



## Some Metaphysical Elements in African Trado-Medical Practice

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### Abstract

The African traditional medical practice is largely conceived through the instrumentality of metaphysics. This essay focuses on unraveling the extent to which metaphysics pervades African traditional medicine. It begins with an insight into African cosmology. Thereafter, it expounds upon the metaphysical concept of causality as a phenomenon which permeates the African thought system and as central to African traditional medicine. It then, exposes the ontological dimensions of African trado-medical practices. The essay holds that African traditional medicine takes into account the totality of the patients' socio-cultural, supernatural, and physiological framework of beliefs and expectations. It proceeds to argue that in African traditional medicine, treatment is magico-rational being that its idea of treatment cannot be subjected to laboratory analysis, instead, it is both supernatural and mystical, and while having no explanations in natural causation, treatment often involves rituals. The essay contends that in African traditional medicine, the efficacy of therapy depends on the combination of the powers of herbs and the healer. It contends that where therapy fails, it is either the actual

cause has not been ascertained or that malicious agent(s) with higher supernatural power, impede(d) the efficacy of the treatment or its procedure. The essay expounds fundamentally on the metaphysical duty of the African Traditional Doctor. It contends that an accomplished traditional healer treats without charge, and that charging for treatment diminishes the capacity of the traditional healer to achieve results. The work concludes by pointing out the nexus between African traditional practice of medicine and traditional practice of medicine in other cultures of the world.

**Key Words:** African traditional medicine, African cosmology, Causality, Ontology, Magico-rational, African traditional doctor

### **Introduction**

From an African worldview, 'African trado-medical practice' (which will henceforth be referred to as ATP), cannot be separated from her metaphysics. This is because the traditional African has a holistic view of reality. She situates her daily occurrences and phenomena within the totality of the scheme of things, which in her conception, are characterized by such factors as unity and coherence. In other words, in the African conception of reality, there is no sharp distinction between realities which are ordinarily termed to be diametrically opposed. Realities are fundamentally interconnected within the worldview of the African people.

This fundamental interconnectedness accounts for the reason why one sphere of life cannot be completely understood at the exclusion of others. This is also why a correct understanding of an African phenomenon can only be obtained by a panoramic survey of her reality; hence the necessity to at least have an insight into African cosmology.

### **An Insight into African Cosmology**

The metaphysical elements of African Traditional Medicine can best be understood when the inquirer has at least a quick look at African

cosmology. The African universe is populated with immanent and transcendental realities. Kwame Gyekye puts it that

[b]elief in mystical power is common to all African societies; it is a feature of Traditional African religion and world view. There is a pervasive and resilient beliefs in the existence of mystical forces or powers in the universe that can be tapped by those human being who have the knowledge to do so for good or evil....It is believed that objects of nature are inhabited by spiritual being or deities who are also thought to exist in the universe as intermediates between God and humans but who cannot be seen by the human eye.<sup>1</sup>

Any worship accorded these objects of nature is intended for the spiritual beings which inhabit them and not those object themselves. He added that because of the presence of spiritual beings objects of nature take on religious significance and command human respect.

This pervasive belief in mystical power is due to the fact that, “the African child is reared in a world where ghosts are more real than men, a world in the control of spirits of the dead. Magical conceptions and magical causations are the only facts of his philosophy. The pleasure or anger of the spirits is the causes of all disease, famine, death, and the whole range of natural science”.<sup>2</sup> It is for this reason there is a strong human attachment to the supernatural. This attachment is expressed through sacrifice, ritual, prayer and other forms of worship. Bad spirits are driven away to make room for good spirit that ensure good things.<sup>3</sup> In African explanation of reality, “physical elements are not excluded. But they are not enough explanations. This is because the natural turn of events has a supernatural side to it”.<sup>4</sup> In simple term, every physical occurrence has an underlying supernatural cause.

It is evident from the above that African universe is made up of both the physical and the spiritual worlds. The spiritual world just like the

physical one is constituted of activities. But not all humans have the ability to access the spiritual realm. There are special men – native doctors, witch doctors, diviners, medicine-men, herbalists or in any other name they may be called – who by their ability or special favour from the spiritual, have privilege access to and intersect the activities of the two worlds. These special people communicate the knowledge they acquired from the spiritual world to others. Such knowledge which humans have of the spiritual world influences their activities.

