed that missionaries served the imperial powers practically by mediating the spread of Western culture and morally by helping their home governments to legitimise colonial rule.<sup>37</sup> Further, Tiberondwa argued that European missionaries who went to Uganda and other African countries introduced Western education mainly as a vehicle for spreading Christianity. They also assisted their home governments in carrying out their colonial policies. He concluded that in colonial Africa, the church and school were allies of the colonial forces based in Europe.<sup>38</sup> These works proved useful to the current study as they revealed the missionaries' hidden interests in Africa.

Similarly, Walter Rodney dismissed the supposed benefits of missionary enterprise and colonialism as projected by Gann and Duignan. He argued that the

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<sup>34</sup> Henry S. Meebelo, *Reaction to Colonialism: a Prelude to politics of Independence in Northern Zambia* (London: Manchester University Press, 1971), p.1; Walter Rodney, *How Europe Underdeveloped Africa* (London: Bogle-L'Ouverture Publications, 1973); Karen Fields, 'Revival and Rebellion in Central Africa: Social and Political Consequences of Missionary Enterprises', Ph.D. Thesis, The Branders University Press, 1977; and Ado K. Tiberondwa, *Missionary Teachers as Agents of Colonialism: a Study of their Activities in Uganda, 1877-1925* (Lusaka: Kenneth Kaunda Foundation, 1978), p.24.

<sup>35</sup> Meebelo, *Reactions to Colonialism*, p.1.

<sup>36</sup> Meebelo, *Reactions to Colonialism*, p.35.

<sup>37</sup> Fields, 'Revival and Rebellion in Central Africa', p.56.

<sup>38</sup> Tiberondwa, *Missionary Teachers as Agents of Colonialism*, p.131.

supposed benefits for Africans such as education and healthcare were unintended, insignificant and of no lasting impact as they were meant to serve capitalist interests. Rodney contended that benefits from the missionary enterprise and its attendant result of colonialism were small, scanty and meant to only facilitate exploitation of Africans. Further, he argued that the limited social services within Africa during colonial times were distributed in a manner that reflected the pattern of domination and exploitation.<sup>39</sup> The above work was useful to the present study as it broadened its perspective on missionaries and their ulterior motives in Africa. However, some of Rodney's arguments have been contested by post-modernist scholars as they overlooked the Africans' agency to forge their own history in the midst of Western influence.

An example of a post-modernist scholar is Walima T. Kalusa who examined the medical encounter between missionaries and the Lunda-speaking people of Mwinulunga district in the North-western province of Zambia. Contrary to the writings of scholars who overrated western medicine over traditional therapies, Kalusa argued that during the early years of colonial rule, evangelical medicine proved largely impotent against diseases of poverty and epidemics encouraged by colonial policies.<sup>40</sup> He further argued that missionary medicine in Africa emerged out of its interactions with Africans and came to fit into local medical systems that missionaries wanted to eradicate in the first place. In their engagement with evangelical medics, it has been argued, Africans re-interpreted, filtered and fine-tuned a new system of healing through their own existing cultural lenses and medical

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<sup>39</sup> Rodney, *How Europe Underdeveloped Africa*, p.321.

<sup>40</sup> Walima T. Kalusa, 'Disease and the Rethinking of Missionary Medicine', Ph.D. Thesis, Johns Hopkins University, 2003, p.90.

knowledge in ways that confounded European medical evangelists.<sup>41</sup> The analysis put forward by Kalusa not only helped us to appreciate competing views on Western medicine but also formed a useful framework for examining the response of Africans to the provision of healthcare services by the Salvation Army in Chikankata district.

Other studies that proved insightful to the present one were those that generally focused on the impact of missionary enterprise in Central Africa and the response of Africans. In view of this, Robert Rotberg argued that missionary work and the overall impact of European experience contributed profoundly to the outward and inward westernisation of the peoples of trans-Zambezia. He observed that many methods of coercion were used by missionaries to obtain compliance with their modernising demands. For instance, they provided employment only for those Africans who professed some seemingly sincere interest in Christianity.<sup>42</sup> Roberts' view is in tandem with that of Charles Guthrie who examined the impact of European administration, commercial, and missionary interests upon the lives of the first generation of African elites at Mwenzo. He observed that while the traditional elites were experiencing a gradual loss of position, a new generation of educated Africans emerged.<sup>43</sup> Although these studies are not directly related to the present one, they were useful in shaping our understanding of the methods of conversion and impact of missionary education on Africans.

David Beach's 'The Initial impact of Christianity on the Shona',<sup>44</sup> attempted to demystify the view that the Shona people saw the advent of missionaries as a

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<sup>41</sup> Kalusa, 'Disease and the Rethinking of Missionary Medicine', p.90.

<sup>42</sup> Robert I. Rotberg, *The Rise of African Nationalism in Central Africa: The Making of Malawi and Zambia 1873 – 1964* (Cambridge: Harvard University Press, 1967), p.9.

<sup>43</sup> Charles C. Guthrie, 'The Emergence and Decline of Mission-educated Elite in Northeast Zambia 1895 – 1964', Ph.D. Thesis, Indiana University, 1978, p.269.

<sup>44</sup> David N. Beach, 'The Initial Impact of Christianity on the Shona', in J.A. Dachs (ed.), *Christianity South of the Zambezi* (Gwelo: Mambo Press, 1973), p.25.

consequence of the occupation of their land by the British South Africa Company (BSAC) in 1890. Beach argued that the southern Shona rulers' reaction to the missions was overwhelming and were keen to secure them for their territories mainly due to demand for imported goods.<sup>45</sup> Beach's study was helpful in understanding African agency in accepting the new faith as well as the role of traditional leadership in planting the missionary agenda.

Further, Edward Berman's work examined the historical perspectives on African reactions to missionary education and to missionaries as people. He argued that missionaries, as agents of European churches, constructed schools because education was deemed indispensable to the main purpose of the Christian denominations – the spread of the Gospel of Jesus Christ. He concluded that Africans were no less averse to using missionaries for their own purpose than the missionaries were for the indigenous people. The study pointed out that the reasons Africans attended mission schools varied but mostly were related to well-defined political, social, or economic consequences.<sup>46</sup> Although the study took a macro approach, it was nonetheless useful as it broadened our perspectives on missionary education as a tool for conversion and how Africans responded to its provision in colonial Africa - an aspect this study investigates.

Another study that proved useful to the current one was Thomas Spear's 'Towards a History of African Christianity'. Spear noted that if Christianity was selectively transmitted by missionaries, it was also selectively received by Africans as they listened to Christian message, interpreted it, and imbued it with meaning within the context of their own values and experiences. He further observed that in

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<sup>45</sup> Beach, 'The Initial Impact of Christianity on the Shona', p.25.

<sup>46</sup> Edward H. Berman, 'African Responses to Christian Mission Education', *African Studies Review*, Vol. 17, No.3 (Dec., 1974), p.527.

many areas of Uganda and western Kenya, missionaries found local catechists and Christian homesteads already in place before they arrived. During this indigenous missionary movement, it is argued, the Christian message shifted subtly from that of a profound nineteenth century European Christianity to a twentieth-century African one thus sowing the seed for the development of African churches to come.<sup>47</sup> Spear's work was important to us as it demonstrated that some Africans were forerunners of the Gospel of Jesus Christ and indigenised European churches to match with their existing cultural values, something this study investigates.

An insightful study on medical evangelism was done by Paul Landau who examined how missionaries of the LMS won converts among the Tswana people of Botswana through surgical work. He argued that missionaries' therapeutic practices served as a tool for evangelism. So successful was medical evangelism that in 1904 Rev. Lewis treated close to 500 patients per month, many of them were converted to the Christian faith.<sup>48</sup> In this way, missionary doctors were provided with the opportunity of spreading the gospel at the same time as healing. The study was significant to the present one as it illuminated the role of European medicine and missionary doctors in winning Africans to Christianity. This study, however, demonstrates that medical evangelism was not a prized strategy by the Salvation Army in Chikankata district.

There are also specific studies that dealt with missionary education in both colonial and post-colonial Zambia which helped to shape the current one. In this respect, Sean Francis Morrow examined the motivation and methods of the London Missionary Society in Northern Rhodesia to 1941, stressing their evangelical aim as

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<sup>47</sup> Thomas Spear, 'Towards the History of African Christianity', in Thomas Spear and Isaria N. Kimambo (eds.), *East African Expression of Christianity* (Oxford: James Currey, 1999), p.3-24.

<sup>48</sup> Landau, 'Explaining Surgical Evangelism in Colonial Southern Africa', pp.261-281.

the key to understanding their enterprise. The study argued that the perceptions of the missionaries drastically changed from an initial wish to overthrow the indigenous ways of life to a more ambivalent attitude. Morrow concluded that missionaries of the London Missionary Society came to regret the impact of western civilisation and wished to preserve a Christianised version of what they perceived as a traditional way of life as a barricade against forces of urbanisation which they believed to be amoral and socially destructive.<sup>49</sup> Although the study spanned only up to 1941, it was vital to the present study as it gave insights into how Africans, who were recipients of missionary education, responded to the European “civilising” mission in ways that were unprecedented and confounding to Christian evangelists. The present study also attempts to show how Africans in Chikankata district responded to the Salvation Army’s provision of educational services.

Richard Lupiya Banda investigated the educational policy and activities of the Dutch Reformed Church Mission in Zambia from 1899 to 1976. He argued that the primary objective of the mission’s educational work was to convert people to Christianity to which the demands of secular education took a second place. With time, however, the educational work of the mission could no longer be viewed as a vehicle for evangelism but rather as a means to consolidate principles and teaching among the adherents.<sup>50</sup> Banda’s work helped in appreciating the changing roles of missionary education in colonial and post-colonial Zambia.

While attempting to appraise the impact of Chitambo Mission on the Lala of Serenje district, Bernard M. Chisenga argued that the nature of its education,

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<sup>49</sup> Sean F. Morrow, ‘Motives and Methods of the London Missionary Society in Northern Rhodesia 1887 – 1941’, Ph.D. Thesis, University of Sussex, 1985, p.100.

<sup>50</sup> Richard L.S. Banda. ‘The Educational Policy and Activities of Dutch Reformed Church Mission in Zambia up to 1976’, M.Ed. Dissertation, University of Zambia, 1981.

penetration, and development perpetuated social and economic inequalities among the chiefdoms. This was because some chiefdoms did not receive a fair share of mission education. The study further observed that the mission contributed through commercial activities to the entrenchment of a cash economy in the district. Finally, Chisenga noted that in the political sphere, the mission championed changes in leadership pattern among the local people. A new educated political leadership was created and assumed district and national leadership of various movements.<sup>51</sup> The present study built on these insights but distinguished itself by bringing the discourse up to more recent times.

Hugo Hinfelaar's work on the history of the Catholic Church in Zambia also proved vital to the present study. Hinfelaar observed that from the early days, the White Fathers in Northern Zambia attempted to establish Christian villages in which potential converts had to live monogamously and attend catechism classes. By 1900, however, it is argued that the White Fathers turned to education of young people as a method of winning genuine converts to Christianity as opposed to catechism classes which were generally shunned by the locals. With education as a major tool of conversion to Christianity, Hinfelaar noted that the White Fathers succeeded in establishing a trail of mission stations in Northern Zambia.<sup>52</sup> The study proved significant to the current one as it portrays the dynamics in the strategies of converting Africans to Christianity employed by missionaries – an aspect this study also investigates.

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<sup>51</sup> Bernard M. Chisenga, 'Chitambo Mission: A History of Missionary Education and its Impact on Lala Society of Serenje District, 1906 – 1964', M.A. Dissertation, University of Zambia, 1987, p.60.

<sup>52</sup> Hugo F. Hinfelaar, *History of the Catholic Church in Zambia* (Lusaka: Bookworld Publishers, 2004).

Equally valuable to the present study was the work by Brendan Carmody. In his study, *Conversion and Jesuit Schooling in Zambia*, Carmody demonstrated how education was a means of promoting conversion at a Roman Catholic Jesuit mission station. While reconstructing the history of the mission's schooling, the study focused on the relationship between the missionaries' ideology of conversion, competing government demands, and aspirations of the local population. He concluded that despite government intervention, mission institutions continued to maintain conversion as a major goal.<sup>53</sup> Carmody's view that education was the major tool of conversion in colonial Zambia is further buttressed by Fay Gadsden who observed that 'the main purpose of the early mission schools was evangelisation'.<sup>54</sup> Contrary to this view, however, this study demonstrates that education was not a major method of conversion for the Salvation Army in Chikankata district.

James Naali's view on education and evangelism is in tandem with that of Carmody and Gadsden. Naali, who examined the methods of converting Africans to Christianity employed by the Pilgrim Wesleyan Missionary Society in Choma, argued that the society's strategies for conversion centred on the provision of Western education, health services, material rewards and evangelism through pastoral training and the use of women.<sup>55</sup> His study was of great significance because it illustrated the common strategies used by European evangelists to convert Africans to Christianity. The present study built on these insights while bringing out the unique strategies of conversion employed by the Salvation Army in Chikankata.

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<sup>53</sup> Brendan P. Carmody, *Conversion and Jesuit Schooling in Zambia* (Leiden: E.J. Brill, 1992), p.9.

<sup>54</sup> Fay Gadsden, 'Education and Society in Colonial Zambia', in Samuel N. Chipungu (ed.), *Guardians in their Time: Experiences of Zambians under Colonial Rule, 1890-1964* (London: Macmillan Press Ltd, 1992), p.99.

<sup>55</sup> James H. Naali, 'A History of the Pilgrim Wesleyan Missionary Society in Choma District, 1930 – 1990', M.A. Dissertation, University of Zambia, 2003, p.8.

Mbaita B. Liwoyo's study focused on the approaches used by various missionaries and the Northern Rhodesian government to combat leprosy. The study observed that the state and missionaries institutionalised leprosy and rehabilitated lepers to become self-sufficient after leaving leprosy settlements.<sup>56</sup> The study, however, only mentioned Chikankata Leprosy Settlement in passing. In doing so, it ignored the concerted contribution of the Salvation Army in combating leprosy. Nonetheless, the study was useful as it illuminated the traditional therapies used by Africans to treat leprosy, an aspect that the current study also contends with.

Mac Dixon-Fyle's work examined the agricultural improvement and political protests on the Tonga plateau. Dixon-Fyle observed that the Tonga plateau farmers generally opposed the Improved Farming Scheme (IFS) – a soil conservation programme introduced by the Department of Agriculture in 1945. He noted that farmers at Keemba Hill settlement who were predominantly of Adventist faith opposed the programme as it deprived them of the membership of the European pool which they had enjoyed since 1942.<sup>57</sup> Dixon-Fyle's study was significant to the present one as it exemplified the reaction of the Tonga people to Western influence.

Elizabeth Colson examined the transformation that occurred in the lives of the Tonga-speaking people of Southern province of Zambia with the advent of Christianity. She noted that Christianity changed the way the Tonga thought about the nature of their world and the meaning of their own lives.<sup>58</sup> Similarly, Rodgers Chuulu examined the extent to which the advent of Christianity impacted on the traditional religion of the Leya people of Chief Mukuni. He argued that the coming

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<sup>56</sup> Mbaita B. Liwoyo, 'Missionary, the State and Leprosy in Zambia, 1893-1964', M.A. Dissertation, University of Zambia, 2011, p.83.

<sup>57</sup> Mac Dixon-Fyle, 'Agricultural Improvement and Political Protest on the Tonga Plateau, Northern Rhodesia', *Journal of African History*, Vol. XVIII No. 4 (1977), pp.579-596.

<sup>58</sup> Elizabeth Colson, *Tonga Religious Life in the Twentieth Century* (Lusaka: Bookworld Publishers, 2006), p.237.

of Christianity in Mukuni village reconfigured local people's conception about *Leza* (God) and also resulted in the dislocation of traditional practices such as ancestor veneration, offertory prayers and rites of passage.<sup>59</sup> The above studies shaped our understanding of the religious life of the people of Southern province and how that was either altered or remained static in the face of Western influence.

A more specific study on the Salvation Army in Zambia was one done by Beverley McInnes who explored the history of the mission in the territory. She further highlighted the growth of Chikankata Mission from 1945 to 1997 with an emphasis on church growth and development of educational and medical services.<sup>60</sup> Her work proved significant to the present study as it provided useful insights on evangelism, education and healthcare provision by the Salvation Army. However, McInnes did not document the strategies the mission used to win converts as well as the challenges it faced in Chikankata. In addition, her work was silent on African agents who helped in the spread of the Salvation Army in Chikankata and its periphery. Finally, her work is methodologically weak as it lacks adequate archival sources to provide a fuller account of the mission's work in Chikankata.

## **1.7 Methodology**

Data for this study was based on archival, oral interviews and secondary sources. The first part of the research was devoted to collecting published and unpublished data in the University of Zambia library where books, theses, dissertations, journal articles, newspapers and magazines were consulted. These

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<sup>59</sup> Rodgers M. Chuulu, 'The Impact of Christianity on the Traditional Religion of the Leya of Mukuni Village in Livingstone', M.Ed. Dissertation, University of Zambia, 2015, p.50.

<sup>60</sup> McInnes, *The Flag Across the Zambezi*, p.70.

sources provided data pertaining to the general missionary enterprise with regard to the conversion of Africans, education, and healthcare provision in Africa.

Primary information was collected from the National Archives of Zambia (N.A.Z.) where unpublished primary documents such as Mazabuka District Tour Reports, Department of African Education Annual Reports, Department of Health Annual Reports as well as various correspondences were consulted. From these documents, data on the Salvation Army's schools and health centres was obtained. In addition, the documents furnished us with information on how Africans responded to the activities of the Salvation Army in Chikankata district.

Further, data was collected from the Salvation Army Headquarters in Lusaka and Chikankata Mission where administrative files, monthly and annual reports, newsletters, Year Books, and publications such as the *War Cry* were consulted. These documents provided official data on pastoral work, education and health institutions run by the Salvation Army in Chikankata.

Lastly, oral interviews were conducted in Chikankata district where first-hand information on African evangelists, methods of conversion, education, and healthcare provision was obtained. Informants included both serving and retired Salvation Army officers, workers, senior soldiers, youths and community members. Prior to the interviews, consent was sought from the informants to document their views about the Salvation Army in Chikankata. These interviews were used to corroborate data from other sources of information.

## **1.8 Organisation of the Study**

The study is divided into six chapters. Chapter One is the Introduction. Chapter Two identifies the strategies of conversion used by the Salvation Army to win African converts in Chikankata district between 1945 and 2015. The third chapter examines the challenges faced by the mission in its evangelical work in Chikankata district. Chapter Four examines the provision of educational services by the Salvation Army, and the reaction of Africans to this. The fifth chapter investigates the provision of healthcare services by the Salvation Army, and the response of the local people. The final chapter is the Conclusion - a summation of the findings of the study.

## CHAPTER TWO

### THE SALVATION ARMY'S STRATEGIES OF CONVERSION TO CHRISTIANITY

#### 2.1 Introduction

This chapter examines strategies used by the Salvation Army to convert Africans to Christianity in Chikankata district and the challenges it faced. It is demonstrated that the role played by African agents and the use of open-air revival meetings and its attendant attractions such as march pasts, brass bands, timbrel displays and uniform wearing in colonial Zambia played a major role in the growth of the Salvation Army in Chikankata. Thus, Africans themselves were active participants in the spread of Christianity. As a result, their evangelical work in Chikankata was too visible to be eclipsed by Western missionaries.

The chapter further argues that the Salvation Army was less dependent on education and medical care as tools of evangelism. This stands in contrast to arguments by such scholars as Fay Gadsden, Edward H. Berman, Michael Gelfand, and Brendan Carmody who note that education and medical therapies were the principal methods through which missionary groups won African converts.<sup>1</sup> In addition, the chapter notes that in response to changing socio-political developments in post-colonial Zambia, the Salvation Army focused on the use of the media in

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<sup>1</sup> Fay Gadsden, 'Education and Society in Colonial Zambia', in Samuel N. Chipungu (ed.), *Guardians in their Time: Experiences of Zambians under Colonial Rule, 1890-1964* (London: Macmillan press Ltd, 1992), p. 108; Edward H. Berman, 'African Responses to Christian Mission Education', *African Studies Review*, Vol. 17, No.3 (Dec., 1974), p.527; Michael Gelfand, 'Medicine and the Christian Missions in Rhodesia 1857 – 1930', in J.A. Dachs (ed.), *Christianity South of the Zambezi* (Gwelo: Mambo Press, 1973), p.114; and Brendan P. Carmody, *Education in Zambia: Catholics Perspectives* (Lusaka: Bookworld Publishers, 1999), p.4.

winning souls to Christ. Special attention was paid to the moulding of young people into becoming loyal and future soldiers of the mission.

## **2.2 Conversion Strategies in Chikankata during the Colonial Period**

### **2.2.1 The Role of African Agents**

The years between 1945 and 1964 were a period of growth for the Salvation Army in Chikankata. It is reported by Beverley McInnes that by the 1950s, the mission had close to 40 centres in Chikankata district and the surrounding areas.<sup>2</sup> The growth in the number of centres was a result of the methods devised by the mission to win converts to Christianity. From the early days of the Salvation Army in colonial Zambia, African agents such as Gunduza Tembo, Matthew Mbiri, Paul Shumba, and Matthew Kunzwi Shava were instrumental in spreading the evangelical work of the Salvation Army long before schools and medical institutions were established.

In Chikankata, too, African agents played a significant role both in the opening and running of Salvation Army centres. For instance, informant Jairos Magaya recalled that Hezekiah Habanyama, a former migrant worker at the Urungwe mica mines in Southern Rhodesia, carried out vigorous evangelical work for the Salvation Army in the Gwembe valley leading to the establishment of a number of outposts including the one at Matula in the mid 1940s. Habanyama also helped to reorganise the Moonga centre in the valley which saw it attaining the status

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<sup>2</sup> Beverley McInnes, *The Flag Across the Zambezi: A History of the Salvation Army in the Zambia and Malawi Territory, 1922 – 1997* (Lusaka: Zambia and Malawi Territorial Headquarters, 1997), p.35.

of a corps.<sup>3</sup> He not only contributed to the growth of religious work in the Gwembe valley but also the development of girl education there.<sup>4</sup>

The same can be said about Andrew Handila who fell under the influence of the Salvation Army while working in Southern Rhodesia as a labour migrant. Upon returning to Malala, his home village in Mwenda chiefdom in the late 1940s, Handila helped develop a local corps there. As a soldier of the Salvation Army, he was opposed to the practice of beer drinking which was rampant at that time in Malala village. He achieved little in this regard but his influence was markedly visible among his close relations. Informant Isaac Chikandi reminisced that:

I knew Andrew Handila personally. We used to admire his vigour for the things of God. He was an influential soldier in his home village of Malala and was among the founders of the Salvation Army there. His influence was evident even among his family members such that one of his sons, John Handila, ended up becoming an officer in the Salvation Army.<sup>5</sup>

The development of Malala Corps under Handila and other African agents led to the opening of subsidiary centres by the end of the 1940s and early 1950s at Syakantu, Nameembo, Ngangula, Shapwaya, Nkaba, Simwaba, and Hamwimbu.<sup>6</sup>

Other African agents who had considerable influence among their families and communities were Johan Jairos Chilala and Japhet Magaya. Chilala attended the school at Ibbwe Munyama shortly before its relocation to Chikankata in June 1945. In early 1945, Chilala went back to Hampande village in chief Mwenda where he

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<sup>3</sup> Interview, Jairos Chimowa Magaya, Moonga Village, Chikankata District, 24/03/2019. Magaya was an eye-witness to the establishment of Chikankata Mission in 1945. A corps is a group of Salvation Army soldiers numbering 50 and above worshipping together at a particular centre.

<sup>4</sup> McInnes, *The Flag Across the Zambezi*, p.180. In recognising Hezekiah Habanyama's contribution, the Salvation Army paid a glowing tribute to him during the Diamond Jubilee celebrations of 1997.

<sup>5</sup> Interview, Isaac Chikandi, Hampande Village, Chikankata District, 24/03/2019. Chikandi was among those who welcomed Major Philip Rive and his party from Ibbwe Munyama in June 1945. He later worked as a cook at Chikankata Mission.

<sup>6</sup> National Archives of Zambia (hereafter N.A.Z.), SP4/12/54, Salvation Army Chikankata, Letter to the Financial Councillor, Plateau Tonga Native Authority, 24 September, 1954.

converted not only his entire family but neighbours as well. Chilala's congregation was a forerunner to what would become Cifwankala Corps. Chikandi observed that:

It was my brother, Johan Chilala who introduced the Salvation Army in Hampande village after attending school at Ibbwe Munyama. Every Sunday, we sat under a tree, beating the drum and singing, "*enda kusalala kwa Leza*" [Walk in the light of God]. Within a few weeks, the number grew to about 30. When Major Philip Rive and his party came to Chikankata in June 1945, it was our congregation that welcomed them with drumming, songs and dances. That was how we moved our centre to the mission. Since then, I have never departed from the Salvation Army.<sup>7</sup>

Like Chilala, Japhet Magaya, was influential in introducing some Africans in Moonga village to the Salvation Army in the mid 1940s. The members were added to the centre that was established at the mission.<sup>8</sup>

Another African agent who contributed significantly to the development of Salvation Army centres was Shadreck Cheenda, a trained officer at the Howard Officers' Training College in Southern Rhodesia. Cheenda pioneered the opening of a centre at Namaila in Chief Sianjalika's area in 1943.<sup>9</sup> Towards the end of the 1940s, Cheenda helped to establish three other centres at Munjile, Mainza and Cilengo in Chief Sianjalika's area. In the early 1950s, Cheenda helped to develop centres in Mwanza chieftdom where he had an illustrious career. His evangelical work led to the revitalisation of Mwanza Corps after a period of stalled evangelical work there due to apathy from the local people. He also served in other centres such as Syanyoolo, Chikani, Simwaba and finally at Malala where he retired from active service in 1962. Cheenda died at Nansenga on 26 November, 1975. His legacy

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<sup>7</sup> Interview, Chikandi.

<sup>8</sup> Interview, Jairos Magaya.

<sup>9</sup> Ng'andu Peter Magande, *The Depth of my Footprints: From the Hills of Namaila to the Global Stage* (Atlanta: Maleendo and Company Independent Publishers, 2018), p.38.

influenced his grandchild, Joster Cheenda, to become an officer in the Salvation Army in 1981.<sup>10</sup>

Also trained at Howard Officers' Training College in Southern Rhodesia was David Mweetwa who became an influential African evangelist. By opening a number of centres in Naluama chiefdom, Mweetwa contributed to the development of the Salvation Army there. For instance, he pioneered the opening of a centre at Kasengo in 1950. Mweetwa was also instrumental in the opening of an outpost in Headman Chikani's area three years later. In the early 1960s, he was the officer-in-charge of a new opening at the Chikankata Practice School which later became the Chitumbi Corps. He retired in 1973 having risen to the rank of Brigadier.<sup>11</sup>

In the early 1960s, Isaac Chikandi and Samuel Haachitapika, who had worked with Brigadier Mweetwa, pioneered the opening of Chitumbi Corps near Chikankata Practice School. Chikandi became the Sergeant Major for the new centre. From Chitumbi, more centres were created by African agents on the peripheries of Chikankata Mission. Dundu, Kakole, Mabwetuba, and Mabwetuba East centres were thus established as out-growers of Chitumbi Corps.<sup>12</sup> These centres were initially under the supervision of Chikandi and Haachitapika. The establishment of centres in Mabwetuba was a huge success for the Salvation Army because the area was renowned for the worshipping of ancestral spirits owing to the numerous shrines found there.<sup>13</sup>

Other African officers served in administrative positions and helped to train more evangelists. For instance, Jonah Kaumba, having been educated at Chikankata,

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<sup>10</sup> Interview, Joster Cheenda, Kafue District, 28/07/2019.

<sup>11</sup> Interview, Isaac Mweetwa, Chikankata Village, Chikankata District, 26/03/2019.

<sup>12</sup> Interview, Chikandi.

