Letters to the Editor

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Bridging the Communication Gap between Traditional Healers and Western Medicine

To the editor:

There are currently more than 500 000 traditional and spiritual healers operating in South Africa as opposed to ±93 000 Western Allopathic Doctors. The Traditional Healer System, in which 75% to 80% of South Africans consult traditional and spiritual healers, is a rich and well-established Indigenous Knowledge System and while supple-mentary training in primary health care subjects is important, the primary objective must be to preserve cultural knowledge for the benefit of future generations and the present society.

Eighty per cent of South African Traditional Healers are illiterate and while supplementary training in primary health care is essential, if they are forced to conform to bio-medical models of instruction they will no longer be able practice the ancient sciences that recognize the spiritual elements contained in natural healing methods. Traditional Healers work with the four elements, converse with their ancestors, learn through taste, smell, intuition and where language tends to distort, move into poetry, chant, rhythm and ritual to speed up the learning process. Unable to read or write they rely on memory and visual aids, music and movement enhance their ability to remember. In addition, the Western view of time is diametrically opposed to the African view. The difference in the two views of this concept alone illustrates completely different approaches and attitudes to life, humanity, and to work and business. It affects the way we interact with one another and the difficulty Africans and Westerners sometimes have in understanding the other's motivation and behaviour.

Teaching methods, therefore, need to be designed to accommodate Indigenous Knowledge Systems when it comes to the development of a curriculum and methodology of training traditional healers on primary health care subjects. In addition to ancestral training, they need to be well informed on critical health and disease conditions, which information their clients would also be exposed to through ongoing health education, so that as practitioners they gradually achieve a broader orientation to problems they are likely to see daily. This would also provide a basis for a common frame of reference between the practitioners of both traditional and western medicine and also serve as a platform for dialogue and co-operation. Ideally, Traditional Healers should be allowed to accompany their patients to hospital. This would also help to speed up history taking. In addition, they should be allowed to visit their patients in hospital and continue with certain treatments so that after discharge from hospital, the traditional healer can continue with follow up care.

Developing materials and training methodologies for traditional healers is highly specialised, as it must be specifically designed to respect their culture and indigenous knowledge systems. It must also cover the nature and extent of differences between the systems of health care, diagnosis and treatment between western medicine and traditional healers and highlight areas where common understanding can be reached. This, in turn, will enable western medical and health practitioners to work with traditional healers in a manner acceptable to both, giving appropriate respect, working within agreed upon framework and expectations of each other and dispelling misunderstandings.

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