The present-day diagnosis and treatment model of the South African traditional healer

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RESEARCH

Please cite this paper as: Louw G, Duvenhage A. The present-day diagnosis and treatment model of the South African traditional healer. AMJ 2016;9(11):457–464. https://doi.org/10.21767/AMJ.2016.2721

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ABSTRACT

Background
At present, no formal guides or curricula exist to direct and instruct diagnosis and treatment in the practice of the traditional healer. To gain knowledge of how the traditional healer makes diagnoses and offers treatment, the researcher has to rely on the reflections in the literature as well as writings and communications offered by a few authors and the traditional healer organizations. These materials are sometimes insufficient and even misleading and cannot serve as trustworthy information in isolation.

Aims
The present study is aimed at determining and describing the present diagnosis and treatment model of the traditional healer.

Methods
This is an exploratory and descriptive study in line with the modern-day historical approach of investigating and reviewing research. The emphasis is on the study of present-day documentation, like articles, books and newspapers as primary resources to reflect on the development and promulgation of the Traditional Health Practitioners Act No 22 (2007). By implementing this approach, new information can be uncovered on the present-day diagnosis and treatment model of the traditional healer. The findings are offered in narrative format.

Results
The regulations and definitions of the Traditional Health Practitioners Act (Act No 22, 2007) is not effective in evaluating the procedure of diagnosis and treatment of the present day traditional healer, as this act, being promulgated in 2007, is applicable to diagnosis practices and training processes still to be developed.

Conclusion
A traditional healthcare model based on scientific research to guide and teach the student of traditional healing and about diagnosis and treatment is non-existent in South Africa. Traditional leaders acquire their current knowledge and understanding of the diagnosis and treatment through various doubtful ways of learning, mostly verbally and in practice from unqualified traditional healing masters or tutors. This means that the pre-modern traditional health know-hows, styles and approaches which are being offered, differ immensely in standards from tutor to tutor.

Key Words
Ancestral spirit, religious acts, traditional philosophy, traditional medicine, spiritual, curative medicines, muti
What this study adds:

1. What is known about this subject?
There is a dire need for a formal description of the present-day diagnosis and treatment model of the South African traditional healer as no such documentation could be found.

2. What new information is offered in this study?
This research reflects a new view on the perception of concepts, diagnosis and treatment concerning traditional healing in South Africa. It confirms the absence of a formal academic and professional curricula and training in traditional medical science, pre-requirements necessary to make a scientifically medical diagnosis and to offer a responsible medical treatment.

3. What are the implications for research, policy, or practice?
Act No 22 (2007) is an improper legislation basically promulgated to establish a pre-modern care-giver, without any accepted medical know-how, as a modern-day health practitioner.

Background
At present, there is no formal curriculum on–traditional health training that direct and instruct the traditional healer to make his diagnosis or to perform his treatment. The only official guideline on these matters is linked to the definitions traditional philosophy and traditional medicine of the Traditional Health Practitioners Act No 22 (2007). These directives are aimed at implementation in future as the traditional health practitioner is a figure still to be officially installed and regulated when Act No 22 is fully activated. At present, the only knowledge of the present-day diagnosis and treatment methods and styles of the traditional healer is the definitions, descriptions, declarations, etc., offered by writers, researchers as well as activists and propagandists. This information can be instrumental to reveal the real practice activities of the traditional health practitioner. 1-9

The aim of this study is to determine and describe the model of present-day diagnosis and treatment by the South African traditional healer.

Method
The research was done using the method of literature review. This method aims at reaching conclusions derived from evidence as the research proceeds. This approach is used in modern historical research where there is a lack of an established body of knowledge. The databases used are EBSCOHost, Sabinet online as well as various contemporary sources, like newspapers from 2014, articles from 1979 to 2014, books referring to the period 1958 to 2013 and governmental documents covering the period 2003 to 2007. These documents were informative about the development and the promulgation of the Traditional Health Practitioners Act No 22 (2007) and putting the thoughts and opinions on the present-day diagnosis and treatment model of the South African traditional healer in perspective. 10,11 The findings are offered in narrative format.

