Traditional Medicine

Traditional healers in Casamance, Senegal
Sékou Baldé & Claude Sterck

As part of a long-standing effort to foster collaboration between Western and traditional health workers, the writers talked with six animist healers and marabouts about their work. They begin with some general information about traditional healing in Casamance, a region in southern Senegal.

Most animist traditional healers in Senegal live very simply in a normal dwelling, often with a family, and receive their patients at home, either on the porch or in a room set aside for that purpose. Almost every village has a healer, though they each have their own range of conditions they feel qualified to treat. Usually they acquire patients through recognition conveyed by word of mouth, rather than by advertising. They do not have fixed times for consultations, and, if necessary, patients sit on a bench outside and wait for their turn. There is not much attempt at privacy, perhaps because the interest of onlookers is seen as basically benevolent rather than nosy.

Some forms of Western medicine are recognized by animists: for instance, it is not uncommon for a specialist in fractures to send an injured patient to the nearest dispensary for an antitetanus injection before proceeding to treat him with sacred oils and incantations. In addition to herbal remedies, the use of a fetish – an object considered to have inherent magical or spiritual powers – is a common feature of treatment in this tradition.

The term “healer” is used for those whose art is rooted in animism, whereas those who practise healing arts derived from Muslim religious traditions are called “marabouts”. Marabouts often occupy a more substantial establishment, built around a square yard with a consultation room on one side, rooms for patients on the second, for disciples on the third, and for the housekeeper and his family on the fourth. Healing is only a part of the marabout’s role as a religious, and he is often in charge of a Koranic school as well.

Such things tend to create a more ceremonious atmosphere around the marabout, and he is usually less accessible than his animist confrere. Often in combination with herbal treatments, the marabout practises various kinds of faith healing based on the Koran. In some cases the patient may be asked literally to imbibe a part of the sacred text, by drinking water which has been poured over the relevant words written on a plate, dissolving the ink. Naturally, there is much disagreement over whether such practices are purely sym-

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bolic or mysteriously efficacious in a more physical way. Cures from marabouts can take a relatively long time to carry out, and treatment may go on for several months.

The authors’ main interest was in healers and marabouts who dealt with mental disorders. Sékou Baldé selected some of these on the basis of his own experience, assuring them ahead of time that the presence of a Western academic would not involve disrespect for their entirely different ways of seeing things and approaching health problems. The following notes offer only some glimpses of the six practitioners visited, but it is hoped that they might contribute to our understanding of this complex field.

**Notes on the visits**

- El Hadji Diay Mâne, a marabout in Mawa, saw five main causes of mental illness: evil spells cast by enemies, encounters with evil spirits, a natural predisposition combined with environmental factors, deeply upsetting experiences, and head injuries. He introduced us to a patient with paranoiac symptoms apparently caused by drug addiction and spells cast by hostile neighbours, and said he was responding well to Koranic treatment.

- Jean-Pierre Mendji, an anist in Edioungou, specializes in botany and psychotherapy, and showed us 12 plants, explaining their therapeutic uses. He stressed the importance of modesty, and the willingness to pass on difficult cases to those better able to treat them, rather than risk the indignity of failing. Like many healers, he referred to spiritual guidance conveyed through dreams to decide whether he was competent to handle a given case or not. He deplored the existence of evil spells but said it was a social phenomenon one had to get used to.

- Prosper Manga, another anist, also in Edioungou, specializes in bone and joint injuries, and also treats head injuries and the victims of evil spells. He is a very old and widely respected practitioner, with great charisma and showing deep compassion towards his patients. He attributes the effectiveness of his treatment to the power of the fetish and the support of healers in the afterlife.

- Coly Malavy, who combines anist and marabout features in his diagnoses and treatments, is also a herbalist, and works at Ziguinchor and Cap Skirring. Interestingly, he sees a link between some mental disorders and occult practices, for instance connecting delirium with fear of cannibalism. He is also an effective worker against tobacco and alcohol dependence.

- Thérésa Malou is an anist healer in Ziguinchor. She got her knowledge from her father, and says humbly that she is “the last resort” for her patients. She has an air of great serenity, and sees herself as a channel for the healing power of the “Supreme Being”. She does not take patients in to stay at her house, but they return to visit her with great persistence until they are cured or their wish (for instance for fertility) is granted.

- El Hadji Becaye Diaby is a marabout who practises near Bounkling, about 110 km from Ziguinchor. The treatment he gives is based essentially on Koranic prayer, administered with a high degree of ritual and rigour. It also appears to meet with
great success. He introduced us to two patients who had been diagnosed previously as having severe psychiatric disorders and been treated unsuccessfully with powerful neuroleptic drugs. One of them appeared to be completely cured and the other well on the way to recovery.

**Observations**

Despite the great differences between the two main traditions they represented, we were struck by some of the similarities between these practitioners. For instance, all of them referred to a transcendent power, typically through dreams, to determine whether they were competent to cure prospective patients. They all took seriously the possibility that the disorder could have a non-natural cause, such as an encounter with some form of evil. As is characteristic of African traditional medicine, they focused on the sick person as a whole, rather than just the complaint. Both marabouts and animists use herbal remedies, and botany is an important part of their knowledge. This is especially so for animists, who also use various animal and mineral properties to effect a cure.

Animists usually require their patients to make a sacrifice such as killing a cock or a ram, or providing palm wine to sprinkle on the fetish. An analogy may be drawn between this and the use by marabouts of water that has been poured over specially written words from the Koran. In both cases the appropriate item is carefully selected according to the nature and condition of the patient, and in both the elusive element of “faith” plays an important part. Explanations for success range in both cases from pure auto-suggestion at one extreme to pure magic at the other. It is also sometimes argued that such practices do not differ qualitatively from the Western “symbolic manoeuvre” of psychoanalysis: they depend on faith in the healer; they lead the patient towards a deeper self-understanding; and success builds up confidence in the health services.