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**The evolution of pastoral care in the Seventh-Day Adventist  
Church of South Africa post COVID-19**

**by**

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**Dissertation presented in fulfilment of the requirements for a Master's Degree in  
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**Supervisor: Dr A Botha**

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## Declaration

I, Moyo Talent, declare that this dissertation, *The evolution of pastoral care in the Seventh-Day Adventist Church of South Africa post COVID-19*, was conducted by me. This is hundred percent my work and my submission towards the Master of Theology in Practical Theology degree at the University of Pretoria.

A handwritten signature in blue ink, consisting of several vertical strokes followed by a horizontal line and a small flourish, positioned above a solid horizontal line.



## Ethics Statement

The author, whose name appears on the title page of this thesis, has obtained the required research ethics approval for the research described in this work. The author declares that he has observed the code of ethics for scholarly activities and has in general observed the principles of honesty and fairness in giving credit and appropriate acknowledgement to the work of others.

Signed

A handwritten signature in black ink, consisting of several vertical strokes followed by a horizontal line and a small flourish.

Talent Moyo

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## Table of Contents

Declaration.....	ii
Ethics Statement.....	iii
Acknowledgements.....	iv
Abstract.....	viii
Chapter one.....	1
1.1 Background of the study.....	1
1.2 Problem statement.....	7
Aim.....	10
Objectives.....	10
1.3 Literature overview.....	10
1.4 Research gap.....	15
1.5 Methodology.....	15
Qualitative phase.....	15
1.6 Chapter outline.....	17
Key words.....	19
Chapter two.....	20
Historical perspective of pastoral care in the seventh day Adventist church.....	20
2.1 Introduction.....	20
2.2 Early foundations (1840s - 1860s).....	20
2.3 Institutional development (1870s - 1910s).....	22
2.4 Expansion and diversification (1920s - 1950s).....	24
2.5 Modernisation and professionalisation (1960s - 1980s).....	26
2.6 Contemporary developments (1990s - present).....	29
2.7 Overview of the early years of the Seventh-day Adventist Church in South Africa.....	31
2.8 Early missionary work and establishment.....	32
2.9 Evolution of pastoral care practices.....	33
2.10 Mid-20th century developments.....	34
2.11 Post-Apartheid era and contemporary practices.....	35
2.12 Summary.....	36
Chapter three.....	37
The impact of covid-19 on pastoral care.....	37
3.1 Introduction.....	37
3.2 Disruption of traditional church services and gatherings due to COVID-19.....	38



3.3 Social disconnection and isolation.....	41
3.4 Disruption of small groups and ministries .....	44
3.5 Emotional and psychological impact .....	48
3.6 Financial and operational challenges .....	52
3.7 Changes in congregation's needs and expectations.....	55
3.8 Challenges pastors faced in providing care during the COVID-19 pandemic.....	58
3.9 Conclusion .....	60
Chapter four .....	62
Innovative approaches to pastoral care in the post-covid-19 era.....	62
4.1 Introduction.....	62
4.2 Hybrid worship models: In-person and Live-Streaming services.....	64
4.3 Social media outreach .....	68
4.4 Mobile applications.....	71
4.5 Multimedia worship formats.....	73
4.6 Online counselling and support group websites .....	76
4.7 The limitations of solely online pastoral care .....	78
4.8 Summary .....	79
Chapter five.....	82
Analysis of interviews.....	82
5.1 Introduction.....	82
5.2 Study design and participant selection.....	82
5.2.1 Sampling method .....	83
5.2.2 Data collection method .....	83
5.2.3 Research instrument and thematic framework.....	84
5.2.4 Deployment and ethics.....	84
5.3 The challenge of social isolation and pastoral responses.....	85
5.3 Digital innovation as a lifeline .....	86
5.4 Limitations of digital solutions .....	87
5.5 The hybrid experiment.....	88
5.6 Grief support in a time of restricted mourning .....	90
5.7 Improvised rituals and tele-counselling .....	91
5.8 The toll of prolonged grief.....	92
5.9 Cultural and theological tensions.....	94
5.10 Mental health: From stigma to systemic integration.....	95
5.11 Digital democratisation of care .....	96
5.12 Gaps in training and resources .....	98



5.13	Theology vs. Clinical Care .....	100
5.14	Digital ministry: Advantages, limitations, and the personal touch .....	101
5.15	Platform preferences and generational divides .....	103
5.16	Community engagement: From food parcels to public health advocacy.....	105
5.17	Local partnerships .....	106
5.18	Resistance to change .....	107
5.19	Four pillars of post-pandemic pastoral care.....	108
	First pillar: Flexibility: agility in methods, not message, became a ministry imperative. .	109
	Second Pillar: Digital equity: Infrastructure investment and literacy training are urgent needs. ....	110
	Third pillar: Holistic health integration .....	110
	Fourth pillar: Hybrid as default.....	111
5.20	Recommendations for the Adventist Church.....	112
5.20.1	Training: Certify pastors in digital literacy and mental health first aid. ....	112
5.20.2	Infrastructure: Subsidise internet access for rural congregations. ....	113
5.20.3	Research: Study the long-term effects of digital ministry on member retention. 114	
5.20.4	Policy: Develop denominational guidelines for hybrid worship and crisis response. 114	
Chapter six	.....	116
Findings.....	.....	116
6.1	Introduction.....	116
6.2	Digital innovation and hybrid ministry.....	116
6.3	Grief support and communal mourning.....	120
6.4	Mental health and holistic care integration.....	123
6.5	Inequalities: Urban–rural and generational divides .....	125
6.6	Theological and cultural tensions .....	128
6.7	Conclusion .....	132
	Bibliography .....	136
	Appendices.....	152

## Abstract

This study investigates how South Africa's Seventh-day Adventist pastoral ministry responded to the COVID-19 pandemic's unprecedented challenges. The study focused on the Southern Africa Union Conference of Seventh-day Adventists (SAU), and traced the evolution of pastoral care over time, analysed the pandemic's disruptions and challenges, and highlighted the creative ways pastors responded, especially through the use of digital platforms and heightened awareness of mental health. The study investigates the swift transition from conventional, face-to-face ministry to digital and hybrid models of worship, care, and community involvement through qualitative interviews with pastors in both rural and urban settings. Study findings revealed that technology has made it possible for people to connect spiritually through new channels like WhatsApp devotionals, live-streamed sermons, and virtual small groups, but it has also revealed significant disparities in access to digital infrastructure. Low-tech alternatives were frequently used by pastors in under-resourced areas, illustrating the growing digital divide in ministry experiences. In addition to technological adaptation, the study found that pastors are becoming more willing to incorporate emotional support and mental health awareness into their theological framework. This change reflects a trend towards more psychospiritual, holistic care models that address the intricate realities of trauma, grief, and loneliness. According to the study, one characteristic of effective ministry during the crisis was the ability to be flexible while remaining faithful. In the end, the results add to more general discussions about how religious communities can adapt to the spiritual and emotional demands of a changing world while maintaining their theological foundation.

**Key words:** Coronavirus Disease of 2019 (COVID-19), Seventh-Day Adventist Church (SDA), Southern Africa Union Conference of Seventh-day Adventists (SAU), Non-communicable diseases, Gender-based violence, World Health Organisation, South Africa.



## Chapter one

### 1.1 Background of the study

The research aims to investigate the transformational changes in pastoral care within the South African Seventh-day Adventist Church because of the lessons learned from the problems presented by the COVID-19 pandemic and subsequent lockdowns. It will investigate the adaptive strategies employed by church leaders and pastors to provide spiritual support, guidance, and counselling to congregants amidst the constraints of social distancing and remote communication. This study aims to offer insight into the developing character of pastoral care in the context of global crises by investigating the innovative use of technology, virtual platforms, and new modes of pastoral outreach.

COVID-19 has been deemed disruptive to everyday life, restricting human-social relations and causing setbacks in the development of tradition, spirituality and intellectuality in many countries (Chirisa et al. 2021: 1). The impact of COVID-19 has been devastating, leading to millions of deaths worldwide and a significant increase in disease burden. People with specific comorbidities were at a high risk of facing life-threatening risks (morbidity and mortality) due to COVID-19 (Ejaz et al. 2020: 1833). During peak COVID-19 period, South Africa presented a significant concern as it constituted 42% of all COVID-19 cases and fatalities in Africa, posing a potential hazard (Wamai et al. 2021: 2). Hofman and Madhi (2020: 698-699) highlighted the unanticipated costs of COVID-19 to South Africa's disease burden, which is already affected by HIV/AIDS, maternal and child health, non-communicable diseases (NCDs), and violence and injury. Putting this in perspective, South Africa accounts for almost a fifth of people living with HIV globally, and a more significant percentage of these people are at an advanced stage of HIV infection (Freer & Mudaly 2022: 1).

The COVID-19-induced countrywide lockdown protocols resulted in reduced access to routine care and worrying falls in HIV testing, treatment, and prevention, which has further exacerbated the already prevalent problems of unaffordable costs associated with treatment and poor access to mental health services in developing countries (Freer & Mudaly 2022: 1). The COVID-19 pandemic has had significant social and economic implications, including the loss of income and employment opportunities for many individuals. As a result, this has led to increased levels of food insecurity and poverty within affected populations (Waterfield, Shah, Etheredge & Ikhile 2021: 1).

Many governments implemented strict lockdown protocols to try and curb the spread of the disease and these protocols prohibited the movement of people including closing down international borders to restrict migration (Chirisa et al. 2021:2), closing down all business and social activities except for those that were deemed as essential services. In South Africa, this day came on the 15<sup>th</sup> of March 2020, when the National Disaster Management Centre classified COVID-19 as a national disaster. Accordingly, the Minister of Cooperative Governance and Traditional Affairs declared a national state of disaster in South Africa. Subsequently, strict lockdown protocols were implemented in public places, including the shutdown of schools, businesses, and churches accordingly (Kunguma, Mokhele & Coetzee 2021: 1).

The effects of the COVID-19 pandemic and its subsequent lockdowns have affected many societies, revealing the brokenness in our society and the violence against vulnerable groups including the poor, women and children (Aziz 2021:1). Furthermore, it has highlighted the economic inequality present in South Africa, emphasizing the necessity to tackle this issue and prevent extreme poverty in vulnerable communities. COVID-19 resulted in an economic decline in South Africa and subsequent effects, for example, increased unemployment, a surge in GBV and violence against children, as well as poverty caused by deprivation of opportunities

to earn a living and restrictions in travelling and accessing certain economic zones (Mahlangu et al. 2022: 1; Aziz 2021: 1). The substantial losses in livelihoods in terms of employment, working hours, and earnings meant that 3 in every 5 workers in South Africa were unemployed and at risk of extreme poverty (Köhler & Bhorat 2020: 13).

In dealing with the challenges resulting from the pandemic and subsequent lockdown protocols, the South African government disbursed an economic and social relief package amounting to 500 billion Rands to help reduce the negative effects of the pandemic on the economy and cushion vulnerable societies from being driven to extreme poverty (Mazenda, Masiya & Mandiyanike 2022: 215). Some of the funds were used as social grants for citizens affected by the pandemic. Though the funds were a welcome relief for the poor communities, the initial R270 per month made available to the economically-challenged individual was not enough to cater for their family needs (Mazenda et al. 2022: 216, 222; Köhler & Bhorat 2020: 1, 11). These funds were only availed to South African citizens while asylum seekers, refugees, and undocumented migrants disproportionately experienced the negative impacts of the pandemic without getting any help from the government (Mukumbang, Ambe & Adebisi 2020: 4). The government relief package scheme was also affected by numerous issues including administrative bottlenecks and corruption meaning that most of the funds allocated never benefitted the intended suffering people groups (Khowa, Cimi & Mukasi 2022: 6).

According to a study conducted by Bentzen (2021) entitled "In crisis, we pray: Religiosity and the COVID-19 pandemic," religion plays a crucial role in helping individuals understand and cope with the challenges brought about by the COVID-19 pandemic. The study emphasizes that in times of crisis, like COVID-19 pandemic, religion can serve as a source of comfort and relief from stress (Bentzen 2021: 541). Hence the need for religion and its influences has escalated since the beginning of the pandemic and the subsequent lockdown protocols. During

the early days of the pandemic, many governments relied on churches and pastors to enforce early-phase responses to the pandemic. This led the World Health Organisation (WHO) to issue interim guidance to religious leaders on how to handle faith communities and political leaders and Non-Governmental Organisations were urging fellow citizens to fast and pray (WHO 2020). This shows that humanity uses religious coping to deal with adversity and uncertainty as in the case of the COVID-19 pandemic. Therefore, it is imperative for the church to take on a central position in times of calamities like armed conflicts and pandemics. The clergy should act as influential catalysts of transformation, disseminating optimism to individuals, households, and neighbourhoods.

Pastoral care and counselling follow Jesus' example as the greatest pastor who healed, strengthened, taught, and consoled His followers. Jesus showed empathy and thus suffered together and experienced the feelings of suffering humanity (Agilkaya-Sahin 2016: 74). In times of crisis, such as was during the COVID-19 pandemic, the importance of pastoral care could not be overstated. Congregants experiencing emotional, spiritual, and physical difficulties required guidance to navigate life's various seasons. The role of pastoral care as a cornerstone of mental well-being became even more apparent as many individuals were isolated and cut off from society due to the pandemic. Support and care were necessary for those who were dying, grieving, experiencing physical or mental illness, abuse, hunger, poverty, or vulnerability (Moodley & Hove 2023: 477).

The COVID-19 pandemic brought about significant challenges to traditional worship practices in churches, with many congregants accustomed to gathering in person for public worship (Pillay 2020: 266). As a result of the closure of church doors for an extended period of time, many resorted to small group worship and tele-evangelism/streaming as their only options for worship, creating a physical divide between clergy and congregation as well as among

members. During the pandemic, there was a noticeable increase in domestic gender-based violence due to the implementation of work-from-home policies. As families spent more time together, conflicts surfaced due to closer observation of each other's actions. According to South African government statistics, the GBV Command Centre reported over 120,000 cases of gender-based violence in the first three weeks of the national lockdown (SA News 2021; Mittal & Singh 2020). For example, during the pandemic, there were approximately 21 GBV-related murders of women and children reported by SA within a two-week period (Mofokeng 2022: 5). In Limpopo, the perpetrators of gender-based violence (all of whom were men) in the Mahwelereng township were discovered to have turned to violence against their partners due to alterations in their family's financial situation and the restrictions they faced within their household during this time (Amaechi, Thobejane and Rasalokwane 2021: 1).

The Seventh-day Adventist Church is a global family of Christians who accept the Bible as the ultimate authority, and seek to understand it to discover freedom, healing and hope in Jesus. Over the course of its history, the Seventh-day Adventist Church has officially acknowledged Ellen G. White as an authentic non-canonical prophet who was called by God (General Conference of Seventh-day Adventists n.d.). The prophetic ministry of Ellen White remains integral to the contemporary identity of the Seventh Day Adventist church, as it was in the formative period of the denomination. Ellen White played a crucial role in establishing doctrinal coherence, facilitating effective administrative practices, and fostering a stable lifestyle framework within the Seventh-day Adventist Church. Despite her death in 1915, the literary legacy she left behind continues to impart the same stability to the denomination.

Considering the role of a pastor and/or church is to facilitate a safe environment for all in all homes. According to Ellen White (1892: 76), a pastor must conduct house-to-house visits among their flock, teaching, conversing, and praying with each family while looking out for

the welfare of their souls. Families have evolved from extended families to nuclear families which has resulted in social problems among family members such as isolation and the lack of an extended support system. These social problems manifest in behavioural problems of family members and addiction problems which result in gender-based violence against women and children. Consequently, it is imperative for pastors to actively engage in counselling individuals impacted by such situations, serving as mediators within families to foster harmonious and peaceful living (Wilkins 2021: 33).

Before the pandemic, South Africa was already struggling with high unemployment, inadequate healthcare, cyclical poverty, and violence. However, the COVID-19 pandemic has disproportionately affected families, especially women (Clark 2020: 6). As the country was seeking to mitigate the aforementioned challenges, it was noted that the incidence of Gender-Based Violence was increasing at alarming rates (Clark 2020: 6; Mittal & Singh 2020: 3). The risk of severe psychological problems increased as the duration of the quarantine increased (Brooks et al. 2020: 916). Increased symptoms of PTSD are associated with spending a long time in quarantine (Reynolds et al. 2008; Hawryluck, Gold & Robinson 2004).

The COVID-19 pandemic disrupted many systems including worship and as such, there was a need for pastors to be effective in serving the church. There is also a need for pastors and churches to continuously adapt to changing environments so that they are able to meet the needs of congregants in any situation. Founded in 1984, the Barna Group is an evangelical Christian organization that provides research and marketing know-how to Christian ministries. The organization aims to assist Christian leaders in understanding the times and knowing what steps to take. They work to educate churches so they can navigate a changing world, and they also provide helpful guidance so pastors and churches can adjust to changing surroundings (<https://www.barna.com/about/>). The organisation offers insights into beliefs, attitudes, and

behaviours related to faith. Despite potential differences in cultural and social dynamics between South Africa and the United States, their findings provide comparative value in understanding challenges faced by pastors, factors influencing pastoral ministry, and trends within the religious leadership landscape. In a 2021 survey by the Barna Group in the United States, results revealed that 38% of pastors had considered leaving their pastoral role in October 2021, up from 29% in January 2021.

In an online survey of 507 Protestant Senior Pastors conducted from October 12 to 28, 2021 where all the participants were members of Barna Group's Church Panel, the pastors stated that they were in crisis and at risk of burnout. According to the Barna Group, an alarming number of pastors were experiencing substantial burnout because of the pandemic, as well as deep congregational divides and financial distress, prompting some to seriously contemplate abandoning ministry. In 2022, the Barna Group conducted a similar poll, and the findings revealed that 42% of pastors pondered leaving the ministry, citing factors such as job stress, loneliness and isolation, and political division. The Barna Group conducted an online poll from March 10 to 16, 2022, among 510 Protestant Senior Pastors for the March 2022 study. All the participants were also members of Barna Group's Church Panel. The findings revealed that COVID-19 and its associated challenges severely deflated the confidence of pastors. As such many pastors were searching for effective ways to adapt to be able to meet any future existential risks that threaten humanity.

## **1.2 Problem statement**

A Seventh-day Adventist pastor's traditional job includes a variety of obligations and duties within the context of the Seventh-day Adventist Church. According to Seventh-day Adventist's church manual, the pastor is responsible for giving sermons and teaching biblical ideas during worship services, Bible studies, and other religious activities. Specific tasks and expectations

may vary based on the particular church and location. They are meant to offer spiritual counsel, interpret scripture, and assist members in better understanding Adventist beliefs and practices (The Secretariat General Conference of Seventh-day Adventists 2016; Dederen & Review and Herald Publishing Association 2000). Pastors are tasked with their congregation's spiritual care and assistance. This involves providing counselling, prayer, and direction to people and families in times of crisis, such as personal difficulties, sickness, or loss. Pastors frequently make pastoral visits to members of the church community, bringing comfort and support. Pastors are congregational leaders who supervise various administrative issues. They work with church boards, committees, and lay leaders to arrange events, coordinate church activities, and manage church resources. Pastors may also be active in the development and implementation of outreach programs, community service projects, and evangelistic activities (The Secretariat General Conference of Seventh-day Adventists 2016: 32; Kidder 2009).

According to the church's fundamental beliefs and practices, Seventh-day Adventist pastors also offer sacraments such as baptism and communion (Orwenyo 2014: 66). They lead people through the baptism process, prepare them for communion, and officiate at weddings and funerals. Pastors have an important role in developing church members' spiritual growth and encouraging them to act out their religion (Huapaya 2021: 42). They provide chances for spiritual growth and instruction, as well as empower members to communicate their religion with others. Pastors oversee evangelistic campaigns, community outreach programs, and other activities intended at spreading the Adventist message to a wider audience. Furthermore, pastors collaborate closely with other church leaders, such as elders, deacons, and volunteers, to promote unity and collaboration within the church (Fortin 2001, 629). They work with church committees, ministry leaders, and Sabbath School instructors to ensure that diverse church events and programs are coordinated effectively (Muzira 2010: 67).

Though the traditional role of pastors visiting their flocks was disrupted during the lockdown, the pastors still needed to attend to the needs of their flock, whether physically or remotely. Like the Apostles in the New Testament church, they had to inspire benevolence from believers and that the gifts and offerings offered were carefully distributed to those in dire need so that their physical needs are met. Post-COVID-19 and the subsequent lockdowns, the roles of pastors have had to undergo significant changes and adaptations to address the new challenges and circumstances. With restrictions on physical gatherings, pastors had to embrace digital platforms and technologies to deliver worship services and teachings virtually. They had to learn new skills related to video production, online streaming, and creating engaging content for virtual platforms. On top of their traditional roles, pastors had to navigate the technical aspects of online worship, ensuring the quality of audio-visual elements, and facilitating interactive experiences to maintain congregational engagement. Though lockdowns have been lifted, not all church members have returned to normalcy in terms of worship, with many people opting to conduct worship services at their homes. This means that pastors, for example, still had and have to adapt to a hybrid type of worship system to cater for worshippers at home and those who attend normal church services.

The COVID-19 and subsequent lockdowns highlighted the need for the evolution of pastoral work in the Seventh-Day Adventist church. To stay relevant and maintain their reach with congregants, pastors must adapt, recognise, and utilise the power and reach of digital platforms for discipleship and evangelism. They must leverage improvements in computers and technology and thus harness the power of social media, online Bible studies, and virtual small groups to facilitate connection, growth, and outreach. Pastors must become more intentional in leveraging technology to extend the church's impact beyond physical walls and engage with a

broader audience. The study seeks to investigate the adaptation of the roles of the pastor to meet the needs of believers in the post-COVID-19 era.

### **Aim**

To assess the need for changing the traditional pastoral roles post-COVID-19 pandemic.

### **Objectives**

- To investigate how pastors in the Adventist Church responded to the unique challenges posed by the pandemic, such as social isolation, grief, and health-related concerns.
- To examine the development of new pastoral care strategies to address emerging needs, including those related to mental health and community support.
- To evaluate how adaptable and flexible pastors within the Adventist Church have been in responding to the changing dynamics of pastoral care post COVID-19.
- To assess the advantages and challenges associated with the use of digital platforms in providing pastoral support and identify any preferences among church members.

This study seeks to investigate how Adventist Church pastors responded to pandemic challenges, examining strategies for addressing social isolation, grief, and health concerns. It will explore the development of new pastoral care approaches, particularly in mental health and community support post-COVID-19. The research will evaluate pastors' adaptability to changing dynamics and assesses the advantages and challenges of using digital platforms for pastoral support, aiming to identify member preferences within the Adventist Church.

### **1.3 Literature overview**

During the COVID-19 pandemic, most countries including South Africa used different lockdown measures, temporarily prohibiting businesses and public gatherings. This means restricting the number of attendances at religious services, cancelling events, and cancelling

offline meetings of committees, councils, and informal organizations for churches and religious communities (Kołodziejska 2022: 28). With hundreds of people suffering physically and mentally from illness, isolation, and other COVID-related issues, facing unemployment or the death of loved ones, the Churches frequently had to intensify their support-oriented activities. In Poland, all religious institutions were confronted with the new reality and the uncertainty surrounding the pandemic's progression. Small minority churches, such as the Seventh-Day Adventist Church, which has roughly 6,000 members in Poland, could not rely on governmental funds for financial assistance and had to rely on available resources to continue to help the people in need (Kołodziejska 2022: 28).

In response to the COVID-19 pandemic, South African President Cyril Ramaphosa declared on March 23, 2020, that the country will go into a national lockdown beginning March 27, 2020. Aside from the economic and psychological effects of the pandemic on the worldwide population, religious institutions were also forced to adjust to a new normal. The impact of COVID-19 on church functions and operations has been greater than anticipated. Almost suddenly, churches and other houses of worship were forced to adopt new ministry practices to preserve a feeling of community while following state-mandated health procedures (Bentley 2021:1). Thus, the COVID-19 pandemic has profoundly influenced several sectors of society, including how pastoral work is conducted in the Southern Africa Union Conference of Seventh-day Adventists Church (SAU). The necessity to adapt to the shifting circumstances brought about by the pandemic has prompted the evolution of pastoral activity in South Africa (Moodley & Hove 2023: 4).

According to Güner, Hasanoğlu and Aktaş (2020: 571), in January 2020, the WHO declared the COVID-19 outbreak a public health emergency of international concern and to prevent the spread of COVID, several governments prohibited or restricted public meetings. Authorities

utilised violent tactics, such as arrests and prison terms, to impose coronavirus-related restrictions on worship services and other religious gatherings in many countries. As a result, churches had to adjust to this restriction while maintaining their viability and pragmatism in society (Majumdar 2022: 7). Many churches in South Africa had to move to virtual worship sessions because of prohibitions on in-person meetings and social distancing tactics. Pastors have had to learn and adapt to the practice of leading online worship services using platforms such as Zoom, YouTube, and social media. This has necessitated the development of new abilities in pastors for generating and distributing online content, managing virtual relationships, and successfully employing technology for worship and ministry (Aziz 2021: 3; Tettey & Nel 2021: 9). Even the World Health Organisation published a document and risk assessment tool to give practical information and suggestions to enable religious leaders, religion-based organizations, and faith communities in their specific role in COVID-19 education, readiness, and response (WHO 2020: *Practical considerations and recommendations for religious leaders and faith-based communities in the context of COVID-19 Interim guidance*).

Due to limited or restricted physical encounters, many pastors have had to discover new means to deliver pastoral care to their parishioners for religious entities to remain relevant during the COVID lockdowns. This has included increasing the use of phone conversations, emails, video chats, and social media to remain in touch with members and give emotional and spiritual support during difficult times. Pastors have consequently had to think of new methods to reach out to vulnerable and lonely people who may be suffering from the pandemic's consequences. The pandemic had far-reaching effects on congregant mental health, particularly in South Africa, where psychological services cannot cope with needs (Moodley & Hove 2023: 1). Therefore, the need for pastors to adopt new methods to reach out to the community is evident.

The COVID-19 showed that pastors need to take a leading role in organizing and participating in food drives, offering counselling and mental health support, cooperating with local groups to satisfy community needs, and to utilise social media platforms to promote mental health awareness and help-seeking behaviour in communities (Goodwin & Kraft 2022: 22).

