



We are (not) Different from the Others: Religious Responses to the COVID-19 Pandemic in Slovakia and India

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Abstract

Although the narrative of modernity has been rejected by numerous scientists, it remains a powerful paradigm. Several Western countries have, during the COVID-19 pandemic, witnessed renewed interest in some archaic practices and beliefs. Based mostly on media analysis, this paper provides an insight into religious responses to the COVID-19 pandemic in Slovakia and India, two completely different cultural areas. Simultaneously, it challenges the self-identification of the West as the epicentre of rational thought, in contrast to the so-called non-Western world. The self-image of superiority adopted by the modern West in terms of religious relevance has proved to be distorted, as the tendency to turn to spiritual practices in times of crisis is not exclusively a feature of non-Western societies.

Keywords Pandemic · Religion · Prayer · Worship · Goddess · COVID-19

Introduction

It is often suggested that the roots of modernization theory can be traced to different historical authorities; however, one must not forget the critical importance of Max Weber and Emile Durkheim. Although these theorists approached the concept of modernity in different ways, they shared the same view on the role of religion in modern society. It is well known that Weber, whose work has had a significant influence on structural functionalism, borrowed the term “disenchantment” to describe the general process of progressive rationalization of modern society (Jenkins, 2000; Weber, 1993).

Durkheim, following a social evolutionist concept, proposed the idea that religion is on the decline due to societal changes associated with advances in science and technology (Beyers, 2013; Durkheim, 2016). Weber did not pay particular attention

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to religion; rather than constitution of the nature of religion, his ambition was to understand the effect of religion on society and for different social classes. Notwithstanding this, he was convinced that religion would become obsolete over time and that rationalization represents an inevitable feature of modernity in the West. From a Weberian perspective, science and rational explanations are valued more highly than religion in Western society, as opposed to in traditional societies, where irrational belief still plays a dominant role. However, Durkheim (often labelled as the founding father of the sociology of religion) contributed to the discussion by identifying the concept of “sacred” as the crucial essence of religion. Durkheim expressed the idea that religious authority was waning in several aspects of social life, which leads him to the conclusion that the more modern society is, the less influence religion will have on it. These ideas were adapted in the 1950s and 1960s by various social scientists to develop a modernization theory.

The paradigm of privileging secularism and science is one of the fundamental principles of modern times. For western European and North American academics, modernization theory, involving a secularization narrative and expectation that religion will gradually disappear, has provided an explanation for the development of industrial societies (Hadden, 1987; William Jr & Christiano, 1999). Sax (2015) reminds us that this concept gained significance in the historical context of the Cold War and increasing antagonism between capitalist and socialist value systems.

The concept has since been the subject of many controversies, for many reasons. Martin (1993) was one of the first to attempt to revise the concept (in his work published in 1978), claiming that in all societies, crucial historical, political and social events occur which might have an impact on the process of secularization. Even Berger (2012), who (in his early academic works) assumed that secularization is evidently correct, later came to the conclusion that not all empirical evidence on religion and spirituality supports this theory. The conventional narrative of modernity has mostly been criticized due to its extrapolation from the European situation (Eisenstadt, 2017; Gaonkar, 1999; Kumar et al., 2019).

Research on the Pandemic and Modernization Theory

Although the idea of the inevitability of modernization and globalization has been rejected by numerous experts as making theoretically misleading assumptions and yet to be proved empirically, it remains a powerful paradigm, underpinning certain areas of societal organization. Modernity has often been associated with features such as individualism, capitalist production, a liberal economy, centralized bureaucracy or intensive urbanization. However, a strict emphasis on scientific explanation and evolution of rationality are probably the main drivers of the process of modernization, at the same time. This may be most apparent in the realm of health and medicine, as aptly suggested by Sax and Nair, who suggested that biomedicine is “bound up, root, and branch, with the project of modernization, not only as its vehicle but also as perhaps its most successful exemplar” (Sax & Nair, 2014, p. 201).

Medicine has developed into a huge and complex system of practices the world over, with modern scientific approaches used to diagnose and treat various afflictions

and diseases. In line with the concept of modernity, it is underlined that despite the heterogenic character of treatment procedures, modern medicine represents a secular healthcare institution, which demands objective evidence to evaluate its effectiveness (Broadbent, 2019). The health crisis caused by the COVID-19 has forced many people around the world to devise strategies to help them through unprecedentedly hard times; and religion has played a remarkable role in redressing negative impacts of the pandemic. Based mostly on media analysis, I present insight into the cultural responses of two countries during lockdowns (where discourse around religion and medicine has historically formed in significantly different ways) and simultaneously challenge the self-identification of the West as the epicentre of rational thought, in contrast to the so-called non-Western world.