<sup>13</sup> Interview, Chikandi.

became an officer in the Salvation Army in the 1950s. He rose to the rank of Major and later became the first Zambian [Salvation Army] officer to train cadets at the Salvation Army College in Lusaka between 1974 and 1979.<sup>14</sup> Thus, African agents were key architects in furthering the work of the Salvation Army in Chikankata. Admittedly, McInnes noted that ‘much of the work in new centres and outposts is owed to local officers who despite inadequate training could lead worship and witness’.<sup>15</sup>

### **2.2.2 Open-air Meetings and March Pasts**

Undoubtedly, open-air meetings and march pasts were the anchor strategies of conversion practised by the Salvation Army world over. In the East End of London, William Booth, the founder of the Salvation Army, enlisted a following by holding revival meetings in open-air and rented rooms.<sup>16</sup> Thus, from the early years of the Salvation Army in Europe and the Americas, “mounted” leaders flying banners, and disciplined “battalions” filled city streets with sights and sounds of a conquering army. Salvationists first marched and then preached, invoking what they called “the cathedral of the open-air”.<sup>17</sup> Since then, open-air meetings became one of the principal means of winning converts to the Salvation Army.

In Chikankata, too, the Salvation Army relied heavily on march pasts and open-air meetings to win converts. Unlike education which targeted young people for conversion, march pasts and open-air meetings cut across age-groups. While the

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<sup>14</sup> McInnes, *Flag Across the Zambezi*, p.190.

<sup>15</sup> McInnes, *Flag Across the Zambezi*, p.143. Similar observations had been made in Ghana and Kenya. For details, See, Isaac Boapeah, ‘The History of the Salvation Army in Ghana, 1922 – 2006’, MPhil. Dissertation, University of Ghana, 2010, p.67; and Bengt Sundkler and Christopher Steed, *A History of the Church in Africa* (Cambridge: CUP, 2000), p.893.

<sup>16</sup> Eason, ‘All Things to All People’, p.11.

<sup>17</sup> Winston, *Red-Hot and Righteous*, p.40. March pasts or parades were also called marches of witness. They involved soldiers marching in designated files imitating a military brigade. On the sidelines were usually Sergeant Majors (elders of a local congregation) commanding the soldiers and giving orders as they marched.

Catholics had given up on the older generations as being stiff-necked and difficult to convert,<sup>18</sup> the Salvation Army appealed to them through “military” processions and open-air meetings as shown in Figure I below. Chikandi and Bexter Magaya both recalled that in the early years of the Salvation Army in Chikankata, march pasts and open air meetings were key to the proselytisation of Africans.<sup>19</sup> The meetings were held during week days as well as on Sundays. Salvation Army officers, teachers, and soldiers of local assemblies conducted weekly village meetings at strategic points such as water-holes, and markets. Once people had been charmed by the marching soldiers, the gospel was preached and converts were won.<sup>20</sup>

**Figure I: Soldiers on a March Past in Chikankata**



Source: Paul du Plessis, [www.thedups.com](http://www.thedups.com) (Accessed on 10.11.2019).

<sup>18</sup> Carmody, *Jesuits Schooling*, p.27.

<sup>19</sup> Interviews, Chikandi and Magaya.

<sup>20</sup> Interview, Chikandi.

Marches and open-air revivals were also a common feature on Sundays. Soldiers clad in cream-white uniforms could march to a designated place where the Gospel was preached. The people who got attracted were encouraged to accompany the marching soldiers to the hall for the salvation meeting (See Figure II below). Through this method, one informant narrated how she got converted to the Salvation Army in about 1963:

One Sunday morning as I was coming from visiting a bereaved friend near Malabo, I met a group of Salvation Army soldiers marching, drumming and singing joyfully. They were singing, '*Ilaenda, Ilaenda, Nkondo Ya Lufutuko Ilaenda, Ba Lwani ba Jesu kamuyuma, Nkondo Ya Lufuko Ilaenda*' [It is marching on, marching on, the Salvation Army is on the move, Soldiers of Jesus, be strong, the Salvation Army is marching on]. I got attracted and joined the marching soldiers. That was how I got converted.<sup>21</sup>

It was under such circumstances that Africans in Chikankata were converted to Christianity and became members of the Salvation Army.

**Figure II: Soldiers Returning from an Open-air Meeting**



Source: Paul du Plessis, [www.thedups.com](http://www.thedups.com) (Accessed on 10.11.2019).

<sup>21</sup> Interview, Precious Habeenzu, Hampande Village, Chikankata District, 24/07/2019.

### 2.2.3 Drum, Brass Band and Timbrel Display

Marches of witness and open air meetings were equally savoured by the use of the drum or brass bands. During the initial establishment of the Salvation Army in Chikankata, brass bands were non-existent. The drum was, therefore, used to send a message of invitation to prospective converts. Chikandi reminisced how two African Salvationists, Captain Kunzwi Shava and another only remembered as teacher Ngoma, beat the drum much to the delight of potential converts:

Captain Shava and Ngoma did a lot to see to it that the Salvation Army succeeded in this area. He could organise open-air meetings during week days. With a drum hang around his shoulders and beating it with all his mighty, many people found themselves attending his meetings. Thereafter, he could preach, entreating the people to abandon ancestral worship and become Christians.<sup>22</sup>

Africans, therefore, became attracted to the drum as it tended to blend aspects of African culture with Christianity. However, the use of the drum was not unique to Chikankata as this strategy was also widely utilised in Western Kenya and colonial Ghana.<sup>23</sup>

In the 1950s and 1960s, march pasts and open air-meetings in Chikankata were further invigorated by the use of brass bands. The instruments were donated by friends of Chikankata Mission in the United States of America (USA) and the United Kingdom (UK). The history of the brass band in the Salvation Army dates back to the 1870s when Charles William Fry, a leading member of the Salvation Army in London, along with his three sons, Fred, Ernest, and Bert, introduced the use of trumpets within the movement. It was then that the Salvation Army marches began

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<sup>22</sup> Interview, Chikandi.

<sup>23</sup> Sundkler and Steed, *A History of the Church in Africa*, p.893; and Boapeah, 'A History of the Salvation Army in Ghana', p.67.

to make a significant visual and audible impact with the flag at the front of the procession followed by officers.<sup>24</sup> This is illustrated in Figure III below.

**Figure III: Brass Band during a March Past**



Source: Field Research Photo, Chikankata, 27 March, 2019.

Brass bands, therefore, became another important point of attraction during march pasts and open air-meetings in Chikankata. Soldiers marched behind the band singing alongside with bandsmen to the delight of onlookers. Informant Jairos Magaya recalled that:

The coming of the brass band in the 1950s added vitality to our marches of witness in that they were able to pull large crowds than was the case before. With the band leading the procession and marchers singing

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<sup>24</sup> Blyth, 'Music Practice within the Salvation Army', p.27.

along, we produced an irresistible spectacle of musicians which attracted others to join us.<sup>25</sup>

The popularity of the brass music helped to pull converts to join the ranks of the Salvation Army. In Chikankata, brass music attracted students and community members alike. ‘I joined the Salvation in 1954 because of the band of which am still a member today’, narrated informant Tapson Malingapatsi.<sup>26</sup>

However, becoming a member of a brass ensemble by Africans was not limited to the object of the mission. To the Africans, becoming a member of the brass band had various personal gains that were not necessarily attached to the spiritual life of an individual. First, the band brigade was elitist in the eyes of both church and community members. The band led the congregation during open-air meetings and corporate worship through songs. It had also a special place in the church close to the pulpit overtly labelled, “Bandsmen”. In addition, the brigade had a special and attractive maroon jacket and a pair of black trousers as uniform. This made it distinct from the rest of the soldiers, including officers.<sup>27</sup> As a result, bandsmen enjoyed a certain social status that was above the ordinary soldier. ‘The band gave me a feeling of being unique among my peers ... I was able to get even the attention of girls in the church’,<sup>28</sup> recalled informant Malingapatsi.

Secondly, becoming a band member meant more tours and adventures in far-flung areas. Whenever the mission needed to open new centres, the band was taken along to help lead march pasts and open-air revivals.<sup>29</sup> Perhaps what was more attractive to bandsmen during such outdoor activities was the hospitality given to them. Realising that man could not live on the word of God alone; bandsmen

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<sup>25</sup> Interview, Jairos Magaya.

<sup>26</sup> Interview, Tapson Malingapatsi, Kitwe District, 10/07/ 2019.

<sup>27</sup> Interviews, Chikandi and Jairos Magaya.

<sup>28</sup> Interview, Malingapatsi.

<sup>29</sup> Interview, Chikandi.

relished the time of sharing food. It was a moment of replenishing the lost energy during the long marches and continuous blowing of trumpets. A tour devoid of food was deemed unsuccessful by band members despite the number of converts the campaign could have yielded. Major Magaya, a retired officer of the Salvation Army, observed that food was an indispensable component during campaigns with bandmen.<sup>30</sup> Similarly, Tapson Malingapatsi commented that:

One good thing about being a member of the band was that it gave us an opportunity to travel extensively. I personally enjoyed the hospitality we received during our tours. Food was usually plenty to help us replenish the lost energy. It was an attraction that made others to join the band.<sup>31</sup>

Thus, it can be argued that Africans did not join band ensembles to meet the objectives of the church only but for social and physical gains as well.

Brass bands blended well with timbrel brigade displays which were initially a preserve of girls and women. Junior and senior timbrel brigades accompanied brass bands forming a spectacular “army” of musicians. A special moment was given to the brigade to display their tambourines in a coordinated, systematic and patterned way much to the excitement of spectators. In this way, both girls and women were attracted to join the Salvation Army in order to become members of the timbrel brigades. ‘I was attracted to join the Salvation Army in 1962 because of the hilarious display of timbrels by the Women’s Brigade’,<sup>32</sup> narrated Delite Mweemba. Timbrel brigades also played a key role of “electrocuting” the church atmosphere during services. Each time timbrels were played, church members were left in high spirit.<sup>33</sup>

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<sup>30</sup> Interview, Bexter Magaya, Chikankata Village, Chikankata District, 24/03/2019.

<sup>31</sup> Interview, Malingapatsi.

<sup>32</sup> Interview, Delite Mweemba, Hayingwa Village, Chikankata District, 25/03/2019.

<sup>33</sup> Interview, Bexter Magaya.

#### 2.2.4. Uniform Wearing

Another source of attraction to the Salvation Army was uniform wearing by its members. The wearing of the uniform was initiated in 1878 by early English Salvation Army pioneer, Elijah Cadman who declared that ‘I would like to wear a suite of clothes that would let everyone know I mean war to the teeth and salvation for the world’.<sup>34</sup> Thus, by 1890 a standard uniform of a blue tunic, black braid and red trimmings was adopted in England.<sup>35</sup> The love for the military in Victorian England influenced the pattern of the uniform. However, although the style of dress reflected the militarism of the late nineteenth century, it had a much deeper significance for those within the movement. The uniform was not only a popular means of attracting attention but crucially was a symbol of Salvationists’ separation from the world. To Booth, ‘it was a security against the snares and influences of fashion’.<sup>36</sup>

In Zambia, the Salvation Army adopted a cream-white tunic with blue trimmings for soldiers in the 1920s. The uniform was characterised by the “S” insignia for “Salvation” and carried the meaning “Saved to Serve”. The choice of the colour of the uniform was influenced by the weather pattern in Zambia. Applying the law of science, it was believed that the cream-white colour would help reflect heat especially in summer when temperatures were quite high (See Figures I and II above). However, uniform wearing was a preserve of officers and soldiers. Any willing adherents aged 15 years and above were free to enrol in the recruit classes and eventually be sworn in as senior soldiers.<sup>37</sup> March parades and open-air revival

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<sup>34</sup> Cited in B. Boon, *Play the Music Play!* (St. Albans: Campfield Press, 1966), p.175.

<sup>35</sup> Blyth, ‘Music Practice within the Salvation’, p.32.

<sup>36</sup> Blyth, ‘Music Practice within the Salvation’, p.32.

<sup>37</sup> Interview, Bexter Magaya.

meetings were, therefore, made more attractive by soldiers adorned in uniforms.

Chikandi commented that:

Uniform wearing has been one of our strengths as a church. You may wish to know that we were the first church in Zambia to begin wearing uniforms. I remember teaching five recruits in 1963 that joined the church because they were attracted by the beauty of our uniform. Several other people joined *Inkondo Ya Lufutuko* [The Salvation Army] because of the uniform.<sup>38</sup>

Africans had their own reasons for wearing the uniform. The reasons transcended the spiritual connotation. To many African converts, the uniform provided the latest trends in fashion especially at a time when cloth was still highly coveted. The uniform made them appear to be of a higher class than their kindred. Since there were no other alternatives to appropriate the uniform save to join the Salvation Army, Africans were trapped into becoming Salvationists. ‘During the colonial period when cloth was not as abundant as it is today, uniform wearing came with a special status in the community’,<sup>39</sup> recalled Jairos Magaya.

Further, uniform wearing raised the status of Salvation Army soldiers to the level of African policemen, soldiers of the Northern Rhodesia Regiment, messengers, and district cadets. Often times, community members addressed uniformed Salvationists as *basilumamba* (soldiers) or *basilikali* (police). This was partly influenced by the love for the military which sometimes passed through Chikankata while on training. In 1956, for example, the Mazabuka District Commissioner notified Chiefs Mwenda and Naluama about the presence of the Northern Rhodesia Regiment that was marching through the two chiefdoms as part of its training.<sup>40</sup> Africans, therefore, created an imagery of the military and attained a

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<sup>38</sup> Interview, Chikandi.

<sup>39</sup> Interview, Jairos Magaya.

<sup>40</sup> N.A.Z., SP3/6/3, Chief Mwenda Native Authority, Letters from the Mazabuka District Commissioner to Chiefs Mwenda and Naluama, 11 June, 1956.

certain social standing in society. A full tunic made African converts to stand out even among messengers and African authority police whose uniforms were arguably inferior to that of the Salvation Army.<sup>41</sup>

### **2.2.5 Indigenisation and Popular Culture**

One of the strengths that the Salvation Army used to convert Africans to Christianity was its ability to adapt and localise the church in the different parts of the world. The Booths drew inspiration from a transatlantic revivalism that encouraged the use of adaptive measures. It was this principle that helped them to embrace and endorse many features of African life such as popular tunes, food, shelter, and polygamy.<sup>42</sup> However, while the Salvation Army was ready to compromise and bargain on some aspects of African tradition, it took a strong stance against others, particularly beer drinking.

In Chikankata, the Salvation Army embraced some of the traditional aspects that had been part of the Africans' belief and value systems. For instance, the church accepted polygamous men without having to divorce their subsequent wives. This was contrary to what was preached by other missionaries such as the Catholics, Adventists and Wesleyan Methodists.<sup>43</sup> Polygamous members became known as "adherents" and had a special section in the soldiers' roll book where their names were captured.<sup>44</sup> These were regarded as friends of the Salvation Army even though they had not yet made a decision to become "soldiers". Some polygamous adherents became soldiers although they could not be allowed to lead congregations. This methodological flexibility helped the Salvation Army attract membership. For

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<sup>41</sup> Interview, Bexter Magaya.

<sup>42</sup> Eason, 'All Things to All People', p.9.

<sup>43</sup> See Carmody, *Jesuits Schooling*, p.27; James H. Naali, 'A History of the Pilgrim Wesleyan Missionary Society in Choma District, 1930 – 1990', M.A. Dissertation, University of Zambia, 2003, p.47; and N.A.Z., SP4/2/76, Mazabuka District Tour Report No. 6 of 1952.

<sup>44</sup> Interview, John Mweene, Chikankata Village, Chikankata District, 30/03/2019.

instance, Cifwankala Corps had 46 adherents in 1959.<sup>45</sup> At Chikani in Naluama's area, there were 16 adherents in 1963.<sup>46</sup>

Although most of the popular entertainment offered in Victorian England and American cities were absent in a rural setting like Chikankata, the Salvation Army still applied the concept of appropriating popular culture especially in the area of music. The mission adopted some aspects of traditional music and incorporated them into the local hymn book for the church. In the 1960s, songs from the English Salvation Army Song Book (SASB) were translated into Tonga by early mission-educated Africans such as Kenneth Maguswi, and Morse Ng'andu.<sup>47</sup> This led to the production of the first-ever Tonga SASB with 288 songs of which 31 were composed by Africans at Chikankata Mission.<sup>48</sup> Thus, African Salvationists were not only translators of Christian liturgy but also composers of hymn songs. The composed songs were modelled along African popular tunes.

In line with the Tonga religious life in colonial Zambia, the songs composed by Africans replicated those performed at *malende* (shrines) and festivals. Popular tunes were accompanied by clapping that simulated worship at shrines and accorded respect to the supreme deity. For example, the first song in the Tonga hymn book depicted Africans entreating *Leza* (God) to send rains for all creation and agricultural crops during a prolonged dry spell.<sup>49</sup> This suggests that the Salvation Army appropriated some aspects of African culture to help the local people make sense of the new religion within existing cultural values and belief systems. In this way, Africans accepted the Salvation Army since little had changed concerning their

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<sup>45</sup> The Salvation Army, Cifwankala Soldiers' Roll Book, 1959.

<sup>46</sup> The Salvation Army, Chikani Soldiers' Roll Book, 1963.

<sup>47</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Annual Inspection Report, 06/04/1955.

<sup>48</sup> The Salvation Army, *Tonga Song Book* (Chikankata: Chikankata Mission, 1991).

<sup>49</sup> The Salvation Army, *Tonga Song Book*, p.1.

conceptualisation of the supreme deity except for the substitution of ancestral spirits with Jesus Christ as the intermediary between men and God.

### **2.2.6 Congress Meetings**

Congress meetings (*Mahuka*) were annual regional and national gatherings that attracted all centres in a given division or territory. The meetings were usually held in August or September of each year. Here, an aggregate of Salvation Army methods were displayed. To informant Chikandi, congress meetings were a measure of the numerical growth of the church. It was also an opportunity to witness for Christ and win new converts.<sup>50</sup> Such gatherings were usually graced by high ranking officials such as the General, Territorial Commander (TC) or Divisional Commander (DC).

From the first congress meeting that was held at Ibbwe Munyama in 1928, several others were subsequently and consistently held. In Chikankata, the first *Mahuka* was held in October 1946 at Malala, eight kilometres from the mission. The meeting was graced by Colonel George Grattan, TC for the two Rhodesias.<sup>51</sup> It was attended by nearly 3,000 people some having come from as far as the Gwembe valley.<sup>52</sup>

In September 1953, congress meetings were held according to sections. The Territorial Commander, T. Holbrook, officiated at five congress meetings held at Mainza, Hakwamba, Ching'ang'auka, Nameembo, and Malala.<sup>53</sup> In 1954 and 1958,

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<sup>50</sup> Interview, Chikandi.

<sup>51</sup> McInnes, *Flag Across the Zambezi*, p.72.

<sup>52</sup> McInnes, *Flag Across the Zambezi*, p.72.

<sup>53</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from the Salvation Army Manager of Schools to Mazabuka District Commissioner, D.C. Williams, 21 September, 1953.

congress meetings were held at Malala.<sup>54</sup> The latter was officiated by the visiting General, Wilfred Kitching from London.<sup>55</sup> During these meetings it is estimated that 60 new converts were won.<sup>56</sup> Sometimes, congress meetings were held in areas where the Salvation Army had never existed. At the close of the gathering, a new centre was established for the local converts in their home area.<sup>57</sup>

In addition to the spiritual ecstasy experienced, Africans viewed congress meetings as an adventure and a way of reuniting with friends from other areas. In this respect, the meetings acted as re-energisers even to backsliders who at the thought of visiting new areas and seeing friends were encouraged to attend. Jairos Magaya recalled that “*Mahuka* always brought excitement among members. It was a time for adventure, meeting old and new friends as well as learning new songs. Everyone looked forward to attending these meetings including those who had backslidden”.<sup>58</sup> At such meetings, singing and “military” drill competitions characterised most evening services. For instance, McInnes noted that ‘during the 1946 congress, Malala came out first in song presentation while Sinwambwa [sic] was the best in drill’.<sup>59</sup> Prizes were given to the two best corps and their respective runners-up. Songs learnt at the congress meeting were sung joyfully at local centres until the next one. Congress meetings, therefore, helped the Salvation Army to re-assert its influence on its soldiers and converts through sermons, teachings, and other forms of attractions (See Figure IV below).

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<sup>54</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Annual Inspection Report for the Department of African Education, 1955.

<sup>55</sup> McInnes, *Flag Across the Zambezi*, p.145.

<sup>56</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from the Salvation Army Manager of Schools to Mazabuka District Commissioner, D.C. Williams, 21 September, 1953.

<sup>57</sup> Interview, Chikandi.

<sup>58</sup> Interview, Jairos Magaya.

<sup>59</sup> McInnes, *Flag Across the Zambezi*, p.144. Sinwambwa should read as Simwaba.

**Figure IV: Soldiers and Adherents during Malala Congress**



Source: Paul du Plessis, [www.thedups.com](http://www.thedups.com) (Accessed on 10.11.2019)

### **2.2.7 Education and Evangelism**

In the historiography of missionary education in central Africa, a number of studies have demonstrated that schools were the main centres of conversion to Christianity during the colonial period. For instance, Edward Berman argued that missionaries, as agents of European churches, constructed schools because education was deemed indispensable to the main purpose of the Christian denominations – the spread of the gospel of Jesus Christ. He pointed out that the reasons Africans attended mission schools varied but mostly were related to well-defined political, social, or economic consequences.<sup>60</sup>

Similarly, Brendan Carmody observed that schools during the colonial period undoubtedly gave the Catholic Church at Chikuni new members who were mainly

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<sup>60</sup> Berman, 'African Responses to Christian Mission Education', p.527.

school converts. However, their conversion to Christianity was not by reason of superior explanatory power of the religious message but because of the mission's ability to launch them into modern sectors of the economy.<sup>61</sup> According to Fay Gadsden, 'mission schools were intended to, and indeed did provide the major source of converts to Christianity'.<sup>62</sup> In another study, Gadsden noted that in the colonial period, education was considered a major tool of evangelism.<sup>63</sup> While the current study situates itself within the context of the foregoing views, it demonstrates that not all missionary groups in colonial Zambia were wholly dependent on education as a means to conversion. Missionary groups that entered Northern Rhodesia in the 1920s such as the Salvation Army did not solely utilise schools as modes through which to convert Africans to Christianity. This was due to increased government control over education at the time of their entry into Northern Rhodesia.

There is no doubt that the Salvation Army established its mission and a number of schools which also acted as centres of conversion. Beverley McInnes noted that:

In all the villages in which The Salvation Army was at work was a corps [church] and a school – the school being the greatest attraction – with either an officer [pastor] or a teacher in charge. Thus the officer must also do the work of a teacher, the teacher the work of an officer.<sup>64</sup>

From the foregoing, it is clear that Salvation Army schools especially in the early days at Ibbwe Munyama served as sites of conversion. The growing demand for

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<sup>61</sup> Brendan Carmody, 'Conversion and Schooling at Chikuni, 1905 – 1939', in Brendan Carmody (ed.), *African Conversion* (Ndola: Mission Press, 1988), p.94.

<sup>62</sup> Gadsden, 'Education and Society in Colonial Zambia', p. 108.

<sup>63</sup> Fay Gadsden, 'Patriarchal Attitudes: Male Control over Policies towards Female Education in Northern Rhodesia, 1924 – 63', *Zambia Journal of History*, no. 6/7 (1993/1994), p.33.

<sup>64</sup> McInnes, *Flag Across the Zambezi*, p.35.

formal education by Africans and the need to acquire skills for the labour market explains why African children were mainly attracted to attend these schools.<sup>65</sup>

However, using schooling as a means of evangelism at a time when the colonial state had taken the responsibility of funding African education militated against the Salvation Army's evangelical work of winning converts. During the thirty years of rule by the British South Africa Company (BSAC), Northern Rhodesia had no coherent or constructive policy towards education. Therefore, missionaries took it upon themselves to provide education services to Africans. The interest of missionaries was to provide rudimentary education which could enable converts to read the Bible. Each missionary group designed its own curriculum.<sup>66</sup> This worked to the advantage of missionaries who were using education as a tool for conversion with little or no interference from the government.

In 1924, the BSAC handed over the administration of the territory to the colonial office. At that time, the Phelps-Stoke Commission chaired by Dr Jesse Jones had made a number of recommendations which eventually culminated in the enunciation of the *Education Policy in British Tropical Africa* in 1925.<sup>67</sup> One of the main issues it addressed was the system of grants-in-aid in which financial assistance was to be given to voluntary schools.<sup>68</sup> The new policy also provided boarding and

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<sup>65</sup> Interview, Jairos Magaya.

<sup>66</sup> Gadsden, 'Education and Society in Colonial Zambia', p.98.

<sup>67</sup> E.H. Berman, 'American Influence on African Education: The Role of the Phelps-Stokes Fund's Education Commissions', *Comparative Education Review*, Vol. 15, No. 2 (1971), pp.132. The Phelps-Stokes Fund was established in 1911 by the will of New York philanthropist, Caroline Phelps Stokes. In 1920, the Fund sent an education commission to West, South and Equatorial Africa in an attempt to link Africans with Afro-Americans in the United States. In 1923, the Phelps-Stokes Fund, working with the British Colonial Office and missionaries bodies, instituted another education commission – the Phelps-Stokes Commission which was tasked to: investigate the educational needs of the people in the light of their religious, social, hygienic and economic conditions; ascertain the extent to which the educational needs of Africans were being met; and assist in the formulation of plans to meet the educational needs of the locals.

<sup>68</sup> Peter Snelson, *Educational Development in Northern Rhodesia 1883 – 1945, Second Edition* (Lusaka: Kenneth Kaunda Foundation, 1974), p.142.

building grants. In addition, the education department set territory-wide examinations for teacher certificates for Standard IV and above.<sup>69</sup> The implication of the new policy for missionary societies as observed by Gadsden was that money was made available for education but the service providers had to concentrate on offering formal education as opposed to catechist lessons.<sup>70</sup> Therefore, by directing educational policy and the supervision of all educational institutions, the colonial state robbed mission schools of their prized role as centres of conversion.

The Salvation Army, having officially entered Northern Rhodesia in 1927, after the enactment of the *Education Policy in British Tropical Africa*, had to operate in tandem with its provisions. This meant that the mission could not fully utilise education to win converts to Christianity due to growing secularisation of schools. In view of this, Gadsden noted that:

The numbers of Christians continued to grow in the 1940s and 1950s, and after independence. This development was less dependent on evangelisation in village church schools than in previous periods. More of the [mission] schools received government assistance and thus became more secular. From 1952, all schools were subordinated to the local education authorities and a united teaching service was established.<sup>71</sup>

In view of the foregoing, it can be argued that unlike early missionary societies such as the Catholics, Free Church of Scotland, London Missionary Society (LMS), and the Adventists which enjoyed almost unrestricted and relatively long period of evangelism through education, it was not the case with the Salvation Army.

The above thesis is buttressed by the fact that in the 1950s when local educational authorities held a tight grip on education provision, some Salvation Army centres existed without schools. The colonial state had closed down centres

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<sup>69</sup> Snelson, *Educational Development in Northern Rhodesia*, p.152.

<sup>70</sup> Gadsden, 'Education and Society in Colonial Zambia', p.111.

<sup>71</sup> Gadsden, 'Education and Society in Colonial Zambia', p.120.

that did not meet the standard requirements in the educational policy with regard to the provision of sufficient and qualified teaching staff. In 1951, for example, the Provincial Education Officer (PEO) for Southern province made it clear that he 'would oppose the opening of any new schools by the Salvation Army until the staffing position in its aided schools had improved'.<sup>72</sup> In 1953, the Salvation Army closed Naleza, Cisimbi, Cileleka, Cilengo and Simbayi schools for not meeting the requirements set by the Department of African Education.<sup>73</sup> The mission only remained with religious work at some of those centres. Further, the PEO remarked in a letter to Major Leonard Kirby, Manager of Salvation Army Schools in June 1955 that:

Please make no plans to open any new schools or reopen any closed schools in the coming school year. All projects must first be discussed at district Education Authority meetings and must take their turn after schools which have already been recommended but not approved for opening.<sup>74</sup>

The foregoing revelation indicates that the church had been subjugated by the colonial state and could not override the decisions of the educational authorities in matters regarding the running of schools.

As a result of the above educational restrictions, the Salvation Army had to seek permission from the Department of African Education whenever there was need to open old or new centres. For instance, in July 1955, Major Kirby wrote:

We closed Cisimbi a couple of years ago and I have someone who is ready to go immediately to do religious work. No school work will be done. If there are sufficient children to warrant a school, application will

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<sup>72</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from the Provincial Education Officer (PEO) to Major John, Manager of Schools for Salvation Army, 30/07/1951.

<sup>73</sup> N.A.Z., SP4/12/54, Letter from Department of African Education to Mazabuka District Commissioner, 20/11/1953.

