The concept of diseases and health care in African traditional religion in Ghana

As human beings we sometimes in one way or another become sick, and therefore go for treatment depending on our choice of treatment (religious perspective or Western medical treatment). Although African traditional religion is not against a Western medical way of treatment or healing process, its followers believe that there are some diseases that Western medicine cannot treat, and therefore need spiritual attention, as it is sometimes practiced in churches. This article discusses the African traditional view regarding disease, causes of disease, how disease is diagnosed and treated, with a special focus on Ghana. The article also describes the role of the diviner or the African traditional priest or what others may term as ‘herbalists’. The advantages and disadvantages of the African traditional healing process are considered. The article concludes by discussing African traditional healing in the context of a contemporary health care discourse, as well as a proposal for dialogue between traditional healers, Western medical practitioners, the government of Ghana, and the governments of various countries where this issue may be applicable, to build a consensus in addressing health issues.

Introduction

‘As there is an African way of understanding God … in the same way, there is an African way of understanding the world, the visible world around us – the cattle, trees, people and cities as well as the unseen world, the supernatural world of spirits, powers, and diseases’ (Oduro et al. 2008:9). In spite of the introduction of Western medicine and health care systems in Africa, many African communities still rely on traditional health care (World Health Organisation [WHO] 2001). The WHO (2000:1) defines traditional medicine/health care as ‘the total combination of knowledge and practice, whether explicable or not, used in diagnosing, preventing or eliminating physical, mental and social diseases. This practice exclusively relies on past experience and observation handed down from generation to generation verbally or in written form’. In the view of Helms and Cook (1999), indigenous healing refers to the helpful beliefs and practices that originate within a culture or society, and are designed to treat the inhabitants of a given community. Kofi-Tsekpo (2004:i–ii) notes that the phrase ‘traditional medicine’ has become a catchword among the peoples in all countries in Africa. This is partly because the use of herbal remedies has gained popularity worldwide and the exploitation of these remedies has become a multimillion industry. He further argues that the term ‘African traditional medicine’ is not synonymous with ‘alternative and complimentary medicine’. African traditional medicine is the African indigenous system of health care and, therefore, cannot be an alternative. In Africa, there is an important reason why African traditional medicine has become increasingly popular. The high cost of allopathic medical health care and the expensive pharmaceutical products have become unavailable to a majority of people.

In view of the above, this article seeks to describe the African traditional religions’ view regarding disease, causes of disease, how disease is diagnosed and treated. In doing this, the role of the diviner and ‘herbalists’ would be discussed with a special focus on Ghana. In order to avoid any form of prejudice, the phenomenological method for the study of religions was used.

‘Epistemologically, phenomenological approaches are powerful for understanding subjective experience, gaining insights into people’s motivations and actions, and cutting through the clutter of taken-for-granted assumptions and conventional wisdom’ (Lester 1999:1). It, therefore, involves methods of recognising, identifying, describing, and categorising objects, events and language which are usually labelled as ‘religious’ (Cox 2010:25–29). Dr Jaco Beyers stated on 03 August 2013, when I interviewed him in the Department of Science of Religion and Missiology at the University of Pretoria, that the purpose of phenomenology is to re-establish contact with the raw materials of life itself by identifying and understanding them as the phenomenon presents it. It is therefore important for the researcher to bracket his or her assumptions and judgements.
Diseases in the African traditional view

For the traditional African, health is not just about the proper functioning of bodily organs. Good health for the African consists of mental, physical, spiritual, and emotional stability of oneself, family members, and community; this integrated view of health is based on the African unitary view of reality. Good health for the African is not a subjective affair. (Omonzejele 2008:120)

Good health is usually understood in terms of the relationship with one’s ancestors. Health amongst Africans is not based merely on how it affects the living, because it is of paramount importance that the ancestors stay healthy so that they can protect the living (Iroegbu 2005:81). In their understanding, good health is also believed to be the result of appropriate behaviour; that is, living in accordance with the values and norms of the traditions of society (Iroegbu 2005:82). In view of the above, traditional medicine has at its base a deep belief in the interaction between the spiritual and physical well-being of people (Setswe 1999:56–60). It is also imperative to emphasise that good health also includes the viewing of an individual as a collective member of the community; as such, good health would also include good relations with ancestors and the community. Thus Mbiti (1990) rightly notes:

