

# Resilience of African Kinship Values amidst COVID-19 Pandemic Disruptions in Masvingo and Bikita Districts, Zimbabwe

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## Abstract

This article sought to explore the extent to which African kinship values remained resilient amidst COVID-19 pandemic disruptions in the Masvingo and Bikita districts, Zimbabwe. The study was guided by the social disruption theory. Adopting a phenomenological approach, this qualitative study used key informant interviews, focus group discussions, observations, and a review of available literature to gather data. The research's main finding was that African kinship values were disrupted, but by and large, the communities were resilient to the COVID-19 pandemic-induced restrictions from March 2020 to June 2022. The paper argues that whilst discomfort and uncertainty were a litmus test for the efficacy of African kinship values and principles, the communities in Masvingo and Bikita districts redefined their values, sense of belonging, and emotional well-being across the gender divide in temporal and spatial spheres. It can be concluded that the African kinship value system played a critical role in integrating health and social care systems in the Masvingo and Bikita districts.

## Keywords

African kinship values; COVID-19; resilience; social disruption theory; Zimbabwe

## Research Context

The COVID-19 pandemic has come to be regarded as one of the most catastrophic global diseases to have affected humanity in the 21<sup>st</sup> century era. The pandemic presented unprecedented health challenges across all strata of society throughout the world (Sibanda et al. 2022). The World Health Organization (WHO) declared COVID-19 a global health crisis on 11 March 2020. Apparently, the pandemic resulted in multiple uncertainties, deaths, and loss of sources of livelihood. The pandemic gave rise to a 'new normal' characterized by shocks and adjustments to new ways of life. The uncertainty experienced in Zimbabwe gave rise to a heightened turn to religion and spirituality. Spirituality, once described by Levin (2001, 5) as 'the invisible factor in health,' has a strong influence on people's beliefs,

attitudes, emotions, and behaviour. The recourse to religion and spirituality is understandable as asserted by the renowned African theologian John Mbiti (1969, 1) who notes that ‘Africans are notoriously religious, and each person lives in a religious universe.’ This claim on African religiosity makes one echo the question raised by Platvoet and Van Rinsum (2003, 1): ‘Is Africa incurably religious?’ We acknowledge Mbiti’s bold claim, which has attracted criticism from some African scholars such as Okot p’Bitek and Joshua N. Kudadjie (Platvoet and Van Rinsum 2003), as well as support as justified (Olabimtan 2003). Although Mbiti’s assertion generalizes all Africans as religious, we uphold his claim in this study on the grounds that there are some tendencies by some Africans to spiritualize life experiences, especially those that are challenging to understand, shrouded in mystery, and related to public health. In this regard, the COVID-19 experience has caused some people to rethink their lives, health, and well-being, as well as death (Sibanda et al. 2022) in relation to African kinship values.

The concept of kinship is broad (Layefa et al. 2022). Generally, kinship is the hub that relates people with one another for fellowship, togetherness, and social support. African kinship values are diverse, complex, and dynamic. They are rooted in cultural and historical contexts. Among the African kinship groupings found in society are the nuclear family, extended family, and clan (Layefa et al. 2022). Kinship places blood relations at its core and can be matrilineal, patrilineal, or the extended family system. However, kinship ties are not confined to blood relations, as non-blood ties also exist based on a principle of common humanity. In the category of non-blood relations, fictive kinships, which are anchored in social networks as well as role responsibilities determined by what one must do in a community (Layefa et al. 2022), come to the fore. In this form of kinship, compassion and solidarity can be extended to all, including strangers in society. Thus, both blood and non-blood kinship systems are crucial in influencing a shared identity in family structures and social norms as well as supporting the continuity and stability of societies amidst communal challenges such as the health crisis caused by HIV and AIDS (Chitando 2007) and the COVID-19 pandemic. Therefore, African kinship values are rooted in social relationships within society.