Human beings have a general tendency to rely on forces beyond themselves for protection. It is, therefore, not surprising to see human beings offering libation to these supernatural beings as a form of worship, as a form of appease or in thanksgiving for favours received. In this way a constant link is maintained between the two worlds. In this relationship hierarchy is maintained. The beings at the higher rung of the ladder can exercise influence on those who occupy the lower rung of the ladder. At the same time those at the lower rung of this hierarchy can also influence the higher beings but not through control but through appease, request or supplication. The higher ones can mediate in favour of the lower ones against intermediate malevolent forces. But the habitation of lower species (for example animals, plants, inanimate objects) by a higher one (for example deities, or divinities) elevates the lower species to the status of the being which inhabits it. It can only occupy again the actual rung in the hierarchical order when the incarnate being leaves it. This is the reason humans who are ordinarily believed to be higher than plants, animals and inanimate objects worship them when they recognize the presence of a divine being in them.

From an African standpoint, there is the metaphysical possibility of a being to suffer ontological diminution from a superior force, and not vice versa. Placid Tempels puts it with respect to the Bantu people that “[e]very anomaly, defects and physical monstrosity and all illnesses are involved in some way... and may have a maleficent influence by reason of the trouble which they cause in the normal order. Against all these evils there are purificatory practices, rites,

prohibitions, ablutions etc”.<sup>5</sup> This Tempels’ submission on Bantu is also applicable to most other African communities. Thus the concept *causality* is central to African world view in general and her health care delivery in particular.

### **Causality in African Traditional Practices**

To properly understand African traditional medicine, it is imperative to begin with African metaphysics. The metaphysical concept of causality is central to African traditional medicine. Causality is a phenomenon which permeates the African thoughts system and system of things. The traditional African believes that behind the facades of all appearances there is a cause. This belief in metaphysical causation permeates all aspects of her life, including medicine. It can thus be inferred logically that the African mind is ontologically, causally or ontic- causally constituted. Even for such empirical misfortunes like miscarriage, accident and death, sufferings and sicknesses resulting from insect vectors like mosquito, tsetse fly, and so on, the African believes they are caused by some agents for some purpose(s). This is why she asks “why me and not the other person?” or “why the sufferer and not someone else?” This causal inevitability of phenomena events is one of the reasons the African maintains ontological relationship and harmony with the supernatural to attract fortunes and wade off misfortunes.

So far, it is clear that cause permeates African reality. For this reason, she explains every phenomenon causally. If for example a person suffers snake bite, she would like to know why it is she who suffers the snake bite and not another person. She would like to know why the snake passed at that same time she was passing or why she passed when the snake was there. It might be the case that the snake was sent to attack her, or she was pushed or teleguided to trespass the path of the snake at that time. In whatever case, for her, it is a pre-arranged occurrence because nothing happens by chance. John Mbiti puts it that “even if it is explained to a patient that he has malaria because a mosquito carrying malaria parasites has stung him

he will still want to know why that mosquito stung him and not another person".<sup>6</sup> Besides the sufferer, the traditional medicine man will also ask the same question. But he goes beyond asking such questions to finding ontological answers to them. "The only answer which people find satisfactory to that question is that someone has 'caused' (or 'sent') the mosquito to sting a particular individual by means of magical manipulation"<sup>7</sup> or that it is the result of the anger or vengeance of supernatural being to restore the ontological balance which has been altered in the mechanism of the totality of reality and to redress injustice by punishing the individual for her wrongdoing or those of her relatives. It can also be satisfactorily explained that the individual did not actually have any mosquito bite but that the manifested symptoms were actually caused by an agent or agents. "Suffering, misfortune, disease, accident, are all caused mystically.... To combat these misfortune or ailment, the cause must also be found, and either countered, uprooted or punished".<sup>8</sup> But in the case of supernatural beings like deities, ancestors and so on, supplication, appeal, negotiation or forgiveness is needed.

Although any ill health that results from benevolent and beneficent beings is always because of the consequences of the actions of the individual or her relative(s), but malevolent being can wrought evil, ill health, or misfortune maliciously on innocent persons. In whichever case, the spiritual world is consulted to either appease or appeal to the benevolent forces for clemency, or to seek their help to forestall the activities of the malevolent being and to eradicate the machinations it has already wrought on the sufferers.

