

## ***The concept of traditional healing and its role in African modern society***

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*Abstract*-Traditional healers are essential in traditional and modern African societies, not only because of their special powers to heal the sick and the dying but also because of their link to the spirits of the departed, which is believed to be a special cultural gift. Among other categories of healers, they are still consulted and respected in Southern Africa. It is for their unique specialised ability to heal body and soul, protect people against ailments and help people maintain the balance between the mental, physical and spiritual states that people view them as the soul of society. Although we live in highly civilised societies that prefer to use medical doctors rather than traditional healers, some people still consult and require the services of traditional healers. It is against this background that in this article an attempt will be made to interrogate the significance of special herbs in African society and to look at the number of Africans that still consult traditional healers. The lifelong tradition of using herbs has stood the test of time against many external influences, both religious and modern, to such an extent that in the present-day society there still are those who believe more in traditional healers than in scientific doctors.

Keywords: African modern society, herbs, traditional healers

### **1. Introduction**

What has prompted the researcher to write this article is the fact that South Africans nowadays still consult traditional healers for different reasons. It is however surprising that, as modern as people are these days, they still consult traditional healers. Some consult them secretly because they regard consulting traditional healers as somehow “primitive” and “uncivilised” but do so because of problems beyond their understanding; some consult them openly and are proud to do so. Cunningham (1992:1) argues:

“An estimated 70-80 per cent of people in developing countries use traditional medicines as source of health care and Africa is no exception.”

Van Wyk in Nene (2009:1) estimated about 200 000 indigenous healers in South Africa and up to 60 per cent of people consult them. This then supports our observation that most people still consult

traditional healers and that the shortage of doctors and nurses in certain parts of the country, especially in rural areas, could be a reason. In 2009 African Medical and Research Foundation (AMREF) released a statistic for KwaZulu-Natal expressing the average workload for nurses in a nurse-to-patient ratio of about 1:8 333 and 1:155 000 for professional doctors, it partially agrees with Sepota and Mohlake's (2012:1) estimation that "for every 1000 people in rural areas, there are 84 nurses". This shows that the number of professional scientific doctors and nurses are not enough to accommodate everyone, thus leaving most people with no option but to consult a traditional healer. However, the above is not the only reason people seek help from traditional healers; hence our topic, 'the concept of traditional healing and its role in African modern society', will discuss some of these reasons. Traditional healing is an art of healing which involves the use of herbs (roots, bark and leaves) and animal material to cure or solve people's problems.

The aim of this study is therefore to investigate the role of traditional healers in a modern South Africa and to establish whether South Africans still consult traditional healers in large numbers.

## **2. Research methodology and findings**

This research will make use of library material such as books, journals, and published and unpublished research. Since traditional healing is not yet a well-researched concept, newspaper articles will also be considered as a source of information. Other sources of reference will be internet websites, which will be acknowledged. Furthermore, questionnaires will be distributed to African people who work around Pretoria (a city in South Africa) to get their views on the topic and their responses will be analysed using the naturalistic approach and the mixed method (quantitative and qualitative) approach. The word "African" means a native of South Africa and in this regard, it should refer to the indigenous ethnic group of Africa, irrespective of skin colour and language.

A total of 94 questionnaires were distributed to people around Pretoria; 68.09 per cent who answered the questionnaire are 20-29 years old, 21.28 per cent between 30-39 years and 3.19 per cent in the 40-49, 50-59 and 60+ range. The respondents are 53.19 per cent male and 43.62 per cent female; 3.19 per cent do not identify their gender.