<sup>74</sup> N.A.Z., SP4/12/54, Letter from the PEO to Major Leonard Kirby, no. 1178/R1/2, 18/06/1955.

be made in the usual way but nothing is being promised at this stage as far as schooling is concerned.<sup>75</sup>

The above evidence shows that the mission's prowess to use schools as centres of conversion was hampered by state regulation. It is a further indication that evangelical work for the Salvation Army usually preceded the establishment of schools. This was also the case at Dundu where a church was opened in 1955 but no school was attached to it.<sup>76</sup>

It could also be said that the Salvation Army's ability to run schools was severely constrained by the lack of finance and therefore, heavily depended on grants-in-aid from the colonial government. This weakened its position to use schools as centres of conversion. Unlike other missionary groups such as the Catholics and Adventists that had strong financial support from their home countries, the Salvation Army had little. The mission's inability to adequately fund educational work should be understood in the context of its humble beginning. The mission started among the poor masses of East End of London.<sup>77</sup> It could not attract dignified individuals due to what was considered as its "unorthodox" means of attracting converts. The mission depended largely on the good will of its poor converts who made contributions for the financing of its evangelical work. Thus, like in other parts of the world where it operated, the Salvation Army in colonial Zambia depended on

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<sup>75</sup> N.A.Z., SP4/12/54, Letter from Major Kirby to Mazabuka District Commissioner, 13/07/1955.

<sup>76</sup> N.A.Z., SP4/12/54, Letter from Major Kirby to Mazabuka District Commissioner, 13/07/1955.

<sup>77</sup> See Gwendoline Taylor, *William Booth: Prophet and General* (London: The Salvation Army, 1963), p.35. East End of London consisted of unskilled labourers who worked in brutal and unsanitary conditions in Victorian England. They did not have access to clean water and food, education for their children, or proper clothing. Often, they lived on the streets. Many workers resorted to the use of drugs like opium and alcohol to cope with their hardships while unskilled women engaged themselves in prostitution in order to earn a living. Because of their poverty, they could not be received in churches for the middle and upper classes.

the generosity of its adherents and the community.<sup>78</sup> In view of this, Major Railton Graver had this to say:

It costs the Salvation Army well over £2,000 per year to maintain its evangelical and educational work in the villages of the Ba-Tonga. In return for all this service, we ask Salvationists and friends in the district to contribute no more than £400 per year. This is not too much. I hope they will not fail us.<sup>79</sup>

With such financial challenges, it is highly probable that the Salvation Army hardly resisted the secularisation of its schools. This in turn compromised its position on using schools as centres of conversion. It can, therefore, be concluded that the building of schools by the Salvation Army was meant to offer mere educational services than as a platform for conversion.

### **2.2.8 Medical Evangelism**

A number of studies have demonstrated that medical evangelism was one of the principal means to win converts by various missionary groups. For instance, Gelfand observed that the care of the sick was in most cases one of the most popular methods by which missionaries brought Africans under their influence.<sup>80</sup> Similarly, Paul Landau noted that the therapeutic practices of the LMS missionaries among the Tswana immensely helped to convert Africans to Christianity. He observed that between 400 to 500 patients were treated by Rev. Lewis – many of them being converted to the Christian faith.<sup>81</sup> However, it is argued here that while medical evangelism was one of the most popular methods of winning souls to Christianity in central Africa, the Salvation Army was less dependent on it as it relied upon other unique strategies discussed in the preceding sections.

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<sup>78</sup> N.A.Z., SP1/3/29, Mazabuka District Tour Reports, Tour Report No. 7, 1961.

<sup>79</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Memorandum to Mazabuka District Commissioner, 14 August, 1953.

<sup>80</sup> Gelfand, 'Medicine and the Christian Missions in Rhodesia 1857 – 1930', p.114.

<sup>81</sup> Paul S. Landau, 'Explaining Surgical Evangelism in Colonial Southern Africa: Teeth, Pain and Faith', *Journal of African History*, Vol. 37, No. 2 (1996), p.267.

In 1947, Chikankata Mission Hospital was officially opened by Sir John Waddington, Governor of Northern Rhodesia. The hospital began offering health services to the people of Mwenda chiefdom and those on the periphery such as Mwanachingwala, Sikoongo, Sianjalika, Naluama, Mwanza, Sinadambwe and Simamba.<sup>82</sup> Naturally, it meant that the Salvation Army had a wide catchment area for proselytising Africans through medical care. In addition, students in training for nursing, laboratory technology or pharmacology potentially provided a reservoir of converts. Despite these favourable clinical spaces for evangelism, the Salvation Army did not fully appropriate and utilise them. Personal communication with Dr Paul du Plessis, who served at Chikankata Mission Hospital from the 1960s to 1980, revealed that the Salvation Army did not consider hospital ministry as a mode of evangelism:

I do not agree with the statement that Hospital ministry was one of the major strategies through which TSA [The Salvation Army] won converts in Chikankata. The hospital and its related health services were established for principally two reasons: to express the love of Christ in action and in response to his call to both preach [the Gospel] and heal [the sick] (Matthew 10), and to support the health care of its staff, including educational and evangelistic workers.<sup>83</sup>

From this standpoint, it suggests that the hospital was not a centre for proselytisation but merely meant to cater for the health needs of its missionaries and Africans at large. Du Plessis' sentiments were echoed by Major John Mweene, who observed that the Salvation Army believed in the principle of "Heart to God and Hand to Man".<sup>84</sup> Hospital ministry was, therefore, an attempt by the Salvation Army to demonstrate their love for God by serving suffering humanity.

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<sup>82</sup> McInnes, *Flag Across the Zambezi*, p.36.

<sup>83</sup> Paul du Plessis, 'The Social Impact of the Salvation Army on Chikankata District', email to the author, 6 April, 2019.

<sup>84</sup> Interview, John Mweene.

In view of the above, apart from chapel devotions which were usually attended by hospital staff and other mission workers, the Salvation Army lacked specific programmes and strategies that could have enhanced medical evangelism. Even so, du Plessis observes that Christian worship services held in the hospital were meant to provide a Christian framework for the work of the mission as a whole.<sup>85</sup> But this had little to do with winning converts. In the absence of overt strategies, du Plessis noted that the task to evangelise was, therefore, left to Christian staff, who both by way of personal lifestyle and verbal testimony, could explain and discuss their faith.<sup>86</sup> But this approach had short-comings because not all hospital staff were Salvationists.

During its early years, Chikankata Mission Hospital had few missionary doctors to help win converts as they carried out their medical roles. In 1953, Dr Sydney L. Gauntlet, the Hospital Superintendent, observed that the mission had only one doctor and efforts to employ a second one were frustrated by the colonial government on the basis of nationality. The mission had employed Dr Gunter S. Gramsch, a German national with specialisation in tropical medicine. However, the continued strained Anglo-German relations in the post-Second World War era hindered the mission from recruiting more doctors with nationalities of Axis powers.<sup>87</sup> Unlike missionary groups such as the Christian Missions to Many Lands (CMML) and the LMS which had a number of university graduates as medical missionaries, the situation was different in the case of the Salvation Army due to its background of being identified with slum dwellers. For this reason, the Salvation did not have adequate personnel of such calibre.

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<sup>85</sup> du Plessis, email to author.

<sup>86</sup> du Plessis, email to author.

<sup>87</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from Sydney Gauntlett to the Director of Medical Services, W.C.B. Warrison, 3 January, 1953.

The shortage of personnel sometimes prompted the mission to employ doctors who were non-Salvationists but originated from the Allied nations. For instance, Dr Gordon Carter and his wife, Baptists from Canada, came in April 1955 and served at Chikankata Hospital until the late 1960s.<sup>88</sup> The two were not evangelists and could have contributed little in this regard. This partly demonstrates that the Salvation Army did not consider hospital ministry as an evangelical tool but a service to mission staff and the local people.

Further investigations revealed that the Salvation Army did not use medical evangelism as a key strategy for winning converts due to its principle of integration as opposed to separation of converts that it practised. While the Catholics, LMS, Adventists and the Pilgrim Wesleyan Missionary Society encouraged their converts to separate themselves from their unsaved brethren by settling around missions,<sup>89</sup> the Salvation Army did not alienate its adherents from their cultural setup. Instead, the mission encouraged its converts to live among their people and attract them to Christ by professing their new-found faith. Thus, most patients left Chikankata to their villages once they had received medical care where they in turn spread the Gospel.

In addition, the Salvation Army was disadvantaged by the small number of indigenous students who trained as African nurses. One of the reasons for low enrolments was inadequate qualifications. Few prospective female students could meet the standard six qualification requirement for entry into training. In addition,

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<sup>88</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from Chikankata Hospital Superintendent to Colonel V. Thompson, Salvation Army Territorial Commander, 12 April 1955; and N.A.Z., MH1/2/77, Provincial Medical Officer Tour Report, 20 April 1955.

<sup>89</sup> James H. Naali, 'A History of the Pilgrim Wesleyan Missionary Society in Choma District, 1930 – 1990', M.A. Dissertation, University of Zambia, 2003, p.46. See also N.A.Z., SP4/2/76, Tour Report Correspondences, Letter from Mazabuka District Commissioner to the Missionary in-Charge, Jembo Mission, G/42/210, 29 April, 1953. The Mazabuka District Commissioner was complaining about the practice of sending away patients without treating them by some missionaries at Jembo. It was alleged that the patients were not living around the mission and therefore did not qualify to receive treatment.

cultural factors still influenced most parents' attitude towards girl education and were, therefore, reluctant to send them to schools.<sup>90</sup> As a result, students from Southern Rhodesia and other missionary groups within Northern Rhodesia dominated the Chikankata Nurses' Training School. The Provincial Medical Officer's (PMO) tour report for 1953 indicated that since 1948, only eight students had received their general training in nursing at Chikankata.<sup>91</sup> None of these students was Salvationist.

Further, the Salvation Army practised an open-door-policy where it accepted non-Salvationists from other missionary groups. It could, therefore, not coerce students to become Salvationists if they were already adherents of other missions. The 1951 tour report by the PMO indicated that after obtaining qualification at Chikankata, students returned to their parent missions.<sup>92</sup> Thus, despite the increase in the enrolment of student nurses in the latter years, the number of indigenous Salvationists still remained insignificant. For instance, in 1960, there were 21 student nurses, 11 from Southern Rhodesia and ten from Northern Rhodesia.<sup>93</sup> Of the ten, only three were from Southern province.<sup>94</sup> It was only in 1961 that Chikankata first enrolled an entire intake that had been educated in Northern Rhodesia and whose parents were residents of the country. The increase in the number of students was partly due to the slight increase in the number of schools offering secondary education in the country. Further, the expansion works that had been done to the hospital in 1954 increased the initial capacity of the nursing school. The above evidence helps to demonstrate that in its formative years at Chikankata, the Salvation

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<sup>90</sup> N.A.Z., SP1/3/34, Ministry of Health Annual Report, 1961.

<sup>91</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report of Southern Province, 23 June, 1953.

<sup>92</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report of Southern Province, 1951.

<sup>93</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report of Southern Province, 1951.

<sup>94</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report of Southern Province, 1951.

Army could not rely on the nursing school as a pool from which to draw converts due to numerical disadvantage.

However, Salvation Army evangelists took advantage of the establishment of a leprosy settlement and were able to win converts, though to a less extent. Established in 1949, the leprosarium was the largest in the Southern province. Lepers admitted to this settlement were drawn from all parts of the country. To cater for the spiritual needs of the lepers, the Salvation Army opened a worshipping centre at Cifwankala where the patients regularly met for prayers. In 1959, the visiting General Wilfred Kitching officially opened and dedicated the hall there to the spiritual cause for leprosy patients.<sup>95</sup> This was the only form of organised evangelism that involved patients at Chikankata Mission Hospital. Even so, it can arguably be said that the establishment of the leper corps had little to do with conversion. It was simply a medical requirement to prevent the spread of the disease through the seclusion of patients.

In addition, the Salvation Army's principle of allowing members to join on a free-will-basis and not coercion or any undue influence seems to have hindered the mission from winning large number of converts in the leper colony. The mission did not use medical services to enforce forced recruitment of Africans to Christianity. For instance, in the early 1960s, 13 leprosy patients, at their own request, were enrolled as senior soldiers while four children enlisted as junior soldiers.<sup>96</sup> This number was considerably low compared to the number of leprosy in-patients for the period which stood at 256 in 1961 and 411 in 1962.<sup>97</sup> This suggests that medical

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<sup>95</sup> N.A.Z., SP1/3/29, Mazabuka District Tour Report, 1959.

<sup>96</sup> McInnes, *Flag Across the Zambezi*, p.109.

<sup>97</sup> N.A.Z., MH1/3/143, Leprologist Tour of Southern Province, May 1962.

evangelism was not a prized means to convert Africans to Christianity despite the advantages that abounded.

### **2.3 Conversion in Post-Colonial Zambia: Coping with Change**

In post-colonial Zambia, the Salvation Army continued using its main methods of evangelism to win more members in Chikankata and beyond. For instance, the transfer of the Teacher Training College to Livingstone in the early 1960s had led to the establishment of the first Salvation Army Corps there with open-air revivals as key conversion strategy. In Ndola, an open air-meeting, a brass band of five members and one timbrel player had led to the commencement of the Salvation Army there.<sup>98</sup>

However, there were other areas of concern that the Salvation Army addressed in this period. These were mainly as a result of socio-political changes that took place in the country such as the end of colonial rule, attainment of Zambia's independence and changes in the educational policy. For instance, the handing over of mission schools to the state at independence reduced the little influence the Salvation had on young people. In addition, technological advancement in communication entailed moving with time to capture popular imagination through the use of the media. It is, therefore, argued in this section that, although the Salvation Army generally continued evangelising through its traditional methods, more strategies were employed to cope with changing times.

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<sup>98</sup> McInnes, *The Flag Across the Zambezi*, p.63.

### 2.3.1 Family Unit, Religious Rites and the Youth

In post-colonial Zambia, the Salvation Army increasingly became concerned with the spiritual welfare of the family especially the young. By the early 1950s, Sunday school for European children in Northern Rhodesia had been commenced by a Major John, the Divisional Commander for the Salvation Army in the territory.<sup>99</sup> Here, children under the age of 15 were grounded in Salvation Army principles and Bible lessons in preparation for senior soldiership.

Since children were the pillar of the future of the Salvation Army, there was close monitoring of the life of the child from conception to post-junior soldiership. In every local church, there was a Cradle Roll Sergeant who was responsible for the caring of expecting mothers.<sup>100</sup> Two religious rites were conducted when the child was born. First, the Home League Department under the Women's Ministry organised a baby shower. Here, the baby was introduced to the public and also allowed the mother to commence her religious duties. It was a ceremony that attracted members from the neighbourhood with some ending up as converts. Baby showers were also extended to non-Salvationists as a means of attracting them to join the mission. This was done by inviting women in the community to be part of the celebration - a deliberate ploy to lure them into joining the Salvation Army so that they too could have their babies showered. Bexter Magaya recalled that two women at Kasengo in Chief Naluama's area joined the Salvation Army when they attended a baby shower in the neighbourhood in 1978.<sup>101</sup>

The second rite was the dedication of infants. This was left to the Commanding Officer who made periodical arrangements to dedicate children to

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<sup>99</sup> McInnes, *Flag Across the Zambezi*, p.145.

<sup>100</sup> Interview, Bexter Magaya.

<sup>101</sup> Interviews, Bexter Magaya.

God. Again, this was open to both Salvationists and adherents. Once dedicated, the child was entered in the Cradle Roll Book and handed over to the Young People's Sergeant Major (YPSM) for Sunday school. At the age of seven, a child became a junior soldier until one attained 14 years.<sup>102</sup> Thus, by providing systematic care and instruction to children, the Salvation Army ensured that it raised faithful and loyal soldiers of Jesus Christ.

To consistently engage young people in the activities of the Salvation Army, special programmes such as corps cadet brigades, music schools and Youth Territorial Congress were designed. The first corps cadet brigade in the territory commenced in 1959 and many were formed after independence. The brigade did not only prepare the young people for active roles as soldiers but also acted as a pool from which to draw officer cadets. In 1977, for instance, Sunday Hamuzembo, Peter Kayungwa, and Leniah Mweemba, all former corps cadets, entered the Officers' Training College (OTC) in Lusaka.<sup>103</sup> Music schools were equally meant to help young people find accommodation in church. The first music school was held in Mazabuka in 1965.<sup>104</sup> During this period, young people were given lessons in both practical and theory of music. Territorial congresses drew youths from all parts of Zambia. The first ever youth territorial congress took place in 1991 at Chikankata in which over 1,000 youths were in attendance.<sup>105</sup> Another was held at Chikankata Secondary in 1995.

To further enhance the training of young people, the first officers responsible for the youths, Captain Rex Wong Too from New Zealand, deputised by Captains

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<sup>102</sup> Interviews, John Mweene and Bexter Magaya.

<sup>103</sup> McInnes, *The Flag Across the Zambezi*, p.185.

<sup>104</sup> Interview, Bexter Magaya.

<sup>105</sup> McInnes, *The Flag Across the Zambezi*, p.158.

Levy and Mrs E. Chiyoba, were appointed in the late 1970s. Wong Too was responsible for the training of Young People's local officers (YP workers). For example, during the national congress of 1983 at Ching'ang'auka, Captain Wong Too held a workshop for YP workers, instructing them on how to spiritually nurture young people - the future of the Salvation Army. Several other workshops were conducted in areas where the Salvation Army was operational.<sup>106</sup> From the foregoing, it is clear that the Salvation Army considered young people as a reservoir for future, loyal and dedicated soldiers.

### **2.3.2 The use of the Media**

The growth of the media in Zambia, especially in post-Second World War era, provided an opportunity for the Salvation Army in Chikankata to use the electronic media to spread the message of Christ to the people. The use of radio further became popular and fashionable in independent Zambia.<sup>107</sup> Like other missionary groups such as the Catholics and SDAs that embraced new technology in evangelism, the Salvation Army soon set up a recording studio at Chikankata (See Figure V below). The studio was opened in 1966 by Captain Damon Rader from the United States of America (USA). The assistance in terms of equipment to set up the studio came from the Eastern Pennsylvania and Delaware Division of the Salvation Army in the USA.<sup>108</sup> The studio was engaged in recording both radio and television programmes which were aired on the then Zambia Broadcasting Services (ZBS) television and radio. It accorded opportunities to various groups such as hospital staff, school choir and the young people from the leprosy settlement that played

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<sup>106</sup> McInnes, *Flag Across the Zambezi*, p.153.

<sup>107</sup> Lewis S. Maata, 'An Investigation into the Role of Christian Community Radio Stations in the Promotion of Peace: a Case Study of Yatsani Radio in Lusaka', M.Ed. Dissertation, University of Zambia, 2016, p.2.

<sup>108</sup> Inscription on Chikankata Salvation Radio Building. The inscription indicates the official opening of the Studio and the financiers of the project.

timbrels, to minister to the people of Chikankata and beyond.<sup>109</sup> Plans to upgrade the studio into a radio station hit a snag as the United National Independence Party (UNIP) led government implemented heavy censorship on the media so as to suppress dissenting views from critics of Zambia's one party participatory democracy. As a result, community radio stations could not be allowed to operate.

**Figure V: Chikankata Studio of the Salvation Army**



Source: Field Research Photo, Chikankata, 25 March, 2019.

In the early 1980s, the studio increased its output of recorded teaching material as well as maintaining its programmes it aired on ZBS. Informant Isaac Mweetwa was involved in the production of a Christian programme dubbed “Living Faith” which was broadcast both on ZBS and Trans-World Radio in Swaziland. This ministry continued with an average of three 30 minute programmes per week on television and radio. The programmes were generally meant to spread the message of salvation to the people in Chikankata and beyond.<sup>110</sup> In so doing, the church did not

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<sup>109</sup> Interview, Isaac Mweetwa, Chikankata Village, Chikankata District. 26/03/2019. Mweetwa worked as a producer at the studio from the early 1970s up to the time of this research.

<sup>110</sup> McInnes, *Flag Across the Zambezi*, p.126.

only cement its presence in Chikankata but also made itself known beyond the Southern province.

Furthermore, in the early 1980s, the studio played a key role in evangelising areas adjoining Chikankata through the “Jesus Film Ministry”. This was in conjunction with the World Vision International. David Mansfield, the then Chikankata studio director, made arrangements for Isaac Mweetwa, Gibbs Mweemba, Daniel Kalichi and Eli Kalichi to translate the film into Tonga script. The recording of the voice was done in Kenya with a Tonga narration by Mweetwa. The studio crew visited the Zambezi valley for days, showing two reels each day followed by sermons. In this way, new converts were won for Christ and the Salvation Army. Mweetwa observed that this form of evangelism was successful as it ‘appealed to the emotions of the people and therefore helped to rebuild the church following the ravages caused by the Zimbabwe war of liberation in the area’.<sup>111</sup>

In addition, the studio at Chikankata also reached out to the masses in the Zambezi valley using cassette players which contained recorded messages. The cassettes did not require the use of battery cells but were operated simply by rewinding. These were distributed to Salvation Army centres and communities. Mweetwa observed that many people in more than ten centres received the message of Christ through this means.<sup>112</sup>

Following the liberal policies that came with the ascending to political office of the Movement for Multiparty Democracy (MMD) in 1991, plans to open a radio station were revived. However, mobilisation of resources took long. Eventually,

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<sup>111</sup> Interview, Mweetwa.

<sup>112</sup> Interview, Mweetwa

Chikankata Salvation Radio was only opened in 2009.<sup>113</sup> Besides Christian programmes, the station aired health, agriculture, community matters and secular entertainment as per requirement of the Independent Broadcasting Authority (IBA) Act of 2002.<sup>114</sup> This led to the dilution of the fervent spirit of spreading the gospel which was the purpose of its establishment.

## 2.4 Conclusion

The chapter has argued that contrary to the widely-held view that Africans were passive recipients of Christian ideals, local evangelists were active agents in the spread of the Salvation Army and its teachings in Chikankata district. Strategies unique to the Salvation Army such as open-air revivals, uniform wearing, march pasts, brass band, congress meetings and localisation of the church were instrumental in this process. In this regard, the chapter noted that the Salvation Army was less dependent on education as a tool for evangelism. This is because the church belonged to the latter missionary group whose entry into Northern Rhodesia in the 1920s and 1930s coincided with the increased control over education by the colonial government. The Salvation Army was equally less dependent on medical evangelism as it lacked explicit programmes that could have helped to win African converts in the way Catholics and Adventists did. Further, it has been demonstrated that in post-colonial Zambia, the Salvation Army turned to the family unit as a way of raising faithful and loyal soldiers. A number of programmes such as corps cadet lessons, music schools and Territorial Youths Congresses were developed for young people to instil the spirit of Salvationism in them. In response to the changing social and

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<sup>113</sup> Interview, Clever Mweene, Chikankata Mission, Chikankata District, 25/03/2019.

<sup>114</sup> Government Republic of Zambia (GRZ), *Independent Broadcasting Authority Act* (Lusaka: Government Printers, 2002), p.5.

political environment, the mission used the media to reach out to potential converts in Chikankata and the surrounding areas.

## CHAPTER THREE

### CHALLENGES TO THE SALVATION ARMY'S EVANGELICAL WORK

#### 3.1 Introduction

The growth of the Salvation Army's evangelical work in Chikankata district was a result of its attractive strategies of conversion that cut across all age groups. However, its work was not easy-sailing as it encountered a number of challenges in colonial and post-colonial Zambia. Among these challenges included opposition from the *Basimalende* (Guardians of shrines), beer parties, the Jehovah's Witnesses, and the Full-Gospel Mission. The war of liberation in neighbouring Zimbabwe and the advent of political liberalism in the Third Republic also threatened the growth of the Salvation Army. The above challenges are what this chapter examines.

#### 3.2 Challenges to the Salvation Army's Evangelical Work during the Colonial Period

##### 3.2.1 Resistance from *Basimalende*

Like many other missionary groups in central Africa, the Salvation Army took a strong stance on *kukomba mizimo* (worshipping of ancestral spirits by Africans). In order to entice Africans to abandon worshipping at shrines, the Salvation Army, as early as the 1940s adopted some of the cultural elements into Christian worship. However, not all Africans were enticed by this methodological flexibility aimed at translating them into becoming Christians. They either passively or actively resisted the Christian message. One group that proved difficult to the Salvation Army's evangelical work was *Basimalende* (Guardians of shrines).

Among the many areas the mission received resistance from *Basimalende* was at Mungolo village in Chief Mwanza's chiefdom. In this village was headman Siapaka who was the spiritual head of the area. His influence also extended to the north and south of the chiefdom as well as to Chiefs Sianjalika, Chona and Mwenda countries. The Tour Report No. 13 of 1952 by the Mazabuka District Officer, noted that headman Siapaka was the guardian of the Mlengi spirits resident at the shrines in Nadongo hills.<sup>1</sup> It was on his authority alone that the Ba-Tonga in this area held their Lwiindi feasts in June and October each year to give thanks to the spirits for the crops and to pray for good rains for the next season, respectively. While the Salvation Army built centres of worship at Chilengo and Cisimbi near Mungolo village, it did not succeed in disengaging Africans from *kukomba mizimo*. For instance, in a letter to the Mazabuka District Commissioner in 1953, Major Railton Graver complained about the apathy of Africans towards the evangelical and educational work provided by the mission in Mungolo village in Mwanza chiefdom. The letter reads, in part, that:

The indifference by some Africans towards our evangelical work at Cisimbi outpost and school near Mungolo village is alarming. It seems pagan practices in this area are still high as people continue worshipping ancestral spirits in the nearby Nadongo hills.... Our schools at Cisimbi and Cilengo have also continued registering low pupil attendance and I am afraid that we have to close them.<sup>2</sup>

The church at Cisimbi was eventually closed in November 1953 partly as a result of resistance from *Basimalende* and their influence on the local people.<sup>3</sup> This suggests that not all Africans accepted the Salvation Army in Chikankata.

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<sup>1</sup>National Archives of Zambia (hereafter N.A.Z.), SP4/2/117, Mazabuka Tour Reports, Tour Report No. 13 of 1956.

<sup>2</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Major Railton Graver, Salvation Army Manager of Schools to Mazabuka District Commissioner, 21 September, 1953.

<sup>3</sup> N.A.Z., SP4/12/54, Letter from Major Graver to Mazabuka District Commissioner, 20 November, 1953.

Similar resistance to conversion to Christianity was experienced in Chief Sianjalika's area where, despite the Salvation Army establishing centres at Namaila and Nadongo, some Africans continued worshipping ancestral spirits. Attempts by Shadreck Cheenda, an officer in the Salvation Army, to persuade his fellow Africans to stop the worshipping of ancestral spirits at the *malende* (shrines), yielded little results for by 1954, all villages in Sianjalika's chiefdom had shrines. This state of affairs was noted in one of the district tour reports for that year:

All villages in Chief Sianjalika have small rain huts where they pray for rain and where beer is poured from a pot which is then left inverted in the hut. There are, however, no rain-makers in the area, and the main rain shrines are of course on present European farms.<sup>4</sup>

The above revelation indicates that Africans had a strong belief in ancestral worship.

At Mabwetuba in Mwenda chiefdom, *Basimalende* equally resisted the Salvation Army's evangelical work. It was only after 1966 that centres were opened in that area despite its close proximity to Chikankata Mission. Informant Chikandi recalled that:

The Mabwetuba area was renowned for its abundance of rain shrines. We found it difficult to convert some people around that area because ancestral worship was so deep. I think that their indifference to the new Faith was justifiable in the sense that their form of worship was result oriented. They prayed to the spirits for the rain and their prayers were answered. In fact, before Europeans interfered in the Mabwetuba shrines, it used to rain on top of the hills throughout the year.<sup>5</sup>

Chikandi's observation about Mabwetuba shrines resonates with the findings of the first tour report of 1954. It was observed that:

Mabwetuba "White Hills" houses several rain shrines on the hills including *Simunkululu* (the "hairless" one, i.e., no vegetation on top) which boasts of a rocky promontory so windy that "no man can stand there". The Mabwetuba hills were described to me as being so high "that

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<sup>4</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Reports, Tour Report No. 1 of 1954.

<sup>5</sup> Interview, Isaac Chikandi, Hampande Village, Chikankata District, 21 July, 2019.

rain always falls there”, and from my experience of them it seems to be true.<sup>6</sup>

From the foregoing, it can be argued that *Basimalende* and other Africans resisted conversion to Christianity due to their reverence for ancestral worship. The Salvation Army’s strategies of conversion were therefore not all-conquering as some Africans held on to traditional religion.

