ABSTRACT

Diarrhoea illness has long been recognised as the cause of death of millions of people worldwide especially in developing countries (Nkwi, 1994). The disease is treated using western as well as traditional remedies. The knowledge of traditional healers and their practices can play an important role in building capacity to promote the appropriate home management of diarrhoea (Anokbonggo et al., 1990). Traditional healers around the world have different beliefs and understanding of diarrhoeal disease and its treatment. The aim of the project was to investigate the perception and concept of traditional healers on the treatment of diarrhoea in Vhembe district. Twenty traditional healers from two municipalities (Mutale and Thulamela) around Vhembe district were interviewed. Data was collected through interviews using questionnaires. Interviews were conducted with individuals in their own languages and later translated into English. According to Vhembe traditional healers, diarrhoea is described as a disease which can lead to death as a result of excessive loss of water in a patient’s body through vomiting and frequent visits to a toilet. Symptoms of diarrhoea include vomiting, loss of weight, and change in appearance of skin, face and eyes. Traditional healers of Vhembe district have a better understanding of diarrhoeal diseases. They mention different categories of diarrhoeal diseases. There is a lack of information when it comes to the description of diarrhoeal illness’s on infants and children.

Keywords: Traditional remedies, interviews, questionnaires, symptoms, infants.

INTRODUCTION

The knowledge of traditional healers and their practices play an important role in building strong systems towards promoting appropriate home management of diarrhoea. Akpede et al. (2001) assessed the role of traditional healers in the home management of diarrhoea in Nigeria. Green (1985) found that the involvement of traditional healers on diarrhoeal disease management and control amongst children and mothers is playing a major role. It was also reported that in Zambia healthcare workers noted that adults and children visit health facilities with advanced diarrhoeal conditions (Foster, 1995). In Bangladesh and other South Asian countries, child survival, health services utilisation, and expenditure inequities on the basis of gender, favouring males, have been well documented for several decades (Pandey et al., 2002; NIPORT, 2005). Male children under the age of five are found to have a lower probability of death as compared to females of the same age (Gupta, 1987).
Traditional healers identify symptoms of diarrhoea as fever, watery stools, vomiting, frequent stooping, hot urine accompanied by pain when urinating, redness of the anus, and non-stop stooping which lead to the release of blood (Akpede et al., 2001). People in developing countries still rely on traditional healers who usually reside among them trusting their ingenuity on the use of herbs and some other cultural and traditional beliefs (Bisi-Johnson et al., 2010).

Globally, diarrhoeal disease is regarded as the second leading cause of under-five mortality, accounting for over two million of death per year (Murray and Lopez, 1997; Jones et al., 2003). Larson et al. (2006) suggested that the majority of diarrhoeal deaths can be prevented by the timely use of oral rehydration solution (ORS) and continued feeding of children and infants. Developing countries like India continue to struggle with nutritional and health challenges which results in bearing the greatest burden of diarrhoea.

Recently, AIDS patients were reported to develop the diarrhoeal illness, and it was seen as the leading cause of death among AIDS patients. Haung and Zhou (2007) reported that hand washing before preparing any kind of food and also using protection (condom) when having sex limit the danger of being affected by diarrhoea. Diarrhoeal diseases cause significant morbidity and mortality worldwide and the effectiveness of home management of diarrhoeal diseases is achievable if there are enough caregivers that can educate the community about how to prevent themselves from being victims to this deadly disease (Uchendu et al., 2011). Patients with diarrhoea, in particular children, are a higher risk of being affected by dehydration compared to adults. Fluid loss resulting from diarrhoea and vomiting can be as high as three times the circulating blood volume (Sibylle, 2009).

Studies on long-term effects of childhood diarrhoea have also been conducted and showed a decline on cognitive function, delayed school commencement, and poor school performance as repercussions of early childhood diarrhoea (Guerrant et al., 2002). Malnutrition is also a predisposing factor which increased the frequency and severity of diarrhoea. As a result, malnutrition may lead to renal failure and subsequent death (Cutting, 1979). This situation is described by Guerrant et al. (2002) as the “vicious cycle of diarrhoea” which is the cycle that could consequently lead to impaired growth and development (Farthing, 2000).