Because of the limits of in-person evangelistic campaigns and outreach activities during COVID-19, the Adventists churches through church-affiliated websites emphasised digital discipleship and evangelism (Domm 2020: 1). Some innovative pastors have had to create and implement online outreach tactics, such as using social media, digital Bible studies, and online evangelistic campaigns. This has necessitated the development of new abilities in digital communication, content production, and online discipleship by pastors. Since the COVID-19 lockdown, one Adventist church has expanded its digital communication to expand its reach. This has enabled the church to be more attentive to the needs of their community, ensuring that the proper message is given in response to a perceived need. Furthermore, it has assisted the church in better understanding the community and adjusting its outreach activities and messaging appropriately, demonstrating empathy first, confirming their experiences, and providing practical guidance, answers, and resources (Domm 2020: 1).

The pandemic has underlined the importance of pastors learning new skills and knowledge to adapt to a changing ministry setting. The changing terrain necessitates both resilience and adaptability, as well as the acceptance of new ways of doing things and being church (Johnston, Eagle, Headley & Holleman 2022: 395). All churches should adapt and ask themselves questions about what it means to be a church in the ‘new normal’ situation. COVID-19 has emphasised that the church does not exist behind walls; rather, it is the people of God who live and hunger for God's dominion in the world through the power of the Holy Spirit. The church's

basic missional viewpoint is God's kingdom or dominion, as we continue to pray for and strive toward God's justice, peace, righteousness, and love on earth (Pillay 2020: 274).

Pastors have adapted to changes which came about as a result of the COVID-19, and while some have maintained some traditions, some have elected to accept those new techniques and strategies for conducting worship. For example pastors studied more after transitioning from face-to-face worship to online worship so as to meet congregants needs (Funchess, Hayes, Lowe, Mayfield-Johnson & Baskin 2022: p. 94). Innovative pastors in the study titled "*The Perceptions and Lived Experiences of African-American Pastors at the Onslaught of the COVID-19 Pandemic in Mississippi*" conducted by Funchess, Hayes, Lowe, Mayfield-Johnson and Baskin (2022) highlighted that they took part in training programs and professional development opportunities to improve their skills in areas like online ministry, digital communication, and mental health assistance. This has been critical in providing pastors with the tools they need to carry out their pastoral obligations successfully during and after the COVID pandemic.

Finally, the COVID-19 pandemic has prompted considerable modifications and adaptations in pastoral ministry in the Southern Africa Union Conference of the Seventh-Day Adventist Church. To effectively minister to their congregations during these difficult times, pastors have had to embrace virtual worship services, provide pastoral care via remote means, engage in community outreach and social services, focus on digital discipleship and evangelism, and engage in training and development opportunities. These adjustments have emphasized the SAU's pastoral work's tenacity and flexibility, as pastors continue to discover unique methods to assist their communities and carry out their ministry within the ongoing pandemic.

#### **1.4 Research gap**

There are limited studies that have been conducted by the Southern Africa Union Conference of the Seventh-Day Adventist Church which explore the changes in the roles of a Pastor necessitated by the global pandemics like COVID-19 and how these affect the viability of the church as an organisation mandated to assist and help communities in distress.

When SDA pastors go to theological seminaries, they are trained in skills essential to support their ministry. Pre-COVID, before the church doors were closed, churches were mainly used for religious services, and the church leadership roles were limited to providing Christian education, pastoral care aimed at offering counsel and support and liturgics designed for conducting religious services. Hence, it is important in this changing world to assess the effectiveness of pastoral training in equipping pastors for effective and sustained ministry for all situations. The study of the evolution of pastoral work necessitated by the COVID-19 pandemic will add knowledge to the field and enable the Adventist seminaries to add a new set of leadership tools, change of curriculum need be, so that student pastors may be better equipped to handle crises that may occur.

#### **1.5 Methodology**

To give a full picture of the evolution of pastoral activity in the Southern Africa Union Conference of the Seventh Day Adventist Church throughout the COVID-19 pandemic, this study will employ a mixed-methodologies approach, integrating quantitative and qualitative data collecting and analytic methods.

#### **Qualitative phase**

Purposive sampling will be utilised to collect a sample of pastors from the Southern Africa Union Conference of the Seventh-Day Adventist Church. Purposive sampling, also known as judgmental or selective sampling, is a research technique that falls under non-probability

sampling. In this technique, researchers intentionally select participants based on specific characteristics or criteria that are relevant to the study's purpose. Unlike random sampling, where every member of the population has an equal chance of being included, purposive sampling involves selecting individuals who meet certain criteria or possess particular qualities that are important for the study (Mujere 2016: 110). Being a multi-cultural Conference, the pastors selected would be from various denominations, regions, and socio-cultural contexts (e.g., blacks, whites, Indian and mixed race/coloureds) who were active in pastoral care during the COVID-19 pandemic.

Semi-structured interviews with chosen participants will be done to obtain qualitative data on the obstacles experienced by pastors and religious leaders during the pandemic, the perceived results of changes in pastoral practice, and any other relevant experiences or insights. A semi-structured interview is a data collection method that involves asking participants a set of open-ended questions and following them up with probe questions to explore further their response and the topic of interest. They allow researchers to acquire in-depth information and evidence from interviewees while seriously considering the focus of the study and are flexible and adaptable (Ruslin, Mashuri, Rasak, Alhabsyi & Syam 2022: 22). The semi-structured interviews will be performed either online or in person, taped, and verbatim transcribed for analysis.

To collect quantitative data on the techniques used by pastors and religious leaders to adjust their pastoral work during the pandemic, a structured online survey will be designed. Close-ended questions about changes in worship services, counselling methods, community outreach, use of technology, and perceived efficacy of these initiatives will be included in the survey. Participants' demographic information will also be gathered.

The quantitative data will be analysed using descriptive statistics such as frequencies, means, and percentages. To investigate links or differences between variables, inferential statistics such as chi-square tests or t-tests may be used (Sullivan-Bolyai & Bova 2014: 311). Chi-square tests and t-tests are statistical tests used to examine null hypotheses in quantitative studies. Both tests can test for differences between two groups. A t-test is a parametric test that compares the means of two groups. It is suitable for continuous numerical data (Mishra, Singh, Pandey, Mishra & Pandey 2019: 407). A chi-square test is a nonparametric test that examines the association between two categorical variables. It compares observed frequencies with expected frequencies (McHugh 2013: 143).

## **1.6 Chapter outline**

Chapter 2 will focus on the historical perspective of Pastoral Care in the Seventh Day Adventist Church. The research will provide an overview of the early years of the church in South Africa, the evolution of pastoral care practices within the church, as well as key milestones and influential figures that have contributed to the development of pastoral care.

Chapter 3 of the study will examine the impact of COVID-19 on pastoral care. It will highlight how traditional church services and gatherings have been disrupted, the challenges pastors faced in providing care during the pandemic, and the changes in the congregation's needs and expectations regarding pastoral care.

Chapter 4 will discuss the innovative approaches to pastoral care in the post-COVID-19 era. The focus will be on the utilization of technology, such as virtual services, online counselling, and support groups, and the role of social media in maintaining community connections. The study will also redefine the role of the pastor in a post-pandemic context, highlighting the importance of balancing physical and virtual interactions and addressing mental health concerns within the congregation.

Chapter 5 will discuss the empirical data gathered from the interviews with the pastors in the SAU Conference. This will entail the overview of interview process, selection of participants, ethical considerations, interpretation of findings as well as insights into the evolution of pastoral care.

In chapter 5, the research will focus on the opportunities for growth and improvement in the post-COVID-19 era. It will highlight the lessons learned from the pandemic and their implications for future pastoral care strategies. The investigation will also explore future directions and recommendations, with a particular focus on envisioning the role of pastoral care in the Seventh Day Adventist Church of South Africa. The recommendations will include adapting to future challenges and promoting resilience and spiritual well-being within the congregation.

Chapter 6, will discuss the study's findings and analyse the empirical data collected from interviews with SAU Conference pastors, providing meaningful interpretation of these findings in the context of relevant published literature.



**Key words**

*COVID-19* Corona Virus Disease of 2019

<i>SDA</i>	Seventh-Day Adventist Church
<i>SAU</i>	Southern Africa Union Conference of the SDA Church
<i>NCSA</i>	Northern Conference of Seventh-day Adventists
<i>NCDs</i>	Non-communicable diseases
<i>GBV</i>	Gender-based violence
<i>WHO</i>	World Health Organization
<i>HIV</i>	Human Immunodeficiency Syndrome
<i>AIDS</i>	Acquired immunodeficiency syndrome
<i>SA</i>	South Africa
<i>Morbidity</i>	The condition of suffering from a disease or medical condition
<i>Mortality</i>	The state of being subject to death
<i>Pastoral Care</i>	An ancient model of emotional, social, and spiritual support can be found in ministers and pastors.



## Chapter two

### **Historical perspective of pastoral care in the seventh day Adventist church**

#### **2.1 Introduction**

The Seventh-Day Adventist (SDA) Church, established in the mid-19th century, is renowned for its emphasis on the imminent Second Coming of Christ, observance of the Sabbath on the seventh day of the week, and its holistic approach to health and well-being (Beckett 2013: 1). Central to the church's mission has been pastoral care, which addresses the spiritual, emotional, and physical needs of its members. Pastoral care within the Seventh-day Adventist (SDA) Church has a unique and evolving history, deeply intertwined with the denomination's theological beliefs and mission (General Conference of Seventh-day Adventists n.d.). This chapter explores the historical development of pastoral care within the SDA Church, tracing its roots, key figures, evolving practices, and the impact on the broader Adventist community. The chapter will explore the general historical development of pastoral care in the broader Adventist movement, then zero in on the historical development of pastoral care in the Adventist church in South Africa.

#### **2.2 Early foundations (1840s - 1860s)**

The origins of the SDA Church are rooted in the Millerite movement of the early 1840s, led by William Miller, which anticipated the Second Coming of Christ. In the early days of Adventism, pastoral concerns centred around uniting God's remnant people and preparing for Christ's imminent return. After the Great Disappointment of 1844, when Christ did not return as Miller had predicted, a small group of believers continued to study the Bible and eventually formed the SDA Church in 1863 (General Conference of the SDA Church n.d.; Knight 1993; Spalding 1961). Pastoral care during this period was informal and largely communal, with

leaders such as Ellen G. White, James White, and Joseph Bates providing spiritual guidance, encouragement, and biblical teaching. During the first two decades after the great disappointment, Adventists purposely resisted organising the church until around the 1860s, when the movement had to address organisational questions such as the ordination of pastors, church nurture, evangelism on a national scale, and remuneration of workers (Hudson 1997: 10).

In the early days, the Adventist movement resisted formal organisation, avoiding practices associated with other churches. The term Sabbatarian Adventist was then used to refer to the ministry before it was formally organised as the Seventh-Day Adventist church (Kaiser 2013: 1). The use of the title “Reverend” was abandoned for the humbler “Brother,” later “Elder,” and then “Pastor” (Hudson 1997: 10). Pastors were encouraged to focus on evangelism, church planting, and nurturing young Christians. The early SDA pastor’s role involved visiting homes and conducting Bible studies to foster spiritual growth and community cohesion. However, visitation meant evangelistic visits of non-members and members were visited only when ill or in some crisis. Most ministerial efforts involved evangelism, and in particular, church planting in unentered counties which had no Adventist churches (Hudson 1997: 10). Ellen G. White’s (1995: 205 - 234) prophetic ministry and counsel to pastors and church leaders played a pivotal role in shaping the church’s approach to pastoral care . The section on pastoral care in the book *Pastoral Ministry* by Ellen White (1995: 205 - 234) highlights the duties of pastors with regards to pastoral care and these are to assimilate new members into the church, church discipline, counselling, personal ministry to former members and inactive members, personal ministry to active members, and visitation of special member groups . White’s (1905: 139, 1995: 205 - 234) visions and writings emphasised the importance of health, education, and the

compassionate care of members . Thus, the church's growth and changing ministerial roles gradually shaped pastoral care in the Adventist church (Hudson 1997: 10).

### **2.3 Institutional development (1870s - 1910s)**

By the late 19th century, Adventism was growing significantly, and as such, ministerial responsibilities expanded beyond evangelism. Pastors nurtured young Christians, trained missionaries, and cared for the flock and this period saw the expansion of the advent movement to Black Americans (Knight 1993: 83). The concept of a localised pastorate developed further during this period (Oliver 2020: 1). As the SDA Church grew, there was a need to formalise pastoral care practices and establish institutions to support its mission. This period saw the establishment of various institutions, such as the General Conference on the 21<sup>st</sup> of May 1863, educational facilities like Battle Creek College (later Andrews University), and medical institutions such as the Battle Creek Sanitarium (Oliver 2020b: 1; Hudson 1997: 10). These institutions played crucial roles in shaping the pastoral care provided by the church. The establishment of the Battle Creek Sanitarium in 1866 by Dr. John Harvey Kellogg further integrated health and pastoral care, promoting the Adventist health message and providing medical and spiritual care to patients (Hudson 1997: 11).

The Battle Creek College not only trained ministers but also emphasised holistic education, combining spiritual, mental, and physical development (Marroquin 2001: 48). Pastors during this time were increasingly seen as the primary spiritual leaders of their congregations (Trim 2024: 8). They were responsible for preaching, teaching, and administering sacraments, as well as offering spiritual guidance and emotional support to members. The role of the pastor expanded beyond just evangelism to include nurturing the spiritual well-being of the congregation, which was a shift from the earlier focus on solely preparing for the Second Coming of Christ. The theological emphasis during this period also significantly influenced

pastoral care. White (1892: 10) urged pastors to focus on personal ministry, including visiting and praying with individuals, which marked a departure from the earlier emphasis on public preaching alone. The period also saw the introduction of the concept of the pastor as a shepherd, following the example of Christ as the “Great Shepherd”. This concept was first introduced by Seward Hiltner who highlighted that a shepherd “refers to the solicitous and tender and individualized care by the shepherd for the sheep” (Hiltner 1959: 20). White (1892: 10) counselled ministers to act as shepherds in the SDA church so as to “salvation of souls and the health of the church” . Florea (1967: 25), also wrote about this concept highlighting the need for pastors to visit the sheep (congregants) regularly and to make these visits seasons of spiritual refreshment. This meant that pastors were encouraged to take a more active role in caring for the sheep already in the fold, not just in bringing new converts into the church (Trim 2024: 8; Hudson 1997: 10).

Despite these developments, there was some resistance within the church to the idea of having localised pastors (Knight 1993: 89). Early Adventist leaders were hesitant to establish a system of permanent, settled pastors, fearing it might detract from the church's evangelistic mission. However, as the church continued to grow, the need for pastors who could provide consistent spiritual care and guidance to established congregations became increasingly apparent (WagenerSmith 2021: 24). By the late 19th and early 20th centuries, many SDA churches, especially in larger urban areas, began to have local pastors, despite some denominational leaders’ reluctance. This shift was driven by the growing needs of congregations for pastoral care and the recognition that nurturing existing members was as important as evangelising new ones (Trim 2024: 9).

One impact of the institutionalisation of the SDA Church was that it provided a framework within which pastoral care could be more systematically delivered (Oliver 1989: 219). With

the establishment of seminaries and training programs, pastors were better equipped with the theological education and practical skills needed to fulfil their roles effectively. This period laid the foundation for the more professionalised and structured pastoral care that would develop in later decades (Hudson 1997: 11).

#### **2.4 Expansion and diversification (1920s - 1950s)**

The early 20th century saw a significant expansion of the SDA Church, both in the United States and globally. The period between the 1920s and 1950s was a time of significant expansion and diversification within the Seventh-day Adventist (SDA) Church, both in terms of its global reach and the scope of its pastoral care (Beckett 2013: 1). This era saw the church adapting its pastoral strategies to meet the needs of an increasingly diverse and global membership. Although White passed away in 1915, her writings and vision continued to guide the church's mission and strategies during this period. White played an integral role in keeping things focused on the Bible, always bringing up new ways to apply these new concepts to daily life (Beckett 2013: 3). Also, as the first official missionary of the SDA Church, J.N. Andrews earlier work laid the foundation for global outreach efforts that expanded significantly during this era (Valentine 2020: 1). During the early 20th century, particularly after World War I, the SDA Church experienced rapid growth in its missionary activities. The number of missionaries increased dramatically, with significant efforts to establish the church in new territories across Africa, Asia, and Latin America. This expansion required the development of new strategies for pastoral care that could be adapted to different cultural contexts (Trim 2012: 71).

Missionary pastors were expected to not only evangelise but also to nurture new converts, helping them to integrate into the church while respecting and understanding local customs and traditions. The church recognised the importance of providing spiritual and emotional support to members in these new regions, many of whom faced significant challenges, including

cultural isolation, language barriers, and the need to reconcile their new faith with traditional practices (Trim 2024: 8; Hudson 1997: 10). The expansion and diversification of pastoral care during this period were also supported by advances in theological education and the professionalisation of the pastoral role. Seminaries and theological schools, such as the Battle Creek College, played a crucial role in preparing pastors for the increasingly complex demands of their ministry (Marroquin 2001: 56).

As the church expanded globally, the role of pastors became more diverse. Pastoral care began to encompass a wider range of activities beyond traditional preaching and teaching. For example, pastors were increasingly involved in counselling, youth ministry, and health-related programs (Finucane 2009: 56). The SDA Church's emphasis on holistic health, which included physical, mental, and spiritual well-being, became a central component of pastoral care during this period. In addition, the church's educational and medical institutions, which proliferated during this era, provided new avenues for pastoral care (Drumm 2019: 1). Pastors often worked closely with these institutions to provide support to students, patients, and staff, integrating spiritual care into the broader mission of the church's educational and health programs. This collaboration between pastors and institutional leaders helped to create a more comprehensive approach to pastoral care, one that addressed the full spectrum of human needs (Finucane 2009: 192).

The growth of the SDA Church in the 1920s to 1950s also led to a more complex and diverse membership. In response, the church developed specialised ministries to cater to different groups within the church, including youth, women, and ethnic minorities (Beckett 2013: 4). Pastors were trained to address the specific needs of these groups, providing targeted pastoral care that was sensitive to their unique challenges. For example, youth ministry became a key focus during this period, as the church sought to retain young members and involve them in its

mission. Luther Warren and Harry Fenner founded the Adventist Young People's Society in 1879, with a desire to help young people experience spiritual birth or revival (Tutsch 2009: 173). In 1891, Meade MacGuire organised a second SDA youth organisation in Antigo, Wisconsin and Francis Hunt, a ministerial student at La Sierra College helped start the Pathfinder club which is an important ministry for children and teenagers (Ranzolin & Plata 2020: 1). Pastors played a crucial role in mentoring young people, organising youth programs, and encouraging their participation in church activities. Similarly, women's ministries were developed to support the spiritual growth and well-being of female members, with pastors often leading or facilitating these initiatives (Tutsch 2009: 174).

## **2.5 Modernisation and professionalisation (1960s - 1980s)**

The period from the 1960s to the 1980s was marked by significant modernisation and professionalisation within the Seventh-day Adventist (SDA) Church, profoundly influencing the practice of pastoral care. This era saw the integration of contemporary psychological and counselling practices into pastoral roles, as well as the broadening of pastoral care to include a more holistic approach to the well-being of church members (Stenbakken & Feldbush 2020: 2). The church through its chaplaincy services was driving this change which sought to improve the role of the church in counselling its members (Bogia 1984: 15). The curriculum at Adventist institutions like Andrews University was also updated to integrated counselling, cross-cultural communication, and leadership into the training of pastors (Orwenyo 2014: 52). The civil rights movement, the feminist movement, and the increasing awareness of mental health issues prompted the church to re-evaluate and modernise its pastoral care practices (Ochieng 2014: 3; O'Reggio 2010: 342). Scholars like Samuel G. London Jr.(2010) documented this in works such as *Seventh-day Adventists and the Civil Rights Movement*, which explores how Adventists navigated the tension between their theology and the call for social justice.

During this period, the SDA Church made concerted efforts to professionalise the role of the pastor. Professors at institutions like Andrews University and Avondale College played a significant role in shaping the curriculum for pastoral training, emphasising theology, counselling, and leadership (Barbe 2024: 10). Research by Brown (1977: 3), also emphasised the professionalisation and organisation of pastoral roles. It should be noted that the professionalisation of the pastoral role was not particular to the Adventist church but to many denominations, where clergy were increasingly expected to be well-educated and skilled in various aspects of ministry beyond preaching. Theological education became more comprehensive, with seminaries offering training in counselling, conflict resolution, and administrative skills (Orwenyo 2014: 52).

Theological training was essential as pastors were now expected to address a wide range of issues faced by their congregants, including marital problems, mental health concerns, and community conflicts. The SDA Church also began to emphasise the importance of continuous professional development for pastors. The professionalisation of the pastoral role was seen as necessary to meet the evolving needs of a more educated and diverse church membership (Hudson 1997: 10). There was a stronger emphasis on formal training for pastors in theology, leadership, and pastoral care, with institutions like Andrews University and Avondale College playing a significant role in equipping pastors for their expanding responsibilities. Moreover, pastoral roles diversified to include specialised ministries, such as youth, family, and health ministries, to cater to the specific needs of various demographics within the church (Barbe 2024: 10).

The modern thrust of pastoral care involved a more holistic approach that integrated physical, mental, and spiritual care, which was in line with the SDA Church's broader mission of promoting healthful living. The church's emphasis on health ministries, which had been

growing since the late 19th century, became more pronounced during this period (SDA 2025: 2). Pastors were involved in promoting health programs, educating members about healthy living, and integrating healthful practices into the spiritual life of the church. For instance, the church's health institutions, such as hospitals and clinics, often worked in conjunction with local churches to provide comprehensive care. Pastors played a vital role in these efforts, offering spiritual support to patients and their families, organising health seminars, and sometimes even receiving training in basic healthcare practices themselves. This integration of health and spirituality was a distinctive feature of pastoral care in the SDA Church during this time (Luna 2013: 5).

The 1960s to 1980s were a period of significant social change, and the SDA Church had to adapt its pastoral care practices to address these changes. Issues such as civil rights, the women's movement, and the evolving roles of youth in society presented new challenges for pastoral care (Cathie 2019: 276). The church responded by developing specialised ministries for different demographic groups, such as youth ministries and women's ministries, which addressed the unique needs of these groups. Pastors were trained to be sensitive to the social and cultural issues affecting their congregants and to provide guidance that was relevant to their daily lives. This period also saw an increased emphasis on the importance of family life, with pastors playing a key role in promoting strong family relationships and addressing family-related issues such as marriage, parenting, and domestic violence (Ochieng 2014: 1).

The church established specialised ministries to address the needs of different demographic groups, such as youth, women, and the elderly. Pastoral care training became more professionalised, with an increased emphasis on the integration of modern psychological theories and practices and clinical pastoral education (CPE), which was founded by Anton Boisen (1936) who emphasised the study of theology through human experience (Asquith

1982: 244). According to Luna (2013: 5), the role of chaplains in healthcare settings also became more prominent during this period. SDA hospitals and healthcare institutions employ chaplains to provide spiritual support to patients and staff, reflecting a commitment to holistic care. These changes reflected the church's ongoing commitment to addressing the full spectrum of needs, i.e., the spiritual, emotional, and physical of its members, ensuring that pastoral care remained relevant in a rapidly changing world (Landless 2023: 27).

## **2.6 Contemporary developments (1990s - present)**

From the 1990s to the present, pastoral care within the Seventh-day Adventist (SDA) Church has continued to evolve, reflecting broader societal trends, technological advancements, and the changing needs of a globalised church membership (Jibiliza 2021: 11). A greater emphasis on mental health characterises this period, the use of technology in ministry, and the development of specialised ministries to cater to diverse demographic groups (Gilles 2024: 1). In recent decades, there has been a growing recognition of the importance of mental health within the SDA Church (Wango 2010: 1). Pastoral care has increasingly integrated mental health support, recognising that spiritual well-being is closely connected to emotional and psychological health (Skinner, Mason & Cockling 2021: 27). This shift has been influenced by the broader societal awareness of mental health issues and the church's ongoing commitment to holistic care.

Pastors are now more frequently trained in mental health first aid and counselling techniques, enabling them to better support congregants dealing with issues such as depression, anxiety, and trauma. There is also a stronger emphasis on creating safe spaces within the church where members can discuss mental health openly and without stigma (Fleming 2020: 35). The church has also encouraged collaboration between pastors and mental health professionals, recognising that comprehensive care often requires the expertise of trained counsellors and

psychologists. This collaboration extends to church-run institutions such as schools and hospitals, where spiritual and mental health care are integrated to provide holistic support to students and patients (Wilkins 2021: 33).

In today's technological society, cyberspace technologies have greatly changed the operations of the church and as such they can significantly impact pastoral care in the SDA Church (Nyakwara 2023: 17). Since the 1990s, and especially with the rise of the internet and social media, pastors have had to adapt to new ways of connecting with their congregations. Online platforms have become essential tools for ministry, allowing pastors to reach a broader audience and provide pastoral care remotely. During the COVID-19 pandemic, the use of digital tools in pastoral care became even more crucial. With in-person gatherings restricted, all denominations shifted to online services, virtual counselling sessions, and digital small groups. The period during the pandemic highlighted the potential of technology to enhance pastoral care, making it more accessible to members who may not be able to attend church in person due to distance, health issues, or other barriers. Pastors now utilise a range of digital tools, including social media, video conferencing, and church management software, to stay connected with their congregations, provide counselling, and offer spiritual support. These tools have also enabled pastors to engage with younger generations more effectively, meeting them in the digital spaces where they are most active (Garrett 2024: 21; Musya 2024: 10).

As the SDA Church has grown and diversified, there has been a concerted effort to develop specialised ministries that address the unique needs of different demographic groups. This includes ministries focused on youth, women and ethnic minorities, among others (Musya 2024: 11). Pastors are trained to be culturally sensitive and to understand the specific challenges faced by these groups, enabling them to provide more effective and personalised care. Youth ministry, for example, has become increasingly important as the church seeks to engage

younger members and address their specific needs and concerns. Pastors working in youth ministry are often trained in areas such as adolescent psychology, social media engagement, and contemporary cultural trends, allowing them to connect with young people in meaningful ways (Orwenyo 2014: 52). Similarly, the church has developed programs aimed at supporting families, addressing issues such as marriage counselling, parenting, and domestic violence. These programs reflect the church's understanding that pastoral care must address the realities of contemporary life, where family dynamics can be complex and challenging (Kraft 2023: 74).

