



Re-thinking the scourge of leprosy (Matthew 8:2-4) in the context of the COVID-19 pandemic: A protective motivational paradigm

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Abstract

Leprosy has been a health hazard since antiquity and its cure is to date, not known. During antiquity, leprosy was viewed as a disease which was the result of sin against God. The disease appears to have started in Eastern Africa or the Near East and was spread to other places by human migrants. There is a parallel between leprosy and the COVID-19 pandemic in that, their preventive measures are social distancing (physical distancing), quarantining of affected victims and washing of hands, among other similar things. This article aims at the re-consideration of the leprosy scourge as it is reflected in Matthew 8:2-4 in relation to the COVID-19 pandemic. Jesus did not want the law to separate lepers from society because they were considered 'unclean', so he was motivated by protecting the victims from the disease and its social stigmatization. There was intervention by Jesus through healing the victim in Matthew 8. This study is informed by insights from the protective motivational theory which views the healing of a leper as a protective motivation of the affected victim. The study argues that leprosy during the first century CE has a remarkable parallel with the COVID-19 pandemic in as far as mitigatory and protective measures are concerned. The study contends that, there is need for greater motivation for the protection of victims who may be entrapped in disasters and pandemics such as leprosy and COVID-19. It is also noted that interventions should be done following the proper procedures with regards to both leprosy and the Coronavirus disease. This study recommends that there should be equity and social justice, inclusion of people affected by leprosy and COVID-19, as well as building alliances among stakeholders in the process of intervention.

Keywords: Leprosy, protective motivational paradigm, Matthew 8:2-4, leper, COVID-19.

Introduction

Ever since antiquity, leprosy has been a health menace to humanity and there is no cure, and it is highly contested whether or not there is indeed a cure for it. During the period of Jesus' missionary journeys, leprosy was perceived as a disease which came as a result of sin against God. The victims of this disease were isolated and forced to live on the outskirts of the community in remote areas such as caves, and slowly, the victim got disfigured, probably losing toes, fingers, limbs and eventually they died. Leprosy tended to be a common skin condition at the time of Jesus. People assumed that it was a contagious disease, and this led to leprosy sufferers being treated as social outcasts. There were also very strict instructions in Jewish scriptures to try to stall the spread of the disease. The Jews believed that if you came into contact with a leper you



would become 'unclean'. Lepers were thus obliged to live in leper colonies and were forbidden entry to villages and towns.

Leprosy thus had a severe social stigma was attached to it (Ellingworth, 1992:463; Pilch, 1981). This disease can be traced either to the Near East or Eastern Africa and was possibly transmitted by traders. There is similarity between leprosy and the COVID-19 pandemic, which has been perceived and interpreted differently from leprosy by society. The mode of the spread of COVID-19 and the mitigatory measures seem to be similar to those of leprosy. In antiquity, it was a taboo and against the Mosaic Law for one to get into contact with a leper, but Jesus went beyond the dictates of the tradition by healing a leper. The COVID-19 pandemic and leprosy are both socially revalued conditions with severe consequences for humanity. It appears that Jesus in Matthew's gospel, was not worried about being contaminated or becoming impure by touching the leper (Deines, 2008:65). Matthew did not talk about any rites of purity in relation to Jesus and his disciples before he went into the temple. According to Viljoen (2014), Matthew talks of a Jesus who appears to be flouting the purity conventions in the Hebrew Scriptures. The breaking of the purity regulations (Leviticus 13-14; Numbers 5:2), include Jesus continuing to be in contact with people with skin diseases. He also proceeded to touch a leper (Matthew 8:3) and he did not avoid impure people who were in contact with him, such as the woman with a flow of blood (Leviticus 25-30). Jesus did also not refuse to be touched by this woman. The related miracle teaches us that God is concerned about people in distress and will reach out and touch them in times of need. It also reminds Christians that they should be reaching out and caring for all of those who are shunned by society or are considered to be outcasts.

There are several occasions when Jesus broke the Jewish tradition, with the aim of healing people who were suffering from leprosy. This is in tandem with the outbreak of the coronavirus, in which mingling with the affected people could spread the deadly disease. If different countries globally disregard the mitigatory measures, which are being enforced by the World Health Organisation (WHO), this may result in the losing thousands of lives. The purity codes in the Jewish tradition, in terms of leprosy, are comparable to an extent with the mitigatory measures which the WHO proclaim are to be practiced globally relating to COVID-19.

