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**STRATEGIES FOR ENHANCING INFORMATION ACCESS TO TRADITIONAL
MEDICAL PRACTITIONERS TO AID HEALTH CARE DELIVERY IN NIGERIA.**

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STRATEGIES FOR ENHANCING INFORMATION ACCESS TO TRADITIONAL MEDICAL PRACTITIONERS TO AID HEALTH CARE DELIVERY IN NIGERIA.

Abstract

The purpose of this review is to establish a conceptual frame work on the traditional medicine practice which can also means folk medicine, native healing, local or indigenous healthcare practice, etc. This article also discussed much about traditional medical practitioners (healers). Different categories of traditional healers were also discussed including the importance and challenges of tradition medicine practice. These challenges include the array of mystery and secrecy surrounding traditional healthcare delivery, difficulty of modern health care practitioners in accepting traditional medical healthcare practice due to the unorthodox nature of traditional medical practice. Some of the other problems include the low level of education and literacy amongst traditional medicine practitioners, and failure of government to properly regulate the traditional medical practice. Furthermore, the study also gave conceptual definitions of information and roles of information in health care delivery. Information is indispensable for effective management and development of health care delivery services, therefore, it is considered as an important asset or resource. Grey, adequate and relevant information is needed regarding population characteristic and output of health care activities. Additionally, the study suggested five basic steps to be adopted to help the traditional medical practitioners have access to information resources since their illiteracy level is very high. Some of these steps include the use of focal group discussion, translation of existing information into local language, use of posters, handbills, Radio jingles, Television broadcast and use of community library and information centers amongst others to make information readily available to these medical health practitioners.

Keywords; *Information access, traditional medical practice, traditional medical practitioners, primary healthcare delivery, librarians, information dissemination.*

Introduction:

Traditional medicine variously known as ethno-medicine, folk medicine, native healing, or complementary and alternative medicine is the oldest form of health care system that has stood the test of time. It is an ancient culture-bound method of healing that humans have used to cope and deal with various diseases that have threatened their existence and survival (Abdullahi, 2011). Consequently, different societies have evolved different forms of indigenous healing methods that are captured under the broad concept of traditional medicine. E.g. Chinese, Indian and African traditional medicines. This explains the reason there is no universally accepted definition of the term.

Traditional medicine according to World Health Organization (2002), is the sum total of all knowledge and practices, whether explicable or not, used in diagnosis, prevention and elimination of physical, mental, or social imbalance relying exclusively on practical experience and observation handed down from generation to generation whether verbally or written. Traditional healers on the other hand according to WHO (2000) means a person who is recognized by the community where he or she lives as someone competent to provide health care by using animal, plant and mineral substances and other methods based on social, cultural and religious practice.

There are strong indications that traditional health care systems are still in use by majority of the people not only in Africa but across the world (Cook, 2009). Examples of traditional healers are herbalists, diviners, faith healers, traditional surgeons etc. All these traditional healers need information to support their work.

Traditional medicine play important roles in human society from past centuries to date. Traditional medical practice illustrates the medical knowledge practices, which improved for several centuries ago within a variety of societies before the era of modern Allopathic or Homopathic Medicine began (Alam 2011). He went on further to say that among non-industrialized societies, the use of herbal medicine to heal disease is almost universal. People from countries in Latin America, Asia, Africa, even North America are still using herbal products to fulfill their regular health related necessities. Adesina (2014) supported Alam (2011) notion by showing that nearly 75-80 percent of the population in Africa uses traditional medicine for their needs. Owing to the fact that traditional medicine is accessible, affordable, culturally acceptable, socially sanctioned, and easy to prepare with little or no side effects, most people prefer it to the exorbitantly priced health care services. There are some hazardous side effect of this medication and their limitations in the domain of holistic health, especially in African society. Therefore steady information on traditional health care delivery is needed.

Information, according to (Carstensil 1990), is the data that is accurate and timely specific and organized for a purpose, presented within a context that gives it meaning and relevance, and can lead to an increase in understanding and decrease in uncertainty. Information is indispensable for effective management and development of health services and therefore considered as an important operational asset or resources. Anything that has advantage may also have disadvantage. The idea that just because traditional medicine products came from natural sources they are completely safe is dangerously false. In order words, not everything that is natural are safe, traditional medicine products must be used judiciously and prescriptively, just like any other medication, and with awareness of

potential herbs and herb drug interaction. Traditional medicine practitioners and even users are aware that there could be potential risks and problems associated with product used. Some of these problems are as follows: A lot of secrecy surrounds traditional health care, Evidence of goodness and reliance on the medicine is not prominent enough for one to rely on, Level of education of traditional medical practitioners are too poor, Government do not cover them properly in law making for poor manufacturing practice and lack of product standardization, contamination of products, substitution or incorrect preparation of dosage, environmental factors, some of them may not even know the content/ ingredient of the herbs used. In this first decade of the 21st century, immense advances in human well being coexist with extreme deprivation in many parts of the world. Inequities in availability, accessibility and affordability of health information have increased, between as well as within populations of the world.