### **3.2.2 Opposition from Religious Groups**

The Salvation Army faced active resistance from other religious groups such as the Jehovah’s Witnesses (Watch Tower). In Northern Rhodesia, the Watch Tower sect is reported to have originated from Nyasaland through the Eastern province in the twentieth-century but their activities soon spread country-wide.<sup>7</sup> The sect was known for making unfulfilled predictions about the pending Armageddon, the battle between God and Satan, and the eventual restoration of the earth with Jerusalem as the world capital.<sup>8</sup>

The Salvation Army faced resistance from some members of this sect in Chikankata. In 1953, at Shapwaya village, for example, the Watch Tower contested the Salvation Army’s teachings on eschatology and claimed to be the only good teachers of the word of God. They visited Salvation Army members with their liturgy and argued that Armageddon was imminent. They dispelled Salvation Army teaching that Jesus Christ would come to judge the world and take the righteous with Him into heaven. In the same year, Captain Samson Nkala, a Salvation Army officer at Shapwaya Corps, observed that:

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<sup>6</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Report No. 1 of 1954.

<sup>7</sup> A.L. Epstein, ‘The Millennium and the Self Jehovah’s Witnesses on the Copperbelt in the ‘50s’, *Anthropos*, Vol. 81, No. 4/6 (1986), p.533.

<sup>8</sup> The Watch Tower, ‘A Time to Keep Awake’, November 1, 1995, p.19.

The Watch Towers are confusing our members. They come with their booklets and teaching the people that there is no going to heaven. They say that paradise will be here on earth after the war of Armageddon when the earth will be restored to its former glory. They also say that only them are the best teachers of the word. But we do not despise any denomination at all because there is only one God. They make a mistake by saying that they know God better than any other church.<sup>9</sup>

The forerunners of the mounted opposition against the Salvation Army were Samuel Mwiinga, Jeremiah Cizabu, Sillip Simakampa, Kabbanyaanya Mbozi, Ezekelo Syaacobondwe, and Enose Simooba, all from Shapwaya village.<sup>10</sup> Similar opposition was experienced at Ching'ang'auka in Chief Naluama's area where the Jehovah's Witnesses targeted members of the Salvation Army and claimed that all other churches were false except their movement.<sup>11</sup> The presence of the Jehovah's Witnesses within the catchment areas of the Salvation Army, therefore, posed a challenge to its evangelical work.

Another religious group that proved to be a thorn in the work of the Salvation Army in the mid 1950s was the Full-Gospel Mission based near Chief Naluama's palace at Nansenga. Like the Jehovah's Witnesses, the Full-Gospel Mission targeted some of the members of the Salvation Army. In 1953, Major Leonard Kirby, an officer of the Salvation Army, observed that the activities of the Full-Gospel Mission in Nasenga led to the decline in attendance for Salvation Army membership.<sup>12</sup> It was further noted in 1956 that the presence of the Full-Gospel Mission in Naluama contributed to the loss of more than half of the Salvation Army membership at Kasengo Corps.<sup>13</sup> Regular religious revivals held by Mr and Miss Leggett of the

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<sup>9</sup> N.A.Z., SP4/2/76, Tour Reports Correspondence, Letter from Samson Nkala to the Mazabuka District Commissioner, 15 May, 1953.

<sup>10</sup> N.A.Z., SP4/2/76, Letter to the Mazabuka District Commissioner, 15 May, 1953.

<sup>11</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Report No. 12 of 1954.

<sup>12</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Major Leonard Kirby to Mazabuka District Commissioner, 20 April, 1955.

<sup>13</sup> N.A.Z., SP4/2/117, Mazabuka Tour Report No. 1 of 1956.

Full-Gospel Mission near the chief's village led to the loss by the Salvation Army of six out of 11 villages to the new mission.<sup>14</sup>

### **3.2.3 Beer Parties**

While the Salvation Army was known for its strong stance against intoxicating substances, little was achieved in this regard as some locals continued with their culture of beer drinking. Drinking among Africans in Chikankata was rampant especially after the harvest period due to high returns from maize sales. For many of the local people, beer parting was a form of leisure. Drawing lessons from the East End of London where alcoholism and drug addiction relegated members of the lower class to the fringes of poverty, the Salvation Army in Chikankata openly spoke against beer drinking. During open air-meetings, those who had been saved from drug and alcohol addiction were given a platform to make public confessions of how they got saved and overcame the habit.<sup>15</sup> This was a deliberate attempt aimed at discouraging Africans from engaging in beer drinking.

While the above appeal may have worked for some converts, there were Africans who resisted the call to give up drinking. It is reported that there was rampant drunkenness in Malala village which compelled Andrew Handila, a devoted member of the Salvation, to carry out a campaign against beer drinking by holding open-air meetings. However, he faced opposition from a Mr Kapaipi, a renowned beer brewer. Informant Chikandi alleged that Kapaipi could brew up to eight drums of beer which was consumed in a single day.<sup>16</sup> This partly explains the people of Malala's apathetic attitude towards religious and educational work there. In 1952, for example, the Mazabuka District Commissioner attributed the lack of interest in the

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<sup>14</sup> N.A.Z., SP4/2/117, Mazabuka Tour Report No. 1 of 1956.

<sup>15</sup> Interview, Chikandi.

<sup>16</sup> Interview, Chikandi.

work done by the mission to high levels of drunkenness among the people of Malala village. 'I note with sadness that the people of Malala spend more time drinking beer than supporting the work of the mission and its school',<sup>17</sup> he remarked.

Malala was not the only area where the Salvation Army encountered resistance from beer parties. In Chief Sianjalika's area, it was also reported that there was a high rate of beer drinking among men. The absence of men from the villages helped the district officer to collect taxes without hostility. He reported that:

The men were conspicuous by their absence. 'The reason is beer-drinking which is going on at a high rate as a result of big sales of maize and the consequent large sums of money which have accrued'. The distant sound of drums, guitars and shouting could be frequently heard at beer parties.<sup>18</sup>

The same report revealed that there was a high rate of moral decay among the Africans in Sianjalika chiefdom which needed to be curbed. It was alleged that the presence of Salvation Army churches in the area did little to reduce moral decadence:

I was given to understand by a reliable source that these guitar boys and their music which are percolating into the reserves have a most moral effect on the people and he [the source] even suggested that a license should be imposed on them. Whether this would be effective it is hard to say but one cannot help feeling that some means of limiting the excessive consumption of beer is desirable. The Salvation Army Mission with its churches not far from here has not helped much in arresting this moral vice.<sup>19</sup>

It could, therefore, be suggested that the Salvation Army encountered resistance from beer party patrons and their members – the very class of people for which it was founded in 1865.

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<sup>17</sup> N.A.Z., SP4/2/76, Tour Reports Correspondence, Letter from the Mazabuka District Commissioner to the Salvation Army Manager of schools, 13 May, 1952.

<sup>18</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Report No.12 of 1954.

<sup>19</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Report No.12 of 1954.

### **3.3 Challenges to the Salvation Army's Evangelical Work in Post-Colonial Zambia**

#### **3.3.1 The War of Liberation in Zimbabwe**

The political turbulence that hit southern Africa during the process of decolonisation did not spare the Salvation Army. Following the announcement of the Unilateral Declaration of Independence (UDI) by Ian Smith in 1965, the white Rhodesian forces were pitted against African liberation movements that demanded for Black majority rule. The war affected southern Zambia due to its close proximity to Rhodesia. In addition, the role that the country played as a member of the Frontline States exposed it to retaliatory attacks from Rhodesian forces.<sup>20</sup> While various studies have concentrated on the social, political and economic impact of the war of liberation in Zimbabwe, this study illuminates its spiritual ramifications on the church. It is argued that the war slowed the evangelical “wheels” of the Salvation Army due to the insecurity caused in the area around Chikankata.

Chikankata formed a perfect landmark for the invading Rhodesian forces in the late 1970s. Some of the refugees from Rhodesia were also camped north of Chikankata. The refugee camp was a target of the white Rhodesian forces. In response, the Zambia Air Force (ZAF) which was based at the nearby Munali hills paid frequent visits to Chikankata for it was felt that the area was being used as a point of invasion. It was, therefore, suggested that the ZAF reposition their anti-aircraft guns accordingly. As the war escalated, there were fighters from both sides around the mission.<sup>21</sup>

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<sup>20</sup> Clarence Chongo, ‘Decolonising Southern Africa: A History of Zambia’s Role in Zimbabwe’s Liberation Struggle, 1964 -1979’, Ph.D. Thesis, University of Pretoria, 2015, p.120.

<sup>21</sup> du Plessis, email to author.

The presence of military men and the screaming of low-flying jets caused a great deal of insecurity around the mission. Operations of the hospital frequently got disrupted by forces from either side as they tried to get information about the activities of their enemies. For instance, Paul du Plessis was repeatedly taken for questioning by Zambian military authorities as he was suspected to be harbouring white Rhodesian forces. At one point, he appeared before the Magistrate at Mazabuka for questioning. The Zambian government could not believe that a missionary of Dutch descent chose to work in Zambia and therefore, deemed him a spy.<sup>22</sup> The origin of this suspicion is to be found in the age-old British-Afrikaner hostilities in South Africa as well as the latter's open support for the Smith white minority government in Rhodesia since 1965. Thus, the apprehension harboured towards du Plessis revealed deep-seated tensions between African states on the one hand and the white forces in Rhodesia and South Africa on the other. It was an epitome of strained race relations in Southern Africa.

Although du Plessis denied being an agent of the Rhodesian forces, there is evidence that Salvation Army European missionaries during the liberation struggle aligned themselves with Smith's racist regime. This stance exposed the mission to attacks from the forces of the Zimbabwe African National Union (ZANU) and Zimbabwe African Peoples' Union (ZAPU). It was this state of affairs that led to the killing of two Salvation Army officers at the mission's Usher Institute in Rhodesia by suspected ZAPU forces under Joshua Nkomo on 7 June 1978.<sup>23</sup> The missionaries at Usher were accused of being allies of the white Rhodesian forces. The Salvation Army further paraded itself as a sympathiser of white minority governments in

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<sup>22</sup> du Plessis, email to author.

<sup>23</sup> Norman Murdoch, *Christian Warfare in Rhodesia – Zimbabwe: The Salvation Army and African Liberation, 1891- 1991* (Cambridge: The Lutterworth Press, 2015), p.153.

southern Africa when it withdrew its membership from the World Council of Churches (WCC), three months after the Usher Killings. This was done on the pretext that the WCC gave political support to Marxist liberation movements in southern Africa.<sup>24</sup> To most Africans in Rhodesia, however, the withdraw of the Salvation Army from the WCC was a testimony of its opposition to Black majority rule in southern Africa. As a result, Salvationists who were viewed as having aligned themselves with the Smith regime were targeted by African forces in Rhodesia leading to the death of more than 11 members in 1978 alone.<sup>25</sup> Thus, with Chikankata Mission, being an appendage to the Salvation Army in Rhodesia, it is highly probable that du Plessis and other European missionaries were allies of the Smith government.

The liberation war also disrupted community services that were being offered by the mission to surrounding areas. The mobile clinic team of doctors and nurses feared for their lives and drastically reduced on their operations especially in the Gwembe area. However, the desire to serve war victims made the mobile clinic team risk its members' lives and mission property. On 23 October 1979, du Plessis received news from the police about the bombing of the hospital ambulance which had been donated by friends of the mission in the UK. Sometime in the same year, Captain Mike Reagan and Alan Slator, while on a mission in the Zambezi valley, narrowly survived a land mine that blew-up another Salvation Army ambulance.<sup>26</sup> Thus, the war endangered the lives of missionaries and African Salvation Army soldiers.

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<sup>24</sup> The Salvation Army had been an uneasy member of the WCC since its foundation in 1948. In August 1978, General Arnold Brown, World leader of the Salvation Army, withdrew the church from the WCC in protest against the latter's support for the fund to combat racism in southern Africa. The church's decision to align itself with white minority governments was not well-received by African Salvationists who subsequently organised a massive protest against General Brown in 1981.

<sup>25</sup> Murdoch, *Christian Warfare in Rhodesia*, p.163.

<sup>26</sup> du Plessis, email to author.

In addition, the war led to the closure of Salvation Army centres in the Gwembe valley. Some of the centres closed included Bagassa, Jamba, Mangaba, and Chikanzaya. Many people became busy either defending their land or went into hiding. Others resorted to migrating to safer areas. Stanley Havuluma, a victim of the Rhodesian war, commented that:

The war disrupted our way of life. We perpetually lived in fear and could not cultivate our fields. Land mines were all-over. Most of our relatives fled their homes for safety. Because of the insecurity it caused, we stopped going to church for a period of about three years. Centres such as Mangaba, Jamba, Bagassa, and Chikanzaya were closed down. They were only reopened after 1980.<sup>27</sup>

Havuluma's views were confirmed by McInnes who noted that the people of Gwembe were by the early 1980s still slowly recovering from the ravages of the war.<sup>28</sup> This partly explains why the studio ministry discussed above concentrated on evangelising to the people of the Zambezi valley unlike other areas during the same period.

### **3.3.2 Political Liberalisation in the Third Republic**

With the advent of liberalism in Zambia after 1991, the Salvation Army in Chikankata faced overwhelming challenges with regard to its evangelical work. There was slow church development between 1991 and 2015 arising from a combination of factors. For instance by the late 1990s, Mapangazya Division had 40 centres from the over 50 in the 19450s and 47 in 2015.<sup>29</sup> This slow development should first be understood in the failure of the Salvation Army to innovate strategies in line with the changing political, technological, social and economic environments. The church failed to use its very strength it was founded upon – the ability to adapt

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<sup>27</sup> Interview, Stanley Havuluma, Siavuluma Village, Gwembe District, 22/07/2019.

<sup>28</sup> McInnes, *Flag Across the Zambezi*, p.149.

<sup>29</sup> McInnes, *The Flag Across the Zambezi*, p.219; and Interview, Coillard Mweemba, Chikankata Village, Chikankata District, 26/03/2019.

to change so as to win more souls to Christ. Generally, the church failed to connect with contemporary culture.

Liberal policies in post 1990 Zambia opened up the country to modern technology and global culture. This had an impact on the traditional methods of evangelism that the Salvation Army had relished for a long time. For its part, the church was still practising nineteenth-century strategies. While these methods were able to capture popular imaginations in Victorian England and colonial Zambia, they were less appealing to the millennial generation. The use of open-air revivals and marches pasts which were effective in the early years no longer attracted converts as it were. Discouraged by the inefficiency of such methods, many centres concentrated on indoor worshipping. While open-air meetings featured three or more times a week during the early years, they had been relegated to the periphery of church programmes in the twenty-first century. When centres conducted open-air revivals, which they rarely did, it was merely a matter of fulfilling tradition than the actual soul-winning. A survey among some centres in Chikankata showed that a number of them went for years without holding open-air revivals. For example, Chitumbi Corps did not hold open-air meetings for three consecutive years from 2012 -2015. Similarly, Malala Corps last held an open air-meeting in 2010.<sup>30</sup>

In addition, brass bands which were crucial in attracting the attention of the masses previously were non-existent in most centres by 2015. The departure of white missionaries in the 1990s who had a steady supply of brass instruments partly contributed to the demise of the brigades. By 2010, it was only Chikankata Corps

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<sup>30</sup> Interview, Coillard Mweemba, Chikankata Village, Chikankata District, 26/03/2019.

which had a brass band out of about 45 centres in Mapangazya Division.<sup>31</sup> In line with the above sentiments, Robert Putnam observed that:

There was a disconnection between the Salvation Army and contemporary culture. The Salvation Army's marching bands and Hallelujah Lassies which in a media-oriented world where contemporary music styles are changing all the time and the public are exposed to professional modes of communication, then it could be seen that brass bands, tambourines and uniforms are sadly out of date and irrelevant.<sup>32</sup>

Indeed, the Salvation Army's failure to adapt to change and apply conventional strategies for evangelism such as telecast, use of contemporary music instruments, and popular tunes, contributed to the stagnation of the church.

In addition, the rise in global culture following the improvement in communication and technology had an impact on the Salvation Army's uniform wearing strategy. The consumption of popular fashion in Zambia made some millennial converts to resist uniform wearing. There was a growing tendency by millennial adherents especially the youth to shun recruit classes for fear of commitments and responsibilities that came with one being a soldier such as regular wearing of the uniform. To identify themselves with the church, some converts accepted to undergo recruit classes and eventually became soldiers. However, such members only wore the uniform during their early days of conversion after which they returned to popular dress. Others chose to pattern their uniform after worldly fashion.<sup>33</sup> In view of this, one youth informant commented that:

The problem we have is that our church is dictatorial and we soldiers are told to simply obey. Uniform wearing should not be imposed on us. People should be allowed to choose what suits them as long as it is decent. Honestly how do you force youths to

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<sup>31</sup> The Salvation Army, *Year Book for 2010* (London: The General of The Salvation Army, 2010), p.295.

<sup>32</sup> Robert Putnam, *Owing Alone* (New York: Simon and Schuster, 2000), p.409.

<sup>33</sup> Interviews, John Mweene and Bexter Magaya.

cover their heads when they have platted and want to look good? You want us to look old? We youths like to move with fashion. In any case, let the church allow us to make uniform patterns of our own liking.<sup>34</sup>

The above view is a reflection of a generation of Salvation Army converts that did not see uniform-wearing as a prized strategy for winning new members as it were in the past.

The dwindling zeal to wear the uniform among Salvationists was echoed by the first Zambian TC, Colonel Margaret Siamoya during her inaugural speech in 2014. As a result, a decree was shortly passed to bar soldiers without full-uniforms from taking part in any church programmes.<sup>35</sup> But this did not address the real problem - failure to innovate and connect with contemporary culture. The problem of uniform wearing was not confined to Zambia alone. In 1997, youths from 93 countries assembled in Cape Town for the International Youth Congress and asked General Paul Rader about the need for the Salvation Army to be more flexible in the wearing of uniforms.<sup>36</sup> Similarly, Captain Scott Strissel observed that most millennial converts resisted uniform wearing and were leaving the church due to hypocrisy among old soldiers.<sup>37</sup> Thus, the rise in global culture in Zambia since 1991 posed a threat to the Salvation Army's evangelical work in Chikankata.

### 3.4 Conclusion

This chapter has examined the challenges encountered by the Salvation Army during its evangelical work in colonial and post-colonial Zambia. The challenges included opposition from groups such as *Basimalende*, the Watch Tower,

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<sup>34</sup> Interview, Judy Mweemba, Chikankata District, 24/07/2019.

<sup>35</sup> The Salvation Army, *Zambia Salvationist Magazine*, Vol.2, No.1 (2014), p.3.

<sup>36</sup> Richard Nyberg, 'Salvation Army Youths Spell out New Methods', *Christianity Today Magazine* <https://www.christianitytoday.com/ct/1997/march3/7t3065.html> (Accessed on 02.06.2019).

<sup>37</sup> Scott Strissel, 'Missing Millennials: the Voice of the Army', <https://salvationist.ca/articles/missingmillennials/> (Accessed on 02.06.2019).

the Full-Gospel Church, and beer parties. The opposition experienced by the mission is an indication that not all Africans in Chikankata accepted the Salvation Army's proselytisation agenda. In post-colonial Zambia, the war of liberation in neighbouring Zimbabwe constrained the growth of the Salvation Army such that some outreach centres were closed down while the hospital mobile team was disrupted. In Zambia's Third Republic, a milieu was provided in which other challenges and complexities for the church emerged. These include reliance on obsolete methods of conversion, inability to use modern music equipment, and opposition to uniform-wearing by the youth in the wake of new trends in fashion.

## **CHAPTER FOUR**

### **THE PROVISION OF EDUCATIONAL SERVICES AND AFRICAN RESPONSE**

#### **4.1 Introduction**

The Salvation Army in Chikankata did not only provide spiritual services to the locals but education as well. This chapter examines the provision of educational services by the mission and the response of Africans thereto. It does so by focusing on the various units set up by the mission in its quest to provide all-round educational services. These included primary and secondary education, teacher training, trades craft, nursing, and training of laboratory and pharmacy assistants. The chapter notes that the Salvation Army was an agent of social change that provided the foundation for modern education in Chikankata district, thus contributing greatly to human resource development in the region and the country at large. Further, it is demonstrated that the response of Africans to the provision of education by the Salvation Army in Chikankata oscillated between cooperation and resistance. The chapter notes that Africans were not passive recipients of modern education as they appropriated the social, economic and political opportunities that emerged out of the mission's enterprise in Chikankata.

#### **4.2 Primary Education**

The growth of Western education in colonial Zambia is attributed to the work of various pioneering missionary groups. Although most of the missionary groups were mainly concerned with instructing Africans in the three Rs (arithmetic, reading and writing), they nonetheless paved way for modern education among the locals.

Most scholars are in agreement that missionary education produced African elites who, while seeking personal economic incentives, played a significant role in the formation of welfare societies, trade unions and the struggle for independence in colonial Zambia.<sup>38</sup> Like earlier missionary groups such as the Catholics and Adventists, the Salvation Army laid an enabling environment for the emergence of mission-educated Africans in Chikankata and the Zambezi valley. While being inspired by the desire to liberate themselves from the trappings of rural life, a number of former students of the mission became the human resource that Chikankata and the country at large came to rely upon.

The thesis that the Salvation Army provided the foundation for modern education in Chikankata is in tandem with Fay Gadsden's argument that the educational development of different parts of colonial Zambia was dependent upon the efficiency of respective missionary groups that settled there. Citing examples from the North-western province, Gadsden noted that 'the areas evangelised by the less educationally efficient missionary societies simply lagged behind even in post-colonial Zambia'.<sup>39</sup> Therefore, by establishing a number of schools during the colonial period, the Salvation Army paved way for the educational advancement of Chikankata district.

The extent of the Salvation Army in the provision of education provides the starting point for examining its contribution to modern education in Chikankata

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<sup>38</sup> See Bernard Chisenga, 'Chitambo Mission: A History of Missionary Education and its Impact on Lala Society of Serenje District, 1906 – 1964', M.A. Dissertation, University of Zambia, 1987, p.60; Sean F. Morrow, 'Motives and Methods of the London Missionary Society in Northern Rhodesia 1887 – 1941', Ph.D. Thesis, University of Sussex, 1985, p.100; and Charles C. Guthrie, 'The Emergence and Decline of a Mission Educated Elite in North-Eastern Zambia, 1895 – 1964', Ph.D. Thesis, Indiana University, 1978, pp.269-272.

<sup>39</sup> Fay Gadsden, 'Education and Society in Colonial Zambia', in Samuel N. Chipungu (ed.), *Guardians in their Time: Experiences of Zambians under Colonial Rule, 1890-1964* (London: Macmillan press Ltd, 1992), p.113.

district. The mission expanded its sphere of influence beyond Mwenda chiefdom to include Sinadambwe, Sikoongo, Simamba, Naluama, Sianjalika, Mwanza, and Mwanachingwala.<sup>40</sup> Some of these areas were “strongholds” of earlier missionary groups yet the Salvation Army registered its presence there. For instance, the mission had three schools; Namaila, Mainza and Munjile, in Chief Sianjalika’s area which was dominated by the Jesuits.<sup>41</sup> In Chief Mwanza’s area, the mission had by the early 1950s more than five schools while the Gwembe valley had 16.<sup>42</sup> By 1954, the mission had about 40 schools in the eight chiefdoms it operated from.<sup>43</sup> The number of students in these schools increased steadily as the demand for education grew, reaching 3,771 in 1961.<sup>44</sup>

In these mission schools, emphasis was put on learners’ acquisition of practical skills in addition to the three Rs. This was in line with African traditional education which was practical-oriented. It was, therefore, felt that the education provided in these schools needed to adopt some elements of the local economy such as farming and livestock keeping. This was revealed in April 1955 when the Jeanes supervisor, Joseph Syamusonde, found children at Mainza School, practising yoke making under the instruction of headteacher Bredford Haalunyona.<sup>45</sup> In the same year, the District Commissioner (DC) for Mazabuka found children at Syakantu and Syapwaya schools in Mwenda chiefdom engaged in gardening and making of rough

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<sup>40</sup> Beverley McInnes, *The Flag Across the Zambezi: A History of the Salvation Army in the Zambia and Malawi Territory, 1922 – 1997* (Lusaka: Zambia and Malawi Territorial Headquarters, 1997), p.36.

<sup>41</sup> National Archives of Zambia (hereafter N.A.Z.), SP1/3/29, Mazabuka District Tour Reports, Tour Report No. 8 of 1961.

<sup>42</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Mazabuka District Commissioner to the Finance Councillor for the Plateau Tonga Native Authority, 22 September, 1954.

<sup>43</sup> McInnes, *Flag Across the Zambezi*, p.146.

<sup>44</sup> N.A.Z., SP3/2/7, Local Education Authority Correspondence and Minutes, Minutes of the Mazabuka Education Authority Meeting held on Thursday 28 September, 1961.

<sup>45</sup> N.A.Z., SP4/12/54, Department of African Education Inspection Report 804/R2/B/MAZ, 27 April 1955.

benches during practical periods.<sup>46</sup> Thus, the education provided was one that was tailored towards producing students that would fit in their society as was recommended by the Phelps-Stoke Commission in 1924.<sup>47</sup>

To provide further education beyond Standard II which was offered in most of the schools, the Salvation Army established Chikankata Upper Primary Boarding School for boys and girls. This school went up to standard VI. It was the only school in the district to offer this level of education between 1945 and 1960. Once students had completed their four years of training in the schools and successfully qualified to the next level, they entered the Chikankata Primary School. Chikankata Primary became the dream school for children from both the valley and the plateau in the district who wished to go further in education. Informant Jairos Magaya demonstrated the popularity of the school in the early years of its establishment through a song in Tonga which went as follows:

*Tuyanda kulemba inkalata tumwambile Konolo*      We would like to write  
a letter informing the  
Colonel

*Tuyanda kulemba inkalata tumwambile Konolo*      We would like to write  
a letter informing the  
Colonel

*Chikankata Chikankata we Mama*      Chikankata Chikankata  
my mother

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<sup>46</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education Inspection Report, 22 September, 1955.

<sup>47</sup> Peter Snelson, *Educational Development in Northern Rhodesia 1883 – 1945, Second Edition* (Lusaka: Kenneth Kaunda Foundation, 1974), p.139.

*Chikankata ni college mu Rhodesia.*<sup>48</sup>

Chikankata is a college  
in Rhodesia.

The view that the Salvation Army paved way for modern education in Chikankata is further supported by the fact that in some areas, only this mission's schools existed even as late as 1962. For this reason, the District Commissioner for Mazabuka when touring Namaila in Chief Sianjalika's area, petitioned the chief's court to support the Salvation Army schools by sending their children to the mission. He noted that failure to do so could cause the area to remain without a single school.<sup>49</sup> Similarly, the 1962 tour report of Mwenda chiefdom observed that 'schools in this area are with one exception under the management of the Salvation Army'.<sup>50</sup> In Chief Naluama's area, it was indicated that the Salvation Army was doing well in terms of education as its Ching'ang'auka School was the only centre that went up to standard IV.<sup>51</sup> In view of the above, it can be noted that the Salvation Army was a pioneer of academic education in Chikankata district.

### **4.3 Secondary Education**

While Chikankata Primary School was celebrated as a "college" by Africans in the district and adjoining areas, it was limited in that it could not provide secondary education before 1960. In fact, access to secondary education was a challenge throughout Northern Rhodesia. The territory had no secondary school until 1939 when Munali was established. This was attributed to the *laissez-faire* attitude taken by the British South Africa Company (BSAC) towards the development of an

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<sup>48</sup> Interview, Jairos Magaya, Moonga Village, Chikankata District, 24 March, 2019.

<sup>49</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Mazabuka District Commissioner to Chief Sianjalika, 30 November, 1953.

<sup>50</sup> N.A.Z., SP1/3/29, Mazabuka District Tour Reports, Tour Report No. 2 of 1962.

<sup>51</sup> N.A.Z., SP1/3/29, Mazabuka District Tour Reports, Tour Report No. 1 of 1962.

academically advanced education. In addition, the large number of missionary groups which competed against each other for converts meant that their interest lay in establishing many village schools which were centres of proselytisation.<sup>52</sup> In doing so, they neglected the development of secondary education.

In view of the above challenge, students who qualified from Chikankata scrambled for the few places at Munali, the only secondary school for boys in Northern Rhodesia at that time. For instance, in 1947, Chikankata Primary had the first two students, Raymond Mutswairo and Edward H. Himunyenga, to ever qualify to attend Munali Secondary School. A record was set in 1954 when Chikankata sent seven boys to Munali among them Bruce Munyama, who later became the Chairman of the Human Rights Commission in the 1990s.<sup>53</sup> In this way, secondary education became a preserve for the few candidates who scored high marks in examinations. There was, therefore, an urgent need to establish a secondary school in Chikankata and the Salvation Army took up the challenge.