This article examines the impact of the COVID-19 pandemic on African kinship values in the Masvingo and Bikita districts, Zimbabwe, exploring both the disruptions and the resilience of these values. The study grapples with the question: How well did African kinship values hold during the COVID-19 pandemic in the Masvingo and Bikita districts? The research was informed by insights from the social disruption theory. The social disruption theory examines how social changes such as health emergencies affect individual well-being and social structures (Walby 2020; Long et al. 2021). The key proponents of the social disruption theory include Leonard Pearlin, whose work stressed how social changes can interrupt life paths, which can result in stressful situations.

Some of the key tenets of the social disruption theory include the increase in disparities in stress exposure and vulnerability in diverse social locations. The theory is also characterised by a combination of integration and resilience (Moen 2022). This combination entails adapting to crisis situations as people work to overcome integration challenges and foster collaboration based on African kinship values. The social disruption theory was helpful in identifying the collective responses of communities in Masvingo and Bikita districts during the COVID-19 crisis. Therefore, it was a useful lens for understanding the social disruptions to key aspects of social relationships and resilience. This resonates with the four domains of social relationships identified by Long and others (2021), which are social networks, social support, social interaction, and the element of intimacy. The social disruption theory was useful in exploring the dynamics of the social cost of the COVID-19 pandemic and the people’s resilience in Masvingo and Bikita districts. Thus, the social disruption theory is vital

in examining the ways in which relational mechanisms key to health and well-being were altered by the COVID-19 pandemic (Long et al. 2021, 128) and how affected communities navigated the crisis.

The article argues that whilst discomfort and uncertainty were a litmus test for the efficacy of African kinship values and principles, the communities in Masvingo and Bikita districts redefined their values, sense of belonging, and emotional well-being across the gender divide in temporal and spatial spheres. The introduction is followed by a section on research methodology and a presentation of the findings, which are structured thematically. The article concludes with a critical reflection on the findings and the wider implications of this study.

## **Research Methodology**

This qualitative research was carried out in the Masvingo and Bikita districts of Masvingo province. Masvingo district comprises both urban and peri-urban settings, whilst Bikita district largely consists of participants residing in a rural setting. The rationale was to gather data from a diverse spectrum of people with different socio-religious, economic, and cultural backgrounds. We purposively selected all the participants. The goal of using purposive sampling in the study was to intentionally identify and select information-rich individuals or groups (Palinkas et al. 2015; Etikan et al. 2016) in the context of the COVID-19 pandemic. This enhanced depth and relevance of the data collected on the pandemic's impact for an informed analysis.

The research participants were drawn from diverse religious orientations and occupations, including African traditional healers, Christians of different denominations, and village health workers. A total of 41 participants were recruited, comprising male and female participants aged between 35 and 60. Five focus group discussions (FDGs) were held. The FDGs were coded for ease of presenting the findings. The first focus group discussion (FDG 1) was held with traditional healers in the Masvingo district on 10 February 2022. The second focus group discussion (FDG 2) was held with the Roman Catholic Church in urban Masvingo on 20 March 2022. The third focus group discussion (FDG 3) was held with the Zion Apostolic Christian Church in the Bikita district on 10 April 2022. The fourth focus group discussion (FDG 4) was held with traditional healers in the Bikita district on 15 May 2022. The fifth focus group discussion (FDG 5) was held with the Reformed Church in Zimbabwe in Bikita district on 20 May 2022. The Key Informant Interviews (KIIs) held with traditional leaders (chiefs) were coded as C1 for the Masvingo interview held on 30 November 2021, whilst C2 referred to the interview held in the Bikita district on 15 May 2022. The KIIs for traditional healers were coded as TH1 for Masvingo, held on 10 February 2022, whilst TH2 and TH3 were interviews held in the Bikita district on 15 May 2022. The study also used the observation technique to complement other data collection instruments. For data analysis, we employed the interpretative phenomenological approach (IPA), as it seeks to understand the lived experiences and how individuals make sense of their personal and individual worlds (Tomkins, 2017). The following section discusses the research findings.