The aim of the study was to investigate the perception and concept of traditional healers of Vhembe district Municipality on diarrhoea. The hypothesis was that traditional healers in Vhembe district have different ideas and belief towards diarrhoeal categories, symptoms, causes, diet taken by patients and prevention thereof. Traditional healers were interviewed individually in order to gain knowledge of their perception on diarrhoea disease. The objectives of the research were to investigate the description of diarrhoea diseases, its symptoms, causes, and categories of diarrhoea illness by traditional healers of Vhembe district Municipality. The research also investigated different beliefs and practices of traditional healers pertaining to diarrhoea diseases. The different prevention methods used by traditional healers in order to ease diarrhoeal problems were also assessed.
MATERIALS AND METHODS

Study area

The project was carried out in Vhembe district municipality, which is one of the six district municipalities of Limpopo province in South Africa. The area is rich in biodiversity. There are many plant and animal species that local people use for various purposes. The area is surrounded by mountains, rivers, lakes, game reserve and a number of tourism attractions. The annual rainfall in this area is 250-500 millimeters. Temperature in summer ranges between 29-36°C and in winter between 20-28°C. Plants in this area have a high chance of survival due to the fact that the area is fertile and rich in soil moisture.

In Vhembe district people still believe in indigenous knowledge systems and it is widely practised in rural areas within this district. Traditional healers are the first to be visited whenever people don’t feel right or if they have some personal problem. Traditional healers are believed to treat various diseases including those that may be incurable in hospitals.

There are many traditional healers around Vhembe district that vary according to their healing practices (Mabogo, 1990). Some of the categories of traditional healers are herbalists, traditional surgeons, bone setters and tradition psychiatrists.

Study design

The ethnobotanical survey was collected from the knowledge holders, who are traditional healers, with the aid of a structured questionnaire. Twenty traditional healers were interviewed during the survey. The survey was carried out from May to October 2011. Traditional healers were interviewed separately on issues concerning the description of diarrhoea, symptoms, causes and different categories of diarrhoea, diet recommended for diarrhoeal patients, and methods of prevention. Information was recorded in a notebook and then analysed using a Microsoft Excel spreadsheet.

RESULTS AND DISCUSSION

Description of diarrhoea disease by traditional healers of Vhembe district municipality

Traditional healers of Vhembe district municipality described diarrhoea as a disease which may result in death due to loss of water in a patient’s body through vomiting and frequenting the toilet. They believe it may result in many changes in a patient’s body such as loss of weight, change of skin, face and eyes. They mentioned that if those symptoms were not treated, death of a patient will be the ultimate penalty (Akpede et al., 2001). Seventy five percent of traditional healers described diarrhoea as one of the diseases related to HIV/AIDS (Haung and Zhou, 2007).
Symptoms of diarrhoea as mentioned by traditional healers of Vhembe district Municipality included: loss of weight, vomiting, small white wounds in the tongue, sweating, tiredness, as well as changes of eyes, face and skin appearance. Tiredness was mentioned by forty five percent of traditional healers, they mentioned that a patient may feel tired as a result of one of the symptoms, followed by thirty five percent reporting loss of weight. Traditional healers indicated that patients may lose a lot of water as a result of frequenting the toilet (Sibylle, 2009). The change of eyes, face and skin (twenty five percent) was also reported as one of the symptoms of a diarrhoea patient. A small wound with whitish spots on the tongue was mentioned by twenty percent of traditional healers, followed by fifteen percent reporting vomiting after eating. Sweating of a patient was only reported by five percent of the traditional healers. The results also showed that tiredness contributed the highest symptoms above all the symptoms mentioned by traditional healers.

**Causes of diarrhoeas as reported by traditional healers**

Eating food not familiar to the body represents the highest reported cause of diarrhea by the traditional healers with a frequency of forty percent as shown in Table 1. Traditional healers indicated that a patient must eat food that they are used to eating since this will strengthen their body and stand a chance of preventing diarrhoea from entering their body. Eating uncovered/rotten food was indicated by twenty five percentage of healers as another cause of diarrhoea. Traditional healers mentioned that food eaten must be covered and protected, and indicated that food should not be rotten as it could contain some bacteria or fungi which may result in diarrhoea. Having unprotected sex (fifteen percent) is one of the serious matters; they recommend medicinal plants and condoms as the best ways of preventing diarrhoea during sexual activity. The use of dirty water (fifteen percent) is one of the factors spreading diarrhoea. Anokbonggo *et al.* (1990) supported this argument by indicating that water for drinking and cooking must always be protected and never left open so that bacteria/fungi do not enter.