In 1960, the Salvation Army established Chikankata Secondary School offering Forms I and II. This temporarily solved the challenge of secondary education for its students. However, the need to have a fully-fledged secondary school was still high. In 1961, at the provincial education meeting in Livingstone, it was proposed that 'there should be the development of Chikankata Secondary running up to Form V'.<sup>54</sup> In another meeting held in November 1961, the Provincial Education Officer (PEO) drew the attention of the members present to the wide range of educational facilities that were provided at Chikankata Institute and the

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<sup>52</sup> Gadsden, 'Education and Society in Colonial Zambia', p.99.

<sup>53</sup> Beverley McInnes, *The Flag Across the Zambezi*, p.78.

<sup>54</sup> N.A.Z., SP3/2/7, Local Education Authority Correspondence and Minutes, Letter from the Provincial Education Officer to Education Secretary, Fr. Byrne, 7052/SEC. 4, 9 December, 1961.

building plans for the proposed secondary school for which £18,000 was made available.<sup>55</sup> The building of the school was completed in 1965 and became operational the same year. Thus, the establishment of Chikankata Secondary School was not a mono-effort by the mission but involved financial support from the colonial state as well.

The primary and secondary schools provided an educational milieu in which mission-educated Africans rose and contributed to the much needed human resource development in the region and the country as a whole. Former students such as Simeon Simunde and Kenneth Maguswi, having been educated at Chikankata in the late 1940s, returned there as teachers. Maguswi helped in the teaching of ci-Tonga as an academic subject until his death in 1978.<sup>56</sup> In 1963, Ng'andu Peter Magande, Arthur Bbuku, Geoffrey Hamayobe, Sandford Mweemba, and Reuben Kapale, having completed Form II at Chikankata Secondary, gained entrance into Munali while Ireen Kaumba was accepted at the girls' national Chipembi Secondary School in Chisamba, Central province.<sup>57</sup> Magande later served in the Zambian civil service from the early 1970s and helped to establish some of the rural development schemes in post-colonial Zambia. He also became Zambia's longest serving Minister of Finance and National Planning under President Levy Mwanawasa from 2002 to 2008. Reflecting on his journey through life and how attending Salvation Army schools shaped his dream, Magande chronicled a personal memoir dubbed: *The Depth of my Footprint: From the Hills of Namaila to the Global Stage*.<sup>58</sup>

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<sup>55</sup> N.A.Z., SP3/2/7, Local Education Authority Correspondence and Minutes, Minutes of the Southern Province Education Authority held at Livingstone on 22 November 1961.

<sup>56</sup> Ng'andu P. Magande, *The Depth of my Footprints: From the Hills of Namaila to Global Stage* (Atlanta: Maleendo and Company Independent Publishers, 2018), p.48.

<sup>57</sup> Magande, *The Depth of my Footprints*, p.48.

<sup>58</sup> Magande, *The Depth of my Footprint. : From the Hills of Namaila to Global Stage* (Atlanta: Maleendo and Company Independent Publishers, 2018).

Other examples of Africans extricated from rural life by the mission through education provision abound. Edward Yamba attended Chikankata School and was later to become prominent in the civil service. So, too, was Ditton Mwiinga who became the Member of Parliament for Kafironda Constituency and Minister of Health in 1966.<sup>59</sup> Similarly, the first Form V class of Chikankata Secondary School sent three students to the University of Zambia in 1967 namely: Doris Nabuyanda, Leonard Syamambo and Jeremiah Chijikwa. Chijikwa later worked as a university lecturer for ten years before he joined politics. He was appointed Minister of State for Health by President Kaunda in 1990.<sup>60</sup> The success of these former students of the mission partly demonstrates that the Salvation Army played an important role in laying the foundation for modern educational services for Africans in Chikankata district.

In post-colonial Zambia, Chikankata Secondary continued to be under the auspices of the Salvation Army but became grant-aided. A noticeable growth of the school took place in the 1970s and 1980s. By 1973, the secondary school had begun taking its pupils up to the 'O' level of education. During this period, school gardens were extended to a farm of 20 hectares when Ian Roberts, the School Business Manager, established a Production Unit.<sup>61</sup> A new library block was also added to the school buildings. According to McInnes, the school continued to teach up to form five for 500 boys and girls.<sup>62</sup>

Chikankata Secondary School also made a contribution in various extra-curricular activities for which it received a number of honours, including presidential

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<sup>59</sup> McInnes, *Flag Across the Zambezi*, p.88.

<sup>60</sup> AP News, 'Kaunda Fires a Cabinet Critic, Shuffles other Posts', 1 November, 1990 (online): <https://apnews.com> (Accessed on 22.06.2019).

<sup>61</sup> McInnes, *Flag Across the Zambezi*, p.89.

<sup>62</sup> McInnes, *Flag Across the Zambezi*, p.89.

awards. In 1987, 1989 and 1990, the school was recognised by the government as having the “Best Well Organised Production Unit” in Zambia.<sup>63</sup> The school was ranked second nationally in School Certificate Examinations in 1992. Enrolment of pupils by then had been extended beyond the province. However, priority was still given to local children who met the qualification.<sup>64</sup>

In 1998, the school was designated a high school by the Zambian Ministry of Education. The preamble of the school constitution then read:

The Mission of the Chikankata High School is to promote an academic process within the Republic of Zambia which is in compliance with the principals [sic] of the Salvation Army. This will be achieved through the maintenance of a curriculum relevant and necessary for promoting the Christian, economic and social development of this nation and its citizens.<sup>65</sup>

Thus, the school continued with its mission of producing learners who could make useful contribution to national development. In the 2000s, the capacity of the school remained almost the same as that of the yesteryears accommodating a total of about 700 students.<sup>66</sup>

#### **4.4 Teacher Training**

Primary and secondary education were not the only fields in which the Salvation Army provided in terms of manpower development. A teacher training institute was also established there in 1945. By 1954, the institute consisted of the Primary School Teachers Training School headed by Captain Laura Dutton.<sup>67</sup> A number of developmental projects with regard to infrastructure were done and by

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<sup>63</sup> McInnes, *Flag Across the Zambezi*, p.88.

<sup>64</sup> Interview, Daniel Kalichi, Chikankata Village, Chikankata District, 25 March 2019. Kalichi was the first Indigenous Zambian to head Chikankata Secondary School in 1985.

<sup>65</sup> The Salvation Army Chikankata Mission, <https://www.salvationarmy.org/chikankata/highschool> (Accessed on 22.06.2019).

<sup>66</sup> Interview, Philemon Chibomba, Chikankata District, 26/03/2019.

<sup>67</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Chikankata Inspection Report, 28-30 March, 1954

early 1955, a sizeable population of Africans had been trained as teachers some of whom were former Chikankata Primary School students. Students from other missions within the Southern province such as the Brethren in Christ, Pilgrim Holiness and Plymouth Mission also went to Chikankata Institute.<sup>68</sup> As early as 1946, for example, there were five first year students and three in second year from within the province.<sup>69</sup> Of these eight students, only one was a Salvationist as the rest came from other missionary groups.<sup>70</sup> There were also students from other missions outside the Southern province as illustrated in Table I below.

**Table I: Enrolment Figures at Chikankata Teacher Training Institute for 1952 and 1954**

<b>SOUTHERN PROVINCE</b>		
<b>Institution/Mission</b>	<b>1952</b>	<b>1954</b>
Salvation Army	7	21
Pilgrim Holiness	3	5
Church of Christ	-	2
Local Authority	-	5
Brethren in Christ	9	1
Baptist	4	-
<b>TOTAL</b>	<b>23</b>	<b>34</b>
<b>OTHER PROVINCES</b>		
South African Baptist	1	1
Scandinavian Baptist	1	1
Plymouth Mission	-	1
<b>TOTAL</b>	<b>2</b>	<b>3</b>

Sources: N.A.Z., SP4/12/54, Annual Inspection Report, 24-27 February, 1952 and N.A.Z., SP4/12/54, Chikankata Annual Inspection Report, 28 – 30 March, 1954.

<sup>68</sup> N.A.Z., SP4/12/54, Department of African Education, Chikankata Inspection Report, 28-30 March, 1954.

<sup>69</sup> McInnes, *Flag Across the Zambezi*, p.76.

<sup>70</sup> McInnes, *Flag Across the Zambezi*, p.76.

Although there were low enrolment figures in the formative years of the institute, it can be argued that like earlier missionary groups such as the Methodists in Kafue and Adventists at Rusangu, the Salvation Army contributed to manpower development in the region. The 1952 inspection report by the Department of African Education revealed that the institute had nine African teaching staff who had received training at Chikankata.<sup>71</sup> At Ching'ang'auka, the District Commissioner for Mazabuka found Silas Mweemba and another teacher who had both been trained at Chikankata Institute in 1955.<sup>72</sup> Thus, Salvation Army trained teachers were present in different areas from the Kafue river in the north to the Zambezi valley further south.

In view of the contribution of the Chikankata Institute to the training of teachers in the region, the 1952 annual inspection report by the Department of African Education paid a glowing tribute to the Salvation Army's educational work. 'Tribute is paid to the excellent pioneering efforts of Brigadier Rive in establishing the educational work at Chikankata on strong foundations',<sup>73</sup> reads the report in part. Similarly, in 1955, the Department of African Education noted that Chikankata Institute had maintained satisfactory standards of previous years and recommended that the special privilege of training T4 teachers be extended again the following year.<sup>74</sup> This depicts the institute's profound contribution to the training of teachers in the district.

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<sup>71</sup> N.A.Z., SP4/12/54, Department African Education, Annual Inspection Report, 24-27 February, 1952. The names of the African staff were Lucy Gwaba, Lilian Sangandu, Mose Ng'andu, S. Caambwa, T. Chilulika, Winnie Sikwabi, Esther Choobe, Kenneth Maguswi, and E. Himunyanga.

<sup>72</sup> N.A.Z., SP4/12/54, Department of African Education Inspection Report, 22 September 1955.

<sup>73</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Annual inspection Report, 24-27 February, 1952.

<sup>74</sup> N.A.Z., SP4/12/54, Department of African Education, Annual Inspection Report, 6 April, 1955. T4 teachers were those who had Standard IV as the highest academic qualification and a two-year teacher training course.

However, teacher training in the country underwent a significant change between 1958 and 1959. There were political stirrings and talk of the government nationalising the teacher training sector. By the end of 1959, all missionary teacher training institutes in Northern Rhodesia were integrated to form two interdenominational colleges: David Livingstone and Malcolm Moffat in Serenje district.<sup>75</sup> The teacher training centre at Chikankata including some of its staff such as Morse Ng'andu were moved to David Livingstone College.

#### **4.5 Industrial Training**

The Salvation Army Mission education also contributed to the development of a small cadre of artisans in the territory. The Chikankata Trades School set up in 1945 trained professional artisans in brickwork, carpentry and blacksmithery.<sup>76</sup> For most of the 1950s, the trades school was composed of African Staff of which the majority were ex-students of Ibbwe Munyama. In 1955, the school was under the tutorage of Phil Laverty who was assisted by Simon Mhende and Gideon Moyo.<sup>77</sup> Although its operation was short-lived, Chikankata Trades School contributed to the development of professional artisans in the region from 1945 – 1954 (See Appendix 1).

The trades school also attracted students from other missions around the country. The annual inspection report for 1953 showed that the school had ten students of whom seven came from outside Southern province.<sup>78</sup> In 1954, there were

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<sup>75</sup> McInnes, *Flag Across the Zambezi*, p.52.

<sup>76</sup> Magande, *The Depth of my Footprints*, p.48.

<sup>77</sup> N.A.Z., SP4/12/54, Department of African Education, Annual Inspection Report, 6 April, 1955.

<sup>78</sup> N.A.Z., SP1/3/10, Reports on Mission Schools, Department of African Education, Annual Inspection Report, 3-5 March 1953.

six students from the Southern province and nine from other provinces.<sup>79</sup> Further, in 1955, there was a considerable increase in enrolment as 36 students from across the country enrolled at the trades school. This shows that Chikankata Trades School progressively improved its enrolment figures as years went by.

Perhaps the most remarkable story of the Chikankata Trades School with regard to developing professional artisans in the country is reflected in the contribution of one of its former students, Dux Halubobya. After leaving Chikankata Mission in the early 1960s as a trained carpenter, Halubobya ended up in Canada for training in the cooperative movement. Upon his return to Zambia, he pioneered the development of the savings cooperative movement by establishing the Credit Union and Savings Association (CUSA) of Zambia. Magande observed that ‘under Halubobya’s guidance as general manager, CUSA became a household name in the country and helped in building a culture of saving amongst many civil servants’.<sup>80</sup>

However, like any other trades institute in the country, Chikankata Trades School generally experienced low demand for industrial education. Few students enrolled in the trades school partly due to the nature of training and the opportunities it offered in the world of employment. The local people wanted jobs that could enable them find employment in urban centres. Therefore, the response of locals to artisan training was generally negative. In a letter to the Mazabuka District Commissioner, the Principal for Chikankata bemoaned the lack of interest among the Batonga people in the trades school. As a result, the school began accepting ex-

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<sup>79</sup> N.A.Z., SP4/12/54, Department of African Education, Chikankata Annual Inspection Report, 6 April, 1955.

<sup>80</sup> Magande, *The Depth of my Footprints*, p.47.

standard IV boys of good character to beef up the enrolment figures.<sup>81</sup> In 1955, the Department of African Education similarly expressed disappointment at the reluctance by the Ba-Tonga people to come forward and enrol for the trades school at Chikankata.<sup>82</sup>

The low demand for industrial training among the people of Chikankata should also be understood in the context of their economic mainstay which rested on agriculture and livestock keeping. Farming in the Southern province, as noted by Samuel Chipungu, had led to the emergence of a rich peasantry class locally called *balimi basimpindu* (profit-generating peasants).<sup>83</sup> Although not all farmers fell in this category, the plateau Tonga were generally a productive farming society. Therefore, they had little liking for artisan training. In 1965, the trades school was closed due to lack of student interest in this kind of education.<sup>84</sup>

In the 1950s, Chikankata was not only operating the men's trades school but also a Domestic Science Teacher Training School. According to McInnes, 'this was the only school in the country to offer Domestic Science training for teachers'.<sup>85</sup> Female students commenced this programme after completing primary education. However, only a few of the Chikankata students were represented as the majority of them came from other districts. The pioneer of this course was Major Eva Morton whose contribution was honoured by the Education Department in the 1950s.<sup>86</sup> In

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<sup>81</sup> N.A.Z., SP4/12/54, Letter from the Chikankata Principal to Mazabuka District Commissioner, 31 October, 1952.

<sup>82</sup> N.A.Z., SP4/12/54, Department of African Education, Chikankata Annual Inspection Report, 6 April, 1955.

<sup>83</sup> Samuel N. Chipungu, *The State, Technology and Peasant Differentiation in Zambia: a Case Study of Southern Province, 1930 – 1986* (Lusaka: Historical Association of Zambia, 1988), p.70.

<sup>84</sup> McInnes, *The Flag Across the Zambezi*, p.87.

<sup>85</sup> McInnes, *The Flag Across the Zambezi*, p.80.

<sup>86</sup> McInnes, *Flag Across the Zambezi*, p.80.

1954, it was reported that the Domestic Science school was progressing well under Major G. Stunel and two African teachers, Winnie Sibwabi and Ida Maposa.<sup>87</sup>

The Domestic Science school continued to record successes in the 1960s shortly before its closure. In 1960, for example, the school recorded 100% pass rate in which 13 Domestic Science mistresses graduated with the other 24 teachers from Chikankata Teacher training School.<sup>88</sup> Later, Ida Maposa, a mistress at the Domestic Science Teacher Training School, was chosen by the government to represent Northern Rhodesia at a ten-day conference in Nairobi to discuss the education of women and girls in Africa.<sup>89</sup> This recognition was a demonstration of the contribution made by the school in Chikankata and the country as a whole. However, the opening of Chikankata Senior Secondary School in 1965 led to the closure of the Domestic Science Teacher Training programme as a measure aimed at creating space for accommodating senior level classes.

## **4.6 Training of Health Personnel**

### **4.6.1 Nursing**

In 1947, the Salvation Army officially opened Chikankata Mission Hospital to meet the health needs of the local people. A year later, Chikankata School of Nursing was established by the mission to train African students. The 1948 annual report for the Department of Health revealed that Chikankata began the training of African female students in general nursing and midwifery during that year. The school began with three students with only two graduating in 1950.<sup>90</sup> Although the

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<sup>87</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Chikankata Inspection Report, 28-30 March, 1954.

<sup>88</sup> McInnes, *Flag Across the Zambezi*, p.88.

<sup>89</sup> McInnes, *Flag Across the Zambezi*, p.88.

<sup>90</sup> N.A.Z., MH1/2/77. Salvation Army Chikankata, Tour Report No. 3 of 1951.

Salvation Army entered Northern Rhodesia when earlier missionary groups such as the Catholics and Universities Mission to Central Africa (UMCA) had already established themselves, Chikankata School of Nursing was nonetheless the first school to receive government recognition to train African female students in general nursing and midwifery. It was then followed by the UMCA's Saint Francis Nursing School in Katete and another one at Livingstone.<sup>91</sup>

The Salvation Army Chikankata Mission also contributed to the development of manpower in the field of health for Chikankata and the country at large. The contribution was gradual as few students enrolled for the nursing course during the early years of the school. One of the reasons for the low enrolment rate besides insufficient infrastructure was the failure by potential students to meet the minimum admission criteria. The entry requirement was a minimum of standard VI which most locals did not have at that time. In addition, the period of training pegged at three years was relatively longer than in other courses such as teaching. Consequently, most aspirants especially those with higher qualifications than Standard VI, shunned the nursing career. This was also coupled with the fact that very few local females made nursing their first choice vocation in preference to teaching.<sup>92</sup>

The school's output and contribution to developing health personnel remained low in the 1950s. At the 1952 nursing school graduation ceremony, for example, three nurses were presented with qualifying certificates in general nursing while two received the midwifery one.<sup>93</sup> In the same year, seven students were

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<sup>91</sup> Federal Government of Rhodesia and Nyasaland, Annual Report of the Public Health Department, 1954.

<sup>92</sup> N.A.Z., SP1/3/34, Annual Provincial Medical Officer's Report, Salvation Army Chikankata Mission Hospital, 1961.

<sup>93</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

enrolled for nursing.<sup>94</sup> The following year, there was a total of 15 students training as nurses, three in third year, and six each in the second and first years.<sup>95</sup> In demonstrating the need for Chikankata-trained nurses in the country, the District Commissioner for Mazabuka reported in 1953 that “it is hoped that, in future, more trained girls will be available for work in government hospitals, where there is a crying need for them or for other mission stations where the need is just as acute”.<sup>96</sup> This shows that Chikankata School of Nursing trained health personnel to take up work beyond the district.

In 1954, there was a remarkable increase in enrolment figures of student nurses at Chikankata School of Nursing. This was mainly attributed to the expansion of the hospital infrastructure scheme that was completed that year by the mission. The new project included two wards, operating theatre block, kitchen, administration block, hostels, and the X-ray Department. The total cost of the extension scheme was £35,000 of which the Northern Rhodesian Government provided £17,500, the Beit Trust £15,000 and the Salvation Army £2,500.<sup>97</sup> The hospital’s initial bed capacity was increased to 140 at the end of the project.<sup>98</sup>

With the above development, it became judicious to increase the number of student nurses so as to cater for the increased demand of medical services both at the hospital and the country at large. In view of this, the 1955 inspection report by the Department of African Education indicated that 29 students were in training at the hospital of whom nine were from Southern Rhodesia and the rest from Northern

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<sup>94</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

<sup>95</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Southern Province Tour Report, 1953.

<sup>96</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Southern Province Tour Report, 1953.

<sup>97</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Notes for His Excellency the Governor on Chikankata Hospital Extension Scheme, 1954. See also N.A.Z., MH1/2/77, Letter from the Mazabuka District Commissioner to the Financial Secretary of the Salvation Army, M1/16/B, 4 April 1955.

<sup>98</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1954.

Rhodesia.<sup>99</sup> Thus, the hospital, with its operational wings, began to make greater impact on the district and the country than in the yesteryears. This was revealed in a letter by Dr W.C.B. Robinson, Director of Medical Services (DMS), to Chikankata Mission in which he noted that ‘African nurses and midwives graduating from the institute were of inestimable benefit to Northern Rhodesia’.<sup>100</sup> The government also acknowledged the contribution which the nursing school at Chikankata was making in the country. In a message delivered during the nurses’ graduation ceremony in 1954, Sir Arthur Benson, the Governor of Northern Rhodesia, indicated that ‘I am confident that your training school and its graduates will continue to play a most important part in the development of the health services in Northern Rhodesia’.<sup>101</sup>

In the 1960s, Chikankata School of Nursing increased its enrolments by introducing the September intake in addition to the April one so as to further meet the human resource needs in the health sector. The first September intake of 1960 comprised 21 students, 11 from Southern Rhodesia and ten from Northern Rhodesia.<sup>102</sup> Therefore, the introduction of two intakes in one year led to a leap in the student population. By 1961, for example, the number of trainee nurses was 50, the highest since the inception of the school.<sup>103</sup> In the same year, a further 18 trainee nurses had been enrolled for the September intake.<sup>104</sup>

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<sup>99</sup> N.A.Z., SP4/12/54, Department of African Education, Annual Inspection Report, 6 April, 1955.

<sup>100</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from W.C.B. Robinson, Director of Medical Services to Chikankata Mission, 23 February, 1954.

<sup>101</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata Mission, Message from His Excellency the Governor, Sir Arthur Benson to Chikankata Superintendent and Staff on the Occasion of the 1954 Nurses’ Graduation, September, 1954.

<sup>102</sup> N.A.Z., SP1/3/34, Ministry of health Annual Reports, Southern Province Medical Officer’s Report, 1961.

<sup>103</sup> N.A.Z., SP1/3/34, Ministry of health Annual Reports, Southern Province Medical Officer’s Report, 1961.

<sup>104</sup> N.A.Z., SP1/3/34, Ministry of Health Annual Reports, Southern Province Medical Officer’s Report, 1961.

As a trendsetter in the training of African nurses in the territory, the mission pioneered the development of the nursing syllabus and examinations that other mission and government colleges came to rely upon. Even in the early 1970s, Chikankata Nursing School staff still served on various health education fora at national level. For example, Dr Paul du Plessis was a member of the examinations' committee of the Medical Council of Zambia and the National Council for Scientific Research. Major Edith Shankster and Major Dorothy Caddy served on the Nursing Council, while Major Jean Ford taught laboratory technology regularly at the Evelyn Hone College.<sup>105</sup> Thus, Chikankata School of Nursing made a sufficient contribution to several aspects of health education and development in the country.

Throughout the 1970s, Chikankata Mission was still committed to improving staffing levels in health facilities. The commitment was reflected in the expansion of the nursing school. In 1970, it was reported that Chikankata Mission Hospital was allocated K5,000 by the Zambian government as grant for the building of a new Zambia Enrolled Nurses (ZEN) Training School block the following year.<sup>106</sup> The completion of the expansion project led to the erection of additional facilities for classrooms, library, tutor's office, kitchen and a foyer for nurses' visitors.<sup>107</sup> The direct result of this infrastructural expansion was an increase in the enrolment of trainee nurses. For instance, there were 68 students in training in 1971.<sup>108</sup>

During the 1980s and 1990s the institution was devoid of changes to its infrastructure and capacity. This meant that the enrolment figures remained almost unchanged as those of the 1970s. For instance, there were 63 student nurses in 1985,

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<sup>105</sup> Paul du Plessis, 'The Social Impact of the Salvation on Chikankata District, 1945 -2015', email to author, 6 April, 2019. See also McInnes, *Flag Across the Zambezi*, p.111.

<sup>106</sup> N.A.Z., SP4/1/14/74, Dispensaries and Rural Health Centres, Document No. Dev.9/2, 1970.

<sup>107</sup> N.A.Z., SP1/3/56, Annual Report, Southern Province Ministry of Health, 1971.

<sup>108</sup> N.A.Z., SP1/3/56, Annual Report, Ministry of Health Southern Province, 1971.

68 in 1992 and 66 in 1998.<sup>109</sup> However, a remarkable change to the nurses' training school came in 2006 when it was reformed to provide diploma courses in Registered Nursing (RN). The upgrading of the qualification level from certificate to diploma was a response to the World Health Organisation (WHO) resolution passed at the 49<sup>th</sup> World Health Assembly (WHA), where all member states were urged to strengthen nursing and midwifery education and practice. This was in recognition that 'cost effectiveness of good nursing and midwifery practice makes a major difference to quality and effectiveness of health care service'.<sup>110</sup>

In 2007, therefore, the first intake of registered nursing students began training, with Zondiwe Ngalande as Principal Tutor. It was an intake of 60 students. At the end of three years of training, 54 graduated on 6 May 2010.<sup>111</sup> The school continued to contribute to improved staffing levels in Zambian health facilities including Chikankata itself. In 2013, there were 164 students working towards completing this three-year course for registered nurses.<sup>112</sup> In 2015, the building of a classroom and library block was completed at a cost of K325,000.<sup>113</sup> This was part of the K1.7 million allocated to the institution by government in 2013 for infrastructural development.<sup>114</sup> This expansion implied further increase in the enrolment of nursing students. In the same year, more than 90 registered nurses and 20 midwives graduated at a ceremony officiated by the Minister of Health, Dr Chitalu Chilufya.<sup>115</sup>

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<sup>109</sup> The Salvation Army, Chikankata Hospital Annual Report, 1985; Interview, Clara Ntinda, Chikankata Village, Chikankata District, 26/03/2019; and The Salvation Army, Chikankata Hospital Annual Report, 1998.

<sup>110</sup> The Salvation Army Chikankata Mission, <https://www.salvationarmy.org/chikankata/schoolofnursing> (Accessed on 26.06.2019).

<sup>111</sup> Interview, Zondiwe Ngalande, Chikankata Village, Chikankata District, 31 March, 2019.

<sup>112</sup> The Salvation Army Chikankata Mission, <https://www.salvationarmy.org/chikankata/schoolofnursing> (Accessed on 26.06.2019).

<sup>113</sup> Chusa Sichone, 'Taking Primary Healthcare Closer to the People', *Times of Zambia*, 15 June, 2015 (Online): <https://www.times.co.zm/?p=61562> (Accessed on 26.06.2019).

<sup>114</sup> Sichone, 'Taking Primary Healthcare Closer to the People'.

<sup>115</sup> Sichone, 'Taking Primary Healthcare Closer to the People'.

As at 2015, the institution had graduated over 2,000 nurses who served in various government and private health institutions.<sup>116</sup> Therefore, the institution's journey in training human resource personnel in the health sector since its establishment in 1947 reflects its commitment, resilience and inestimable impact on Chikankata district and Zambia as a whole.

#### **4.6.2 Laboratory and Pharmacy Assistants**

The Salvation Army was not only interested in training nurses but laboratory and pharmacy assistants as well. This began on a small scale in the very early years of the Chikankata Mission. This can be seen from the hospital's annual report for 1952 where the only student, Edwin Sangandu, successfully completed a year course in elementary laboratory procedure.<sup>117</sup> He later undertook the routine laboratory work at Chikankata Hospital as well as assisting in the training of another student in the same field. In 1956, the Laboratory Assistants' Training Course commenced. According to McInnes, it was the first of its kind in colonial Zambia.<sup>118</sup> Even when the government began to train laboratory and pharmacy assistants, Chikankata, again, played a prominent role in the preparation of syllabi and assessment. In 1960, the first two students graduated from the Chikankata Laboratory and Pharmacy Assistants School.<sup>119</sup> Like other fields of education at Chikankata, the enrolment rates for the two courses in the early years were extremely low due to reasons advanced above.

In the late 1960s and 1970s, the school's quest for manpower development in pharmacy began to make remarkable improvement in student enrolment. In 1967, for

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<sup>116</sup> Interview, John Mweene, Chikankata Village, Chikankata District, 31 March, 2019.

<sup>117</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

<sup>118</sup> McInnes, *Flag Across the Zambezi*, p.98.