## **African Kinship and COVID-19 in Masvingo and Bikita**

The research results revealed that the advent of the COVID-19 pandemic was a game-changer in the lives of the people of the Masvingo and Bikita districts in Zimbabwe. The findings present evidence of the pandemic's impact on the socio-religious and cultural lives of the respondents. They reveal that the pandemic's containment measures, as outlined by the World Health Organization (WHO) and ministries of health in African countries, disrupted African social relationships, religious beliefs, and practices. Africans, particularly those in the Masvingo and Bikita districts, cherished the African kinship values espoused in the

communitarian approach, where if ‘you injure one, you injure all,’ as summed up in Mbiti’s (1969, 103) dictum: ‘I am because we are; since I am, therefore we are.’ This sense of togetherness and inseparability among African people was challenged and tested when the COVID-19 pandemic hit the continent, particularly in Masvingo province.

Drawing on the social disruption theory to understand the dynamics of the health crisis, we present the participants’ responses on how the pandemic was a game-changer that called for a redefinition of African kinship values, religious beliefs, and practices. When the WHO and Ministry of Health and Child Care (MoHCC) COVID-19 containment measures such as social distancing, stay-at-home, reducing gatherings at funerals, and/or not viewing the bodies of COVID-19-related deaths, among others, were implemented to the letter and spirit, it was no longer business as usual in terms of people’s beliefs and practices (Sibanda et al. 2022). For purposes of this article, three themes related to the domains of social relationships emerged from the study: (1) the impact of social distancing on African kinship values, (2) the impact of stay-at-home on people’s social interactions, and (3) the impact of the COVID-19 pandemic on funeral rites, beliefs, and human rights.

### ***African Kinship Values and Social Distancing***

The study established that African kinship values such as the principles of solidarity and relational justice summed up by the phrase ‘I am because we are’, point to African renderings and close affinities, which were usually expressed through handshaking, hugging, and at times kissing. However, WHO and MoHCC emphasized ‘social distancing’ as a measure of curbing the spread of the COVID-19 pandemic during its peak in Zimbabwe. Asked what ‘social distancing’ meant for the people of Bikita and Masvingo districts, one key informant revealed that although the rule was meant to save lives, it was very difficult to practice from an African kinship values perspective. He argued that people were accustomed to mixing and mingling, sharing jokes, shaking hands, and, in some instances, hugging each other. This is the ethos of communitarian life, which communities cherish and live by—an ethos of togetherness, expressed in that a person is a person because of others. One member in a focus group discussion (FDG 4) stated thus:

The decree on social distancing is making our lives very difficult. For those living in towns where a family shares a room, how do you expect them to keep the distance? For us in the rural areas, it is affecting our relationships. We are used to moving around the community sharing beer in a gourd, gathering as we wish for various reasons, and receiving hospitably our visitors from elsewhere, especially our relatives from the towns. All this is no longer permitted. Our lives are supervised by the police and at times by the army.

The above submissions are indicative of the fact that social distancing was never accepted by the people based on the principles of the African kinship value system. It was through coercion that people had to comply. Through observation, we established that this was one of the decrees that were flouted more often, especially in the rural areas. Some communities never practiced it, as it was business as usual unless the law enforcement agents were sent to their communities. This resonates with what Dube (2022) established in his study on Zimbabwe Muslims attending a funeral procession, where the social distancing rule was flouted in the absence of law enforcement agents. The reason for non-compliance with the decree had to do with its violation of the local people’s African kinship value system. Social distancing had significant social implications on the interpersonal and community relationships in the Masvingo and Bikita districts. Thus, the social cost of the COVID-19 pandemic was noted through its disruption of social relationships in the community.

On what lessons the participants had learned from past pandemics such as HIV and AIDS, one chief, who was one of the key informant interviewees in Bikita district (C2), had this to say:

The HIV and AIDS pandemic made us leave several beliefs and practices if at all we wanted to survive. Some of our beliefs and practices like inheritance and polygamy were viewed as promoting the spread of the virus. We were taught to abandon them and embrace new ways of living to avoid contracting the deadly virus. By the same token, COVID-19 pandemic forced people to go against the grain of African kinship values and to adopt new strategies to survive.