Modern Medicine: A Profound Example of Modernization

The separation of medicine from religion was a long and arduous process, and it is hard to pinpoint the precise moment when the demarcation line between these realms was drawn. According to the early work of French philosopher Foucault (2012), the point at which the human body became an object of study and surveillance heralded the beginning of modern scientific medicine. As a result, the history of medicine over the past two centuries can be defined in terms “of growing intervention and a quest for monopolistic rights over the body” (Arnold, 1993, p. 9).

The modernization concept vigorously stresses that non-scientific treatment methods, especially those traditionally believed to be based on divine intervention, are in direct opposition to the modern concept of health and illness. It has been argued that religion, spirituality and ritual performance are simply irrelevant to the functioning of the body and, worse still, may have a detrimental effect on the health of individuals who believe that they can be miraculously cured by healers possessing supposedly supernatural skills (Lüddeckens et al., 2021). According to advocates of medical theories, no mental or physical disabilities can be cured by ecstatic states, communication with deities or the interventions of ancestral spirits (Sax, 2014). Medicine exists as an independent and secular subject anchored in modern society, whereas all other methods outside the realm of science are known as traditional, folk or alternative medicine.

The modernization theory that has gained a footing in Western societies has led to the establishment of strict borders between religious healing and secular medicine (Kleinman, 2013). One might argue that the fact that the more developed society is, the less influence religion will have on it has been considerably reconsidered over years. At least since the influential work of Latour (2012), who convincingly denied the existence of anything like a modern constitution, given the notion of modernity has never been able to fully accommodate the differences present in our societies. Rather, it is a mode of classification based on separation of culture from nature; in other words, an ideology, which has served to distinguish the progressive West from less developed parts of the world. However, taking into account the ongoing effects of modernist theory on society at large (which still manifests in powerful, widely shared antagonism towards any form of treatment intervention based on religious

ideas), the necessity for understanding different kinds of health-related experience in the context of social, cultural and environmental challenges is perhaps more relevant than ever. Moreover, as most anthropologists have forcefully attempted to reject the notion of a single trajectory of modernization in Third World countries (Kumar et al., 2019), little attention has been paid to a pluralistic construction of medical realities in Western societies.

Methodology

In the pages that follow, I take a look at how different religious and ritualistic therapeutic resources have provided mechanisms for coping with the consequences of COVID-19 in Slovakia, a country situated in central–eastern Europe. The history of unconventional medicine in Slovakia is closely associated with methods of traditional/folk medicine and use of herbal products. However, during the communist period, almost all kinds of unconventional health care were considered, to a great extent, as backward and superstitious practices. The ideological hegemony of Marxism, using a doctrine of materialism, led socialist governments in the Eastern Bloc to outlaw any kind of medical practice and ideas incompatible with scientific explanation (Souček & Hofreiter, 2022b).

Accordingly, it is thought that the “heritage” of Marxist ideology in post-socialist countries has had negative repercussions for the significance of religion and has led to a similar process of secularization in post-communist eastern Europe as happened in the West (Norris & Inglehart, 2011). Analysis of recourse to religious strategies developed individually or collectively to fight the threat of the pandemic has not just potential for identification of beliefs and practices established as a direct result of particular experience. Definitely, a closer look at therapeutic practices usually interpreted in “modern” European society as pre-modern and pre-scientific reveals the contours of ideologies based on deeply held assumptions of Western superiority over other societies.

In addition to investigating some popular religious techniques witnessed in Slovakia, in this paper, I provide an insight into ritualized and religious practices that have spread in various parts of India in hopes of obtaining protection against the impact of the pandemic. Some experts have asserted that India is one of the most affected countries worldwide, with the highest number of confirmed cases of COVID-19 (Goel et al., 2021). Moreover, despite a growing tendency towards research into the heterogeneous medical landscape in India, as a complex and multidimensional phenomenon, different narratives in popular media reinforce the image of India as an irrational country with prevailing religious practices in several areas of social and cultural life. Taken together, examination of how a variety of media reports and public speeches portrayed the role of religion during the pandemic in India reveals consequences of the conventional narrative of modernity in exploration of the Others.