<sup>119</sup> Interview, Mungala L. Mweemba, Chikankata Village, Chikankata District, 27 March, 2019.

example, the school enrolled nine trainees, the highest since the inception of the college. As a result, extensions were made to the laboratory where under a qualified pharmacist, laboratory assistants were trained for employment in government service. McInnes noted that ‘the demand for Chikankata graduates remained high as they proved to be reliable and proficient when working in both government and private positions’.<sup>120</sup> In 1971, there were 12 students in training reflecting an improvement in the enrolment rate.<sup>121</sup> However, the pharmacy assistant training programme was discontinued because of the lack of supervision by senior staff which led to the death of five sick children in May 1970.<sup>122</sup> On this occasion, an unsupervised student nurse gave children suffering from diarrhoea a wrong electrolyte mixture leading to their death.<sup>123</sup>

The training of laboratory assistants, however, continued in the 1980s although there were no major changes to the enrolment rates as there had been no expansion to the school’s infrastructure. For instance, there were 15 students in training in 1985 while the number stood at 13 in 1988.<sup>124</sup> Even so, the school continued attracting students from across the country with some coming as far as North-western province of Zambia. This was the case with Patrick Munjunga who joined Chitokoloki Mission Hospital of the Christian Missions in Many Lands (CMML) in May 1986 as a laboratory assistant after completing his two-year course at Chikankata.<sup>125</sup>

Throughout the 1990s, the mission continued fulfilling its mandate of training manpower. By 1998, 235 students had graduated as laboratory and

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<sup>120</sup> McInnes, *Flag Across the Zambezi*, p.120.

<sup>121</sup> N.A.Z., SP1/3/56, Ministry of Health Annual Report for Southern Province, 1971.

<sup>122</sup> du Plessis, email to author.

<sup>123</sup> du Plessis, email to author.

<sup>124</sup> The Salvation Army, Chikankata Hospital Annual Report, 1985; and Interview, Ntinda.

<sup>125</sup> Chitokoloki Mission Hospital Annual Report, 1986.

pharmacy assistants.<sup>126</sup> In the same year, the Salvation Army was directed by the Ministry of Health to begin offering diploma and not just certificate programmes. As a result of this policy change, the training of laboratory assistants was discontinued in 1999 to pave way for the transition to the diploma programme. The new policy also meant changes in nomenclature as laboratory assistants became known as “laboratory technologists”.<sup>127</sup>

The training of laboratory assistants remained suspended until 2003 when the Mission Hospital Management engaged government in discussions to reopen the institute. In 2006, government gave the mission authority to reopen the school at a new site where new boarding hostels and administration block had been built (see Figures VI and VII below).<sup>128</sup> The school opened to the public in 2007 when it began offering a diploma programme in biomedical sciences. The first intake started with 30 students.<sup>129</sup>

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<sup>126</sup> Interview, Mweemba.

<sup>127</sup> Interview, Mweemba.

<sup>128</sup> Lusaka Times, ‘Chikankata School of Biomedical Sciences Faced with Closure’, <https://www.lusakatimes.com/2009/09/11> (Accessed on 26.06.2019).

<sup>129</sup> Henry Gariepy, *Christianity in Action: The International History of the Salvation Army* (Cambridge: William B. Eerdmans Publishing Company, 2009), p.157, (Available Online): <https://books.google.com.zm> (Accessed on 26.06.2019).

**Figure VI: Chikankata School of Biomedical Sciences Administration Block**



Source: Field Research Photo, Chikankata, 26 March, 2019.

**Figure VII: Chikankata School of Biomedical Sciences**



Source: Field Research Photo, Chikankata, 26 March, 2019.

The Chikankata School of Biomedical Sciences continued to receive funding from the Zambian government for the development of infrastructure. In 2008, government released K1.2 billion to Chikankata Hospital for the construction of a

biomedical school whose construction was already underway.<sup>130</sup> Recognising the contribution that the school was to make, the then Member of Parliament, Munji Habeenzu, remarked that ‘this project will help address the shortage of manpower in the country and it is only wise that all stakeholders come in to support the hospital administration’.<sup>131</sup> In 2009, the school had 78 students in training.<sup>132</sup> By 2015, over 300 students had graduated and employed in both public and private health institutions in the country.<sup>133</sup>

#### **4.7 African Response to the Salvation Army Education Enterprise**

The provision of education by the Salvation Army in Chikankata evoked various responses from Africans. Although the response to Western education varied from society to society and from one geographical area to another, scholars generally agree that the reasons Africans attended mission schools mostly were related to well-defined political, social, or economic consequences.<sup>134</sup> In view of this, it is noted here that Africans generally welcomed and supported Salvation Army schools. This accounted for the general success of the mission’s schools in Chikankata. Community members were involved in building and repairing of school infrastructure as well encouraging pupil enrolment. The Department of African Education noted in 1954 that:

It is encouraging to see efforts of the local people [in Nameembo] to build a new school and two teachers’ houses. Iron roofs, cement floors

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<sup>130</sup> Lusaka Times, ‘Government Releases K1.2 Billion for Construction of Bio Medical Facility’, <https://www.lusakatimes.com/2008/06/27> (Accessed on 26.06.2019).

<sup>131</sup> Lusaka Times, ‘Government Releases K1.2 Billion for Construction of Bio Medical Facility’, <https://www.lusakatimes.com/2008/06/27> (Accessed on 26.06.2019).

<sup>132</sup> Interview, Mweemba.

<sup>133</sup> Interview, Mweemba.

<sup>134</sup> Edward H. Berman, ‘African Responses to Christian Mission Education’, *African Studies Review*, Vol. 17, No.3 (Dec., 1974), p.527.

and metal window frames are desirable and some communities have achieved this standard without government grant.<sup>135</sup>

Community support for the Salvation Army's schools was also evident at Kambaza in Chief Mwenda's area. This was revealed when, in 1954, the inspector of schools found 2,200 bricks ready-made and burnt. The school authorities were only waiting for a grant of £400 from the Mazabuka Local Education Authority for the construction to commence.<sup>136</sup> In 1961, it was further reported that:

With the presence of the Chikankata school, hospital, and institution, there is a great Salvation Army following here and indeed it would seem most of the education in this area is done under the auspices of the Salvation Army. There is however, a great contrast between the standards of the schools themselves. This would seem dependant on the generosity of the community.<sup>137</sup>

From the foregoing, it can be observed that the success of the Salvation Army in the provision of educational services was largely dependent upon the cooperation of the local people. Africans were key partners in advancing the educational development of Chikankata and its surrounding areas.

While the majority of locals supported the educational services provided by the Salvation Army, some quarters of society showed resistance. Such people did not cooperate with the mission to ease the provision of education in the district. They neither repaired dilapidated infrastructure nor compelled their children to attend school regularly. This was revealed in 1953 when the District Commissioner for Mazabuka informed Chiefs Sianjalika, Naluama, Mwanachingwala and Mwanza about the decision by the Salvation Army to close down schools in their chiefdoms

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<sup>135</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Inspection Report, 17 September, 1954.

<sup>136</sup> N.A.Z., SP4/12/54, Department African Education Inspection Report, 27 November, 1954.

<sup>137</sup> N.A.Z., SP1/3/29, Mazabuka District Tour Reports, Tour Report No. 7 of 1961.

partly due to lack of support from the communities.<sup>138</sup> In the same year, the Salvation Army Divisional Commander (DC) for Mazabuka bemoaned the increased reduction in the number of children at Mwanza and Kasengo schools which led to the loss of a government grant amounting to £73.10 and the eventual closure of the schools.<sup>139</sup> Further investigation revealed that the people of Kasengo expressed disinterestedness in education because their children could not go beyond Standard II level as there were no schools in the locality that went beyond that level.<sup>140</sup> In 1956, the Salvation Army faced a similar experience at Chikani in Chief Naluama's area where a government official observed that the people were uncooperative and unwilling to form any sort of school councils to support the education of their children.<sup>141</sup>

The Salvation Army's provision of educational services also faced active resistance from members of the Jehovah's Witnesses. The Watch Tower Sect was opposed to the idea of its members receiving secular education. They blamed the government and the Salvation Army for educating their children contending that Jesus was never assessed in order to preach. In 1953, members of the Watch Tower Sect made regular visits to the Salvation Army school at Shapwaya demanding to withdraw their children. Samson Nkala, a teacher there, noted that:

There are many children who are not yet in our school. The church of Watch Tower has got them saying they do not want their children to be educated.... They came here three times to demand the withdrawing of their children. When children are taken to court because of absenteeism, they say [question] why government put such a law. They say that Jesus

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<sup>138</sup> N.A.Z., SP4/12/54, Letters from Mazabuka District Commissioner to: Chief Sianjalika, A/78/91, 30 November, 1953; Chief Naluama, A/78/90, 30 November, 1953; Chief Mwanachingwala, A/78/89, 30 November, 1953; and Chief Mwanza, A/78/88, 30 November, 1953.

<sup>139</sup> N.A.Z., SP4/12/54, Letter from the Divisional Commander for Mazabuka to Mazabuka District Commissioner, 1953.

<sup>140</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Report No. 5 of 1954.

<sup>141</sup> N.A.Z., SP4/2/117, Mazabuka District Tour Report No. 5 of 1956.

was never assest [sic]... and there is no need to teach our children for it is near the end of the world.<sup>142</sup>

A similar situation was experienced at Ching'ang'uka in 1956 when members of the Jehovah's Witnesses withdrew their children from the school contending that the end of the world was near.<sup>143</sup> The foregoing evidence attests to the fact that the provision of education by the Salvation Army was not without resistance from certain quarters of society.

The lack of support from Africans was frustrating on the part of the mission authorities as it stalled educational development. In this vein, Major Railton Graver lamented in 1953 that:

So far as the schools in Mapangasha [sic] are concerned I find that the local native authorities do not appear to be very interested in their schools. For instance at Nameembo, it is over twelve months since their representative visited the school. Further, I find that Chief Mwenda does not follow-up the reports of absenteeism made by the school attendance officer.<sup>144</sup>

On the same day, Major Graver wrote to the PEO for the Southern province complaining about the lack of willingness by the people of Simwaba to support education. 'It must be born in the mind, however, that the community at this place [Simwaba] are a lazy irresponsible crowd',<sup>145</sup> he retorted.

The demeaning description of Africans above reveals the frustration of Salvation Army missionaries with regard to the lack of cooperation from some of the local people in the promotion of education for their children. It is argued here that like other Eurocentric missionaries, Major Graver demonstrated little understanding

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<sup>142</sup> N.A.Z., SP4/2/76, Tour Reports Correspondences, Letter from Samson Nkala to the Mazabuka District Commissioner, 1953.

<sup>143</sup> N.A.Z., SP4/2/117, Mazabuka Tour Report No. 1 of 1956.

<sup>144</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Major Railton Graver, Salvation Army Manager of Schools to Mazabuka District Commissioner (Mr Williams), 21 September, 1953.

<sup>145</sup> N.A.Z., SP4/12/54, Letter to the Provincial Education Officer, 21 September, 1953.

of African culture. It seems that Salvation Army missionaries failed to appreciate the economic lifestyle of the Tonga people in Chikankata whose source of livelihood was agriculture. This in turn accounted for high cases of absenteeism during the farming season as children were a vital source of labour for agriculture. For example, it was noted in the mission's 1952 inspection report that a number of pupils at Simwaba School were absent during the planting season.<sup>146</sup>

The Salvation Army in Chikankata indirectly provided a platform for political activities by Africans. The mission pursued a non-partisan stance. Its attitude was that no officer or teacher was to participate in politics. To some Africans, however, Salvation Army schools and community involvement provided a fertile environment for conducting political activities in spite of the mission having outlawed the use of its infrastructure for such purpose. This was revealed in a letter by Major Graver to the District Commissioner for Mazabuka in 1953 where he noted that:

It is the duty of every Salvation Army officer and teacher to secure from his people, as far as he is able, their obedience to the Government under which they live for the time being, no matter what its particular form may be provided this can be done consistently with duty to God and to the souls of others. The Salvation Army will never associate itself with this or that political party. It maintains strict neutrality in the matter of party politics. Therefore, no Salvation Army hall or school building can be used to hold political meetings.<sup>147</sup>

Although the Salvation Army pledged to be apolitical, Africans took advantage of its infrastructure and school committees to advance their political ends. As the 1950s were years of spirited African contestation against colonial rule in the region, the struggle grew fiercer from 1953 onwards following the establishment of the Central African Federation. The African National Congress (ANC) took the lead in

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<sup>146</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Department of African Education, Inspection Report, 27 November, 1954.

<sup>147</sup> N.A.Z., SP4/12/54, Letter from Major Graver to Mazabuka District Commissioner, 14 August, 1953.

mobilising rural masses such as in Chikankata to oppose the federation and other colonial policies. However, Africans could not openly express their defiance against white rule for fear of being arrested. They, therefore, found ways to secretly organise party meetings masked as games, dances, and other social gatherings.<sup>148</sup> For Africans in Chikankata, political gatherings were sometimes masked as mere school committee meetings.

Given the above scenario, the incorporation of school committees in Salvation Army schools provided the basis for advancing political goals. The committees were, by and large, meant to be responsible for repairs to school property, assist in enrolment and attendance of children, and help in the production and maintenance of school gardens where possible.<sup>149</sup> But Africans had ulterior motives for joining such committees. For example, the school committee at Malala usually turned such meetings into political gatherings for the ANC. In 1953, while on tour of duty, Major Graver reported to the District Commissioner for Mazabuka that ‘I met a fairly large company of people – the so-called committee which had 8-10 ANC people in the midst’.<sup>150</sup> Similarly, at Kataba in Chief Sianjalika’s area, it was reported in 1956 that the school committee there usually turned its meetings into a political platform for the ANC.<sup>151</sup>

The above scenario suggests that Africans in Chikankata appropriated Salvation Army schools in ways that missionaries and the colonial government did

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<sup>148</sup> Albert B.K. Matongo, ‘Popular Culture in a Colonial Society: Another Look at Mbeni and Kalela Dances on the Copperbelt, 1930 – 64’, in Samuel N. Chipungu (ed.), *Guardians in their Time: Experiences of Zambians under Colonial Rule, 1890 – 1964* (London: Macmillan Press Ltd, 1992), pp.204-5.

<sup>149</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Major Graver to Fanwell Simuule, Malala School Committee Secretary, 21 July, 1953.

<sup>150</sup> N.A.Z., SP4/12/54, Letter from Major Graver to Mazabuka District Commissioner, 14 August, 1953.

<sup>151</sup> N.A.Z., SP4/2/117, Mazabuka District Tour Report No. 3 of 1956.

not fathom. They took advantage of the presence of schools to express the common problems that affected them as a society. Therefore, although the Salvation Army claimed to be apolitical, it indirectly facilitated a milieu for nationalist activities in Chikankata.

Another way in which Africans reacted to the presence of the Salvation Army's educational institutions was through the exploitation of cheap labour. Local farmers took advantage of the church's principle of contributing "self-denial" by all schools.<sup>152</sup> They collaborated with teachers in using children's labour on crop fields and gardens. For instance, headman Sialuona hired school pupils from Salvation Army Chaanga Central School in 1954 for which he paid ten shillings to the teachers.<sup>153</sup> Similarly, headmen Nyangola and Dobi of Siavuluma village hired children's labour and paid five shillings each to Chaanga Central School.<sup>154</sup> The money was later remitted to the mission authorities at Mazabuka. This seems to have been the trend for most of the Salvation Army schools. In the second tour report of 1954, the PEO for the Southern province observed that pupils at Simwaba School reported late for classes as they had been weeding in people's gardens to get money for church collections.<sup>155</sup>

The mission's policy was that every child attending school was expected to contribute "self-denial" money to the mission. Teachers made every effort to collect their quotas failure to which they could be sanctioned by supervisors. Hiring out children to African farmers was, therefore, seen as a means to raising the required

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<sup>152</sup> Self-denial was an annual contribution that was given by every member or organisation of the Salvation Army to support mission work. Schools were mandated to pay by levying each pupil. In an event that set targets were not met, schools were required to find alternative sources for raising their quotas.

<sup>153</sup> N.A.Z., SP4/12/54, Salvation Army Chikankata Mission, Letter from Salvation Army Manager of Schools to Gwembe District Commissioner, No. 467/ED/B/84, 10 April, 1954.

<sup>154</sup> N.A.Z., Sp4/12/54, Letter to Gwembe District Commissioner, 10 April, 1954.

<sup>155</sup> N.A.Z., SP4/12/54, Tour Report No. 2 of 1954.

amounts.<sup>156</sup> The Salvation Army's practice of "self-denial" and the hiring out of children's labour to farmers, however, did not go well with the education authorities. To the authorities at the Department of African Education, the "self-denial" practice made it difficult to reconcile the government's policy of free education and that of schools being open to all children irrespective of their religion.<sup>157</sup> This practice accounted for much of the unpopularity of Salvation Army schools leading to apathy in some cases.<sup>158</sup>

Furthermore, the Salvation Army mission provided opportunities for local entrepreneurs especially those near the mission. Africans living nearby Chikankata engaged themselves in small retail businesses, social clubs, and the selling of farm produce.<sup>159</sup> For instance, the District Officer for Mazabuka reported in 1954 that there was a market at Malabo near the mission where African farmers were trading in grain.<sup>160</sup> By 1959 retail shops outside the mission gate were already in existence. Clientele for these enterprises came from the student populous, mission staff, patients and the local people such that Chipanga market emerged.<sup>161</sup> However, the major challenge for the Salvation Army was the threat posed by the liquor business at Chipanga market. Selling of liquor was an affront to the mission as it was established to rescue people from the awful effects of alcohol, gambling and drug abuse.<sup>162</sup>

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<sup>156</sup> N.A.Z., SP4/12/54, Letter from the Salvation Army Manager of Schools to the Department of African Education, no. 3688/DEA/S/5, 05/07/1954.

<sup>157</sup> N.A.Z., Salvation Army Chikankata Mission, Letter from the Salvation Army Manager of Schools to the Provincial Education Officer, No. 3688/DEA/S/5, 5 July 1954.

<sup>158</sup> N.A.Z., Letter to the Provincial Education Officer, No. 3688/DEA/S/5, 5 July 1954.

<sup>159</sup> A similar situation had been noted in colonial Zimbabwe. For details, See, David Beach, 'The Impact of Christianity on the Shona: the Protestants and the Southern Shona', in J.A. Dachs (ed.), *Christianity South of the Zambezi* (Gwelo: Mambo Press, 1973), p.33.

<sup>160</sup> N.A.Z., SP4/2/92, Mazabuka Tour Report No. 13 of 1954.

<sup>161</sup> Interview, Isaac Chikandi, Hampande Village, Chikankata District, 24/03/2019.

<sup>162</sup> For information on the Salvation Army's stance on alcohol and other social vices, See, The Salvation Army, *Soldier's Covenant (Article of War)*; The Salvation Army, *Corps Cadet Challenge*

On the other hand, Africans, including Salvationists, wanted to exploit the market opportunities that had been created by the presence of the mission. They intended to provide leisure that was a replica of the urban social life where consumption of Western alcoholic beverages had become a popular culture. For instance, a former Corps Sergeant Major (local church elder), Raphael Haachintu, applied for a liquor licence at his shop just outside the mission gates and not far from Chitumbi Corps in 1971. However, Haachintu faced strong opposition from members of Chitumbi Corps led by Envoy Samuel Haachitapika. The church felt that the licence needed to be opposed as it posed a moral danger to students, patients and the community. The matter was only resolved by the Liquor Licensing Board in Livingstone which ruled in favour of the church.<sup>163</sup> This suggests that the reaction of Africans to the missionary enterprise in Chikankata varied but mostly was related to well-defined political, social, or economic consequences.

#### **4.8 Conclusion**

This chapter has examined the impact of the Salvation Army in the provision of educational services in Chikankata district. It has demonstrated that the mission, as an agent of social change, laid the foundation for the provision of modern education in the district. The chapter has demonstrated that the Salvation Army contributed to manpower development in Chikankata and the country in primary and secondary education, industrial, and training of health personnel. From the evidence given, it has been noted that the impact of the Salvation Army was profound as it scored “firsts” in the training of nurses, laboratory and pharmacy assistants, and domestic science teachers in the country.

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*course B* (London: The General of the Salvation Army, 1978), p.12; and The Salvation Army, ‘Full Recovery from Addiction’, *War Cry*, vol. 134, No.13 (2014), p.37.

<sup>163</sup> du Plessis, email to author.

The chapter has demonstrated, however, that the response of Africans to the Salvation Army schools varied. Some communities played a significant role in aiding the mission to have a transformative impact on the local people with regard to the provision of educational services while others showed resistance. Africans allowed their children to attend the mission's schools and initiated a number of projects such as brick moulding, building of classrooms and other duties related to education. Where no such assistance was rendered, education institutions did not make much progress. Furthermore, the local people in Chikankata took advantage of the Salvation Army's education enterprise to advance their political, social and economic ends. School committee meetings were turned into ANC political mobilisation arenas. Farmers who saw the Salvation Army schools in economic lenses sourced for cheap labour while some entrepreneurs set up small businesses in response to the market opportunities offered by the mission's student populous, staff, patients and surrounding communities. Nevertheless, the Salvation Army was not only interested in providing educational services to the people of Chikankata but also healthcare as will be discussed in the next chapter.

## **CHAPTER FIVE**

### **THE PROVISION OF HEALTHCARE SERVICES AND AFRICAN RESPONSE**

#### **5.1 Introduction**

This chapter investigates the impact of the Salvation Army in the provision of healthcare services on the people of Chikankata district. The chapter notes that the Salvation Army played a significant role in the improvement of the healthcare of Africans in the district and beyond. This was achieved through the introduction of maternal and child health programmes, and the combating of various communicable and non-communicable diseases. Further, the chapter demonstrates that the Salvation Army was an agent of cultural change which helped in the abolition of Tonga traditional practices believed to perpetuate the spread of the Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS). Finally, the chapter notes that the local people in the district did not abandon their belief in traditional healing systems despite the advancement in Western medicine promoted by the Salvation Army.

#### **5.2 Maternal and Child Health Services**

From 1945 onwards, Chikankata Hospital made a significant contribution to the health needs of women and children. This was way before maternal and child health services were formally introduced in the Southern province in 1968. One of the earliest areas of need identified by medical officers at Chikankata was the high rate of infant mortality in the area resulting from poor health service delivery in the

villages. Chikankata health workers, therefore, began encouraging women to give birth from the hospital under the care of qualified midwives rather than in villages where proper maternal health was not guaranteed. By 1949, the sensitisation programme had begun to produce results as 30 women delivered from the hospital in that year alone.<sup>1</sup> In the following year, the hospital recorded a total of 48 deliveries and a further 67 in 1951.<sup>2</sup> This suggests that the provision of maternal care by the Salvation Army to the locals received support even in the formative years of the mission.

The provision of safe delivery services to women went hand in hand with the need to improve nutrition levels among children. During its early years in Chikankata, the mission identified malnutrition as a major contributor to the high prevalence rate of diseases associated with an unbalanced diet which in turn affected maternal and child health. This was revealed in the 1952 Chikankata Hospital Annual Report that:

Due to defective diet, malnutrition is one of the most widespread scourge amongst the African people – as most countries where poverty and ignorance go hand in hand it is one of the general causes of ill-health and high mortality rates... Milk and eggs are usually plentiful in the villages but parents cannot understand that these are essential body-building foods. Too often, the result is anaemic children with pot bellies, little resistance to disease and suffering frequently from digestive disorders.<sup>3</sup>

The above revelation is an indication that malnutrition was one of the leading causes of high disease prevalence among infants in the district despite there being an abundant presence of cattle where milk could easily be obtained. This paradox can be understood first in the context of existing cultural taboos that denied women and

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<sup>1</sup> National Archives of Zambia (hereafter N.A.Z.), MH1/2/77, Salvation Army Chikankata, Tour Report No. 2 of 1951.

<sup>2</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report No. 2 of 1951.

<sup>3</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

children from accessing certain foods. For instance, there was a common myth among the local people that expectant mothers were not allowed to eat eggs as doing so would make them give birth to hairless babies.<sup>4</sup> This was also observed in 1952 when the annual report of the hospital noted that ‘local taboos and prejudices deprive children of the milk and eggs’.<sup>5</sup> The second reason for the low levels of nutrition in the district is that there was a marked socioeconomic differentiation among the local people resulting from access to productive farming machinery.<sup>6</sup> Those who did not have access to ploughs and draught animals were more susceptible to poverty than the richer classes. Therefore, food security, including access to milk products, was a challenge.

In view of the above, symptoms of vitamin deficiency and anaemia caused by inadequate food intake were prevalent especially among children. It was small wonder that when malaria and bilharzia co-existed with malnutrition as they were in large percentage of the population, sickness and death were high.<sup>7</sup> In this regard, Dr Sydney Gauntlett, Chikankata Hospital Medical Superintendent, observed that infant mortality rate in the district stood at about 50 percent or higher in the 1950s.<sup>8</sup> The above conditions, coupled with the stresses and strains of hard living, caused low resistance to disease among the people. As a result, Chikankata Hospital focused its attention to improving nutrition levels in the district. The hospital aimed at achieving

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<sup>4</sup> Interview, Isaac Chikandi, Hampande Village, Chikankata District, 25/03/2019.

<sup>5</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Tour Report No. 2 of 1951.

<sup>6</sup> For details, See, Samuel N. Chipungu, *The State, Technology and Peasant Differentiation in Zambia: a Case Study of Southern Province, 1930 – 1986* (Lusaka: Historical Association of Zambia, 1988), p.70.

<sup>7</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

<sup>8</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

this by carefully planning preventive medicine, health education and the teaching of improved agricultural methods.<sup>9</sup>

Another area that was of concern for the Salvation Army's Chikankata Hospital with regard to maternal and child health was the care given to premature infants. Until the establishment of the hospital in 1945, infants born prematurely did not usually survive due to unorthodox cultural practices and the lack of medical care which usually resulted in the killing of such babies. Commenting on infanticide practices prevalent in the district, informant Isaac Chikandi observed that:

The killing of babies born prematurely was common in this area. Such were usually killed by elderly women through suffocation, abandonment or allowing them to starve to death. A premature baby was a source of disdain in the family. I think that such a practice was also done because of ignorance. However, infanticide was abandoned with increased sensitisation and care from Chikankata Hospital staff.<sup>10</sup>

The above situation prompted Chikankata Hospital to take keen interest in the care of premature infants even with limited technology. The main object in the care of such infants was the maintenance of a stable body temperature and careful feeding to increase their strength owing to the fact that they were usually too weak to suck. In the absence of incubators, this care was achieved by nursing the baby in conditions free from draught and using a controlled relay of hot water bottles. Feeding in scientifically controlled amounts was done by means of a tube or pipette (classical fountain pen filler).<sup>11</sup> As a result of this care, some infants survived. In 1952, for instance, 11 premature infants were treated of which seven survived, on average

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<sup>9</sup> Paul du Plessis, 'The Social Impact of the Salvation Army on Chikankata District', email to the author, 6 April, 2019.

<sup>10</sup> Interview, Chikandi.

<sup>11</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

weighing about three pounds.<sup>12</sup> Thus, the care given to babies at Chikankata Hospital made a significant contribution in lowering infant mortality rate.

Throughout the 1950s, the number of women receiving maternal care kept on rising steadily. This was revealed in the 1954 Hospital Annual Report which stated that:

The maternity work has increased by one-third thus enabling all five nurses who graduated this year to study the mid-wifery course. It is encouraging that women of the surrounding villages are coming to appreciate the advantages of having their babies in the safer and hygienic conditions of a hospital.<sup>13</sup>

However, although the hospital was making great strides in the provision of maternal and child health services, it did not have daily clinic sessions for antenatal and under-five age children. It was not until 1968 that major developments in the provision of primary healthcare were made. In line with the Salvation Army's international theme, "Every Child Matters", Chikankata Hospital introduced more maternal and child health programmes which complemented earlier efforts. The programmes consisted of antenatal and post-natal examinations, immunisation, regular weighing, detection of possible difficult labour cases and referring such to medical officers for advice, early detection of diseases in children, and health education of parents to acquaint them with modes of health living.<sup>14</sup> In addition, a new maternity unit was built and officially opened in December 1968. Speaking at this occasion, Dr Paul du Plessis, having been influenced by David Morley's work in Nigeria, announced that the hospital would establish daily Under-five clinics, an

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<sup>12</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

<sup>13</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1954.