The global nature of the SDA Church has also shaped contemporary pastoral care practices. As the church continues to grow in diverse cultural contexts, pastors are increasingly required to be culturally sensitive and adaptable. This means understanding and respecting the cultural practices and beliefs of congregants while maintaining the core teachings of the church. Globalisation has also led to greater interaction between different parts of the world church, with pastors sharing best practices and learning from each other's experiences. This exchange of ideas has enriched pastoral care, making it more dynamic and responsive to the needs of a global membership. These changes reflect the church's ongoing commitment to meeting the spiritual, emotional, and physical needs of its members in a rapidly changing world (Poli 2012: 115).

## **2.7 Overview of the early years of the Seventh-day Adventist Church in South Africa**

The Seventh-day Adventist (SDA) Church began its work in South Africa in the late 19th century, with the arrival of missionaries who were part of the broader missionary movement of the SDA Church during that period (Matemba 1997: 23). The church's establishment in South Africa was part of its global expansion, as Adventist missionaries sought to spread their message worldwide. The SDA Church's early years in South Africa were marked by slow but

steady growth, as the church worked to establish itself in a diverse and complex cultural landscape. For example, From the earliest days of the Seventh-day Adventist Church's work in South Africa there was significant tension between English-speaking and Afrikaans-speaking members (Crocombe 2007: 1). The early missionaries' efforts, coupled with the gradual training of local leaders, laid the groundwork for the church's expansion in the 20th century (Sokupa 2015: 173).

## **2.8 Early missionary work and establishment**

In 1885, William Hunt, an American mineral prospector who had previously lived in Australia, arrived in South Africa and settled in the diamond town of Kimberley. He brought with him some Adventist literature, sharing its message with those around him whenever he had the chance. Among the first to embrace the Sabbath truth taught by Hunt were Peter Wessells and G.J. van Drutten. By 1887, about forty individuals in the mining town had converted to this belief (Matemba 1997: 23). The growing number of believers led to the arrival of full-time gospel workers in July 1887, including pastors C. L. Boyd and D. A. Robinson, who began their work in Cape Town before moving to Kimberley (Matemba 1997: 23). This work laid the foundation for the establishment of the first Adventist congregation in Africa at Beaconsfield in Kimberley, South Africa in 1890 (Sokupa 2024: 1). This church played a crucial role in the local community and eventually became a museum. The efforts by Hunt were instrumental in organising and establishing the early Adventist community in the region, despite challenges such as cultural differences, language barriers, and resistance from established religious groups (Sokupa 2015: 173).

The Seventh-day Adventist (SDA) Church's mission in South Africa was part of its broader global effort to spread the Adventist message, driven by the belief in the imminent return of Christ (Trim 2012: 1). Solusi is the first foreign mission established by the Adventist Church

among the native peoples of Africa (Thebe 2020: 1). Its development is significant because one of the pioneers of the Seventh-day Adventist (SDA) Church, Ellen White (1900: 5), noted that in 1894, missionaries in Africa ventured into distinctly native territories to establish the Solusi Mission. This mission became the first foreign endeavour among non-Christian peoples, aligning with the church's mission to spread the saving truths of the third angel's message to every nation, kindred, tongue, and people . Although not in South Africa, Solusi in Zimbabwe, played a crucial role in the training and development of African pastors and missionaries who would later work throughout Southern Africa, including South Africa. The mission was central to the church's strategy of developing a self-sustaining indigenous ministry that could adapt Adventist teachings to local contexts (Thebe 2020: 4; Hanson 2016: 2).

## **2.9 Evolution of pastoral care practices**

The evolution of pastoral care practices within the Seventh-day Adventist (SDA) Church in South Africa reflects broader changes within the church as it adapted to the local cultural and social context over time (Magezi 2019: 2). From its early missionary-driven efforts to more structured and culturally sensitive approaches, pastoral care in the Adventist Church in South Africa has undergone significant transformations (Magezi 2019: 2). In the initial years following the church's establishment in South Africa, pastoral care was predominantly informal and centred around the efforts of the Seventh-day Adventist Medical Missionary and Benevolent Association (Sokupa 2024: 4). The Seventh-day Adventist Medical Missionary and Benevolent Association implemented and coordinated various community services intended for the benefit of the broader population. These services were designed to be inclusive, providing assistance not solely to members of the Seventh-day Adventist community but also to all individuals in need, thereby fostering a spirit of universal support and outreach (Sokupa 2024: 5).

Early Adventist missionaries also provided basic spiritual guidance, organised Sabbath schools, and conducted evangelistic campaigns. Given the nascent state of the church, the primary focus was on evangelism and church planting rather than structured pastoral care (Matemba 1997: 23). The impetus for missionary work prompted Adventist missionaries to undertake an ox-wagon journey from Vryburg, advancing northward through Botswana to Matabeleland, Zimbabwe. During this expedition, they acquired 12000 acres of land from the government, thereby facilitating the establishment of Solusi Mission (Matemba 1997: 23). As the church experienced growth, particularly following the inception of Solusi Mission in 1894, there was a progressive shift toward the training of local leaders to fulfil pastoral responsibilities. Solusi Mission was instrumental in cultivating indigenous leadership, which proved essential for the contextualization of pastoral care to effectively address the unique needs of local communities (Hanson 2016: 2).

## **2.10 Mid-20th century developments**

By the mid-20th century, as the SDA Church expanded its reach into diverse cultural groups within South Africa, there was a recognised need for culturally sensitive pastoral care to address issues like gender-based violence and to integrate Christian faith with diverse cultural practices (Lottering 2021: 10). This period saw the development of health and educational initiatives that became integral to the church's pastoral care strategy. Pastors were increasingly trained not just in theology, but also in basic health care and education, pastoral care and counselling. The Adventist Chaplaincy Department, which is available in every SDA conference, was responsible for training pastors (Luna 2013: 5). This training was essential in a context where many communities faced significant challenges such as poverty, disease, and limited access to formal education. The church's emphasis on holistic health, which included physical, mental, and spiritual well-being, became a cornerstone of its pastoral care practices

during this period (Crocombe 2007: 6). The apartheid era posed significant challenges to the SDA Church in South Africa, particularly in terms of racial segregation and social justice (Nanthambwe 2024: 7; Lottering 2021: 12). Pastoral care during this time had to navigate the complexities of ministering in a deeply divided society (Crocombe 2007: 3). Some pastors and church leaders played crucial roles in advocating for social justice and supporting their congregants through the hardships of apartheid (Donkor 2010: 87).

### **2.11 Post-Apartheid era and contemporary practices**

The post-apartheid era brought new challenges and opportunities for the SDA Church in South Africa. The church had to navigate the complexities of ministering in a society that was transitioning from a history of racial segregation to one of reconciliation and healing (Cruz 2019: 151). Pastoral care practices evolved to address issues such as social justice, racial reconciliation, and the lingering effects of apartheid on communities (Crocombe 2007: 6). In recent decades, the church has placed a stronger emphasis on mental health, social justice, and community building within its pastoral care framework. Pastors are now often trained in counselling techniques and social work to better support their congregants through the psychological and social challenges they face (Luna 2013: 5). Additionally, the integration of technology into pastoral care, especially during the COVID-19 pandemic, has further transformed how pastors connect with and care for their congregations. The contemporary approach to pastoral care in the SDA Church in South Africa is characterised by a holistic and inclusive strategy that seeks to address the spiritual, emotional, and physical needs of its members. This approach is reflective of the church's broader mission to promote holistic well-being and social justice in a rapidly changing world (Cruz 2019: 151; Crocombe 2007: 6).

## 2.12 Summary

The history of pastoral care in the Seventh-Day Adventist Church is a testament to the church's commitment to the holistic well-being of its members. From its early days of informal, communal care to the modern, professionalised practices of today, the SDA Church has continually adapted its pastoral care to meet the changing needs of its community. This evolution reflects the church's broader mission to provide comprehensive spiritual, emotional, and physical care rooted in the teachings of Jesus Christ and the guidance of pioneering leaders like Ellen G. White. The development of the SDA Church and its pastoral care practices in South Africa is a story of adaptation and growth. From its early missionary-led efforts to the establishment of local leadership and the integration of health and education into its ministry, the church has continually sought to meet the spiritual, emotional, and physical needs of its members. Influential figures and key milestones have shaped the church's journey, making it a significant religious presence in South Africa today.



## Chapter three

### The impact of covid-19 on pastoral care

#### 3.1 Introduction

The COVID-19 pandemic, which began in late 2019, disrupted nearly every aspect of human life, including religious practices and the delivery of pastoral care. Before the pandemic, pastoral care traditionally emphasised personal interactions such as hospital visits, community gatherings, in-person counselling, and worship services. Such visits are valued because they establish favourable conditions and an atmosphere for life-giving fellowship, gospel sharing, and just spending time together. They also serve as a reminder of God's love and support for brethren in both good and terrible times (Tagwirei 2022: 8). Many religious communities relied on face-to-face communication to foster spiritual growth, provide emotional support, and address members' practical needs. This hands-on approach was central to maintaining close-knit faith communities and meeting individual needs in a personalised manner. The pandemic brought immediate challenges to pastoral care as governments worldwide implemented lockdowns, social distancing measures, and restrictions on large gatherings. Churches, temples, mosques, and synagogues were forced to close their doors, disrupting regular services, rituals, and community events (Osei-Tutu et al. 2021: 335). Pastors and religious leaders faced the challenge of maintaining spiritual connections without physical proximity. This chapter explores how the pandemic reshaped pastoral care by forcing religious leaders and institutions to adapt to unprecedented challenges. It examines the social, spiritual, and technological changes that have influenced pastoral care, highlighting both the challenges and opportunities that emerged during this global crisis.

### **3.2 Disruption of traditional church services and gatherings due to COVID-19**

Traditional church services and gatherings have long been central to the faith experience for many religious communities, offering opportunities for worship, fellowship, and spiritual growth. The COVID-19 pandemic brought changes to these practices, as public health measures aimed at curbing the spread of the virus—such as social distancing, lockdowns, and restrictions on large gatherings—directly impacted the core activities of churches worldwide (Chirisa et al. 2021: 1). Government-mandated lockdowns and health guidelines forced churches to close their doors, disrupting regular worship schedules. For many congregations, weekly in-person services were a cornerstone of their spiritual lives, and the abrupt cessation left members feeling disconnected. It was on March 15, 2020, that the National Disaster Management Centre in South Africa declared COVID-19 a national disaster. A national state of disaster was subsequently declared in South Africa by the Minister of Cooperative Governance and Traditional Affairs. As a result, stringent lockdown procedures were put in place in public areas, and churches, businesses, and schools were shut down (Kunguma, Mokhele & Coetzee 2021: 1).

The disruption of traditional church services has resulted in sacraments and rites being postponed or modified to adhere to safety regulations, impacting the spiritual lives of adherents. (Dowson 2020: 33). Many churches suspended in-person communion services to prevent the spread of the virus through shared elements like bread and wine. Some faith communities offered virtual communion, where congregants used their own bread and wine at home, a practice that stirred theological debates about the validity of sacraments performed remotely (Douglas 2020: 1; Scully 2020: 50). This practice raised significant theological discussions regarding the legitimacy of sacraments administered in a virtual setting. Virtual participation

in a sacrament, like the Eucharist or Holy Communion, cannot fully replicate the physical and communal aspects considered essential for its validity by the church (Douglas 2020: 1).

Baptism ceremonies, often requiring physical proximity and the use of shared water, were postponed or modified. During the COVID-19 pandemic, many religious traditions that practice baptism by immersion adapted their baptism practices to comply with health guidelines, replacing the traditional method of full immersion with pouring or sprinkling water (Scully 2020: 136). In other denominations where baptism is by pouring or sprinkling, baptisms were also postponed or allowed for emergency situations (McGowan 2020: 3). This shift allowed churches to continue the sacrament while minimising the risk of virus transmission. Many couples postponed weddings or opted for simplified ceremonies with minimal attendance. Virtual weddings became an alternative for some, though they raised questions about the communal aspect of marriage blessings. For instance, authorities in several countries advised that most couples postpone their weddings, but they also suggested live-streaming weddings to include additional guests in their homes. As a result, the majority of weddings had to be rescheduled and postponed because it is illegal in many countries for a wedding to be conducted by video conferencing technology without the presence of a marriage officer and two witnesses (Dowson 2020: 36).

Another effect of the disruption of traditional church services is that the physical environment of a church, often considered sacred and inspiring, was unavailable to congregants, diminishing the sensory and emotional aspects of worship. For instance, Pentecostal members in Durban come together on Sundays in church venues and also meet at other times during the week, predominantly in homes, indicating that these gatherings foster a community of worshipers engaged in liturgical activities (Mhandu & Ojong 2021: 10). Prior to the pandemic and subsequent lockdowns, Pentecostal members convened to pray and participate in various

liturgical rituals. By engaging in different contact liturgical practices, the members developed a community that became part of a continuous tradition (Mhandu & Ojong 2021: 10). Therefore, assembling in the church building held a sacred significance that could not be diminished for the congregation. Both believers and pastors hold the belief that God's presence resides in the church building, and when they congregate there, a community of practice is formed (Magezi 2022: 5; Mhandu & Ojong 2021: 11).

Individuals do not embark on the Christian journey solely by studying the Bible at home or through faith alone. Physical gatherings and interactions are vital in integrating believers into the Pentecostal community (Mhandu & Ojong 2021: 11). The process of socialising through in-person meetings and interpersonal connections plays a crucial role in forming a community of Christian believers (Mhandu & Ojong 2021:12). Consequently, the pandemic posed numerous challenges for churches, leading to some being unable to resume operations. Furthermore, transitioning to online platforms compelled many churches to adjust to new methods of conveying sacred teachings. The inability to conduct rituals of solidarity and other offline liturgical practices due to COVID-19 disrupted essential social structures and their performative and communicative aspects (Mhandu & Ojong 2021: 1).

The inability to participate in sacraments and rites left some feeling disconnected from their spiritual journeys. The postponement or modification of rites of passage, like funerals or last rites, added to the grief of losing loved ones during the pandemic. Families struggled to find closure without traditional ceremonies. According to Khosa-Nkatini and White (2021: 1), in the African context, funeral and bereavement rituals are considered important for cleansing the bereaved. As a result, funerals, particularly for elders, are significant social gatherings attended by many people. Various burial customs occur in the lead-up to the funeral, with some requiring the deceased to be held for several days before the ceremony (Baloyi 2014: 1). Additionally,

some Christian churches often utilise these funeral services to further their missional goals (Kotze & Niemandt 2015: 1). However, lockdown measures made it challenging to conduct these rituals, especially for individuals who had died from COVID-19 related illnesses (Khosan-Nkatini & White 2021: 1).

Individuals who experience the loss of loved ones frequently find themselves in a state of solitary grief, often lacking adequate support from their pastors. For example, findings from a study by Ilunga (2021), titled: A Study of Support for the Bereaved in the Local Congregation, revealed that approximately 90% of participants experienced grief and emotional effects after losing a significant person in their lives. The situation emphasises the necessity for pastors to be adequately equipped to accompany individuals through the grieving process, particularly within the contexts of pandemics and socio-economic challenges. Moreover, it is essential for pastors to receive training that enables them to empower others who share the responsibility of delivering pastoral care to individuals navigating the various stages of grief (Buffel 2022: 1).

### **3.3 Social disconnection and isolation**

Church services and gatherings are not solely about worship but also about fostering community and fellowship (Mhandu & Ojong 2021: 42). The bible also highlights the importance of such gatherings by exhorting members not to give up meeting together but to fellowship and encourage each other (Hebrews 10:25). Fellowship among believers is vital for mutual encouragement and accountability. When people engage in a community of faith, it creates a space for growth and support, and brings strength and encouragement, especially during difficult times. Fellowship can motivate others to stay committed and strive for a life of love and good deeds (Ok 2024: 1). As such, engaging in social activities through face-to-face meetings and fostering interpersonal connections is fundamental in establishing a cohesive community of Christian believers (Mhandu & Ojong 2021: 12).

The COVID-19 pandemic brought about social isolation, and the lack of church gatherings removed a vital source of social interaction, especially for older members and those living alone (Kung & Steptoe 2024: 1; Hwang, Rabheru, Peisah, Reichman & Ikeda 2020: 1217). The implementation of quarantine and social distancing measures during the COVID-19 pandemic, while essential for curbing the transmission of the virus, precipitated significant increases in feelings of loneliness and social isolation in old people in Europe, China and North America (Hwang, Rabheru, Peisah, Reichman & Ikeda 2020: 1217). These elevated levels of isolation subsequently led to various physical and mental health repercussions (Hwang et al. 2020: 1217). Before the onset of the pandemic, loneliness and social isolation were already recognised as widespread phenomena in regions such as Europe, the United States, and China, affecting an estimated 10-40% of the population (Hwang et al. 2020: 1218). This pervasive issue has been characterised as a behavioural epidemic. The circumstances have been exacerbated by the restrictions aimed at controlling the spread of the virus, highlighting the urgent need for effective interventions to address the consequent mental health implications (Hwang et al. 2020: 1220).

Many older members view church attendance as their primary social outlet, where they find companionship, purpose, and a sense of belonging. For those living alone, the cessation of physical gatherings exacerbated feelings of loneliness and vulnerability, increasing the risk of mental health challenges like depression or anxiety (Savage 2023: 15). For example, a study by Savage (2023) with the title: *Church Attendance, Social Isolation And Loneliness In Older African American Adults During COVID-19*, examining the relationship between social isolation, loneliness, and health-related issues in older adults during the COVID-19 pandemic, revealed that older adults who experienced social isolation reported a decline in perceived overall health and engaged in poorer health practices. Furthermore, heightened levels of stress

and anxiety were consistently reported by participants across the board during the pandemic, suggesting a pervasive impact of social factors on the health and well-being of this demographic (Savedge 2023: 64).

A study done in South Africa by Naicker and Richter (2022) with the title: *Parenting amid COVID-19: Challenges and supports for families with young children in South Africa* highlighted significant challenges faced by families with young children, particularly regarding health, nutrition, care, and safety. The findings indicated that nearly one-third of the surveyed families struggled to provide adequate food for their youngest members due to food scarcity. The pandemic underscored the vulnerability of many families who lacked sufficient safety nets, revealing that support systems in place were inadequate to meet the needs of those affected. Additionally, the impact of the pandemic on young children's mental and physical well-being was found to be contingent upon their family and community contexts, as well as the effectiveness of governmental and non-governmental interventions (Naicker & Richter 2022: 51).

A study conducted in the United Kingdom by Holmes (2021), titled: *The Changing Nature of Ministry amongst Children and Families in the UK during the Covid-19 Pandemic*, highlighted that families with children often rely on the church as a place for communal support, parenting guidance, and intergenerational interactions. Without this, they struggled to maintain a sense of connection to the broader community. Teenagers and young adults faced a particular challenge, as youth groups and other fellowship activities are key in keeping them engaged in their faith. Without these regular touchpoints, many felt alienated, reducing their involvement in church life (Holmes 2021: 138). The study also highlighted the considerable impact of prevailing restrictions and associated needs on the nature of ministry within the church. The findings indicated a notable decline in family engagement with church activities, alongside a

significant shift in the volunteer structure for church-based children's programs. These changes underscore the adaptive challenges faced by religious institutions in response to evolving societal conditions (Holmes 2021: 149).

According to a study conducted by Stroebaek (2013), titled: *Let's have a cup of coffee! Coffee and coping communities at work*, the absence of informal post-service interactions, such as coffee hours or communal meals, has resulted in a significant loss of opportunities to fortify relationships among community members (Stroebaek 2013: 381). Informal interactions that typically occur before or after services, such as greetings, shared meals, and spontaneous conversations, are essential for fostering and sustaining relational bonds. The study in Denmark underscored that coffee breaks were deemed the most critical factor for social and personal well-being within emotionally demanding professions. These informal encounters facilitated the establishment of communities of coping, thereby highlighting the importance of such interactions in enhancing collective support and well-being (Stroebaek 2013: 382). The absence of these touchpoints diminished the sense of intimacy within congregations. Older members who often mentor younger ones in faith and life saw fewer opportunities to foster these relationships, weakening intergenerational ties. As physical gatherings stopped, members felt less inclined to volunteer for activities or church missions, reducing the collective spirit of service and shared responsibility.

### **3.4 Disruption of small groups and ministries**

Small groups, Bible studies, and ministry initiatives serve as fundamental components of numerous congregational structures, offering vital spiritual nourishment, personalized pastoral care, and mutual support among members (Nkundakozera 2024: 238). The disruption of these essential activities during the COVID-19 pandemic underscored significant challenges in sustaining the depth and authenticity of these engagements. In response, many small groups

across various denominations transitioned to digital platforms, such as Zoom, Microsoft Teams, and Google Meet. While this shift facilitated the continuity of gatherings, virtual meetings frequently fell short in replicating the warmth and interpersonal connections characteristic of in-person interactions (Magezi 2022: 6). Additionally, the move to virtual environments hindered physical engagement between clergy and congregants, as well as among congregational members themselves, ultimately affecting the communal aspects of worship and fellowship (Magezi 2022: 6; Pillay 2020: 266). Members felt less inclined to share deeply or engage in vulnerable conversations.

The older members and those with limited access to technology were disproportionately excluded, leading to lower participation and a sense of being left out. The COVID-19 pandemic significantly complicated the relationship between older adults and digital technology. Prior to the pandemic, many older adults experienced a dual exclusion stemming from inadequate digital literacy and limited social interaction (Savedge 2023: 15). The pandemic necessitated a rapid transition of various aspects of daily life to digital platforms, thereby exacerbating the imperative for individuals to possess proficient digital skills. This shift highlights the critical importance of addressing the digital divide among older populations, as their engagement in societal activities has become increasingly contingent upon their ability to navigate online environments (Zapletal, Wells, Russell & Skinner 2023: 1).

Moreover, expensive data and airtime significantly hindered access to church services conducted on platforms like Zoom, Google Meet, and Microsoft Teams. Many individuals during the pandemic were out of work and the costs associated with mobile data or internet access were prohibitive, especially in regions where data prices are high (Korsi & Mdiniso 2021: 1). A COVID-19 study by Mhlanga and Dunga (2023), titled: *Demand for internet services before and during the Covid-19 pandemic: what lessons are we learning in South*

*Africa?*, indicated a positive correlation between income levels and household size with internet usage, suggesting that higher income and larger household sizes are associated with an increased demand for internet services. The study also highlighted that older people were using the internet less compared to young people. Additionally, the financial barriers identified hindered participation in virtual worship, thus limiting individuals' ability to engage with their faith communities effectively (Mhlanga & Dunga 2023: 626).

The onset of the COVID-19 pandemic prompted a sudden shift to remote work, forcing employees to carry out all work-related social interactions via virtual platforms. This swift shift to a predominantly digital format introduced a range of novel workplace stressors (Luebstorf et al. 2023: 151). Some individuals experienced considerable fatigue resulting from the prevalence of virtual meetings, which subsequently impeded their enthusiasm for engagement in online religious activities, such as Bible studies and prayer meetings. One study by Rubright (2023), titled: *The Church in Quarantine: How Pastors Responded to the COVID-19 Pandemic and the Impacts Their Decisions Made on Reopening and Rebuilding Their Communities*, highlighted the phenomenon commonly referred to as "Zoom fatigue", noting that many individuals found it increasingly undesirable to participate in yet another virtual meeting after a long day of work (Rubright 2023: 15). Furthermore, another investigation by Addo(2021), with the title:(*Join the Holy Spirit on Zoom: African Pentecostal churches and their liturgical practices during COVID-19*, emphasised the challenges faced in online prayer settings, where participants often found it difficult to engage meaningfully while solely hearing their own voices, leading to a sense of exhaustion (Addo 2021: 52). Additionally, the transition to online formats has hindered the capacity for congregational worship practices, such as singing and communion, which are integral components of the Christian worship experience. This shift raises important considerations regarding the effectiveness of virtual worship and the

potential impact on congregational life (Johnston, Eagle, Headley & Holleman 2022: 383). This phenomenon can be understood in light of the emotional and cognitive burden imposed by continuous online interactions, leading to challenges in maintaining engagement and motivation in virtual collaborative settings.

In-person church ministries, which encompass activities such as hospital visits, food pantry operations, and choir rehearsals, were compelled to suspend or alter their functioning in response to the challenges. This shift significantly diminished their operational impact, leading to unmet community needs. Additionally, church departments that depended on collective dynamics, including drama teams and praise and worship ensembles, encountered considerable difficulties in transitioning to virtual formats. This transition adversely affected their capacity to nurture spiritual engagement and facilitate personal growth among their members. Pastoral leaders were particularly impacted, as the responsibility for maintaining and encouraging worship services primarily fell upon them (Magezi 2022: 9). The demands associated with adapting to new operational formats, coupled with the constraints of fewer available resources, resulted in increased levels of exhaustion among ministry leaders and volunteers. Although some African churches have successfully implemented online preaching and worship services, the challenges persist in continuing vital ministries and programs that require significant personal interaction, such as Holy Communion, evangelism, and pastoral care for vulnerable populations, including the sick and elderly (Magezi 2022: 9).

The implications of the disruption of fellowship and ministry are the loss of spiritual intimacy (Magezi 2022: 2). The sense of belonging, mutual encouragement, and spiritual accountability inherent in church fellowship were weakened. Members felt isolated in their faith journeys, leading to a decline in spiritual growth for many. Also, churches relying on community-based funding or volunteerism faced financial and operational challenges. Ministries dependent on

regular contributions from congregants saw reduced support as fewer people participated actively in returning tithes and offerings. Furthermore, the church has historically been a source of emotional and psychological support (Nganyu 2025: 55). Without consistent access to this support, many congregants faced heightened anxiety, grief, and a sense of spiritual stagnation (Magezi 2022: 1; Ngema, Buthelezi & Mncube 2021: 1).

### **3.5 Emotional and psychological impact**

The phenomenon of collective grieving during the death and burial processes of a loved one is a significant component of the healing journey for many African communities across diverse contexts (Kgatle & Segalo 2021: 1). During the height of the COVID-19 pandemic, there were a series of constraints that altered traditional mourning practices. Factors such as restrictions on the number of attendees permitted at funerals, limited access to the deceased, overarching travel limitations, and the reduction of funeral ceremonies have profoundly impacted communal mourning experiences (Kgatle & Segalo 2021: 1). The pandemic exacerbated feelings of grief and anxiety in unprecedented ways, depriving individuals of the communal and spiritual solace typically derived from congregational gatherings, especially within religious contexts. This disruption was particularly acute during periods of personal loss against a backdrop of broad uncertainty (Buffel 2022: 1).