In recent years there has been a growing interest in traditional medicine and their relevance to public health both in developed and developing countries. Diversity, easy accessibility, broad continuity, relative low cost, low levels of technological input, relatively low side effects and growing economic importance are some of the positive features of traditional medicine. In this context, there is a critical need to mainstream traditional medicine practice into public health care to achieve the objective of improved access to health care facilities.

Poor or inadequate supply and utilization of information to traditional health practitioners poses a lot of problem in primary health care delivery in Nigeria. The question now is what actually would be the solution to inadequate supply and utilization of information to traditional healers?

Objectives of the study

To determine how traditional healers could be assisted in information related to their practice

To know problems associated with the traditional medicine practice.

To give suggestions on how to solve the identified problems.

Significance of the study

This study is significant to traditional healers because information would be supplied to them in a way they will understand it. It would also be of great importance to individuals as a result the standard of traditional medicine would be improved.

Literature Review

Traditional medicine is a cultural gem of various communities around the world and encompasses all kinds of folk medicine, unconventional medicine and indeed any therapeutical method that had been handed down by the traditional, community or ethnic group (Adesina 2014). World Health Organization (WHO, 2011), defined traditional medicine as medicines composed of herbs, herbal materials, herbal preparations and finished herbal products, that contain active ingredients, such as parts of plants, or other plant materials, or combinations thereof. Traditional medicines may also use animal parts and / or minerals. They are used in every country in the world, and have been relied upon to support, promote, retain and regain human health for millennias (WHO, 1976). Traditional medicine used to be the dominant medical care available to millions of people in Africa in both rural and urban communities (Abdullahi, 2011). However, the arrival of the Europeans marked a significant turning point in the history of this age-long tradition and culture. According to

Ugah (2010), traditional medicine variously known as ethno-medicine, folk medicine, native healing, on contemporary and alternative medicine is the oldest form of health care system that has stood the test of time.

Traditional medicinal practitioners are people without education, who have rather received knowledge of medicinal plants and their effects on the human body from their forebears. They have a deep and personal involvement in the healing process and protect the therapeutic knowledge by keeping it a secret. According to Alfred (1999), the practitioners of traditional medicine specialize in particular areas of their profession such as herbalists, diviners, midwives etc. Importance of traditional healers and remedies made from indigenous plants play a crucial role in the health of millions (Irwin 2000). Traditional healers as defined by the WHO (2001) is a person who is recognized by the community in which he lives as competent to provide health care by using vegetable, animal and mineral substances and certain other methods based on social, cultural and religious background, as well as on the knowledge, attributes and beliefs that are prevalent in the community, recording physical, mental and social well-being and the cessation of disease and disability. With these descriptions various forms of medicines and therapies such as herbal medicine, massage, home therapy, hydrotherapy, mind and spirit therapies etc are a few elements of traditional medicine. It shows that a large country like Nigeria, with diverse culture and traditions, should be rich in traditional medicine and should have eminent and respected traditional healers to take care of the population. Traditional medicine is defined as drugs made from herbs or plants and can be said to possess raw materials for medicine (Osemene et al 2011). A traditional healer may be able to perform many functions thereby becoming more versatile as a healer. According to Krige (2014) traditional healer is described as

someone who is recognized by the community in which he lives as competent to provide health care by using vegetable, animal and mineral substance and certain other methods based on the social, cultural and religious background as well as the prevailing knowledge, attitudes and beliefs regarding physical, mental and social well-being and the causation of disease and disability in the community. World Health Organization (2002: 7) sees traditional medicines 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.

The diagnosis of disease by a traditional healer is based on an understanding of the concept that, it is not limited to direct observation tests (Neba, 2011). Many supernatural methods are used, such as reading an egg and cola nut seeds. Smet (2000) was of the opinion that in the people's culture healing hands are a gift from the gods. The various categories of traditional healers, perhaps a specialist known in traditional medicine today includes:

Herbalists: Herbalists use mainly herbs that are medicinal plants or parts such plants include whole root, stem, leaves, stem bark or root bark, flowers, fruits, seeds, but sometimes animal parts.

