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AFRICAN TRADITIONAL HEALING: A CHALLENGE
TO PASTORAL CARE OF THE SICK IN GHANA

Supervisor

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A Long Essay Submitted in Partial Fulfillment of the Requirements for
the Ecclesiastical Degree of Baccalaureate in Theology

NAIROBI 2011

This work is dedicated to my Uncle, Mr. Peter Kye Kwabena and his family.

To those who have journeyed with me up to date.

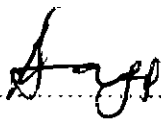
ACKNOWLEDGEMENTS

I acknowledge with immense gratitude the efficient, focused and resourceful guidance of my supervisor, Rev. Fr. Peter Mugo, S.S.A. Placing his vast scholarship and experience at my disposal. He guided me through the path of African Traditional Healing. I appreciate his unfailing interest and helpful suggestions. He guided me with big human face and his encouragement and professional support has gone a long way in ensuring the completion this research work.

I register my most sincere thanks to Fr. Lawrence Likulano, SVD and Fr. Carlos Lima, SVD who spent their time do the proof reading the script. I am very much grateful to Vincent AGBEYOME, SVD who spent his busy and study time to read the paper and offered inestimable suggestions regarding the Akan Traditional Healing. I remain indebted to all the Society of the Divine Word, the formation team and students of Common Formation Centre - Lang'ata for being there for me. The environment made it possible for me to produce this research paper. May I recognize the staff of Tangaza College for their encouragement and support. To all those who have contributed in one way or the other, I am very much indebted to you.

STUDENT'S DECLARATION

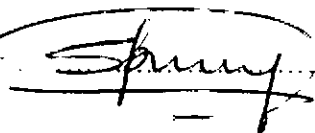
I, the undersigned, declare that this long essay is my original work achieved through my personal reading, scientific research method and critical reflection. It is submitted in partial fulfillment of the requirements for the Ecclesiastical Degree of Baccalaureate in Theology. It has never been submitted to any other College or University for academic credit. All sources have been cited in full and acknowledged.

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This long essay had been submitted for examination with my approval as the college supervisor.

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GENERAL INTRODUCTION

Background

The Akan community of the Southern Ghana is very traditional in nature. For several years, the lifestyle, thinking pattern, worldview, and cultural practices of the people has not changed much in spite of formal education and western influence. Although a lot has changed over the years as viewed from the periphery, the typical Akan knows that people still maintain their traditions and observe their customs.

This research is something we have longed to do over the years. In the culture in which we grew up it was common that some Christians consulted one traditional healer, witch doctor, diviner, etc. during difficult times such as sickness, calamities, etc. It is also out of observation during my pastoral year experience in Ghana in 2008/2009. In our pastoral work, we visited the sick people at their homes, gave them Holy Communion and shared the word of God with them. My observation during that period was that some would visit one traditional healer or the other from time to time. As an African Christian, we would like to research in this area so as to understand this phenomenon to equip me in my future ministry as a priest.

CHAPTER I

THE AKAN COMMUNITY AND THEIR WORLDVIEW

1.0 Introduction

In this first chapter, I want to give the background of the Akan community. I would also explain the Akan worldview which will help us to have some insights into their philosophy. We will also have an in-depth treatment of the Akan understanding of the human person. There is a section that will enable us to understand what constitutes a person from the perspective of the Akan.

In the fifth chapter of the First African Synod published in 1995, the heading, "Living the Good News in Our Culture", the synod fathers gave a very interesting introduction. In it, they wrote:

When the missionaries came to Africa a hundred years ago, they did not know the African languages. They also did not understand many of the traditional ways of Africans. Some even presumed that African ways were inferior to theirs and never realized that there is an African as well as a European way of being a Christian. African Christians, because the faith has not been received into their culture, often live in two separate worlds: the world of the traditional religion and customs and the world of Christian faith. Often they feel tension between their culture and their faith and move from one to the other¹.

This excerpt from the synod fathers is a clear indication of what is being expressed in this research paper. Although African Christianity has come of age and for that matter no one can blame the early missionaries for the wrong Africans do

¹ AMECEA PASTORAL DEPARTMENT, ed., *The African Synod Comes Home*, 25

now, it remains without saying that the Christian faith was very shallow from the beginning. The method needs to be examined.

The repercussion is evident. For one thing, Africans are notoriously religious as expressed by Mbiti. There are very good traditionalists and very good Christians. On the one hand, Christian values are instilled in the people through catechesis and many other forms of teachings. Nevertheless, traditional, custom, and cultural demands beckon the African Christian to play a particular role so as not to alienate oneself. For many, this creates a tension since the conflict between the Christian gospel and traditional demand weighs them down. Where the gospel is not properly interpreted, people become fanatical and fundamentalist in their reception, ascribing everything cultural as devilish and savage.

However, as some of the synod fathers explained, African Christians “are like frogs who have two legs on land and two in the water · when there is a disturbance in the water they jump on dry land and when there is trouble on the land they rush into the water. Or again, some Christians pray the rosary in the morning and take to witchcraft in the afternoon”². Because the custom is engraved deep down in them, they find consolation in the traditions in times of difficulties such as sickness, calamities and misfortunes. They would usually ask, “why me?”

1.1 The Akan

The Akan is a tribe in West Africa. It is a group of people whose languages are also called Twi found in Southern Ghana and parts of Ivory Coast³. The Akan people include the Akwapim, Fante, Kwahu, Akwamu, Denkyira, Nzema, Asanti and Brong.

² AMECEA PASTORAL DEPARTMENT, ed., *The African Synod Comes Home*, 25

³ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 32

The Akan speaking of West Africa occupy the Western, Central, Ashanti and Brong Ahafo regions of Ghana, and parts of the Eastern and Volta regions of Ghana, and the South Eastern corner of the Ivory Coast⁴. As a boundary, the northern limit of this area is the upper course of the Volta River, the southern being the Sea Coast. "The area can be estimated as fully one half of the 92,000 sq. miles of the surface area of the country"⁵.

The people are culturally related. Nevertheless, they may be roughly divided into the Brong, Akyem, Akwapim, Kwahu, Assin Twifo, Wasa, Fante - Agona, Nzema - Evalue, Ahanta and Ashanti, each group speaking a distinct dialect⁶. Although each has a distinct dialect, there is not much difference in traditional beliefs and practices.

The constitution of the any Akan tribe is based on the *Abusua* (family system). For example among the Ashanti, there are seven established *Abusua* or Family Groups namely⁷:

- i. Oyoko and Dako
- ii. Bretuo and Agona
- iii. Asona
- iv. Asenie
- v. Aduana (Atwea, Abrade)
- vi. Ekuona and Asokore
- vii. Asakyiri

Every member of the Akan tribe is a member of one *Abusua* (family system) or family group and can trace their descent through the Female Line to the same

⁴ Cf. S. PETER, *Girls' Nubility Rites in Ashanti*, 1

⁵ S. PETER, *Girls' Nubility Rites in Ashanti*, 1

⁶ Cf. S. PETER, *Girls' Nubility Rites in Ashanti*, 1

⁷ Cf. O. E. ERNEST, *Ancient Ashanti Chieftaincy* 1

female ancestress who is the founder of that *Abusua*. The relationship of the members of the *abusua* (family system) is that they are considered to have the same blood and so marriage between them is forbidden⁸. A child naturally belongs to the mother's *abusua*.

Inheritance among the Akan community is based on sex generation and age. Men come before women and seniors before juniors. The general understanding is nephew inheritance (matrilineal). However, the nephew is not an automatic successor to his uncle. "Very often, the property or stool in question has to move, step by step, to the last male inheritor (brother) before of passing on to a male son of a female member of the mother's family"⁹. Using the words of Captain Rattray, Ernest Obeng¹⁰ gives six male successors in order of priority. These are:

- a) maternal uncle
- b) brother of the deceased
- c) mother's sister's son
- d) sister's son
- e) sister's daughter's son
- f) mother's sister's daughter's son

The priority is given to the male in the *abusua* in this case. It is when all possible male heirs have been exhausted that the females are sought after. Ernest Obeng gives this order in the case of female inheritance¹¹:

- Sister
- Eldest sister's daughter
- Sister's daughter's daughter

⁸ Cf. O. E. ERNEST, *Ancient Ashanti Chieftaincy*, 1

⁹ O. E. ERNEST, *Ancient Ashanti Chieftaincy*, 8

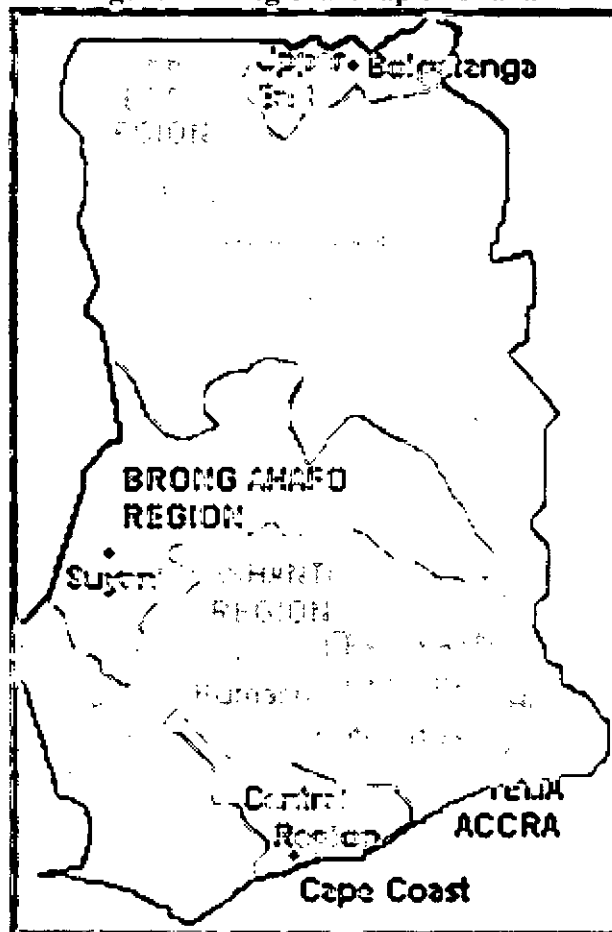
¹⁰ Cf. O. E. ERNEST, *Ancient Ashanti Chieftaincy*, 8

O. E. ERNEST, *Ancient Ashanti Chieftaincy*, 10

The inheritance is in the line of an individual person's property or a chief's stool. It is pertinent that the individual's character is taken into consideration. A drunkard, thief, etc. will not be entrusted with any property.

