

Review Article

Culture and Holistic Healing as Integral parts of Indigenous Global Health

Mary Olufunmilayo Adekson*

Department of Counselor Education, St. Bonaventure University, USA

*Corresponding author

Mary Olufunmilayo Adekson, Department of Counselor Education, St. Bonaventure University, St. Bonaventure, New York 14778, USA, Email: madekson@sbu.edu

Submitted: 17 February 2017

Accepted: 23 March 2017

Published: 25 March 2017

Copyright

© 2017 Adekson

OPEN ACCESS

Keywords

- Culture
- Holistic health
- Indigenous or traditional healing
- Whole health
- Holistic healing practices
- Indigenous healers
- Western trained practitioners

Abstract

Culture and healers' ability to envision healing from a wholeness perspective are the reasons clients or patients consult indigenous healers. The World Health Organization (WHO) defines health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity". This article sets out to look at ways in which culture and holistic healing stand out as integral avenues of indigenous healing. Since 80 percent of the world's population consult indigenous healers, it is high time we pay attention to their practices and methods of healing and look at reasons that encourage patients and clients to consult them. From different research prospects including this author's, there is a conclusion that culture and utilization of holistic healing are two of the main reasons for this consultation.

INTRODUCTION

Much has been written about traditional or indigenous healers in the last two decades. As Alves and Rosa [1,2] pointed out, with support from WHO, "it is well established that Traditional Medicine™ plays a crucial role in health care for a large part of the population living in developing countries. "In fact, [as these authors continued], for centuries, TM was the only health care system available for the prevention and treatment of diseases in different cultures". But not much research has been done on the prominent roles that culture and holistic healing play in indigenous healing. Therefore, this article, which is a position paper, sets out to discuss culture and holistic healing as the two integral and prominent avenues of traditional or indigenous healing. What therefore is culture?

CULTURE

Culture, simply defined, is the way of life of a particular group of people. Smith and Kehe defined culture as "the characteristic values, behaviors, products, and worldviews of a group of people with a distinct sociocultural context" [3]. Clothing, foods, customs, (beliefs) or traditions, and languages, parenting beliefs, family structure, social hierarchy, gender-role expectations, communication style, and relationship to time and space [4], are all the observable characteristics of culture. Different entities also possess their own culture. We can attribute some special characteristics to healers (both traditional and western) who have a culture of their own. Culture defines our day to day activities including who we visit to care for our physical, emotional, social, mental and spiritual needs. Culture affects the interactions that indigenous healers and other practitioners

have with their clients. Culture also reveals this interaction which clearly brings out a lot about clients and practitioners', self-awareness, worldview and intervention strategies [5]. Posited that culture also affects "the personal attributes of the practitioner- (that is), the kind of person s/he needs to be", and the nature of the interaction that takes place in healing, counseling and the medical relationship. Culture helps the practitioner to focus "on the patient or client within his or her cultural context, using culturally appropriate assessment tools, and having a broad repertoire of interventions" [5]. Culture also affects the professional beliefs, attitudes, knowledge and skills that are used individually, and professionally and within the community. "Culture specific expertise" [5], goes a long way in enhancing the positive relationship between healers and their clients because of the dynamic relationship that ensues from being from the same environment and in most cases from sharing the same culture. This interaction is based on understanding and emanation of imbibed cultural underpinnings from younger days. This in turn reveals what matters to the individual client and in turn reveals how to help the client navigate the way towards wholeness. [5], Wendt and Gone quoting Walls Johnson, Whitbeck and Hoyt [6], reiterated that, "more recently, American Indians with a variety of psychiatric problems have been shown to prefer culturally traditional services rather than formal medical services". From the interactions in two major researches that the author of this article had with Native American and First Nation Canadian healers and with the Yoruba traditional healers [7], clients had preference for consulting indigenous healers because they speak the same language, grew up in similar or the same communities and share the same culture with one another. This last aspect is important, because both healers and clients are from the same