Traditional surgeon: Various forms of surgery recognized in traditional care includes the giving of tribal marks, male and female circumcision (Clitoridectomy), Removal of Whitlow, cutting of the Vulva (Vulvectomy), and Bone setters;

Traditional Medicinal Ingredient Dealers: These dealers, more often women, are involved in buying and selling of plants, animals and insects and minerals used in making herbal preparations.

Traditional psychiatrists: This group specializes mainly in the treatment of lunatics and those with mental disorders.

Practitioners of therapeutic occultism: These practitioners include diviners or fortune tellers, who may be seers, Alfas and priests, and use supernatural or mysterious forces, incantations, rituals associated with the community's religious worship and adopt all sorts of, inexplicable thing to treat various disease.

Midwife: they specialize in prenatal care, birthing assistance and after care.

Importance of traditional medicine

Importance of traditional medicine cannot be overemphasized, as such, Hill (2003), stated that traditional healing has been a practices designed to promote mental, physical and spiritual well-being that are based on beliefs which go back to the time before the spread of Western scientific bio-medicine. The appropriation of culture has had impacts on tradition as we currently understand it. World Health Organization (2002) made it known that populations throughout Africa, Asia and Latin America use traditional medicine to help meet their primary health care needs. As the economic importance of traditional knowledge and medicinal plants based products and services are growing, they provide employment opportunities to various people and at the same time it raises concerns about availability of medicinal plants, increasing costs of the herbal products in domestic market especially for marginalized population and a dilution of classical practices. In post-independence Africa, efforts have been made to recognize traditional medicine as important aspect of health care delivery system in Africa. World Health Organization (2002) gave an instance with Nigeria by stating that in the 1980's, policies were put in place to accredit and register native healers and regulate their practice. WHO (2001) stated that in 1981, the national council on health

unanimously approved the establishment of a National Traditional Healers Board at the federal level involving representatives of federal and state government. Under the present care reform of the Federal Government of Nigeria, traditional medicine is purportedly recognized as an important component of health care delivery system especially at the primary care level (Oyelacin, 2009). However, for such health care services to be improved there is the need for exchange of information for the purpose of standardizing the product.

Information supply to traditional healers

Literature is replete with dynamic roles of information in addressing social problems in rural area. Libraries has been identified as the propeller of information dissemination for the overall national development. It is the intermediary between official information and the citizens (Ezema, 2010). The library is usually assigned with the role of information dissemination for rural development in most societies. Unfortunately there is a paucity of public libraries in rural areas of Nigeria Chijioke (1989). She therefore stressed the need for community information services where the library would play reference roles to the community information workers who would render the vital information services to the rural dwellers. Ania (2006), identifies the link between the library and information extension officers in providing adequate and timely information to the primary health care centers. This link remains pivotal in disseminating health information in rural communities. The rural dwellers are dominated by greater percentage of illiterates (Quadri, 2004). As a result, the form and medium of information to the inhabitants have to reflect their illiteracy level. Die (2000), has regretted that the form and medium of information to the rural dwellers are inadequate since they appear in language and formats alien to them. Oral information dissemination appears more effective than the printed forms in the rural area. Davis (2001),

has agreed that African culture is predominately oral where the centre of activities is the village square.

Challenges

Traditional medicines as a viable health care option face a number of setbacks in Nigeria. There setbacks are as follows:

There is an aura of mystery and secrecy surrounding traditional healthcare. Also, secrecy may be understandable as a way in which traditional health practitioners guard their valuable health care knowledge on which their families depend. Hill (2003), stated that this problem has contributed to modern health practitioners to be finding it difficult to accept traditional medicine due to religious, magical or cultural belief involved. The modern health practitioners perceive belief to be contrary to sound medical science, and for some, their Christian religious conscience.

There is the lack of evidence. In spite of the acknowledgement of the continued utilization of traditional medicine and its effectiveness in management of various health problems is not documented. As such, the utilization of traditional medicine continues to depend on undocumented testimonies of patients often spread through social network.

Low Level of Education: Most traditional health practitioners have a low level of formal education. They received their training through informal means and apprenticeship. As such, most of their knowledge and practices are not documented. This poor educational level has led to poor record keeping. Furthermore, most of them have little or no formal training in basic health issues.