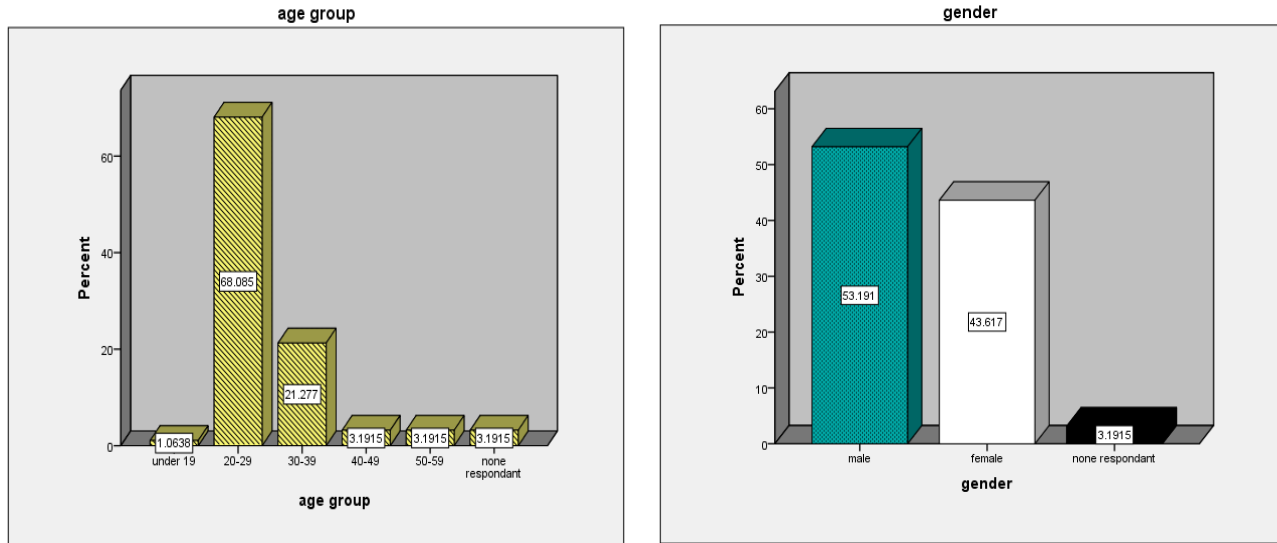


Figure 1: Research findings

Out of all the respondents, **36.17 per cent** are students, of whom 17.6 per cent prefer traditional healers, 41.18 per cent prefer western methods, 32.35 per cent prefer both and 8.82 per cent prefer “other”, significantly showing that most students prefer western methods although some prefer both methods and very few prefer traditional healers. Then **18.09 per cent** of respondents categorise themselves as “other” and most are vendors, security guards and cleaners, of whom 5.88 per cent prefer traditional healers, 25.53 per cent prefer western methods, 67.71 per cent prefer both and 5.88 per cent prefer “other”, clearly showing that most participants prefer both methods to western methods alone and again that very few prefer traditional healing on its own. A further **13.83 per cent** of the respondents are professionals, of whom 15.38 per cent prefer traditional healers, 53.85 per cent prefer western methods, 23.08 per cent prefer both and 7.69 per cent prefer “other”, clearly showing that a huge percentage of professionals prefer western methods, followed by both methods, the traditional method and “other”. Furthermore **9.57 per cent** of respondents are administrative assistants and **8.51 per cent** are academics; it is interesting to note that many academics prefer to use both methods followed by “other”, and then traditional methods and western methods alone, for which they have the same percentage (12.5% prefer traditional healers, 12.5% prefer western methods, 50% prefer both and 25% prefer “other”).

The total shows that 41.49 per cent of respondents prefer to use both methods of healing, 35.11 per cent prefer western methods, 11.70 per cent prefer traditional methods and 8.52 per cent other methods (prayer).