environment and share the same culture. Sodi and Bojuwoye [8] contended that “culture influences conceptualizations about illness, health and healthcare”, and quoting Jackson [9], that “culture is an important factor in healthcare”. Sodi and Bojuwoye also added that, “the most significant instrument in healing or healthcare delivery is the client’s culture”. Good and Good noted that the meaning of illness (or health) for an individual is grounded in the network of meanings of an illness (or health) of that individual’s culture [10]. These two authors further added that included in this network of cultural meanings of an illness are the metaphors associated with the illness, the care patterns that shape the experience of the illness and the social reactions of the sufferer. So KJ [11] contended that each culture has its conceptual or explanatory model for illness and health. Ultimately since culture plays a part in our view of diseases, illnesses, ailments and perspectives related to our mental health and our views of healing practices, there is an inherent understanding between indigenous healers and their clients.

Wendt and Gone posited that, “although the reasons for the reluctance of many American Indians to participate in (Western oriented) mental health services (and in medical services) [5], have not been well studied, a consensus within Native communities has frequently coalesced around one prevalent explanation: Culture. Knowledgeable individuals in tribal communities have routinely identified conventional treatment services as culturally discordant and therefore experientially alienating for many distressed Native people who are otherwise recognized as good candidates for truly appropriate helping services” (and even medical services).

It is evident that “helping cannot be divorced from the culture in which individuals and their problems in life develop and reside” [12]. Vontress reiterated in the foreword to Adekson’s text further that, “a culturally-symbiotic relationship exists between counselors and their clients” [12]. Saleh’s point that, the fact that there is a triadic or three pronged counseling (or healing) relationship between the counselor (or indigenous healer), the client (or patient), and a third party: Culture, can be adequately applied to all practitioners who interact with patients and clients [13]. Culture is therefore an integral part of the healing process. Effective counseling and healing occur because indigenous healers and their clients share the same culture, beliefs, customs, experience, understanding, the same notions of community, worldview and views of illness and disease [7,12]. Cross-cultural healing can be transposed to other cultures when healers (be it traditional or Western trained) go beyond the call of duty to intimately learn and understand the culture of their clients or patients. Multicultural training should be given to students in medical schools, counseling and other training institutes that are preparing practitioners in helping clients and patients. This training should imbibe sensitive clients’ cultural worldviews that will enable the practitioners to gain effective healing practices. And thereby be armed with the basic cultural tools that will be helpful to gaining positive cross-cultural form of interactions with their clients or patients. As a result of this sensitive training, practitioners will be armed with the understanding and the cultural background to treat clients who are not from their own culture even though they have different worldviews, customs and view of diseases and illness. Our conclusion, stemming

from literature and research, is that indigenous healers and clients’ culture play predominant role in clients’ beliefs, healers’ diagnoses, and in techniques of healing and curing diseases, illnesses, and problems.

Kiev articulated that, different societies will always tend to shape the interpretation of problems according to their own inherent sociocultural characteristics [14]. In Western societies, individuals view healing practices from an individualistic perspective, while in farming and indigenous societies, individuals view healing in terms of communal perspectives. Tseng and McDermott reiterated to add to this last point that, “furthermore, cultural factors strongly influence the selection of (diagnosis and) treatment methods” that patients and clients receive [15]. In other words, culture plays a role in what healers (both Western trained and indigenous) do with their patients and clients. Family involvement, which is of importance in collective cultures, plays a big role in healing empowered for clients by traditional healers. For example, prayer, interpretation of dreams, folklore, burning sacred plants, using eagle feathers, taking part in different ceremonies like sweat lodge, use of plants as herbal therapy, appeasing ancestors, are some of the practices prevalently used in traditional healing among the Yoruba and Native Americans and First Nation Canadians.

