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## Opinion

### Spirituality, healing and alternative m

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Throughout the world disease and illness have preoccupied how abundant living can be attained. Through research experience, I have established that matters of life and sensitive; people do not want to confront these issues the unknown.

Medical practitioners and other research scientists in Kenya Medical Research Institute seek to conduct inquiry medicine can be deployed to support life. They are doing job and I thank God for the work they do.

Having acknowledged the fact that medical practitioners universities and research institutions are doing commercial like to explore the other side of wellness or wholeness often take for granted, namely: spirituality, healing and medicine.

My interest in this area of well-being dates back to my home in Kamagambo where I grew up under the tutelage of my grandmother, Mama Rosalia Wapongo Nyar Odundo who passed on in 1987 at the ripe age of 95. She was from Omamba's Katieno clan in Uriri Constituency. My grandmothers, Sakwa Waora who were well known herbalists both in Kamagambo and Awendo in Southern Nyanza. Jaramogi Oginga Odinga's family records, my grandfather died in 1954. I was born and was given his name. As I grew up, my paternal grandmother address me as "my husband" (Dholuo: Chwora).

I often wondered why this old woman fondly referred to me and yet I was her grandson. In me, she saw continuity. She took it upon herself to nurture me. She was protective of me. There was uneasy tension between my mother, Japuo nj Yuca and my grandmother because of me. I spent more time with my grandmother at her compound helping her with household chores. I carried her to the local markets at Rongo, Kosir, Kojwang and other places.

I helped her in weeding her shamba at Kamwango, Kanyadigiro and Kabuoro villages in Kamagambo.

During my apprenticeship period under the tender care of my paternal grandmother, she showed me different herbs and plants which treated different diseases and illnesses.

She showed me medicinal plants which treated headaches, soar throats, diahorreah, bleeding, toothache, stomach aches, common colds, skin diseases and other conditions. My grandmother was not an occupational herbal practitioner as such but her knowledge of medicinal plants was tremendous. She did not use that knowledge for personal enrichment but she only used the herbal remedies to look after the health of her children, grandchildren and great grand children.

My mother was a school teacher at Kamagambo Primary School for all the years I could remember. She also knew different home remedies and would use them to treat minor ailments affecting her children (we were eleven children: six brothers and five sisters).

When we were sick, we went to the local health centre at Kamagambo run by the Seventh-Day Adventist Church. The tension between my mother and my grandmother concerning myself was that, when I was not at school, I would be keeping my grandmother company. My mother who was supposed to be more modern than my grandmother – felt that she would wrongly influence me into being a traditionalist. After primary school, I went to boarding school.

When I completed my Advanced levels at Maseno National School, I took up a job briefly at the Kisumu District Commissioner's office (collecting revenue). My father Isaiah Otieno Ojwang was a civil administrator; he never had much time for the kind of indigenous botanical knowledge his mother was trying to impart to me.

He was brought up by missionaries at Kamagambo and Maseno. He went to school with people like Isaiah Owalla (former MP for Homa Bay), Shellemiah Mbeo (former Senator), Musa Omollo (former member of Industrial Court), Dishon Agutu (former Education Officer), Onyango Ayodo (former Tourism Minister) among many others.

He also went to the United States of America with people like Barrack Obama Senior (Economist), Prof. Erasto Muga of the Department of Sociology, University of Nairobi, Prof Ojudo Kwasa formerly of the same university, Prof. C.O. Abungu of Department of Mathematics, University of Nairobi and many others.

My interest in the indigenous botanical knowledge of our people was rekindled in late 1990s when I moved to the Institute of African Studies of the University of Nairobi where, as a Senior Research Fellow, my assignments included teaching courses in culture and communication; linguistic anthropology; psycholinguistics; gender and communication networks, among others.

It was also this period which saw my new-found interest in a linguistic study of ethnobotanical terminology in culture-specific contexts with

implications for lexicographic practice and my research affiliation with the University of Pretoria in the Republic of South Africa. I have also had the good fortune to work with Prof. Gail Presbey of the University of Detroit, United States of America on the subject of African cultural knowledge.

My experience as an African child, and my work as a university lecturer and researcher for two decades have convinced me that African indigenous knowledge systems need to be explored more for the benefit of the African family in particular and the global human family in general.

At my Kamangobo country home, I maintain some of the rare indigenous trees which attract the most picturesque bird-life in the Southern Nyanza region at sunset.

One man who has influenced my thinking in this area is Prof. John O. Kokwaro of the Department of Botany, University of Nairobi. For over 30 years, he has documented medicinal plants in East Africa. His position is that the use of plants for the treatment of various diseases and for religious rituals has been a universal human activity for many years. In his publication *Medicinal Plants of East Africa*, Prof. Kokwaro states:

"The East Africa herbalist has often been referred to as Bwana Mganga (Kiswahili) or similar terminology meaning 'medicine man' in other languages.

We all know that people were living in various parts of Africa long before the arrival of early European explorers and missionaries. It was also true that these people, together with their domestic animals, from time to time, were sick or injured under their existing environmental conditions. Even now when many people are treated by modern drugs, East Africans, both literate and illiterate, still use local drug plants in many ways. For many years, our people have developed a store of empirical information concerning the therapeutic values of our local plants..."

The quest for health and wholeness should not preclude the use of therapeutic plants of our people. Our universities and research institutions should get more grants to conduct empirical studies in the use of herbal remedies in management of various diseases and illness, including the HIV/Aids pandemic.