Results
Diagnostic approaches and styles
Various diagnostic and treatment approaches and practice styles, unique to the traditional healer, are captured in South African literature. These descriptions, although from secondary resources, offer insight into the diagnosis and treatment used in traditional healing and compensate for the lack of formal, written curricula and primary resources on traditional healing.

The traditional healer as diagnostician
Literature shows that the central role of the traditional healer as diagnostician is to identify through his so-called supernatural powers the reason for unnatural illness and unnatural occurrence to individuals or communities. He must ascertain who (and not what) causes misfortune or illness that can only be brought on by ancestral spirits or witches. This concept of diagnosis is clearly reflected in the meaning and intention of the definition traditional philosophy in the Traditional Health Practitioners Act No 22 on which the South African traditional healing is based. 12-15

To be able to perform a diagnosis and offer treatment in line with this traditional philosophy, it is assumed that the traditional healer receives certain supernatural powers to benefit the community through his so-called “heredity-selection”. Accordingly, it is believed, that the traditional healer is a sacred servant of the community and in terms of the esoteric knowledge he possesses, he alone can communicate with the spirits on the wills and wishes of the living. Making his diagnosis he relies on magical powers that involve rituals and ceremonies that include the use of substances (muti) made from herbs and animals (and sometimes human parts), verbal spells that are believed to invoke divine intervention as well as the use of esoteric methods and interpretations. 12-14

This explanation reveals a misconception among people practising and consulting traditional healing concerning the
meaning of the notions diagnosis and treatment as understood by modern medicine. This misconception is clearly illustrated by the definition of the “African Science of Medicine” which falsely portrays the pre-modern and supernatural training of the traditional healer as to be based on modern medical principles. The same misconception is reflected by their definition and understanding of the concept “protective medicine” in which they exclusively use muti for protection against misfortune and illness, while modern medicine regards “protective medicine” in the sense of inoculation using safe and effectively tested medicine to prevent an illness like poliomyelitis. 14

A further confirmation of this misconception of modern medicine (and thus the medical diagnosis and treatment procedures that go with it), is the remark by Mbiti14 that “medicine in the African society has a wider meaning as in modern society”. It has also been verified that the medical concoctions and muti of the traditional healer do not have the healing qualities of the medicines certified by the Medical Control Council (MCC) medicines. These traditional “medicines” do not intend to heal bio-medically but is only an expansion of the supernatural diagnosis and treatment of the traditional healer. 12–14

From the ranks of the traditional healers also comes the acknowledgement that they do not have any modern medical diagnosis and treatment at their disposal. For example, being consulted about a new illness a healer might react as follows:16 “On occasion a healer will be confronted with a new and strange disease. In these situations the herbalist will seek assistance from the spiritual world” (par. Healers Herbalists).

The present-day traditional healer is evidently a kind of spiritual healer, totally lacking an acceptable medical identity. The nearest association to the traditional healer with the medicine model is the psychologist and psychiatrist, specifically regarding some practice similarities. But, due to inadequate training, the traditional healer is not able to make a medical, psychological or psychiatric-diagnosis in terms of the codes of the International Statistical Classification of Diseases and Related Health Problems (ICD-10 code), for him to be at the same level with the psychologist or psychiatrist. In addition, a similar problem emerges for his medical concoctions to obtain rating from the MCC or the Self-medication Manufacturers of South Africa (SMASA).20–23

The present-day diagnosis profile of the traditional healer

In view of the mentioned findings regarding the traditional healer as a health practitioner without medical certification or licensing and his lack of formal medical or health education, the kind and level of diagnosis and treatment offered by him appear suspicious.

Literature offers a broad overview by researchers and writers on how traditional healers are making their diagnoses and treatments. Some approaches present similarities regarding activities, point of focus, creed, view on present and future life, as well as utilizing certain diagnostic tools and medicinal concoctions. However, certain approaches differ completely and are even in conflict with others.