Government regulations often mandated severe limitations on funeral attendance, frequently restricting participation to immediate family members alone. This alteration in traditional practices has led to unattended grieving experiences, significantly diminishing the supportive presence of extended family and community members. The absence of physical presence and emotional connection, which are integral to communal grief, has intensified feelings of isolation among mourners, thereby complicating the grieving process (Madigele & Tshelametse 2023: 4). Furthermore, virtual memorial services, while providing an alternative

means for community engagement, have been widely regarded as insufficient replacements for the physical solidarity inherent in in-person gatherings. As a result, many families experienced a profound sense of isolation in their loss, often feeling deprived of the necessary collective support that is traditionally available within their communities (MacNeil et al. 2023: 440). In some instances, families opted to postpone memorial services until public health restrictions were lifted, thereby contributing to a pervasive sense of unresolved mourning and lack of emotional closure (MacNeil et al. 2023: 427).

The uncertainty during the pandemic resulted in heightened anxiety and fear among many people. The fear of illness, economic instability, and loss of loved ones created a pervasive sense of anxiety (Serafini et al. 2020: 529). The implementation of community-based strategies designed to bolster resilience among psychologically vulnerable populations during the COVID-19 pandemic was of paramount importance within any societal framework. The psychological ramifications resulting from fear and anxiety due to the rapid proliferation of the virus were acknowledged as a critical public health concern (Serafini et al. 2020: 533). As a result, many individuals sought solace in their faith; however, the transition to virtual platforms hindered the meaningful connection that regular in-person worship and communal interaction typically provide (Magezi 2022: 9). Vulnerable populations, particularly the elderly, experienced intensified fears regarding potential exposure to COVID-19, which further exacerbated their social isolation and diminished access to community support systems. Both church leaders and congregants encountered significant challenges in replicating the consolatory elements of collective worship—such as shared prayer, hymnody, and the communal experience of presence—within online environments fellowship (Magezi 2022: 6; Pillay 2020: 266).

The COVID-19 pandemic has imposed considerable emotional strain on pastors and clergy, who have historically been tasked with addressing the spiritual needs of their congregations. During this time, they faced a multifaceted challenge that involved balancing heightened spiritual demands with various restrictions that limited their traditional methods of ministry (Khosa-Nkatini 2022: 4). Clergy members have reported experiencing traumatic incidents throughout their service, and some have contracted COVID-19, with some tragically succumbing to the virus. These experiences have likely engendered feelings of fear among fellow clergy and raised profound existential questions among congregants regarding the presence and role of the divine during a global crisis. The intersection of psychological distress, public health concerns, and theological inquiry during this period underscores the complex realities faced by religious leaders in contemporary society (Khosa-Nkatini 2022: 4).

The role of pastors as primary sources of support during periods of loss is critical, particularly in the context of conducting funerals and providing spiritual guidance (Buffel 2022: 9). The imposition of restrictions on funeral services and face-to-face interactions significantly hindered the ability of clergy to deliver this essential support, resulting in feelings of unfulfillment among both clergy and grieving families. Within the African cultural framework, funeral and bereavement rituals are regarded as essential processes for purifying the mourners. In many African societies, funerals—especially those of elders—are significant social events characterised by extensive communal attendance. These ceremonies involve a series of burial rites, with some rituals necessitating the preservation of the deceased's body for several days prior to the funeral (Khosa-Nkatini & White 2021: 1).

The lockdown restrictions instituted during the COVID-19 pandemic severely impeded the execution of such rituals, particularly in cases where the deceased had succumbed to COVID-19-related illnesses (Musoni 2023: 1). The pandemic also precipitated a notable increase in

mental health concerns among congregants, manifesting as heightened anxiety and depression (Serafini et al. 2020: 530). Consequently, clergy found themselves engaging in counselling with greater frequency, often without the advantages of in-person interaction. This situation compelled many pastors to navigate their own fears and uncertainties stemming from the pandemic while concurrently addressing the intensified needs of their congregations (Khosa-Nkatini 2022: 4).

The phenomenon of blurred boundaries between personal and professional life, significantly intensified by the conditions of remote work, may be what substantially contributed to the issue of clergy burnout (Pavlista, Angerer & Diebig 2024: 2). The clergy are not immune from the adverse effects of burnout and stress typically observed in various professions (Khosa-Nkatini 2022: 5). The transition to virtual pastoral care introduced a distinct set of challenges for clergy members, particularly in the assessment of emotional and spiritual needs. In virtual environments, the ability to discern body language and other non-verbal cues is notably diminished, complicating effective pastoral interactions.

Moreover, not all clergy were adequately prepared to engage with digital platforms, and the abrupt shift to virtual ministry necessitated a swift adaptation to new technological demands. It is also important to consider that congregants with limited internet access were frequently marginalised, resulting in an inequitable distribution of support and resources. Furthermore, maintaining spiritual engagement within a virtual or hybrid format presented an ongoing challenge, requiring significant creativity and effort from clergy members. This additional responsibility further exacerbated their existing workloads, contributing to the overall stress experienced by those in the ministry (Johnston et al. 2022: 395).

### 3.6 Financial and operational challenges

The suspension of in-person church services during the COVID-19 pandemic had significant financial and operational repercussions for religious institutions. The reduction in attendance due to health guidelines correlated with a substantial decline in tithes and offerings, which are fundamental to the financial sustainability of many churches (Eagle, Johnston, Headley & Holleman 2022: 399). This decline in congregational participation adversely affected the financial remittances essential for executing church projects, predominantly funded through contributions from the congregation. Many religious institutions have historically relied on the donations from their members to construct and maintain well-equipped worship centres (Chukwuma 2021: 1). However, the financial ramifications of the pandemic have severely diminished the economic capacity of numerous churches, disrupted critical operational functions and limited their ability to provide support to both congregants and the broader community (Chukwuma 2021: 4).

While some congregants adapted by engaging with virtual services, the overall decline in attendance significantly weakened the sense of community and connection to the church, further decreasing financial contributions. This situation was exacerbated by the financial hardships many congregants faced, stemming from job losses and reduced income during the pandemic, which hindered their ability to tithe or donate effectively. Moreover, according to a study by Baloyi and Pali(2022), titled: *COVID-19 pandemic and its effect on the church landscape in Zimbabwe*, traditional giving practices, which typically occur during in-person services, were significantly disrupted. Not all church members transitioned to digital giving platforms, leading to a further decline in financial contributions. In countries where the economy predominantly relies on the informal business sector, such as Zimbabwe, the stringent lockdown measures severely restricted the operations of these sectors, particularly during peak

COVID-19 periods characterised by high case numbers (Baloyi & Pali 2022: 4). This contraction represented a critical source of income for many church members, resulting in considerable financial losses for churches during lockdowns (Baloyi & Pali 2022: 4). Consequently, these financial shortfalls adversely affected various ministries, including outreach programs aimed at providing food and clothing, as well as maintaining online worship services (Baloyi & Pali 2022: 4; Chukwuma 2021: 4).

The multifaceted impact of the pandemic on church operations underscores the vulnerability of religious institutions in times of crisis and highlights the interconnectedness of community support and financial stewardship (Baloyi & Pali 2022: 4; Chukwuma 2021: 4). The government-mandated lockdowns instituted to mitigate the transmission of the COVID-19 virus necessitated significant financial restructuring within religious institutions, particularly churches. As congregations faced reduced income streams due to limitations on service attendance, many churches encountered challenges in maintaining their physical infrastructure, covering utility expenses, and funding essential repairs. This financial strain commonly resulted in the reduction of staff hours, layoffs of employees, and the suspension of stipends for clergy and support personnel, ultimately diminishing both morale and operational capacity within these organisations (Phillip 2022: 9).

In light of these financial constraints, various programs such as youth activities, mission work, and educational initiatives were either scaled back or entirely suspended, which negatively affected member engagement and restricted opportunities for relationship-building within congregations (Chukwuma 2021: 4). The impact of these limitations was particularly pronounced regarding support for vulnerable populations, as churches have historically functioned as vital resources for individuals in need, offering food assistance, financial aid, and counselling services (Baloyi & Pali 2022: 4; Chukwuma 2021: 4). Consequently, the decline

in offerings during this period severely hampered outreach efforts, resulting in a lack of support at a time when community needs were heightened. Moreover, the cessation of outreach programs further exacerbated the isolation of members who depended on the church for assistance, notably affecting the elderly, unemployed individuals, and those experiencing mental health challenges (Phillip 2022: 69).

The government-mandated lockdowns aimed at mitigating the spread of COVID-19 prompted a sudden transition to digital services and remote ministry, necessitating substantial investments in technology. This transition posed significant financial and logistical challenges, particularly for smaller congregations and those situated in underserved areas (Baloyi & Pali 2022: 4). Churches were required to allocate resources for capital-intensive equipment, including high-quality cameras, microphones, live-streaming software, and reliable internet connections, to facilitate effective virtual services (Baloyi & Pali 2022: 4). Furthermore, there arose a pressing need for training staff and volunteers in the operation of new technologies and the management of digital platforms, thereby exacerbating the financial strain faced by these institutions. The requirement to maintain subscriptions for streaming services, such as Zoom, cloud storage solutions, and various virtual meeting platforms, introduced additional recurring operational costs (Pandey & Pal 2020: 2).

Congregations with limited membership or those located in rural and underserved regions often struggled to secure the necessary funds for technological upgrades. The disparities in internet connectivity further compounded these issues; regions with poor connectivity or where congregants lacked access to appropriate devices experienced significantly curtailed participation in digital services, leading to diminished engagement and contributions (Campbell 2023: 36). Moreover, the situation was exacerbated by existing inequalities in the digital divide, as congregations in wealthier areas adapted to the technological demands more

readily than those serving low-income communities. This disparity highlights the broader socio-economic challenges that have emerged in the wake of the pandemic, underlining the urgent need for equitable access to technology and digital resources within faith-based communities (Campbell 2023: 50).

### **3.7 Changes in congregation's needs and expectations**

The COVID-19 pandemic significantly transformed the spiritual, emotional, and practical needs of congregants, necessitating a re-evaluation of the role of pastoral care in addressing these unprecedented challenges (Johnston et al. 2022: 375). The widespread experiences of isolation, grief, and anxiety during this period emphasised mental health as a predominant concern among congregants, thereby raising expectations for pastoral support. Many congregants increasingly sought pastoral counselling to navigate issues such as loneliness, depression, and anxiety, anticipating that pastors would provide a safe and empathetic environment for emotional expression (Serafini et al. 2020: 530). In response to these heightened expectations, pastors were often called to enhance their competencies in mental health first aid or to collaborate with professional counsellors to more effectively address the psychological needs of their congregations (Serafini et al. 2020: 530).

Additionally, many churches implemented programs specifically aimed at supporting individuals mourning the loss of loved ones, which included offering peer support in conjunction with spiritual care (Moodley & Hove 2023: 3). While the pandemic undoubtedly posed significant challenges for congregants worldwide, it also represents a critical juncture for the evolution of pastoral care. This moment invites a reconsideration of the ways in which pastoral support can be refined and adapted to better address the mental health needs of populations in distress, thus reinforcing the integral role of spiritual care within the broader context of mental health awareness and support (Moodley & Hove 2023: 6).

The pandemic highlighted the interconnectedness of spiritual, physical, and social well-being, prompting congregants to expect churches to provide holistic care (Domaradzki 2022: 980). Churches often became distribution centres for food, hygiene supplies, and financial assistance, serving as lifelines for vulnerable members (Goodwin & Kraft 2022: 22). This led to many congregants expecting their churches to engage in broader community efforts, such as partnering with local organisations to address poverty or health disparities. With regards to pastoral care, pastors were called upon to educate their congregations about COVID-19 safety measures, such as social distancing, mask-wearing, and vaccination, while combating misinformation (Soni et al. 2023: 4). Churches also played a role in organising vaccination drives or offering their spaces for testing and health campaigns (Soni et al. 2023: 4).

The transition to virtual platforms in response to restrictions on physical gatherings has significantly transformed expectations within congregational contexts. As traditional avenues for community engagement became limited, congregants increasingly anticipated that their pastors would maintain availability and connection through alternative means (Aziz 2021: 3). Members sought opportunities for private virtual meetings aimed at counselling, prayer, and spiritual discourse. Additionally, small group interactions, Bible studies, and prayer circles migrated online, with congregants expecting pastors to play an active role in facilitating these gatherings (Aziz 2021: 3; Tettey & Nel 2021: 9).

Regular communication through email, social media, and phone calls emerged as essential practices for preserving a sense of connection within the community. Consequently, congregants began to rely on pastors for support in emergencies, including instances of serious illness or sudden loss, often demanding attention outside of traditional working hours. While the adoption of virtual platforms provided congregants with immediate access to spiritual support, this shift imposed a significant burden on pastors, resulting in increased workloads

and challenges in maintaining personal boundaries. However, some innovative pastors have had to create and implement online outreach tactics, such as using social media, digital Bible studies, and online evangelistic campaigns (Domm 2020: 1).

The COVID-19 pandemic has significantly intensified existential inquiries and challenges to faith among congregants, leading to an increased demand for profound spiritual guidance from pastoral figures (Moodley & Hove 2023: 30). Individuals within faith communities have increasingly sought the guidance of their pastors to address complex theological dilemmas, particularly those related to reconciling faith with experiences of suffering and loss. Amid unprecedented uncertainty and change, congregants actively pursued pastoral counsel to explore avenues for finding meaning and purpose in their spiritual lives. For instance, church leaders engaged with members of their cell groups, reaching out to households to inquire about their daily experiences and assess their needs for assistance. Such outreach exemplified a ministry characterised by healing, compassion, and reverence. Furthermore, individuals who felt marginalised within the church community have experienced a sense of healing and belonging through these initiatives, as the proactive engagement of their leaders fosters a sense of accountability and acceptance (Masengwe 2023: 259).

Pastors were expected to articulate sermons and teachings that not only foster hope and resilience but also underscore the enduring nature of faith during times of adversity (Bankier-Karp, Cooper & Southcott 2024: 789). Furthermore, congregants turned to their spiritual leaders for insights on how to adapt faith practices to align with pandemic-related constraints, which may include the implementation of home worship or the establishment of personal prayer rituals. This shift highlights the critical role of pastoral leadership in addressing the evolving spiritual needs of congregational members during this challenging period (Johnston et al. 2022: 387).

### **3.8 Challenges pastors faced in providing care during the COVID-19 pandemic**

The COVID-19 pandemic presented pastors with unprecedented challenges as they sought to meet the spiritual, emotional, and physical needs of their congregations. The crisis disrupted traditional modes of pastoral care and brought about shifts in the congregation's needs and expectations. Pastoral care has traditionally relied on in-person interaction, which the pandemic rendered largely impossible due to social distancing guidelines and lockdowns. Visiting sick congregants in hospitals or their homes became unsafe or outright prohibited, leaving pastors unable to offer direct comfort to those in critical need. Also, administering sacraments like communion, baptism, and last rites, which often require close contact, was either delayed or altered significantly (Khosa-Nkatini 2022: 4).

The COVID-19 pandemic significantly exacerbated psychological distress among congregants, leading to heightened levels of stress, anxiety, and grief. In this context, pastors frequently emerged as the primary source of emotional support for their communities (Serafini et al. 2020: 529). Many congregants experienced the loss of family members and friends due to the virus, placing additional burdens on pastors who not only consoled their congregants but also grappled with their own emotional exhaustion (Serafini et al. 2020: 529). Furthermore, the rapid transition to virtual engagement necessitated that pastors acquire new technological skills to effectively maintain connections and provide comfort to bereaved congregants. The increase in isolation and pervasive fear among congregants resulted in a notable rise in mental health concerns, compelling pastors to address a range of issues that extended beyond their conventional training and expertise (Hwang, Rabheru, Peisah, Reichman & Ikeda 2020: 3).

The emergence of the need for virtual counselling necessitated that pastors rapidly adapt to digital communication tools such as live streaming and video conferencing platforms, which have become integral to their pastoral responsibilities. However, a significant number of clergy

members reported insufficient familiarity and proficiency with these technologies, presenting a formidable challenge in transitioning to the new digital landscape essential for effective pastoral care during the pandemic (Garrett 2024: 54). Some of the roles of a pastor encompass the counselling, prayer, and encouragement of congregants through Biblical scripture (Naidoo, Israel & Naidoo 2021: 14). This mission involves providing support to both individual members and families in practical and spiritual dimensions. Additionally, pastoral prayers have been extended to families via virtual platforms, thereby adapting traditional practices to meet contemporary needs in a digital format (Naidoo, Israel & Naidoo 2021: 14).

The COVID-19 pandemic presented a significant challenge for pastoral leaders, who found themselves grappling with the complex task of reconciling public health directives with the spiritual and emotional needs of their congregants (Johnston et al. 2022: 395). In regions where restrictions were gradually lifted, pastors faced the difficult responsibility of determining the appropriate timing and methods for reopening their places of worship. This decision-making process often attracted scrutiny and criticism, with divergent opinions emerging from congregants regarding whether pastors were too cautious in their approach or too lenient. For example, the transition to online ministry during unprecedented circumstances provided a platform for pastors to maintain communication with their congregants through various digital channels, including WhatsApp, SMS, and Facebook (Johnston et al. 2022: 384). Nonetheless, a significant portion of congregants experienced feelings of disconnection and emotional distress due to their physical separation from one another. Conversely, some individuals perceived this period as a temporary phase, recognizing the need to appreciate their ongoing spiritual unity as members of the body of Christ (Tagwirei 2022: 3).

Some pastors initiated community relief initiatives, including food distribution programs and emergency financial assistance, while simultaneously encouraging adherence to public health

guidelines and promoting vaccination efforts. These expanded responsibilities often placed pastors in unfamiliar and sometimes contentious positions, exacerbating the challenges they faced (Moodley & Hove 2023: 3, 6). The cumulative stress induced by the need to adapt to these new roles, manage increasing demands, and navigate their own personal fears and uncertainties contributed to a significant prevalence of burnout among pastoral leaders (KhosaNkatini 2022: 4). The continuous provision of care, conducted in the absence of traditional support systems, frequently left pastors feeling isolated and overwhelmed (KhosaNkatini 2022: 4). Furthermore, the extended hours allocated to coordinating virtual events, managing crises, and providing support to congregants took a marked toll on their physical and mental well-being (KhosaNkatini 2022: 5). Overall, the pandemic has highlighted the critical need for systemic support for pastors and has underscored the importance of addressing their health and wellness in order to sustain their vital roles within the community.

### **3.9 Conclusion**

The COVID-19 pandemic significantly disrupted traditional ecclesiastical practices, challenging the foundational elements of communal worship and fellowship. While the implementation of restrictions was essential for public health considerations, it underscored the profound social, spiritual, and emotional functions that religious institutions serve within their communities. The pandemic fundamentally transformed the landscape of pastoral care, presenting substantial challenges for clergy members while simultaneously reshaping the needs and expectations of congregations. Pastors encountered unprecedented obstacles, including the cessation of physical interactions, heightened emotional demands from congregants, and the expedited integration of digital technologies into ministry practices. In response to these challenges, congregants increasingly sought more holistic, accessible, and adaptive forms of care that comprehensively address their spiritual, emotional, and physical well-being.

The necessity for adaptation in the face of these disruptions has called for creativity, resilience, and a readiness to embrace novel methodologies for maintaining connections within the faith community. Although many of the changes initiated during this period may be viewed as temporary, the lasting implications of the pandemic have prompted religious institutions to reimagine their mission and operational frameworks within both physical and digital environments. The ongoing evolution of church practices highlights the need for a transformative approach to ministry that embraces both traditional and innovative avenues for fulfilling communal and spiritual needs.



## Chapter four

### Innovative approaches to pastoral care in the post-covid-19 era

#### 4.1 Introduction

The post-COVID-19 era has marked a profound shift in how pastoral care is delivered, challenging religious institutions worldwide to rethink their traditional roles and practices. For the Seventh-day Adventist Church, the pandemic not only disrupted routines but also amplified the urgency to address the evolving needs of its congregations (Noël 2022: 1). In South Africa, a country already grappling with deep-seated social and economic inequalities, the pandemic magnified these vulnerabilities, leaving faith communities searching for hope, connection, and tangible support. In response, the Adventist Church has risen to the challenge, adopting Information and Communication Technology (ICT) to provide spiritual, emotional, and physical care. ICT is the application of computers and telecommunications equipment to store, retrieve, transmit and manipulate data. The term also encompasses other information distribution technologies, which include radio, television, phones, computers, microphones, speakers, projectors, and CCTV (Closed Circuit Television) (Siamatendu & Phiri 2024: 26).

Currently, ICT serves three primary functions in Christian churches: presentation, multimedia, and communication. Presentation involves the display of songs, sermons, or church notices during services (Kathambi 2021). Multimedia encompasses various applications of audio, video, and other digital media generated through ICT, which may be utilised to enhance the worship experience, present video clips, or record segments of church meetings (Siamatendu & Phiri 2024: 26). ICT tools hold significant potential in facilitating the dissemination of the Gospel and the development of Christian knowledge in the contemporary digital era (Cardoza

2019: 220). The primary objective of ICT platforms within religious institutions is to foster and sustain relationships, engage with congregants, and attract new converts. ICT enables the rapid transmission of information to a broad audience, as digital platforms are accessible to anyone with internet connectivity (Siamatendu & Phiri 2024: 26). The internet serves as a key source for personal, social, and religious information, prompting religious institutions to allocate more resources toward strengthening their digital presence.

Various ICT platforms, particularly social networking websites, have emerged as effective tools for delivering fast, interactive, and impactful communication. Some of the most utilised ICT platforms in churches and Christian organisations today include Facebook, Twitter, Instagram, YouTube, email, blogs, Skype, Zoom, Google Plus, and WhatsApp (Siamatendu & Phiri 2024: 27). These platforms are widely employed for disseminating bulletins, posting sermons, sharing hymns, facilitating Bible studies, conducting Sabbath school lessons, and providing counselling services. By leveraging technology, fostering community ties, and addressing mental health and social disparities, the church has demonstrated resilience and adaptability in meeting the multifaceted needs of its members during and beyond the crisis (Graham 2020: 1).

In light of the evolving digital landscape, particularly in the post-COVID-19 era, the Seventh-day Adventist churches in South Africa have increasingly embraced innovative approaches to pastoral care. A significant number of churches adopted electronic platforms to maintain connections with their members, leading to the rapid and inevitable emergence of the digital church. This transition required churches to adapt various aspects of their ministry to the digital environment, including virtual worship services, online sacraments, digital sermons, electronic tithing, and digital mission outreach (Pillay 2020: 267). Digital innovations are reshaping how churches foster connections and facilitate meaningful interactions, particularly with younger

members (Ojo, Adelaja, Adio & Afolaranmi 2024: 62). This technological shift enables churches to extend their outreach beyond physical spaces, ensuring continuous engagement and spiritual connection. The following discussion explores key innovative approaches to pastoral care in the post-COVID era, focusing on live-streaming services, social media outreach, use of mobile applications, multimedia worship formats, the expansion of online counselling and support groups, and the role of social media in maintaining community connections.

#### **4.2 Hybrid worship models: In-person and Live-Streaming services**

Various challenges and decreased church attendance post-COVID prompted pastors to adapt to new realities. In a study conducted by Cain (2023), open to all Christian denominations, it was reported that all churches had to manage with reduced budgets and smaller congregations while striving to enhance social media engagement, improve live-streaming capabilities, and maintain various ministries and outreach initiatives (Cain 2023:101). One of the churches in the study by Cain (2023:101), expressed deep concern about the possibility of ceasing to exist due to the practical and theological challenges that have emerged in the post-COVID era. Seventh-day Adventist (SDA) churches worldwide adopted hybrid worship models, integrating both physical and virtual attendance options (Case & Ferguson 2023:2). The COVID-19 pandemic accelerated the adoption of these models, combining in-person and online services to maintain spiritual connectivity during periods of physical restriction (Büssing, Starck & van Treeck 2020).

Rather than striving to return to pre-pandemic norms, church leaders and their congregations prioritised establishing a sustainable and dynamic hybrid approach to worship and ministry (Sanou, Dietrich & Kern 2022:42). While some members remained resistant to digital

platforms, the digital sphere is now a permanent and essential component of the Church's mission field. As a result, churches committed to fulfilling the Great Commission cannot adopt a one-size-fits-all model but must instead embrace flexible and inclusive strategies to engage diverse congregational needs (Sanou et al. 2022:42; Činčala, Belyea & Cohelo 2022:31). This hybrid approach not only accommodates different preferences but also ensures that both physical and virtual participants are valued and included. As churches continue to navigate post-pandemic realities, the need for a well-structured hybrid model that balances physical and virtual worship experiences remains crucial (Sanou et al. 2022:42).

Although live-streaming services on platforms such as Facebook and YouTube have increased accessibility, many churches still prioritise in-person worship, dedicating most resources and attention to physical gatherings. This emphasis can inadvertently signal to online attendees that they are of secondary importance (Sanou et al. 2022: 43). Smaller congregations with limited resources may struggle to provide high-quality virtual services, which places them at a disadvantage compared to larger, better-funded churches (Isetti, de Rachewiltz & Pechlaner 2025: 7). Furthermore, offering live-streamed services without interactive components risks diminishing online engagement over time. Many congregants, particularly those with health concerns or other constraints, may continue to prefer virtual worship. Implementing an interactive hybrid model using platforms like Zoom can foster a more participatory environment, allowing online members to engage actively rather than passively consuming content (Činčala et al. 2022:34). This approach helps ensure that online attendees feel included in the worship experience and connected to the broader church community.