The article seeks to interrogate the seemingly challenging actions by Jesus, contrary to the Jewish purity regulations, specifically where Jesus touched the leper (Matthew 8:3). What is significant is that, Jesus emphasized that he came to fulfill the law not to abolish it (Matthew 5:17-19), yet he evidently showed another understanding of the Purity Law. Why was Jesus not affected when he touched the leper? This study analyses the healing of the leper in the context of the traditional Jewish purity laws, in relation to the norms and values of that period in history. This is in some ways similar to the coronavirus scourge that has claimed thousands of lives globally. The focus of this article is also to explore and re-think the leprosy scourge as it is found in Matthew 8:2-4, in the context of the COVID-19 pandemic. Why the church is seemingly muted in the COVID-19 pandemic environment globally? Is the church not hiding in fear of the pandemic instead of her tackling the epidemic head-on? Why is the church failing to heal people and fight the pandemic as Jesus healed the leper? These and other questions guided this brief research.

Theoretical framework: Protection Motivation paradigm

This research is informed by insights from the Protection Motivation Theory (PMT). The theory was developed by Rogers (1975), with the intention of describing how people are motivated to respond in a self-protective manner in light of the apparent threat to humanity from disasters. Rogers (1975) developed this theory in order to test the hypotheses concerning disaster preparedness. The Structural Equation Model (SEM) was utilized in this study in interrogating



how communities are likely to cope with disasters and decide what to do when confronted with disasters such as leprosy and the COVID-19 pandemic. The decisions that can be made in such a scenario will be able to project a particular community response in times of apparent calamities. The theory will try to explicate and envisage that which encourages communities to change their behavior in relation to the leprosy and coronavirus disasters. According to Maddux and Rogers (1983), PMT suggests that communities protect themselves based on two features, which are: the threat to assessment and the coping evaluation. The threat of assessment of the severity of the leprosy and the COVID-19 pandemic will examine the depth of the threat to humanity, while coping evaluation is how leprosy and the COVID-19 pandemic victims are helped and protected. The protection motivation paradigm argues that for the victims/people to embrace a good health behavior, “they need to believe that, there is a severe threat that is likely to occur and that by adopting a healthy behavior, they can effectively reduce the threat” (Maddux, & Rogers, 1983). The person who should reach out should be able to make a commitment to engage in protecting the people who are at risk, at a reasonable cost and without charge where possible.

Pandemics and disasters in the antiquities: An overview

From the Old Testament times, there was an understanding by humanity that pandemics and disasters bear significant other-worldly messages. It is apparent that these messages suggested that humanity has some accountability for their suffering. This thoughtful philosophy could have informed humanity to conceptualise where pandemics and catastrophes were coming from so as to evade their recurrence in future. According to this understanding, the calamities and pandemics in the history of humanity propose and recommend how people should live their lives (Foucault, 1997). This is in sync with the biblical story in Exodus 7:1ff, which has several types of plagues initiated by God as a form of punishment because of the disobedience of humanity. For communities to understand these forms of communication, they require certain interpretational abilities and skills in reading correctly the significance and meaning of specific plagues. For example, in Exodus 12:7, where there was a smearing of blood on the “door post and the lintel of the houses”, the people in this scenario would recurrently enquire from God about the imminent occurrence of the probable impending pandemic and prepare themselves for it.

In the Book of Exodus, there was an outbreak of plagues that could be referred to as pandemics in our contemporary setting. From Exodus 7:1 to 10:1ff, God sends ten different types of plagues to the Egyptians in a bid to force King Pharaoh to release the Israelites who were being oppressed and used as slaves. Moses was called by God and was given a commission which was important as he had to free the Israelites from their Egyptian bondage. Moses became a significant and powerful instrument that God used to do several signs, or “wonders”, as evidence that they were coming from God. Due to Pharaoh’s power obsession, each time when he consented to let the Israelites go, he would backtrack when the plague was reversed or lifted. Pharaoh did not change his thinking in order to release the Israelites from slavery. God had to stamp his authority, which resulted in the last plague causing the death of the firstborn child of every Egyptian family. Such calamities are called pandemics today, but in the period of Moses they were simply called plagues, namely: flies, death of firstborn children, water turning into blood, livestock pestilence, frogs, locusts, lice, darkness and boils. Moses’ role during the Exodus escapade was so important in that he earned a description of being an archetype of prophecy in Israel and he gained great recognition and power in biblical history. These were some of the disasters and pandemics which were experienced in antiquity, which are reminiscent of the COVID-19 pandemic of the twenty-first century.