I have noticed that Kenyans have gone herbal crazy lately, and the Chinese are exploiting this stampede for herbal products to the maximum. Why are we not exploiting the production of, let us say, herbal toothpastes from plants such as sangla (*Rhus Vulgaris*) which grows in plenty in the Victoria Nyanza Basin, Western Kenya?

Of course strict ethical standards must be ensured through appropriate legislative and institutional regulation so that quacks do not exploit the vulnerabilities of the people with their diseases and illness.

Recently, I came across a book by Dr. Robina Coker entitled *Alternative Medicine Helpful or Harmful?* This work was published by the Christian Medical Fellowship in Great Britain in 1995 but only came to my attention not long ago. I found it interesting reading in the areas of spirituality, healing and alternative medicine.

Many European based missionaries dismiss African or Oriental medicine with the contempt we do not deserve. My grandmother showed me a herb which you rub around the heart when you get palpitations, and it is quite effective. Why shouldn't we use such herbal therapies? Dr Andrew Fergusson, formerly the Secretary General of Christian Medical Fellowship (United Kingdom) became interested in alternative medicine because of the demands of his patients.

He had to recognise what he called the "the rise and rise of alternative medicine." Dr. Fergusson, in his foreword to Robina Coker's *Alternative medicine. Helpful or Harmful?* narrates how a study group he belonged to investigated therapies which they found both amazing and amusing in many ways.

They also came across "New Age Movement" which is not new at all because some of the therapies they adopt are as old as humanity itself.

He reckons: "We realised that in recent years doctors have gained in science of medicine at the expense of losing the art... My patients didn't necessarily expect to get better, but they all wanted to feel better."

He reckons that alternative medicine's popularity presents modern medical doctors with a much needed challenge to return to the art of healing instead of merely being technician's cure.

Dr. Robina Coker, herself a qualified physician with a bias in pharmacology, states in her book *Alternative Medicine: Herbal or Harmful?* that sometimes it really works. She states that: "In some cases, alternative medicine does offer an effective treatment. Until recently, osteopathy was regarded by the medical profession as potentially hazardous and probably ineffective. Now it is offered by general practitioners alongside conventional medicine. Some studies have shown that patients derive greater benefit from osteopathy than other forms of treatment, particularly for chronic low back pain..."

I learnt only recently that there is a vibrant Christian Medical Fellowship of Kenya, which brings together Christian doctors and dentists "to stir up one another to love and good works" (Hebrews 10:24-25). It would be a good idea for this group of Christian doctors to work with other institutions in the area of exploring the interaction between spirituality, healing and alternative medicine in Kenya. This is most important in this day and age when some scandals have been reported of unscrupulous evangelists and faith healers exploiting people financially by making impossible claims that they can change the sero-status of HIV positive patients who are forced to part with thousands upon thousands of shillings as seed money planted in faith by those in need of healing.

The Christian Medical Fellowship of Kenya can help in educating churches on the promise of healing in Scripture and the reality of disease, sickness, suffering and even dying (terminal illnesses) in a wholesome and loving manner.

The other area which needs to be addressed from an Africanist's perspective is traditional medicine. Isaac Sindiga and his colleagues edited a book entitled *Traditional Medicine in Africa*, which explores

culture-specific therapies in primary health care systems. It concludes that indigenous knowledge systems need to be rediscovered. For that reason, health policy and professionalism need to be established to create an enabling environment within which traditional medicine can flourish. It is in this context that the Kenya Network on Medicinal Plants and Traditional Medicine co-ordinated by the National Museums of Kenya (NMK) and other similar institutions should be supported. Faith-based institutions should be involved because of the dimension of spirituality.

In March 1999, Prof Gail Presbey from the University of Detroit, USA and I interviewed an African sage from Nyakach in Nyanza Province. Her name was Mama Doris Gwako Arodi from Olembo. When we asked her whether sick people should consult traditional healers, she said (with HIV/Aids in mind):

"...Many people are dying out of incurable diseases and I've seen the suffering among the sick in hospitals because diseases affecting them are not being cured in these hospitals. It appears these diseases are incurable, so you find a patient running from one hospital to another without any relief.....if a patient leaves hospital when he cannot get cured and seeks help from a traditional healer, there is nothing wrong with that because what we are seeking here is life, we need to prolong life and if the traditional healer can do that, that is very good..."

Prof. John S. Mbiti, in his seminal work *Introduction to African Religion*, states that good health is always a major concern in every society. African peoples have many rituals directed at ensuring good health, healing, preventing danger to health curing barrenness, removing impurities from people and homesteads, and protecting people, animals and crops.

In this view, health is spiritual, psychological and physical. Rituals for blessings and good health are an inherent part of the African universe. Communal health rituals for epidemics such as HIV/Aids are conducted for localities or territories. Many Christian churches adopt this kind of approach in dealing with generalised health problems in the community or locality.

In conclusion, I would like to recall the integration of culture-specific cures of medicinal plants my grandmother socialised me into, the Western-based medicine at the mission-health centre and the strong prayers in the local church our family attended at Kamagambo where I was brought up. All these constitute the connectivity of spirituality, healing and alternative medicine working in harmony for better health and wholesome living. We must seek to rediscover our indigenous knowledge systems. We owe it to our future generations. I am a family man with grown-up children. I believe that their generation will also explore these possibilities.

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