Data Collection and Analysis

I present a study of news articles and social media reporting on religious and spiritual healing activities during the pandemic. Articles on the topic I gathered during 2020 and 2021, when Slovakia faced a series of waves of COVID-19 and restrictions were imposed. Different news articles, news reports, blogs, public statements and discussions on social networks in the Slovak language were included. Using the keywords “COVID”, “coronavirus”, “religion”, “pray” and “healing”, I collected news articles, reports, public statements and social media posts addressing the topic of religious healing. I have studied a total of 26 relevant news articles and news reports employing the selected terms and examined religious responses to the COVID-19 pandemic in Slovakia. News articles not exclusively dedicated to the COVID-19 pandemic were excluded.

In the second case, I have predominantly focused on articles published in Indian and international online English-language newspapers (*Times of India*), news channels (*India Blooms*, *The Wire*, *India.com*, the *U.S. News & World Report*, *Aljazeera*, the *Religion News Service*) and news agencies (*Reuters*). Consequently, using the keywords “COVID”, “coronavirus”, “religious healing”, “goddess corona” and “pandemic in India”, articles between March 2020 (when the first lockdowns were introduced) and September 2021 (when cases after the second wave declined) were collected and classified as relevant or irrelevant for the purpose of analysis. The subject of the news articles had to relate to religion, spirituality and culture, since this was considered as crucial to understanding the religious response to the COVID-19 pandemic. After individually examining 32 articles and news reports, duplicated content and reports repeating news from agencies were excluded.

A Short Overview of COVID-19 Pandemic in Slovakia and India

The COVID-19 virus was first confirmed as having spread to Slovakia on 6 March 2020 (Kanovsky & Halamová, 2020). Accordingly, several restrictions were imposed, including a strict nationwide lockdown, in order to limit spread of the virus. Slovakia was one of the EU countries least affected by the pandemic in terms of cases and deaths in the first wave in spring 2020. However, this changed during the second wave, which lasted from October 2020 to April 2021, during which the fatality rate in Slovakia as a result of COVID-19 was among the highest in the world. The Delta variant of the COVID-19 hit Slovakia hard in a third wave at the end of 2021, when the country witnessed one of the highest numbers of positive cases relative to the population worldwide. Occurrence of the highly contagious Omicron variant affected Slovakia later than in other European countries and had become the dominant variant by the end of January 2022 (Marenčák, 2022).

The first cases of COVID-19 in India were reported in January 2020 in the southern part of the country, and since then, the country has witnessed several massive waves of the virus. On the recommendation of experts, social distancing and lockdown rules came into force, which, inter alia, triggered one of the biggest domestic migrations in the history of the Indian subcontinent. Available statistics on victims

vary; several experts have asserted that the real numbers may be much higher than reported by official institutions, and the real death toll may never be known. Despite significant improvements in the Indian healthcare system over the last few decades, various indicators of mortality rates and malnutrition show that ineffective and unaffordable public health care remains one of the main characteristics of this system. Although the Indian government recognized the severity of the problem fairly early on, images and footage of hospitals running out of beds and people desperately searching for oxygen supplies flooded international news media. It has been claimed that the COVID-19 pandemic revealed the pressing issues of the Indian healthcare system and shortcomings that India has long faced due to decades of systematic unpreparedness.

Modern and Different? Religiosity and the Pandemic in Slovakia

Generally, almost all religious systems and traditions have treatment procedures intended to cure and alleviate health difficulties. However, religious, spiritual or faith healing can include diverse forms of practice and techniques, including rituals, prayer or reading sacred scriptures. Several studies conducted in Western countries have shown that despite the widespread view that medicine and religion are completely different spheres, many people are convinced of the beneficial effects of different religious and ritualistic practices (Aldridge, 1991; Dima-Cozma & Cozma, 2012).

One study conducted prior to the COVID-19 pandemic, investigating the prevalence of unconventional medicine in Slovakia, revealed that 846 (82.4%) of the 1,027 survey participants reported using some kind of unconventional medicine on a regular basis, that is, at least once a year or several times during their life (Souček & Hofreiter, 2022a, b). Approximately 20% of all users of unconventional medicine reported use of religious healing. Although respondents were not asked for any details about use, the results clearly indicated that the prevalence of religious healing in general has had a significant impact. Several people use prayer for the purposes of healing; however, many questions regarding the use of prayer have yet to be answered: for instance, what type of prayer is used or whether prayer is directed more towards improving health.