The African believes that there is power inherent in gods, spirits, animals, plants, and things such as rivers, mountains, lightning, thunder, rocks in various degrees and kinds. The scope of their powers is believed to exceed that of humans. Diedrich Westermann writes that the concern<sup>9</sup> which the African has in things is that they are either useful to her or they can do her harm in their relationship with her. Hence she tries to conciliate with them to press their powers into her service and to avert the peril that threatens from them.

## **The Ontological Dimension of African Traditional Practices**

Man is faced with myriads of problems. J.O. Ubrurhe reasoned that the most dehumanizing and debilitating of these problems is probably disease. Disease has victimized and robbed him of his energy. But “[t]he uniqueness of African traditional medicine is that it caters for the wholeness of the man”.<sup>10</sup> Elsewhere, he puts it that “African traditional medicine deals with the totality of the patients’ socio-cultural, supernatural, and the physiological framework of beliefs and expectations. In treating the patients, the healer employs methods of restoring the total personality by allaying his fear, anxiety, stress and strain”.<sup>11</sup> In most cases, as Obrurhe puts it, oracles are consulted to know the causes of these different diseases, and the steps to take to arrest the situation and forestall future occurrences. Thus their treatment is described as magico-rational because the whole treatment cannot be subjected to laboratory analysis “In both supernatural and mystical causations, the treatment involves rituals including sacrifices. In most cases rituals pervade the whole process. Thus to the African who is incurably religious, an unconsecrated medicine is thought to be inefficacious. This accounts for why Traditional Medicines are smuggled into hospitals by patients’ relatives”.<sup>12</sup> Obviously, this is to complement hospital treatment and ensure recovery.

In ATP the efficacy of therapy depends on the combination of the powers of herbs and the traditional healer. Sometimes rituals<sup>13</sup> are intrinsic to the efficacy of traditional medicine or therapy. They are fused into the ingredients’ preparation and application of remedy. It prescribes preparation and preservation of the remedies under specific conditions. In the administration of the remedy, sometimes, ritual determines the hand to be used in lifting it to the mouth, the number of times to be taken and the manner it must be taken. Ritual serves as point of contact with the supernatural beings that promote the healing process. The supernatural beings make treatment

effective and also assist in the removal of all evil forces that might impede efficacy.

It is evident so far that the practice of native medicine as the African understands it transcends natural phenomena. It can still be substantiated further. Sometimes medicaments are not used, as in for example, in the infestation of evil spirit. Once the source is accurately identified then remedy is sure. Supplication or confrontation may be needed depending on the causal agent to ensure recovery. Where therapy fails it is believed that either the actual cause has not been ascertained or that malicious agent(s) with higher supernatural power impede(s) the efficacy of the treatment's procedures. Some available higher forces are therefore consulted to combat the misfortune or sickness and its cause, and to prevent reoccurrence.

This is not all. In ATP sickness does not only result from malevolent agents. Sin has a way of reflecting in the health condition of an individual. It may be the result of the sin of the sick individual or those of her relatives. In this way, the sickness is a form of cosmic rectification to reinstate the ontological harmony that has been disrupted or tampered with due to the sinful act. Such sins may lead to sickness, death, permanent incapacitation or ontologico-physiological impairment of the offender or those of her relation, especially her children when measures for redress are delayed or are not taken at all. Such sins include adultery, incest, dissanctification of sacred places, neglect of maintaining ontological harmony with divinities, and other sacrilegious offences capable of distorting ontological balance or angering the deities and ancestors. This evil known or unknown may be committed against some persons, ancestors, deities, or society. As it was in the previous case, oracles are consulted to ascertain the actual cause, and the required remedy to expiate the evil. The necessary measures (rituals, sacrifices or other measures) are carried out as prescribed to ensure forgiveness of the sin, recovery of the patient and restoration of ontological harmony.



Sometimes confession of the sin by the sinner is required to achieve these purposes.