For example, individuals who are originally from Western oriented societies have different cultural views from those individuals raised in traditional societies. It is therefore important for practitioners to ask questions and identify where their patients or clients come from and what culture they identify with. Kirmayer, Brass and Valaskakis [16] pointed out that, systems of healing are important expressions of traditional forms of spirituality, social organization and world view of clients and patients. According to Kirmayer [17], traditional systems of healing were grounded in a specific cultural ontology of spirits, animal powers, or non-human persons animating the world and served to demonstrate the reality of these powers through healing efficacy”. This same author added therefore that, “revitalizing culture and community then can be achieved in part by reinstating, strengthening and investing in culturally grounded healing practices”. Culture, family and community should be factored in as a prerequisite for working with different clients and patients for successful outcomes. Kirmayer [17] reiterated further that “culture provide their own interpretive frameworks, notions of authority and standards of truth”. As we can see from the above arguments, culture is important to clients and patients as an invigoration of healing practices. How then does culture invigorate healing practices? Simply put: In how indigenous healers treat their patients and clients. These indigenous healers comprise of sages, diviners, herbalists, soothsayers, medicine men, to mention but a few notable designations. These healers treat mental, physical, social, emotional, psychological, spiritual and family problems brought in by their clients.

HOLISTIC HEALING PRACTICES

Since, “the terms normal, healthy, success, are all defined by the sociocultural system” [15], and “norms, values, goals of the client also reinforce and depict socio culturally sanctioned behavior” [15], the way healers treat their clients or patients is indicative of the marriage between culture and holistic healing

practices and methods. "Native American, First Nation Canadian and Yoruba medicine are based on a model of holistic health" [18]. The author discovered, as supported by Serlin, Sonke-Henderson and Graham-Pole [19], that holistic health and healing are based on the whole person and focuses on the mind, body and spirit of an individual. Clients are treated as whole persons by indigenous healers. Indigenous healers practice wholistic health with their clients to broaden their clients' perspective of living healthy lives. Their medicine, healing methods and techniques and counseling are directed at the whole person.

Cardinal [20] posited that, "the holistic belief model holds that disease may be brought on or stimulated by sickness within either of the mind, body, or soul: In essence, then, one has to examine how one's body is affected by the mind and soul of a person".

Cardinal [20] added that, "our soul, mind, and emotions are the underlying causal factors of diseases, and are determinants of disease". He reiterated further that, "the Western medical (and I will add, mental health practitioners) has yet to engage seriously with the holistic perspectives as do Traditional Indigenous healing practitioners". Walls, Johnson, Whitbeck and Hoyt [6] asserted, as we stated earlier, that American Indians with a variety of psychiatric problems have been shown to prefer culturally 'traditional' services rather than formal medical services. Why? Simply put, because indigenous healers practice holistic healing and understand their clients' culture. Traditional healers incorporate culture, holistic methods and techniques that involve the family and community and delve into issues related to physical, mental, social, emotional, family, community and spiritual aspects of life vis-à-vis the problems clients bring to healing. "Mind, body and spirit of an individual are intricately assessed and clients are evaluated so as to maintain a comprehensive inquiry of an individual's needs necessary for effective practice" [21].

It is therefore important to note that practicing holistic healing practices with our patients and clients will help bring about whole health. This in turn will help turn our practices into positive healing strategies like those of indigenous healers. For people to be healthy, they need health agenda comprising of healthy strategies that incorporate our clients and patients' whole health. Holistic healing practices will also go a long way to aid in the prevention and cure of illnesses, diseases, and ailments. Since a great number of indigenous healers practice holistic healing, we should strive to study what they do and inculcate the positive practice from their methods and healing practices. This last point supports the notion that there is a need to "foster successful Traditional Medicine™ into [a] public health framework" [2].

