

# Traditional Medicine

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## ***Psychiatrists and folk healers in Malaysia***

*M.S. Razali*

*Contrasting beliefs often make cooperation between folk healers and modern doctors seem impossible. In the field of mental health, where communication is of such central importance, better mutual understanding is especially desirable. After reviewing the complexities involved, the author makes some suggestions on how the two kinds of practitioner could help each other.*

The indigenous Malay medicine men are called *bomohs*. It is not known how many of them there are as, like other practitioners of traditional medicine in Malaysia, they are not officially registered. They have their own organization but the majority of them do not belong to it, and many only practise part-time. They appear to be especially numerous in Kelantan, in West Malaysia, probably because the population in that state is 90% Malay. Other alternative medicines that are popular in this country include homoeopathy, acupuncture, herbal remedies and spiritualism. At the same time, Malaysia has one of the most highly developed modern systems of medical care in the region, and about 90% of the population are entitled to free treatment. The author, having had close contact with *bomohs* in his childhood and youth, was trained in Western medicine, and is therefore well placed to see how the two systems could complement each other.

### ***Services offered by the bomoh***

An important specialization for *bomohs* is mental health. In rural areas, psychiatric help is usually sought first from the *bomoh* and only later at a modern facility if the disorder persists. As there are only 75 psychiatrists in Malaysia, most of whom work in Kuala Lumpur, this may reflect a problem of access as well as a cultural preference. Some illnesses, such as psychotic and depressive disorders, are more difficult to treat with modern methods if the patient presents late, and in such cases good cooperation between the traditional and the modern practitioner would obviously be highly beneficial. Both kinds of doctor should be aware of their own and each other's strengths and weaknesses and consult each other as necessary. The *bomoh*, as a primary health care worker, should know which cases are best managed by a psychiatrist, and refer them immediately.

*Bomohs* generally see illnesses as being caused by physical factors, supernatural factors, and predispositions. Physical factors include certain foods, heat and cold, microorganisms, physical trauma, brain impairment and wind. They have their own effect but are often seen

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Dr Razali is Head of the Department of Psychiatry at the School of Medical Sciences of the Universiti Sains Malaysia, 16150 Kubang Kerian, Kelantan, Malaysia.

as being affected themselves by supernatural agents. The latter include evil spirits, witchcraft, black magic, and divine anger. Predispositions include loss of vital inner strength (*semangat*), severe mental stress, and immorality. Such conditions, it is believed, make people more vulnerable to natural and supernatural dangers.

Witchcraft is seen as a common cause of illness, often effected by casting a spell on food, drink or other objects with which the victim is in close contact. People who wish to put a curse on their enemies in this way often engage a sorcerer to do it for them. The *bomoh's* task as a healer is then to tell his patient the reason for this attack, and perhaps the name of the attacker as well. Jealousy, anger and revenge are the most commonly cited motives for hostilities of this kind. Once the cause of an illness has been found, a treatment is prescribed to remove or neutralize it. Sometimes diagnosis and treatment are carried out simultaneously, and can include going into a trance, carrying out an exorcism, communicating with spirits, reciting special prayers or verses from the Koran, and examining horoscopes.

Two of the commonest means of healing used by *bomohs* are holy water and incantations. The use of talismans is also common, as well as that of herbs, sometimes added to water to bathe the body. If the illness is thought to be caused by ghosts or evil spirits, efforts are made to drive out or defeat them. If it appears to be caused by a spell, the task is to find out the ingredients of the spell and remove or neutralize them. Some *bomohs* are thought to be helped by jinn (supernatural beings) in treating their patients and driving away bad spirits. In general, the aim is to find and deal with the cause of the illness. In some cases, however, the patient shows no improvement although the healer claims to have removed the cause.

### **Attitudes towards modern medicine**

*Bomohs* are trained through years of apprenticeship to an established practitioner. The master passes on his spiritual power to the pupil, who must accept various spiritual obligations, such as to lead a pious life and to use

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his art only for the good of mankind. Some *bomohs* in Kelantan appear to have acquired the art after a prolonged illness. The illness is seen as a trial, and is followed by a vision of a saint who leads the sufferer into a supernatural world in which he or she learns the art of healing. In spite of this quite different background and training, *bomohs* do not usually see their approach as conflicting with modern medicine, but rather as an alternative. The common view is that modern methods are good for physical illnesses but powerless against black magic or other supernatural causes of illness. For this reason, most *bomohs* are sceptical about cooperating with modern psychiatrists, though they show a keen interest in the methods and procedures used. Sometimes they express pride in their ability to communicate with spirits, and feel it gives them a clear advantage.

The popular belief that *bomohs* are particularly well equipped to handle mental disorders is reflected in a study the author made in 1989 (1): 73% of the Malay psychiatric patients in a sample surveyed had consulted a *bomoh* first, as opposed to only 25% of those using general outpatient services. In addition, most of the psychiatric patients who had not yet consulted a *bomoh* said they would do so if their current treatment failed.

Researchers have observed that mild temporary relief is frequently obtained from *bomohs* for neurotic disorders but much less often for psychotic illnesses. Chong (2) and Sandhu (3) have noted the success of traditional healers in

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handling hysterical and neurotic cases, and Murphy (4) came to the conclusion that folk healers could be as effective as medical practitioners for certain types of disorders in certain cultural settings. Like other writers, he stressed the important part played by cultural beliefs in emotional conflicts.

### ***Prospects for cooperation***

It seems desirable that *bomohs* should recognize their limitations in certain areas such as psychotic illnesses, and at the same time psychiatrists should learn as much as possible about the cultural and religious beliefs of their patients. In this domain they are usually much less able to communicate effectively than the *bomohs*. A preliminary requirement for cooperation between these two kinds of practitioner would be open-minded discussion in a spirit of mutual respect.

Traditional birth attendants have been successfully integrated into the rural health ser-

vices, but to do the same with the *bomohs* is much more difficult because of the wide variety of training and practices involved. A first step would be to form a body to register *bomohs* and supervise their activities. Then they could be given a short introductory course on modern medicine. The third step would be to organize discussions between the traditional and modern practitioners on their respective roles, expertise and limitations. This would make it possible to promote mutual referral. Discussions of particular cases would also help to promote better understanding and cooperation. In such a climate of collegiality, it would also be easier for patients and their families to make a wise decision about what kind of help to seek. ■

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