In addition to mystical sickness, are pathogenic or pathological diseases. Even when diseases are pathogenic or pathological, consultations are still made to know the underlying cause. This is a logical outcome of the belief of the people that behind every sickness there must be an underlying cause. Like in other cases, after consultations are made, sacrifices, rituals or any other attempt are made for appeasement depending on the prescription to ensure efficacy of the medicament and subsequent recovery. In all, where drugs are to be taken, there are instructions, taboos and observances on how they are to be taken.

### **The Metaphysical Duty of the African Traditional Doctor**

The African Traditional Doctor which is sometimes referred to as medicine man or traditional healer has a combination of qualities and functions. He is an herbalist, a diviner, a counselor, a diagnostist, a priest, an adviser, a psychologist, an exorcist, among others. The whole effort to search for information by humans, in the domain of the sacred is the province of divination.<sup>14</sup> As a diviner, the African traditional doctor endeavors to obtain information about future things or things otherwise removed from ordinary perception by consulting informal other than human.<sup>15</sup> According to Francis Njoku,<sup>16</sup> it is through the medium of diviners and divination that information and answers to the puzzles of life surrounding human condition and society itself are sought. The diviner is a human person who receives and deciphers pieces of information and signs in the spirit world and interprets them to her client.

Among others things, the medicine-man or diviner unveils the mystery of human life through the use of mediums, oracles and necromancy. He solves problems; he imbues confidence and assurance on people in time of crises. He reveals secrets and imminent dangers. There may be need for him in most cases to combine the physical and non-

physical measures to effect a healing or cure. As it has been stated earlier, where sicknesses are caused, unless the power of the causative malevolent agent is counteracted, or unless the forgiveness of benevolent deities are sought, or unless atonement is made to expiate sin, the herb or other measures applied may not produce the desired result. Hence the traditional doctor must have the competence of discerning the source, that is, the underlying cause of the sickness or misfortune and remedied it; he must also be able to energize his herbal and other remedies. Unless these are done he might not be able to keep down forces that may impede the efficacy of his medicament and other therapies. Because there are many agents capable of causing sickness and other ill luck, the African traditional doctor first of all diagnose the sickness or ill luck and then ascertain the ontological cause. He therefore attempts to resolve the problem associated with the route of the sickness through either appeal, supplication, confrontation, punishment or counteract depending on the agent responsible to ensure efficacy. He therefore commences treatment. He also takes ontological measure to forestall future occurrence.

John Mbiti<sup>17</sup> substantiates this argument by putting it lucidly, and emphatically too, that the medicine-men are concerned with sickness, disease and misfortune. He also prescribes what the patient need to do or refrain from doing. He counteracts the effects of sickness, disease and misfortune sent by malicious agents through witchcraft, magic and so on and the ill health and misfortune that may result from the consequences of the individual's actions or those of his relatives. Because sufferings are caused by mystical means, he supplies people with counter measures such as charms, rituals, applying medicines (swallowed or robbed) and tattoos. The medicine-men also give aid to increase productivity or give good results. Among others and very importantly too, they purge witches, detect sorcery, remove curses and control the spirit of the living dead. Because the traditional doctors or medicine-men<sup>18</sup> are believed to have access to the forces of nature and other forms of knowledge unknown or little

known by the public, they are entrusted with the duty of removing whatever may harm the community.

An important fact yet to be explained is that the core traditional doctor does not involve in diabolic practice although he may have the knowledge. Rather his mission is to solve problems, physical or psycho-spiritual without any harm to innocent persons. But he can contend with evil forces or malicious agents to ensure safety of the innocent or to negotiate with them in favour of those who offend them.

But like most other sectors, this institution has been corrupted by dubious characters that now exert exorbitant charges and other demands whether results are achieved or not. It is not counterfactual to submit that they charge before treatment. In rare cases they abduct women particularly the unmarried. It is also this sect of traditional doctors who are involved in diabolic practices. While the core traditional doctor performs his duty as a response to divine or community mandate, the dubious one sees his profession as a mean of deception, exploitation and oppression for survival.

The traditional healer may not have known all there is, i.e. all the medicaments and all the facts about spiritual powers and the supersensible world. He operates within the realm of his knowledge. He enlarges his horizon of knowledge by making inquiry into the unknown through divination or consultation with supersensible powers, and by making more experiment<sup>19</sup> with herbs. He may also, though seldom, consult some herbalists of supreme rank. The more knowledgeable he is, the more his ability to achieve result in his profession.