The widespread adoption of live-streaming platforms during the COVID-19 pandemic was particularly essential for maintaining connections, especially with younger members, despite physical restrictions (Činčala, Belyea & Cohelo 2022:34). Post-pandemic, churches continue

to leverage digital platforms such as YouTube, Facebook Live, and Zoom to extend their reach beyond physical church premises, fostering inclusivity for both in-person and virtual attendees (Chizhande 2024:72; Kruger 2021:8). This virtual participation allows young people to engage in religious activities from any location using smartphones, tablets, or computers. In addition to increasing accessibility for those unable to attend in person, live streaming allows diaspora communities to remain connected to their home congregations. This model also offers the advantage of archiving services, enabling members to revisit sermons or teachings at their convenience. Interactive features on these platforms, such as live chat, virtual prayer requests, and breakout rooms, enhance engagement by fostering a sense of participation and community (Ojo, Adelaja, Adio & Afolaranmi 2024:65).

Pastoral leaders and church councils as reported in the case study of Golden Gate SDA emphasised the importance of maintaining personal contact through digital platforms (James-Bell 2022:1). By establishing dedicated online spaces for members to share their challenges and needs, churches enhanced congregational engagement and support (Oliver 2022:5). Increased attendance and participation in virtual communities indicated a shift in how congregants adapted to new modes of worship. Interactive communication, such as online prayer rooms and discussion groups, provided opportunities for personalised spiritual care and community building (Danielsson 2020:11). This participatory approach fostered a sense of belonging and allowed members to remain actively involved in the church's life despite physical distance.

Hybrid ministries, which combine in-person and online services, have been recommended to cater to the diverse needs of congregations (Gorrell 2020:59). This model allows congregants to choose between attending services physically or participating virtually via platforms like Zoom, YouTube, or Facebook Live (Chizhande 2024:73). Interactive features, including live

chat, virtual prayer requests, and breakout rooms, offer virtual attendees' meaningful opportunities for engagement and fellowship. Online prayer rooms and digital discussion groups further personalise the worship experience, creating spaces for Bible study, prayer, and community building. This approach ensures inclusivity and flexibility, accommodating the congregants' varying needs and circumstances while maximising the digital infrastructure developed during the pandemic. For families with young children, the hybrid model offers the convenience of balancing home responsibilities with active worship participation (Ojo et al. 2024:6). Additionally, members travelling for work or other commitments can maintain their connection to local congregations through online services. Hybrid services have also expanded the church's reach, attracting new participants, including non-members and international viewers, and fostering opportunities for evangelism.

Actively engaging with online members is crucial for fostering a cohesive community, especially within the context of hybrid worship. One effective strategy for enhancing participation involves integrating youth into the church's digital ministry (Sanou et al. 2022:43). As digital natives, youth and young adults possess technological fluency, making them well-suited to support and expand the church's online presence. Involving young people in tasks such as installing, managing, and operating digital platforms provides a meaningful opportunity for skill development and spiritual engagement (Sanou et al. 2022:43). This inclusion not only strengthens the church's digital outreach but also fosters a sense of belonging among younger members. When youth feel their contributions and opinions are valued, they are more likely to remain connected to the church into adulthood (Ojo et al. 2024:63). By empowering the next generation through a Holy Spirit-led media ministry, churches can ensure a sustainable and dynamic future for pastoral care in the digital age (Sanou et al. 2022: 43).

### 4.3 Social media outreach

Social media is defined as a term used to describe a variety of web-based platforms, applications, and technologies that enable people to interact with one another online (Badmos 2014:1). Lee (2018:383) defines social media as innovative ways used by organisations to communicate with their stakeholders. Developing online relationships through social media has become an essential part of an organisation's public relations and communication strategies. In this context, religious organisations have recognised the increasing influence of social media and sought to leverage these platforms to maintain effective community engagement (Lee 2018:384). This observation was particularly relevant in light of the COVID-19 pandemic, during which lockdowns forced the closure of physical church buildings and led believers to conduct services in their homes (Reddy 2022:7). Churches which embraced social media were able to expand their church community into the virtual world (Badmos 2014:5) and thereby gain new opportunities for outreach and engagement. According to Giese (2020:347), many churches switched to streaming or recording their services, which allowed them to maintain a virtual presence and continue ministering to their congregations.

Among the most utilised platforms by churches and pastors are Facebook, YouTube, WhatsApp, Instagram, Twitter, and TikTok. The increasing use of social media networks has transformed communication patterns, with individuals engaging more frequently through these platforms for social interaction (Pew Research Centre, 2024:1). These platforms have been especially beneficial for fostering social participation among elderly individuals, providing them with a means to maintain connections with family members and friends over long distances. This is particularly important for older adults, who are continuously seeking ways to stay informed and connected. Social media has provided a convenient and effective tool for achieving this. (Büssing, Starck & van Treeck 2020:64).

These digital platforms, particularly WhatsApp, facilitated communication with pastors and fellow congregants, illustrating the church's success in fostering digital inclusion. WhatsApp is the third most common communication tool after Facebook and YouTube due to its ability to facilitate instant communication (Kamau 2019:347). This platform is effective for relaying messages from senior leaders to group members. For instance, individual members can be organised into specific WhatsApp groups, while area or zone leaders can form separate groups. A pastor may oversee multiple zones through a designated WhatsApp group, and all pastors may participate in a collective group with senior pastors. WhatsApp has become an essential communication tool for churches, and its use has significantly increased since the onset of COVID-19 (Reddy 2022). Furthermore, WhatsApp groups have become a popular tool for churches, allowing them to share daily devotionals, prayer requests, and announcements. The accessibility and familiarity of WhatsApp have made it an ideal platform for engaging diverse age groups (Kamau 2019:350). WhatsApp's interactive features allow congregants to respond to messages, share prayer points, and provide feedback, thereby creating a two-way communication channel that nurtures a sense of community.

In the context of religious communities, such as the Seventh-day Adventist Church, it was observed that older members particularly benefited from the church's digital platforms during the COVID-19 pandemic (Büssing, Starck & van Treeck 2020:64). Before the pandemic, more than half of Adventists attended weekly worship services regularly (Büssing, Starck & van Treeck 2020:65). However, the pandemic led to a notable shift towards digital platforms, with local, regional, and international services programming strengthening the faith of congregants despite physical restrictions. While Adventist Youth programs struggled to reach older generations due to their focus on younger audiences, these social media platforms helped maintain the connection of youth to their faith and church community. This suggests that digital

communication was relevant for individuals across all age groups, underscoring the universal role of social media in maintaining spiritual engagement during and after the pandemic (Büssing, Starck & van Treeck 2020:65).

Post-COVID-19, many churches have resorted to using social media to continue preaching to their congregations. According to Edmondson (2017:3), for the church to effectively use the various social media platforms, there is a need for strategic planning, dedicated leadership, and clear objectives to achieve its goals. After putting these elements in place, platforms like YouTube, Facebook, Instagram, Twitter, and TikTok have become vital tools for engaging youth and promoting community involvement. Through sharing inspirational content, promoting events, and facilitating discussions, churches have been able to create online communities that foster spiritual exploration and collaboration (Ojo et al., 2024:8). These platforms provide an interactive medium that resonates with younger generations, enabling them to engage in their faith in a format they are familiar with.

Facebook pages and groups have been instrumental in broadcasting live sermons, hosting virtual Bible studies, and sharing inspirational posts. The comment sections and discussion threads on these platforms have provided members with opportunities to interact, further strengthening their sense of belonging within the digital church community. Social media platforms played a crucial role in helping church members maintain connections with their faith communities during the COVID-19 pandemic. These platforms allowed for spiritual engagement, particularly among older and younger members, although the overall impact on emotional and spiritual well-being was less pronounced. The findings of Büssing et al. (2020:65) suggest that while social media is an essential tool for pastoral care in the post-pandemic era, its role in enhancing well-being remains complex and requires further exploration.

#### 4.4 Mobile applications

Increasingly, churches are developing mobile applications to support youth engagement and spiritual growth (Cardoza 2019). These apps offer a variety of features, including access to sermons, devotionals, Bible study materials, prayer requests, and event schedules. According to Deutsch (2018: 387), mobile apps give congregants easy access to religious resources, encouraging engagement beyond traditional church environments. Mobile apps provide a centralised hub for church-related activities, allowing users to access information at their convenience. Push notifications alert users about upcoming events, prayer requests, and new resources, fostering regular engagement (Deutsch 2018:388). Some church applications include interactive features like personalised devotionals and Bible reading plans, enabling users to customise their spiritual journey (Ojo et al. 2024: 63). The official mobile applications available on the Adventist Chaplains website, used by Adventists pastors for pastoral care include Ellen G. White (EGW) Writings, Adventist Giving, Sabbath School and Personal Ministries, College and University Dialogue, Adventist Yearbook, Adventist Review TV and Hope Channel (General Conference Chaplaincy Ministry (GCCM) 2015:1).

The Ellen G. White Writings mobile application enables congregants to download the complete published writings of Ellen G. White. The EGW Writings application enables users to read, search, and listen to the complete published writings of Ellen G. White (GCCM 2015:1). Multiple additional resources are available, such as fourteen bible versions and dictionaries. With over 800,000 pages of resources available in the Ellen G. White Estate, it is the most complete Adventist resource available (Johnson 2009:1).

The Adventist Giving mobile application allows members to return tithe, first fruits and offerings even when they cannot attend church (GCCM 2015). The Adventist Review TV

application allows viewers to watch faith-based, high-quality short videos on cooking, health, the environment, current events, prophecy, business, music, news updates and children's programs (GCCM 2015:1).

The Hope Channel is a global television network with more than fifty channels offering programs on holistic Christian living, faith, health, relationships, and community (GCCM 2015:1). From the Hope Channel mobile application, viewers can watch the live broadcast of various global programs. Offline playback enables viewers to download episodes right to their devices so that they can watch them later, even without the internet (GCCM 2015:1).

The Sabbath School and Personal Ministries application allows users to read the Sabbath School Bible study guide wherever they are (GCCM 2015:1). It has Sabbath School lessons for all ages including children and youth, and these lessons are Cradle Roll, Kindergarten, Primary, Junior Early Teen, Cornerstone (15-18 years). It also has Sabbath School resources for leaders and teachers and Personal Ministries resources to aid in soul-winning and discipleship (GCCM 2015). The College and University Dialogue mobile application is an international journal of faith, thought, and action published by the Committee on Adventist Ministry to College and University Students (AMiCUS) in cooperation with the thirteen world divisions of the Seventh-day Adventist Church (GCCM 2015). Dialogue seeks to nurture faith among university students and young professionals. It deepens the readers' commitment to Christ, the Bible, and Adventist mission. Furthermore, the application articulates biblical responses to contemporary issues in the arts, humanities, philosophy, religion, and the sciences while offering practical models of Christian service and outreach (GCCM 2015).



#### 4.5 Multimedia worship formats

Modern worship services are increasingly incorporating multimedia technology to create immersive and engaging experiences (Ojo et al. 2024: 63). This approach combines traditional worship practices with advanced visual, auditory, and interactive elements. Multimedia formats provide a dynamic environment where congregants experience worship through multiple senses, fostering deeper spiritual engagement and understanding (Ojo et al. 2024:64). The importance of multimedia for churches is in its capacity to augment communication, outreach, engagement, and worship experiences (Spencer 2025:1). Churches expand their reach to a broader demographic using live streaming and online material by using multimedia, ensuring accessibility for anyone unable to attend physically (Afolaranmi, 2019:3). Church media assists by efficiently transmitting teachings, promoting spiritual development and comprehension via recorded sermons, educational resources, and inspiring content.

Multimedia ministry the use of audiovisual equipment, such as videos, sound systems, projectors, and digital media platforms, to enhance and reinforce the church's message and activities in a church setting (Afolaranmi 2019:1). Multimedia for churches facilitates community participation by disseminating narratives, occasions, and personal accounts, cultivating a feeling of inclusivity and affiliation among participants (Fisher 2023:1). Multimedia augments the dynamism and engagement of worship services and activities, enriching the church experience through incorporation of visual and audio elements that make services more engaging and accessible. The importance of multimedia for churches is in its capacity to augment worship, broaden outreach, and cultivate community participation (Ojo et al. 2024:63). Projecting hymn lyrics or scripture passages allows the congregation to follow along easily, while audio systems ensure that sermons and music are audible. Multimedia

facilitates diverse educational opportunities, such as online bible studies, religious webinars, and digital libraries of sermons and teachings (Afolaranmi 2019:3).

Multimedia helps persons with impairments access church services and resources. Sign language interpretation films for the hearing impaired, for example, or audio recordings for the visually impaired, are used in church media campaigns (Amenyedzi 2024:3). Multimedia in churches is implemented using a mix of technical infrastructure, such as sound and projection equipment, streaming cameras, digital platforms, websites, social media, and online hosting services (Afolaranmi 2019:6). Incorporating multimedia for churches supports diverse styles of learning and engagement. Some find visual elements more impactful, while others connect more deeply through listening. Multimedia enriches the worship experience for a broader range of individuals by catering to varied preferences (Afolaranmi 2019:3).

The impact of visuals and audio for worship services enhances the overall worship experience and engagement. Worship services become more immersive, accessible, and effective in conveying the religious message with high-quality audio and visual elements (Afolaranmi 2019:1). Visual media, adds a dynamic and engaging element to worship (Afolaranmi 2019:3). Churches use projector screens to display images, videos, and slideshows that correspond to hymns, sermon points, scripture readings, enhancing the visual engagement of congregants (Ojo et al. 2024: 63). Churches have increasingly invested in audiovisual technology to enhance the worship experience for virtual participants, making remote worship more immersive and accessible (Thumma 2023: 1; Seiberling 2020: 2). Digital audiovisual technologies have transformed worship by integrating aural and visual elements, creating a powerful and immersive experience for both in-person and virtual attendants. This integration allows

worshippers to experience services on personal devices and large screens, bridging the gap between traditional and modern worship practices (Ingalls 2018).

There are a number of ways that churches use video productions. Recording and broadcasting sermons is an everyday use of video in churches. It allows members who are unable to attend in person to participate remotely. Highlights from worship services are shared on social media or the church website (Afolaranmi 2019:3). Churches create video summaries of events, retreats, or special services. Video summaries are used to announce upcoming events or to showcase past activities to the congregation and potential new members (Ojo et al. 2024). Video is a powerful tool for education within the church. It includes training videos for volunteers, educational content for Bible studies or Sabbath School, and even online courses or seminars. Many churches use video production to create content shared online to spread their message, reach a broader audience, and invite others to join their community. Short, engaging videos are created specifically for social media platforms to engage with younger audiences, provide daily inspiration, or share quick updates and messages from church leaders (Aziz 2021b). Videos showcasing various church ministries, such as youth, outreach, or mission work, help highlight the efforts and encourage participation or support from the congregation.

High-quality audio is crucial for clarity and comprehension during services. Good sound systems ensure that sermons, readings, and musical elements are heard throughout the worship space, regardless of the listener's location. The clarity is essential for the congregation to fully engage with and absorb the spoken word and music, which are central to the worship experience. Effective audio systems accommodate a range of auditory needs, ensuring that services are accessible to all attendees, including the ones with hearing impairments. Worship

teams increasingly incorporate digital instruments and sound effects to enrich the musical component and create a more immersive worship experience (Ojo et al. 2024: 64).

#### **4.6 Online counselling and support group websites**

Pastoral counselling provides spiritual, emotional, and psychological support to individuals and communities (Ojo & Odeleye 2024:48). In African societies, pastoral care has traditionally relied on in-person, community-based approaches rooted in the social structure. However, the COVID-19 pandemic disrupted these practices due to social distancing, making it difficult for pastors to offer physical accompaniment during times of illness, trauma, and end-of-life care (Moodley & Hove 2023c:477). This challenge accelerated the adoption of online counselling and support groups, which became essential in sustaining pastoral care. The incorporation of technology into pastoral counselling marks a transformative shift in delivering emotional and spiritual care (Ojo & Odeleye 2024, 41). While digital tools had already been part of pastoral work, the pandemic heightened their necessity, offering crucial channels for maintaining church-congregant relationships (Moodley & Hove 2023:477). Platforms like Zoom, WhatsApp, video calls, and phone calls enabled safe and affordable communication. These digital methods allowed congregants to remain connected with their faith communities from the comfort of their homes.

Although virtual engagement increased participation for some, others experienced a spiritual decline due to the lack of physical fellowship (Osei-Tutu et al. 2021b:1). This decline raises concerns, as religion and spirituality play an essential role in mitigating mental health conditions, such as depression, substance abuse, and stress-related disorders. (Moodley & Hove 2023: 477) The absence of traditional pastoral services, such as caring for and burying loved ones, caused significant psychological distress. The swift adoption of online platforms

during the pandemic showcased their effectiveness in reducing emotional distress. These digital innovations should continue to be part of post-pandemic pastoral care to support the mental well-being of congregants (Moodley & Hove 2023: 477).

Online technologies such as video calls, emails, and instant messaging extend pastoral care to individuals facing health issues or living in remote areas. These technologies not only provide a means of communication but also reduce stress by allowing real-time, face-to-face conversations. In South Africa, evening online services have enabled vulnerable groups, including the elderly, single mothers, and rural residents, to join small groups without leaving their homes (Moodley & Hove 2023: 477). These intimate groups foster discussions on mental health, identify individuals needing help, and facilitate timely interventions. Combining virtual and in-person pastoral care allows continuous support for those unable to attend physical gatherings (Moodley & Hove 2023: 477).

In the post-COVID era, online counselling platforms have become a crucial component of pastoral care (Ojo & Odeleye 2024). They provide safe, anonymous environments where people can seek spiritual and emotional guidance without fear of social stigma (Ojo & Odeleye 2024:47). Digital communities enhance a sense of belonging and provide accessible resources for those requiring care. Teletherapy, which delivers counselling through phone and video calls, is particularly valuable for individuals facing geographical and financial barriers (SADAG 2020:1). It also played a vital role during the pandemic in providing a safe platform for addressing mental health issues (Pretorius 2021:270). Social media platforms have also reshaped pastoral counselling. Religious leaders use platforms like Facebook, Twitter, and YouTube to share inspirational content, conduct virtual counselling, and engage with their communities (Afolaranmi 2021). These platforms facilitate constant connection during crises, while online support groups offer spaces for individuals to share their experiences and seek

peer and pastoral support. The flexibility of these digital platforms ensures that pastoral care remains accessible and responsive to the diverse needs of congregants, even in a post-pandemic world.

#### **4.7 The limitations of solely online pastoral care**

While digital platforms have revolutionised pastoral care delivery, there are scholars (Moodley & Hove 2023d; Tagwirei 2022b; Danielsson 2020b) who indicate that online contact is not enough and should be complemented with in-person contact. According to (Tagwirei 2022: 1), the traditional ministry of physical presence, which provides face-to-face care and reassurance of God's love, is indispensable. These critiques reflect a growing recognition in theological and pastoral literature that embodiment and physical presence remain central to authentic spiritual care. Giese (2020:347) raises critical concerns about the nature of the online church, questioning whether virtual platforms can provide the same sacred and communal experience that defines traditional worship spaces. The physical gathering of believers is not merely a convenience but a theological act, reflecting the incarnational nature of Christian fellowship. Likewise, Osei-Tutu et al. (2021:1) highlight that many pastors and congregants experienced spiritual detachment and emotional isolation during lockdowns, emphasising that the absence of face-to-face interaction weakened relational bonds and pastoral effectiveness.

Danielsson (2020:11) adds that while technology can serve as a tool for maintaining contact during crises, it often lacks the depth of connection that comes from physical presence, particularly in pastoral contexts such as grief counselling, hospital visits, baptisms, and funerals. Moodley and Hove (2023:477) reinforce this point by reflecting on the psychological harm caused by the absence of traditional pastoral care during the pandemic. They note that restrictions prevented pastors from performing vital ministries such as comforting the sick or conducting funeral activities that are critical for emotional healing and spiritual closure. These

findings affirm that the spiritual and psychological impact of embodied ministry cannot be replicated digitally.

Furthermore, Gorrell (2020: 59) and Siamatendu and Phiri (2024:26) caution against the potential exclusion of vulnerable populations in a digital-only approach. Gorrell (2020: 59) recommends hybrid ministries because digital worship may alienate those without access to reliable technology or the skills to use it effectively. This is particularly relevant in the South African context, where rural and economically disadvantaged communities face barriers to full digital inclusion. Therefore, while online pastoral care offers convenience and reach, it should be viewed as a supplement rather than a substitute for embodied ministry. A balanced, hybrid model that incorporates both digital innovation and physical presence can ensure a more inclusive, responsive, and theologically grounded approach to post-pandemic pastoral care (Sanou, Dietrich & Kern 2022:42).

#### **4.8 Summary**

The COVID-19 pandemic radically transformed the landscape of pastoral care, ushering in a new era for the church. The church responded to the unprecedented disruption not with withdrawal but with innovation, embracing technology as a means to continue providing spiritual, emotional, and practical support to its congregants. The use of Information and Communication Technology (ICT) emerged as a critical vehicle for adaptation and resilience, ensuring that pastoral care remained relevant and accessible in a time of global crisis. Central to this transformation was the adoption of hybrid worship models that seamlessly blend in-person and virtual experiences. Live-streaming services via platforms such as Facebook, YouTube, and Zoom allowed congregants, particularly those with mobility challenges, health concerns, or those in diaspora communities, to remain connected to their faith communities (Sanou, Dietrich & Kern 2022:42; Činčala, Belyea & Cohelo 2022:34).

Despite initial resistance, these digital formats have now become integral to church operations, promoting inclusivity and sustained spiritual engagement. However, disparities in technological capacity between large and small congregations highlight the need for greater resource-sharing and capacity-building across church communities (Isetti, de Rachewiltz & Pechlaner 2025:7). The strategic use of social media platforms further amplified the church's capacity for engagement. WhatsApp, Facebook, and YouTube became vital tools for prayer groups, sermons, devotionals, and community updates, enabling real-time interaction and fostering a sense of belonging (Reddy 2022; Büssing, Starck & van Treeck 2020:65). For both youth and elderly members, social media created bridges across generations, preserving communal ties during lockdown and beyond. While studies (Ojo et al. 2024) show that digital media helped maintain spiritual engagement, they also point to the complex and still-evolving nature of its impact on emotional and psychological well-being (Büssing et al. 2020:65).

Mobile applications offered an even more personalised form of digital discipleship by giving users access to extensive resources for spiritual growth and convenience in religious participation (Ojo et al. 2024:63). These applications empowered members to engage with theological materials, contribute tithes, and partake in faith-based activities at their own pace and location (GCCM 2015). The development and use of mobile apps indicate a significant shift towards an on-demand model of spiritual consumption that aligns with contemporary digital habits (Deutsch 2018:387). In tandem with these digital tools, the integration of multimedia worship formats including audiovisual technologies, recorded sermons, and visually enhanced presentations further enriched the worship experience (Ojo et al. 2024:63). By making services more interactive, engaging, and accessible, multimedia not only facilitated learning but also addressed the needs of people with disabilities and different learning styles.

This democratisation of worship underscores the church's commitment to inclusivity and dynamic community engagement in a digitally evolving society.

Furthermore, the growth of online counselling and support groups has redefined pastoral care, especially in the realm of mental health and emotional support. During the pandemic, traditional face-to-face pastoral models became impractical, leading to the emergence of virtual support through Zoom, WhatsApp, and other platforms (Moodley & Hove 2023:477). These digital spaces allowed members to seek counselling, share experiences, and receive spiritual guidance in safe and anonymous ways. Importantly, the church's willingness to blend in-person and digital approaches in its counselling ministry shows a progressive understanding of the diverse emotional and psychological needs of its members (Ojo & Odeleye 2024:48).

In conclusion, the COVID-19 pandemic did not dismantle the pastoral structures; rather, it accelerated a necessary evolution. Through ICT, hybrid worship, social media outreach, mobile applications, multimedia enhancements, and virtual counselling, the church not only maintained but expanded its pastoral reach. While challenges remain, particularly concerning digital fairness and theological adaptation, the innovations embraced during the pandemic present an opportunity for the church to build a more inclusive, adaptive, and resilient model of pastoral care. As the church continues its mission, it must now consolidate these gains by investing in technological infrastructure, training digital leaders, and refining hybrid ministry strategies to meet the evolving spiritual and emotional needs of its congregants.

## **Chapter five**

### **Analysis of interviews**

#### **5.1 Introduction**

Seventh-day Adventist pastors in South Africa were forced to quickly rethink conventional models of worship, community involvement, and spiritual care due to the COVID-19 pandemic, which presented an unprecedented challenge to pastoral ministry. This chapter provides an examination of how twelve pastors handled the crisis by analysing their qualitative survey responses. Their observations show a complicated interaction between creativity, resiliency, and structural constraints influenced by theological beliefs, generational divides, and regional inequalities. The findings are organised thematically, progressing from short-term crisis responses (such as grief support and digital adaptation) to longer-term lessons about mental health integration and hybrid ministry. The analysis is anchored by direct quotes from the past, and patterns and outliers are highlighted through comparative discussion. This chapter offers a framework for future pastoral resilience while documenting past adaptations through an analysis of achievements and challenges.

#### **5.2 Study design and participant selection**

To explore the lived experiences and adaptive strategies of pastors in the Seventh-day Adventist (SDA) Church during and after the COVID-19 pandemic, an online survey was developed and deployed using the ArcGIS Survey123 platform. This survey instrument allowed for the collection of structured and qualitative data simultaneously, facilitating thematic analysis of open-ended responses while also capturing demographic and contextual information.

### **5.2.1 Sampling method**

The sampling approach was purposive (Campbell et al. 2020: 652), targeting only ordained and active pastors serving within the Southern Africa Union Conference of the Seventh-day Adventist Church (SAU) in South Africa. This regional specificity was essential in ensuring contextual relevance, as it allowed to focus on a geographically and administratively defined subset of the broader church body. The SAU, being representative of both urban and rural pastoral contexts within South Africa, provided a balanced demographic and ministerial landscape.

In total, 12 pastors consented to participate in the study. Consent was obtained via agreeing and signing the University of Pretoria Proforma Consent Form (Appendix 1), which highlights a clear statement of voluntary participation and data confidentiality. The relatively small but focused sample allowed for in-depth insights while remaining manageable for thematic synthesis.

### **5.2.2 Data collection method**

The Survey123 questionnaire was deployed online, and a link was shared directly with selected pastors through email and WhatsApp platforms. Participants were asked to complete the form at their convenience within a set period. The form was optimised for both desktop and mobile devices, allowing flexibility of access in accordance with participants' digital infrastructure.

All interviews were conducted asynchronously via the online form, meaning participants could take their time responding to open-ended questions thoughtfully, which in turn enriched the depth and authenticity of the responses.