In the following maps, all the ten regions of Ghana are indicated in the first figure. The regions occupied by the Akans are indicated in the key below.

Figure1: A Regional Map of Ghana¹²

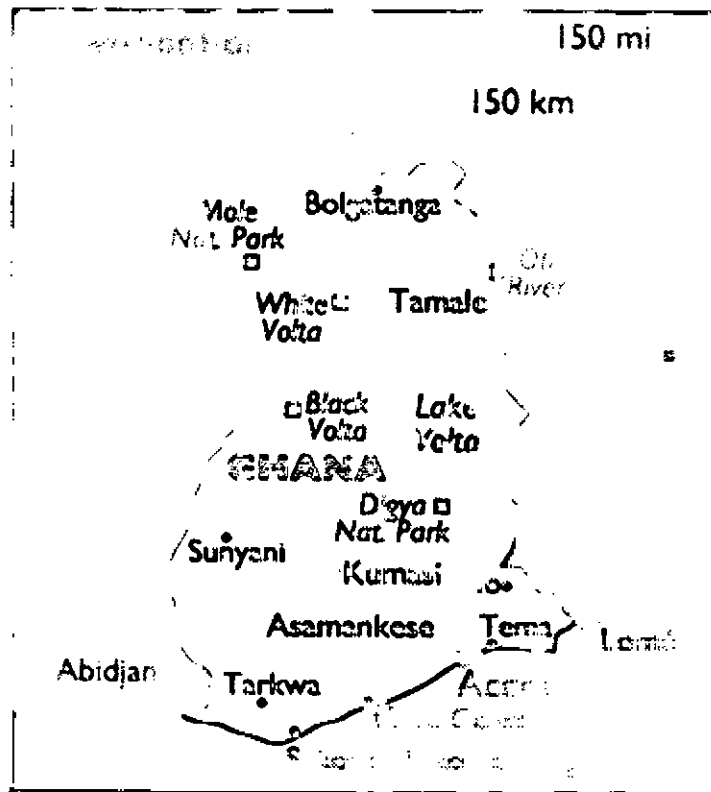


Key

Brong Ahafo Region	Eastern Region	Ashanti Region	Western Region	Central Region
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¹² <http://www.ghanaweb.com>

Figure 2: Map of Ghana showing the neighboring countries¹³



Key

Cote D'Ivoire	Burkina Faso	Togo	Gulf of Guinea
West	North	East	South

1.1.1 The Akan Worldview

In the mind of any Akan person, "everything begins with God, and the African world view which explains how the universe came to be, makes this belief quite clear"¹⁴. While everything has a beginning, God has no beginning. This is expressed by the Akan name for God, *Tetekwaframo Nyame*, 'the God, He who is

¹³ <http://www.ghanaweb.com>

¹⁴ O. K. JACOB - N. S. SULAYMAN, ed. . "Religious Plurality in Africa, Essays in Honour of John S. Mbiti", 71

there now as from ancient times'. He continues to be, He is without beginning or end.

God is the creator, because according to African religious heritage, the universe did not come into being on its own accord¹⁵. From various different cultures there are creation stories and in all of them God is the principal actor. Kofi Asare Opoku quotes Mbiti who explains why there are different names describing God in African languages. He writes, "Mbiti pointed out, '... there is a concentration of names of God describing him (or her, since in many African languages there is no masculine-feminine dichotomy grammatically) as Creator'"¹⁶. All the names and attributes point to God as Creator. As creator, everything depends on Him. God is the sustainer of life and existence.

The Akan, who are the dominant ethnic group in Ghana, form about 40% of the Ghanaian population¹⁷. They are mostly farmers. They believe that "the world is a spiritual arena, with spirits interacting with each other"¹⁸. It is believed that in this dualistic world, there are good as well as bad spirits. Good is rewarded and evil is punished.

The ancestors play major role in the life of the Akan community. Sometimes one would wonder why there is much emphasis on the ancestors. They "are revered for total moral and ethical uplift and political, economic and social success"¹⁹. As many African writers agree, the Ancestors are the custodians of law and morality.

¹⁵ Cf. O. K. JACOB - N. S. SULAYMAN, ed., "Religious Plurality in Africa, Essays in Honour of John S. Mbiti", 71

¹⁶ O. K. JACOB - N. S. SULAYMAN ed., "Religious Plurality in Africa. Essays in Honour of John S. Mbiti", 71.

¹⁷ Cf. O. K. JACOB - N. S. SULAYMAN, ed., "Religious Plurality in Africa. Essays in Honour of John S. Mbiti", 98.

¹⁸ O. K. JACOB - N. S. SULAYMAN, ed., "Religious Plurality in Africa. Essays in Honour of John S. Mbiti", 98.

¹⁹ O. K. JACOB - N. S. SULAYMAN, ed., "Religious Plurality in Africa. Essays in Honour of John S. Mbiti", 98.

They are expected to bring about peace, harmony to society through the traditional chiefs and spiritual rulers in the community.

It is held that “the ancestors live because they return to *Onyame*²⁰ after death; they would not live if *Onyame* did not live”²¹. According to Asare Opoku, they do not have independent existence; they depend on *Onyame* (God). This Akan idea confirms Mbiti’s term, “the living-dead” which points to the fact that life continues after death²². There is an unbroken union between the dead and their living family members. For this reason dead bodies are very much respected among the Akans. The Akan would spend huge sum of money to bury and organize funeral for relatives.

Among the Akan and in many other African cultures, to be human implies to belong to a family or community. The Akan explain this by a proverb, ‘*onipa fi soro besi a. obesi nnipa krom*’ -- when a man descends from heaven he enters a town inhabited by human beings, implying that society is the context of human existence²³. The sense of belonging is that which defines one’s humanity because no one exists as an island. To belong also means that one contributes and participates in community’s growth.

Religiously, one is expected to participate in all sacrifices, communal cleansing, festivals and rituals. Common taboos are also observed and respected. Where there is a breach of any taboo, the repercussion affects the entire community.

²⁰ *Onyame* is the Twi name for God.

²¹ O. K. JACOB - N. S. SULAYMAN, ed., “Religious Plurality in Africa. Essays in Honour of John S. Mbiti”. 75.

²² C. F. O. K. JACOB - N. S. SULAYMAN, ed., “Religious Plurality in Africa. Essays in Honour of John S. Mbiti”. 75

²³ O. K. JACOB - N. S. SULAYMAN, ed., “Religious Plurality in Africa. Essays in Honour of John S. Mbiti” 76

1.1.2 Human Person

“The Akan regards a human being in an exalted fashion. Each human being has the ‘spark of God’ in him or her, the *akra*”²⁴. God is the originator of human beings as found in many other related tribes, religions and people around the world. This is expressed in the popular belief: (*Onyame bekyere*) “God will provide”. Since God is the originator, it is his responsibility to provide for the world he has brought into being. There is therefore, the total dependency on God expressed through the ancestors and the gods who are mediators. There is respect for human life.

The dignity of human life is a primary concern. The mentally retarded or physically challenged are treated with dignity. Each human being in the community is valuable right from birth. Even after death, the worth of the human person continues to be respected, because the dead person is living on in the community of the ancestors²⁵. It is pertinent we look at the concept of human person as a tenet to our topic.

1.2 The Akan and the Comparative Concept of the Human Person

To facilitate a better understanding let us adopt the explanation of Robert Fisher as he explains the morning greeting between a man and a woman in the Twi language²⁶:

Twi	English
<i>Owura, maakye!</i>	<i>Sir, good morning!</i>
<i>Yaa, mua</i>	<i>The same to you, sister.</i>
<i>Wo ho te sen?</i>	<i>How are you?</i>
<i>Onyame adom, me ho ye</i>	<i>By God's grace, I'm fine.</i>

²⁴ R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 64

²⁵ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 65

²⁶ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 65

Na wo nso, wo ho te sen?

And how are you too?

Me ho ye. Eɛie te sen?

I'm fine. How's home?

Eɛie de: h kra.

Everything at home is fine.

In the above greeting, there is the reference to "God's grace", the concern about health and the concern about home. There is the expressing of the belief in God, who is the Divine Provider; there is the concern about health, the well-being of the 'house', meaning the family and the concern about the body

The Twi word 'ho' (health) is used to express the well-being. 'Eho' which means 'the whole exterior body', where health or sickness is felt. "Ahoɔden" expresses 'strength' (literally) "body firm".

Another greeting which expresses 'the joints':

wo mpomuɛ? (Literally) How are your inside joints?

Me mpomu de: b kra. My joints are soft.

From these greetings, one is made to understand that the physical body is the main feature when thinking about the health of a person. If the body is fine, then the person is healthy.

However, the Akans do not agree completely to this. There is more to the person than the body. The human person to the Akan consists of a body (*nipadua*) made of an exterior features (*honam*). This body is a composition of spiritual element from the mother's blood (*mogyu*), the spiritual entity from the father's semen (*ntor*), from which the individual receives his own spirit; the spiritual entity that is the bearer of his or her personality (*sunsum*); the spiritual entity (*kra*) which is the spark from God²⁷. These elements, in the minds of the Akans are the things that form the human person. They form the background for ill health, sicknesses and

²⁷ Cf. R. FISHER, *Western African Traditions. Focus on the Akan of Ghana*, 66

are under the mercy of evil spirits in community. The next section explains them in detail.

1.2.1 *The Ɔkra (Soul)*

In the explanations below, the writer shall use body, spirit and soul analogously. The usage does not compare to the Greek or other western psychology.

We may therefore speak of the Ɔkra as a soul, but it is a life force, like breath (*thonhom*). The Ɔkra “is the bearer of one’s destiny (*nkraɛɛɛ*) from God”²⁸. It is the innermost self, the essence of the individual person. The Ɔkra is the individual’s life; hence, the individual is called *Ɔkrateasefoɔ* that is, the living soul²⁹. The Ɔkra is identical with life. Gyekye explains that the Ɔkra is a “spark of the Supreme Being (*Onyame*) in man”³⁰. This divine presence in human being is expressed in the Akan adage that says, ‘all men are the children of God; no one is the child of the earth’ (*nnɔpa nyinaa ye Onyame mma, obiara nnye asase ba*).