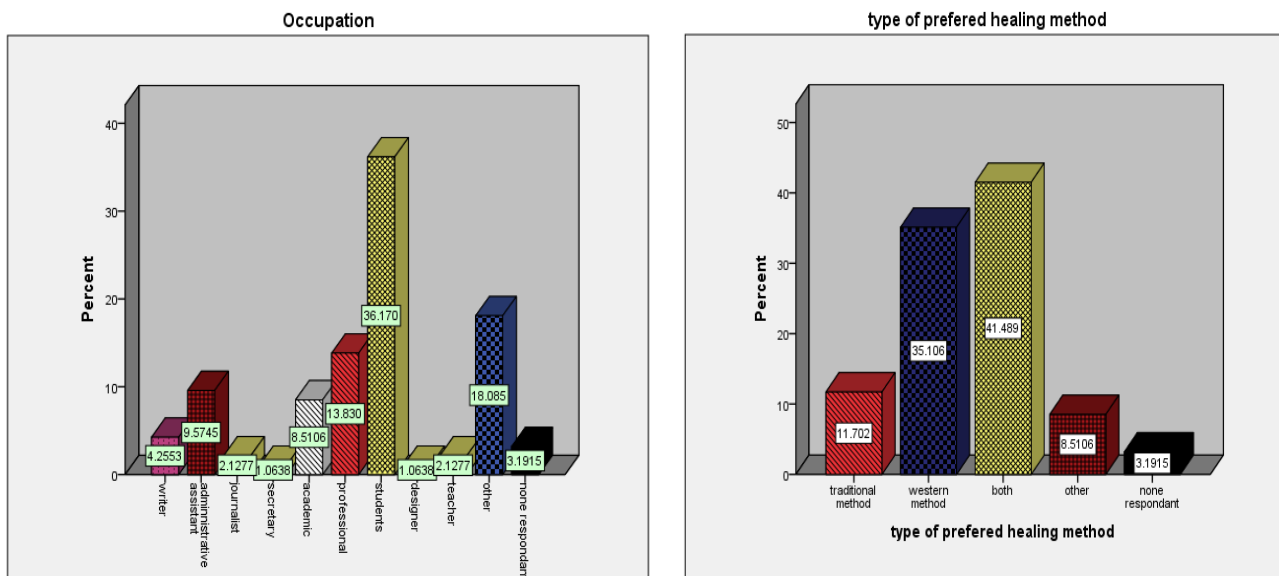


Figure 2:

The following graph illustrates the relationship between occupation and type of healing method in frequency.

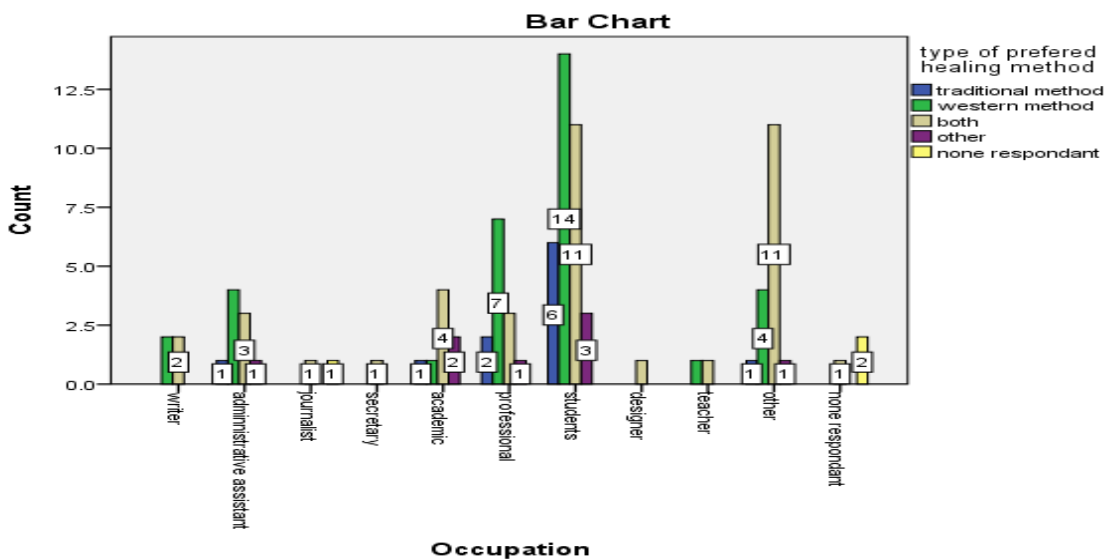


Figure 3: Healing methods

Although most respondents prefer to use both healing methods, most of them argue that they have never consulted traditional healers more than once and some not at all. Their preference does not necessarily mean that they do not believe in them but they argue that they do not consider them as their

first priority. This could be because of the connotation associated with traditional healers that some are witches and misuse their powers, while others are viewed as opportunists rather than genuine healers. People are mostly scared of them and what they can do, as participant 37 mentions the fact that people do not want to be seen going to a traditional healer or using anything related to them; but the reality is that they consult them secretly at times. She further demonstrates that some remedies used by western doctors are taken directly from traditional healers by scientists who claim them as their own although they have the same function as in the traditional healing method. The only difference is that western medicine deals with more precise measurement of remedies than traditional healing does. What the above participant said could be true, as shown in a later example. In agreement with participant 37, participant 20 avers:

“It is so sad that although I believe in traditional healers ... some of them are false traditional healers who are in this profession as a way of making money and it becomes so difficult to separate the genuine one from the false one.”