### **The Metaphysical Underpinnings of Treatment in ATP**

Treatment of diseases in ATP is not limited to the use of herbs. Beyond the use of herbs there are metaphysical beliefs and practices which characterize the whole process of illness and treatment.

Besides, the practice of medicine in most African communities transcends the treatment of diseases. It includes the prevention of diseases and other calamities that may result from malevolent agents through charms, magic, poison, spell, and so on. It also includes the attraction of good luck, positive results and exorcism of evil or rival spirits.

However, the majority of medicines are directed towards the cure and prevention of disease. Among the Mono tribe in Liberia, for example, medicine is used in three different ways: first, to cure or prevent disease; second, as pure magic, and third, in fetishes which are distinctly religious; but the three are often combined.<sup>20</sup> Now what is a disease? In African traditional medicine whatever puts an individual in a state of dis-ease and discomfort is a disease.<sup>21</sup> This implies that misfortune, afflictions and all forms of psycho-spiritual, social and moral perturbations are diseases.

George Hertzog writes that medicine among the Jabo of South Eastern Liberia in a wide sense means “a medicinal plant, substance or preparation, a fetish, or any object made potent by magic witchcraft so that it is capable of healing as well as causing sickness or some other misfortune”.<sup>22</sup> From these premises, it is evident that medicines are provided among other

1. To remedy sickness, such as diseases and other psycho-spiritual maladies like mental illness and evil spirits
2. To wade off external attacks of rival communities and malevolent beings
3. To prevent occurrences of sickness in whatever form and other forms of misfortunes
4. To enhance result, productivity or performance and ensure prosperity, or success in endeavour.
5. To attract good luck and blessings, and
6. To remove curse, and confront unfavourable forces among others.

These are some of the reasons that in African sense of it, it is not only the sick that seek the attention of a healer. Those who are not

pathologically and pathogenically ill also seek the attention of traditional healers for other reasons.

The nature of treatment may vary for similar illness or misfortune depending on the cause. This treatment involves both natural and unnatural methods. It is magico-rational, psycho-spiritual *cum* socio-medical. While taking charge of the psycho-spiritual aspect, the medicine-man also rely on different parts of plant, some animals' parts and minerals among others, to achieve total result. In addition to these medication and rituals (which are constituent parts of treatment) performed by the healer, the patient or sufferer may be required to adopt abstinence (at least temporarily), performs sacrifices (or have sacrifices performed for her), and observes some taboos. All these because sicknesses and the like which have ontological route require ontological remedy. These concrete involvements by both the healer and the sufferer suggest that they both have active roles to play in the healing process. In this course of treatment the healer empathizes with the sufferer. He is totally committed to her and the entire healing process to enable him identifies completely with her and elicits vital information from her which she would not ordinarily divulge. All this is geared towards achieving healing result.

This ontologico-causal connection among phenomena is partly the reasons most Africans in the age of orthodox medical revolutions, still resort to traditional healing methods to cater for the religious and ontological aspect of illness. John Mbiti puts it that "modern hospitals may deal with the physical side of the disease, but there is the religious dimension of suffering which they do not handle, and for that purpose, a great number of patients will resort to both hospital and medicine-men, without a feeling of contradiction..."<sup>23</sup> So, as Mbiti puts it, the medicine-men supply people with counter measures in forms of charms, rituals, tattoos, application of medicine among others to counter harms such as sufferings, sickness and disease inflicted through mystical forces like witchcraft, sorcery, evil eye, and so on.

This need for higher power is important because, “a man’s own powers are not sufficient protection against the many enemies of life and he stretches out hands to that which is more than human”.<sup>24</sup> Where herbs need to be applied, it is prepared from plants, animals and mineral products. Some of these raw materials are believed to be sacred. And before they are extracted, an appeasement is made<sup>25</sup> for the collection of the required part(s) to be possible, and to ensure potency of the medicament when prepared and administered. Such required parts include herbs, leaves, seeds, bark, branches, flowers, and roots, and animal parts such as shell, hoof, horn, tail, skull, bone, and minerals.

