

Opinion

Proverbial Knee of Western Medicine Choking Indigenous Health System in Africa: We Cannot Breathe

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INTRODUCTION

Most of the Euro-western based social and health sciences disciplines have inherited the logic that when they mediate and interact with indigenous communities, their disciplines constitute the gold standard.(1) This logic represents a colonial mindset of authority over and superiority to indigenous knowledge systems and is critical of any systems and science, which does not adopt or conform to their views of what constitutes such science.(2) The sciences and philosophies of indigenous knowledge systems are often labelled as witchcraft and barbaric.(2,3) It resulted in indigenous communities abandoning their indigenous scientific reasoning and methodology.(2) In order to survive the authority of colonialism, it appeared that those representing indigenous health systems and knowledge have adapted to “a new knowledge” and to experience their environment along with the rules of a western system.(2) Destruction took place through inquiries based on the relational realities and forms of knowing that are predominantly western and anything not complying with this should be revised to fit the mold.(2,4,5)

Ways of knowing follow a particular trajectory of searching for knowledge and are influenced by how one relates to the source of knowledge, culture and practices. Western science is about compartmentalizing knowledge as it is being discovered, fragmentation thereof to fit the western model while ignoring the environment in which it is to be applied or arisen from.(5) Where there is a poor understanding of the indigenous sciences, the *modus operandi* would be to either disregard it or even more dangerously to destroy it to prevent it from competing with western standards.(3)

Western science seems not to understand that indigenous sciences do not characterize ways of knowing as higher and lower knowledge.(5) The dominant Eurocentric model of thinking and relating to items and experiences is an attempt at homogenizing everything to become comprehensible.(2,4)

Convergent and divergent views between allopathic and indigenous health practitioners

The two systems have a different understanding and explanation of what constitutes a healthy individual and society and illness in the community. The allopathic health system subscribes to World Health Organization’s (WHO) definition of health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”.(6) This definition of health is limited to an individual within the society and does not comply with or take into consideration the indigenous standard of health. For the indigenous communities, health is not experienced at an individual level. It is defined in terms of the completeness of society as a whole, connectedness and harmonization between the living human kingdoms, beings and their ancestors, animal kingdoms and environment. It values health as a system, similar to the human system, with different components, and each component contributing to the functionality and completeness to purpose.(7)

Indigenous health systems acknowledge that there are diseases and/or illnesses, which infect or attack the human spirit without affecting the physical body.(1,3) These could range from spiritual attacks by evil spirits or evil spells, demonic forces, ancestors’ way of communicating with an

individual, family and communities. While western science has not accepted this concept of disease, not everything that western science practices and observes meet their own standard of science. For example, western science believes that life in human beings constitutes the coexistence of the physical body, spirit or soul. The existence of the spirit as part of giving life to the body is not based on sciences but on a belief system which is common to all.(2) Indigenous science believes that the spirit, which inhabits individuals, does not present with physical signs and symptoms which could be detected and diagnosed by modern technology (7) e.g. a stethoscope and magnetic resonance imaging. There are diseases, which infect or attack the physical body without affecting the spiritual aspect.(1,3).

Displacement and elimination of the indigenous health systems

Due to globalization, indigenous communities have become increasingly exposed to foreign cultures and practices.(7) It intruded their inner self and invaded their living space similar to a declaration of war against cultures that were different from that of the colonizers. In most cases, colonization introduced to foreign culture, language, health systems,(3) including diseases against which indigenous communities had no innate immunity, constantly displacing indigenous knowledge systems of managing their patients.(2)

With the rediscovery of self, communities are increasingly reclaiming their past and strive to retain their health practices. Anecdotal reports suggest that communities are relying on indigenous steaming practices to manage Covid-19 symptoms. These practices were considered unscientific and barbaric.(2,3,7) Chilisa describes it as “no easy feat as they are split between claims of global science on the one hand and the equally compelling claims to recover the African past” on the other hand.(7)

Misinterpretation and misrepresentation of indigenous healthcare system

Indigenous healthcare system is often perceived as a threat to western norms of standard of healthcare (3) and at times associated with “witchcraft”, actively discouraged and not explored.(4)

Most of the health training curriculums in universities and colleges do not expose students to the science of indigenous health systems, community belief systems and their particular worldviews.(2,5) The worldviews that inform the current curriculum for allopathic healthcare practitioners are monolithic, hospital centered and disease oriented and excludes self-care or healing. Furthermore, the curriculum perpetuates health disparities and power imbalances that adversely affect patient outcomes.(2) It is argued that western medicine perceives that demands for pluralism would lower their standard of health service provision and result in inappropriate management of “their” patients.