Participant 17 states: “Maybe if they could get proper training I might consider them.” Participant 14 emphasises that, although she has never consulted them, maybe some would consider them if they would stop harming people and attracting negative newspaper coverage.

The above reasons could be why 40.42 per cent of people strongly disagree (SD) on the question whether they have consulted traditional healers more than once and 13.83 per cent disagree (D). However, as mentioned previously, most people do not want to be associated with traditional healers, which may explain why 13.83 per cent of respondents were neutral with regard to responding to this question, 15.96 agreed, 9.57 per cent of people disagreed and 6.38 per cent did not respond to the question. It is interesting to note that the decision that people made with regard to the healing methods is not associated with whether there are hospitals and clinics close to where they live. Pearson chi-square indicates sigma of 0.01, which is less than 0.05.

TABLE 1: CHI-SQUARE TESTS

	Value	df	Asymp. Sig. (2-sided)
Pearson chi-square	37.423 <sup>a</sup>	20	.010
Likelihood ratio	21.614	20	.362
Linear-by-linear association	.542	1	.462
No. of valid cases	94		

a. 25 cells (83.3%) have an expected count of less than 5. The minimum expected count is .03.

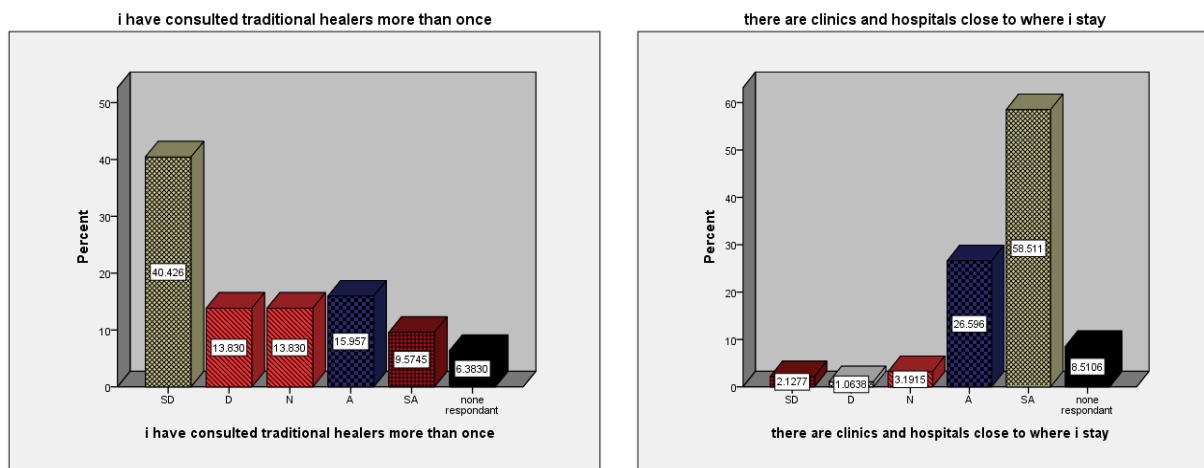


Figure 4: Choice of healing methods

This study further reveals that 76.60 per cent said they would not change their mind on the type of healing method to choose if they were suffering from “unnatural” causes of illness. Where some chose both methods it may imply that people turn to their second option if their first preference does not help. Now the question is why traditional healers are still consulted and the next section will discuss the different reasons why, using the naturalistic approach.

### 3. Naturalistic approach

According to ‘The free dictionary’ by Farlex, the naturalistic approach is “a medical philosophy that holds that illness results from external, objective causes (such as accident, infection, malformation, etc.)”. Within this approach we will look at the “natural” and “unnatural” causes of illness in the African context (The Free Dictionary by Farlex. (2013). <http://medical-dictionary.thefreedictionary.com/naturalistic+Approach> [accessed on 15/05/13]).

Most people consult doctors for various reasons, but the main point is that they want to fix something that is uncomfortable within their own health system; in isiZulu we call that “*umkhuhlane*”. I think it is fitting to start by giving a proper clarification of what “*umkhuhlane*” is. There are two ways that a person can become sick in the African context (or can have “*umkhuhlane*”). Nature may be the cause thereof or supernatural powers may be the reason behind it.

The following section elaborates on the issue.