Charismatic Groups

The performance of rituals is a central component of many religious traditions. In the context of healing, certain actions (involving gestures, words or use of objects) may be interpreted as effective in the treatment of physical and/or mental problems. On the other side, in medical circles, rituals are considered highly controversial on account of being unproved, ineffective and completely incompatible with modern scientific treatment. It is claimed that irrespective of their cultural provenance, healing practices rooted in religious and spiritual concepts should not be regarded as a form of legitimate medicine. It is recognized that ritual healing frequently occurs

among Charismatic who believe that illness represents an obstacle to spiritual growth (Csordas, 2002).

Different Charismatic groups and Pentecostal movements have begun to emerge in Slovakia relatively recently. Their popularity, not just among Protestants but also among Catholics, is relatively high, but they have only gained wide public attention in the last two years, during the COVID pandemic. In response to difficulties posed by the virus, several of these groups have communicated the need for immediate action against the new and deadly threat of COVID-19. Most commonly, representatives of Charismatic Christianity have announced that their followers should rely on the medium of prayer, the Holy Spirit and supernatural graces when seeking protection and healing. The Catholic Charismatic Renewal movement has used web-based sermons to call on followers to “advocate for an end to the pandemic, for the healing of the sick, and for the salvation of the souls of those who [have] succumbed to the disease”.¹ Similar initiatives have been rolled out by other groups and movements in Slovakia, advocating participation in global spiritual activities until COVID-19 is eradicated. Moreover, a Charismatic movement called the “Word of Life” gained significant public attention after a video went viral, depicting a woman speaking in tongues, praying for the Minister of Health (who also belongs to the Charismatics) and the rest of the government to receive wisdom and strength.

According to Csordas (1997) (who, for nearly 20 years, followed the Charismatic Renewal), speaking in tongues is regarded as an important spiritual gift. Among Charismatics, it is believed that this form of expression is the most powerful method of healing prayer, which can invoke the presence of extraordinary power and is often used instead of vernacular languages. As in Slovakia, similar activities among Pentecostal and Charismatic Christians have been observed in numerous other Western countries. For instance, in the USA² (where it is estimated that the concentration of people who believe in Charismatic gifts such as healing and speaking in tongues is one of the highest in the world), Charismatic Christians have promoted the efficacy of spiritual healing. When strict social distancing was in force, they used prayer via phone to invoke the divine presence and to combat the disease.

Prayer and Fasting

Despite the absence of unambiguous evidence that prayer can heal physical diseases or prevent the spread of infection, there have been reports from different parts of the Western world about increasing use of prayer. Research into religiosity and the COVID-19 pandemic conducted in 2020 using Google searches of more than 100 countries around the world showed that more than half of the global population had prayed for an end to the pandemic (Bentzen, 2021). However, what is more interesting is that internet searches on the subject of prayer increased in all countries, regardless of their economic or technological status. The author of the study

¹ <http://www.kcho.sk/sprava.php?clanok=00121>.

² <https://www.washingtonpost.com/religion/2020/04/03/supernatural-healing-christian-faith-coronavirus-pandemic/>.

highlights that even people in societies considered modern and secular, pray as a coping strategy in times of adversity and devastating events.

The results regarding strategies developed for coping with the pandemic have far-reaching consequences for our understanding of the role of spirituality and religion in modern societies, where medicine is seen as a highly established scientific discipline fully separated from any cultural or religious contexts. In 2020, the National Conference of Bishops of Slovakia (an assembly of bishops in the Slovak Republic) declared the need for strict fasting to fight COVID-19. The chairman called for a strict fast (by all members of the Catholic Church in Slovakia), for eight consecutive Fridays. This entailed refraining from eating meat dishes and only eating one meal a day (plus a snack twice a day).

Veneration of Relics

Several studies have been conducted on patterns of religious behaviour and practice in the context of the COVID-19 pandemic. It has been proved that a significant number of people around the world have turned to religion as a means of coping with difficulties arising from the COVID-19. Some of these studies concluded that religious coping may be associated with lower levels of anxiety, stress and depression, and increased optimism regarding the pandemic (de Diego-Cordero et al., 2022; Kowalczyk et al., 2020; Mahmood et al., 2021; Serfaty et al., 2021). This has not only been reported in countries and regions where access to proper medical treatment and services remains a persistent problem (Fatima et al., 2022) but also in Western epicentres of scientific medicine, with well-established, high standards of health care (de Diego-Cordero et al., 2022).

It is difficult to definitively say whether the pandemic has significantly changed worship in Europe. However, the absence of a cure or vaccine against the virus in the early period of the pandemic led to renewed interest in certain archaic practices and beliefs. It is probably best illustrated by a fact that veneration of corporal relics of saints has recently been reported in various countries with a historically strong Christian tradition. It is admitted that Christians venerate martyrs who suffered persecution and died in defence of their faith, and they have done so since at least the fourth century. Winiewski (2018) points out that despite regional differences, available evidence from Christian realms shows that the functions of relics are essentially similar—above all, to expel demons, heal diseases and protect places.