<sup>14</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

investment in the health of children of all the communities including those not born in the hospital as was the practice all along.<sup>15</sup>

The completion of the maternity unit, therefore, saw the hospital start a virtual war on neonatal tetanus of which sedation was top on the agenda. Nurses were also taught to incubate apnoeic children - a temporary suspension of breathing occurring in some newborns.<sup>16</sup> Survivors were celebrated. However, the hospital took a proactive stance against apnoea by supporting safe home deliveries. This was achieved by providing umbilical cord packs for home deliveries managed by village midwives. In addition, tetanus inoculations were administered to antenatal mothers. In this regard, it was reported in 1968 that “the antenatal clinic is proving popular and of great benefit. Tetanus toxoid is given to expectant mothers three months prior to delivery. The antenatal facilities have been extended to rural areas.”<sup>17</sup> Therefore, Chikankata Hospital greatly contributed to the improvement of maternal health among the local people.

In 1971, Chikankata Mission expanded its provision of maternal and child welfare programmes further afield. Under-five clinics were now held daily at the hospital itself while combined maternal and child welfare programmes were conducted alternate weeks at the Chaanga and Syanyoolo clinics. These services were also rolled out on a monthly basis to Nameembo, Ng’andu, Nadezwe, and Dundu.<sup>18</sup> In the same year, the maternal and child health statistics for Chikankata

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<sup>15</sup> du Plessis, email to author.

<sup>16</sup> du Plessis, email to author.

<sup>17</sup> N.A.Z., MH1/3/140, Hospitals Annual Reports, Southern Province Annual Report for 1968.

<sup>18</sup> N.A.Z., MH1/3/148, Ministry of Health Annual Report, 1971.

Hospital and the surrounding areas were 995 B.C.G, 720 measles, 743 smallpox, and 1,665 polio vaccines.<sup>19</sup>

To further enhance the provision of maternal and child health services, a labour ward, maternity and premature baby units were completed in 1971 such that the facility became a complete functioning entity. Alterations were also made to the Out-Patient Department (OPD) to suit the needs of the under-five and antenatal clinics. In addition, a two-roomed clinic was also erected at Hapiku with the assistance of the locals so as to take health services closer to the people.<sup>20</sup> In the same year, a nutrition group was started in conjunction with the daily under-five clinic and also served the leprosarium as an additional food depot. Health and nutrition education were integrated into the maternal and child health clinics with talks on a wide variety of subjects given. Further, cookery demonstrations on the preparation of nutritious foods were given at the women's group based at the leprosy settlement. Demonstrations at the maternity and female wards of the hospital were done by domestic science students from Chikankata Secondary for two terms during the year.<sup>21</sup>

Throughout the 1970s maternal and child healthcare remained at the core of the hospital's agenda. A number of vaccinations were conducted both at Chikankata and its satellite clinics. For example, 8,180 inoculations were administered in 1972 and 2,346 in 1973.<sup>22</sup> Towards the end of the 1970s, more programmes were added to the maternal and child health services. For instance, family planning was introduced in addition to the already existing health education lessons. The programme

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<sup>19</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

<sup>20</sup> N.A.Z., MH1/3/148, Ministry of Health Annual Report, 1971.

<sup>21</sup> N.A.Z., MH1/3/148, Ministry of Health Annual Report, 1971.

<sup>22</sup> N.A.Z., MH1/3/148, Southern Province Annual Report, 1973.

emphasised family spacing and preventing maternal depletion which resulted from frequent pregnancies. With support from the Planned Parenthood Association of Zambia (PPAZ) affiliated to the Ministry of Health, Chikankata Hospital was provided with field workers and contraceptive devices to distribute to women.<sup>23</sup>

In addition, the hospital intensified its community service provision conducted by the mobile clinic team. In 1979, the team visited villages of Avillion, Godson, Dundu, Mukwela, Ngangula, Malala, Mabwetuba, Hapiku, Ng'andu, and Nameembo, all on the plateau. In the valley, visits were made to Chaanga, Sianyoolo, Ibbwe Munyama, Siamwiinga, Sinadambwe and Chamwe. In the same year, the mission established two new health centres at Nameembo and Jamba.<sup>24</sup> During this campaign, du Plessis reported that over 19,000 inoculations were given to children against the common infectious diseases of childhood such as smallpox, whooping cough, and measles.<sup>25</sup>

In the 1980s and 1990s more rural health centres were established so as to increase the local people's access to primary healthcare. In 1982, for instance, a clinic was opened at Ibbwe Munyama, the area abandoned by the mission in 1945. In the same year, the Salvation Army established a clinic at Chikanzaya in the Gwembe valley.<sup>26</sup> By 2015, Chikankata had a total of nine affiliate rural health centres set up in strategic locations around the village settlement with the latest being Terannova. By the end of 2015, Chikankata Hospital was providing maternal and child health

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<sup>23</sup> Government Republic of Zambia (hereafter GRZ), *Ministry of Health Annual Report, 1978* (Lusaka: Government Printers, 1983), p.20.

<sup>24</sup> Beverley McInnes, *The Flag Across the Zambezi: A History of the Salvation Army in the Zambia and Malawi Territory, 1922 – 1997* (Lusaka: Zambia and Malawi Territorial Headquarters, 1997), p.122.

<sup>25</sup> du Plessis, email to author.

<sup>26</sup> McInnes, *The Flag Across the Zambezi*, p.40.

services to a remote catchment area of over 100,000 people.<sup>27</sup> It must be noted here that the mission was not only confined to provision of maternal and child health services but combating communicable and non-communicable diseases as well.

### **5.3 Patient Attendances, General Disease Treatment and Prevention**

Like earlier missionary societies such as the Catholics and Adventists, the Salvation Army through its hospital at Chikankata, made a significant contribution to healthcare provision by combating a number of communicable diseases such as Tuberculosis, smallpox, and measles which afflicted the local people. As early as 1946, there were far more patients flocking to the hospital than it could handle. Beverley McInnes reported that some 3,000 patients received treatment in that year alone.<sup>28</sup> In the same year, the Provincial Medical Officer (PMO) for the Southern Province noticed that venereal diseases and genitor-urinary cases were also being attended to at the hospital. He noticed four elderly men with a long-standing chronic illness being treated by Dr Kingsley Mortimer and his wife, Mavis.<sup>29</sup> In 1948, the hospital had a total of 708 in-patients and a total of 6,340 out-patient attendances.<sup>30</sup> In the same year, the hospital introduced a fee-paying scheme whereby payments were made in kind. For example, a fowl could be given for a dental extraction.<sup>31</sup> This practice was encouraged more than cash by the hospital administration as it contributed to food security among the medical personnel.

In the early 1950s, there was an increased number of patients visiting the hospital for treatment and operations. The government noted that the hospital was

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<sup>27</sup> The Salvation Army Chikankata Mission, <https://www.salvationarmy.org/chikankata/health> (Accessed on 16.09.2019).

<sup>28</sup> McInnes, *The Flag Across the Zambezi*, p.74.

<sup>29</sup> N.A.Z., MH1/3/21, Tours of Southern Province, Chikankata Hospital, 1946.

<sup>30</sup> Northern Rhodesia Health Department Annual Report, 1948.

<sup>31</sup> N.A.Z., MH1/3/51, Tours of Southern Province, Provincial Medical Officer Tour Report No. 4 of 1950.

being run efficiently under Dr McAllister who was keen on his surgical work.<sup>32</sup> McAllister had previously conducted similar successful eye operations in India where he practised medicine for a long time.<sup>33</sup> During his time, Chikankata Hospital had 40 odd beds full of chiefly surgical cases – abdominal, hernia, amputations and eye conditions.<sup>34</sup> The number of cases attended to in 1951 and 1952 are shown in Table II below.

**Table II: Patient Attendance Figures at Chikankata Hospital, 1951 and 1952**

Type of Cases	1951	1952
Operations		
Major	88	112
Minor	237	365
Confinements		
Normal	68	70
Abnormal	14	12
Total	82	82

Source: N.A.Z., SP1/2/77, Salvation Army Chikankata, Hospital Annual Report, 1952.

From the table, it can be deduced that there was a general increase in the number of cases dealt with by the hospital in the two years stated. This is attributed to the expansion of the hospital facilities which was conducted in the same period. Further, the figures demonstrate the local people's growing faith in the mission's healthcare system.

<sup>32</sup> N.A.Z., MH1/3/51, Tours of Southern Province, Provincial Medical Officer Tour Report No. 4 of 1950.

<sup>33</sup> N.A.Z., MH1/3/21, Tours of Southern Province, Tour Report No. 1 of 1948.

<sup>34</sup> N.A.Z., MH/2/77, Salvation Army Chikankata, Southern Province Tour Report No. 2 of 1951.

In 1954, Chikankata Hospital underwent major expansion to its infrastructure in the quest to increase its capacity. This saw the completion of two wards, operating theatre block, kitchen, administration block, hostels, and the X-ray Department. The bed capacity increased to 140 from the initial 35.<sup>35</sup> Following this expansion of facilities, the hospital began receiving TB patients from other hospitals in the province. For instance, in 1956, Chikankata Hospital received 25 TB patients from Mazabuka on transfer basis.<sup>36</sup> A new TB block was opened in November 1960 which increased the bed capacity to about 100.<sup>37</sup> The increase in the use of occupational therapy served to settle patients more quickly as there was greater readiness for them than before to accept the fact of a prolonged stay in the hospital. In 1961, 95 TB patients from across the province were admitted to Chikankata Hospital.<sup>38</sup>

The expansion of the hospital capacity also translated into increased number of patients receiving treatment for various diseases. In 1961 alone, the hospital had a total admission of 2,362 in-patients and a death toll of 76.<sup>39</sup> In the same year, the mission's Chaanga dispensary, built in 1954, had a total of 154 admissions with no deaths recorded.<sup>40</sup> The number of in-patients for Chikankata was the highest for that year among all the medical missions that were under government subsidy in the Southern province.<sup>41</sup>

In the late 1960s, Chikankata Hospital conducted further campaigns against communicable diseases of TB, measles and smallpox as a preventive measure. The hospital conducted measles vaccinations in 1967 in which people of all ages were

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<sup>35</sup> N.A.Z., MH/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1954.

<sup>36</sup> N.A.Z., MH1/3/51, Tours of Southern Province, Mazabuka tour Report, 1956.

<sup>37</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

<sup>38</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

<sup>39</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

<sup>40</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

<sup>41</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

immunised.<sup>42</sup> Similar campaigns against TB were carried out in 1968 and 1969 in which over 7,000 vaccinations were given to school children around the Chikankata area.<sup>43</sup> As a result of such campaigns, the 1971 Chikankata Hospital Annual Report indicated that ‘there was a significant drop in the incidence of measles, smallpox and whooping cough in the area’.<sup>44</sup>

However, despite such campaigns, TB still remained the main cause of mortality at the hospital. This was because Chikankata was the major TB referral hospital in the province. This was confirmed in the 1971 hospital annual report which indicated that:

Tuberculosis remains the chief cause of mortality in this hospital. Most frequently, these deaths occur within days of admission and reflect delay in presentation for treatment. The hospital being a referral centre for this disease obviously therefore has a high death rate.<sup>45</sup>

The above observation is further supported by statistics on the mortality rate for 1971 as shown in Table III.

**Table III: Chikankata Hospital Mortality Rate, 1971**

Disease	Admitted	Dead
Pneumonia and chest infections	144	4
Malaria	144	2
Measles	63	1
Tuberculosis	180	22

Sources: N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

<sup>42</sup> N.A.Z., MH1/3/140, Southern Province Hospitals Annual Reports, 1967.

<sup>43</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1969.

<sup>44</sup> N.A.Z., MH1/3/148, Ministry of Health Annual Report, 1971.

<sup>45</sup> N.A.Z., MH1/3/148, Ministry of Health Annual Report, 1971.

From the data provided above, it is clear that TB accounted for the high mortality rate at Chikankata Hospital despite various preventive interventions employed by medical officers. This was partly attributed to the lack of adherence to TB drugs by patients in the district.<sup>46</sup>

#### 5.4 Leprosy

The Chikankata Leprosarium grew out of Dr Sidney Gauntlett's concern for Paul Shumba, one of the pioneer officers of the Salvation Army in Zambia, who by 1949 had contracted leprosy. Shumba became the first leprosy patient at Chikankata and built himself a hut across the Cifwankala stream, near the mission. This was the beginning of what would become the largest leprosarium in the Southern province.<sup>47</sup> The annual report of the Department of Health in 1951 indicated that 'two extra temporary huts have been built and the number of lepers under treatment has increased from 6 to 8'.<sup>48</sup> Further, the Chikankata Hospital Annual Report for 1952 noted that:

There was a marked increase in the number of leprosy patients undergoing treatment and a small settlement had been established where nearly 60 men, women and children received the benefits of modern therapy. Many of these walked for miles to reach the settlement. Many new houses were built by the patients themselves and a small dispensary had been built and equipped so that this section of the medical work was almost entirely self-contained.<sup>49</sup>

The above view is an indication that the genesis of Chikankata Leprosarium by the mission was motivated by the need to assist the local people combat leprosy.

Despite the presence of earlier leprosaria in the province at Namwala, Gwembe and Chikuni, it was Chikankata Mission which took a leading role in the treatment of

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<sup>46</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1963.

<sup>47</sup> Interview, Chikandi.

<sup>48</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Southern Province Tour Report No. 3 of 1951.

<sup>49</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Chikankata Hospital Annual Report, 1952.

leprosy. The centre at Chikankata received referral cases from other leprosaria such as Gwembe and Namwala. In 1961, for example, a large number of patients came from Gwembe with some of them suffering from advanced forms of leprosy.<sup>50</sup> The following year, 11 leprosy patients were referred to Chikankata by the Catholic Sisters of Charity based at Chivuna in Chief Sianjalika's area, bringing the total number of out-patients to 404.<sup>51</sup> This increase in the number of patients was also revealed in the leprologist's tour report of 1962 where it was noted that "Dr Gauntlett finds the incidence of leprosy in his own [Chikankata] area relatively low; the mass of the patients needing treatment come from the Gwembe valley, from the Choma area, and from the Namwala districts".<sup>52</sup> This shows that Chikankata was the major centre for leprosy patients in the Southern province.

In addition, Chikankata settlement received a number of young patients who attended the Kirby School for leprosy children from all over the country. The school was established in the 1950s by Major Leonard Kirby. In 1962, it was reported that 'the school was thriving with over 140 children'.<sup>53</sup> Following the government's policy to centralise all leprosy children into one centre at Chikankata in the late 1960s, the Kirby School became the only institution in the country to support the education of afflicted young people.

As a result of the demand for Chikankata leprosy medical care, Gauntlett, was appointed by the government as the leprosy officer for the Southern province. He thus began supervising the Gwembe leprosy settlement where cases from Namwala

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<sup>50</sup> N.A.Z., SP1/3/34, Ministry of Health Southern Province Annual Report, 1961.

<sup>51</sup> N.A.Z., MH1/3/143, Leprologist Tours, Southern Province, May 1962.

<sup>52</sup> N.A.Z., MH1/3/143, Leprologist Tours, 1962.

<sup>53</sup> N.A.Z., MH1/3/143, Leprologist Tours, 1962.

were sent to him for periodic reassessment.<sup>54</sup> The Gwembe settlement had a capacity of 75 in-patients while Namwala had 12.<sup>55</sup> Thus, the lot to house a large number of leprosy patients fell on Chikankata. The contribution of Chikankata Leprosarium to the welfare of patients in the region gave it the reputation of being the central leprosy settlement in the Southern province in 1962.<sup>56</sup> This is supported by the fact that its number of leprosy patients was the highest in the province among government hospitals in the mid 1960s as shown in Table IV.

**Table IV: Number of Leprosy Patients in Selected Hospitals in the Southern Province, 1965 - 1967**

<b>Hospital</b>	<b>1965</b>	<b>1966</b>	<b>1967</b>
Chikankata	256	250	220
Livingstone	2	5	7
Kalomo	56	33	27
Choma	57	38	17
Mazabuka	142	84	76
Gwembe	128	81	50
Namwala	28	21	22
<b>Total</b>	<b>669</b>	<b>512</b>	<b>419</b>

Sources: N.A.Z., MH1/3/140, Hospitals Annual Reports, Southern Province, 1967 and N.A.Z., MH1/3/143, Leprologist Tours, 1968.

The statistics above indicate that Chikankata, being a referral centre, received high number of cases of the leprosy disease amidst general decline in other hospitals in the province. To reduce the rate of leprosy cases, the hospital intensified the

<sup>54</sup> N.A.Z., MH1/3/131, Ministry of Health Southern Province Annual Report, 1963.

<sup>55</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1957.

<sup>56</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from Director of Medical Services to Chikankata Hospital Medical Superintendent, 1954.

treatment of the disease by introducing new medication and carrying out rigorous campaigns in the district.<sup>57</sup> This resulted in the reduction in the number of leprosy cases to about 100 in the late 1970s.<sup>58</sup>

Despite Chikankata being the central leprosarium, financing of the leprosy work was not a lone effort by the mission as it received a government grant annually. In this regard, Chikankata Hospital received £150 from the colonial state as a maintenance grant for about 50 patients in 1952. This money catered for food, housing and blankets, as well as equipment for the leprosy dispensary.<sup>59</sup> In the same year, the settlement was visited by Dr R.G. Cochrane, the Medical Secretary of the British Empire Leprosy Relief Association (BELRA). Cochrane found out that there were 40 cases of leprosy being treated at Chikankata. In 1953, the PMO noted that Chikankata was an approved leprosy centre which received an annual grant of £350.<sup>60</sup> The following year, the leprosy settlement had about 130 patients, compelling the mission to request for an increase in the grant from £650 to £810 per annum.<sup>61</sup> The request was granted as the hospital received the proposed amount in 1955.<sup>62</sup> Thus, as the number of patients increased so did the hospital grant from the government.

The care provided at the Chikankata Leprosarium included helping patients prevent deformities by providing them with information on the ailment. As soon as a patient was admitted to the institution, he/she started attending talks, lectures, and

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<sup>57</sup> McInnes, *The Flag across the Zambezi*, p.123.

<sup>58</sup> McInnes, *The Flag across the Zambezi*, p.123.

<sup>59</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from Director of Medical Services to Salvation Army Medical Superintendent, 21 November, 1952.

<sup>60</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Office of the Provincial Medical Officer, 9 June, 1953.

<sup>61</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Letter from the Chikankata Hospital Superintendent to the Director of Medical Services, 7 September, 1954.

<sup>62</sup> N.A.Z., MH1/2/77, Salvation Army Chikankata, Southern Province Tour Report, 3 May, 1955.

demonstrations on leprosy in a hall erected solely for this purpose. There were 90 patients attending such classes in 1971.<sup>63</sup> These were given lessons on the prevention of burning fingers, taking care of anaesthetic feet, and the importance of reporting all forms of injuries to relevant medical officers as soon as possible. They were also taught on how to live with existing deformities once discharged from the leprosarium.<sup>64</sup> To ease their movement, patients were also trained by Major (Dr) Jock Cook in the making of their own sandals from old motor vehicle tyres as shown in Figure VIII below. In 1971, the hospital reported that the training of cobblers for leprosy footwear was on-going.<sup>65</sup>

**Figure VIII: Leprosy Patient Wearing Sandals Made from Motor Vehicle Tyres**



Source: Paul du Plessis, [www.thedups.com](http://www.thedups.com) (Accessed on 11.11.2019).

<sup>63</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

<sup>64</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

<sup>65</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

The leprosarium generated a life of its own with many of the patients working in its gardens. Land was cultivated and worked by able-bodied leprosy patients who were taught improved farming methods with the help of an agricultural officer. This made the settlement almost self-sufficient in food supplies (See Figure IX below). However, stray cattle from the neighbouring villages posed a threat to the gardens compelling hospital management to erect a fence. In addition, some leprosy patients were employed as cleaners and gardeners at the mission with a few graduating to full staff status.<sup>66</sup>

**Figure IX: Leprosy Patients Working in a Garden along the Cifwankala Stream**



Source: Paul du Plessis, [www.thedups.com](http://www.thedups.com) (Accessed on 11.11.2019).

In line with the leprosy policy of 1952, government began the process of repatriating non-active leprosy members from the settlement in the 1980s. This policy stipulated that only members with active leprosy qualified for a grant from

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<sup>66</sup> McInnes, *The Flag Across the Zambezi*, p.109.

government as well as to live at a leprosarium. It further stated that non-active members who chose to live near the settlement after repatriation became a responsibility of the traditional leadership.<sup>67</sup> By 1982, with the disease well under control, government began pursuing a policy of normalisation and repatriation of patients to their homes. This came as a result of the successful treatment of the disease in the country throughout the 1970s. A social worker based at the Chikankata centre, Thebisa Chaava, coordinated the relocation of the patients during this period. However, some of the more able-bodied patients had already been engaged in various capacities as workers at the hospital or its vegetable gardens. Among them was Lot Kakusa, who in later years became not only the hospital's plumber and maintenance officer but Sergeant-Major for the Cifwankala Corps as well. Another such beneficiary was Rebecca Mutanti who became a dedicated Home League Secretary of the local church at Cifwankala.<sup>68</sup> The leprosy settlement was closed down in 1988 because most patients had been repatriated home.

### **5.5 HIV/AIDS Care and Prevention**

Chikankata Hospital also took a lead in the provision of care for HIV/AIDS patients. The mid 1980s witnessed the advent of HIV/AIDS in Central Africa. The first case in Zambia was recorded in 1984. However, it was the diagnosis on a patient with *Kaposi's sarcoma*, at Chikankata Hospital in 1986 which brought the institution into the realm of HIV/AIDS. Another 37 more cases of *Kaposi's sarcoma* were recorded at the end of that year.<sup>69</sup> From then onwards, the pandemic slowly but inevitably came to dominate patient numbers at Chikankata Hospital. By 1989, there

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<sup>67</sup> N.A.Z., MH1/4/57, Leprosy General, 1958.

<sup>68</sup> du Plessis, email to author.

<sup>69</sup> Churches Health Association of Zambia (hereafter CHAZ) Antiretroviral Therapy Third Quarter Report for Chikankata Hospital, 2009.

were 504 HIV/AIDS patients receiving medical care at Chikankata Hospital and a further 1,102 in 1991.<sup>70</sup>

In order to cater for the above number of HIV/AIDS cases, an idea to build a hospice was mooted by the hospital staff but rejected by community leaders. It was felt that the number of patients requiring care would soon overwhelm a hospice. A decision was finally made by the hospital management led by Dr Ian Campbell that an approach to HIV/AIDS care in the home environment should be developed. This arose out of the realisation that unless the local community was helped to find coping mechanisms and changes in lifestyle, the hospital would be stretched beyond capacity to cater for HIV/AIDS patients.<sup>71</sup> In addition, the hospital management capitalised on the Zambian society's inherent strength of taking care of the terminally ill at home, and not in institutions as was the case in the West. In view of this, the hospital developed the Home-Based Care approach to help people living with HIV/AIDS. The concept of Home-Based Care was later adopted by other organisations and nations world over.<sup>72</sup>

The Home-Based Care programme was meant to help provide psychological, social and medical support to families, where education on HIV/AIDS care and prevention would be given in the immediate environment of the patient. Later, the programme was expanded to include school health education, community counselling, and the management of HIV/AIDS patients and their families. 'As a hospital team, we conducted weekly sensitisation programmes in schools and

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<sup>70</sup> I.D. Campbell and G. Williams, *An Integrated Approach to AIDS Management* (London: ActionAid, 1992), p.17; and Jonathan M. Mann, *AIDS in the World: a Global Response* (London: Harvard University Press, 1992), p.489.

<sup>71</sup> McInnes, *The Flag Across the Zambezi*, p.132.

<sup>72</sup> McInnes, *The Flag Across the Zambezi*, p.133.

villages so as to create awareness about HIV/AIDS',<sup>73</sup> narrated Clara Ntinda, a health worker actively involved on the programme when interviewed in 2019. By 1990, however, it became apparent that the sustenance of the Home-Based Care programme was not feasible. The hospital mobile care team incurred huge operational expenses such as cost for vehicles, fuel, drugs, and allowances for health personnel. For instance, the hospital spent \$47,765 on drugs and operational expenses in the period between 1988 and 1991.<sup>74</sup> The cost of running the programme was thus not commensurate to the time and actual care given to clients. In this regard, the hospital mobile team travelled 38,760 kilometres to carry out 998 visits to 292 HIV/AIDS patients in 1990 alone.<sup>75</sup>

In order to disseminate information on HIV/AIDS care and prevention, Chikankata Hospital management also established a seminar centre at the old leprosarium building in the early 1990s. The AIDS Management and Training Seminars (AMTS) drew health specialists of different nationalities from across the world. 'We received delegates from different parts of the world and shared with them the concept of home-based care in HIV/AIDS management',<sup>76</sup> explained Cramwell Mweemba, a health worker at Chikankata Mission. Further, wards were constructed at the hospital with Ruth Schoch, a clinical instructor, being responsible for the Bethany Ward where afflicted patients were admitted.<sup>77</sup>

Through the community counselling programme, local health workers played a significant role in changing some of the rituals that were avenues for the further transmission of the pandemic. Such practices included sexual cleansing (*kusalazya*)

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<sup>73</sup> Interview, Clara Ntinda, Chikankata Village, Chikankata District, 30/03/2019.

<sup>74</sup> Mann, *AIDS in the World*, p.489.

<sup>75</sup> Campbell and Williams, *An Integrated Approach to AIDS Management*, p.17.

<sup>76</sup> Interview, Cramwell Mweemba, Chikankata Village, Chikankata District, 30/03/2019.

<sup>77</sup> McInnes, *The Flag Across the Zambezi*, p.133.

and widow inheritance.<sup>78</sup> In this regard, the hospital team of health workers sought audience with traditional leaders to help abolish these practices. Informant Clara Ntinda noted that:

As a team of Chikankata health workers, we visited all the chiefdoms in our catchment area to sensitise the people on the dangers of some cultural practices such as sexual cleansing with regard to the transmission of HIV/AIDS. We worked with chiefs and headmen to raise HIV awareness. It was decided at last that such practices should be abolished or replaced with safer ones. This cultural change later spread to other districts in the province. We are, therefore, proud as a hospital to have championed the abolition of cultural practices that perpetuated the spread of HIV/AIDS.<sup>79</sup>

The above views were also expressed by Elvis Simavwa, the then Chikankata Hospital Administrator. When interviewed by the British Broadcasting Corporation (BBC) in 1999, Simavwa recalled that:

In the past, when a man died, his wife would be given over to one of his brothers. A ritual cleansing would take place at the funeral involving sexual intercourse between the wife and her deceased husband's brother. If the husband had died of Aids - an increasingly likely scenario in Zambia - this traditional practice would afford an open route for the transmission of HIV infection. Now these rituals are dying out, as traditional leaders preach against them, and persuade the community that they are only helping the AIDS virus to thrive.<sup>80</sup>

From the foregoing, it can be observed that traditional leaders were key partners in changing some age-old practices that had become avenues for the transmission of HIV/AIDS. Without the assistance of these respected and revered community leaders, there was little chance of persuading the local people to wake up to the dangers of HIV/AIDS.

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<sup>78</sup> The practice of cleansing was done as an after death ritual where the surviving spouse was made to have sexual intercourse with a close relative of the deceased. It was believed that this was a way of ensuring that the ghost of the deceased did not follow or trouble the surviving spouse. On the other hand, widow inheritance involved remarrying of the surviving spouse to the deceased husband's brother or nephew. As a result of the community counselling programme conducted by Chikankata hospital staff, new forms of cleansing such as *kuchuta* (rubbing) and *kulamba busu* (mealie meal sprinkling) were introduced. These new forms of cleansing did not involve sexual intercourse.

<sup>79</sup> Interview, Ntinda.

<sup>80</sup> British Broadcasting Corporation (hereafter BBC) News, 'World: Africa on the AIDS Frontline', Tuesday September 14, 1999, Published at 10:19 GMT.

The care of HIV/AIDS patients at Chikankata, however, encountered financial constraints due to shifting economic fundamentals in the country following the implementation of Structural Adjustment Programmes (SAPs) by the Movement for Multiparty Democracy (MMD) government after 1991. Funding to the hospital was reduced owing to stringent austerity measures adopted by the government as conditionality from the International Monetary Fund (IMF) and World Bank for the implementation of SAPs. For instance, government funding to the hospital was reduced by 18 percent in 1995 and 37 percent in 1998.<sup>81</sup> As a result, a board was constituted and entrusted with the fiscal responsibility of downsizing the workforce. Medical staff, both local and expatriate, whose training had been geared to serving in places such as Chikankata, were retrenched in order for the hospital to save some money. In this regard, four doctors and seven nurses were retrenched in 1995.<sup>82</sup> Among those laid off was the much respected Dr Elijah Cheela, a patient listener.<sup>83</sup>

Following the staff cut-backs, some wards were closed thus reducing the hospital's bed capacity to that of 1948 of merely 35.<sup>84</sup> American officer-doctor, Bella Carroll wrote of the impact on morale following the downsizing of staff levels:

They say you should 'Pull yourselves up by your bootstraps', well, our bootstraps are broken.... Because of budget cuts last year, two wards were closed, workers laid off, and the lunch program was suspended for a while. It hurt[s] morale... But the community has recognised that some of those things, like cleaning, it can help do. The hospital employs cleaners, but family members of patients also pitch in. The people see this as their hospital and they're helping.<sup>85</sup>

The impact of budget cuts due to SAP was also noted by Ntinda who stated that:

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<sup>81</sup> Thomas Bossert et al., 'Decentralisation in Zambia: Resource Allocation and District Performance', *Health Policy and Planning*, Vol. 18, No. 4 (2003), p. 361. The actual figures for the hospital's grant from government could not be found mostly due to poor record keeping by the mission.