**Table 1:** Categories of diarrhoea disease as reported by traditional healers of Vhembe district municipality.

<table>
<thead>
<tr>
<th>Causes of diarrhoea disease</th>
<th>Frequency percentage (%) of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating food foreign to their body</td>
<td>40</td>
</tr>
<tr>
<td>Using dirty water</td>
<td>15</td>
</tr>
<tr>
<td>Eating uncovered/rotten food</td>
<td>25</td>
</tr>
<tr>
<td>Eating without washing hands</td>
<td>5</td>
</tr>
<tr>
<td>Having unprotected sex</td>
<td>15</td>
</tr>
<tr>
<td>Bathing diarrhoea patients without wearing gloves</td>
<td>5</td>
</tr>
<tr>
<td>Feeding infants with milk formulas</td>
<td>5</td>
</tr>
<tr>
<td>Using improper remedies to infants</td>
<td>5</td>
</tr>
</tbody>
</table>
Bathing a diarrhoea patient without wearing gloves (five percent) could possibly cause diarrhoea, as reported by the traditional healers. Emphasis was made by traditional healers that, hands should be clean everytime a patient has to come in contact with food or drinks. Feeding infants with milk formulas (five percent) rather than using breast milk was also mentioned as a cause of diarrhoea. Traditional healers indicated that breast-feeding is the best remedy for infants and children, and it was highly recommended (Green, 1985). The use of improper remedies for infants (five percent) may result in putting the health of infants at risk of contacting diarrhoea, which may also lead to the death of such infants.

Table 2: Symptoms of diarrhoea diseases (in vernacular) as reported by traditional healers of Vhembe district municipality in 2011.

<table>
<thead>
<tr>
<th>Sign/symptoms of diarrhoea</th>
<th>Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hard stools released with mucus and blood resulting in anal sores</td>
<td>“Nowa khulu”</td>
</tr>
<tr>
<td>Frequent toilet with loose stools mixed with blood</td>
<td>“U inga”/“Ngubane”</td>
</tr>
<tr>
<td>Painful release of loose stools with blood</td>
<td>“Tshitwuku”</td>
</tr>
<tr>
<td>Loose stools released with blood</td>
<td>“U sika”</td>
</tr>
<tr>
<td>Frequent toilet with loose stools</td>
<td>“U tshuluwa”/“Dangani”</td>
</tr>
</tbody>
</table>

Results from Table 2 represent the signs and symptoms of the diarrhoea disease indicated by traditional healers of Vhembe district. It was found that thirty five percent of traditional healers reported “U tshuluwa”; followed by “Nowakhulu”, twenty five percent; “Tshitwuku” with fifteen percent; and “U inga” was reported by ten percent of traditional healers. “Ngubane”, Bilhazia, “U sika” and “Dangani” were reported by five percent of traditional healers. Traditional healers use the same description and signs/symptoms for different diarrhoeal diseases, for example the description of a loose stool with blood for Bilhazia, “U sika” and for frequent toilet visits with loose stools mixed with blood for “Ngubane” and “U inga” (Green, 1985). Diarrhoea in which a patient releases faeces with blood was reported as more dangerous than one in which a patient releases faeces mixed with blood. The name of those diarrhoeal diseases reported came from the place in which they grew up. It was also found that from the way in which traditional healers describe the signs/symptoms, they only came from two categories (i) bloody and (ii) non-bloody (Ndubani et al., 1998).

Prevention of diarrhoea according to traditional healers

Traditional healers also guide their patients on prevention of diarrhoea. Prevention varies from one healer to another depending on their belief and understanding of the disease. Figure 1 indicates some of the prevention techniques as reported by traditional healers.

Figure 1 shows that twenty five percent of traditional healers mentioned the eating of healthy food. They also indicated that food must be protected and kept safe from contamination. Twenty five percent of traditional healers mentioned that they have no idea on how to prevent diarrhoea. Twenty percent recommended the use of traditional remedies which is required to be used by both
couples before and after having sex. They recommend that if patients use remedies they can never get exposed to diarrhoea. Fifteen percent indicated the use of condoms everytime couples have sex (WHO, 2000).

![Figure 1: The perception on the prevention of diarrhoea by traditional healers of Vhembe district Municipality.](image)

Ten percent of traditional healers reported washing hands, and included that hands should always be clean every time, and especially before, a patient comes in contact with food as supported by Huang and Zhou (2007). They also emphasised that hand washing reduces diarrhoeal illness. The least percentage of healers (five percent) mentioned clean water; water-used should be clean and always closed to avoid contamination.

CONCLUSION

The study showed that traditional healers of Vhembe district have some skills and knowledge based on their perception of diarrhoea. They know diarrhoea disease from its symptoms, different causes and also its categories. It was also found that they have knowledge on the prevention of diarrhoea disease. Traditional healers of Vhembe district seem to lack information concerning diarrhoea which affects children and infants. Many scholars (Akpede et al., 2001; Guerrant et al., 2002; Anokbonggo et al., 1990; Ndubani et al., 1998; Larson et al., 2006; Ellis et al., 2007; Sibylle, 2009 and UNICEF, 2009) have reported cases against diarrhoea which lead to the death of children and infants, so there is a need to gather more information in order to get lasting solutions of children/infants diarrhoea. Targeted interventions are necessary in order to further educate traditional healers on the causes, and prevention measures for the control of diarrhoeal diseases in the Vhembe District.
REFERENCES