### 5.2.3 Research instrument and thematic framework

The survey contained both closed and open-ended questions, with a strong emphasis on qualitative responses that would reveal individual perspectives, innovations, struggles, and theological interpretations. The survey included the following questions:

- *How did your ministry change during the COVID-19 lockdown?*
- *What digital platforms (e.g., Zoom, WhatsApp, YouTube, social media) did you use, and how effective were they?*
- *How did you respond to the grief and loss experienced by congregants during the pandemic?*
- *What was your experience in addressing mental health concerns during this time?*
- *What are the most significant lessons learned about pastoral care post-COVID-19?*
- *Do you foresee permanent changes in how the ministry is conducted going forward?*

These open-ended prompts allowed respondents to reflect deeply and offer narratives, which were later analysed thematically. Closed-ended components gathered metadata such as district, age group, years in ministry, and general familiarity with technology.

### 5.2.4 Deployment and ethics

The survey was hosted entirely online via Survey123, a platform known for its geospatial capabilities but also used effectively for structured data collection. Pastors were notified in advance, and the nature and purpose of the study were clearly communicated. Participation was voluntary, and the data collected was anonymised in reporting to preserve the privacy of each respondent.

### **5.3 The challenge of social isolation and pastoral responses**

The physical ties that are essential to communal life in the Seventh-day Adventist tradition were abruptly severed during the COVID-19 pandemic due to lockdown measures. Almost immediately, weekly worship sessions, Sabbath School, midweek prayer meetings, and communal meals, all essential components of the Church's social and spiritual fabric were discontinued (Noël 2022: 1). The Adventist community model, which emphasises face-to-face interaction, intergenerational worship, and volunteer work, was severely challenged by this disruption. In response, pastors were challenged to devise different ways to keep their members' friendship and spiritual unity intact. These adjustments were not consistent, and the range of responses showed notable differences in the technological infrastructure, the resources that were available, and the unique requirements and traits of each congregation. In order to facilitate worship and Bible study, pastors in more affluent or urban congregations frequently made the quick switch to online resources like Zoom, Facebook Live, or YouTube (Pillay 2020: 267). Pastors in rural or economically underprivileged areas, on the other hand, were forced to use more accessible channels, like phone calls, SMS messages, or door-to-door delivery of printed devotional materials.

Furthermore, a congregation's demographic composition significantly influenced the type and effectiveness of these options. While younger and more tech-savvy groups adapted to online formats more easily, congregations with a larger percentage of senior members frequently needed more individualised, low-tech communication. The variety of pastoral approaches demonstrates the ingenuity and tenacity of Church leadership as well as the challenging landscape of crisis ministry, which is influenced by socioeconomic inequalities, cultural norms, and digital divides.

### 5.3 Digital innovation as a lifeline

One respondent from the study utilised a media-savvy strategy, which strategically used national television as a platform for ministry; it is one noteworthy example of adaptive pastoral leadership. The pastor's sermons were broadcast far beyond the boundaries of his local congregation thanks to a partnership with GsuTV, a widely accessible broadcasting channel. Through this creative use of mass media, he was able to reach a national audience and transcend geographic boundaries with his spiritual influence. From the responses to the survey questionnaire, this pastor stated “people from various provinces called for counselling because my phone number appeared on the screen.” By converting passive viewing into active pastoral engagement, this seemingly straightforward gesture produced a potent feedback loop. The surge of requests for help and direction revealed the unrealised potential of traditional media as a means of fostering spiritual ties while limiting physical mobility. It also highlighted the growing role of public broadcasting in expanding the Church's visibility and accessibility.

By using Zoom to set up virtual small groups, another pastoral respondent from the survey indicated that they embraced a digitally structured approach to pastoral care. These virtual meetings blended the social interaction of Bible study with the essential purposes of prayer meetings. The pastor emphasised the value of creating an intentional community because he was aware of the emotional and psychological costs of extended social isolation. From one of his responses, he stated that “We created online spaces for sustained connection because we recognised that lockdowns could deepen isolation”. For many, these organised online meetings served as lifelines, offering emotional support, spiritual sustenance, and a sense of routine. Because participants could join from home without the logistical hassle of transportation or health risks, the digital format, in some cases, allowed for more frequent attendance than in-person meetings had previously permitted. This highlights how pastors handled the difficulties

of lockdown ministry in a variety of creative ways. To address the spiritual and emotional needs of their congregations, these leaders rethought their roles and platforms, whether through intimate online groups or national television. They are key examples of how pastorally sensitive technological innovation can preserve and even deepen the ties that bind the faith community during difficult times.

#### **5.4 Limitations of digital solutions**

From the analysis of the study findings, respondents showed that the digital ministry's innovations and obvious advantages were not universally adopted. The effectiveness of online platforms was hampered by major challenges that many pastors faced. For example, a respondent from the survey described how digital efforts were directly hampered by infrastructural instability. He clarified, "When the electricity failed, communication collapsed," underscoring the digital ministry's precarious reliance on a steady supply of power. Even the most basic online engagement may be disrupted in load-shedding-prone or underdeveloped power infrastructure areas, rendering digital outreach impossible or at best unreliable.

These difficulties were especially felt by pastors in rural areas. Congregants in many of these situations did not have access to the internet or the computers, smartphones, or tablets needed to take part in virtual services (Johnston et al. 2022: 395). Lockdowns exacerbated the digital divide, which was already noticeable prior to the pandemic. These pastors were consequently forced to use more analogue means of communication, such as frequent phone conversations, handwritten notes, and even socially distant door-to-door visits. Despite taking more time, these methods enabled a more contextually aware and individualised style of ministry that maintained human connections that were impossible to achieve with digital tools (Domm 2020: 1).

Another obstacle was reluctance to use technology, particularly among the elderly attendees. Serving in a district with a large senior population, one pastor observed a prevalent opinion: “Many found screens impersonal”. They yearned for the physical contact of handshakes and communal hymnals. For these people, the emotional warmth and sensory depth that characterise traditional Adventist gatherings were absent from virtual worship. For many, the spiritual experience was lessened by the lack of tangible rituals like passing the peace, group singing, and in-person fellowship. This realisation emphasises that while digital tools can help people connect, they cannot completely replace the embodied, multisensory nature of worship in person. This demonstrates that, although a useful addition, digital ministry is not a cure-all. The results stress the significance of context-sensitive ministry strategies that take into account cultural preferences, technological differences, and infrastructure realities. To ensure that no member of the faith community is left behind, any hybrid ministry model must be adaptable enough to incorporate both low-tech and high-tech solutions.

### **5.5 The hybrid experiment**

Some pastors chose a hybrid strategy that combined the advantages of both digital and physical ministry, acknowledging the drawbacks and possibilities of each. At the forefront of this shift were half of the pastors in the study, who experimented with what one respondent referred to as “hybrid ministry”. This strategy aimed to strike a balance between the indispensable components of in-person worship and technological engagement. To keep a sense of constant communication, one pastor, for example, shared devotionals, prayer requests, and voice notes with young people via apps like WhatsApp. He believed that some sacraments retained their power most fully in embodied community, so he kept physical gatherings for essential rituals like the communion service, albeit small and socially remote.

However, putting such hybrid models into practice necessitated a great deal of logistical planning and flexible leadership. Within a single congregation, pastors had to accommodate a range of preferences: some were excited about digital interaction, while others were wary of screens and virtual formats. Both ingenuity and compromise were required to resolve this conflict. After initially doubting the efficacy of digital ministry, two respondents from the study admitted that some facets of pastoral care could not be digitalised. They pointed out that “visitation remained key”, “even if masked and distanced”, highlighting the fundamental human need for physical presence during times of joy, sorrow, or crisis. Their observation confirms that while digital tools are useful, they are not enough on their own to preserve the spiritual and emotional ties that pastoral ministry is based on.

A deeper and more intricate digital divide one that is based not only on access to technology but also on generational, cultural, and even theological differences, was also made evident by the wider adoption of hybrid ministry. Members in rural communities or older age groups were often marginalised, whereas urban congregations and younger, tech-savvy members embraced online services with enthusiasm. The virtual Church typically felt alien, disembodied, or even unreachable to them. Screens were unable to adequately capture the cultural significance of tactile experiences such as sharing hymnals, physically greeting one another, and taking part in group meals. This brought to light a crucial issue facing post-pandemic ministry, that of creating inclusive models that respect both the timeless significance of embodied faith practices and digital innovation. Instead of just being a short-term fix, hybrid ministry has emerged as a possible model for the Church's future. However, a thorough grasp of community needs, fair resource distribution, and a readiness to maintain a creative tension between tradition and technology will all be necessary for its success.

## 5.6 Grief support in a time of restricted mourning

Respondents in the study highlighted that among the most deeply affected religious and cultural practices during the COVID-19 pandemic were funeral rites. In South African society, funerals hold profound cultural and spiritual meaning, serving not only as a moment to bid farewell to the deceased but also as a vital communal gathering to provide collective support for the bereaved (Khosa-Nkatini 2022: 5). Pastors described these events as rich, multi-layered rituals encompassing prayers, sermons, hymns, testimonies, processions, and shared meals, each contributing to a holistic sense of closure and communal solidarity.

However, the onset of pandemic-related lockdowns and public health mandates abruptly interrupted these practices. Government-imposed curfews, restrictions on the number of attendees, and stringent social distancing regulations meant that funeral ceremonies were stripped down to their barest essentials (Musoni 2023: 1). Pastors who participated in the study recounted the emotional toll this had on both themselves and their congregants. Many families, they noted, were unable to carry out traditional mourning customs. This included the inability to host extended vigils, community singing, or eulogies by multiple speakers, which are elements considered essential in conveying respect and finality.

Several pastors bemoaned the experience of overseeing what they called “incomplete farewells”. As one respondent put it, “There was grief upon grief, grief for the person, and grief for the ritual that could not be”. This sense of spiritual and cultural incompleteness was compounded by the absence of physical touch and presence, which traditionally provide comfort during times of loss. Masked, gloved, and often standing at a distance, pastors were expected to offer spiritual reassurance in ways that felt foreign and emotionally insufficient. One respondent shared how saying a prayer beside a coffin under a tent, with only a handful of masked mourners present, felt like “delivering comfort through a veil of separation”.

To mitigate the emotional strain, some pastors attempted to adapt. Respondents noted using phone calls, live-streamed services, and WhatsApp condolences to reach bereaved families. In some cases, follow-up home visits were conducted once lockdown restrictions eased, in an effort to provide postponed emotional closure. While these innovations offered some relief, pastors agreed they could not fully substitute the embodied, tactile nature of traditional funerals. One pastor remarked, “Even a heartfelt call cannot replace the silence of sitting next to someone in their grief”.

This disruption of funeral practices led both clergy and congregants to confront difficult theological and pastoral questions. Respondents reflected on how to guide individuals and families through grief without the familiar scaffolding of ritual. The situation forced a reconsideration of what it means to offer spiritual closure, and how to uphold the dignity of the deceased in constrained conditions. The responses underscored the critical role that funeral rites play not only in honouring the departed but also in preserving the mental and spiritual health of the living. The pastors’ testimonies suggest that these rituals are not merely ceremonial, but essential acts of communal healing.

### **5.7 Improvised rituals and tele-counselling**

Like many ministers during the pandemic, respondents in the study modified sacred rituals to adhere to health regulations, which significantly changed the customary funeral structure. He frequently provided services that were restricted to "immediate family only," with time restrictions imposed by public health regulations and attendance caps. The extensive, multi-day rituals that are usually practised in many South African communities, such as viewings, all-night vigils, and involvement from extended family and the community, were in contrast to these adapted ceremonies. These customs were shortened, which went against cultural norms and left many families with the impression that their loved ones had not been given a fitting

send-off. Pastors adapted to the needs of their congregants so as to bridge the spiritual and emotional gap created by these shortened services. For instance, one pastor extended his ministry by providing grieving people nationwide with emotional and spiritual support via tele-counselling. He was able to comfort people from different provinces who felt alone in their grief by using this remote approach, which allowed him to reach beyond the boundaries of his congregation. This pastor established a lifeline for people unable to grieve in the community's embrace by disclosing his contact details during televised sermons.

It is interesting to note that this support strategy had unanticipated advantages. For example, one respondent in the survey noted that more profound emotional honesty was occasionally encouraged by the distance that phone communication imposed. He observed, “People shared more openly over the phone than in person”, implying that people were more comfortable expressing vulnerability because they felt safer or more anonymous when speaking remotely. Many people found the courage to express fears, doubts, and raw emotions they might have kept to themselves when they were not subjected to the social pressures of face-to-face interaction, such as the need to remain composed or appear spiritually strong. These pastors' flexible responses highlight the important realisation that, despite the disruption of customary practices, the pandemic created new pastoral spaces that made it possible for various kinds of care and connection. Despite their flaws and frequent emotional difficulties, these innovations show a ministry sensitive to the changing realities of crisis grief, providing presence and consolation in unusual but significant ways.

### **5.8 The toll of prolonged grief**

The emotional toll of interrupted mourning customs was felt profoundly by many pastors and congregation members. One respondent in the study talked about the long-term psychological and spiritual effects of these losses with deep sadness. He bemoaned that they “lost many

members”, not necessarily to death but to what he called unresolved sorrow, that is, grief that lacked a suitable outlet or a resolution. Many people found it difficult to cope with their suffering without the help of group rituals, which resulted in their withdrawal from church activities or ongoing emotional problems. Many mourners carried their grief in silence and solitude because there were no common grieving rituals, such as embracing family at the graveside, singing through tears, or hugging a widow. Some pastors responded by looking for different venues for healing and remembrance. For instance, in order to honour those who had died during the lockdown, one pastor started holding memorial services online. These online events, which featured scripture readings, recollections, and silent prayer times, brought family and friends together via Zoom or livestreams. Although these initiatives were frequently poignant and offered a certain level of connection, they were unable to completely capture the intensity of group grieving in actual gatherings. Another Pastor acknowledged, “We couldn't pass a tissue through the screen, but you could see the pain in their pixelated faces”.

The limitations of digital intimacy are encapsulated in this moving reflection. Technology made it possible to continue outreach and ministry, but it also highlighted how important embodied presence is in times of profound grief. Many people were left feeling emotionally stranded because they were unable to provide physical comfort to those who were grieving, such as a shoulder touch, a shared silence, or just the act of crying together (Magezi 2022: 1; Ngema, Buthelezi & Mncube 2021: 1). For pastors, whose job often involves being physically present during times of crisis, this detachment was especially upsetting. Online platforms can facilitate communication, but they are unable to completely meet the emotional and spiritual needs associated with loss and mourning, as these experiences demonstrate (Khosa-Nkatini 2022: 4). From the results of the study, pastoral respondents mentioned how much they value the physical community again. They supported the reintroduction of traditional rituals

wherever feasible, acknowledging them as cultural customs and essential means of resilience and healing.

### **5.9 Cultural and theological tensions**

Pastoral responses to the lockdown's restrictions revealed different theological interpretations and ministerial priorities. The strong belief held by one pastor that “laws must not hinder ministry” was indicative of a viewpoint influenced by a strong sense of spiritual urgency. He and others who held this belief believed that serving the bereaved and spiritually troubled was more important than following public health regulations. He believed that despite legal limitations, the pastor's fundamental responsibility to provide presence, consolation, and sacramental guidance could not be postponed. The theology of incarnational ministry, which emphasised closeness and personal touch as essential to spiritual care, was the foundation of this contentious position. For many pastors in the study, the risk of spiritual neglect outweighed the physical risks of COVID-19, especially during life's most vulnerable moments.

Conversely, another pastor took a more holistic approach to the problem. He worked with mental health specialists and grief counsellors to add psychological understanding to traditional pastoral care because he understood the multifaceted emotional layers of pandemic grief. A growing understanding of the value of holistic bereavement care, support that acknowledged trauma, anxiety, and emotional processing in addition to spiritual needs, was reflected in this interdisciplinary approach within pastoral circles. By embracing mental health as a crucial element of healing, the pastor signalled a departure from purely theological models of mourning. His work sparked a larger movement in the Adventist pastoral community to give leaders spiritual and psychological tools to help the bereaved in a more thorough way.

These pastors' divergent strategies highlight the various ways pastors dealt with the extraordinary pressures of pandemic ministry. These variations also draw attention to a

persistent conflict: upholding religious and cultural customs while adjusting to the emotional demands and new public health realities. The pandemic made people reevaluate what it means to grieve properly, what can be changed, what needs to be kept the same, and how communities can create spaces for grieving in both real and virtual spaces. Adaptive mourning practices that respect cultural customs, address psychological needs, and make use of technology without compromising the value of human connection are desperately needed, as the pandemic ultimately highlighted. It is an unfinished and changing balance that necessitates ongoing introspection, creativity, and discussion within religious communities. The lessons learned during this time must be carried forward by the Church to guarantee that no one suffers in silence and that the ministry of presence continues, even if its form must change.

#### **5.10 Mental health: From stigma to systemic integration**

From the analysis of the study findings, it was observed that congregants and clergy alike were under tremendous psychological strain due to the emotional strain caused by protracted lockdowns, economic uncertainty, bereavement, and social isolation. All of a sudden, problems like anxiety, depression, and trauma were no longer merely pastoral subjects; rather, they were major issues that required immediate attention. This was unfamiliar ground for many pastors. Many found themselves responding to mental health needs without formal psychological training, despite having been trained traditionally to provide spiritual guidance. Early reactions were frequently spontaneous and reactive, motivated by sympathy but having a narrow focus. These last-minute phone conversations with agitated members and impromptu prayer meetings to calm anxiety or hopelessness were examples of these unplanned interventions. Despite their good intentions, these initiatives showed that more comprehensive resources and organised responses were required (Pandey & Pal 2020: 2).

Results from the study show that several pastors started to take more thoughtful and knowledgeable stances after realising this gap. Some created church-based mental health programs, while others collaborated with licensed counsellors or therapists to co-host webinars and support groups. Workshops on coping strategies, emotional resilience, and stress management, for instance, were conducted virtually and frequently framed through theological and psychological perspectives. This signalled a profound change in Adventist ministry, a growing understanding of the close connection between mental health and spiritual well-being. Many pastors had to face their emotional fatigue in addition to serving their congregations. A significant toll was taken by the incessant need for consolation, the weight of recurrent setbacks, and the loneliness of serving behind a screen. Burnout, sleeplessness, and compassion fatigue were reported by a few pastors (Khosa-Nkatini 2022: 5). Nevertheless, despite these difficulties, the time period sparked a more general cultural change within the Church: an openness to identifying, talking about, and addressing mental health issues. One of the pandemic's most lasting effects is probably this change. Previously discussed in whispers or spiritualised, mental health is now becoming more widely acknowledged as a valid and crucial component of pastoral care. In addition to serving as a spiritual mentor and preacher, the crisis broadened the role of the pastor to include advocating for mental health, listening with compassion, and, if needed, serving as a link to professional care (Magezi 2022: 1).

### **5.11 Digital democratisation of care**

In order to address urgent emotional and spiritual needs, particularly among young people, one pastor's strategy for promoting mental health during the pandemic showed how to creatively use easily accessible, low-tech platforms. The pastor created special WhatsApp groups after realising that many of the youth in his congregation were struggling with increased anxiety, future uncertainty, and social isolation. These online communities developed into centres for

what he called “biblical and theological counsel”, providing daily devotions, encouragement based on Scripture, and public forums where members could discuss their challenges and find support from one another. Even in low-income communities, WhatsApp is widely used and informal, which lowers the barrier to participation. It gave young people a safe, approachable, and nonjudgmental environment in which to discuss spiritual issues and find support. For those without the data, devices, or reliable internet connections needed by more bandwidth-intensive platforms like Zoom, this model demonstrated how even basic technology could democratise access to pastoral care and emotional support. The pastor’s initiative demonstrated the importance of meeting attendees where they are, emotionally and technologically, without placing undue pressure on them to be digitally literate or formal.

Another Pastor adopted a more structured strategy by co-hosting a series of webinars with mental health specialists. The goals of these sessions were to de-stigmatise emotional difficulties, increase awareness of mental health, and provide participants with coping mechanisms based on both religious and psychological science. The subjects covered included identifying symptoms of depression and burnout, as well as coping with grief and anxiety. This pastor noticed a pattern of low or irregular attendance despite the content's quality and relevance. He clarified, “Many still saw the struggle as a spiritual failing”, referring to a persistent stigma in some Adventist circles that associates emotional distress with spiritual weakness or a lack of faith. A deeper theological and cultural tension was brought to light by this response. The pandemic revealed long-standing resistance in certain religious communities to publicly discuss mental health concerns, even as it made them inevitable. Even when help was freely and empathetically provided, some people were deterred from seeking it because they believed that psychological suffering was a sign of spiritual inadequacy. However, a significant cultural shift was marked by the work of pastors like Ntshangase and Webster, who

affirmed emotional vulnerability as a legitimate aspect of the Christian experience rather than as a contradiction to it.

Their combined methods, which combine professional collaboration, easily accessible resources, and a theology of empathy and presence, highlight the growing pastoral commitment to mental health advocacy. Even though there are still issues, particularly with stigma and cultural resistance, these early efforts laid the groundwork for a more comprehensive and inclusive ministry where mental health is acknowledged as essential to spiritual flourishing.

### **5.12 Gaps in training and resources**

During the pandemic, one pastor's involvement with mental health was significantly influenced by institutional support systems. He relied on church leadership-organised conference-led seminars that were intended to give pastors the fundamental skills they needed to take care of themselves and their emotions. These seminars provided general coping mechanisms, theological insights on suffering, and reminders of the value of resilience and rest in ministry. Although grateful for these efforts, this pastor was open about their limitations. He pointed out that "mental health discussions weren't personalised," highlighting the fact that although these sessions were educational, they frequently lacked the interpersonal nuance and contextual awareness necessary for true change. The seminars' one-size-fits-all format made it challenging for pastors to effectively apply their knowledge in the diverse sociocultural contexts of their congregations.

For rural pastors in the study, who worked in areas with little to no access to professional mental health services, this restriction was especially severe. For these pastors, the pandemic exacerbated already-existing disparities in infrastructure and support networks for ministers and their flocks. These spiritual leaders relied on their resources—prayer, Scripture, and the support of other clergy members—in the absence of counsellors, therapists, or mental health

hotlines. Pastors' peer support turned into a lifeline, with many creating unofficial networks of support via WhatsApp chats or phone conversations. Despite having no official clinical training, they carried a great deal of pastoral weight by listening, sharing burdens, and giving advice. One pastor's dependence on prayer was a pastoral tactic based on the conviction that the presence of God could provide serenity and clarity in the midst of chaos, not just a spiritual reflex. But he also acknowledged that spiritual reactions by themselves had emotional limitations. He acknowledged that "sometimes, people needed more than a verse". Congregants occasionally experienced difficult psychological issues, such as trauma-exacerbated grief and anxiety that verged on panic, for which pastors felt unprepared. The responses gathered from the rural pastors showed that these pastors felt overburdened by these experiences, holding them accountable for severe emotional injuries while lacking the expertise to treat them.

The differences in pastoral capacity across geographic and socioeconomic lines were highlighted by the contrast between respondents who improvised care and others who offered semi-structured support. Pastors in urban or resourced areas could add professional partnerships or institutional programs to their ministry, but those in rural areas frequently had to shoulder the entire burden of care alone. Nevertheless, despite these difficulties, a commonality emerged between the two approaches: a strong pastoral concern for the mental health of their communities, even in the face of limited or overburdened resources. This time exposed the Adventist Church's pressing need for more context-specific mental health training that considers the various realities of ministry in South Africa, from urban areas to rural villages. It will also spur discussions about vulnerability, resiliency, and the changing role of the pastor as a first responder to emotional crises as well as a spiritual leader.



### 5.13 Theology vs. Clinical Care

During the pandemic, a fascinating conflict emerged between spiritual and psychological approaches of care, one that both mirrored and heightened more general discussions within the Adventist Church, both locally and internationally. This tension was exemplified by the divergent viewpoints of respondent pastors, who each represented unique theological and ministerial instincts influenced by their upbringing, education, and the communities they served. Echoing a more conventional perspective, one pastor primarily used a spiritual lens to interpret emotional and psychological distress. "It's a test of faith," he declared, suggesting that despite the pain, such suffering provided a chance for spiritual development, fortitude, and cleansing. Another pastor believed that recommitment to God, deeper prayer, and scriptural meditation were the solutions to emotional upheaval. Congregants who were steeped in a devotional understanding of suffering found resonance in this viewpoint, but it ran the risk of inadvertently marginalising people whose experiences with anxiety or depression went beyond the spiritual realm and into the fields of medicine or trauma. This perspective discourages vulnerable honesty by misinterpreting emotional struggle as moral failure or even spiritual weakness.

One respondent, on the other hand, pushed for a more integrated approach, insisting that "we must bring therapy and theology into dialogue." His approach embraced the potential of psychological frameworks as complementary tools in pastoral ministry, rather than as a replacement for faith. Given that spiritual counselling alone was not always able to address the complexities of mental illness or trauma, the pastor worked with mental health professionals and encouraged congregants to seek clinical support when necessary. He saw this as an embodiment of holistic care, ministering to the whole person's body, mind, and spirit. The difference in views among the respondents in the study, is indicative of a broader discussion in

Adventism around the world regarding the role of clinical psychology and emotional well-being in a religion that has traditionally placed a strong emphasis on individual piety, obedience, and spiritual combat. This debate was not started by the pandemic, but it was accelerated and made public by it, forcing both church leaders and members to address mental health issues that could no longer be dismissed by prayer or concealed behind the façade of religiosity.

Particularly outside of urban and affluent areas, the crisis exposed structural deficiencies in pastoral training and resource distribution at the institutional level. Other pastors worked alone, navigating difficult emotional terrain without much help or support, while others had access to webinars, seminars, and professional networks. A more standardised, context-sensitive framework for emotional and psychological care within Adventist ministry is needed, as the disparity in resources has left many pastors overburdened and many congregations underserved. The question of how the Church can faithfully minister to emotional and mental well-being without losing its theological identity was ultimately made more urgent by the pandemic. The solution might be found in developing a strong, caring synthesis that acknowledges distress as a spiritual and psychological reality and prepares pastors to respond appropriately, rather than in picking between paradigms. The path ahead necessitates not only theological transparency but also real-world investments in education, teamwork, and stigma dismantling, particularly in areas where silence has far too long been the norm.