Only in terms of the other people does individual become conscious of his own being ... When he suffers, he does not suffer alone but with the corporate group ... Whatever happens to the individual happens to the whole group, and whatever happens to [the] whole group happens to the individual. The individual can only say: I am because we are, and since we are, therefore I am. (pp. 108–109)

Causes of diseases in the African traditional religion

There are several ways traditional Africans explain or understand the causes of disease. The first point of contact is the view that disease is often caused by attacks from evil or bad spirits. Some also believe that when the ancestors are not treated well, they could punish people with disease (Magesa 1997:175; Westerlund 2006:91–95). Thus, Nyamiti (1984) rightly points out:

When ancestors are neglected or forgotten by their relatives they are said to be angry with them and to send them misfortunes as punishment. Their anger is usually appeased through prayers and ritual in the form of food and drinks. [The ancestors long for contact with their earthly kin; that is why they are supposed to visit often] (p. 16)

Life in African traditional religion is based on maintaining the balance between the visible and invisible world. The maintenance of this balance and harmony is humanity’s greatest ethical obligation and determines the quality of life (Magesa 1997:73).

Spell-casting and witchcraft are also other ways one could become sick. There is the view that people with evil powers could cause other people they see as their enemies or are disrespectful to them to become sick as a way of punishment (Olupona 2004:113). Furthermore, many traditional African communities are of the view that certain illnesses which defy scientific treatment can be transmitted through witchcraft and unforeseen forces; these include barrenness, infertility, attacks by dangerous animals, snake bites by dangerous snakes, persistent headaches and repeated miscarriages (Obinna 2012:137–139; Thorpe 1993:25).

In some Ghanaian communities, especially in the Akan communities, one could become sick through invocation curses in the name of the river deity, Antoa, upon an unknown offender. In their understanding, it is a means of seeking divine justice from the river deity.

Many traditional healers and practitioners are of the opinion that disobeying taboos is one of the ways people could become sick (Gyekye 1995:133). Taboos form an important part of African traditional religion. They are things, or a way of life, that are forbidden by a community or a group of people (Isiramen 1998:186). Taboos are also a social or religious custom prohibiting or restricting a particular practice or forbidding association with a particular person, place or thing (Westerlund 2006:139). Taboos exist to make sure that the moral structures of the universe remains undisturbed for the good of humanity (Magesa 1997:76, 148–149). There are food- and meat-related taboos in various Ghanaian communities. Disobeying these taboos could lead to severe illness to the person(s) or community involved.

Although all these are termed as taboos, they have some moral and ethical connotations. The amazing part of many of these taboos is that, when one violates any of them secretly, the person does not go scot-free. The consequences always manifest either on the person(s) concerned or the entire community in the form of diseases, and possibly death. This is what Magesa (1997:51) termed the effect of life force. Magesa (1997:51–53) argues that moral behaviour maintains and enhances one’s life force, but disobedience and disloyal behaviour towards tradition passed on by the ancestors will weaken the life force. This can, therefore, lead to punishment from the ancestors or spirits in the form of disease and misfortune.

Diagnosing diseases in African traditional religion

Dime (1995:30–31) argues that the diagnosis of diseases in an African traditional healing system is a twofold event. Firstly, the organic or physical cause of the sickness has to be established by careful examination and questioning by...
the medicine man. Secondly, this is complementary to a divination of the spiritual or mystical cause for the illness.

The following are some of the methodologies many traditional healers in Ghana have been using.

Consulting the spirit world (divination): They consult the ‘spirit world’ to identify the cause of the disease or to discover whether there was a violation of an established order from the side of the sick person. This is established through the use of cowry shells, throwing of bones on strips of leather or flat pieces of wood. The divining bones are not strictly all bones but comprise shells, money, seeds, dice, domino-like objects or even dominos themselves, and other objects that have been appointed by the sangoma and the spirit to represent certain polarities. Animal bones from lions, hyenas, ant-eaters, baboons, crocodiles, wild pigs, goats, antelopes and others form the large majority of the objects. There are bones for all psycho-socio-spiritual polarities. The bones represent all of the forces that affect any human being anywhere, whatever their culture (Cumes 2014). In some African cultures, it is performed using sacred divination plates made of wood or performed on the ground, within a circle (Lindsay 2005:214–215; Thorpe 1993:60), or the use of divination pots and slaughtering of animals (Sarpong 2002:103). Croucamp (2013) argues:

...[D]ivination is a technology that is used to deliberately initiate a process of accessing and collecting information, through the use of randomly arranged symbols and then, using the brain’s capacity for analogical thinking, making associations that are ordinarily inaccessible. It is therefore a transpersonal field of information to gain healing knowledge. (p. 4)

It is also viewed as a way to access information that is normally beyond the reach of the rational mind. Diviners base their knowledge on communication with the spiritual forces, such as the ancestors, spirits and deities (Olupona 2004:103–104). In view of this understanding, divination is, therefore, an integral part of an African traditional way of diagnosing diseases. Because of the revealing powers of divination, it is usually the first step in African traditional treatment and medicine (Omonzejele 2008:122).