Indigenous health systems as a living science

One of the common arguments by proponents of exclusivity health systems is that “our value system, science of medicine and standard of care will be compromised if we recognize and accept indigenous health practitioners to treat our patients”.(2) There are three fundamental problems associated with this approach, which require elaboration. First, it’s the mindset and attitudes which seem to suggest that patients and communities are owned by health providers.(2) Second, the perception that western medicine is the standard against which all health knowledge is measured.(2) Lastly, the notion that for “others” (indigenous health practitioners) to exist, function and be accepted by communities, it will require approval and support from western health practitioners.(2)

The plausible explanation for the above problems could be lack of knowledge and understanding of indigenous health systems and its sciences.(7) Most concerning is when researcher reviewers and editors disregard “other knowledge” based on their limited exposure and worldviews.(2,7) Indigenous health systems constitute a life force of science practiced before and after colonization, it has a history, origin, philosophy and epistemology.(8) It has its own level of excellence in providing an answer to “why me, why now”. Indigenous communities consider it as the knowledge inherent to its own identity, with its own science and technological advances beyond physical limitations. It is an institution in its own right, with consumers and pioneers.(8)

The question of what is defined as science, how it is practiced and how the standard thereof is measured is worth exploring. Science is an art, a pathway and systematic process of finding solutions to societal problems. There are different pathways of knowing and finding solutions to problems facing communities. Different communities had explored different mechanisms and at different times during the development of their healthcare systems, through experimentation and testing the efficacy of their different medicinal products, beliefs and practices.(7,8) As early as 1884, western researchers acknowledged that western medicine has a lot to learn from indigenous sciences. Some solutions are yet to be explored and discovered.(8) Their processes of diagnosis and patient management are documented as being thorough, scientific and of comparable standard to other sciences. Despite all the evidence, proponents of western medicine continue to choke indigenous healthcare system in Africa. Direct and indirect factors choking indigenous healthcare system in Africa are mentioned below.

Key amongst them is the effect and impact of colonization, globalization and commercialization of health and healthcare services as a commodity. Indigenous communities were encouraged to abandon their practices, beliefs and sciences. High levels of suspicion and mistrust enforced by colonization prohibited the use of indigenous medicines.(3,5)

Colonization extended beyond politics and the economic life of indigenous communities. It disorientated and destabilized their psycho-social interactions with reality. There are perceptions that most scientific scholars raised and educated according to the western doctrine are unable to use their worldview to interrogate and interpret the world and environment unless it meets the western worldview. They subscribe to western practices despite their limitations in African settings.

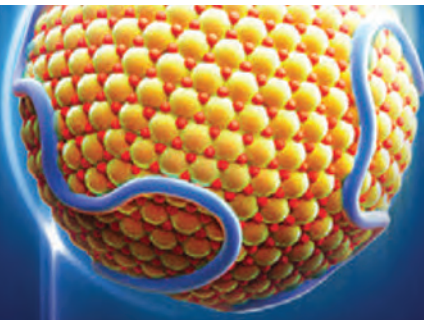
While most of the colonized countries may have achieved political freedom from their erstwhile masters, the pervasive socio-economic mind-set persists and liberation from western scientific inclinations evades indigenous scholars.

CONCLUSION

The survival of indigenous health systems appears to be linked to self-preservation of its sciences, through the exploration of the indigenous epistemologies by indigenous scholars. A new trajectory and respect for indigenous science are urgently required. With more Covid-19 patients turning to steaming using herbs, breathing is being restored: "I can breathe now".

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