The Akans belief that before a person is born into the world, he or she stands before *Onyame* (God), who gives the person a destiny to fulfill. The Ɔkra is therefore the linkage between the person and God³¹. As a bearer of the person’s destiny, the Ɔkra offers both good and bad advice to the person. When the Ɔkra provides good advice, or protection, the Akan say, *ne kra di n’akyi* (his soul protects him or his soul follows him)³².

On the other hand, when the Ɔkra offers bad advice, fails the person, the Akan would say, *ne kra apa n’akyi*, (his soul has failed him or his soul has left him).

²⁸ R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 67

²⁹ Cf. E.C. EZE, ed. *African Philosophy*, 59

³⁰ E.C. EZE, ed. *African Philosophy*, 59

³¹ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 67

³² Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 67

It is believed that throughout life, the *akra* is stable and never leaves the body until death when it returns to God to give account of earthly life (*abrabɔ*).

1.2.2 The *Sunsum* (Personality)

Another important spiritual element of the person is the *sunsum*, (the personality or character). “Unlike the *akra*, the *sunsum* may leave the body momentarily during life – for example, during sleep and roam about³³.

The Akans believe in the existence of witchcraft (*bayie*). An illustration of how the *sunsum* leaves the body is the operation of the witchcraft. The *sunsum* of a person leaves the body at night to seek out the weak *sunsum* of another to ‘eat’³⁴. Another way of operation of the *sunsum* is in dreams. It is argued that during dreams, the *sunsum* is the actor of the person dreaming. In the Akan community if a person dreams to have committed an offense, he or she has actually done it and can be held against him in the traditional court.

It is held that the *sunsum* as the personality is the subject of illness and the manipulation of sorcery and witchcraft. Whatever happens to the *sunsum* therefore, happens directly to the physical body of the person. That is why a person may dream of shouting and be actually heard shouting in his/her sleep.

Men are expected to have heavier *sunsum* (personality) than women. However, if a man is coward in life, does not prove to face challenges, does not take risks, he is considered to have a weak *sunsum* like a woman. On the contrary, there are some women who are aggressive, courageous, and masculine and are ready to go extra mile. Such women are considered to have heavy *sunsum* as men.

³³ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 70

³⁴ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 70

Sunsum is not limited to individuals. Families, ethnic groups, whole nations have a *sunsum* also³⁵. The Ashanti Nation for example has a common *sunsum* believed to be enshrined in the *Sikadwa*, the 'Golden Stool'. What happens to the Golden Stool happens to the Ashanti Nation.

1.2.3 *The Ntorɔ (Male Spirit)*

As noted above, the individual is a compound of both the physical and spiritual entities. He is a product of the union of male and female, the male spirit (*ntorɔ*) with the female blood (*mogya*)³⁶. The *ntorɔ* is passed on as Twumasi expresses. "The *ntorɔ* is transmitted from the father to his children and this is shared by them as members of the *ntorɔ* group"³⁷. Members of common *ntorɔ* observe common taboo, totem and festivals. One does not marry from his *ntorɔ* group.

1.2.4 *Mogya (Blood)*

The fourth spiritual entity is the *mogya* (blood). The *mogya* signifies blood kinship on the matrilineal line. The Akans traditionally believe that a child is formed when the *ntorɔ* of the father combines with the mother's *mogya*³⁸. Because the Akans are matrilineal, the contribution of the mother is basic in the formation of the child.

The *mogya* which is inherited from the mother is the basis of lineage membership. The *mogya* is therefore synonymous with lineage (*abusua*) and it provides the child with its lineage identity and membership.

³⁵ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 70

³⁶ R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 70

³⁷ P. A. TWUMASI, *Medical Systems in Ghana*, 21

³⁸ Cf. R. FISHER, *Western African Traditions: Focus on the Akan of Ghana*, 73

1.3 The Relation of *Ɔkra* and *Sunsum*

The *sunsum* (personality) is not a physical entity, it is spiritual. We may translate it as “spirit”, for the purpose of our study. In this section, we intend to explore the relation between the *Ɔkra* and the *sunsum*. The writer intends to know whether they are identical, the relation between the two entities and how they influence each other.

The anthropologist, Rattray, who has done an extensive research into the Ashanti culture, has tried to give lots of semantic differences between the two terms. In his view, there are certain things which are said of the *Ɔkra* but are not said of the *sunsum*. Rattray then concludes that those are the things which show that the two are not identical. Below are the semantic differences as proposed by Rattray³⁹:

A (1). “His *Ɔkra* is sad” (ne *Ɔkra* di awercho); never, “His *sunsum* is sad”.

(2). “His *Ɔkra* is worried or disturbed” (ne *Ɔkra* teetee).

(3). “His *Ɔkra* has run away” (ne *Ɔkra* adwane), to denote someone who is scared to death.

(4). “His *Ɔkra* is good” (ne *Ɔkra* yɛ), referring to a person who is lucky or fortunate. [The negative of this statement is “His *Ɔkra* is not good”. If you used *sunsum* instead of *Ɔkra*, and made the statement “His *sunsum* is not good”, (ne *sunsum* nnye), the meaning would be quite different; it would mean that his *sunsum* is evil, that is to say, he is an evil spirit, a witch].

(5). “His *Ɔkra* has withdrawn from his body (ne *Ɔkra* afi ne ho).

(6). “But for his *Ɔkra* that followed him, he would have died” (ne *Ɔkra* dii n’akyi, anka owui).

³⁹ Cf. E.C. Eze, ed. *African Philosophy*, 62

(7). "His *'kra* is happy" (ne *'kra* aniagye).

It is worth noting that all such attributes are said only of the *'kra* and not of the *sunsum*. On the other hand, the following can also be attributed distinctively to the *sunsum* and not of the *'kra*⁴¹:

B (1) "He has *sunsum*" (ɔwɔ sunsum), an expression used when the Akan wants to refer to someone as dignified.

(2). "His *sunsum* is heavy" (ne sunsum ye duru), that is he has a strong personality.

(3). "His *sunsum* overshadows mine" (ne sunsum hye me so)

(4). "Someone's *sunsum* is bigger than another's (obi sunsum so kyen obi dee).

(5). "He has a good *sunsum*" (ɔwɔ sunsum pa), that is he is a generous person.

The above statements are made of the *sunsum* (spirit) and not of the *'kra* (soul). Although Rattray gives the above semantic differences, Kwame Gyekye holds that such a distinction is not satisfactory. In his opinion, it is just a matter of idiomatic expressions although Rattray is right. He rejects these semantic differences and approaches it differently.

According to Gyekye, most Akans agree that in dreaming it is the *sunsum*, not the *'kra*, that leaves the body⁴¹ as noted earlier. He explains that the departure of the *'kra* (soul) from the body means the death of the person, but the *sunsum* can leave the body.

Secondly, Gyekye recognizes that the main difference between the *'kra* and the *sunsum* lies in their functions or activities. The *'kra* is the principle of life of a person and the embodiment and transmitter of his or her destiny (*nkrabea*). On the other hand, personality and character dispositions of a person are the function of the *sunsum*. "The *sunsum* is the source of dynamism of a person, the active part of the

⁴¹ Cf. E. C. E./E., ed., *African Philosophy*, 62

⁴¹ Cf. E. C. E./E., ed., *African Philosophy*, 63

human psychological system; its energy is the ground for its interaction with the external world"⁴². It is the *sunsum* that one's health, worldly power, position, influences, success, etc. depends. The activity of the *sunsum* is not ascribable to the *okra*.

1.4 Relation of Okra (Soul) and Honam (Body)

It has been noted earlier that the *okra* (soul) and the *sunsum* (spirit) are spiritual entities. This understanding brings home to the fact that the "Akan philosophy maintains a dualistic, not tripartite, conception of the person: A person is made up of two principal entities or substances, one spiritual (immaterial: *okra*) and the other material (*honam*: body)"⁴³.

The Akans belief in the life after death. It is held that the soul lives on after death in the ancestral world while the body perishes. This belief makes it clear that the two entities are not in homogenous entities⁴⁴ as other thinkers suppose. Some discussants assert that there is a strong connection between the body and the soul. In their view, the body is the physiological 'medium' for the soul⁴⁵. If it is true that there is indivisible unity of soul and body, then it eliminates the notion of life after death because in that case both would disintegrate together after death. Life after death here does not refer to resurrection as Christian doctrine teaches.

In the Akan philosophy, the body has influence on the soul just as the soul has influence on the body. What happens to the soul affects or reflects on the condition of the body as well⁴⁶. Consequently, poor health, illness, infringed upon the soul by evil spirit affects the conditions of the body.

⁴² E. C. E. A., ed., *African Philosophy*, 62

⁴³ E. C. E. A., ed., *African Philosophy*, 63

⁴⁴ C. E. C. E. A., ed., *African Philosophy*, 63

⁴⁵ C. E. C. E. A., ed., *African Philosophy*, 63

⁴⁶ C. E. C. E. A., ed., *African Philosophy*, 64

1.5 Conclusion

In the foregoing chapter, we have tried to unearth the reality of the Akan community. We have explained in detail their worldview which is the framework for the second chapter. It is also clear that the Akan people view human person as a complex whole, not a single entity. Flesh and blood alone do not constitute a person as we have seen. Human person is a component of other spiritual entities. This makes the person a complicated being to deal with. The above chapter prepares the reader to understand the philosophy of the Akan traditional healing as will be explained in detail in the next chapter.

CHAPTER II

THE AFRICAN TRADITIONAL HEALING

2.0 Introduction

Traditional healing is a key in Africa. The World Health Organization (WHO) defines Traditional Medicine Practice (TMP) as “health practices, approaches, knowledge and beliefs incorporating plant, animal and mineral based medicines, spiritual therapies, manual techniques and exercises, applied singularly or in combination to treat, diagnose and prevent illnesses or maintain well-being”⁴⁷.

Chapter two of this essay underscores African Traditional Healing. In this chapter, the writer intends to explain in detail different health professionals as judged by Africans. It evaluates also the strengths and weaknesses of some of the practitioners.

2.1 The Akan Concept of Health and Healing

Among the Akans, health is symptomatic of correct relationships between persons and their environment - the supernatural environment, the world around them and their fellow human beings⁴⁸. A healthy person is the one who is in tune with the environment and with everybody.

⁴⁷ <http://www.modernghana.com/>

⁴⁸ Cf. O. K. JACOB -N. S. SULAYMAN, ed., *Religious Plurality in Africa: Essays in Honour of Julia S. Abuti*, p. 95.