Interviews and medical reports: Some of the traditional healers in Kumasi, Ghana, confirmed that they do sometimes interview their patients in order to find out the history behind the sickness, where they have been for treatment, and how long the person has been in that situation. This approach informs them on how to handle the matter at hand. If the client is unable to speak, other family members speak on behalf of the sick person. Furthermore, some clients and practitioners of African tradition health care in Kumasi reported that some traditional healers do consider medical reports. Sometimes, after the healing process, they also advise their clients or patients to go for medical diagnoses to confirm that they are healed. These medical reports sometimes serve as a form of pride for the traditional healers and are a way of assuring other clients of their ability and credibility.

Healing process in the African traditional religion

In the traditional African healers’ understanding, their healing process is holistic (Thorpe 1993:123). This implies that the healer deals with the complete person and provides treatment for physical, psychological, spiritual and social symptoms. Traditional healers do not separate the natural from the spiritual, or the physical from the supernatural. This will cause them to address health issues from two major perspectives – spiritual and physical.

Spiritual issues

Spiritual-based cases are handled in the following manner:

Spiritual protection: If the diviner or the traditional healer perceives the cause of the disease to be an attack from evil spirits, the person would be protected by the use of a talisman, charm, moto [spiritually prepared black powder] for body marks, amulets, and a spiritual bath to drive the evil spirits away. These are rites aimed at driving off evil and dangerous powers, spirits or elements. Their function is to eliminate the evils or dangers that may have already taken root in a family or community (Westerlund 2006:111–113).

Sacrifices: Among the Ewes and some of the northern tribes in Ghana, sacrifices are sometimes offered at the request of the spirits, gods, and ancestors. Sometimes animals are slaughtered or buried alive (Olupona 2004:104). When it comes to the issue of death among the Ewes and some tribes in the northern region of Ghana, dogs or cats are sometimes buried alive at midnight to save the soul of the one at the point of death. Dogs and cats are used to replace the life of people, because they believe that the spirit of such animals is strong for that purpose. There is also the view that, because they are domestic animals and are very close to people, sometimes when they see that someone very close to them is about to die, they offer their lives for that person to live. In such cases the animal would die mysteriously. This is therefore interpreted, ‘If it could be that someone was about to die and the animal took his or her place’. This is a common belief among the Ewes in Ghana.

Sometimes rituals are performed in order to consecrate some herbs. Rituals constitute the way of consecrating African traditional medicine; medicine without consecration for Africans is meaningless. Divine and ancestral sanctions are considered necessary before and during the preparation and application of medicine (Idowu 1973:201).

Spiritual cleansing: In some cases herbs are prepared for the person to bathe with at specific times for a number of days. Sometimes an animal can be slaughtered and the blood would be poured on the head and foot of the sick person; the blood poured on the sick person serves as a way of cleansing. This practice is common among the Ewes communities in Ghana (Westerlund 2006:127).
Appeasing the gods: Interviews with some traditional priests (diviners) in Kumasi show that, in the case of diseases that are caused by an invocation of a curse or violation of taboos, the diviner appeases the ancestors, spirits or the gods. This is done according to the severity of the case, by either sacrificing an animal or by pouring of libation. In many cases, the person would be told to buy the ritual articles for the process as mentioned by the gods or the spirits. Some of the ritual articles usually used for this purpose are spotless animals (dove, cat, dog, goat, and fowl), schnapps, akpeteshie [traditional liquor], calico (red, white or black) and sometimes eggs and cola nuts.

After the rituals, these articles are sometimes left at the required place to rot, or they are sometimes thrown into a river as required by the god or spirits. They are at times placed on a four way junction or the outskirts of the community, depending on the purpose of the ritual (Insoll 2010:234–235).