Re-reading the healing of the leper (Matthew 8:2-4)

As stated, during antiquity, people who suffered from leprosy were perceived as being social outcasts. During this period, there was no cure for those people who were affected by this dangerous disease which left the victim disfigured. Leprosy is caused by a bacteria called *Mycobacterium leprae* and mainly affects one's skin and nerves outside the brain and spinal cord, and can affect one's eyes and the thin tissue lining the inside of the nose. Its main symptom is disfigured skin sores, and large lumps, or bumps that don't go away and the infected person's skin develops sores that are pale-colored. There is also nerve damage and loss of feeling in the arms and legs as well as muscle weakness. Leprosy is contagious if one comes into close and repeated contact with nose and mouth droplets from someone who has leprosy but is not being treated (Miller, 2020).

What is significant in this healing of the leper by Jesus was that he did not consider the Jewish purity laws that stipulated that touching a person with leprosy would make one contaminated. In the book of Matthew, the Jewish religious authorities were offended by Jesus' contact with people who were considered to be impure. This eventually resulted in the tension between Jesus and the Pharisees and scribes because of the purity laws (Matthew 15:20). A question that can be asked is, why did Jesus describe his mission as not abolishing the Mosaic Law or the prophets, but fulfilling them? (Matthew 5:17-19). Another highly significant question is, what did the Matthean Jesus consider as being clean and unclean? According to Viljoen (2014), with regards to the explanations and views of Jesus concerning the Mosaic Laws, it is most probable that Matthew may have wanted to provide his audience with a different exegesis on how the purity laws were applied as they were demonstrated by Jesus. It is interesting to note that Jesus had high regard for the ideals of purity. He demonstrated this through Matthew 5:8 which says: "Blessed are the pure in heart, for they will see God." Agreeing with this beatitude, it is most likely that, a clean/pure heart could form part of the identities of Jesus' followers. Ironically, the Matthean Jesus touched the leper, thereby breaching the Jewish purity laws (Matthew 8:3). It is, therefore, important to find out how the interpretation of purity could be considered.

The healing of the leper by Jesus (Matthew 8:3)

It is the purpose of this section to explore how the Matthean Jesus understood purity during antiquity. Matthew started his story by explaining how Jesus healed the sick in Israel in general, first the man with leprosy (Matthew 8:1-4), the servant of the centurion (Matthew 8:5-13), and Peter's mother-in-law (Matthew 8:14-16). According to Talbert (2010:111), Matthew concluded that after "Jesus healed many demon-possessed people" (Matthew 8:16) as well as making a reference to Isaiah 53:4: "He took up our infirmities and carried out diseases" (Matthew 8:17)." Matthew is believed to have been identified as a servant of the songs of Isaiah and is perceived as a prefigured Messiah (Hagner, 1993). After these healings, the leper approached Jesus, requesting to be healed (Matthew, 8:2). In this healing story, the leper acted in a different way from the instructions which are enshrined in Leviticus on how a person with leprosy should behave in public. People suffering from leprosy, which was perceived as being contagious and unclean, were supposed to be quarantined to avoid spreading it and to show that they were impure (Matthew, 8:13-14). According to Viljoen (2014:5), lepers had "to wear torn clothes, let their hair be unkempt, cover the lower part of their faces and shout 'Unclean! Unclean!' (*tame' we tame'*; Leviticus 13:45). The LXX version is: 'ἀκάθαρτος κεκλήσεται' ["He must shout: "unclean!"]". The leper shouting 'Unclean! 'Unclean!' means "be warned, I am unclean and will make you unclean too.' The leper then begged Jesus saying, "[m]ake me clean,' which implies: 'You are clean and make me clean too" (Viljoen, 2014:5). The implication of this statement is the contrast that



highlighted the religious and social significance of his illness, but at the same time shows the leper's trust to be healed by Jesus.