The approaches towards diagnosis are mainly the following:

- The traditional healer generally obtains guidance from an ancestral spirit. These instructions usually come through dreams or when praying. The healer thus receives direction when, where and with which particular plants to make muti for a specific patient and where these plants are located.9,24

- Some healers employ charms, incantations and casting of spells to make a diagnosis. The dualistic understanding by traditional African medicine of themes such as body, soul, matter and spirit, and their interactions, is perceived as magic (witchcraft). It is also believed that healers are able to implant from a distance a foreign object into a person’s body to inflict sickness. To remove this malignant object, the intervention of a second healer is required. He removes it the object from the affected person by making an incision. Another form of magic (witchcraft) is the so-
called sympathetic magic in which a model is made of the victim. Actions performed on the model are transferred to the victim in a way similar to the familiar actions on a voodoo doll. Where spirits of deceased relatives trouble the living and cause illnesses, the healer applies remedies like propitiatory sacrifice to put the spirits to rest.8

- The act of diagnosis and healing in an African context is considered to be a religious act. The healing process attempts to appeal to God because only God can inflict sickness or provide cures. This intervention is performed through the medium of spirits.5,8

- Health and illness are perceived in the same light. Traditional healers are consulted for a wide range of reasons such as physical, psychological, spiritual, moral and social problems. Healers are also consulted to obtain ministrations to prevent illness and misfortune.25

- While making his diagnosis, the traditional healer always takes into account the connection between the client/patient and his ancestral spirits. The living and the dead have a duty toward each other. Therefore good health or illness is regarded as a net result of a delicate and intricate balance between a man’s family and his relationship with the ancestral spirits. Good health and good fortune are rich rewards for good behaviour and constant sacrifice to the ancestral spirits while illness is a punishment for sins of commission and omission.12

- It is believed that the healer receives instructions and advice from ancestors in the spiritual world to diagnose and heal illnesses, social disharmony and spiritual difficulties. In order to make a diagnosis, healers believe that they are able to access advice and guidance from the ancestors on behalf of their clients (patients). This is achieved through possession by an ancestor, channelling, throwing bones, or by interpreting dreams. It is believed that the spirits have the power to cause affliction they also connect the healer to the acting spirits. Helping as well as harming spirits are believed to use the human body as a battleground for their own conflicts. With his understanding of traditional philosophy on diagnosis, the traditional healer is able to create harmony between the spirits which results in the alleviation of the patient's suffering.9

- Diagnosis is reached through spiritual means, while the resulting treatment consists of herbal remedies which have supposed healing, symbolic and spiritual abilities. In traditional African medicine, the belief is that nobody becomes sick without sufficient reasons and that illness is derived from spiritual or social imbalances within the person. Natural causes (medical or physical) are regarded as the manipulations of spirits or the gods. Sickness is sometimes said to be attributed to guilt in the person, family or village for a sin or moral infringement. The illness manifested stems from the displeasure of the gods due to an infraction of universal moral law. Given the type of imbalance, appropriate healing needs the making of a “proper” diagnosis.8

Pretorius6 refers to traditional diagnosis as “a system that is both an art and a method of seeking to discover the origins of the disease and determining what it is” (p. 4). The diagnostic process not only seeks answers to the question of how the disease started (immediate causes), but also who or what caused the disease (efficient cause), and why it has affected this particular person at this point in time (ultimate cause). Diagnosis comprises a combination of information, namely observation, patient self-diagnosis and divination. Observation involves noting physical symptoms, while patient self-diagnosis entails patients reporting their symptoms. If deemed necessary, the impressions of other family members regarding the patient’s illness may also be obtained. Three methods of divination are described and include the casting of divination objects, mediumistic ability (clairvoyance/telepathy) or dreams and visions.