Exorcism:

‘It is a practice of expelling demons or evil spirits from people or places that are possessed, or are in danger of possession by them. Exorcism is usually performed by a person with special religious authority, such as a priest or shaman. The practice was common in ancient societies and was based on the practice of magic. Ancient Babylonian [civilisation], in what is now Iraq, had special priests who would destroy a clay or wax image of a demon in a ritual meant to destroy the actual demon. The ancient Egyptians and Greeks had similar rites. Many religions in various parts of the world continue the practice of exorcism’. (Encarta 2009)

When it is perceived among the Ewes and some Akan tribes in Ghana that a sick person is possessed by an evil spirit, exorcism is practiced to deliver the person. It is mostly done with singing, drumming, dancing, the spraying of powder to the sky and on the possessed, and the use of abodua [animal tail] to drive away the evil spirit by touching the body of the possessed person several times with the abodua until the person is totally free. In the process of the practice, you would see the possessed person rolling on the floor like someone under bondage looking for freedom. Once the spirit has been released, the person would become stable, mostly with a deep sense of relief.

This practice is also performed for those who are mentally challenged. Many of the traditional communities in Ghana are of the view that mental illness is mostly caused by evil spirits. In their view, until the possessed person is delivered from the power of that evil spirit, the person will not have his or her freedom. Hence, the practice of exorcism is necessary. This approach mentioned in this section is a common practice in the Tigari shrines in Ghana (Avorgbedor 2000:9–24).

Pouring of libation: Libation is a rite by which some liquid is poured on the ground or sometimes on objects followed by the chanting or reciting of words. According to the practitioners, it is a form of prayer. The liquid could be water, wine, whisky, schnapps or gin. Some cultures also use palm wine, palm oil, and coconut water (Adjaye 2001:109; Van Dijk 2001:42, 46, 50). The Ga and Ewes of Ghana sometimes use corn flour mixed with water.

Libation pouring amongst the Akan communities in Ghana has three main parts, namely invocation, supplication and conclusion (Kilson 1970:169; Sarpong 1996:17; Yanka 1995:174):

- **Invocation:** They first invoke the presence of Twerehuapong Kwaame (the almighty God), Asase Yaa (mother earth) and the ancestors by saying, Twerehuapong Kwaame ye kyere wo nsan na yen mmaawo nsan, Asase yaa, begye nsan, nananum nsamanfo nsa nia, meaning ‘Almighty God, we show you drink but we don’t give you drink’. (This is said because they believe that all that is on this earth belongs to God, and therefore he does not need a drink offered by man; mother earth we offer you drink and we call on you our ancestors to come for a drink). They say ‘we offer you drink’ because in Ghana, whenever you have a visitor, the visitor is first of all welcomed with water or a drink. According to the practitioners of libation pouring, offering the ancestors and spirits drink is a way of welcoming them (Agawu 2007:3–4; Van Dijk 2002:182–190).

- **Supplication:** At this point, they present their requests to the invoked spirits, gods or ancestors to act on their behalf or to have mercy on them. They sometimes ask the ancestors and the spirits to forgive offenders of taboos and to seek for spiritual consecration (cleansing) of either the community or individual(s). The content of the prayer depends many times on the purpose of the occasion for the pouring of libation (Adjaye 2001:107–138).

- **Conclusion:** At the end of the libation pouring, they thank the invoked ancestors and spirits. They finally invoke curses on those who wish them evil or failure: Obi nk o hyira enk hyira ne busuefo, nipa bane fue ashe yen yie die no, ne nkong nkong ne so, meaning, in the process of prayer, it would be unwise to seek the welfare of one’s enemy. Therefore, those who wish evil (i.e. enemies, witches, and people with evil powers) on us, should fall and die (Sarpong 1996:46; White 2012:5).

In this process, the person pouring the libation would be pouring the drink or liquid on the ground as he is reciting the prayers. And those present would keep responding wio [amen] at the end of each sentence by the pourer.

Physical issues

The following are some of the healing processes, when the case or sickness is deemed to have physical causes:

**Prescription of herbs:** Depending on the kind of disease the person has brought to the diviner or the traditional healer, he would prescribe herbs to the sick person. These prescriptions come with some specific instructions on how to prepare the herb, the dose and timeframe (Ayim-Aboagye 1993:109; Lartey 1986:79).
Clay and herbs application: In some of the healing processes, the traditional healer would prepare white clay with some herbs for the sick person to apply on his or her body for a number of days. This is mostly what is done for those with skin diseases. The theory behind this concept is taken from Genesis 2:7. Their view is that the human body is made out of the dust or ground, therefore, if the body has any problem, you would have to go to where it came from to fix it. This could also be traced to John 9:6–7, and Mark 8:22–23, when Jesus Christ mixed his spit and clay for healing. The use of clay and herbs is also sometimes used for preventive rituals. There are special herbs for preventive rituals. When the sick person applies the herb and the clay on his or her body, it prevents the spirits behind the illness from attacking the patient.