A short recent survey of which Saints people should pray for in the fight against COVID-19 in Europe revealed a long list of saints that could potentially be invoked in this regard among Catholics (Perciaccante et al., 2021). Interestingly, one cathedral in Germany unearthed the relics of Saint Corona (who was little known until the onset of the pandemic in Europe) as a source of hope in the challenging times of the virus.³ Regarding spiritual intervention to eliminate the negative impact of the virus, Pope Francis made a private visit to the church of San Marcelo on the Corso, where

³ <https://www.reuters.com/article/us-health-coronavirus-germany-saint-idUSKBN21C2PM>.

a miraculous crucifix from the fifteenth century is stored.⁴ It is believed that after a days-long procession in 1522 (when Rome suffered an outbreak of the plague), during which a crucifix was carried through the streets of Rome, the plague ceased. According to Vatican media reports, the objective of Pope Francis's visit in the middle of the COVID-19 pandemic was to pray for the world and reduce the worldwide burden of infectious disease.

Regarding use of relics in Slovakia, the actions of the Vicar General are particularly noteworthy. On several occasions during the pandemic, he blessed the whole country (from a plane) with a relic of Christ's blood. This relic is usually kept in the Basilica of St. Abbot Benedict in Hronský Beňadik. When the plane had successfully flown over half of Slovakia, the diocese called on the faithful to spiritually join in the blessing so that they could effectively receive the benefit of protection against the COVID-19 infection.

Religious Gatherings

Along with many non-essential services, lockdowns meant that churches and other places of worship had to close. Due to the virus spreading readily indoors, all religious gatherings and mass gatherings were suspended. Not surprisingly, in some parts of the country, where the proportion of Catholics exceeds the country average for religious denominations, this preventive measure triggered a wave of public outrage. Several health experts tried to convince the public that church gatherings present a transmission risk, especially given that singing is often a crucial part of the worship. Some priests openly proclaimed that they would not accept the closure of churches and the ban on religious services, despite the recommendations of epidemiologists. One of the main arguments presented to support mass attendance being safe was the lack of any record of a connection between mass attendance in churches and spread of the COVID-19. Moreover, many representatives of the Christian church and various members of Christian political factions in the national parliament argued that religious practice and worshipping God could in itself positively contribute to preventing spread of the virus.

Discussion of the positive impact of religion on population health reached its peak in a public statement by the Minister of Labour, Social Affairs and Family of the Slovak Republic, who posted a status on his own Facebook page, saying that it was worth considering opening church doors again to allow religious people to gather in places of worship and pray for the people of Slovakia in order to keep the population healthy and safe. The official representative of the state and head of the ministry stated that he believed it would definitely help people, whether they believed in God or not. According to the minister, in 1710, one of the cities in Slovakia was severely hit by the plague, and lockdowns in the city did not provide any relief from the deadly affliction. Desperate citizens, tired of long-term hardship, decided to seek the help of the Virgin Mary in common prayer. It is believed that

⁴ <https://www.vaticannews.va/en/vatican-city/news/2020-04/holy-week-crucifix-marcello-restored-peter-basilica.html>.

on 21 November 1710, after the majority of the city gathered in the dome of St. Nicholas at the miraculous image of the Virgin Mary, the plague ended, and no one in the city died of the disease from that moment on. Likewise in the eighteenth century, the minister demanded that people be allowed to gather in churches and pray for a miraculous end to the pandemic as historical evidence supported this viewpoint. This statement caused huge controversy, and health experts condemned all church gatherings as life-threatening.

Healthcare Legislation Change

Another controversy that gained public prominence amid the second wave of the pandemic was the initiative of a member of the national parliament (a politician in the Christian Union Party), who proposed healthcare legislation change. Although the Constitution of Slovakia states that the country is not officially tied to any ideology or religion, the politician in question suggested revising the law to include a statement that health care consists *inter alia* of spiritual services. Health care is defined in the law as a set of occupational activities performed exclusively by health-care workers (who, accordingly, are defined in the law). After amendment of the law, priests would be included in the category of so-called other healthcare professionals. However, since this legislative proposal did not receive sufficient support, it has not yet been approved. Consequently, similar efforts were made by the Conference of Bishops of Slovakia, which commented on the proposed change to the health law. According to the Conference, care for a patient's spiritual (existential) needs must be understood as an integral part of health care and is therefore an important component of comprehensive care for hospitalized patients. In addition, it was claimed that the COVID-19 pandemic made the need for such legislation (including specification of the status of spiritual services and authorized providers) even more pressing.