Alves and Rosa [2] concluded that, "public health researchers must lead the development of a research agenda that considers, social, cultural, political and economic contexts, to maximize the potential contribution of TM to health care systems globally". Moodley and Sutherland contended that [22], there is no single universal worldview regarding causation of illness or appropriateness of treatment, but as Sodi and Bojuwoye [8] added "there can be no universal applicability of one cultural health care system". In other words, borrowing health practices and methods from one healer (whether indigenous or modern)

would assist in healing successes. In other words, traditional healers can learn a lot from western trained practitioners and vice versa. This, in effect, will make for wholeness in universal healing practices. Currently, according to Sodi and Bojuwoye [8], there is a piloted trial in the South Africa health system to see how successful this learning practices and two-some blend will work.

CONCLUDING REMARKS

The best practices that can bring success to our clients' and patients' whole health is to borrow methods, practices and skills that work well for them from one part of the world to another. This can be done by understanding the role that culture and holistic health practices play in our patients and clients' lives. Now is the time to see how we can integrate working principles of indigenous healing medicine and healing into western medical and mental health practices. As Alves and Rosa adequately pointed out: "the formal recognition and respect that major traditional medicinal systems around the world are gaining allied to the extensive practice of traditional medicine in developing countries and the rapidly growing demand for alternative and basic therapeutic means (also in industrialized countries) constitute the international relevancy of research and development in the field" [2]. This demand therefore calls for a look at how to marry the excellent practices available in traditional healing practices with those in western practices as we suggested earlier. This marriage will be universally beneficial.

IMPLICATIONS FOR WESTERN TRAINED PRACTITIONERS

Research supports the fact that "the days when traditional healing was regarded as 'primitive,' unrefined and as a practice confined only to rural communities are gone" [18]. Western practitioners should be ready to lay aside their inherent biases and prejudices that are presently depriving individuals access to the holistic health care they deserve. Western practitioners can do this by borrowing from the techniques, practices and methods of indigenous healers and delve appreciatively with awe and respect into the contributions of indigenous healers of the world. From global observations and research and conclusions from WHO, "traditional or indigenous health care systems are very significant to the overall healthcare of the peoples of the world" [8]. The time has come for healing practitioners to research globally into the daily activities and routine of indigenous healers to learn and understand the useful and applicable lessons of healing and apply it globally. Now is the time for both traditional healers and western trained practitioners to work together and "provide interdisciplinary care to citizens of the world" [18]. Organizing open conferences that allow Western trained practitioners and traditional healers the opportunity to discuss the strengths and shortcomings of the healing approaches prevalent in their methods will aid this cooperation and collaboration. Sodi and Bojuwoye [8] success of integration will depend largely on collaborative research works between western-oriented (practitioners) and traditional healers. The latter would also need education in helping them to view their practices in completely new ways and training to cooperate with western-oriented practitioners". Bojuwoye and Sodi [8] further argued that "the main goal of education and training for traditional healthcare

practitioners should be for capacity-building in view of their expanded roles in health promotion and illness prevention and to enhance their leadership roles and legitimate voices as trusted health authorities of their people". In other words, enhance "acquisition of appropriate knowledge and better understanding of traditional healthcare to enable (western practitioners) to change attitudes of disrespect and suspicion to attitudes of appreciation and respect for the skills of traditional healthcare providers" [8]. Putting it simply, western trained practitioners stand to benefit a lot from the cultural expertise and holistic health practices of traditional healers. Western practitioners can extend an olive branch by sending experienced practitioners to observe traditional healers' practices, methods, and style of healing. This approach will help alleviate the suspicions that traditional healers have for Western trained practitioners and help pave the way for dialogue, respect, acceptance, cooperation, and open and future interactions. Cooperation and collaboration will help alleviate the suspicion and lack of knowledge about the functions of traditional healers. This in turn will help encourage respect on the two healing fronts. The different research that we discussed above, "conclusively illustrated many ways and areas where human beings are similar than they are consciously aware. The bottom line is both practices can all learn from each other (as western trained professionals) and from indigenous healers' methods and practices" [23].