Counselling: Sometimes, the sick person is advised on how to live his or her life, especially the kind of food the person should or should not eat. This is mostly done when it is an issue of a violation of a taboo.

They are also advised to be of good behaviour should it be that it was discovered that the disease occurred as a result of impolite behaviour (Sundermeier 1998:181). Good behaviour, according to African traditional belief, includes following and practicing values and behaviour established by society and culture, participation in religious rituals and practices, and proper respect for family, neighbours and [the] community. Failure to follow these behavioural guidelines often results in the good spirits withdrawing their blessing and protection [and, therefore, opening doors for illness, death, drought and other misfortunes].

According to Wiredu (1983:13), among the Akan people of Ghana, African morality is based on human welfare, whereas Downess (1977:43) indicates that the African idea of morality is doing good to others and not evil. African notion and application of moral precepts have far-reaching implication on how African traditional medicine is practiced. Adherence to moral precepts is an important and integral part of traditional health care in Africa and is subsumed in general African ethics.

African traditional view about God in their healing process

African traditionalists believe that there is only one Supreme God (Mb1i 1986:40–43). In spite of their view about God, they also believe in ancestral spirits, with the belief that they are all intertwined and are in constant relationship with living beings. These spirits demand worship and are said to possess supernatural powers with which they punish or reward their worshippers (Sarpong 2002:95–97). According to Mb1i, the African traditional view about God is influenced by factors such as geographical location, culture, language, social and political factors. He further states that the indigenous names of God are always present in the worldviews of African people and have been passed down through generations by oral tradition. In his conclusion, he emphasised that there is therefore, no place for atheism or denial of God’s existence in traditional African communities and that Africans are ontologically attached to God. In African traditional practitioners’ understanding, God is for everyone everywhere (Mb1i 2012:6–15). However, God does his work through ancestral spirits and diviners (Chavunduka 1999). This implies that God is the healer but works through mediums such as spirits, herbs and deities with the assistance of diviners or traditional healers (Obinna 2012:135).

The role of the diviner

Diviners treat illnesses primarily through facilitating the direct intervention of the spiritual world (Obinna 2012:142). If an illness is believed to be caused by inappropriate behaviour on the part of the patient, a remedy or cure for the illness can only come through spiritual intervention. Whilst herbal healers use plants to treat diseases, diviners seek input from the spiritual world to understand the cause of the illness and prescribe a cure (Asamoah-Gyadu 2014:83; Cheetham & Griffiths 1982:957). They also play an intermediary role between the spirit and the physical world. In the light of this understanding, in some cultures they are called ‘the eyes of the spirits’. Depending on the one using the term, they are also known as traditional healers, African traditional priests, and herbalists (Sarpong 2002:103–104).

They are believed to be the custodian of the theories of healing, and the hope of society. They learn the cause, cure, and prevention of disease, misfortune, barrenness, poor crop yield, magic, witchcraft, sorcery, and how to combat or even use them to treat his people. They also find the cause of illnesses as well as the perpetrator who sent it, diagnose the nature of the illness, apply the proper treatment, and prevent misfortune from happening again (Sundermeier 1998:203–204).

In summary, the role of a traditional healer is broader in some respects than that of a contemporary medical doctor. The traditional healer advises their clients in all aspects of life, including physical, psychological, spiritual, moral, and sometimes legal matters. They also understand the significance of ancestral spirits and the concept of witches.

As some medicine men attach the practice of their medicine to a tutelary spirit and magic, they are sometimes shunned by Christians. The fact is that many of the types of medicine prescribed by African traditional healers, especially the herbal practitioners, have nothing to do with mystical powers.

Advantages and disadvantages of African traditional medicine for healing process

Whatever choice you make in life comes with its own merits and demerits. The same applies to health care. Whether one is using Western or traditional medicine to cure his or her
disease, it comes with its own challenges. Currently, there are many Western drugs on the market which have several side effects, in spite of their scientific claims. This informs us that African traditional medicine or healing processes also has its own challenges. Discussions with some clients and practitioners of African traditional health care in Kumasi, Ghana, led to the following conclusion:

**Advantages**

- It is ‘holistic’. It addresses issues of the soul, spirit and body.
- It is easily accessible.
- It is mostly cheap.