The traditional doctor or his agent(s) under his instruction and supervision extract(s) and prepare(s) the medicament. This medicament may be in the form of liquid, powder, ash, or direct herbs or seeds, to be taken either chewed, swallowed, rubbed, licked, snuffed, bathed with, incised or directly diffused into the blood. The administration of these medicaments is strictly followed by some observances, such as quantity, number of times, the hand to use, the direction to face, word to say or murmur, incantations to make, and so on. In addition to these, the doctor may massage, lift, lie or jump over the patient. He may bleed, blow, punch or slap parts of the patient’s body or bath him or her. All these are geared towards the goal of efficacy.

### **Remuneration**

Essentially, the core traditional healer treats without charge. Freely he receives and freely he gives. It is believed in some quarters that charges diminish the capacity of the traditional healer to achieve results in healing. But it is not a contradiction to say that sometimes some minimal charges are made from patients or their relatives in form of goods or money to buy some ingredients required for medicament. Some charges can also be made in cash or kind, for such items as goat, dog, cat, sheep, snail, tortoise, rabbit, chicken, and

fowl, among others, required to appease deities or spirits inhabiting trees before the parts of the tree can be collected for use, or to appease or supplicate witches, wizards and ancestors, quell their anger or vengeance to insure healing. Sometimes the traditional doctor provides what is within his reach without charge. These minimal charges that are made are not for the benefit of the traditional doctor *per se* but are for ingredients required in the process of treatment. However, the traditional doctor does live on some consumable items from rituals, sacrifices and appreciation from recovered patient. Appreciation may also be paid in human beings especially females which the traditional doctor or his son will eventually marry. He also feeds from his farm produce because he is also a farmer. Some may voluntarily offer their labour to work in his farm.

### **The Ontological Limitation of ATP**

Despite the efficacy of African traditional medicine, it has some ontological limitations. The African, like every other person, has the instinct of survival. Consequent upon this, she desires to perpetuate life *ad infinitum*, in some cases; she attempts some measures to sustain even both old and vegetative lives. This attempt is, for example, called *Edai*<sup>26</sup> among Esan people of Edo State Nigeria. But no matter how hard the African tries to keep life, old age and death cannot be prevented ultimately. These phenomena have victory over traditional practice of medicine. In this regard, any success recorded is only ephemeral.

Pantaleon Iroegbu<sup>27</sup> puts it that at times if not often, human beings suffered limitations imposed by ontological evil of lack or privation. This limitedness prevents man from getting at the cure of the gruesome realities of ageing and death. Besides, ignorance of the cures of certain diseases also imposes in man the intensive suffering of having to undergo painful medical and therapeutic measures that only prolong life a little, but do not prevent death. At the end of all

the medical efforts, human being must still die and cease to exist. Her desire to live on endlessly cannot be satisfied.

### **A Comparative Discourse of Traditional Medical Practice in some Cultures**

This inquiry will be concluded by identifying some points of intersection of ATP with traditional practice of medicine in some other cultures of the world. Health issue is a global phenomenon. Just like people of other cultures of the world, Africans are engrossed in health matters. This engrossment is consequent upon the facts of affliction, sicknesses and other predicaments which attend mankind at any stage of life. These phenomena may be physical or spiritual. Even the physical ones may be caused spiritually. Africans therefore take steps to remedy existing ones, and where possible, they put up measures to forestall future occurrence or reoccurrence. They do this by making personal efforts which are either physical or spiritual or combination of both. In whichever case, it is a characteristic phenomenon to commune with supernatural forces to ensure efficacy or safety.

This pattern of trado-medical practice is not limited to African traditional practice of medicine. James Longrigg has an extensive exposition of this metaphysical constituent of traditional medicine in some other cultures of the world. With respect to Greece and neighboring cultures, Longrigg opines that there is no clear evidence that ancient physicians arrived at any rational conception of disease. "Diseases were considered by them to be manifestations of the displeasure of the gods or were held to be caused by the intrusion of some demon or other. The prime purpose of the physician was to appease the god or drive out the demon which has possessed the sick person's body. In order to do so he employed prayers, supplications, sacrifices, spells and incantations".<sup>28</sup> This is logically equivalent to the functions of African traditional doctor.