REFERENCES

- World Health Organization Factsheet 134. Traditional Medicine. WHO. 2003.
- Alves R, Rosa I. Biodiversity, traditional medicine and public health: Where do they meet? *J Ethnobiology Ethnomedicine*. 2007; 1-9.
- Smith T, Kehe J, Smith T. *Practicing multiculturalism: Affirming Diversity in counseling and psychology*. Boston, MA: Pearson Education. 2004. 325-337.
- Capuzzi D, Stauffer MD. *Counseling and psychotherapy. Theories and Interventions*. 6th Edn. Alexandria VA: American Counseling Association. 2016.
- Wendt DC, Gone JP. Rethinking cultural competence: Insights from indigenous Community treatment centers. *Transcultural Psychiatry*. 2011; 49: 206-222.
- Walls ML, Johnson KD, Whitbeck LB, Hoyt DR. Mental health and substance abuse services preferences among American Indian people of northern Midwest. *Community Mental Health J*. 2006; 42: 521-535.
- Adekson MO. *Native American and Canadian medicine man, healers and helpers*. Saarbrücken: Lap Lambert Academic Press. 2013.
- Sodi T, Bojuwoye O. Cultural embeddedness of health, illness and healing: Prospects for integrating indigenous and Western healing practices. *J Psychol Africa*. 2011; 21: 349-356.
- Jackson ML. Cross-cultural counseling at crossroads: A dialogue with Clemont E. Vontress. *J Counseling and Development*. 1987; 66: 20-23.
- Good BJ, Good MJD. Towards a meaning-centered analysis of popular illness Categories: 'Fright illness' and 'heat distress' in Iran. In A. J. Marsella & G. M. White. *Cultural conceptions of mental health and therapy*. Reidel. 1982.
- So KJ. Traditional and cultural healing among Chinese. In Moodley R & West W. *Integrating traditional healing practices into counseling and psychotherapy*. 2005; 100-111.
- Adekson MO. *The Yoruba traditional healers of Nigeria*. Routledge Publishers. 2003.
- Saleh MA. The cultural milieu of counseling. *Int J Advancement Counseling*. 1989; 12: 3-11.
- Kiev A. *The study of folk psychiatry, in Magic, Faith, and Healing*. Free Press. 1964; 3-35.
- Tseng WS, Mc Dermott JF. *Psychotherapy: Historical roots, universal elements, and cultural variations*. *Am J Psychiatry*. 1975; 132: 378-384.
- Kirmayer LJ, Brass GM, Valaskakis GG. Conclusion: Healing/invention/tradition. In Kirmayer LJ & Valaskakis. *Healing traditions: The mental health of aboriginal peoples in Canada*. Vancouver University of British Columbia Press. 2008. 440-472.
- Kirmayer LJ. Cultural competence and evidence-based practice in mental health: Epistemic communities and the politics of pluralism. *Social Science & Medicine*. 2012; 75: 249-256.
- Adekson MO. Similarities and differences between Yoruba traditional healers (YTH) and Native American and Canadian healers (NACH). *J Relig Health*. 2016; 55: 1717-1728.
- Serlin IA, Sonke-Henderson J, Graham-Pole J. *Whole Person Healthcare*. Westport CT. Praeger Publishers. 2007.
- Cardinal C. Evolution of protocols in traditional healing practices and their effects on the practice of healing. *Religious Studies and Theology*. 2011; 127: 128-133.
- Adekson, M. O. Traditional healing and mental health counseling. A commentary. *JSM Health Educ Prim Health Care*. 2016; 1: 1011.
- Moodley R, Sutherland P. Psychic stress in other places: Clients who seek healing with traditional healers and psychotherapists. *Counseling Psychology Quarterly*. 2010; 23: 267-282.
- Adekson MO. Indigenous healing and globalization. A commentary. OMICS Group: *Primary Health Care*. 2016; 6: 2.

Cite this article

Adekson MO (2017) Culture and Holistic Healing as Integral parts of Indigenous Global Health. *JSM Health Educ Prim Health Care* 2(2): 1027.