Image of Modern Society

The basic proposition of modernist theory is that societies become more modernized, which inevitably leads to a decline in religious ideas and practices. Hence, everything outside the realm of modern medicine is considered as an alternative reality or marginal phenomena, without the potential to change our fundamental direction towards progressive ideas, represented by rationalization and scientific developments. Against this background, healing practices and ritualistic performance used to counterattack health problems are interpreted either as curiosities reminiscent of olden days or quackery making wild and unfounded claims. However, the information obtained on the role of religion and spirituality during the COVID-19 pandemic in Slovakia does not support the image of modern twenty-first-century Western society, supposedly rational and dedicated to modern medicine. On the contrary, the intensity of the religious scene clearly shows that the split between “pre-modern”, non-scientific practices and the medical world has not been realized to the extent assumed in modernist ideology.

Veneration and Rituals at the Centre of Attention: Religiosity and the Pandemic in India

The history of medical pluralism in India can hardly be compared to any Western society. There is ample evidence that diverse systems of medical knowledge coexisted for many centuries in the Indian healthcare system. Relevant literature on the medical landscape in India recognizes the codified tradition based primarily on textual knowledge, also known under the acronym AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy).

A survey of use of AYUSH in India concludes that less than 30% of Indian households use traditional medical systems (Srinivasan & Sugumar, 2017). Apart from widely recognized medical systems, there are oral traditions that have been passed down through generations and are practised by a large number of traditional health practitioners, often referred to as local health traditions (LHT) (Mishra et al., 2018; Pengpid & Peltzer, 2021). The results of a national survey in 2017–2018 revealed that the prevalence of AYUSH or THP utilization during the preceding 12 months was 13.0% (Peltzer & Pengpid, 2018). Local health traditions, sometimes referred to as folk medicine or indigenous healing, consist of a wide range of therapies and healing procedures, including faith and spiritual healing. Several authors point out that ritual practices and religious healing represent a crucial part of mental health care in India (Biswal et al., 2017; Dein, 2020). However, given the heterogeneous realm of religious healing and the rich diversity of healing practices in India, there is a lack of information on sociodemographic and other health-related factors regarding the use of diverse forms of spiritual techniques for healing.

Festival and Rituals

A huge controversy erupted after the government decided to hold the Kumbha Mela festival amid calls for strict action over the increasing spread of infections as a second wave gripped the country. This religious gathering, held in the north Indian city of Haridwar, was attended by millions of Hindu pilgrims, who had travelled from across India to take a ritual dip in the Ganges River. This happened despite experts' warnings that social distancing would be impossible to implement and that this pilgrimage might end up being the biggest super-spreader in history. The controversy surrounding this event and statements by different public figures promoting treatment based on religion (Mir, 2020) have triggered discussion of the role of religious traditions in contemporary Indian society. The Indian National Congress, one of the two major political parties in India, even criticized Prime Minister Modi for endorsing superstitions as he asked Indians to light candles to fight the spread of the virus.⁵ Advice posted on social media about how to treat and protect against COVID-19 using various traditional treatment methods went viral, e.g. use of cow dung and urine. However, several representatives from the scientific community issued warnings about alternative methods and called for immediate action to stop

⁵ <https://www.indiablooms.com/news-details/N/60634/covid-19-congress-accuses-modi-of-promoting-superstition-through-his-appeal-to-light-candles.html>.

practices considered irrational, backward and religious (Daria & Islam, 2021). Such initiatives, openly advocating scientific and technocratic positions, stressed that local medicine and indigenous healing practices represent inferior traditions, with no valid place in the treatment of health-related problems.

Goddess Worship

In April and May of 2021, India was facing the devastating consequences of a second wave of COVID-19. Indian and international news portals reported that a number of devotees had turned their attention to the goddess of diseases to lessen the overwhelming impact of a new form of COVID-19. Fear, especially in remote rural areas where the death toll was extremely high and access to healthcare infrastructure difficult, resorted to worshipping and invoking different local deities and patrons associated with health-related issues.