Nevertheless, illness shows that a person has lost this balance, an indication that certain proper order has not been followed. Breaking a taboo for instance has such a consequence. Illness may be due to “the malevolence of an evil spirit or evil eye”⁴⁹. There are evil spirits and persons who soldier against others. But there are other times when diseases are caused by failure to perform right religious acts in its proper order and time. There are instances when the victim may not be the offender but may be suffering from the offence of a kinsman⁵⁰. Hence, the family concern about illness of another is very important in the Akan community.

The understanding of sickness is so broad that it demands a holistic approach.

The Akans state that the whole person is ill and not part of him. They further state that if one person is ill, then we are all ill. Therefore healing must be comprehensive, covering the entirety of the individual, his family and the society. Thus, healing rituals include social, psychological, physical, religious and herbal medicines; all the forces at one’s disposal are called upon to combat illness. Any one-sided approach to healing, whether physical or spiritual, is considered by the Akan as incomplete and inadequate⁵¹.

This may explain why traditional medicine has stood the test of time. For a person to be fully healed, he or she is taken as a whole. This includes how he or she lives, where he or she lives and with whom. His or her beliefs are also taken into consideration⁵². The Akan holistic healing takes into account the social, political, economic, emotional, physical and spiritual conditions since all these affect the person’s health. This “healing system shows that health is not an isolated phenomenon- merely the absence of disease but part of the magico- religious

⁴⁹ O. K. JACOB - N. S. SULAYMAN ,ed., ‘ *Religious Plurality in Africa, Essays in Honour of John S. Mbiti* ’ 98

⁵⁰ Cf. O. K. JACOB -N. S. SULAYMAN ,ed., ‘ *Religious Plurality in Africa, Essays in Honour of John S. Mbiti* ’ 99

⁵¹ O. K. JACOB -N. S. SULAYMAN ,ed., ‘ *Religious Plurality in Africa. Essays in Honour of John S. Mbiti* ’ 99

⁵² Cf. O. K. JACOB -N. S. SULAYMAN ,ed. ‘ *Religious Plurality in Africa. Essays in Honour of John S. Mbiti* ’ 100

fabric of existence"⁵³. No matter how much Christian faith one has, belief in magic, witchcraft and existence of evil spirit persists in the Akan thought.

Appiah – Kubi expresses succinctly that among the Akan, “for every piece of good fortune as well as misfortune, two questions are asked: ‘How it happened?’ and ‘why?’”. He continues that the ‘How?’ is answered by a common sense empirical knowledge. It is the ‘Why me?’ question which the Akan asks and a recourse is taken to the traditional healer⁵⁴.

Western medicine has contributed greatly to the health-care ministry in Ghana. However, as argued by Kofi Appiah-Kubi, “Western medicine as currently practiced in Ghana is valuable but incomplete approach to health, that it concentrates on disease and neglects health; that it emphasis individual medical care and slights the influence of environment and behaviour; that it remains insensitive to psychological factors in health and disease⁵⁵”.

Although Appiah-Kubi does not oppose Western medicine, he believes that the Akan traditional healers have a great responsibility. He sees them as the sources of inspiration, hope and succor to the sick, the confused and the disheartened⁵⁶. The cultural element is necessary in the process and that is the point Appiah-Kubi stresses.

It may interest the reader how this cultural meaning comes about. For one thing, the relationship between the healer and their patient is cordial. Payment is

⁵³ O. K. JACOB -N. S. SUI AYMAN ,ed., “*Religious Plurality in Africa, Essays in Honour of John S. Mbiti*”, 100

⁵⁴ O. K. JACOB -N. S. SUI AYMAN ,ed., “*Religious Plurality in Africa, Essays in Honour of John S. Mbiti*”, 100

⁵⁵ O. K. JACOB -N. S. SUI AYMAN ,ed., “*Religious Plurality in Africa, Essays in Honour of John S. Mbiti*”, 18-19

⁵⁶ Cf. O. K. JACOB -N. S. SUI AYMAN ,ed., “*Religious Plurality in Africa, Essays in Honour of John S. Mbiti*”, 19

usually given in kind, rarely in cash as against the Western medicine hospitals where cash and carry is the order.

In a work done by Kofi Appiah-Kubi, he identifies how Western Scientific Medicine has overshadowed traditional healing system in Ghana and throughout Africa as a continent. Kubi reports that Western Scientific Medicine is “preoccupied with physio-chemical processes and remain insensitive to psychological factors in health and disease”⁵⁷. It is a notable fact as Appiah - Kubi notices that Western medicine claims superiority and dismisses any other alternatives.

To pin down his point, he asserts that the current view of health care in Ghana and in fact, the whole of the continent is a disease cure, and is based on several faulty assumptions. He lists the following three points as the faulty assumptions on which the current health care system is based on⁵⁸:

- ❖ Health equals medical care
- ❖ Medical care equals Western Scientific Medicine
- ❖ Western Scientific Medicine equals the Bio-medical model.

Appiah - Kubi’s point of departure is that critical examination of the traditional healing and Western Medicine may reveal some new approaches that are complementary. In this way there is no tendency of superiority over the other. He suggests that through possible integration, complement and articulation, new systems better than the current system can be realized⁵⁹.

⁵⁷ O. K. JACOB -N. S. SULAYMAN .ed., “*Religious Plurality in Africa. Essays in Honour of John S. Mbiti*”, 95

⁵⁸ Cf. O. K. JACOB -N. S. SULAYMAN .ed., “*Religious Plurality in Africa. Essays in Honour of John S. Mbiti*”, 95

⁵⁹ Cf. O. K. JACOB -N. S. SULAYMAN .ed., “*Religious Plurality in Africa. Essays in Honour of John S. Mbiti*”, 95

2.2 Traditional Healing in Africa.

Looking at the medical care in Africa, the “New People” magazine, November-December 2009 defines Traditional African medicine as “the set of knowledge and practices, rationally explicable or not, used in the diagnosis, prevention and elimination of physical, mental, and social disequilibrium”⁶⁰. This knowledge comes from the tradition of the people. In other words, it is passed on from generation to generation. The practice is based on observations.

The World Health Organization (WHO) recognizes that Traditional medicine is very potent. Talking about the practice in Africa and other parts of the world, it says, in some Asian and African countries, 80% of the population depends on traditional medicine for primary health care. It notes again that herbal medicines are the most lucrative form of traditional medicine, generating billions of dollars in revenue. More so, traditional medicine can treat various infectious and chronic conditions⁶¹.

The article explains further that the traditional medicine-men, healers, herbalists, etc. are persons recognized in their communities as specialists in the treatment of various sicknesses through the use of plants, minerals and animal parts and through other means based on the social, cultural and religious traditions of the people⁶². They are the authorities as far as health is concerned in the traditional set – up.

Prof. Daniel Mutungi in his work, “Spirituality Personhood Development and Psychotherapy in African Societies” asserts that in the African societies, people

⁶⁰ C. FRANCISCO, “Healing of Body and Spirit”. *New People* (2009), 23.

⁶¹ Cf <http://www.modernghana.com/>

⁶² C. FRANCISCO, “Healing of Body and Spirit”. *New People* (2009), 23.

seek therapy or treatment for various reasons⁶³. While some Africans seek treatment as curative for illness, others seek therapy for prevention or protection for illnesses. Because of this, Mutungi mentions the following as the specialists in African traditional healing⁶⁴.

- The Medicine Man or Woman
- The Medium
- The Diviner
- The Priests



Figure 3: Traditional Medicine displayed⁶⁵

⁶³ Cf Prof. M. K. DANIEL, *Spirituality Personhood Development and Psychotherapy in African Society*, 30

⁶⁴ Cf Prof. M. K. DANIEL, *Spirituality Personhood Development and Psychotherapy in African Society*, 30

⁶⁵ <http://www.voanew.com/english/news/africanmedicine.com/>

2.2.1 *The Medicine Men and Women*

Emmy Gichinga defines Medicine men or women as the “medical practitioners in Africa sometimes referred to as herbalists, medicine doctors, and traditional doctors”⁶⁶. They are commonly called healers. Various other names are given to them which show their usefulness in African society.

Both Prof. Daniel Mutungi and M. Gichinga agree that the medicine man or woman is NOT a witch doctor although some writers indicate so. Gichinga elaborates that medicine men in the olden days “probably earned this derogatory term on account of the fact that they deal with afflictions whose origins are rooted in the mystical realm”⁶⁷.

Different medicine men and women have various approaches and skills. The knowledge is acquired through inheritance, revelation, training and observation. Medicine men and women also differ in the sense that while some specialize in particular diseases, others deal with general ailments⁶⁸. Unlike today, traditional African Societies did not have experts in complicated diseases and so people had to travel long distances to find experts.

Prof. Adam, tracing African traditional healing to pre-colonial period mentions that medicine men and women treated their patients with herbs. The herbal products were obtained from roots, barks, leaves and fruits from trees and plants. They also used elements like bones, excreta, oil, skin’s fur, feathers, fish, animal products and other ingredients suitable for yielding medicinal extracts⁶⁹. The process is complicated. According to Prof. Adam, the raw materials were processed into

⁶⁶ M. G. EMMY. Ph D, *Counseling in the African Context*, 137

⁶⁷ PROF. M. K. DANILL, *Spirituality Personhood Development and Psychotherapy in African Society*, 30

⁶⁸ Cf. K. A. C. ADAM. *Religious and Health in Africa*, 39

⁶⁹ Cf. K. A. C. ADAM. *Religious and Health in Africa*, 39

powders, liquids or oils. Common ailments such as stomach upsets, malaria, migraines, asthma arthritis, wounds, skin ulcers, etc. were treated with herbs⁷⁰.

Prof. Daniel Mutungi sums up his thought, commenting that medicine men and women are concerned with illness and misfortunes that are believed to be caused by ill actions of other persons and failure to perform some rituals.

Medicine men or women according to Gichinga, rely on divination for their practice which indicates invoking mystical powers for diagnosis and properties for the preparation of their products⁷¹. In her clarifications, she enumerates nine (9) types of medicine men or women commonly found in Africa.