Mbiti14 and Essien26 also emphasize that the major illnesses and life troubles in the African society are usually diagnosed and explained as religious experiences and clearly not as biological/medical conditions as in modern medicine. Essien26 reports specifically that the traditional healer’s diagnosis signifies aiding human spiritual health and adjustment through superstition, magic and religious actions and not by real medicine.

Also in terms of the concept of diagnosis, it is clear that Gumede12 sees traditional diagnosis as an essential part of religion, with the central figure accomplishing this diagnosis being the traditional healer as a priest, not as a medical doctor.

- It is clear that a medical diagnosis, developed by the already regulated health professions such as nursing, the allied and allopathic professions, is completely absent in traditional healing. The traditional healer’s
diagnosis (traditional diagnosis) is founded in faith in the supernatural.

The present-day treatments profile of the traditional healer

Treatment is only administered after making a diagnosis and deciding on a treatment plan. Several authors have placed descriptions of a wide range of treatments of the traditional healer on record.

About the treatments offered by the traditional healers, Pretorius\(^6\) \(\text{pp.4-7}\) writes:

- Traditional medical practitioners treat all age groups and all kinds of problems, using and administering medicines that are readily available and affordable. Their treatment is comprehensive and has curative, protective and preventive elements. Treatment can be either natural or ritual, or both, depending on the cause of the disease. Treatment includes among others, ritual sacrifice to appease the ancestors; ritual and magical strengthening of people and possessions; steaming; purification (e.g., ritual washing or the use of emetics and purgatives); sniffing of substances; cut cutting (African mode of injection); wearing charms; and piercing (African acupuncture).

- Traditional healers also deal with traditional ailments. These culture-bound syndromes usually do not respond to western medicine and must be treated by traditional healers (Zulu: ukufa kwabantu). There are five such culture-bound syndromes viz being possessed by (evil) spirits, sorcery, ancestral wrath (esinyanya), neglect of cultural rites or practices (amaseko), and defilement.

Regarding the scope of traditional healer’s treatment, Pretorius\(^6\) states that the traditional healer deals with the following categories of conditions:

- Conditions of the respiratory system: e.g., colds and flu; hay fever; pneumonia; asthma; bronchitis; emphysema; tuberculosis.
- Conditions of the gastro-intestinal system: e.g., diarrhoea; dysentery; constipation; heartburn; indigestion; ulcers; haemorrhoids; worms.
- Conditions of the cardiovascular system: e.g., angina; high blood pressure; palpitations.
- Conditions of the central nervous system: e.g., headache; migraine; stroke (traditional treatment is given after discharge from hospital).
- Conditions of the skin and hair: e.g., acne; eczema; boils; insect bites and stings; ringworm; scabies.
- Conditions of the blood: e.g., anaemia; blood cleansing.
- Conditions of the urinogenital system: e.g., sexually transmitted diseases; cystitis; menstrual pain; vaginitis.
- Conditions of the eyes: e.g., “pink eye”.
- Conditions of the musculoskeletal system: e.g., arthritis; backache; muscular pain; gout; sprains and strains; rheumatism.
- Other conditions such as cancer; HIV/AIDS (some cultural beliefs maintain that there is no such thing as HIV/AIDS or it is sometimes confused with lugola - a culture-bound syndrome that mimics HIV/AIDS); fever; pain; alcoholism.

Another author\(^8\) also indicates that traditional healers use a wide variety of treatments – from “magic” to biomedical methods such as fasting and dieting, herbal therapies, bathing, massage, and surgical procedures. Migraines, coughs, abscesses, and pleurisy are healed by using the method of “bloodletting” followed by an application of herbal ointment with follow-up herbal drugs. Sometimes animals are also used to transfer the illness to. Some healers rub heated herbal ointment across the patient’s eyelids to treat headaches, while malaria is treated by both drinking and inhaling the steam of a herbal mixture. Fevers are often treated using a steam bath. Vomiting is induced and emetics are used to treat diseases, e.g., raw beef is soaked in the drink of an alcoholic to induce nausea and vomiting as a cure for alcoholism. The fat of a boa constrictor is used to cure gout and rheumatism. It is also believed to relieve chest pain when rubbed into the skin.