In his book on popular Indian religion, McDaniel (2004) suggested that the goddess of diseases continued to play a crucial role in folk/village religion until such time as Western medicine becomes widely available in India. In West Bengal, deities such as Olai Chandi (the goddess of cholera), Shashthi (the goddess protecting against tetanus) and Shitala (the goddess of smallpox) are particularly popular among ordinary people. Literature and medical narratives from different parts of India also confirm that local nature goddesses are worshipped ardently to obtain protection against poxes, fevers and other threats to health. Even though it would be misleading to describe Shitala Mata as a pan-Indian Hindu deity, the most prominent position in Indian medical culture has long been held by this goddess, whose name literally translates as Cold Mother. In colonial literature, Shitala is often portrayed as a powerful mother, capable of both causing and healing smallpox. People suffering from the burden of smallpox may also believe that they are possessed by the goddess, and only veneration of the goddess and sacrifice can cure afflicted persons. Following the eradication of smallpox in 1973, the popularity of the Cold Mother waned, however, a renewed interest in the cult of Shitala emerged.

Anthropological research shows that Shitala's transformation into a new position relates to a dramatic increase in the prevalence of HIV/AIDS in India in recent decades, which is primarily spread through unprotected sex and contaminated blood transfusions. As with smallpox, it is thus believed that the goddess (frequently depicted as riding on a donkey) can both cause and cure HIV/AIDS. Ferrari (2015), who examined devotional culture in northern India, with particular attention to Shitala worship, has argued that eradication of smallpox has not had a significant impact on Shitala worship. Rather, Shitala's enduring importance relates to her association with protection of children and as a protector of different afflictions manifesting in boils and fevers. Rituals performed by Shitala's devotees serve predominantly as "holistic responses to moments of crisis that continue to be transmitted by means of a series of meaningful acts and narratives aimed at wellbeing and relief" (Ferrari, 2015, p. 152).

Given the long-lasting tradition of attributing new forms of health threats to a goddess, it was only a matter of time before the COVID-19 goddess would emerge in religious strategies in an attempt to cope with the outbreak of this disease (Frøystad,

2021). Accordingly, different scholars and journalists in India have reported a revival of popular beliefs and new ritualistic activities invented in response to the COVID-19. For example, the internationally renowned news agency *Reuters*⁶ reported that a gathering of devotees in a small village in the northern state of Uttar Pradesh had erected a shrine dedicated to the “Goddess Corona”, in the hope that this act of devotion could tame the virus and bring the village some relief. There have also been similar reports about a COVID-19 goddess in other places in northern and southern India.⁷

By recognizing sensationalism of popular religious interventions, various Western newspapers and social media platforms have devoted significant attention to all possible information on veneration of a COVID-19 goddess.⁸ An article even appeared on the website of the *Religion News Service*⁹ (dedicated to global news on religion and spirituality), concluding that people throughout India have started to worship a female COVID-19 goddess, called by various names. However, a statement by a Namboothiri (a member of the Malayali Brahmin caste) was added at the end of one newspaper article, saying that he did not accept any direct invocation of the mother goddess to fight a disease, as the best course of action was to trust in the power of science and medicine in the search for a solution to the pandemic. In her article discussing manifold religious responses to COVID-19, Frøystad (2021) stated that at least three Corona Devi temples have been established (in rural Uttar Pradesh, Tamilnadu and Karnataka). However, she also concluded that invocations of mother goddesses and rituals invented with the aim of reducing the deadly impact of the virus were exceptional, class-dependent, short-lived and largely ridiculed by middle-class people. Despite the temporary and sporadic character of ritual worshipping of the COVID-19 goddess, images of priests paying tribute in front of a statue or idol of a deity (and erecting shrines to get rid of the virus) spread, not just through dramatic and sensationalist language in tabloid press but also in more serious newspapers.

Image of India During the Pandemic

It is well known that the mass media can have a huge impact in society and, for many individuals, represents a crucial source of information about people outside their own “social bubble”. Different ethnic, racial or cultural minorities represent

⁶ <https://www.reuters.com/world/india/indian-village-prays-goddess-corona-rid-them-virus-2021-06-12/>.

⁷ <https://www.india.com/viral/corona-devi-idol-set-up-in-coimbatore-temple-to-protect-people-from-the-covid-19-pandemic-viral-photo-4678450/>.

<https://thewire.in/society/up-village-prays-to-goddess-corona-to-rid-them-of-the-virus>.

<https://timesofindia.indiatimes.com/city/kozhikode/a-shrine-to-worship-corona-devi-in-kerala/articleshows/76370842.cms>

⁸ <https://www.usnews.com/news/world/articles/2021-06-12/indian-village-prays-to-goddess-corona-to-rid-them-of-the-virus?context=amp>.