2.2.2 Types of Medicine Men or Women⁷²

- ❖ Sorcerers: They are hired to use their medicine to harm enemies of their clients and eliminate the life force in people. Hence, they are considered as anti-life, though to their clients, they are seen as pro-life.
- ❖ Diviners: After making a diagnosis on the problem, the diviner then dispenses medicines, prescribes rituals and procedures to reverse any wrongs that may be affecting people's lives. As such, they tend to be pro-life in the eyes of their clients. However, those whose evil acts are unearthed by the medicine men, they are afraid of them because such knowledge makes the entire community aware of who they are.
- ❖ Herbalist: They use their medicine to protect and restore life. They treat a whole range of diseases and afflictions, psychological troubles and physical diseases. Herbalists have the qualities of treating

⁷⁰ Cf. K. A. C. ADAM. *Religious and Health in Africa*, 39

⁷¹ Cf. M. G. EMMY, Ph.D. *Counseling in the African Context*. 137

⁷² All the explanations are taken from Emmy M. Gichinga, Ph.D. *Counseling in the African Context*. 138.

diseases that contemporary medicine is not able to treat. In spite of this, their services are offered free or at very affordable fees to all in comparison with the contemporary cash-and-carry systems.

- ❖ Muslim Sheiks and Koran Teachers: These use the Koran to diagnose and dispense prescriptions.
- ❖ The Itinerant witchcraft eradicators: They use it to spot or sniff out witches, hence leading to the eradication of the witch powers.
- ❖ Shrine Keepers: The shrines are found at special places e.g. burial sites, caves of famous people or former medicine men or women. They dispense herbal products.
- ❖ Street Sellers: These sell herbs and herbal medicines in markets and on streets.
- ❖ Traditional Circumcisers: They confine themselves to treating those they circumcise.

Midwives: They are also called Traditional Birth Attendants (TBAs). They know what is needed in relation to delivering healthy babies.

Gichinga believes that medicine men and women treat all diseases and afflictions ranging from social, psychological to mental, spiritual and physical⁷³. In her presentation, Gichinga explains three categories of medicines dispensed by medicine men and women, namely, preventive medicine, curative medicine and medicine to procure success and good fortune⁷⁴.

⁷³ M. G. ENJMY, Ph.D. *Counseling in the African Context*, 138

⁷⁴ M. G. ENJMY, Ph.D. *Counseling in the African Context*, 139

2.2.3 The Preventive /Protective Medicine

The protective medicine is used to treat several problems including:

- a) To protect house from thieves or robbers and from those who would harm those inside.
- b) To protect the body from neighbours or any others who may be harbouring evil.
- c) To protect a wife from committing adultery. The wife is made to drink some medicine so that anybody committing adultery with her contracts a disease or is caught.

2.2.4 Curative Medicine

These medicine men specialize in certain areas which include:

- a) Medicine for healing broken bones i.e. they are bone specialists.
- b) Pediatrics have specialization in children's medicines
- c) Medicine for pains

2.2.5 Medicine for Success

This type of medicine is used in many ways:

- a) Inducing sicknesses on enemies
- b) For fertility, conception and delivery of a healthy baby
- c) Arousing love so that one is loved
- d) For procuring success, security in a job or journey
- e) Medicine to gain favour with employer so that one is promoted or not sacked
- f) To be successful in business. to get customers and to win contracts
- g) To have success in one's mission

The practice of medicine in Africa has stood a test of time and history. The mysterious nature has earned these practitioners the term “witch doctors”. However, not all of them harm people. The practice of medicine men and women demonstrates the interconnectedness and dependence between humanity, beliefs and creation⁷⁵.

2.3 Traditional Medicine and their weakness

Although medicine men and women help the society, there are several things that should be looked into in order to improve the practice.

To begin with, there is the lack of documentation. There is no written documentation about the compounds in their prescriptions, how, when and where they are applied. The way medicines are prepared, the chemistry and their potency remains a secret of the medicine men. Because of this, it is impossible to subject their practice to any scientific scrutiny. People have to rely on oral transmission (word of mouth) regarding what the herbalist does or reveals⁷⁶.

Another weakness is that names of medicines differ from place to place because they are in local dialects and lack a generic name⁷⁷. The medicines therefore remain confined to particular communities and families.

The illiteracy of many medicine men and women is another chief concern. Many medicine men and women do not have much education in biology and so their knowledge of many physical diseases is limited.

In many instances, the preparations are accompanied by rituals and magic that seem very mysterious and suspicious to many people.

⁷⁵ M. G. EMMY. Ph D. *Counseling in the African Context*, 141

⁷⁶ Cf. M. G. EMMY. Ph D. *Counseling in the African Context*, 149

⁷⁷ Cf. M. G. EMMY. Ph D. *Counseling in the African Context*, 149

2.3.1 Traditional Medicine Men and Women and their Values

Many people irrespective of background, religious affiliations use herbal medicine to solve different problems. One important value of medicine men is that they preserve traditional, social and religious patterns for example offering sacrifices to ancestral spirits and are mediums between people and their spirits and ancestors⁷⁸.

Another important value is that medicine men and women are able to tell people what their problems are, who/what caused it, how to heal and prevent it in the future. He or she is able to “protect people against both natural and supernatural evil forces”⁷⁹.

2.4 The Medium

In most cases mediums are trained to perform special duties for the community. Their main duty is to serve as a linkage between the living, their living-dead and other spirits⁸⁰. The spirits communicate through the mediums. Mediums perform their duties under trance, dancing or singing. According to Mbiti, after out of the trance, the medium does not usually remember anything he had said under the trance⁸¹.

The practice of medium includes the following:

- Disclosing where to find lost property
- Telling who may be bringing misfortune to a particular sick person
- Communicating what type of ritual and medicine is required to appease the offended spirits and cure the sick person
- They predict whether a particular mission will be successful or not

⁷⁸Cf. M. G. EMMY, Ph D. *Counseling in the African Context*. 150

⁷⁹M. G. EMMY, Ph D. *Counseling in the African Context*. 150

⁸⁰Cf. M. K. DANIEL. *Spirituality: Personhood Development and Psychotherapy in African Society*. 37

⁸¹M. K. DANIEL. *Spirituality: Personhood Development and Psychotherapy in African Society*. 37

Medium can be possessed by either one or several spirits.

As such times the medium behaves like the spirit that has taken possession for example she /he can behave like a warrior, a pregnant woman or if it is an animal spirit possessing her/him, she or he may bark, snarl, jump like a frog on all fours, and talk in a voice very much like the dead person or animal they are representing in the trance⁸².

Comparatively, mediums are the prophets in African Religion like the prophets in Christianity. According to Gichinga, mediums are “the people who are in touch with the spirit world”⁸³. If a client is experiencing an affliction he/she does not understand, a medium has that access to the spiritual realm and can tell the person what could be the problem. He is also able to discern what should be done to deal with the situation and to prevent future occurrences.

The above discussion explicates that mediums serve as link. They are the link between the spirit world and the physical world. On this ground, it is evident that the African understanding of medium is founded on the worldview that there is spirit world where all the dead relatives live and that they intervene in the day-to-day activities of the living.

2.5 The Diviner

Making reference to Mbiti, Gichinga explains that diviners play the roles of counselors, psychologists, judges, comforters, suppliers of confidence and assurance during people’s crisis, advisers, pastors, priests, seers, fortune tellers, and solvers of problems, revealers of secrets like thefts, success or imminent danger⁸⁴. Diviners have the ability to determine the cause and nature of people’s problems.

Diviners fall into different categories, namely, spiritual, religious and charismatic leaders in Africa.⁸⁵ They are the authoritative figures in matters of spirit

⁸² M. G. EMMY, Ph D, *Counseling in the African Context*, 117

⁸³ M. G. EMMY, Ph D, *Counseling in the African Context*, 118

⁸⁴ Cf. M. G. EMMY, Ph D, *Counseling in the African Context*, 89

⁸⁵ Cf. M. G. EMMY, Ph D, *Counseling in the African Context*, 89

and health. They may either get in touch with the spirit world directly or through the help of mediums whom they work with.

Gichinga lists three different categories of diviners as follows⁸⁶:

- a) Mediums who divine through contact with and possession by spirits
- b) Medicine men or women who prescribe and dispense herbal medicines
- c) Diviners who have the dual role of divining and dispensing herbal medicines and other therapeutic interventions.

Academically it is easy to distinguish between medicine men or women, mediums and diviners. However, the African languages do not give such categories. Often times the names for them are the same as testified by Mbiti⁸⁷

2.6 The Priests

A priest is a ritual agent who offers service on behalf of the community. The priest sustains and renews the life of the individuals and community he serves. "Often the priest contains a spiritual force that enables him or her to diagnose the causes of people's misfortunes and to cure their afflictions"⁸⁸. The priests unlike the others are associated with temples or shrines, sacred groves and perform religious duties. Various African communities have priests. For example among the Ankore, Yoruba, Igbo, Akan, Shona, Baganda, Basoga, Ewe, Sonjo, etc.⁸⁹

Priests are very important. Their role in the life of the community is inevitable. According to Mbiti, the "priest is the chief intermediary: he stands between God, or divinity, and men. Just as the King is the political symbol of God's

⁸⁶ Cf. M. G. EMMY, Ph D, *Counseling in the African Context*, 89

⁸⁷ Cf. S. M. JOHN, *African Religions and Philosophy*, 2nd ed., 167

⁸⁸ C. R. BENJAMIN, *African Religions*, 2nd ed., 88

⁸⁹ Cf. S. M. JOHN, *African Religions and Philosophy*, 2nd ed., 182

presence, so the priest is the religious symbol of God among his people⁹⁰. As a religious figure, the priest is the spiritual and ritual pastor of his community. He offers sacrifices to the gods, to ancestors and to the spirit world.

2.7 Conclusion

In a concrete and various ways, the people of the continent have proved their capability to handle and deal with different circumstances. As the chapter has expressed, in different capacities there are diverse and numerous health professionals. Many psychological and emotional issues can easily be handled by the traditional healer at an affordable cost. The continent is rich with herb, the knowledge and the desire of many people to pursue the discipline.

The holistic approach to sickness, the cultural aspect of the people, and the religious dimension of sickness leaves the African Christian in a dilemma. On the one hand he /she feel good and relieved visiting the traditional healer. On the other hand, the church's teaching forbids certain rituals that might be required. This challenge is what the final chapter intends to evaluate.

⁹⁰ Cf. S. M. JOON, *African Religions and Philosophy*, 2nd ed., 183

CHAPTER III

CHALLENGES OF AFRICAN TRADITIONAL HEALING TO PASTORAL CARE OF THE SICK

3.0 Introduction

The tenet of Traditional healing in Ghana is alive. “The World Health Organization estimates that 80% of Africans use traditional medicines. In Ghana, over half of the children with malaria are first treated with herbs”⁹¹.