The understanding by the above interviewee, a traditional leader, was that just like HIV and AIDS challenged African norms, values, beliefs, and practices such as widow inheritance and polygamy, a step consistent with existing scholarly works by writers such as Chitando (2007), the COVID-19 pandemic disrupted the African kinship values of solidarity and sociality. Therefore, through social distancing, COVID-19 challenged the local people's sense of kinship, co-existence, and Africanness, as expressed through hospitable acts such as greeting each other by shaking hands, sharing food from the same plate, and sharing beds, among others. New ways of expressing these hospitable and respectful gestures were to be adopted. For example, through observation during fieldwork, people bowed their heads at some distance and used clenched fists instead of shaking hands and hugging each other. The greeting style was, therefore, a creative and resilient way of maintaining the African kinship values of sociality to enhance human flourishing during the devastating COVID-19 pandemic. This resonates with what has been noted by Muyambo (2022) in a study on social distancing among the Ndaou communities; Sipeyiye (2022) in research on the coping strategies among the Ndaou under COVID-19 restrictions; and Sibanda (2022) in a study on Rastafari in Malawi and Zimbabwe, who devised an 'elbow-style greeting' in addition to the 'lion paw greeting'. The innovations attest to the resilience of the African kinship value of togetherness and the warmth of embracing each other regardless of the distance mandated by the pandemic.

### ***Impact of Stay-at-Home on People's Social Interactions***

Another COVID-19 containment measure implemented by the WHO and MoHCC was the stay-at-home decree. This had a profound impact on the relationships of people in the social, economic, and religious spheres of their lives. For this study, focus was particularly placed on the social. Sociality, as companionship and living in communities, was one such African kinship virtue that bore the brunt of the stay-at-home decree. Regarding the impact of the Zimbabwe government's stay-at-home pronouncement on them during the peak of the COVID-19 pandemic, most participants reported a negative effect on their social relationships. All the traditional healers in FGD1 and FGD4, held in the two districts under study, revealed that the stay-at-home measure was against their African kinship system, religious beliefs, and practices. While they agreed that this was more severe in urban settings, they also indicated that the random checks by the police and the army in rural areas instilled fear of the law's wrath. On how their African kinship values were disrupted by the pandemic, one key informant interviewee, who was a traditional healer (TH3), said:

Due to the stay-at-home COVID-19 restriction, it was very difficult for our members, (Zimbabwe National Traditional Healers Association, ZINATHA) to move about doing their business, holding spirit appeasing ceremonies, holding community spirit consultation gatherings, attending to their clients, selling their medicines in the streets. People could not even leave their homes to bring their sick relatives to the traditional healers.

This traditional healer, as a key informant interviewee, clearly outlined how some of the COVID-19 measures did not only bring traditional healers' activities to a standstill but also affected their spirituality. They could no longer gather in the public spaces to appease their spiritual world. They could not consult clan spirits as a group, a hindrance that broke the communication lines between the living and the 'living-dead' (Mbiti, 1969), also referred to as 'the living timeless' (Banana 1991). This COVID-19-induced communication breakdown exposed practitioners of African religions to vulnerability status as they could no longer get

what their spiritual realms hold for them. As the informant further claimed, when afflicted by challenges, they could not move around to obtain herbal remedies or travel to attend to their clients' requests, as the COVID-19 setup restricted them. If they could do that, they had to do it clandestinely, as revealed by some traditional healers in FGD1 and FGD4.