It is important to consider the desire for the leper to be healed by Jesus as it our role model. In this context, healing may involve more than the physical healing of the disease but the total restoration of a person (Pilch, 1988). The restoration of the total person implies the renewal of life and honor. If the person was fully healed, it means a leper would qualify to be recalled from quarantine and be again able to participate in societal activities without problems. In this regard, healing becomes socially and culturally constructed. It is significant to reflect on the difference between illness and disease. Pilch (1988:110) argues that “[a] disease causes sickness and is a pathological issue. Sickness exists irrespective of whether a culture recognizes it or not.” In actual fact, sickness is triggered by germs and viruses, while illness may mean a misfortune in health further than a pathological condition. Therefore, it means that when a person is ill, s/he becomes a disvalued individual. Then the restoration of an ill individual's life means complete healing (Pilch, 1988). The leper went to Jesus with a disease which caused illness. The condition that he suffered was not accepted socially and religiously. His/her personhood was devalued and not accepted in society. Hence, he was considered to be impure and ungodly. Due to this condition, the leper was quarantined because he could spread the disease to other people in that particular society. His condition posed a serious threat to the community; he had to alert his presence by shouting (Leviticus, 13:45). When the leper was healed by Jesus, his social standing was restored and he was given a new lease of life.

The healing of the leper by the act of touching has a distinctive significance in this research because Jesus was not infected by the contagious disease. Furthermore, since leprosy was viewed as an impure disease, Jesus was not expected to touch the leper according to the Jewish tradition as espoused in the Torah. In the Old Testament, both Moses (Numbers 12:9-15) and Elisha (2 Kings 5:1-14) did not touch the lepers when they healed them, probably because of the Leviticus Law found in Leviticus 5:3 (Theissen, 1983). What is interesting is that, Jesus healed the leper by touching him, violating the Jewish purity regulation. The fact that Jesus touched the leper is more important, as the Greek phrase (ἐκτείνας τὴν χεῖρα) emphasises that Jesus reached out to him. What is interesting is that, it was not mandatory for Jesus to heal by touching the leper because there were other incidents where Jesus healed other people by merely speaking. The observation by Osborne (2010:285) is worth noting when he viewed this act as “‘love hermeneutic,’ that is the willingness to break Jewish taboos to help the suffering.” Jesus presented himself as a person who was concerned with people's welfare rather than with the legal prescriptions of the Jewish traditions. The decision which Jesus made in this scenario was informed by the desire to protect a particular individual or a community in times of apparent calamities such as the COVID-19 pandemic.

It is important to explore the significance of the element of touching when healing. According to Luz (2001:6), “in the LXX, touching was a common gesture of a miracle healer in more than 80 occurrences.” It is also echoed by Theissen (1983:62-63), who argued that, touching was an important element in the antiquities in the healing stories. It is believed that when touching, healing power will be transferred from healer to the person who is healed. In this regard, touching becomes central in the healing process. Interestingly, in the process of healing the leper, leprosy did not infect Jesus. This demonstrates that Jesus was the healer and holy one, with power over all diseases. It was the healing power that was in Jesus which conquered leprosy in the healed man. The word καθαρίσα, which is translated to ‘heal’, may prove the point that leprosy could not affect Jesus (Luz, 2001). Leprosy, being a contagious disease, was successfully cured by Jesus and the purity of the healed man was restored.



Matthew concludes his story when Jesus gave the healed man some instructions to go and present himself to the priest so that he would be allowed to get back into his community. According to Viljoen (2014), Jesus did not follow the stages of purification which were in tandem with the Jewish purity regulations. Jesus declared that the leper was purified, signifying that he had supernatural powers of healing. Not only had Jesus the power to heal, but he also had power and authority to forgive sins. This is in agreement with Evans (2012:183), who argued that, “instead of Jesus being defiled by the leper, purity flows from Jesus to the leper, healing the disease and restoring the man to a state of purity.” However, the purification rites of the leper were done by Jesus. Gundry (1982:138) remarked that “[w]ith his healing power, he assured that the true intention of the purity laws could be realized”, signifying the coming of the Kingdom of Jesus in which there is good health and no illness (Talbert, 2010). It is important, at this juncture, to explore the remarkable parallel that could be there between leprosy and the COVID-19 pandemic. It is envisaged, in this research, that the healing by Jesus motivated by the desire to protect the victims who are threatened by disasters or pandemics such as leprosy and COVID-19 was significant. Is the church, during the coronavirus pandemic, acting as Jesus did to reach out to protect and help those people who are in danger of the COVID-19 pandemic?