It is better to give a distinction between the traditional healers as found in Ghana in recent times and spiritualists. There are those who operate solely on herbal bases. They use herbs and parts of animals and animal products. These do not have any spiritual activity attached to their work. However, there are others who combine spiritual activities with their herbs. These are seen as spiritualists.

Traditional healers perform their activities openly with pride. While some operate illegally, others have acquired license from the government to operate and are recognized as traditional healers. Some have even teamed up as a corporate body. There is a regulation body under the ministry of health known as Traditional and Alternative Medical Practice Directorate (TAMPD) that deal with traditional healers. Some examples of the association include: Ghana Herbalist Association, Ghana Psychic and Traditional Healers Association, Ghana Traditional and Spiritual

⁹¹ <http://www.africanew.com/english/news/africanmedicine.com>

Healers Association among others. Under this body, the association is regulated. Some prefer the name alternative health care rather than traditional healers.

In recent times, many Traditional healers display their products in the open market places, a practice which was not present in the olden days. Others advertise themselves on billboards along highways. Some again air their activities on local radio stations. With this massive advertisement, they are able to capture the attention of many people. At the end, it becomes a competition among the healers. A competition, not because of the money that is involved but the fame and prestige attached to the work as well as the pride and joy of providing healing to people.

In some cases it is those who patronize their healing activities who advertise them. They share their experience with others and by so doing lead numerous people from all walks of life to such places.

The testimonies of many people prove to the masses that traditional healers perform better services in some diseases and is even affordable than the hospitals. Thus, many people including Catholic Christians make use of their services. This has brought pastoral concern in the country.

Chapter three of this essay therefore brings out the challenges that Traditional healing presents to the pastoral care of the sick. The chapter opens with the church's approach of caring for the sick and then unravels the challenges that the church in Ghana faces regarding the topic under consideration.

3.1 The Liturgy and Healing

Avery Brooke in his work, *Healing in the Landscape of Prayer* indicates that healing was associated with the liturgy in early years of the church. The church recognizes in the Eucharist the healing power of God since Christ is fully present in the Eucharist. According to him, it was not only the Eucharist that brought about

healing but also the baptismal rite⁹². Quoting Cyprian, the bishop of Carthage and a martyr, he writes, ‘baptism itself was sometimes the means by which a serious illness was cured’⁹³. He noted that the Eucharist is a healing and redemptive liturgy in a larger sense. This means that as early as the third century, Christians recognized the effectiveness of the Eucharistic and baptismal healing.

Describing the development of healing in the church over the centuries, Brooke explains that special services of healing developed with the laying on of hands and anointing with oil. He notices the elaborateness of the liturgy regarding healing. In it, several priests and lay people would visit the sick person at home. “They began by exorcising and blessing the house. Then the sick person knelt for the laying on of hands and was anointed on the throat, breast, and back and more liberally anointed where the pain was greatest”⁹⁴. The imposition of hands was an act of asking for the outpouring of the Holy Spirit.

In the liturgy, and particularly in the celebration of the Holy Eucharist, there is the experience of the healing power of God. “As we celebrate the Mass we enter into God’s holy presence, we acknowledge our sinfulness and we pray not just for pardon but also for healing”⁹⁵. The church makes her members aware of their sinfulness and also the healing love of God at whose presence they are in the celebration of the Holy Mass.

⁹² Cf. B. AVERY, *Healing in the Landscape of Prayer*, 21.

⁹³ B. AVERY, *Healing in the Landscape of Prayer*, 21.

⁹⁴ B. AVERY, *Healing in the Landscape of Prayer*, 21.

⁹⁵ J. MCMANUS CSS.R., *The Healing Power of the Sacraments*, 74.

3.2 The Church's Care of the Sick

In a more specific and direct way, there are several approaches the church over the years has used to attend to her sick members. Apart from the numerous prayers in the Holy Mass for healing, the church has special ways of caring for her sick members. In many places, a paraliturgical service of prayer for healing is celebrated from time to time. Another focal point is the pastoral care of the sick.

3.2.1 A Service of Prayer for Healing

Father Jim McManus, a Redemptorist Priest, in his book, *The Healing Power of the Sacraments*, says that this service consists of two parts. In this prayer service for healing, part I consists of scripture readings, prayers and hymns whilst the second part is made up of prayers for healing and anointing with blessed oil⁹⁶. The first part gives an opportunity for the participants to deeply listen to the word of God. The word of God is central in those services because it is God whose word heals and renews the body.

In the second part, depending on the celebrant, prayers for various areas of life are offered. This may include for example, prayer for healing of memories, healing of relationships, spiritual healing and physical healing⁹⁷. Often people who attend this service have different ailments and it is God alone who can give them the cure and restore them to wholeness. The faith of the patient in this case cannot be overemphasized.

This type of service is the charismatic type. In most cases it is the charismatic renewal group who lead the service. There is no Eucharistic celebration.

⁹⁶ J. MCMANUS CSS.R *The Healing Power of the Sacraments*, 85.

⁹⁷ J. MCMANUS CSS.R *The Healing Power of the Sacraments*, 87.

The oil that is used for the anointing is not a sacrament, but sacramental. The distinction of the oil used for the sacrament of the sick has to be differentiated and explained to those present.

3.2.2 Pastoral Care of the Sick⁹⁸

Caring for the sick is a pastoral concern today as it has always been in the church. The sacraments of the sick should be administered to the patient who is in the state of grace. By sacraments of the sick, the reference is to the Eucharist, Holy Communion and the Anointing of the Sick⁹⁹. These sacraments are associated with pastoral care of the sick as noted above.

Theologically, what the church has in mind when administering these sacraments is that there is a special relationship between the Lord and the patient¹⁰⁰. In this connection, it should be clear that in the celebration that the entire church is in communion with the sick person. Mother church therefore thinks about the spiritual lives of the patient through the sacraments.

However, there are also patients who for some reasons are not in the proper disposition to receive the sacraments. These people are not left without care and concern. The pastor of souls has the same duty to visit them with the word of God and sharing God's love with them. Traditionally, the essential approach to the care for the sick people in the church are as explained below:

- Visits to the sick
- Communion to the sick
- The sacrament of the Anointing of the Sick

⁹⁸ POCKET RITUAL (Rituale Parvum).

⁹⁹ Cf. D. SSENGOOBA. *The Unity and the Pastoral Care of the Sick*, 29.

¹⁰⁰ Cf. D. SSENGOOBA. *The Unity and the Pastoral Care of the Sick*, 33.

3.2.2.1 Visits to the sick

Following the words of Jesus, “I was sick and you visited me...” (Mt. 25:36), the church does not ignore her sick and feeble members who are not able to join in the communal celebration of the Eucharist. Naturally, visit to the sick is good. Even when people are healthy, it is important to visit them to strengthen the good relationship that exists between the two parties. Using the words of Vatican II, Ssenooba says, “the visitation of the sick is the duty of all Christians who share in the concern and love of Christ, and it enables them to strengthen the sick in the Lord by offering them help as brothers and sisters”¹⁰¹. The presence of the community makes the patient feel part of the mystical body of Christ and ease the loneliness they experience.

This visit is done in order to share the word of God with the sick person and those taking care of him or her. The approach involves prayers, the word of God and blessing. This is a very important moment because a sick person needs the Christian community to be around. In this case the sacrament is not administered and so it could be a non-communicant Christian, a child or even non-Christian or non-Catholic Christian.

3.2.2.2 Communion to the Sick

The introductory rubric of the Pocket Ritual concerning Communion to the sick instructs that:

Priests with pastoral responsibilities should see to it that the sick or aged, even though not seriously ill or in danger of death, are given every opportunity to receive the Eucharist frequently, even daily, especially during Easter season. They may

¹⁰¹ D. SSENGOOBA, *The Laity and the Pastoral Care of the Sick* 21.

receive communion at any hour. Those who care for the sick may receive communion with them¹⁰².

This is the sacrament taken to the sick and so adequate preparation is required. However, this is not a Viaticum, sacrament of the dying as some patients may perceive. In order to receive the sacrament, the patient has to be in the state of grace. Hence, the priest must visit the sick regularly to enable him or her to receive the Sacrament of Reconciliation so that they are well disposed to receive the communion¹⁰³. The Sacrament of the Holy Communion brings a sacramental union. As Ssenooba explains, “The sick are united sacramentally to the Lord and are with the Eucharistic Community from which illness has separated them”¹⁰⁴. The patient comes into contact with Christ in the sacrament.

3.2.2.3 The Sacrament of the Anointing of the Sick

This sacrament is not sacrament of the dying as it used to be called. It is not the last rite. “Anointing of the Sick is a much happier term than ‘Extreme Unction’, since it does not suggest imminent death”¹⁰⁵. The sacrament should be given anytime the sickness becomes serious and not at the moment of death.

Anointing of the Sick is administered according to the command of the apostle James:

Are there any who are sick among you? Let them send for the priests of the church, and let the priests pray over them, anointing them with oil in the name of the Lord; and the prayers of faith will save the sick persons, and the Lord will raise them up; and if they have committed any sins, their sins will be forgiven them (James 5: 14-16 RSV).

Ssenooba enumerates three important elements in the celebration of the sacrament of Anointing¹⁰⁶:

¹⁰² Pocket Ritual (Rituale Parvum), 67-68.

¹⁰³ C. S. DOMINIC *The Laity and the Pastoral Care of the Sick* 35.

¹⁰⁴ S DOMINIC .. *The Laity and the Pastoral Care of the Sick* 34.

¹⁰⁵ D. SSENGOOBA. *The Laity and the Pastoral Care of the Sick* 36.

¹⁰⁶ D. SSENGOOBA. *The Laity and the Pastoral Care of the Sick* 37.

- The prayer of the community for the sick person
- A rite which is carried out only by the leader of the local Christian community, the priest himself
- The patient who will in turn receive the grace of the Holy Spirit.

The liturgy consists of penitential rite, liturgy of the word, liturgy of anointing, liturgy of Holy Communion and concluding rite. This is done based on the faith of the community that; the Lord himself will bring healing and cure to the sick.

In various ways, the church has made attempts to respond to sicknesses and illnesses of diverse kinds. Nevertheless, these approaches are not enough and so many patients leave the rich heritage of the church in search of healing elsewhere. While some come back to the church after gaining good health, others go and do not return to the Catholic Church any longer. In all these, what is alarming is the operation of traditional healers. Their activity poses a threat to the faith of the Christians and this is a pastoral concern in Ghana. The following are some of the major challenges that African Traditional Healing presents to the Pastoral Care of the Sick in Ghana and perhaps throughout the African continent.