Longrigg submits further that in ancient Egypt and Mesopotamia, the view of the physician on the causes of diseases and the operation of



remedies were so linked with belief in supernatural forces. He holds that from the Homeric poems which is our earliest literary source of evidence for Greek medicine, it is patently clear that the attitudes towards sickness and disease in the Heroic Age were not substantially different from those manifest in ancient Egypt and Mesopotamia, where the views of the physician on the causes of diseases and the operation of remedies are linked with belief in the supernatural.<sup>29</sup> Besides, Longrigg puts it that both Hesoid and Homer remain committed to ontological conception of disease regarding it as entity, possessing a separate existence of its own. It is held that the origin of disease is ultimately divine. It is also held here that in addition to causing death and diseases, the gods also cured disease and heal wounds.<sup>30</sup> James Longrigg holds that

in ancient Greece as in Egypt and Babylon, religious medicine became firmly established. Priests in the temples and sanctuaries catered to an eternal human need. Even long after the advent of rational medicine in Greece some, when stricken by illness...were more strongly motivated to seek aid from a priest than a physician. Others too, turn as a last resort to religion to seek a cure for their illness. The patients who sought their healing in religion could turn in ancient Greece to a wide range of gods and demi-gods.<sup>31</sup>

This Longrigg's submission, like others, is not different at all from the characteristics of African traditional practice of medicine except that in Africa, the traditional doctor is both a physician and a priest.

### **Endnotes**

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- 1982), p. 211, quoted by Francis Njoku *Ibid.*, p. 127, paraphrased.
16. Fracis Njoku, *Ibid.*, p. 127.
  17. See J. Mbiti, *Op. Cit.*, pp. 169-170. For a brief excursion into the metaphysical causes of illness, and the categorization and functions of traditional healer in Africa, see I.A. Kanu, A Hermeneutic Approach to African Traditional Religion, Theodicy and Philosophy, *Op. Cit.*, pp. 141-146. For an analysis of the causes and, the diagnostic methods and treatment of mental illness among traditional healers in Yoruba societies, see M.A. Makinde, *African Philosophy: the Demise of a Controversy*, 2Ed., (Ile-Ife: Obafemi Awolowo university Press Limited, 2010), pp. 378-385.
  18. See J. Mbiti, *Ibid.*, p. 170.
  19. For a detailed analysis of how the African, by experimental methods and direct observations, acquires medicinal knowledge and some other health related practices, see F. Airoboman, "Induction Procedure in African Thought", *Humanity: Jos Journal of General Studies*. Vol. 8, No. 1. 2016, pp. 191-193. Also see F. Airoboman, "Induction and the African Experience", *International Journal of philosophy and Religion*, Vol. 1, No. 1, 2009, pp. 61-65.
  20. See G.W. Harley, *Op. Cit.*, pp. 11, 12. For an account of the procedural methods for treating mental illness among traditional healers in Yoruba societies, see M.A. Makinde, *Op.Cit.*, pp. 385-389.
  21. See J. Ubrurhe, "Rituals and their efficacy in African Traditional Medicine" *Op. Cit.*, pp. 48-61.
  22. G. Hertzog, *Jabo Proverb from Liberia*, London, 1936, p. 50, quoted by G.W. Harley, *Op. Cit.*, p. 13.
  23. See J. Mbiti, *Op. Cit.*, p. 170.
  24. D. Westermann, *Op, Cit.*, p. 91.
  25. See C. O. Aluede, Esan "Native Doctors' Musical Instruments as Spirits: Basis and Relevance in Contemporary Nigeria", *IRORO: Journal of Arts*, Vol. 11. Nos. 1&2, 2006, pp. 341-342.

- Also see A.I. Okoduwa, *Studies in Esan History and Culture*, (Benin City: Omo-Uwesan Publishers Ltd. 1997).
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  27. P. Iroegbu, *The Kpim of Predicament*, (Ibadan: Hope Publications, 2004), p. 34.
  28. J. Longrigg, *Greek Rational Medicine: Philosophy and Medicine from Alcmaeon to the Alexandrians*, (London: Routledge, 1993), p. 6.
  29. See *Ibid.*, pp. 9, 11.
  30. *Ibid.*, p. 14.
  31. *Ibid.*, p. 15.