<https://www.aljazeera.com/news/2021/5/27/corona-devi-indian-priests-pray-for-mercy-from-covid-goddess>.

⁹ <https://religionnews.com/2021/06/22/indian-hindus-turn-to-honoring-corona-goddess-to-quell-pandemic/>.

the most vulnerable groups in terms of misrepresentation in media content, and they are often depicted in highly stereotyped roles (Ross, 2019). The way in which the mass media emphasized the role of religion and ritualistic practices in India during the pandemic (including the promotion of traditional methods of healing) reinforced the Orientalist image of India, as a backward and superstitious country, where “all classes of people resort frequently to magical and religious therapy” (Leslie, 1976, p. 360).

It is a matter of fact that several forms of healing rituals have attracted considerable interest among different groups of people in India (Ferrari, 2010). However, there is no evidence that the practice of worshipping a COVID-19 goddess has become widespread among devotees in India. This kind of essentialist consideration misrepresents the variability of India’s medical landscape. Rather, it seems that the honouring of a COVID-19 goddess has been sporadic and isolated, coinciding with the peak of concern about spread of the virus; when the dynamics of the virus and possible consequences were most unpredictable. Without intensive ethnographic fieldwork on representation of such a goddess from the perspectives of different social classes in different cultural and regional settings, it would be impossible to really understand the religious response to the pandemic in India.

Limitations

Travel restrictions imposed during the global pandemic led to increased interest in digital methods of research in anthropology, a discipline built on cross-cultural comparison. Accordingly, by analysing selected data from Slovakia and India, my aim was to advance a conversation about similarities/differences in the development of modernization theories, through insights into the religious responses of two countries. However, a two-country comparison will undoubtedly have certain limits, given the different social, political and historical situation in these countries. Moreover, given the impossibility of overseas travel for the purposes of conducting research into the pandemic in India, I have had to rely on analysis of news articles and reports published in international and local Indian newspapers. It is therefore necessary to keep in mind that although the theoretical background is sufficiently rigorous, the provided evidence is limited, and more ethnographic data could shed further light on this issue.

Conclusion

Several scholars have identified that modernist discourse has developed a binary distinction between the West and the Others, with the aim of reproducing ideological hegemony of European values. While, on the one hand, the West is supposed to be rational and anti-religious, on the other hand, the Orient is associated with spiritual forces and a lack of scientific explanations. The West’s self-identification with science and post-spirituality indicates that modern Western societies quintessentially differ from stagnant non-European cultures in terms of religious authority over

health issues. The presence of various forms of spiritual healing and rituals in non-Western societies has been widely taken as clear evidence of their non-modern, non-scientific character. However, the superior image of the modern West in terms of religious relevance has proved to be distorted, as we have seen that the tendency to turn to spiritual practices in times of crisis is not exclusive to non-Western societies.

By witnessing the rise of religious involvement during the pandemic and the resurgence of religious practices such as use of relics or performance of healing rituals, some people may have the feeling that Western societies have regressed somewhat, towards a pre-scientific age. This is a result of (and has implications for) modernist ideology suggesting that health-related practices and religion are based on different epistemologies and cannot go hand in hand. This is also the case with Slovakia, where the general population tends to self-identify with a modern society, associated with rationality and post-spiritual/scientific ideas. This tendency is articulated through a narrative and slogans affirming that we live in an age of science, where technology and rational progress have a major impact on our lives. Religious responses to the COVID-19 pandemic in Slovakia and other Western countries have been manifold and range from use of prayer and different rituals to veneration of relics of saints. People living in so-called modern secular societies are, to a substantial extent, inclined to use certain forms of religious and ritualistic practices when facing unprecedented difficulties and challenges. Certain archaic practices thought to have completely vanished from our modern societies seem to be present in the everyday lives of supposedly “modern” people.

Despite tremendous technological developments during recent decades, there is still a tendency among Indian people to turn to religion as an alternative or complementary approach to medical treatment, and this increased during the pandemic. However, there is no evidence that the worshipping of a COVID-19 goddess or use of traditional medicine has spread throughout the whole population of the country and now dominates in the attitudes of local people, despite the Indian public health sector clearly being in a poorer condition than that in Western countries. An implication of these two factors is the possibility that the theoretical concept of modernity as a process of gradual progression through rationalism not only has negligible value in exploration of the Others but, moreover, very limited capacity to capture the reality of the West, manifesting in areas considered as belonging exclusively to the world of rationalism.

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