3.3 Traditional Healers in Disguise

One challenge is that some traditional healers operate under the guise of healing and wonder working churches. Professor Samuel Danquah is a clinical psychologist at the University of Ghana who has done research into traditional medical practices. He says “most Ghanaians believe illness is linked to supernatural powers, including witches, deities and ancestral spirits”¹⁷. Thus, supernatural powers are sought to deal with such sicknesses.

¹⁷ <http://www.ourw.com/english/news/africanmedicine.com>

Most of these churches are identified with African Initiated Churches (AICs). These churches offer their members ‘religious’ healing that addresses all the relevant dimensions of life¹⁰⁸. In their approach, there is nothing so different from the traditional healers in the villages. “Their methods of diagnosis and cure often follow the traditional ways of spirit-possession or ‘vision’, mental dissociation and glossolalia”¹⁰⁹.

Some traditional healers in their attempt to blend Christian values utilise the scriptures. One traditional healer, Modesai Osei-Tutu, does not invoke the spirits of deities or dead relatives, but he has found a way of incorporating the spiritual into his work. Displayed prominently on one side of his herbal shop are pictures of Biblical figures¹¹⁰. According to this healer, he does this in order to let his clients know that it is God alone who is the healer and he is in control. He says, “I introduced these pictures for [clients] to know that the Lord God Almighty knows everything. He knows our sicknesses, he knows our problems. So when you come and I introduce these pictures, you know that God heals”¹¹¹.

In African traditional healing, there is a holistic approach to sickness. It is this holistic method that these churches use to draw many people from the main-line churches that would offer prayers, and perhaps, encourage the sick person to see a doctor, rendering them ineffective and powerless.

As a pastoral concern, this is a challenge in Ghana and it is not surprising to identify the same trend throughout the continent. Most sick people, Catholics in particular, would wait for the visit of the priest with Holy Communion and go to these healing churches afterwards. This creates religious ‘schizophrenic faith’

¹⁰⁸ D. FERNANDO, MCCJ, *Christ Our Healer*, 68.

¹⁰⁹ D. FERNANDO, MCCJ, *Christ Our Healer*, 68.

¹¹⁰ Cf. <http://www.young.com/english/news/africanmedicine.com>
¹¹¹ <http://www.young.com/english/news/africanmedicine.com>

attitude among the catholic faithful. Some people come to church on Sunday for Holy Mass but in times of sickness, they know where to go as recounted by one priest in Ghana¹¹².

Some of these churches found in Ghana are the Aladura Church, The Mossana Disco Christo Church (MDCC), and The Nankaba Church, to mention a few.

Fernando recounts the finding of Semporé who has made extensive study into the Aladura Church in Benin. According to him, the healing prayer of Aladura Church carries a holistic healing power of God. He says,

in African spiritual traditions, prayer is – not so much an elevation of the soul to God as in the Western Christian churches, missionary preaching; traditional prayer is rather a descending movement of the power of God manifesting itself as renewal, life and strength in the person of the believer, who is always surrounded by the threatening forces of this world as well as by those of the spiritual sphere. In prayer, the Aladura believer searches for protection and belonging¹¹³.

One other attractive element is that the AICs put so much emphasis on prophetic charism which is not present in the main-line churches. The prophecies are used to “diagnose the nature and cause of the sickness that is affecting the patient, but, ‘more than anything else, it is the powerful prayer of the community which brings about healing, which will manifest itself at the physiological level, but also as community reconciliation with those living, with the ancestors,....with all the forces of the universe’”¹¹⁴.

One can easily see the blend of Christianity and traditional religion in this AIC approach to healing. By so doing, many Christians think that it is not a traditional healing but Christian. In the mind of many catholic lay faithful, there is

¹¹² Fr. John Straathof, SVD, SS Peter and Paul Catholic Church – New Aplaka, Accra.

¹¹³ D. FERNANDEZ, MCCJ, *Christ Our Healer*, 70-71.

¹¹⁴ D. FERNANDEZ, MCCJ, *Christ Our Healer*, 71.

nothing wrong with going to other churches for healing or for prayers. After all, it is the same one God present in all the churches.

3.3.1 Lack of Confidence in Christianity

The second challenge that African traditional healing poses is linked to the nominal Christian life. There is relatively lack of confidence in the Christian attitude towards ailment. A sick person is desperate and anxious, needs to be freed from his or her suffering. A parent whose child is sick does not see anything wrong with seeking for treatment at the traditional healer's house. After all, is it not herbs and herbal plants or natural elements?

Professor Ewurama Addy of the University of Ghana writes about Traditional medicine in Ghana. She declares that, "in Ghana, traditional health care is a holistic one that integrates the people's ethics, religious, morals and cultural values"¹⁵.

In his outstanding book, *Jesus and the Witchdoctor*, Aylward Shorter states, for "many centuries the Church has tended to departmentalize its healing ministry and to place the emphasis on moral and spiritual healing"¹⁶. While this emphasis on moral and spiritual healing is effective, it on the other hand excludes many elements that to the sick person are very pertinent.

Throughout the continent, the presence of the church is evident. In her missionary activities she tries to pay particular attention to the medical, social and educational needs of the people. By so doing the gospel of Christ is translated into the life of the people. Other programs that include counseling, healing masses and services, charismatic renewal, hospital visitation, the giving and reception of the sacraments are also life-giving and renewing.

¹⁵ <http://www.mech.mghana.com>

¹⁶ S. AYIWARUG, *Jesus and the Witchdoctor*, 216.

Nonetheless, as discussed in the previous chapters, the holistic healing is not felt. After counseling and prayers the sick person is often referred to the hospital which in effect is equivalent to scientific medicine.

Hence, many do not exhibit that trust in the church's approach to healing. Majority prefer going to their village; their traditional homes to be treated.

The mere fact that one goes to see a traditional healer does not make him or her idol worshipper. In most cases, the "practitioners of African traditional medicine base their treatment of diseases on remedies that are extracted from medicinal plants in the continent"¹¹⁷. If the plants and herbs of the land are curative without any other ritualistic activity and it's very affordable, then why won't traditional healing thrive?

3.3.2 The Fear of Healing (Attitude of Ministers)

Another challenge comes from the ministers of the catholic faith. Their attitude towards the healing ministry is a great factor which pushes many people to go out of the church in search of healing.

Many Catholics especially priest and religious fear the healing ministry. They have neglected this ministry in their churches for a long time. For such people and ministers, "healing is for Pentecostalists and megastar American evangelists who claim all sorts of miraculous happenings"¹¹⁸. The lack of understanding of healing contributes to the attitude of fear, prejudice and the lack of interest. To some, healing is a form of a white or black magic which is best left alone¹¹⁹.

Avery Brooke notes the negative attitude of John Cassian towards healing. Cassian believes that "miraculous healings occurred, but claimed that miracles were performed to demonstrate the power of the Lord to heretics or scoffers, or else

¹¹⁷ C. FRANCISCO, "Healing of Body and Spirit" *New People* (2009), 24.

¹¹⁸ B. MICHAEL, *Do Not Be Afraid*, 2.

¹¹⁹ Cf. B. MICHAEL, *Do Not Be Afraid* !

because a monk was pestered for healing”¹²⁰. Again Cassian saw healing as a way for monks to lose their humility rather than as a way of the sick to get well, and “wamed that it was spiritually dangerous to involve oneself in the ministry of healing”¹²¹. To him, it was not a ministry that is helpful for the monk since it displays a kind of pomposity. He saw healing as powers coming from God and should be exercised by Christ alone. The monk should rather concentrate on preaching the gospel and leading people to Christ. He was the man of his time. Nevertheless, the story is not different from many Catholic priests today. This ministry is welcomed with contempt by the majority.

3.3.3 Fear of Defection

Healing does not come from the minister. As Barkley succinctly puts it, as “Christians our quality of life, our healing, comes from God our loving Father”¹²². Since it is God alone who heals, ministers of the gospel must help others to find him. However, in most cases, they ignore people’s sicknesses, hurt, and pain and spiritualize everything. It is better to handle sick person with compassion, empathy and feeling of understanding.

It is also clear that for many traditional churches, as Barkley observes, the only form of ‘healing’ which they will accept is spiritual ‘healing’ such as is received in the sacraments. Physical ‘healing’ or curing, when it happens, is regarded by them as exceptional and is to be fostered only in special places of pilgrimage, or as evidence of unique holiness in extraordinary people¹²³.

In these traditional churches, those who perform healing are looked at with suspicion. “It is the cautious approach which discourages physical and emotional

¹²⁰ B. AVERY, *Healing in the Landscape of Prayer*, 23-24.

¹²¹ B. AVERY, *Healing in the Landscape of Prayer*, 24.

¹²² B. MICHAEL, *Do Not Be Afraid* 4.

¹²³ B. MICHAEL, *Do Not Be Afraid* 8.

‘healing’¹²⁴. That freedom to express oneself in this healing ministry is often scrutinized for fear of defection from the main-line stream. Hence, even if a priest discovers his gift of healing, he may not exercise it.

3.3.4 *Doubt*

Uncontrolled fear kills. Fear can be a major hindrance to progress. One often recalls the many times he or she has been let down by others, by those one trusted in a relationship. This surface anytime the person is in crisis. In times of predicament, the desire to rely on other persons becomes vague. In such cases, the dependence on personal ability and strength becomes necessary.

By projecting this attitude towards God, the trust and confidence in God vanishes and God becomes another relatively vague and doubtful figure, existing only in the consciousness. If this is true of our human relationships, and God does not seem real then why trust Him any longer? In any case, people have been overburdened by something which so overpowers and preoccupies them that the very idea of asking God to help never enters their psyche¹²⁵. Fear tells them that God too has let countless and faithful people down in the past, “even when we have stormed heaven with prayers which he never seems to answer”¹²⁶. In such moment, it is fear, not faith which is in control of the life of the person in question. Thus, many turn in their desperation and anxiety, to places where they think they will get a ‘fast track solution’ and so African traditional healers become the immediate ‘saviours’.

What is puzzling is that when these patients visit the traditional healers, true to their faith, they receive their healing. As many people testify to such priceless

¹²⁴ B. MICHAEL, *Do Not Be Afraid*, 8.

¹²⁵ Cf. B. MICHAEL, *Do Not Be Afraid* 172

B. MICHAEL, *Do Not Be Afraid* 172.

holistic healing, more and more people flock to such places. However, in the eyes of the church, this may be syncretism. This is the basic challenge the Catholic faces in Ghana regarding pastoral care of the sick.