Similar experiences were expressed by participants in the Roman Catholic Church and Reformed Church focus group discussions held in the two districts. The stay-at-home rule further created divisions when being vaccinated became a license to attend church services. In a Roman Catholic Church focus group discussion in Masvingo (FGD2), one participant indicated the resultant crisis that emerged between the vaccinated members and the non-vaccinated members. This was sarcastically expressed by one of the non-vaccinated members thus: 'Kwanga kwakadini kudenga kwamanga mwaenda. Anga akadiiko Jesu?' (How was it in heaven, where you had gone? How was Jesus?). These were divisions apparent between some unvaccinated adherents and the vaccinated. This resonates with the existing literature (Muyambo et al. 2024[a]; Muyambo et al. 2024[b]). The Zimbabwean constitutional provisions for *religio-licita* (freedom of religion), which allow members to gather anywhere and at any time, were seriously under check during the COVID-19 pandemic's peak days. According to most participants, the pandemic was a game-changer in their socio-religious milieu. It terribly disrupted their individual and social networks.

Despite the disruptions caused by the COVID-19 pandemic on the African kinship value of sociality, some participants developed new ways of worshipping. Due to the lockdown rule, some churches resorted to religious innovation by introducing online services. Participants from the Roman Catholic Church and the Reformed Church in Zimbabwe referred to their use of online sermons via WhatsApp platforms. Online services developed into online kinship communities. A similar pattern of using social media platforms to communicate with clients was also reported among the African traditional healers through ZINATHA in the Bikita and Masvingo districts. This demonstrates creativity in the way new technologies were integrated and effectively utilized to maintain the core functions of social institutions, promoting human flourishing in society. Fictive kinship was effectively and creatively utilized in the two districts under the COVID-19 health emergency. This, therefore, created a framework of resilience that maintained sociality.

### ***COVID-19-Related Deaths and Funeral Rites***

During the various interviews we held, it was conspicuously confirmed that COVID-19-related deaths changed the people's observance of funeral rites. The narratives we got on this were quite instructive as to the extent to which the COVID-19 pandemic socially disrupted the African kinship system, beliefs, and practices in the Masvingo and Bikita districts. The decree was that any confirmed COVID-19-related deaths were to be handled by conventional medical personnel. The deceased body was to be wrapped in plastic, with no body viewing, no overnight vigil in the deceased's house or homestead, and no funeral gatherings exceeding fifty people. If the deceased's death was due to COVID-19, his or her body was to be taken from the mortuary straight to the graveyard. The participants expressed great concern about how their departed loved ones were treated, as this disrupted the social interactive norms and intimacy with whom they held emotional closeness and respect. One chief interviewee (C1) from Masvingo district intoned, shaking his head in utter disbelief:

The new funeral arrangements are not only a violation of the deceased's rights but also a disruption of the humanness of the bereaved. Remember even the dead have rights in an African cosmology. Can you imagine burying your own kin without body viewing, let alone not being permitted to be near the body? To make matters worse, relatives are kept at bay as the nurses and other strangers bury the deceased. We cannot inter him or her following the proper burial procedures we are used to as Africans. Each family or clan has its own funeral rites to observe, and all this was abandoned due to the COVID-19 pandemic.

Resonating with the above testimony from the chief in Masvingo district, one Pentecostal church elder in Bikita district narrated an ordeal he had to endure when his son-in-law passed on due to the COVID-19 pandemic. He was not even allowed to travel to the funeral due to travel restrictions that were imposed at the peak of the pandemic. One was not allowed to move from one province or city to another unless one had permission from the police. The elder narrated how painful it was not to attend his son-in-law's funeral. He bemoaned the loss of the funeral rite observance. He indicated how it haunted him not to be able to give the last respects to the deceased. This was a disruption of the African kinship values. Similar sentiments were expressed by one Roman Catholic vicar in the Masvingo district, whom we interviewed. He indicated that it was also extremely difficult for members of the clergy to officiate at the funerals of their members who would have passed on due to the pandemic. They only offered prayers, which were the only psycho-social and spiritual support systems that the church could provide to the deceased and the bereaved families without any limits under the COVID-19 restrictions. These findings resonate with available literature. For example, writing from a Karanga-speaking people's perspective, Taringa and Chirongoma (2024) argue that the advent of COVID-19 reconfigured the Karanga religio-cultural terrain as the blood relatives of the COVID-19 victims were no longer allowed to handle the corpse or carry out burial rituals and logistics, which used to be their preserve. In the same vein, Khosa and White (2021) explore the huge challenge COVID-19 posed to African communities by imposing funeral rite protocols and restrictions that disrupted African kinship values such as mourning with the bereaved. Along the same lines, Ndlovu (2024) examines the Ndebele funeral rites and how they were redefined by COVID-19, just as Maseno and Sibanda (2024) explored the post-COVID-19 burial ceremonies in Kenya and Zimbabwe.