**a) Natural cause of illness “*umkhuhlane*”**

Ngubane (1977) views illness as something that is due to impersonal or mechanistic causes that can be cured by scientific methods. Among other cultures, *AmaZulu* (Zulu people) believe that anything that is natural and alive has a quality of breaking down. According to the naturalists there are a lot of things that can cause illness besides the process of ageing. It can be due to the organic breakdown of the body (for example heart failure and senility) or an obstruction ([http://anthro.palomar.edu/medical/med\\_1.htm](http://anthro.palomar.edu/medical/med_1.htm)). Malfunctioning of certain organs can disturb the whole body and cause illness, for example an excessive accumulation of bile (*inyongo*) can cause illnesses such as headache. In isiZulu we call all these types of illness *umkhuhlane*, meaning a sickness (Ngubane, 1977).

These are all diseases known to most people that can be cured using scientific methods of discovery or even indigenous healing methods by healers using their knowledge of curative herbs. However, other types of illnesses are mostly common in Africa and some parts of Latin America. In isiZulu we refer to these as *ukufa kwabantu*, meaning “disease of African people”. This name does not mean that the disease is associated with African people only; rather, the interpretation is bound up with African ways of viewing health and diseases (Ngubane, 1977:24). According to our understanding this refers to any sicknesses that can be caused by people such as witches. Furthermore, the ecological environment can contribute to disease.

Ecology is one of the things that influence people's health. Zulu people believe there is a special relationship between a human being and the environment. For example if a person moves from one area to another, that person may get sick as a result of a different, unfamiliar, atmosphere. Ngubane (1977) explains that Zulu people also believe that, when someone moves from one area to another area, that person leaves behind something of himself or herself where he or she has been residing. That is why dogs can trace or track a person who has been at a place even when he or she is no longer there. This is what is called *umkhondo*, which means a trail. Ngubane (1975:25) argues:

“The word *umkhondo* is used mostly to describe a visible track on the ground. But it also describes the invisible track 'picked up by dogs'.”

She further argues (Ngubane, 1975) that what you leave behind floats in the air and is called *imimoya* meaning “winds”, not *imikhondo*, so that if a person inhales *imimoya* it is said to be *uhabule imimoya*, but to step over *imikhondo* is said to be *weqe imimoya*.

We fully agree with Ngubane because, as Africans, when an infant has been travelling from one place to another and gets sick we conclude that the child has inhaled something that could be the cause of the sickness. We are also aware of the fact that this has not necessarily been caused by any human factor but by natural atmospheric forces. That is the reason why Africans in cases like this, more especially when an infant is crying at night after travelling from one area to another, burn animal bones and skins (*izinyamazane*) to chase away winds (*imimoya*) that have been inhaled (*ehabuliwe*). In most cases after this is done the child will stop crying and sleep peacefully. This confirms our point of view that even nowadays people still rely on traditional healers for help, since *izinyamazane* is mostly obtained from herbalists.

It is also surprising that some people do not believe in traditional healers but still believe in powers beyond their understanding, which is why some people do not use animal skins and bones including *impepho* when an infant is having trouble at night, but use remedies that do the same thing as *izinyamazane*, such as *entressdruppels* and *duiwelsdrek*:

[*Entressdruppels* is] indicated in the treatment of nervousness, restlessness and sleeplessness. It is also recommended in the treatment of pains associated with winds in the stomach and bowels



(The Free Dictionary by Farlex. (2013). <http://medical-dictionary.thefreedictionary.com/naturalistic+approach> [accessed on 15/05/13]).

Taking us back to our argument that African people believe in powers beyond one's understanding is the belief in the need for protection from such powers. It becomes clear that although people do not admit how much one needs traditional healers, they do admit to the existence of witchcraft and the need to protect one's offspring from evil powers. The following section gives different reasons why Africans still consult healers.

**b) Traditional healers and unnatural cause of illness**

In African society, an illness is seen as something that could be caused by other people or supernatural beings and forces (Nene, 2013:48). They do not believe in accidents. According to Hammond-Tooke (1989:57)

“... Most illness of any severity is believed to be intentionally caused. There are broadly four possible causal agents: God, the ancestors, witches (all of which involves the intention of the sender) and pollution, which results from the victim being in a particular ritual state.”

He further argues (Hammond-Tooke, 1989) that the above problem cannot be solved by an ordinary individual but can only be solved by a person who has supernatural powers, like traditional healers.