**Disadvantages**

- It does not rely on accurate diagnosis.
- Sometimes neglects the importance of dosage.
- Often prepared in unhygienic conditions.
- The knowledge of the medicine is not easily disseminated but kept by those who have it.
- Some of the practitioners depend on divination which makes it difficult for Christians to access their services (Gyasi, Mensah & Osei-Wusu Adjei 2001:4850).

### African traditional healing in the context of contemporary health care system

In 1977 the WHO gave formal recognition to the importance of the African traditional health care system and has encouraged African countries to make the practice more formalised to ensure quality and better service delivery (Truter 2007:60; WHO 2001). They were subsequently officially recognised by the Alma Ata Declaration in 1978 as important resources for Achieving health for All (WHO 2010:7).

According to the WHO (2000):

Some African countries are locally producing traditional medicines used for various diseases such as chronic diarrhoea, liver disorders, amoebic dysentery, constipation, cough, eczema, ulcers, hypertension, diabetes, malaria, mental health and HIV/AIDS in order to improve people’s access to medicines. (p. 2)

Because of the important role African traditional medicine has played and is playing in Africa and beyond, some countries and institutions of higher learning have put research into Plant Medicine and the training of traditional medical practitioners as part of their degree programmes. In Ghana, for instance, the Kwame Nkrumah University of Science and Technology, has established the Department of Herbal Medicine in the Faculty of Pharmacy and Pharmaceutical Sciences. The University of Ghana has done the same by establishing the Department of Pharmacognosy and Herbal Medicine. In order to ensure quality traditional herbal medicine in the market, the Akropong Centre for Scientific Research into Plant Medicine was established. Currently, in Ghana, some of the public hospitals have also opened centres for herbal medicine where people can access health care with the backing of the Ministry of Health of Ghana (Ministry of Health 2012).

In South Africa, a Traditional Health Practitioners Bill of 2003 was drafted. Certain sections of the Traditional Health Practitioners Act, Act 35 of 2004, came into operation on 13 January 2006. Efforts are furthermore ongoing to develop a pharmacopoeia of traditional medicines (Truter 2007:60). In Kenya there has been collaboration between the herbalists and the Kenya Medical Research Institute (KEMRI). Some of the African herbs have been analysed in modern laboratories and certified to cure certain ailments. African herbs are also being dispensed in liquid, tablet or powder form in well packaged containers. Some traditional medicine-men are doing extensive research and coming up with new medicines (Mumo 2012:118).

Although not all African traditional healers are making use of the current scientific approach of preparing their medicines and healing processes, there is, however, the need for governments, ministries of health, Western medical practitioners, and traditional healers to come together for dialogue. This will help to build trust, to educate one another through workshops, and to come to a consensus in addressing the health issues from a holistic and broader perspective. This would also encourage Western medical practitioners to refer patients that require spiritual attention to some of these traditional healers and vice versa. This dialogue will also help to ensure safety, quality and efficacy of traditional medicinal products, practices and to regulate practitioners.

### Conclusion

Long before the advent of Western medicine, Africans had their own way of dealing with diseases and it worked for them. African traditional healers or diviners were intelligent enough to prescribe traditional solutions to diseases whether it had spiritual or physical causes with little or no side effect. When it is psychological, the person is sometimes counselled and is given the necessary attention. In the light of this,

African traditional healing is intertwined with cultural and religious beliefs, and is holistic in nature. It does not focus only on the physical condition, but also on the psychological, spiritual and social aspects of individuals, families and communities. (Truter 2007:57)

Moreover, the reason why African traditional medicine is popular in Africa is because they are both available and cheap. Having said this, I wish to end with the statement: ‘Don’t be quick to judge, be ready to learn new things and make the right choices as it pleases your faith and conscience’.

### Acknowledgements

**Competing interests**

The author declares that he has no financial or personal relationship(s) which may have inappropriately influenced him in writing this article.
References


Helms, J.E. & D.A. Cook, 1999, Using race and culture in counseling and psychotherapy: Theory and practice, Allyn and Bacon, Boston, MA.


Nyamit, C., 1984, Christ as our ancestor: Christology from an African perspective, Mambo Press, Gweru.


Yank, K., 1995, Speaking for the Chief: Okyeame and the politics of Akan royal oratory, Indiana University Press, Bloomington, IN.