Nomads in the Horn of Africa

Mayeh Abu Omar & Maymuna Muhiddin Omar

For the nomads in the Horn of Africa, health is more than the simple absence of illness. It is strength and endurance as well as resistance to illness, while “medicine” is anything which cures a specific ill, or improves or strengthens the body. Its essential ingredient is spiritual though this element usually comes in a material vehicle such as medicinal plants, camel’s milk, spices or honey, certain foods, Western medications and so on. Proper nutrition, at its best, has medicinal effects. Notable in this regard is fat, particularly the fat of sheep’s tail, which is given to strengthen convalescents and mothers immediately after birth. Meat, fat of all kinds, ghee, and whole milk are the best body-building foods. Their frequent consumption helps to build health, including resistance to disease.

The majority of nomadic women in Somalia undergo circumcision, or genital mutilation, a traditional practice which may result in medical complications. At a private family ceremony performed by the women, girls aged between four and eight have their clitoris and labia excised without an anaesthetic and the wound is covered with myrrh, the resinous product of a local tree. Thorns from the acacia bush are used to close the wound, and the legs are bound from hip to ankle for two weeks. During one 12-month period, 118 women were admitted to the maternity hospital in Mogadishu with complications of female genital mutilation.

Family health is largely a matter of “old women’s wisdom”, which is shared and practised among these communities. Therefore, firstly and most easily, a sick person consults women relatives and neighbours about illness. If a health matter is not cleared up at this level, and a traditional or religious practitioner is within reach, this is likely to be the next step.

Certain treatments performed by these highly trusted native doctors have a definite curative effect on the ailments for which they are prescribed. After all, traditional healers have, over generations, passed on the secrets and skills of their profession. However, much of the therapeutic effect – which should not be underestimated – is primarily psychological and based on magical practice and the enormous prestige and confidence which nomadic people bestow on the medicine man.

Herbalists and birth attendants

Among the nomadic Muslims in the Horn of Africa, traditional healers function as a kind of “psychiatrist”. The herb specialists employ an impressive armamentarium of nostrums, elixirs, balms – mostly prepared from locally available plants. Almost all deliveries are attended by traditional birth attendants (TBAs) whose practices vary but are characterized by adherence to insanitary practices sanctioned by tradition and superstition. The newborn encounters its first challenge, after the cord is cut and knotted, when it is taken up by the TBA and plunged into a cold-water bath. The TBA may use local herbs to staunch maternal haemorrhage.

Any general strategy aimed at improving health care for the nomads must begin with the healers and TBAs, whose knowledge and skills should not be underestimated. The community ecology and group identity, the epidemiological profile, self-care practices and attitudes, identification of traditional healers and TBAs – all these are important variables to be studied before any health care intervention is planned.

Dr Mayeh Abu Omar is Academic Staff/Researcher, WHO Collaborating Centre for Training and Research in District Health Systems, Istituto Superiore di Sanità, Aula Missiroli, Viale Regina Elena 299, 00161 Rome, Italy, and Dr Maymuna Muhiddin Omar is Research Fellow, Institute of Hygiene, University of Rome “La Sapienza”, Italy.

General strategies to improve health care for nomads should not underestimate the knowledge and skills of healers and traditional birth attendants.