Other forms of treatment are purification rituals. The casting of bones to access the advice of ancestors is an alternative practice to ritual of exorcism of spirits. In a typical session, the sangoma should determine what the affliction is or what the reason for the patient’s visit might be. The patient or diviner throws bones on the floor. This collection of objects may include animal vertebrae, dominoes, dice, coins, shells and stones, each with a specific significance to human life, e.g., a hyena bone signifies a thief and will provide information about stolen objects. The sangoma or the patient throws the bones but it is believed that the ancestors determine the pattern they form when they land. The sangoma then interprets this metaphor in relation to the patient’s treatment: what is required from the patient by the ancestors, and how the disharmony is going to be resolved. Similarly, sangomas also interpret metaphors present in dreams, either their own or those of their patients.\(^9\)
The spiritually curative medicines prescribed in traditional treatments are called muti. Traditional African medicine makes extensive use of botanical products, but may also include other formulations which are zoological or mineral in composition. Different types of muti are prepared from approximately 3,000 out of 30,000 possible species of higher plants of Southern Africa.

Depending on the affliction, a number of purification practices can be administered. These practices include bathing in herbal mixtures; self-induced vomiting to cleanse and tone the system; inhaling the steam of medicinal herbs; the use of snuff to induce sneezing to expulse diseases; enema infusions and decoctions and the application of extracts to small cuts.\(^9\)

In some cases, treatment with the traditional healers’ muti is obviously meant to be ill-disposed, as Hofstatter\(^{27, p.18}\) reveals:

- “Gris-gris consist of pouches and horns – and sometimes hooves and vials – containing special powders. They are strung along belts, hung around the fighter’s neck or slung over his shoulder. The garland carries a padlock that must be unlocked when not in battle. ‘Otherwise the gris-gris causes discord. You will start fights with your family. Your car won’t be able to start’.
- The hoof is a particularly dangerous weapon. ‘During a fight, it can turn you into a snake or the wind so your enemy can’t see you. It’s deadly.’ Gris-gris also salves your conscience. ‘When you kill someone, the ghost of the person will not disturb you – the gris-gris will chase it all away’

Truter\(^{28}\) identifies three categories of traditional medicine in treatment:

- Preventive and prophylactic medication: Most of the work of traditional healers involves protecting patients from possible afflictions. This can be achieved in various ways, for example by performing ceremonial acts; using medicine against disequilibrium; wearing totemic objects. For fortification these objects are scattered around and about the kraal to ward off lightning or evil pranks that a witch of some kind endeavours to bring about.
- Treatment for ailments: These are prepared in different forms such as cold and hot infusions, decoctions, powders, poultices and lotions, and a variety of earthy ointments that comprise animal fat, clay and sometimes ashes. These formulations are made into different medicine mixtures. These recipes are usually a secret and form part of the knowledge that the healer passes onto his apprentice.
- Medications used to destroy the power in others: These medications target specific individuals. A concoction may be placed in the enemy’s path and it is then believed that when the enemy passes by, he will contract a fatal disease. Scarification, bloodletting and cupping are the commonest surgical procedures performed by African traditional healers and are occasionally performed in full view of onlookers. The letting of blood is sometimes used as a way of casting out the illness. If the cause of the sickness is perceived to be witchcraft, a number of rituals may be performed in order to cast off the spell. These may include the induction of vomiting, enemas, bloodletting, whistling or elaborate rituals such as animal sacrifices. Rituals play an important role. Many Africans believe that if the ancestors withdraw their protection and gift of good fortune, the descendant is left vulnerable to all sorts of misfortunes and diseases. The wrath of the ancestors is usually evoked by discord in the home, the violation of customs and traditions or non-observance of certain taboos. The rituals performed in traditional medicine aim to restore balance and harmony in terms of the beliefs and values of its culture. These rituals reduce patients’ anxiety and serve to relieve feelings of guilt. A large part of the African traditional healer’s practice is also devoted to counselling individuals.