The church and the COVID-19 pandemic in Zimbabwe

In the previous section, there was an exploration of how people who were affected by leprosy were helped during Jesus’ mission. It emerged that Jesus and the priests were motivated to protect both the infected and those without disease. This segment seeks to investigate how the contemporary church is following in the footsteps of their master in healing a contagious disease that has no cure. Why is it that the church is hibernating in the face of the coronavirus disease? Can the church today heal the victims of the COVID-19 pandemic without being infected as Jesus did? If not, why is it like that? Is the church being concerned in holistically meeting the needs of its members?

The outbreak of the coronavirus disease in 2019 brought the world to a standstill. There was a sudden avalanche of dis/information at the end of 2019, which resulted in alarm, anxiety and fear of what would happen the following day. In no time, there was a coinage of terms “new normal,” “conspiracy theories,” “social distancing,” “quarantine,” “lockdown”, among others. These terms were common internationally. The dreaded virus is still present globally. The world has experienced four waves to date and is anticipating the fifth one.

The churches in Zimbabwe have been pivotal in interventions whenever there are disasters and pandemics. The Church needs to participate in the healing process of its followers who become affected and inflicted by the COVID-19 and other illnesses (Jibiliza & Kumalo, 2021). These churches in Zimbabwe were motivated by the desire to protect victims affected by the disaster(s) (Mugumbate & Chigondo, 2013). They have helped in different areas in society such as providing food handouts, health delivery system, education, shelter, and clothing. The Christian churches that are helping during this advent of COVID-19 are as follows: Mainline churches, African initiated churches, Zion Christian churches and Pentecostal churches. Different Church organisations such as World Council of Churches (WCC), Evangelical Fellowship of Zimbabwe (EFZ), and Catholic Bishops Conference of Zimbabwe (CBCZ) got some reports of the COVID-19 responses concerning the plight of street kids, street dwellers and people from the informal traders and intervened, with the aim of protecting them. According to Montecillo and Daral (2015), individual denominations usually had their own way of intervening to assist the affected victims, subject to the availability of resources. The Catholic Church, for instance, prepared food and gave it to children and adults living as street dwellers in various towns in Zimbabwe during the COVID-19 lockdown. Social media platforms became centers to connect street-dwellers with potential



donors who could reach out to them during lockdowns. According to Hunter (2020), during the March 2020 lockdown, the Zimbabwean government removed street children from the streets of Harare and other cities to avoid the spread of the deadly virus. Those street children who remained on the streets were struggling to find food in a country where the majority of people are living in poverty. This is where the Catholic Church was motivated to respond to protect the victims in light of the apparent threat to humanity posed by both hunger and coronavirus to the street children.

The United Nations-imposed a lockdown which was meant to curb the spread of the novel COVID-19 pandemic and this had a severe effect on young people and street children who lived on the streets of major towns in Zimbabwe. “Their lives, even in “normal” times, are marked by ongoing hardships and tenacity” (The Conversation, 2020). It was against this background that churches in different cities in Zimbabwe had to pull together their resources and reach out to the vulnerable groups, which included the elderly and street dwellers. Different associations of major denominations in Zimbabwe, “through the logistical and financial support of the different member congregations, initiated a centralized program for street-dwellers and daily wage earners” (The Conversation, 2020:4). The street children in Harare are found across the city, sharing spaces of wastelands, market places, bus terminuses, among other places. It is difficult to determine the exact numbers but the, The Conversation (2020) approximates those street children who are staying in Harare to number some 246 or more. These are the street children whom the churches were feeding, providing face masks for, and educating on social distancing and providing clothing during lockdowns.