<sup>82</sup> The Salvation Army, Chikankata Hospital Annual Report, 1995.

<sup>83</sup> du Plessis, email to author.

<sup>84</sup> N.A.Z., MH/2/77, Salvation Army Chikankata, Southern Province Tour Report No. 2 of 1951.

<sup>85</sup> du Plessis, email to author.

The under-funding of the hospital affected our HIV/AIDS community programmes. We could not visit a number of villages due to logistical challenges. At the hospital, we struggled to feed patients who were admitted at the Bethany ward. This further affected the health of the patients who needed a balanced diet for sustenance in the absence of any curative medicine.<sup>86</sup>

From the views above, it can be noted that changes in Zambia's economic policies after 1991 negatively affected the running of Chikankata Hospital due to inadequate finance.

In the 2000s, however, Chikankata Hospital began receiving increased funding from both the state and non-governmental organisations. In September 2004, an Antiretroviral Therapy (ART) centre, *Muka Buumi* (Mother of Life), was opened. It treated those afflicted with HIV/AIDS by improving and prolonging their quality of life. This project was sponsored by the AIDS Healthcare Foundation, Centre for Infectious Diseases Research in Zambia (CIDRZ) and the Salvation Army World Service Office (SAWSO). The following year, the Churches Health Association of Zambia (CHAZ) in conjunction with the Global Fund, adopted *Muka Bumi* ART clinic.<sup>87</sup> This led to the financial burden placed on the hospital in so far as HIV/AIDS related activities were concerned to be lifted as CHAZ took over that responsibility. In this regard, Chikankata Hospital received \$15,080 in 2005, \$11,813 in 2008 and \$15,120 in 2010 as grants from the Global Fund towards the combating of HIV/AIDS, Malaria and Tuberculosis.<sup>88</sup> As a result of such funds, the hospital

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<sup>86</sup> Interview, Ntinda.

<sup>87</sup> <https://www.salvationarmy.org/chikankata/mukabuumiclinic> (Accessed on 21.09.2019).

<sup>88</sup> Ministry of Health, National AIDS Spending Assessment for 2005 and 2006: Final Draft Technical Report (Lusaka: Government Printers, 2008), p.111; and The Global Fund, Country Audit of Global Fund Grants to Zambia, <http://www.theglobalfund.org/media/2596/oig> (Accessed on 10.11.2019).

increased the number of patients on ART. In 2010, 1,273 people received treatment at the local ART clinic with the number exceeding 5,000 in 2015.<sup>89</sup>

## 5.6 Epilepsy

Chikankata Hospital equally led the way in caring for epilepsy patients. Until the 1990s, epilepsy was not a major health issue among the people of Chikankata. The disease was understood mainly as a spiritual condition that required the intervention of traditional doctors and as such, few locals sought conventional therapies at the hospital.<sup>90</sup> Commenting on the prevalence of the disease when he worked at the hospital from 1968 to 1980, Dr Paul du Plessis recalled that:

Epilepsy was not a widespread phenomenon in my years at Chikankata. Children who had convulsions during febrile episodes usually recovered well from these and these did not usually recur [sic] in adult life... People with epilepsy resulting from brain damage or so called 'idiopathic epilepsy' required long-term management and with suitable medication were very often kept seizure-free for very long periods...<sup>91</sup>

While the above may have been the case at Chikankata, epilepsy had become a health challenge and source of ridicule for affected families in the 1990s. Research was conducted in Chikankata on epilepsy and its treatment by Professor Gretchen Lano Birbeck from Michigan State University. His study showed that of all epilepsy cases that came for medical attention due to seizure-related injuries, only ten percent of them had ever received treatment although the dosages of medication were inadequate.<sup>92</sup> Moreover, most epilepsy patients did not admit that they had burns due to seizures. In this regard, the hospital had recorded only 32 cases of epilepsy in the

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<sup>89</sup> CHAZ Quarterly Report, 2009; and <https://www.salvationarmy.org/chikankata/mukabuumiclinic> (Accessed on 21.09.2019).

<sup>90</sup> Interview, Chikandi.

<sup>91</sup> du Plessis, email to author.

<sup>92</sup> <https://www.salvationarmy.org/chikankata/epilepsycare> (Accessed on 21.09.2019).

entire catchment area.<sup>93</sup> Out of this concern, Birbeck established the Epilepsy Care Team (ECT) Department within Chikankata Mission Hospital in 1999.<sup>94</sup> In the same year, the ECT conducted a door to door survey in the catchment area of Chikankata Hospital where a total of 892 people were found to have active epilepsy.<sup>95</sup> In 2001, Birbeck trained various clinical officers and midwives from all the provinces of Zambia on epilepsy care. Between 2002 and 2003, community health workers and traditional healers were also trained in epilepsy care in order to improve referral rates of such people with the disease to the hospital.

Chikankata Mission Hospital also conducted what was called “Doctor’s trips” in order to attend to epilepsy cases. These were tours where a physician accompanied by a nurse and other members of staff, travelled to rural health centres to provide care to patients. As a result of such tours, adherence to medication, counselling and registering of new patients was improved.<sup>96</sup> Further, in an attempt to reduce stigma associated with epilepsy, the Doctor’s trips and the ECT conducted school and church based presentations on the health condition in 2012. These were brief 20-25 minutes presentations meant to give as much information on epilepsy as possible. During these interactive fora, it was discovered that the community’s stigma on epileptic patients was high. For instance, when some pastors were asked if they could marry off their sons or daughters to people with a history of epilepsy, they all refused.<sup>97</sup> With time, the sensitisation programmes contributed to a reduction on

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<sup>93</sup> Interview, Charles Mabeta, Chikankata Village, Chikankata District, 28/03/2019.

<sup>94</sup> Interview, Mabeta. At the time of research, the ECT comprised the following members of staff: Professor Gretchen L. Birbeck – ECT Director, Fridah K. Chiwanza – ECT Coordinator, Charles Mabeta – Research Assistant, Sharon K. Moomba – Clinical Officer, Stephen Mulembe – Security.

<sup>95</sup> Interview, Mabeta. Active epilepsy meant that those diagnosed had a history of multiple seizure episodes.

<sup>96</sup> <https://www.salvationarmy.org/chikankata/epilepsycare> (Accessed on 21.09.2019).

<sup>97</sup> Interview, Mabeta.

stigma and cleared myths and misconceptions associated with epilepsy.<sup>98</sup> The ECT also received a number of new patients due to the increase in knowledge and awareness levels on the disease resulting from the presentations. Owing to these efforts, there were 628 people with epilepsy seeking care at Chikankata Mission Hospital in 2005.<sup>99</sup>

## **5.7 African Response to Healthcare Provision**

### **5.7.1 Resistance, Absconsion and Default on Treatment**

Although the response of Africans to healthcare provision by missionaries in central Africa was generally overwhelming, there were a few cases of local resistance, absconsions and defaults. In Chikankata, some local people expressed open resistance to the community health programmes conducted by medical officers. In 1956, for instance, the District Officer for Mazabuka found nearly every village in Chief Mwenda's area had been affected by *cibaba* (the-itch), presumably scabies.<sup>100</sup> The Chikankata Medical officer suggested for an extensive treatment as the only effective remedy. In conjunction with the Mazabuka District Commissioner's office, the hospital sent medical personnel to carry out the treatment against scabies in all the affected villages. On the material day, however, the local people refused to receive treatment on account that the problem was a spiritual one which needed the intervention of traditional, and not conventional doctors.<sup>101</sup> This reaction attracted reprimand from the District Commissioner who asked Chief Mwenda to apologise to

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<sup>98</sup> Some of the myths held by the people were that epilepsy was a hereditary condition which was highly contagious if one came into contact with saliva, stool, or urine of the patient during or after a seizure. Further, seizures were attributed to witchcraft or angry ancestors. The malicious motivation for inducing seizures into the victim was thought to be due to jealousy and/or a wish to increase one's wealth or power.

<sup>99</sup> <https://www.salvationarmy.org/chikankata/epilepsycare> (Accessed on 21.09.2019).

<sup>100</sup> N.A.Z.,SP4/2/117, Mazabuka Tour Report No. 5, 24 April, 1956.

<sup>101</sup> N.A.Z.,SP4/2/117, Mazabuka Tour Report No. 5, 24 April, 1956.

the medical staff from Chikankata on behalf of his people. The chief capitulated and treatment was finally given to the affected villages in May 1956.<sup>102</sup>

In addition, some local people who received medical care at the hospital would at other times refuse to cooperate with health services providers. This was reflected through a number of cases at the hospital in which patients avoided treatment of certain health conditions especially TB. In 1962 Glyn Griffiths, the tour leprologist, noted that there were two major problems which confronted Chikankata Hospital with regard to treatment of TB. These were the 'shortage of in-patient accommodation on the one hand, and defaulting and absconsions on the other'.<sup>103</sup> Nineteen cases of absconsion were recorded in the same year. This number reached 26 the following year.<sup>104</sup>

One of the reasons for high rates of absconsion among TB patients was temporary recuperation. When patients felt a lot better, they discontinued taking the medication. This complaint was made known to the Director of Medical Services (DMS) on 7 September, 1961:

In this connection [TB absconsions], I was interested to learn from a dispensary dresser the other day that some cases discharged home to villages in his area are very easily persuaded by other villagers not to go for out-patient treatment as they are obviously so much better and now they have been discharged from hospital how can they possibly need further treatment.<sup>105</sup>

In the same year, a letter to all government medical officers by the DMS revealed that:

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<sup>102</sup> N.A.Z., SP4/2/117, Mazabuka Tour Report No. 13, 31 August, 1956.

<sup>103</sup> N.A.Z., MH1/3/143, Leprologist Tours, 1962.

<sup>104</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1963.

<sup>105</sup> N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from Chikankata Hospital Superintend to Director of Medical Services, 7 September, 1961.

This is certainly the biggest problem of all in the federation and accounts for the majority of cases with Tubercle bacilli. The patient may abscond either when he feels a bit better, or when family troubles arise or for other reasons some real and some fictitious.<sup>106</sup>

The above revelation shows that adherence to treatment by the local people was a challenge and therefore accounted for an increased number of cases for TB as shown in the previous section.

Further, home-sickness experienced by patients who had been admitted for a long period contributed to cases of defaulting, absconding and lack of cooperation. This was because some patients came from far-flung areas and were consequently cut away from their families. This view is well-illustrated by the story of Norman Mulenga, a TB patient admitted to Chikankata Hospital in 1961. In correspondence to the DMS, the hospital noted that:

He [Norman Mulenga] has periodically refused his drugs, for a long time... He agreed only when he had a haemoptysis and then when better, refused refills and so on. He is playing up again now... As I see it, he is likely to be here for the rest of his days and his general condition is quite good. I think he would be more settled nearer home and it is my view that the only hope is a thopacoplasty.<sup>107</sup>

Another incident of patients averting treatment involved a group of young lepers who arrived at Chikankata from Liteta in the Central province in 1960. They were sent there to attend the Kirby School for leprosy children. The following year, some of the children deserted the settlement for their home in Liteta. In reference to this incidence, Griffiths remarked that 'a check will be made at Liteta to see how many have returned there, and to take action over any permanent absconsions'.<sup>108</sup>

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<sup>106</sup> N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from the Director of Medical Services to all Government Medical Officers, 16 May, 1961.

<sup>107</sup> N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from Chikankata Hospital Superintendent to the Director of Medical Services, 16 February, 1961.

<sup>108</sup> N.A.Z., MH1/3/143, Leprologist Tours, 1962.

In order to mitigate rates of absconsion and defaulting, particulars of the discharged patient were forwarded to the PMO with details of treatment and name of the health establishment where one was sent for care. When a patient defaulted on treatment, the health personnel at the designated dispensary directly informed the PMO who in turn advised the District Commissioner to investigate the matter and where necessary, arrange for the patient to continue receiving medical care.<sup>109</sup> This method had its own challenge as it was usually difficult for the DC to make such follow-ups on every out-patient that defaulted on treatment.

Another way devised to reduce absconsion by patients was through the use of propaganda. The hospital management used some X-ray films to sensitise patients on the need to adhere to the treatment of TB. In a correspondence to the DMS, the hospital noted that:

We have some X-ray films which show very clearly the satisfactory results that can be obtained from regular treatment. We have also those which show equally what can happen if the treatment is not regular. The initial purpose behind such propaganda would be to try and stop cases of absconding from hospital and to get them attend regularly as out-patients.<sup>110</sup>

But even with such measures in place, cases of absconsion were still rampant. For instance, there were 30 cases of absconsion from TB treatment recorded in 1971.<sup>111</sup>

### **5.7.2 Dependence on the use of Traditional Therapies**

The advent of Western medicine did not stop some local people in Chikankata from using African therapies to cure their various ailments. Many of

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<sup>109</sup> N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from Mazabuka District Commissioner to Director of Medical Services, 17 August, 1961.

<sup>110</sup> N.A.Z., MH1/4/62, Tuberculosis Incidence and Treatment, Letter from Chikankata Hospital Superintendent to the Director of Medical Services, 7 September, 1961. A similar practice was done in Kawambwa at the request of the TB specialist where the DC was to conduct propaganda before the testing of TB could be done on the people of Luapula valley in 1954. For more details, See, N.A.Z., MH1/3/44, Tours by Tuberculosis Specialist and Tuberculosis Medical Officer, Letter to District Commissioner for Kawambwa, 16 March, 1954.

<sup>111</sup> N.A.Z., SP1/3/56, Ministry of Health Southern Province Annual Report, 1971.

them continued applying both scientific and traditional healing remedies. In Chief Sianjalika's area, Africans continued consulting diviners for solutions to the health problems they faced. In 1954, for instance, it was noted that one headman in Chief Sianjalika's area, did not accompany the District Officer, G.E.K. Walsh, on a tour of the area as he had gone to see a diviner at Chiyanwa to find out the cause of his nephew's death.<sup>112</sup> In the same area was herbalist headman Sikanze Muchele whom Walsh described as having 'a very fine assortment of roots, bark and twigs for treating all common African ailments including unfaithful wives, lack of a lover and so on'.<sup>113</sup> People from other areas such as Mwenda chiefdom also made regular visits to Muchele.<sup>114</sup>

With regard to the treatment of leprosy, some local people resorted to the use of traditional herbal remedies. In this part of Zambia, the most widely used remedy was the concoction made from the *mululwe* (*Plumbago zeylanica*) tree. Informant Chikandi observed that:

Most leprosy patients in Chikankata made use of the *mululwe* tree besides the scientific medication they were given. The tree is known for curing many ailments including malaria. One simply needed to get its roots and soak them into water. They could then drink the solution. However, medical doctors were against the use of herbal remedies as they believed that such could provide other health problems.<sup>115</sup>

Chikandi's view resonates with the findings of V.W. Turner as cited by Brenda Mbaita, that the people of Southern province used the root of the *mululwe* tree to treat leprosy. Deep incisions were made in the root, which were soaked in water. The concoction was taken orally and was also used as lotion.<sup>116</sup> One can conclude that

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<sup>112</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Reports, 1954.

<sup>113</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Reports, 1954.

<sup>114</sup> N.A.Z., SP4/2/92, Mazabuka District Tour Reports, 1954.

<sup>115</sup> Interview, Chikandi.

<sup>116</sup> Brenda Liwoyo Mbaita, 'Missionaries, the State and Leprosy in Zambia, 1893 – 1964', M.A. Dissertation, University of Zambia, 2011, p.62.

Africans did not totally abandon traditional therapies in combating diseases that threatened their health. This view is in line with the findings of Walima Kalusa, Sarah Ponzer, and Lilian Samundengu who observed that Africans in North-western Zambia did not abandon traditional remedies in spite of the advancement in Western medicine provided by evangelical medics.<sup>117</sup>

Similarly, when HIV/AIDS took a heavy toll on human life in the late 1980s and 1990s, the people of Chikankata, as elsewhere in Zambia, looked to traditional therapies especially when scientific medicine proved to be ineffective. While the hospital had done a lot of sensitisation concerning HIV/AIDS and indicated that the disease was incurable, the people of Chikankata sought solutions within their cultural lenses of disease causation and treatment. They consulted traditional doctors in the hope that they would provide them with the cure for the pandemic. This found expression in a song in Tonga by the Malala Jazz Band led by George Kazoka in the late 1980s and mimicked by informant Jairos Magaya. The song went as follows:

*Kamulanga mbundakoka, ngu AIDS!*            See how I have slimed because of  
AIDS!

*Kamulanga mbundakoka, ngu AIDS!*            See how I have slimed because of  
AIDS!

*Bama dokota balapima taisilikiki,*            Doctors give diagnosis but there is no  
cure,

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<sup>117</sup> For details on the use of African therapies, See, Walima T. Kalusa, 'Disease and the Rethinking of Missionary Medicine', Ph.D. Thesis, Johns Hopkins University, 2003, p.142; Sarah Ponzer, 'Disease, Wild Beasts, and Wilder Men: The Plymouth Brethren Medical Mission to Ikelenge, Northern Rhodesia', *Conspectus Borealis*, Vol. 2, No. 1 (2017), pp.1-36; and Lilian Samundengu, 'The Role and Impact of Western Medicine in the Northwestern Province of Zambia, 1900 – 1963', M.A. Dissertation, University of Zambia, 1992, p.9.

*Musamu taku kuno.*

There is no medication.

*Kamuya buyo kupenga ku ban g'anga,*

While you suffer, go to traditional doctors,

*Andiza muya kupona.*<sup>118</sup>

Perhaps you will be cured.

The above song is a demonstration of the faith that Africans have had in traditional therapies even in the era of Western medicine. Moreover, it is a further indication that when Western medicine proved impotent against diseases, hope could be found in traditional remedies.

The reliance of Africans on traditional therapies did not change even in the wake of increased technology and knowledge about disease causation and treatment in the 21<sup>st</sup> century. By 2005, some local people in Chikankata were still depended on herbal remedies provided by herbalists and traditional doctors to treat epilepsy. A survey conducted by the Chikankata Epilepsy Care Team in the same year revealed that 18 traditional healers were involved in the successful treatment of witchcraft-induced epilepsy in a catchment area of 55,000 people.<sup>119</sup> This they did by using animal products that exhibited behaviours resembling convulsions or loss of consciousness. In this regard, traditional healers used a concoction with ingredients from the lesser bush baby (*Galago moholi*), bateleur eagle (*Terathopius ecaudatus*), and weevil (*Cylas formicarius*) found in sweet potatoes.<sup>120</sup> From this, it can be

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<sup>118</sup> Interview, Jairos Magaya, Moonga Village, Chikankata District, 25/03/2019.

<sup>119</sup> Roy Baskind and Gretchen Birbeck, 'Epilepsy Care in Zambia: a Study of Traditional Leaders', *Epilepsia*, Vol. 46, No. 7 (July 2005), p.1125.

<sup>120</sup> Interview, Mabeta. Most traditional healers observed that common ingredients for treating witchcraft-induced epilepsy were parts of insects or animals that themselves have convulsions. For instance, the bush baby feigns death to avoid attack so does the weevil in sweet potatoes. The bateleur eagle is described as a "tight-rope walker" that floats and balances still in the sky then drops suddenly. Such insects or animal parts were mixed with plant species in the same proportion as those used to inflict the epilepsy. The mixture was then applied to the skin, inhaled, or eaten.

deduced that African beliefs and disease treatment did not wither despite the advancement of Western medical systems.

## **5.8 Conclusion**

This chapter has examined the impact of the Salvation Army in the provision of healthcare services in Chikankata district. It has demonstrated that the mission contributed to the improvement of the health of Africans through the introduction of maternal and child health services such as antenatal and post-natal care, under-five clinic, nutrition, immunisation, family planning, and general awareness measures. Further, the mission helped in the combating of diseases such as TB, measles, smallpox, leprosy, HIV/AIDS and epilepsy. In an attempt to provide care and prevention for HIV/AIDS patients, the Salvation Army became an agent of change by encouraging traditional leaders to abandon some cultural practices such as sexual cleansing and widow inheritance which were avenues for the transmission of the pandemic. Lastly, the chapter has demonstrated, however, that although the general response of Africans to the healthcare services provided by the Salvation Army was overwhelming, there were pockets of local resistance, absconsions and defaulting of treatment. This was mainly as a result of the disengagement of patients from their families as well as continued dependence on African healing remedies. It can, therefore, be concluded that Western medical influence failed to supplant African traditional therapies.

## **CHAPTER SIX**

### **CONCLUSION**

The advent of the Salvation Army in Chikankata district was motivated by the need to provide spiritual, educational and health services to the local people. This study set out to examine the social impact of the Salvation Army on the local people in the district. Specifically, it sought to identify the strategies used by the mission to win African converts and the challenges faced in the process. It also set out to examine the impact of the Salvation in the provision of educational services and the response of Africans thereto. Finally, the study sought to investigate the impact of the mission in the provision of healthcare services and the response of Africans.

From the study, several conclusions have emerged. One of these is that contrary to the widely-held view, Africans were active agents in the spread of the Salvation Army in Chikankata district. Both trained and lay African evangelists took a leading role in the opening and management of Salvation Army centres. To achieve this, a number of strategies such as open-air revivals, march pasts, uniform wearing, brass bands, timbrel displays, congress meetings, and localisation of the church, were devised. Potential converts were attracted to join Salvation Army ranks because of the exciting atmosphere created by the use of such methods. These strategies were unique to the Salvation Army because of its military-style background and organisation that was influenced by its founders in Victorian England.

By illuminating the mission's unique strategies of conversion, the study has disassociated itself from the popular view that education and medical care were the principle methods of evangelism used by various missionary groups to win African

converts to Christianity in colonial Zambia. It has demonstrated that the Salvation Army belonged to the latter missionary groups whose entry into colonial Zambia, in the late 1920s, coincided with increased control over education by the colonial government. The provision of grants-in-aid to mission schools by the colonial state and its insistence on meeting the requirements of the educational policy weakened the missions' prowess to use education as a means to conversion. With regard to medical evangelism, the study has noted that the Salvation Army lacked explicit programmes that could have been used to win converts in the same way Catholics and Adventists did. The lacklustre attitude towards the use of medical care as a tool of evangelism was notable from the early days of the mission and continued to be so up to 2015.

Further, the study has observed that changes in the socio-political environment in post-colonial Zambia made the Salvation Army to embrace new methods of conversion such as dependence on the family unit and youths as a reservoir for future and loyal soldiers of the mission. To this effect, a number of religious rites such as baby showers, infant dedication, and enrolment of junior soldiers were intensified. In order to capture the youth, various programmes such as music schools, Territorial Youth Congresses, and corps cadet brigades were conducted. In addition, the Salvation Army Officers responsible for youth programmes were appointed in the 1970s so as to enhance the training of young people in the movement.

Another conclusion reached by the study is that the Salvation Army became an agent of social change that laid a foundation for modern education in Chikankata district. By providing educational services to the locals through primary and secondary schooling, teacher training, industrial, as well as the training of health

personnel, the mission contributed to manpower development in Chikankata and the country at large. The study has also observed that the mission contributed to the improvement of the health of the local people by investing in maternal and child health as well as disease control and treatment. In addition, a leprosarium centre was opened in 1953 to provide care and treatment for leprosy patients in the province. As such, Chikankata Hospital had become a referral centre in the entire province by 1956. The study has further noted that the Salvation Army was an agent of cultural change that contributed to the abolition of after-death rituals such as *kusalazya* (sexual cleansing) and widow inheritance which were avenues for the transmission of the HIV/AIDS pandemic. The mission achieved this through community sensitisation programmes that involved traditional leaders as key stakeholders.

Furthermore, the study has demonstrated that the activities of the Salvation Army in Chikankata district were not without challenges as they evoked various responses from the locals. The responses oscillated between cooperation and resistance. In colonial Zambia, the mission faced resistance from *Basimalende* (Guardians of shrines) and beer parties which were unwilling to abandon their traditional beliefs, customs and values in preference to Western ideals brought by missionaries. This resistance delayed the Salvation Army from opening new centres in some areas such as Mabwetuba. Resistance also came from other religious groups such as the Jehovah's Witnesses and the Full-Gospel Mission who either rejected the mission's teachings or jostled for membership with it.

In the late 1970s, the Salvation Army was overwhelmed by the war of liberation in neighbouring Zimbabwe. The war caused a great deal of insecurity among Salvationists across the border in the Gwembe valley leading to the closure of some centres such as Chikanzaya. This led to the slow development of the mission's

evangelical work. Additionally, the mission experienced some challenges that emerged as a result of Zambia's attainment of political liberalism after 1990. Liberal policies adopted by the new Movement for Multiparty Democracy (MMD) government opened up the country to modern technology and global culture which in turn affected the mission's nineteenth-century methods of evangelism such as open-air revivals and march pasts. Insistence on traditional methods such as uniform wearing in the wake of new trends in fashion evoked serious opposition from youth members.

The study has further observed that the response of Africans to the Salvation Army's education enterprise varied. Generally, communities welcomed and supported the mission's schools through participating in repairing mission infrastructure, building of new classroom blocks, and encouraging students to attend classes regularly. However, the mission experienced resistance from some quarters of society such as the Jehovah's Witnesses who opposed its provision of educational services to their children. They believed that one did not require an education to evangelise just like Jesus Christ never received any training to commence his ministry on earth. There were also other local people who simply chose to remain apathetic towards the mission's educational activities.

In addition, some local people in Chikankata viewed the Salvation Army's provision of educational services in political and economic lens. School committees put in place to help in the running of the mission's schools usually turned their meetings into political mobilisation arenas for the African National Congress (ANC). In addition, some local farmers saw the Salvation Army schools as reservoirs for cheap labour in agriculture. Taking advantage of the church's principle of "self-denial" which coerced schools to make annual contributions to the mission, some

local farmers hired children's labour for their fields and gardens. Local entrepreneurs also appropriated various market opportunities provided by the mission's student populous, patients, staff, and surrounding communities to engage in small retail businesses. Thus, Africans in Chikankata commandeered the educational services provided by the Salvation Army in ways that missionaries did not fathom.

Lastly, the study has demonstrated that not all the local people in Chikankata cooperated with the mission with regard to the provision of healthcare services. Some locals showed resistance towards the mission's healthcare provision while others interrupted treatment through absconsion and defaulting. These cases were mainly as a result of the temporal recuperation and home-sicknesses experienced by the patients. It has equally been observed that some Africans in Chikankata did not abandon traditional healing remedies in spite of the advancement in Western medicine. In any case, when Western medicine proved impotent against conditions such as epilepsy and HIV/AIDS, Africans turned to traditional doctors to seek solutions to disease causation and healing. Based on the study's findings, it can be concluded that latter missionary groups which entered colonial Zambia after the Second World War equally made great social contribution to the region and therefore deserve space in the historiography of missionary enterprise in Zambia.

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Mweemba, Mungala L. Tutor, Chikankata School of Biomedical Sciences, Chikankata, 27/03/ 2019.

Mweene, Clever. Salvation Radio Programme Manager, Chikankata Mission, Chikankata, 25/03/2019.

Mweene, John. Mission Director, Chikankata Mission, Chikankata, 30/03/2019.

Mweetwa, Isaac. Salvation Radio Worker, Chikankata Mission, Chikankata, 26/03/2019.

Ngalande, Zondiwe. Principal Tutor, Chikankata School of Nursing, Chikankata, 31/03/2019.

Ntinda, Clara. Health Worker, Chikankata Hospital, Chikankata, 26/03/2019.

## APPENDIX

### Appendix 1: Performance of the Trades School in Standard IV Examination, 1945 – 1954

Year	Number of Students Qualified
1945	1
1946	2
1949	4
1950	1
1951	1
1952	3
1953	5
1954	3

Sources: SP4/12/54, Department of African Education, Annual Inspection Reports, 1952 – 55.