**c) Illness caused by marriage**

With the knowledge gained through the exposure to African traditional healers and culture, it becomes easier for us to deduce that there are different things used by witches/sorcerers that can lead to various human problems, like food poisoning or *idlisso*. According to our understanding, this refers to a case where a sorcerer cunningly places a certain substance in a victim's food or drink without the victim noticing. When we consider the term food poisoning we presume that its victim will die, since poison has been mentioned. We would like to view this from an African perspective where food poisoning does always lead to death but may lead to other problems. To support our point of view let us consider Ntombela, Mathenjwa and Donda (1997:134) where *idlisso* is explained:

*“Lolu uhlobo lobuthakathi lapho umuntu edliswa khona. Lomuntu udliswa ubuthi afe asegunqge emnyama, equmbe isisu, esekhafula izibozi ngomlomo, afe umshubo kazashile. Abanye abadlisani ubuthi, kepha badlisana intando. Lapho kusuka inkosikazi ithakathe indoda yayo, ngokuthi iyidlise intando. Ithi indoda ihloniphekile ngaphandle kepha ibe yisinguthunguthu ekhaya... Uma ike yacabanga umkayo uvalo luyishaya luyeqe kubande kwamancane...*

*Okubi kakhulu ukuthi amakhosikazi awaboni ukuthi asuke ethakatha.”*

(This type of sorcery refers to where food poisoning is used. The victim becomes pitch black in complexion, has a swollen stomach, foul breath, and dies immediately. Others do not use food poisoning with the intention of killing but only as a love charm. Women are mostly culprits in this case. A respected man may behave unusually at home and even display signs of being partially insane. When this type of man thinks about his wife he becomes very scared. What is bad about this is that the woman does not realise doing this is sorcery.)

Mcetywa (2001:121) refers to *idliso*, or direct food poisoning as he refers to it:

“The direct poisoning of a person’s food is commonly referred to as “ukudlisa”. Many kinds of poison are used for the purpose of killing people. Most of them, when applied in the human being’s digestive system, cause stomach ache and vomiting.”

We realise from the above that the above problems can only be solved by traditional healers. This is the reason why our research is based on the concept of traditional healing and its role in African modern society. Our observation is that, no matter how successful, modernised and educated a husband you may be, if your wife has performed *idliso* on you, you will certainly require the services of a traditional healer (Nene, 2013:54). This then explains why traditional healers are still consulted: this *idliso* problem is rife among African marriages.

**d) Illness caused by witchcraft or witches**

Another common unnatural illness is caused by *umeqo*. According to our understanding, *Umeqo/Umbhulelo* refers to a method of sorcery where the intended victim engages in an action of crossing over. When this is done, the sorcerer calls the victim's name so that sorcery can affect the victim only, not someone else. Mcetywa (2001:129) argues:

*“Umeqo is a word derived from a verb ukweqa meaning to cross over. This illness is caused by crossing over sprinkled magically medicated stuff. Such a mixture, when it is sprinkled on the road or seat for one to cross over, his or her name is mentioned on the spot where the medicine is placed.”*

Msimang (1975:330) confirms the above:

*“Kepha umbhulelo wona ngeke uwuceze ngoba ufike udweshwe nje endleleni uthi uyazihambela kanti seweqe ubuthi.”*

(What has been placed where you are going to walk or cross cannot be avoided since you will not realise the danger you have crossed.)

In most cases *umeqo* is associated with bad luck or sickness of some sort. This type of sickness and bad luck cannot be cured by modern medicine but only by traditional healing techniques. Nene (2009:38) elaborates that the worst that can happen with regard to bad luck is when one's sacred place (*umsamu*) has been ruined by a witch, since the bad luck will be transferred to the whole family. Usually when a witch interferes with one's sacred place, she or he turns the person's ancestor against him or her so that nothing good can follow for that individual or family, only bad luck. For example, if a family has money issues, a young man of the family cannot think of marriage or, and makes arrangements, the marriage cannot take place. Cars belonging to family members may keep breaking down regardless of the fact that they are new. All these examples describe problems that African people encounter because of witchcraft. People may sometimes encounter problems similar to the ones mentioned, without witches having been involved, but these are coincidental cases. In African culture people need to be concerned if they start encountering one problem after another, and must seek help from traditional healers.