3.3.5 The Word of God

Many Catholics have neglected the word of God for so long. It is high time people take the Bible, read it and reflect on it. By prayerfully and reflectively reading the scriptures, it will instill hope and confidence in God. The very fact that Catholics seek healing from other places other than in the church shows that the church in Ghana has much work to do. There is the challenge breaking the word of God to the people in a way that will motivate them to read the scriptures themselves.

Moreover, there is the lack of adequate catechetical instruction regarding pain, suffering and sickness. The challenge to minister is to give proper catechesis to form Christians to handle pain and suffering.

3.3.6 Church vs. Culture

Another great challenge is the traditional cultural elements that are present in the Ghanaian society. Many Christians seem to blend traditional religious activities with Christianity. However, this is not a healthy practice. There is therefore the challenge for priests and pastors of souls as well as the lay faithful to place the distinction between the two.

In Christianity, there is the personal relationship with God. A person is made to understand this relationship so that it will guard against any doubt in God. The challenge now is that many Christians have not built this encounter with Christ and so they are easily carried away. In the traditional religion on the other hand, personal relationship is not important as the loyalty given to the deity.

Priests and those in charge of pastoral activities have the challenge to help Christians to build this intimate relationship with God. Once this is done, a healthy Christian lifestyle can be built on the word of God. People will develop deeper faith in God.

One thing is sure. The African culture is unique. There are good cultural elements that could be incorporated into the church. The cultural elements have to be recognized and accepted by the church. Where there is the need for purification the church should do it. The positive cultural elements can be incorporated in the church. Relegating the cultural elements make the people feel alien to the Christian religion. Humans are cultural beings but since the Word of God transcends culture and the same time was incarnated into culture, culture remains part and parcel of the life of the Christians.

3.3.7 Nominal Christianity

The result of all this experience is nominal Christianity. Nominal Christianity is an attitude. This is a thinking pattern that is not configured around one's faith. Regarding Christianity, this refers to the people whom can be called, 'Christians by name'. They profess a particular creed; they outwardly show that they are Christians. Thus, they go to church on Sundays, perhaps they are baptized, receive Holy Communion, they have either blessed or not blessed their marriage; they are faithful in all respect (outwardly).

Nevertheless, they view the Church from a different perception. To them, the Church is a:

- ❖ A place of meeting
- ❖ A group to belong
- ❖ To obtain baptismal certificate

- ❖ Obtain Christian burial
- ❖ Receive the sacraments
- ❖ Marry in the Church
- ❖ To be supported when in trouble
- ❖ A prestige to be called a Christian

In a way, such people belong to the church not necessarily for their faith or conviction but of a nominal nature. In the gospel of Matthew 6: 21, Jesus says, “for where your treasure is, there will your heart be also”. Spurred on by sickness or calamity of any kind, they are swept away and quickly go to the traditional places where they feel comfortable.

One may not see this as an issue. But the challenge of African traditional religion is much alive in Africa. In his book, *Christ Our Healer*, Fernando, MCCJ, reports his encounter with one of his catechists.

“It was so hard for us to renounce the practice of our old religion. Why do we have to reflect on them again? Can’t we just go on preaching the Gospel; prepare our Catechumens for the sacraments of the Church and Christian morality?”¹²⁷ As the writer narrates, this was a catechists’ meeting and they were to reflect on the Challenges of African Traditional Religion to Christianity. The catechist did not see the importance of reflecting on the topic.

However, on a different occasion the catechist shared what had been disturbing him, causing him anxiety:

For several weeks in a row; first he, then his wife and finally every one of their five children had fallen seriously sick for no apparent reason. Deeply worried about the situation of his family, he was asking himself if it could be the case that ‘something’ was ‘at work’ in his house and wondered if ‘something else’ shouldn’t be done besides the Christian prayers, so as to protect his family effectively¹²⁸.

¹²⁷ D. FERNANDEZ, MCCJ, *Christ Our Healer*, 11.

¹²⁸ D. FERNANDEZ, MCCJ, *Christ Our Healer*, 12.

This anxiety causes many psychological, emotional and spiritual problems to many African Christians. This is the basic concern of this study. Why does going to see the traditional healer be the ultimate solution when things are not going well the family?

This attitude shows that there is lack of confidence in the Christian God as explained earlier. Partly also one can postulate that it is due to the Catholic Church's lack of interest in exercising her healing power that has been entrusted to her.

3.4 Recommendations

Based on the findings of this research work, the following recommendations have been given in an attempt to curb the problems that exist between Traditional healing and Christianity:

1. The healing ministry could be embraced by many priests and religious as well as the lay faithful to help sick people.
2. Secondly, the church could consider the suspicious approach to Catholics who have the gift of healing as this will allow them to exercise this precious gift of healing.
3. Another element is that Traditional healers could be considered as mere African individuals who have been endowed with the gift of healing. By so doing, they will not be seen as practicing 'black magic' of a sort and many people can see them without the guilt of divided attention.
4. It also possible that Christians learn the practice of Traditional healing methods since it could be learnt. In this way, those who learn and practice it will give it a Christian flavor.
5. Moreover, scientific medicine and Traditional medicine can co-exist and work together.

6. Traditional healers should improve themselves by going to school so that they can acquire adequate knowledge of medicinal plants and diseases.
7. In the parishes, healing masses and healing services should be frequent.
8. The charismatic renewal group in the church should be encouraged to exercise the gift of prayer for healing. However, this exercise has to be guided in order to follow ecclesiastical norms.
9. Traditional healers should be seen as alternatives to scientific medicine.
10. The priests and those who have the responsibility to teach should give confidence to the faithful to read the word of God, and build personal relationship with God.
11. The faithful also should be encouraged to pray and trust in God in times of sickness and calamities.
12. Pastoral formation in the seminaries should pay attention to the care of the sick in an African way.
13. The word of God is universal. African cultures were taken for granted in the evangelization of Africa. The repercussion is what we have now. The culture should be considered in evangelization. This calls for re-evangelization.
14. The church should look at its healing ministry and attitude towards the sick.
15. The church is too westernized. Apart from some few African songs, all the other things in the church are western. This makes the African Christian feel too alien. Inculturation of healing by the church is urgently needed.
16. The good elements of the traditional healers could be borrowed into the church's healing ministry and clinics. The two systems can be united for the good of all.

3.5 Conclusion

As the afore-going analysis has established, there are several challenges of Traditional healing activities to pastoral care of the sick. The chapter has endeavored to bring out the various means by which the church approaches her sick people. Since Christ is the centre of our faith, the patient is given Holy Communion, Christ himself who is the ultimate healer. Again, the sick person is anointed with oil of the sick to strengthen him or her.

But with all these, many families take their sick people to Traditional healers. One challenge is that some healers disguise themselves as Christians, making it appealing to the Christians. Again some people do not have confidence in Christianity when it comes to sickness. There is also the challenge of the ministers who have negative attitude towards the healing ministry. Some priests have fear of defection.

In the final analysis, what surfaces clearly is nominal Christianity. This is an attitude in which people go to church but still go to Traditional healers. They have divided attention. They go to church but still practice traditional religion.

GENERAL CONCLUSION

Christianity in Africa has a blend of traditional values. Africans probably have not been fully emancipated from their traditional and cultural beliefs even in the 21st century. In Ghana the traditional elements are much alive in the church especially among the Akan community. Many people are trying to have a healthy blend between the two faiths. However, this creates problems than helping.

The first chapter of this essay situated the Akan community, gave their beliefs, their worldview and the Akan understanding of a person. The chapter revealed that the human person is a complex reality; not a single entity of some sort. It again explained the Akan understanding of sickness. I saw that when a person is sick, it is not only the part which pains but sickness goes beyond. It encompasses the entire family, the living and ancestors. Hence, holistic healing is required.

In the second chapter, the emphasis was on African traditional healing. Here, the chapter treated the Akan concept of health and healing. The chapter also endeavored to explain the various specialists in African traditional healing. Various types of traditional medicines as practiced by the healers were also explained.

Chapter two left off with a burning challenge. It exposed the dilemma in which the African Christian finds himself or herself. On the one hand the teachings of the church forbid certain traditional rituals. But on the other hand, he or she is

forced by circumstances to see a traditional healer. This produces a kind of nominal Christianity.

In the last chapter, the challenges of the traditional healing to pastoral care of the sick were the focus. This section of the essay tried to explain in the first place the practice of the Church over the years regarding her sick members.

There are so many ways the church takes care of her sick persons. However, as most Africans are not satisfied with the church's approach, they go to find consolation from different places. The challenges of this practice have been the backbone of this third chapter.

As an attempt to curb the problem, various ways have been suggested. In the final analysis, the word of God stands out clear. It is the word who is Christ himself who saves. If people develop the habit of reading and reflecting on the word of God, they will build a deeper faith in God. In addition to this, personal relationship with Christ is very important. Where this is done, the Christians pray and their life is guided by prayer and the word of God.

Finally, it should be understood that sicknesses and calamities will always be with humanity. However, how one accepts those moments determines the strength of the person's faith in God. If one's faith is strong, no matter the storm, he or she will not lose hope in God.

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APPENDIX

List of Akan Twi Words

Akan Clans

Oyoko
Darko
Bretuo
Agona
Asona
Aduana
Ekuona
Asakyiri

Twi

Abusua
Tetekwaframo
Nyame
Nyame
Onipa
Soro
Jkra
Onyame bekyere
Owura
Maakye
Yaa
Nua
Adom
Efie
Bokoo
Ahooden
Mpomu
Nipadua
Honam
Mogya
Ntoro
Sunsum
Honhom

English

Family
The God who was from the beginning (title for God)
God
Person (human being)
Top, up (can refer also to heaven)
Soul
God will provide
Mr.
Morning greeting
A response to a greeting
Referring to a relative
Grace
Home
Fine
Strength
Health
Body
Exterior features of the body
Blood
Mail spirit
Personality
Spirit

*Twi**English*

Nkrabea	Destiny
Ɔkrateasefo	The Living being
Obiara	Everybody
Asase	The earth
N'akyi	Behind, Back of something/someone
Abrabu	Life
Bayie	Witchcraft
Sikadwa	Golden stool
Adwane	Run away
Teetee	Sadness, worried
Ɔwo	To possess (depending on the stress, it can also be a snake)
Kyen	Higher (comparative and superlative usage)
Obi	Somebody/someone