#### **5.14 Digital ministry: Advantages, limitations, and the personal touch**

The information in this section is an analysis of the interviews of the pastors in the study. From the study findings, it was observed that most immediate and widespread adaptation among South African Adventist pastors was the move to digital platforms during the COVID-19 pandemic. Churches resorted to virtual tools in response to limitations on face-to-face worship

and fellowship. These tools ranged from Bible study groups conducted through Zoom and WhatsApp devotionals to live-streamed services on Facebook and YouTube. This shift brought many congregations into a technological environment they had never been in before and represented a dramatic shift in the way ministry was conceived and delivered. Though almost everyone adopted the shift to digital ministry, the results were not all the same (Magezi 2022: 6; Pillay 2020: 266). Due to a complex interaction between geography, socioeconomic status, technological infrastructure, and digital literacy, pastors and congregants had radically different levels of access, engagement, and success. Urban churches adjusted more quickly and successfully, especially those with younger, tech-savvy members and reliable internet connections. Their services were frequently interactive, well-produced, and even reached a wider audience, attracting viewers from outside of conventional geographic borders (Moodley & Hove 2023: 477).

Congregations in rural areas with limited resources, however, encountered major obstacles. The study pastors found it difficult to stay in regular contact with members in places with unstable electricity, weak internet service, or low device ownership (Campbell 2023: 36). Some people still view the “digital church” as a theoretical concept rather than a working reality. Congregants’ differing degrees of technological comfort, especially among older members, resulted in unequal participation and engagement even in places with connectivity. Despite their admirable intentions, churches frequently turned back to low-tech alternatives like voice calls or text-message devotionals, which were unable to fully replicate the communal and liturgical experience of in-person worship. Inequalities in pastoral capacity were also revealed by this digital divide. The shift was relatively easy for those who were already accustomed to using digital tools or who could find qualified volunteers. Others were overburdened by the need to manage the crisis’s emotional and spiritual repercussions while simultaneously

learning new platforms. The digital revolution increased outreach and spurred innovation in some situations while increasing loss and loneliness in others.

In the end, the shift to online ministry was a complex phenomenon characterised by creativity, exclusion, resiliency, and frustration rather than a straightforward success story. It exposed systemic flaws that need sustained attention while also bringing to light the Adventist Church's dormant potential for digital engagement. The inconsistent outcomes of this adaptation serve as a reminder that, absent deliberate support and inclusive design, technology reflects and frequently amplifies preexisting inequities rather than being a neutral or universally empowering design.

### **5.15 Platform preferences and generational divides**

The most widely used digital tool during the pandemic was WhatsApp, which was commended for its low data usage, accessibility, and user-friendliness across age groups. Despite limitations, pastors came up with innovative ways to use their features to continue their ministry. One pastor, in particular, highlighted how he employed voice notes to run youth question-and-answer sessions. Through this low-tech but incredibly engaging approach, young people could ask him direct or anonymous spiritual questions, to which he would reply with encouraging words or succinct theological reflections. For young people balancing school, family obligations, or limited connectivity, the asynchronous nature of the interaction also allowed participants to participate at their own pace.

Zoom had drawbacks, even though it provided more communal and interactive experiences than conventional livestreams. Some pastors have effectively utilised Zoom to facilitate virtual small groups, integrating Bible study, fellowship, and prayer meetings. The platform was perfect for people looking for more in-depth interpersonal interaction because it could mimic in-person conversations. Zoom was still out of reach for many other pastors, especially rural-

based pastors, who serve in areas with spotty internet and low incomes. Data constraints and technological unfamiliarity meant that entire segments of the congregation were excluded from worship and discipleship activities, deepening a sense of spiritual isolation.

Social media sites, especially Facebook and Instagram, have emerged as crucial venues for reaching younger members (Cain 2023:101). Recognising that digital natives consume content in different ways, some pastors developed brief devotionals using reels, live stories, or image carousels. These initiatives struck a chord with young people by providing theology in clear, concise, and easily comprehensible formats. However, generational differences soon became apparent. Platforms like Instagram are "distractions" from serious spiritual engagement, according to one respondent, who observed that older members frequently rejected such efforts as shallow or even irreverent. This demonstrated the necessity of multimodal ministry strategies that could accommodate generational preferences without offending either group.

Concerns regarding the calibre and scope of virtual worship surfaced amid this digital explosion. Pastors in the study also voiced their discomfort over the emotional and spiritual alienation they felt from screens. One pastor bemoaned the loss of embodied, relational ministry that had long characterised Adventist pastoral care, saying, "A sermon behind a screen feels like a lecture, not worship." The criticism went beyond technology to include the loss of gesture, presence, eye contact, shared space, and the tangible sacraments of anointing and communion.

Even tech-savvy pastors in the study, who promoted innovation and digital tools, issued a warning. "The church risks becoming a content mill, not a community", they warned, emphasising that technological expansion must not come at the expense of genuine relationships. In this way, digital ministry presented both a chance and a temptation: it gave

pastors the chance to reach a wider audience and keep things going during lockdowns, but it also ran the risk of turning faith into videos and passive live streams.

This digital chapter's most important takeaway was that, despite its necessity during the pandemic, technology could not take the place of the embodied community's sacredness. Although social media, WhatsApp, and Zoom increased pastoral reach, especially among younger and urban members, they were unable to replace the emotional resonance and sacramental weight of in-person presence. This conflict necessitates the careful creation of hybrid ministry models that respect the advantages of both online and face-to-face communication. To guarantee that future ministry stays both approachable and profoundly relational, such models will need to be planned for, theologically considered, and continuously experimented with.

### **5.16 Community engagement: From food parcels to public health advocacy**

Pastors had a wide range of social, emotional, and even public health-related responsibilities during the pandemic, in addition to their customary spiritual duties. Pastors played a crucial role in providing theological guidance as well as meeting practical and material needs as communities struggled with disease, job loss, hunger, and fear. They took on the roles of social workers, counsellors, health educators, and community advocates as first responders in a crisis that dissolved the lines between the sacred and the secular. For vulnerable people, pastors frequently served as their only reliable source of communication, particularly in underserved or rural areas where government services were either non-existent or provided slowly. They helped spread accurate information about COVID-19 precautions, provided food parcels to families in need, and made masks and sanitisers available when they were in short supply. Some organised health education sessions in conjunction with neighbourhood clinics or non-

governmental organisations, modifying public health messages to conform to a biblical framework in order to increase congregational acceptance.

These actions reflected a deep sense of pastoral responsibility and contextual ministry. "We could not just preach from the pulpit while people were hungry or afraid to go to clinics," one pastor said. The crisis called for a theology of service and presence that was demonstrated in action, taking care of both bodies and souls, rather than just in sermons and prayer. New strains were also brought about by the expansion of pastoral roles. Many pastors had to deal with complicated issues like vaccine hesitancy, disinformation, and trauma without enough institutional support because they lacked formal training in health communication or social work. Nonetheless, one of the most potent demonstrations of resiliency and compassion throughout the pandemic was their readiness to adjust, fill the void, and rethink what pastoral leadership could entail in emergency situations.

### **5.17 Local partnerships**

During the pandemic, another pastor from the study provided an example of how pastoral leadership transcended into the areas of logistics and humanitarian assistance. He organised and distributed food parcels in collaboration with local non-governmental organisations (NGOS) after realising the severe food insecurity that many attendees, particularly those in economically disadvantaged areas, faced. Online sign-up forms, a digital innovation that simplified beneficiary tracking and reduced crowding during distribution, were introduced by him in order to manage the process effectively and safely within the confines of lockdown protocols. This use of digital tools in relief efforts demonstrated how pastors could combine pastoral care with administrative strategy to meet both spiritual and material needs.

One respondent's ministry also unexpectedly shifted into public health advocacy, mostly through his televised sermons on GsuTV. His platform started drawing people who were

looking for more than just spiritual support as viewership increased; they also brought concerns, anxieties, and false information regarding COVID-19 and vaccinations. According to this pastor, “people started calling not just for prayer but to ask if vaccines were part of the mark of the beast”. He had to balance a delicate pastoral duty of upholding biblical values and advocating for scientifically sound health advice in a community torn between conspiracy theories and valid medical concerns. By redefining vaccination as a responsible act of self-care and self-care for others, he explained that this task involved “balancing biblical stewardship with medical advice”. The pastor challenged fear-based narratives and encouraged health-conscious behaviours through his sermons, drawing on biblical teachings about the body as a temple and the need to love one's neighbour. His story demonstrated the special power pastors had to influence public opinion, as well as the gravity of that duty during a time of widespread mistrust and false information.

All of these examples show how South African Adventist pastors played important roles in tackling the intertwining crises of hunger, disinformation, and healthcare access despite frequently lacking formal training in public health or humanitarian logistics. They developed new forms of ministry that were as much about advocacy and service as they were about prayer and preaching, serving as links between sacred texts and pressing needs in the real world.

### **5.18 Resistance to change**

A sobering analysis of the internal issues that arose within the Adventist community during the pandemic was provided by a pastor, who pointed out that while some churches welcomed digital ministry, others flatly rejected it. This resistance was frequently based on deeper theological, cultural, and generational beliefs rather than just being a result of technological unfamiliarity. Leaders in some congregations were suspicious of digital outreach, linking it to a weakening of religious tradition or, in more extreme situations, to apocalyptic conspiracy

theories that became popular during times of world unpredictability. This resistance to using new ministry techniques reflected larger societal divisions, where people's willingness to adapt was influenced by fear and false information. Some congregation members viewed the pandemic as a divine retribution or a government-planned conspiracy, which fuelled their mistrust of the very instruments pastors were using to preserve spiritual ties, not just of vaccinations and lockdowns. Pastors had to balance opposing erroneous beliefs with maintaining unity and trust among their congregations in these situations.

The pandemic successfully dissolved the traditional lines separating pastoral work by requiring skills well beyond the pulpit. In addition to providing spiritual sustenance, pastors were now expected to manage digital infrastructure, interpret epidemiological data, address vaccine hesitancy, dispel myths, and tend to the mentally ill. They essentially combined the roles of social workers, health educators, crisis managers, and grief counsellors. This change revealed gaps in ministerial training and underscored the pressing need for theological education to include crisis preparedness and public health literacy, which was both overwhelming and revelatory for many. The Adventist pastoral identity in South Africa was put to the test during this historical period. The pandemic exposed the difficulties of spiritual leadership in a world that is ideologically divided but technologically connected. It emphasised the value of flexibility, discernment, and compassion as well as the urgent need to give pastors the interdisciplinary skills and theological tools they need to guide congregations through complex crises.

### **5.19 Four pillars of post-pandemic pastoral care**

An analysis of the interview responses revealed that participants proposed several recommendations to strengthen pastoral care within the Adventist Church in the aftermath of the COVID-19 pandemic. These suggestions, aimed at enhancing the Church's spiritual and

emotional support systems, were organised into four key thematic pillars. Each pillar represents a distinct area of focus that collectively addresses the evolving needs of congregants in a post-pandemic context, emphasising a more resilient, responsive, and holistic approach to pastoral care.

**First pillar: Flexibility: agility in methods, not message, became a ministry imperative.**

Ministerial flexibility, not in terms of theological compromise, but in terms of how ministry is practised, is the first and possibly most important pillar to emerge from the pandemic era. Rigid pastoral delivery may actually work against the Church's mission, as the global crisis has shown. A sort of spiritual improvisation was required due to lockdowns, mobility restrictions, and the unpredictable nature of public health regulations. Sermons had to be delivered via screens, sacraments had to be modified for use in homes, and group chats and virtual breakout rooms had to be used to reimagine fellowship. However, this flexibility did not mean a break from Adventist principles. Instead, it demonstrated that even as the approach changed, the message could not. As a result, flexibility evolved into a theological position, a readiness to embody gospel truth in any way that was safe, accessible, and significant to the community at the time. Pastors who saw adaptability as a spiritual discipline in and of itself, rather than as a threat to orthodoxy, were able to sustain connection, morale, and mission throughout the pandemic. In order to adapt liturgies, preaching philosophies, and pastoral care models to the demands of a world that is constantly changing politically, technologically, and environmentally, this pillar calls on leaders in the post-pandemic Church to embrace contextual creativity. Therefore, Adventist ministry must adopt a long-term ethic of flexibility.

**Second Pillar: Digital equity: Infrastructure investment and literacy training are urgent needs.**

Digital equity, the second pillar, acknowledges that spiritual and technological access are now inextricably linked. The Church's reach was broadened in some places by the move to online platforms, but it was also restricted in others. The pandemic revealed a two-tiered spiritual landscape, with rural and economically disadvantaged members being cut off from worship and fellowship while urban, tech-savvy congregants could participate. Digital ministry cannot be sustained unless both pastors and members of the congregation possess the digital literacy necessary to engage in meaningful engagement, in addition to devices and data. This includes educating pastors on digital etiquette and online content creation, assisting kids in safely navigating online Sabbath School, and teaching senior members how to join Zoom meetings. More significantly, this pillar calls on the Church to view internet access as a matter of justice, on par with issues of education, housing, and food. Pastoral care can take the form of device-sharing programs, investments in rural connectivity, and joint ventures with governmental or non-governmental organisations. Digital infrastructure must be viewed by the post-pandemic Church as a missional space rather than an administrative issue. Without it, the digital divide turns into a spiritual divide that divides the body of Christ along geographical and economic lines.

**Third pillar: Holistic health integration: Mental health support must be systematised, not stigmatised.**

The third pillar urges that pastoral ministry intentionally incorporate mental health into its core mission. Mental wellness, which has historically been marginalised or spiritualised in many Adventist contexts, became a major concern during the pandemic as members experienced an unprecedented level of grief, fear, depression, and anxiety. Pastors' answers varied from

collaborations with licensed psychologists to WhatsApp-based support groups. But the necessity of systematisation became clear. Although ad hoc care is useful in emergency situations, institutional frameworks that promote emotional resilience must take its place. The creation of a theology that accepts psychological suffering without characterising it as a lack of faith, regular cooperation with Christian counsellors, and mental health first aid training for pastors are all examples of this. Crucially, this pillar opposes the stigmatisation of mental illness in places of worship. The Church must teach that going to therapy can be a kind of spiritual stewardship and is not a rejection of divine healing. Pastors must be able to recognise when spiritual care needs to be supplemented with clinical intervention, and congregation members should feel as at ease asking for emotional support as they do for prayer. Spiritual, physical, and psychological holistic health must be accepted as essential to, rather than supplementary to, the entirety of salvation.

**Fourth pillar: Hybrid as default: The future lies in blending digital and physical, not choosing between them.**

Lastly, according to the fourth pillar, pastoral ministry's future depends on carefully combining digital and in-person formats rather than picking one over the other. The ministries that used a hybrid model—using digital platforms for teaching and fellowship while maintaining physical space for sacraments, relational care, and rites of passage—were the most resilient during the pandemic. The reality of a diverse audience is reflected in hybrid ministry. While some members long for the tactile, sensory experiences of group worship, others prefer devotionals that are live-streamed and available whenever they want. While older members might need printed devotionals and home visits, younger members might prefer interactive apps or Bible studies on social media. Pastors can meet people where they are, both literally and figuratively, by using a hybrid approach. Hybrid ministry is not without its difficulties, though. Determining

which facets of ministry can be virtualised and which need physical embodiment calls for careful planning, technical assistance, and theological clarity. By emphasising accessibility, intentionality, and presence, it guarantees that digital ministry is a place for real connection rather than just the dissemination of content. The Church needs to normalise hybridity as the new norm rather than viewing it as a temporary solution. By doing this, it can continue to be flexible, inclusive, and receptive to a congregation that now includes both pews and living rooms.

## **5.20 Recommendations for the Adventist Church**

### **5.20.1 Training: Certify pastors in digital literacy and mental health first aid.**

The pandemic made it abundantly clear that most pastors were ill-equipped to deal with the psychological and technological aspects of crisis ministry. Even though many made heroic adaptations, their efforts were frequently the result of improvisation rather than formal training. The Adventist Church should implement required certification courses in digital literacy and mental health first aid in the future. Beyond teaching basic computer skills, digital literacy certification should include instruction in live streaming, creating digital content, designing online worship, using social media, and data privacy ethics. Perhaps through union or conference-level initiatives, the training should provide customised learning paths and be considerate of generational differences. Giving pastors access to these resources will help them minister consistently and professionally across platforms and lessen their dependency on ad hoc fixes.

Mental health first aid training ought to be institutionalised concurrently as a pastoral core competency. For members who are experiencing trauma, grief, or emotional distress, pastors are frequently the first people they contact. Destigmatising psychological care in congregations will be facilitated by equipping them with the knowledge and abilities to identify symptoms of

burnout, anxiety, or depression and to refer people appropriately. This initiative must be supported with contextual theological frameworks, ensuring that mental health care is seen not as a secular intrusion but as part of holistic pastoral responsibility. When combined, these credentials will empower pastors to be emotionally intelligent and tech-savvy spiritual leaders with qualities that are essential in the quickly changing ministry environment of today.

#### **5.20.2 Infrastructure: Subsidise internet access for rural congregations.**

According to the findings of the study, one of the most pressing justice issues is digital inequality. Due to inadequate network coverage, high data costs, and a dearth of digital devices, many rural pastors were essentially silenced while urban churches were able to make the transition to online ministry with relative ease. Rural and economically marginalised members experienced a spiritual disenfranchisement as a result, and pastoral presence varied unevenly across regions.

The Church should make infrastructure investment a top priority in its strategic planning in order to address this. This can be done by negotiating bulk data packages or subsidised internet plans for rural districts with telecommunications companies, supporting conference-level tech audits to identify areas of greatest need, and developing equitable distribution models. It can also be done by creating technology grants for churches that lack devices or audiovisual equipment.

Internet access must be acknowledged as a spiritual need rather than a luxury. The Adventist Church can fulfil its mission of inclusive fellowship and remove one of the main obstacles to pastoral care in rural areas by making sure that no church or member is digitally excluded.

### **5.20.3 Research: Study the long-term effects of digital ministry on member retention.**

The study raised issues regarding relational depth, theological engagement, and spiritual retention in online settings, even as it demonstrated innovative and significant uses of digital platforms for worship, community development, and bereavement support. While some pastors expressed concern about their congregations “consuming content” without creating a community, others noted that digital formats felt impersonal or passive. Others, however, pointed out unanticipated benefits, like heightened vulnerability in virtual counselling or global reach via live streaming. The need for long-term, data-driven studies on how digital ministry affects Adventist faith communities is highlighted by these contradictory results. The effects of extended digital worship on member retention and spiritual engagement are among the topics that merit discussion. Additionally, it is necessary to determine which age groups or demographics are most likely to flourish in hybrid environments as well as how virtual rituals like online communion or digital prayer circles affect people's perceptions of spiritual authenticity.

There is also a need for the Church to make evidence-based choices regarding the layout and implementation of digital ministries. These will guide theological reflection, pastoral training, and worship planning, assisting leaders in identifying areas in which digital innovation advances mission and those in which it might compromise fundamental ecclesial values.

### **5.20.4 Policy: Develop denominational guidelines for hybrid worship and crisis response.**

Many pastors were uncertain about what to do during the pandemic because there were no consistent denominational policies in place. District-by-district responses to questions concerning online communion, Sabbath observance, funeral rites, and visitation procedures were frequently inconsistent. As various churches took opposing positions, this inconsistency led to misunderstandings and, in certain situations, damage to their reputations. The Adventist



Church should create a thorough set of crisis-response guidelines based on public health standards, technological best practices, and theological principles in order to be ready for any future disruptions, including pandemics, natural disasters, and political crises. These guidelines ought to cover the moral requirements for pastoral care and online worship. procedures for virtual or hybrid sacraments and rituals, Standards for working with secular health or social services, as well as emergency protocols for member welfare and food distribution.



## Chapter six

### Findings

#### 6.1 Introduction

The pastoral ministry environment in the South African Seventh-day Adventist Church was drastically altered by the COVID-19 pandemic. According to the results in Chapter Five, pastors showed compassion, inventiveness, and a readiness to try new things theologically and technologically in the face of an unprecedented crisis. This chapter highlights the implications for ecclesiology, digital ministry, grief rituals, mental health, and structural inequality through its synthesis and critical engagement with those findings in the context of broader academic literature.

#### 6.2 Digital innovation and hybrid ministry

According to the study's findings, the COVID-19 pandemic caused a sudden and drastic change in South Africa's Adventist pastoral ministry. Participants frequently expressed how lockdowns and public health regulations abruptly interrupted traditional ministry practices that revolved around embodied rituals, in-person worship, and face-to-face visitation. Pastors responded by embracing a variety of digital tools to continue their ministry. In order to keep a spiritual connection with their congregation, interviewees talked about using Zoom for Bible study, WhatsApp for devotions and prayer chains, Facebook Live and YouTube for Sabbath sermons, and even television broadcasts. In pastoral practice, what was once incidental or even foreign swiftly became essential. This change was more than just a technological one; it also changed the way pastors viewed spiritual leadership, accessibility, and presence, which is also supported by Manungo and Rukuni (2021: 108).

The results also show that access to digital platforms was not uniform, though. Significant obstacles to implementing online ministry were mentioned by pastors working in rural or economically underdeveloped areas. These included issues with affordability, device shortages, and lack of internet access. Congregants in urban areas, on the other hand, frequently possessed superior infrastructure and were able to swiftly transition to digital formats. The way ministry was experienced and delivered during the pandemic was sharply divided as a result of these divergent experiences. Many participants expressed worry that some congregations experienced spiritual isolation as a result of constant online interaction, while others prospered. In addition to being technological, this new “digital divide” within the Adventist Church was also profoundly pastoral, which raised questions about fair ministry during times of crisis. This is consistent with results by Magezi (2022: 6) who highlighted that pastors were frequently compelled to use low-tech or analogue techniques in less resourced environments, such as phone calls, printed devotional materials, and door-to-door visits. Although these techniques were contextually responsive, they also highlighted a widening gap in the ways that ministry was experienced across the nation. This difference resulted in congregations with technology enjoying continuous virtual interaction, while other congregations, particularly those in rural or older communities, experienced spiritual alienation and detachment (Magezi 2022: 6).

Despite these differences, a lot of pastors saw digital ministry as a transformative part of their calling rather than just a temporary solution. According to the data, pastors were able to reach audiences far beyond their typical congregational boundaries through live-streamed worship, daily devotionals via WhatsApp, and online small groups. Reconnecting with former members, reaching housebound people, and even attracting interest from spiritual seekers outside their faith tradition were all mentioned by a number of pastors. Participants saw this wider reach as a spiritual awakening as well as a technological advancement. In this regard, digital platforms

evolved into instruments for community development, care, and evangelism, redefining the reach of Adventist ministry in the wake of the pandemic. This interpretation is supported by other research, which highlights the ways in which digital tools can expand spiritual engagement beyond social and geographic boundaries (Manungo & Rukuni 2021: 108; Cain 2023: 5; Pillay 2020: 268). Yet the primary evidence lies in the lived experience of pastors who discovered that adaptability, rather than tradition alone, was essential to sustaining their ministry.

The ministry of one pastor in the study, whose televised sermons on GsuTV enabled him to interact with a national audience, is among the most striking examples of this potential. After seeing his contact details on screen, viewers started contacting him for spiritual guidance, prayer, and counselling. Through this dynamic exchange, broadcast television, once a passive medium became a means of providing interactive pastoral care. Additionally, it confirmed that digital media could be a platform for relational ministry if used strategically and with pastoral sensitivity. Tech-savvy church leaders were able to mediate incarnational presence through digital means, which is also supported by Cain (2023: 5). This reinforced a ministry model that emphasises pastoral proximity, connection, and responsiveness—even when mediated by a screen.

But even though these developments brought much-needed continuity during lockdowns, almost all testimonies from the study participants stress that technology should be viewed as an aide to in-person ministry rather than as a replacement for it. Many pastors bemoaned the incapacity to carry out essential tasks like hospital visits, face-to-face prayer, funerals, bedside communion, and being physically present during emergencies. More than half of the pastors in the study, expressed deep sorrow at not being able to carry out these essential pastoral responsibilities, with many of them suffering from emotional distress as a result of their forced

physical separation. This is also highlighted by Khosa-Nkatini (2022: 5) and Musoni (2023: 1) who noted that the lack of physical rituals, such as touching the deceased, laying on of hands, and singing together, left both clergy and laypeople feeling spiritually incomplete, which virtual worship was unable to completely address.

According to some respondents in the study, physical pastoral care is critical because it brings with it the priceless element of physical presence, with the shared silent prayer at a hospital bedside, the handshake at a graveside, or the group singing that unites people in sacred memory. On the other hand, virtual channels are unable to adequately replicate these components, which are essential to Adventist ecclesiology and liturgical practice. Digital platforms can broadcast sermons and encourage discussion, but they frequently fail to capture the sensory and sacramental aspects of worship. Magezi (2022: 5) and Odhiambo (2024: 55) support this, stating that although virtual worship provided spiritual continuity, it frequently lacked the level of communal engagement that is typical of traditional church gatherings.

Findings from the study also suggest that church leaders need to support hybrid ministry models that combine online and in-person components. These will expand and diversify traditional worship in ways that meet people where they are, geographically, technologically, and emotionally rather than replace it which is also echoed by Cain (2023: 17) and Campbell (2023: 37). Weekly in-person worship for those who can physically attend, livestreamed services for the homebound, virtual small groups during the week, and pastoral visits for sacramental occasions like communion, anointing, or baptism could all be part of a strong hybrid model. Crucially, this method necessitates intentionality and may guarantee that digital participation stays relational and interactive rather than passive or consumeristic. Without such intentionality, churches run the risk of becoming “content mills” instead of fostering communities of fellowship and discipleship, as Campbell (2023: 38) cautions.

In addition to these liturgical and practical concerns, the digital revolution brought to light important questions of inclusion and justice in pastoral ministry. For example, the study found that not everyone had equal access to digital worship, and the pandemic magnified this. Online spaces were relatively easy for congregations with a tech-savvy membership, high-speed internet, and access to laptops or smartphones. Pastors in these congregations were able to keep their services lively and visually appealing with the help of younger volunteers or media teams (Magezi 2022: 6). In contrast, churches in economically disadvantaged or rural areas faced significant obstacles, such as unstable electricity, sporadic or non-existent internet, a shortage of devices, and low levels of digital literacy. Many congregants were left socially and spiritually isolated during the pandemic because even the most basic forms of online engagement were challenging, if not impossible, for these communities and this is also supported by Baloyi and Mapuwei (2023: 8).