The loss of observance of funeral rites was also an emotive issue among the traditional healers during the focus group discussions, FGD1 and FGD2, held in the two districts. The participants unanimously agreed that failing to observe funeral rites for the deceased might result in *Ngozi* (avenging spirit), where the deceased gets angry for having not been buried as per the African norms, customs, and tradition. In FGD1, a female participant in the Masvingo district stated the importance of funeral rites for subsequent rites to be carried out. For her, funeral rites are performed to ensure that the deceased is properly buried so that subsequent rites, such as bringing back the spirit of the deceased (*kurova guva* in the local language), can ensue. This evidently highlights the extent to which the COVID-19 pandemic disrupted African kinship values in the Masvingo and Bikita districts. In coping with the pandemic, participants had to reimagine funeral rites, where certain observances were jettisoned to prevent the spread of the pandemic. Although it was a painful experience not to have the corpse handled by blood relatives, they had to deal with the 'new normal'. A study by Ratau, Monyela, and Mofokeng (2021) revealed that it was no longer business as usual during the COVID-19 pandemic. Nations and communities had to reimagine several issues, including funeral rites. The above authors argue that funerals took a new, strange turn in how the rites of passage for the deceased were practiced, something that disrupted the African kinship values.

## **Leveraging the African Kinship Values in a Health Crisis: Critical Reflections**

This section offers reflections on how African kinship values, disrupted by COVID-19, can be further understood considering existing literature and within the context of collective responses and relational mechanisms during a health crisis. The social cost of the COVID-19 pandemic manifested through the disruption of social relationships as people were placed under the guidelines of the World Health Organization (WHO) and the Ministry of Health and Child Care to curb the spread of the disease. In both the Bikita and Masvingo districts, the findings revealed that the decree on social distancing had serious social implications for African kinship-based interpersonal and community relations, necessitating a reduction in social contacts and the adoption of other coping mechanisms. From existing literature, there are similar findings, as instanced in studies by Long and others (2021) in a Western context, while Muyambo (2022) and Sipeyiye (2022) provide experiences from Ndau in Zimbabwe. In fact, Long and others (2021, 128) rightly observe that the equation of physical distance and social distance was regrettable, given that viral transmission was found in the former, whereas many forms of social proximity had minimal risk and were crucial for maintaining relationships that could support health and well-being.

In line with the above, although COVID-19 disrupted the existing social networks anchored on the African kinship system in the two districts under study, it can be asserted that people could reimagine and redefine the African kinship value that promotes communal relations, which are prized and leveraged for overcoming mental health and emotional well-being issues (Ewuoso 2021, 34; Jecker et al. 2022; Kagola and Abur 2023). It is also important to note that the African kinship system played a crucial role in facilitating the integration of health and social care systems amid the disruptions caused by the COVID-19 pandemic. Since social networks are adaptive and responsive to change (Long et al. 2021), participants in Bikita and Masvingo districts had to redefine their symbols and gestures of social interaction during a health crisis. Under the decree pertaining to funeral rites in Bikita and Masvingo districts, it can be noted that physical distancing measures drastically altered social interactional norms and the domain of intimacy. These African values were disrupted, yet they were key in establishing relational mechanisms that demonstrate trust, belonging, affinity, empathy, and respect, including hugging and physical comforting. This echoes De Coning and others (2020), who observed that the COVID-19 pandemic revealed an Africa that is characterized by resilience rather than conflict. In the context of worship and funerals, online equivalents of sermons and bereavement services were introduced. However, these do not bring the same emotional and social bonding as the physical proceedings, which reinforce community belonging. The social disruption theory examines the dual roles of technology and innovation in health systems and social relationships, considering both their positive and negative impacts. It can be argued that the closure of churches and religious activities led people to worship through online platforms (Muyambo et al. 2024[b], 81). Such innovation encompassing ‘the new culture of online religion’ (Asamoah-Gadyu 2015) provided space to leverage the African kinship values to ‘rethink the importance of the family within Christianity’ (Muyambo et al. 2024, 81) and African communal relationships under health emergencies. Creating family ties within Christianity is a fictive kinship social network based on non-blood relations, which allows one to realize shared ends under communal relationships in a health crisis.