Government has failed in its regulatory role. This is evidenced by the lack of adequate supervision and control of the activities of the traditional health practitioners, this

has resulted in a sector being entered by quack (Yeepang, 2006). Some give imagined testimonies of people where they had previously successfully healed.

Solution to Identified Problems

Some of these mysterious acts and secrecy surrounding traditional health care should be corrected only if they can be converted to Christians as much as they worship deities or be half Christians half traditionalists the problem of secrecy will remain.

Acknowledgements given to traditional medicinal practitioners are always secret and not open. They cannot expose their values to the public like orthodox medicine. Evidence of traditional medicine impact on public health delivery is hidden. Avenue should be created to give evidence of good work by the traditional medicine practitioners.

Adult education centers should be established in rural part of the country to upgrade their literate level. Good teachers who would be able to teach in English and translate to mother tongues are needed in such schools.

Government should consider the traditional medicine healers while making health policy. They should also be giving them money in form of loan, power supply and health care equipment to standardize and preserve their products.

Methodology

The data for the study was collected through the use of interview alone since the level of education of the respondents is too low and cannot answer questionnaire.

Result and Discussion

The interview conducted showed that the major problems of traditional health practitioner to assess and utilize medical information is their low level of education and lack of fund to buy modern appliances to safe guide their products.

Since there is existing information on traditional medical practices in primary health care delivery system. The challenge therefore is the ability to adopt information packaging techniques which would assist in redesigning the information to address the information needs of the traditional healers in rural areas of Nigeria. As the interview was been reviewed, it was observed that the level of illiteracy in rural areas of Nigeria is too high and does not support reading and writing. Therefore, the following steps should be followed to help them meet up with information demand of their profession.

Step 1: Transforming Printed Information into Oral Form:

Oral information delivery is the most suitable means of reaching out to the traditional healers in Nigeria. Much of the existing information on traditional medical practitioners appears mainly in printed forms and often through mediums that are not easily accessible to the rural traditional medicine practitioners.

Librarians trained in the skills of information storage, retrieval and dissemination would be effective anchors to the traditional health practitioners.

Step 2: Use of focal group discussion:

Information related to the activities of traditional healing and their victors and victims can be repackaged in form of stories, songs and drama, and presented to different groups of traditional medical practitioner.

Step 3: Translation of Existing information to local languages:

Another approach in information packaging to rural traditional health practitioners is the translation of existing information on traditional medicine and its production and applications which appears in foreign language into local language. The intention here is to ensure that such useful information is disseminated to the target audience with ease. The

information professionals and delegates from Nigeria Medical Association should be involved in this translation project.

Step 4: Use of Posters/Handbills:

The techniques here are to transform information on traditional medicine and medicinal plants which is not accessible to the rural traditional medicinal dealers into posters and handbills to meet their information needs. The posters should be designed, put in strategic areas e.g. village square, churches, schools and also need information professionals to be explaining those pictures.

Step 5: Radio Programmes and Jingles:

A major advantage of packaging information through radio is the depth of its penetration, affordability, easy and cheap to power and operate. Therefore much of the information on traditional medicine imprint and online resources would be repackaged in local language and disseminate through the radio.

Step 5: Television/Home Videos:

The use of motion pictures creates a near real life situation and therefore, deepens the penetration of the message on traditional medicine and healers. The popularity of home videos and other television Programme on the viewing culture of Nigeria is no longer in doubt.

Step 6: The use of community library and information centers:

such information centers include hospitals, churches, schools, village, square, civic centers, market etc. These information centers are heavily depended on for effective information dissemination in rural areas.

Recommendations

1. All traditional medical dealers should obtain at list Senior school certificate (WAEC) in order to be able to read, write and make use of the libraries.
2. Development of curriculum that could be used by elementary and post-secondary school on the topics of traditional medicine.
3. Professional development and conferencing of healers/elders through accessing universities, health facilities and stakeholders of traditional medicine that support the elders/healers desire to enhance their skills learn from one another and develop solid networks.
4. All traditional medicine has to fulfill the same uniform standards, tests and trails before being made available to the public.
5. More resources and infrastructure need to be committed and promote the use of safe and efficacious traditional medicines.
6. There is a need for a campaign that raises awareness of the rights of patients to adequate care, treatment and support by traditional healers.
7. It is vital that the traditional healing profession be regulated and be brought into the ambit of current legislation.

Conclusion

It is the firm belief that if these information packaging steps on traditional medical practitioners would be properly followed together with the recommendations, the problems of traditional medicine, traditional medicine practitioners and their clientele would be over.

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