### **6.3 Grief support and communal mourning**

The study's findings highlight how the disruption of funeral customs and grieving processes was one of the COVID-19 pandemic's most emotionally and spiritually damaging effects. The respondents highlighted that funerals in the Seventh-day Adventist church are deeply communal and theologically significant rituals that go beyond simply providing a formal closure to a life lost. Usually consisting of multi-day services that incorporate prayer, Scripture reading, music, individual testimonies, processions, and group meals, they symbolise the meeting point of pastoral care, cultural expression, and ecclesial identity. In addition to paying respect to the dead, these customs uphold theological beliefs regarding resurrection, group unity, and God's presence during difficult times.

However, there were strict restrictions on these funeral rites as a result of lockdown regulations, which were frequently sudden and non-negotiable. Only members of the immediate family

were allowed to attend; choirs and congregational singing were forbidden; processions and group meals were cancelled; and in certain situations, services were reduced to a few minutes while being monitored by the public health department (Kgatle & Segalo 2021: 1). For many families, these limitations were profoundly disorienting. Mourners frequently expressed that they felt their loved ones were buried “in silence”, devoid of the group song, prayer, and camaraderie that customarily accompany a dignified farewell. A sense of spiritual injustice, the conviction that necessary rituals had been excluded, along with the closure and healing they offer, exacerbated the emotional toll. In such contexts, grief was not only a response to death but to the disruption of meaning-making itself (Madigele & Tshelametse 2023: 4).

The Adventist church’s context is not the only one where this phenomenon occurred. According to a study by Johnston, Eagle, Headley and Holleman (2022), titled *Pastoral Ministry in Unsettled Times: A Qualitative Study of the Experiences of Clergy During the COVID-19 Pandemic*, one of the most agonising difficulties of pandemic ministry, according to more than half of the pastors polled (54%) was the inability to perform conventional funeral services or to be physically present with the dying (Johnston et al. 2022: 385). These limitations had a wide range of emotional repercussions, including unresolved grief, social disconnection, delayed grief reactions, and a protracted sense of emotional and spiritual dislocation. These incidents support the study findings that death rites are essential to spiritual resilience, theological continuity, and community cohesion, especially in African ecclesial contexts.

Many pastors in the study highlighted that they had to improvise in order to provide care under these limitations. Some arranged live-streamed funerals or broadcast memorial services via Facebook Live and Zoom, enabling friends and family who live far away to participate virtually. Others established WhatsApp groups that served as asynchronous platforms for the sharing of Scripture passages, pictures, and tributes, creating virtual spaces of mourning.

Pastors used follow-up phone calls, home visits once restrictions were loosened, and even postponed memorial services that brought people together months later to honour the departed in more detail when technology was unavailable or impractical, especially in rural or elderly congregations. Even though they were greatly appreciated, these actions frequently failed to duplicate the therapeutic benefits of face-to-face rituals. It is impossible for screens or phone conversations to fully replace the consolation of a shared hymn sung through tears, the ministry of presence at a graveside, or the symbolic embrace of laying hands on the bereaved. For example, one pastor said, “You could see the pain in the mourners’ pixelated faces, but we could not pass a tissue through the screen”.

This realisation is consistent with literature that highlights the sacramental nature of touch, closeness, and shared space during grieving. For instance, according to Khosa-Nkatini (2022: 4), the lack of embodied ministry at funerals had an impact on both the pastors and the bereaved families. Many pastors were troubled by their incapacity to provide consolation in the manner in which they were theologically and professionally prepared to do so. A paradox was created by the pandemic in that while clergy were more visible online and offering phone counselling, they were also less present during the private moments that are typically associated with pastoral presence. As they bore the weight of ministering in new and frequently emotionally insufficient ways, many expressed feelings of guilt, helplessness, and even spiritual exhaustion (Tagwirei 2022: 1).

The pandemic demonstrated how strict observance of traditional liturgies, no matter how revered, can obstruct effective ministry in times of crisis. Adaptive pastoral models are required instead, which maintain the theological core of funeral rites like honouring the deceased, consoling the bereaved, and affirming hope while changing their structure to meet public health requirements. For example, during times of crisis, pastors and church leaders may create

approved, condensed liturgies that include prayer, Scripture readings, and blessings that can be conducted with fewer staff members or broadcast to a larger audience (Tagwirei 2022: 1; Kgatle & Segalo 2021: 5). Likewise, digital memorial spaces such as online tribute pages, WhatsApp groups, or live-streamed candlelight vigils can be refined as tools of corporate remembrance and communal healing.

#### **6.4 Mental health and holistic care integration**

Study findings reveal that the COVID-19 pandemic led Seventh-day Adventist ministers to address mental health as a primary pastoral concern and no longer as a side issue or private matter, but as an urgent and public dimension of congregational life. The pandemic had a devastating psychological toll. All demographic groups saw increases in anxiety, depression, bereavement trauma, and extended social isolation, which affected both clergy and congregation members. These emotional crises were unfamiliar to many pastors. Clergy were frequently left to react based on intuition, compassion, and spiritual conviction since they lacked official training in clinical counselling or psychological first aid. Emergency prayer sessions, spontaneous phone calls, or crisis-driven pastoral visits carried out in challenging or even constrained circumstances were common examples of improvised and reactive initial interventions (Magezi 2022: 5; Pillay 2020: 268). Despite their good intentions, these initiatives frequently lacked professional integration and structure, leaving both carers and recipients emotionally vulnerable but spiritually supported.

Respondents in the study highlighted that they started instituting mental health services in their ministries. These adjustments included the creation of online support groups, focused sermons on overcoming grief, anxiety, and fear, and collaborations with certified Christian counsellors for Zoom-based therapy sessions, webinars, and psychoeducational workshops. These programs demonstrated a growing understanding that mental health and spiritual care are

intricately linked and not mutually exclusive. This approach is supported by Khosa-Nkatini (2022: 2) who allude that a new pastoral paradigm must support emotional well-being in addition to traditional spiritual duties like preaching, teaching, and sacramental care. The pandemic made it unmistakably clear that without addressing emotional and psychological needs, the Church risks offering only partial care to deeply wounded individuals.

This insight is also consistent with more general theological research. The importance of religious leaders as frontline advocates for mental health has long been highlighted by (Koenig 2018: 270), particularly in cultures where access to psychiatric services may be restricted, stigmatised, or prohibitively expensive. Pastors are frequently the first people in crisis contact in these situations. They are well-known, actively involved in the community, and in a unique position to observe shifts in participation, behaviour, or mood. Therefore, it becomes crucial for them to be able to identify the symptoms of mental distress and respond with compassion, theological nuance, and the right referrals. The pandemic experience reaffirmed this function, demonstrating that pastoral care is not supplementary to emotional support but rather, it is fundamental (Pratt 2024: 1).

However, there was some opposition to adopting this enlarged pastoral identity. Many of the study's pastors pointed out that emotional suffering is frequently interpreted through limited spiritual frameworks, and that mental health is still stigmatised in some Adventist congregations. For instance, one pastor noted that in certain places, the attendance at mental health webinars was surprisingly low. This was not because there was a lack of need, but rather because participants were afraid of being seen as lacking faith or spiritual strength. This is supported by Koenig (2018: 268) research, which shows that many religious communities discourage candid disclosure and perpetuate cycles of silence by viewing depression, anxiety, and burnout as indicators of inadequate prayer, personal sin, or a weak devotional life. Such

theological reductionism can be extremely harmful, deterring believers from acknowledging their own distress or even from seeking professional assistance.

The pandemic, according to Khosa-Nkatini (2022: 1), opened a Pandora's box of mental health issues that were so pervasive and obvious that they could no longer be disregarded or spiritualised away. In addition to carrying their members' emotional burdens, pastors themselves became more open and outspoken, frequently experiencing loneliness, burnout, and compassion fatigue. It was extremely taxing to provide care via a screen without the emotional support of a congregation or the feedback of their presence. A number of the study's pastors reported experiencing insomnia, helplessness, and spiritual exhaustion, underscoring the need for clergy members to have organised opportunities for self-care and emotional support (Khosa-Nkatini 2022: 2).

These changes indicate that pastoral education and church culture need to change. Going forward, seminary education and ongoing ministerial development should formally recognise mental health literacy as a fundamental competency. This entails giving pastors the fundamental skills they need to recognise signs of anxiety, depression, trauma, and suicidal thoughts; learn how to refer people appropriately; and know how to provide nonjudgmental, theologically based guidance during emotional crises (Milton 2022: 1). The Church should also promote continued collaborations with Christian mental health practitioners and formalise mental health first-aid certification. Such cooperation can demonstrate interdisciplinary care, dispel stigma, and reaffirm that spiritual development and psychological healing are not exclusive.

### **6.5 Inequalities: Urban–rural and generational divides**

The findings of the study suggest that the COVID-19 pandemic brought to light and exacerbated long-standing disparities within the Church, especially those that were based on

geography, economic status, and generational differences. The disparity in Adventist congregations' ability to adjust to digital ministry was one of the most striking discoveries. The shift to online worship and programming was relatively easy for urban, economically privileged churches, which frequently had younger, more tech-savvy members. These congregations were able to provide interactive Bible studies and livestreams of professional quality because they frequently had reliable electricity, fast internet, access to audiovisual equipment, and trained volunteers. Their digital presence frequently reached beyond their immediate geographic boundaries, drawing participants from other provinces and even abroad. For these communities, the digital shift represented not just a continuity of ministry, but in some cases, an unexpected expansion.

Congregations in rural areas and those with lower incomes, on the other hand, encountered significant structural obstacles that significantly restricted their capacity to engage with this new digital environment. Many lacked the gadgets required to access digital content, had sporadic or non-existent electricity, and unreliable internet connections. Pastors said they felt “silenced” during the lockdown in such settings. One respondent lamented the fact that his ministry was shut down not because of spiritual sluggishness but rather because of a lack of infrastructure, and that his district lacked the power or signal necessary to support virtual worship.

Some pastors in under-resourced areas responded by turning to analogue methods of ministry, such as making frequent phone calls, delivering printed devotional materials door-to-door, and holding socially distant doorstep prayers or check-ins. These initiatives showed incredible pastoral ingenuity and tenacity. They were able to preserve a certain level of interpersonal connection, but they were unable to duplicate the group experience of communal worship. Participating in the liturgy, singing together, and praying as a community were all embodied

practices that were still mostly unavailable. This gap in the worship experience was more than just a technical one; it had deep spiritual and emotional ramifications and made already marginalised members feel even more alone. The problem was made worse by generational differences. According to the findings and as supported by Campbell (2023: 36), younger churchgoers who were already accustomed to using apps like YouTube, Instagram, Zoom, and WhatsApp swiftly adjusted to digital ministry. They shared digital devotionals with their peer networks, took part in pastor Q&A sessions, and joined online prayer groups. In certain instances, younger members served as their churches' digital liaisons, assisting with stream setup, video editing, and teaching elders how to participate in virtual services.

However, many older members found it difficult to participate, especially those who were sceptical of or unfamiliar with digital tools. The transition to screen-based ministry was not only new to them, but also emotionally alienating. According to Campbell (2023: 54), senior members of some congregations have voiced strong opposition to online worship because they believe it to be impersonal, doctrinally dubious, or a danger to the sanctity of embodied rituals. Even within the same congregation, participation in worship and communal life became fragmented as a result of this generational divide. A young person may participate actively in a Zoom Sabbath School, but their grandmother, who lacked the equipment or self-assurance to use one, continued to be spiritually distant.

These differences bring up important issues regarding justice and inclusivity in digital ministry. Online platforms must be interesting and accessible to everyone, not just the young, wealthy, and urban, if they are to be valid extensions of the Church's mission. A purposeful, multifaceted approach is needed to address these disparities. According to Campbell (2023: 36) and Magezi (2022: 4), digital ministry needs to be purposeful, inclusive, and mission-driven rather than just reactive or technologically opportunistic. This includes tangible investments in digital

infrastructure, like device-sharing programs, conference-supported internet access points in districts with limited resources, and subsidised data packages for rural members. Additionally, it includes thorough training in digital literacy for pastors and lay members, particularly elders, many of whom may need consistent, patient assistance to gain confidence in using new platforms.

The results of the study also indicate that low-tech outreach should be expanded and treated with dignity rather than being abandoned. Techniques like phone prayer chains, SMS-based devotional series, and printed newsletters are still very useful, especially for people who are not able to access digital platforms. In situations where digital equity has not yet been attained, the Church should view these strategies as vital manifestations of pastoral care rather than as fallback options. It is the duty of the church to guarantee that all members have access to worship, fellowship, and spiritual instruction, whether via printed tracts or fibre-optic cables. If the digital divide is not addressed, it could turn into a spiritual divide in which the church is divided along generational and socioeconomic lines. A long-term vision for inclusive, multimodal ministry that provides both digital and in-person access points and is adapted to the various realities of its global membership is necessary for the Church to prevent this.

## **6.6 Theological and cultural tensions**

According to the study, deep theological tensions that exposed varying interpretations of the nature of ministry, the meaning of presence, and the connection between faith and psychological health were at the heart of many pastoral decisions made during the COVID-19 pandemic. Pastors' understanding of their roles and responsibilities during the crisis was influenced by their unique theological commitments, which made these differences more than just strategic or contextual. Pastors, who practised a traditional incarnational theology, that is, a deeply held belief that pastoral care needs to be embodied, sacramental, and physically

present, were at one extreme of the spectrum. Other pastors who held this belief believed that sacrament and service were inextricably linked to one another. The Holy Communion, visitation, anointing, and even collective mourning were viewed as incarnational acts that necessitated physical participation rather than just being spiritual practices. One respondent's claim that "laws must not hinder ministry" exemplifies a theological stance wherein governmental or secular constraints are superseded by divine mandates of comfort and presence. A tradition rooted in eschatological consciousness and the importance of proclamation in both word and deed, his pastoral response exemplifies the longstanding Adventist emphasis on immediate, direct intervention, especially during times of suffering and death.

Some pastors, on the other hand, embraced a more integrated and holistic theological framework that recognised the intricacy of human suffering and the importance of psychological understanding in spiritual care. The approach used by one pastor, for instance, shows a readiness to work with mental health specialists and acknowledges that emotional distress, particularly when it stems from trauma or extended seclusion, may call for more than just prayer and scripture. His approach aimed to broaden spiritual care to incorporate evidence-based therapeutic techniques, without discounting it. This change in perspective reflects what Koenig (2018: 7) has referred to as a "biopsychosocial-spiritual model", wherein social, emotional, and medical support systems are positioned alongside spiritual care. Pastors interviewed in the study reframed mental health issues as chances for relational ministry and holistic healing rather than as signs of faith failure.

This disagreement is a miniature of a larger theological discussion about how to balance "faith-only" viewpoints with clinical and psychological frameworks within Adventism and the Christian community worldwide more broadly. This discussion was heightened by the

pandemic, which brought to light long-standing concerns about the impact of secularism on spiritual authority while also highlighting the shortcomings of theology that is disconnected from human experience. Traditional pastoral techniques like quoting scripture or praying were frequently insufficient when dealing with complex emotional pain, especially trauma, anxiety, and depression that were made worse by social isolation, loss, and uncertainty (Khosha-Nkatini 2022: 2; Sherman et al. 2021: 245). Congregants in these situations required trauma-informed, psychologically sensitive support in addition to spiritual reassurance. This does not diminish the power of faith, but it affirms that spiritual leaders must be equipped to interpret suffering through a broader, more nuanced lens.

However, research findings also confirm that spiritual resources were still crucial. Paradoxically, a number of pastors noted that phone-based counselling and other remote care models occasionally allowed for greater degrees of openness and vulnerability. Congregants who might have experienced social pressure to remain composed in public worship settings were able to confide in a caring pastor over the phone about their anxieties, uncertainties, and emotional vulnerability. As both Johnston et al. (2022: 385) and Khosha-Nkatini (2022: 1) have explained, this dynamic shows that when pastors establish private, nonjudgmental spaces for care, whether in person or through technology, spiritual safety and emotional disclosure can coexist, even flourish.

These encounters suggest that a new pastoral paradigm is required, one that integrates psychology and theology into a psychospiritual approach to care rather than rejecting the former in favour of the latter. Prayer and presence are still essential components of this new paradigm, but they are enhanced by empathy, mental health literacy, and the capacity to recognise when professional help is required. In addition to being a preacher and sacramental leader, the pastor also serves as a bridge-builder, a mediator between the doctrinal and the

profoundly human, the spiritual and the emotional, and the sacred and the psychological. The trajectory of Adventist health theology, which has traditionally placed an emphasis on holistic well-being, encompassing body, mind, and spirit resonates with this model (White 1905: 77). This ethos can be extended into the emotional and psychological spheres of pastoral work thanks to the Church's longstanding investments in hospitals, health education, and preventative care. In order to fully integrate mental health into ecclesial life without sacrificing spiritual integrity, deliberate theological reflection is now required. This entails giving pastors theological frameworks that affirm emotional suffering, educating them in mental health first aid, and fostering cultures within congregations that embrace vulnerability and honesty as manifestations of genuine faith (Pratt 2024: 1).

Pastors must resolve these conflicts with both theological fortitude and practical discernment, as the pandemic has demonstrated. The difficulty lies in maintaining a creative tension between these realities, affirming the importance of spiritual practices while acknowledging the indispensable value of psychological insight rather than choosing between prayer and therapy, sacrament and science, or faith and feeling. This study has demonstrated that pastors who were able to move between these two spheres with humility, compassion, and theological depth were the most successful in meeting the needs of their communities.

The results show that although pastoral care practices were altered, they were anchored theologically in their holistic ministry based on mission, community solidarity, and health reform. Pastors demonstrated historical continuity even in innovation by drawing on these traditions while providing emotional support and digital outreach. The pandemic was frequently characterised by participants as a time of rupture in ministry. The limitations on in-person worship fundamentally altered how care was provided. Pastors noted that the traditional

Sabbath-focused, building-centric model found it difficult to address growing concerns related to mental health, spiritual isolation, and grief care.

The quick uptake of social media, WhatsApp, and Zoom for counselling, prayer chains, and preaching was one of the key takeaways from the interviews. By attracting previously disengaged members and providing more adaptable engagement options, these tools increased the pastors' demographic and geographic reach. However, the digital divide was also recognised by pastors as a new type of inequality. The information demonstrates the SAU pastors' inventiveness and tenacity. Many pastors used context-sensitive tactics, combining virtual preaching, phone ministry, and printed materials, despite having few resources. Their accounts show how pastoral care is moving towards a more relational and decentralised model. Hybrid ministry has been sparked by the pandemic. Pastors see a future in which ministry is more integrated into the community, mental health support is accepted, and digital and physical spaces coexist. The results point to the necessity of developing denominational protocols for future crises as well as providing training in digital literacy and psychological first aid.

## **6.7 Conclusion**

The study findings have significant ramifications for Seventh-day Adventist pastoral ministry going forward in the post-pandemic environment. From digital innovation and hybrid ministry models to grief support, mental health integration, socioeconomic and generational disparities, and theological negotiation between tradition and adaptation, the major themes that surfaced all came together to form a single imperative: flexibility within faithfulness. This sums up the central realisation of the pandemic era. Although Adventist ministry's theological underpinnings are firm and firmly grounded in Scripture and tradition, the ways in which

ministry is carried out must change to adapt to the rapidly changing emotional, technological, and cultural environments.

The fact that flexibility is a spiritual discipline in and of itself is among the most profound lessons to be learnt from the pandemic. Pastors who recognised that methodological flexibility does not equate to theological compromise were able to sustain pastoral presence and spiritual care in the face of lockdowns and uncertainty. Rather, it demonstrates a dynamic expression of pastoral responsiveness—a dedication to meeting members of the congregation where they are, be it via a televised sermon, a WhatsApp prayer chain, a Zoom call, or a socially distant doorstep visit. The Church's future ecclesial strategy and ministerial training should be guided by this theological reinterpretation of adaptability.

In practical terms, this means that the Adventist Church needs to take decisive action to institutionalise the skills and resources needed for multifaceted ministry. Certification in digital literacy, which includes abilities in livestreaming, creating multimedia content, online instruction, digital ethics, and virtual engagement tactics, should be a part of clergy training programs. Incorporating pastoral psychology and mental health first aid into ministerial education is equally important. Pastors who possess these skills will be better equipped to handle emergencies and offer all-encompassing care that attends to the spiritual, emotional, psychological, and social needs of people.

In order to address the digital divide that the pandemic exposed, infrastructure investment will also be essential. Neither geography nor socioeconomic status should be a barrier to equitable access to pastoral care and worship. These gaps can be filled and a hybrid ministry made a reality rather than just a theoretical dream by subsidising internet access for rural congregations, distributing mobile devices for communal use, and offering continuous technical support. The objective is to promote a revitalised “incarnational lifestyle of worship”

that respects the irreplaceability of embodied presence as well as the accessibility of digital tools, as Cain (2023: 5) points out.

Theologically speaking, the Church needs to adopt a more comprehensive and integrated view of ministry, one that views mental and spiritual health as interdependent and supportive of one another. This entails establishing theologically sound and secure environments where members of the congregation can seek psychological assistance without worrying about being judged and where pastors are prepared to distinguish between clinical depression and spiritual malaise. The historical Adventist focus on wellness and health reform can be broadened to include trauma-informed care, mental health education, and the de-stigmatisation of counselling and therapy. By stating that salvation affects the entire person, not just the soul, this expansion affirms the gospel rather than weakens it.

It is also crucial to create denominational policies for crisis response and hybrid worship. Congregations' and districts' inconsistent responses during the pandemic presented a number of difficulties. Clarity on issues like digital sacraments, altered rites during public health emergencies, pastoral visitation protocols, and ways to preserve community during lockdowns would be provided by a cogent framework that was created in consultation with theologians, health professionals, and pastoral leaders. For local churches navigating upcoming upheavals, these rules would act as a practical resource as well as a theological compass.

As a whole, the Adventist pastoral vocation is at a pivotal moment, a turning point characterised not only by procedural or technological changes but also by profound theological contemplation of what it means to lead God's people in a world that is uncertain, fragmented, and changing quickly. Both opportunities for innovation and weaknesses in current systems have been exposed by the adaptations made under the strain of a global crisis. Adventist ministry can emerge from this time not diminished but deepened if these insights are critically

integrated: adopting inclusive technology, making investments in emotional and mental health care, reimagining grief rituals with cultural and spiritual sensitivity, and reaffirming the Church's commitment to embodied faith.

The purpose of this study was to investigate how pastoral care changed in the South African Seventh-day Adventist Church in response to the COVID-19 pandemic, specifically in the Northern Conference. The study, which was grounded in historical context, discovered that although the pandemic presented previously unheard-of difficulties, it also spurred a wave of creativity and adaptation among pastors. The results demonstrate that pastors extended care across digital and physical boundaries, responded compassionately to mental health needs, and creatively used technology to sustain spiritual connection. Disparities in preparedness and access, however, brought to light structural injustices that need to be fixed to guarantee resilience in the future. The study sought to add to the body of knowledge regarding the post-pandemic role of the Adventist pastor, which is based on a theology of presence that extends into both virtual and embodied spaces, is emotionally intelligent, and is digitally fluent. The Church now has a crucial chance to institutionalise these teachings, make investments in long-term pastoral models, and stay true to its mission in a world that is constantly changing.

The power, promise, and purpose of the gospel are unchangeable. The channels it travels through, that is, the platforms, rhythms, and strategies of ministry, are what change. The Church is called to move forward with brave creativity in this new terrain, grounded in the timeless truths of Scripture and sensitive to the demands of the present, rather than withdrawing into nostalgia. By doing this, it will not only uphold the core of its mission but also more fully, empathetically, and faithfully embody it in a world that is changing and complex.



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## Appendices

Appendix 1: University of Pretoria Proforma Consent Form

### LETTER OF INTRODUCTION AND INFORMED CONSENT FOR PARTICIPATION IN ACADEMIC RESEARCH

#### Title of The Study:

The evolution of pastoral care in the Seventh-Day Adventist Church of South Africa  
post COVID-19

#### Researcher:

Talent Moyo, MSc Practical Theology

Email: [u23595397@tuks.co.za](mailto:u23595397@tuks.co.za)

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You are cordially invited to participate in an academic research study due to your experience and knowledge in the research area, namely pastoral care. Each participant must receive, read, understand and sign this document *before* the start of the study. If a child is 7-17 years and is requested to partake in a research study, the parent/legal guardian must give consent. Children from 7-17 years are also required to sign an assent form.

- **Purpose of the study:** The purpose of the study is to gain insight on the evolution of pastoral care in the Seventh-Day Adventist Church of South Africa post COVID-19. The results of the study may be published in an academic journal. You will be provided with a summary of our findings on request. No participants names will be used in the final publication.
- **Duration of the study:** The study will be conducted over a period of 1 year and its projected date of completion is May 2025.
- **Research procedures:** The study is based on experiences by pastors in the Seventh-Day Adventist Church. The interview will be done online using an online survey tool called Survey123.
- **What is expected of you:** information on how your pastoral care practices have evolved post COVID-19.
- **Your rights:** Your participation in this study is very important. You may, however, choose not to participate and you may also stop participating at any time without stating any reasons and without any negative consequences. You, as participant, may contact the researcher at any time in order to clarify any issues pertaining to this research. The respondent as well as the researcher must each keep a copy of this signed document
- **Confidentiality:** All information will be treated as confidential and the participants will be kept anonymous. The relevant data will be destroyed, should you choose to withdraw.



- **Remuneration:** No money / fees gifts or any form of reward will be awarded / offered / can be expected by co researchers / respondents / participants at any time during the research
- In compliance with the South-African government's Protection of Personal Information Act (*POPIA*; Act no. 4 of 2013), the information that will be collected will be kept secure at all times, according to the Information Technology Security Policy (Rt71/17) of the University of Pretoria. The information will not be used in any other way, other than directed.

## WRITTEN INFORMED CONSENT

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I hereby confirm that I have been informed about the nature of this research.

I understand that I may, at any stage, without prejudice, withdraw my consent and participation in the research. I have had sufficient opportunity to ask questions.

Respondent: \_\_\_\_\_

Researcher: \_\_\_\_\_

Date: \_\_\_\_\_

Contact number of the Researcher:  
\_\_\_\_\_