The transition into the post-COVID-19 pandemic era resulted in the reconfiguration of the African kinship system in several ways, but three main ways come to mind. First, the African kinship system reinforced its value as a socio-cultural and economic safety net, showing that it persisted despite health emergencies. Despite the disruptions, kinship systems in the two districts under study displayed notable resilience and adaptive capacity. Therefore, kinship

served as a crucial tool in navigating survival during the pandemic and in the post-pandemic period. Many families, especially in rural areas, resorted to the old ways of relying on the extended kinship relations for survival, through which they shared food, shelter, and caregiving responsibilities. This is an ‘indigenous resilience,’ which places kinship as an insurance mechanism that substitutes missing formal welfare structures (Vergura et al. 2021). Second, the post-COVID-19 context exposed vulnerabilities, especially in urban and diasporic kin structures with weak digital or economic ties. Whereas the spiritual physical gatherings were revived, most religious people maintained their newfound medium of communicating through virtual reality, notwithstanding the existence of digital inequality. Third, and building on the second, the post-COVID-19 pandemic era inspired adaptive innovation, as digital and traditional modes of kinship co-evolved. Fictive kinships and social networks based on non-blood relations within churches and the broader community were created. African kinship systems inspired new forms of solidarity and mutual aid, including through the formation of virtual stokvels, mobile aid networks, and digital burial societies to sustain cultural obligations remotely. It shows that African societies can adapt and transform rather than break under pressure, which proffers a useful framework for understanding kinship resilience in the post-COVID-19 period. Ali Mazrui’s (2004) observation is instructive when he said, ‘African social systems, like kinship, do not simply break; they bend and transform.’ This comment dovetails with the people’s experiences of disruption and resilience under the guise of African kinship, which became a vital tool in navigating health crises in the wake of the COVID-19 pandemic and post-COVID-19 pandemic.

## **Conclusion**

The study demonstrated that the African kinship values of the people in the Masvingo and Bikita districts were significantly affected by the COVID-19 pandemic. We focused on three themes that emerged from the study to illustrate how the disease disrupted African kinship values, which are fundamental to African humanity and personhood. The African kinship value system is anchored in the communitarian approach, where the principle ‘you injure one, you injure all’ is key and was disrupted under the health emergency. This sense of togetherness and inseparability suffered a heavy blow when the COVID-19 pandemic hit the people of Masvingo and Bikita districts. A corroboration of interviews, observation, and FDGs as data collection methods was useful for the study. The social disruption theory, which informed the study, was also a helpful lens for understanding the existential circumstances experienced by the people of the Masvingo and Bikita districts. The role of technology and innovation in health systems has provided a means to leverage the African kinship value in creating fictive kinships and social networks based on non-blood relations within churches and the broader community. The post-COVID-19 pandemic period has revealed deep and lasting implications for African kinship values and resilience, both in terms of challenges and adaptive transformations. In the post-COVID-19 era, the imperative is to learn from the mistakes of previous pandemics for a sustainable future. Thus, despite COVID-19 disrupting the existing social networks anchored in the African kinship value system in the Masvingo and Bikita districts, it can be concluded that the African kinship system was critical in providing integration between health and social care systems.

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