The Anglican Church, in partnership with other church groups, organized themselves to care for the victims of people infected with COVID-19. They prepared guidelines based on COVID-19 pandemic on how to take care of the patients who were in their homes (Anglican Alliance Development-Relief-Advocacy, 2021). These organizations were also ensuring the provision of a good health delivery system and helping patients to deal with stress. They also provided patients with relevant information and links through which they could get free information on how they should develop their mental well-being throughout the COVID-19 pandemic. These organizations also provided resources to deal with domestic abuse during lockdowns. This was motivated by the concern to reach out to those who are threatened by the risk of losing their lives. The reaching out by the Anglican Alliance-Relief-Advocacy is meant to save lives and protect the endangered people.

The Anglican and some Pentecostal churches disrupted their tradition of laying hands on the foreheads of their congregants who may have repented during the course of their services (Ndlovu, 2020). According to Chukwuma (2021), “many church leaders have suspended ‘anointing services,’ a special service whereby the priests or pastors make prophetic prayers and anoint their church members by rubbing some oil on their forehead.” This is completely different from the Jesus in Matthew, who broke the Jewish traditions to touch the leper. The contemporary church is very fearful of contracting the coronavirus disease. The church is now controlled by WHO, whereas it is supposed to be spearheading how COVID-19 should be handled. Pastors like Magaya and Makandiwa have already stopped their healing sessions involving touching their followers and anointing them because of fear of the coronavirus disease (Ndlovu, 2020).

In several churches in Zimbabwe, there is a form of prayer that is usually called an ‘agreement prayer’ “whereby church members hold each other’s hands and say certain prophetic prayers as directed by the pastor or prayer leader” (Chukwuma, 2021:9). The author also says that there is no Sunday service in which congregants are instructed by a pastor to hold hands for such a special prayer. Chukwuma (2021) argues that this practice is commonly done by Pentecostal



churches in Zimbabwe, which encourage members of the church to pray fervently during these prayer sessions. This type of prayer promotes togetherness in the church. All these practices discussed above are no longer used; they have been suspended in the said churches precisely because of the outbreak of the deadly coronavirus disease. What is significant is the extreme difference between how Jesus in Matthew dealt with the contagious leprosy disease and how the contemporary church members are fearfully avoiding touching each other even if there is no evidence of COVID-19. It is doubtful that the perfect role-model Jesus Christ is not followed by humanity when it comes to doing things according to God's desire. Jibiliza and Kumalo (2021), say that "Pastors, priests and ministers of congregations and all people of faith, are called to communicate the faithfulness and care of the Creator to the adherents of the faith. This needs to be carried out in the contexts in which communities live and through the ways people experience challenges in life and seek healing."

Conclusion

It was put forward, in this study, that leprosy has been a health hazard since antiquity and its cure is yet to be determined. Several scholars have agreed that during antiquity, leprosy was viewed as a disease which came as a result of sin against God. There are indications that leprosy appears to have started from Eastern Africa or the Near East and was spread to other places by human migrants. It was observed, in this research study, that there is a parallel between leprosy and the COVID-19 pandemic, in that their preventive mitigation measures are similar, and include quarantine when an individual is affected, social distancing (physical distancing) and washing of hands. Just like the COVID-19 pandemic, leprosy is closely associated with impurity and social stigma. This article has interrogated and re-considered the leprosy scourge as it is reflected in Matthew 8:2-4 in relation to the COVID-19 pandemic.

The research study observed that Jesus did not want the law to separate the lepers from society because they were considered 'unclean', but he was motivated by protecting the victim from the disease. In the story of Matthew, Jesus intervened through healing which is different from the situation of the COVID-19 pandemic in Zimbabwe and beyond, where the church provided knowledge and skills to deal with the virus. The study was informed by insights from the protective motivational theory which views the healing of the leper as a protective motivation of the affected victim. This research study established that there is need for motivation for protection of victims who may be entrapped in disasters and pandemics such as leprosy and COVID-19. It was also noted that interventions should be done following the proper procedures with regard to both leprosy and coronavirus. This study recommends that there should be equity and social justice, the inclusion of people in society affected by leprosy and COVID-19, avoidance of any discrimination and stigma attachments, and building of solid alliances and partnerships in the process of intervention from a Christocentric perspective.

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