

## **Traditional Healing Research in West Africa: Respect, Appreciation, and Lessons Applied to Counselling**

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I have been visiting West Africa for over a quarter of a century. I became interested in Côte d'Ivoire, Senegal, and Burkina Faso in the late Seventies. Several students from these and other African countries were enrolled in my graduate classes in counseling at George Washington University where I was a professor. Although they were excited about counseling and psychotherapy, the American way of helping, at the same time they were eager to tell me about traditional healing which they and their families knew about first-hand.

A student from Côte d'Ivoire invited me to visit his country, where the majority of the people use traditional healing for help when they have problems in living. After three or four years of library research preparing for field research on the topic, I visited Côte d'Ivoire, Burkina Faso, and Senegal. My graduate students put me in touch with their relatives and friends who helped me schedule interviews with people in cities and villages in West Africa. I visited families, dined with them, attended church services with them, and witnessed healers in consultation with their clients wherever and whenever possible.

During my first trip to Côte d'Ivoire, I took my note pads and tape recorder with me. However, I soon discovered that the interview research methods I used in the United States often caused anxiety in my African interviewees. On subsequent trips, I left at home all such paraphernalia. My interviewees were more comfortable talking with me without microphones in their face. I made my notes at the end of each day.

French is the official language of the countries I visited. Although I studied French for many years and have travelled in France, I discovered that most people in the villages spoke only their ethnic language. I was therefore forced to find an interpreter who

spoke the official language of the country, the ethnic language of the village, and sometimes English. I also learned to enjoy homemade beer, which my village hosts offered me with great pride. I could see the disappointment on their face when I showed little pleasure in drinking their beer. After several years of library research in the United States, France, and Africa, I started sharing my findings by publishing articles and chapters in books, in order to share some of the findings of what was to me an exciting area of research. Even so, I recognized that the more I learned and shared with others, the more I needed to learn about traditional Africa. Although traditional healing and healers may appear unusual to some Westerners, it is the only health care approximately 80% of African people know, as the World Health Organization points out (Vontress, 1999). So during the last several years, I have joined other academics throughout the world that are interested in learning how Western healers and their traditional counterparts can work together to benefit people who need their services most.

In order to understand traditional healing, I needed to understand the people who use it. That means that I needed to become aware of and sensitive to their culture. Healing is only one of the institutions that fit together like a puzzle to make up what is usually called culture. One piece fits together with all other social units in the society. Overarching each institution is a *Weltanschauung* or worldview that hovers their way of life. Animism pervades most African societies (Vontress, 2005). It is the belief that a general spirit unifies all things—animate and inanimate. People never die; their spirit lingers to merge with and influence the life of those who live. This belief explains in part why mediums or healers who have the ability to communicate with departed elders are important to Africans, even college graduates who may, in talking with Westerners, dismiss traditional beliefs as outdated. However, an Ivorian journalist indicated that Félix Houphouët-Boigny, the first president of Côte d'Ivoire from 1960 to 1993, although a physician and politician, often consulted a Western trained physician first and a traditional healer second when he had a physical, psychological, or spiritual problem, just to “make sure.”

There are many traditional healers known by different names in different ethnic groups (Vontress, 1991). However, they often use the same understandings, tools, and techniques. The treatment

procedures include communication with departed elders, touch therapy, advice giving, herbalism, shock therapy, music, drumming, fetishes, and drinking tea made from ingredients used to write Koran verses on leaves or paper. So when discussions emerge regarding blending Western and traditional techniques, it is not always clear whether there is interest in integrating traditional techniques with Western ones, or vice versa. During my trips to West Africa, I often heard Western trained physicians express their concern about traditional healers not prescribing the right dosage for specific conditions. Another uneasiness of physicians is the sanitation of instruments or tools used by their traditional counterparts. During the last few years some of these and similar concerns have been addressed by a few African governments that have set up traditional departments of medicine next to departments of Western medicine in medical colleges.

Now that traditional healing is recognized as a significant contributor to world health, professionals in many branches of helping contribute to research directed toward merging effectively their insights with divergent insights of all medical providers (Offiong, 1999). After a quarter of a century of what I now realize to be cursory research, I know that much more research is needed. For many years, we in counseling have advocated that counselors and clients be authentic in consultation. As a cross-cultural therapist and researcher, I am also concerned about cultural authenticity when therapists work with clients from cultures other than their own. Can or should Western therapists attempt to use techniques used in a culture new to them? For example, I once worked in a clinic with a therapist who used what he described as “voodoo techniques” with a client born and socialized in Haiti. According to him, in order to help the client, he bought a doll and stuck pins in it at the client’s next counseling session. He had never been to Haiti and only knew about the culture and some of the psychotherapeutic treatment methods from what the client had told him. It appears that such a practice presents questions concerning ethics. Therapists, Western or traditional, need training in the use of therapeutic techniques used in their own culture and that of traditional cultures as well. Otherwise, there is danger of harming clients. The belief that a client holds about treatment methodology may be the most important ingredient of therapeutic intervention.

The most important thing that I took away from my research on traditional healing is a tremendous respect and appreciation that I now have for the holistic approach of helping. I have been able to apply it in counseling all of my clients, regardless of where they were born and socialized. By holistic, I mean diagnosing and treating holistically. I try to understand a client's relationship with the universe, others, and him or herself. The universe includes the spirit world, which is important to many Africans, especially people in rural communities (Myss, 1996). Maintaining good rapport with others, living and dead, is important for good mental, physical, and spiritual wellbeing. Finally, knowing the self includes not only an understanding of the self, but surroundings that affect the wellbeing of the self.

During the last few years professional ethics have become progressively significant to therapeutic professionals who play important roles in the lives of consumers. In the United States and other developed countries, rules governing the conduct, transactions, and relationships within helping professions and their publics are often reinforced by law. This important area has not been adequately addressed in cross-cultural counseling or traditional healing. With the advent of this new journal, I am sure that scholars throughout the world will address this topic. It is a challenging undertaking because, in the West as in West Africa, there is not just one category of helping, but several. For example, in the United States, there is not just one set of ethics for one profession, but a set for each category of helping. There is a set for social workers, counselors, psychologists, psychiatrists, and other categories of professionals. In some cases in some countries, there are professional ethics for traditional healers. However, professional associations such as the ones that exist in the United States are not yet developed, except in a few cases. Professional ethics are usually products of the associations.

Professional ethics implies therapeutic behavior just as do techniques. Both involve ways of performing the therapeutic enterprise that are approved by professional colleagues. In the U.S. professional ethics may also be reinforced by law. Although some village healers touch and massage young couples during intercourse to help them conceive, ethics and law forbid such a therapeutic methodology, except perhaps in the case of a few medical providers.

Each professional must be aware of what he or she can ethically do to keep his or her license.

In Burkina Faso, I was surprised to learn from a traditional healer that he kept one of his clients with his family for several days until he could be sure that the young woman was cured. I have never heard of an American counselor, physician, or social worker treating the client as a family member either as a part of treatment or follow-up. Cross-cultural ethics is a topic that few if any authorities have addressed. I have not heard any of my interviewees discuss it. However, it is an area that I expect to hear more about in the future.

I am pleased to be recognized by this new journal devoted to a worthy topic. The exchange of ideas encouraged and promoted by it is an exciting venture. The research that flows from the ideas expressed on the pages will be invaluable to all psychotherapeutic professionals and politicians interested in the wellbeing of everybody in the world.

## References

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