e) **Illness related to marriage**

Nowadays there are so many problems in marriage in such a way that some people they turned their hope to traditional healers. The problem that the author is referring to is not the western commonly known problem such as intimate partner violence, health behaviour and chronic physical illness, but problems such as *ilumbo*, which we discuss first. Hlongwane (1996:181) argues:

*“Uma umfazi ephinga indoda beyimcupha ngokumgcaba ngojovela yena engazi ukuthi imfaka Ilumbo ... Uyothi angafika lo aphinga naye abhajwe iqondo. Omunye ubefela lapho, omunye kuvuvuke ubuntu bakhe nesisu aze ube uyafa njalo uma engalashwa.”*

(If a married woman is sleeping around with other men, her husband will place *i-jovela* without her knowledge that he is introducing a manmade sexual sickness. When her lover arrives, he will suffer from a sexual sickness. The other person could die on the spot, or another person's sexual organs could be swollen as well as his stomach and if he is not cured, he may die.)

According to Mcetywa (2001:127):

*“Umayibophe-wenja is a method whereby people are engaged in a sexual act and become suddenly unable to separate. They remain locked until the person who locked them in this way is willing to unlock them.”*

Scientifically what has been mentioned by Mcetywa (2001) is impossible, but it is possible in the context of African cultural medicine. Considering how *ilumbo* comes about, one realises that the victim of *ilumbo* needs to consult a traditional healer to solve his problems. This suggests a continuing need to visit traditional healers. Our observation is that these days some people have become more interested in other people's wives, and for husbands to prevent and punish intruders, *ilumbo* is recommended and promoted by most traditional healers in some areas such as KwaZulu-Natal (a province of South Africa). It is a pity that the author cannot publish the names of medicines used by traditional healers in this article, since

doing so would be a violation of the traditional healer's rule stipulating that a person should pay for such knowledge, which must be received for a good purpose.

However it will be explained how one gets rid of bad luck in African perspective. If the bad luck involves the whole family, according to Mfeka *in* Nene (2009:37) the first step is to dig a hole outside the premises which is big enough to bury a fowl. A herbalist will then kill a black fowl by dissecting it while it is still alive and will take the bile from this fowl and mix it with herbs like *ujundu*, *umnqandane* and *umadlozana omnyama*, to mention just a few, for the reasons stated above. Family members will go out and take turns bathing at the hole that is outside the premises, where this black fowl has been placed upside down. Each family member will face the east when bathing and when finished will return to the house without looking back. It is believed that if you look back the bad spell that you have been casting away will come back to you.

Ntombela (1998:5) avers:

*“Lapho uma sikhapha isinyama sithatha umnyamathe, uyigxolo, nozulazulayithole... ntongana ezibomvana, umathunzi entaba, nomlahleni ... lo okhipha isinyama simusa entabeni yilapho- afike alahle khona wonke amathunzi amnyama.”*

(When a person is cleansing himself, he takes the bark of “*umnyamathi, uzulayithole, ntongana ezimbomvana, umathunzi ezintaba nomlahleni*”... this person who is cleansing himself is taken to the mountain where he gets rid of all the misfortunes).

Mkhize (1998:3) further argues:

*“Umuthi kuvamise ukugezwa ngawo ngaphendle kwesango.”*

(Herbs are usually used to cleanse outside the premises.)

Our observation is that Mkhize (1998) and Ntombela (1998) agree with Mfeka (*in* Nene, 2009). The only difference with Mfeka is that he mentioned the use of a black fowl and its bile. However, the processes are the same because they all agree that washing should be done outside the premises.

## 4 Conclusion

In conclusion, this study revealed natural and unnatural causes of illness that require the services of both modern and traditional healing, and different diseases that occur in Africa especially in rural areas. Ways of finding cures for such diseases were described. The importance of herbs to prevent and to cure illness was illustrated.

The researcher used IBM SPSS software to analyse the data gathered, which revealed that a number of people do not want to be associated with traditional healers. However, most people said they would consider them if it became necessary. Nevertheless, their first priority in terms of getting basic health care was through western methods. Some revealed that their decision to choose western methods is because of the poor reputation of traditional healers, based on claims about witchcraft and false claims to possession of healing powers, so the public find it hard to know what is genuine and what is not.

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