To Mb\(\text{t}i\)\(^{14}\) and Essien,\(^{76}\) the treatment with muti is essentially a religious component of traditional medicine. Treatment rituals are necessary to confirm that life’s troubles in the form of magic, sorcery, witchcraft, broken taboos and the work of spirits are laid to rest. Essien\(^{76}\) emphasizes that treatment with “medicine” in terms of the traditional healing involves amulets, charms, herbs, sorcery, etc. Such treatment is not meant to heal an illness biologically or physically, but to block out supernatural misfortune and illnesses caused by spirits or witches. These authors do not refer to any modern, scientific or biomedical treatment at all.

The Traditional Health Practitioners Act No 22 also fails to rectify the future description of treatment by the traditional health practitioner. The scientific intention of its definition traditional medicine, meaning an object or substance used in traditional health practice for the diagnosis, treatment or prevention of a physical or mental illness, or any curative or
therapeutic purpose, including the maintenance or restoration of physical or mental health or well-being in human beings, but does not include a dependence-producing or dangerous substance or drug, is gobbled up by the Act’s pre-modern pivot definition of traditional philosophy, connecting directly to the ancestors, spirits and supernatural inclinations.\textsuperscript{15}

- The treatment-model of the traditional healer, based on his failed diagnosis model, is yet again exclusively focussed on the supernatural. The adjusted term should more accurately be traditional supernatural treatment. The sound medical treatment model of the medical doctor clearly does not exist in traditional healing.

Discussion

Diagnosis and treatment present in traditional health allegedly regarded to be unique to the traditional healer and which had justified his right to be a healthcare professional, allowed to work in South Africa’s health establishment and services in terms of the Traditional Health Practitioners Act No 22, are certainly not based on any medical or scientific principles, knowledge or certification. A close examination of literature mentioned, revealed that there is no uniform traditional diagnosis and treatment model. Specific dissimilarities exist amongst traditional healers in their approach to diagnosis and treatment. Furthermore, the traditional healer’s diagnosis and treatment are founded in the supernatural, stripped of any bio-medical standing. Its written diagnosis and treatment manifest is carte blanche.

Research also indicates a lack of understanding of the concepts of diagnosis and treatment, not only within traditional healing realm, but also among the composers of the Traditional Health Practitioners Act No 22 and certain portions of the South African community.

Any form of training, based on formal academic or professional health programs and standards and attended by the learner-healer, is not found. In addition, there is no evidence that the mentor (tutor) is formally trained in health sciences or practice. Traditional diagnosis and traditional treatment are exclusively directed by the supernatural and magic. Thus, it is possible that the diagnosis and treatment of the traditional healer incline towards witchcraft, even evil-doing, including murder.

Strengths and limitations

The contribution of the study is the realization that no medical diagnosis and treatment model for the South African traditional healer could be detected. The traditional healer is completely deprived of his status as a medical health practitioner. The fixed and stereotyped idea of the professed true qualities of the South African traditional healer as a medical entity, supported by politicians, activists and propagandists, will regrettably limit the impact of the study to rectify the confusion and misinterpretation created by the Traditional Health Practitioners Act No 22 (2007).

Conclusion

A scientific traditional healthcare model to guide and teach the student of traditional medicine the skills of diagnosis and treatment of his clients, is absent in South Africa. At the moment, knowledge and understanding of diagnosis and treatment of traditional healing are obtained through various informal ways of learning, mostly verbally and practically, from so called “traditional healing masters or tutors”. In reality, this means that the present-day traditional health advices, styles and approaches being offered, differ immensely in standards from tutor to tutor.

We believe that the lack of an established medical diagnosis and treatment learning model and a code of ethics regarding practice responsibility and client health safety for the South African traditional healers, are matters that need to be addressed soon.

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PEER REVIEW
Not commissioned. Externally peer reviewed.

CONFLICTS OF INTEREST
The authors declare that they have no competing interests.

FUNDING
None