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CHAPTER TWO
THE SOCIO-POLITICAL AND CULTURAL SETTING OF THE BUSOGA SOCIETY

2.1 Introduction

The Basoga are one of the many significant Bantu ethnic groups found in Uganda. To describe this society, I will name the major events and issues that define Busoga right from pre-colonial times up to the present day. This helps in making a comparative analysis of where this society came from and where it is now in terms of its demography, religion, political administration, socio-economic setting as well as the culture of the people. In analyzing these aspects of Busoga society, I will distinguish three different periods: the pre-colonial era, the colonial era and the post-colonial era. Struthers (2000:275) argues that it is important to consider the socio-cultural environment of a community when analysing healing traditions and ideologies, because healing happens within the realms of a society’s culture. It should also be recognised that African traditional healing systems are intertwined with cultural and religious beliefs and are holistic in nature. A healing tradition not only consists of physical conditions but also of the psychological, religious and social aspects of individuals, families and communities (Truter, 2007:56). The traditions that make up a society’s culture are the engine of the healing work. As a result, knowledge of culture is important in understanding the art of healing practiced in a specific society. It is also important to recognise that traditional healing in all its forms, all over the world maintains a strong alliance with faith, belief, spirit, family support and the web of everyday life (Struthers, 2000: 275). No doubt healing has a bearing on the economic, political and environmental consciousness of any society in which it has not only been bred but also practiced.
2.2 Geography of Busoga

Figure 1: Map of Uganda showing the Different Sub Regions

*Source: MK Primary School Atlas 2015
MK Publishers Ltd. Kampala
Pg. 14*
The Busoga sub region is located in the eastern part of Uganda. Busoga as a distinct territory is curved by Lake Kyoga in the north. This boundary separates Busoga from the Lango and Teso Sub regions. Victoria Nile in the west separates Busoga from Buganda or currently the central region of Uganda. Busoga and Buganda have many characteristics in common, namely that they belong to the Bantu ethnic group. In the south, Lake Victoria acts as the boundary that separates Busoga from the islands that belong to the Basamia and Baganda as well as separating it from Tanzania far in the south. Mpologoma River in the east separates Busoga from the districts that make up the former Bukedi region, now composed of a multiplicity of administrative districts (Fallers, 1965:21). Because of its unique geographical location many authors have referred to this area as an island (Fallers, 1965:21; Cohen, 1972:2; Nayenga, 1976:4; Cultural Research Center, 2013; Kyalya, 2014). Busoga is bordered by the districts of Buikwe and Kayunga to the west in Buganda region. To the east, Busoga is currently bordered by the districts of Pallisa, Butaleja, and Busia. These were part of the larger Bukedi district of the colonial and immediate post-colonial eras. To the south are the districts of Buvuma and Ssese Islands of Buganda sub region.

Before colonialism, it was a major challenge for Busoga to keep in contact with her neighbours because it was squarely shielded by the waters. This is not the case at present since bridges have been erected along the Nile River to the west and Mpologoma River to the east. Ferries have been availed for people to travel along Lake Kyoga to the Teso and Lango sub regions with ease and several modern ships facilitate transport across Lake Victoria to the islands and across to Tanzania. The geographical demarcation of Busoga is also constituted as the official political administrative division of Busoga within Uganda. This has been the case since the 1890s, as demarcated by the British colonialists (Cohen, 1972:3). Busoga covers about 3443 square miles, with a length of about 100 miles and a width of a little over 50 miles (Nayenga, 2002:4).

Because of the above-mentioned developments, Busoga has witnessed infiltration by people from neighbouring societies for trade, employment and leisure. Some of these have permanently settled in and among the Basoga aided by a high degree of intermarriages. This has not left Busoga’s traditional healing practices unaffected. The migrants have continued their traditions, including those connected with healing. This has produced fluidity in the Kisoga healing traditions, resulting in a hybrid of traditional healing practices, especially in the urban centres. In contact with these new inhabitants, the Basoga developed an alternative healthcare
tradition, which was apparently absent before these intrusions. Among all its neighbours, the Basoga strongly believe that the Banyole, in the neighbouring Butaleja district, have very strong traditional healers. These have been bestowed with the power to curse and bring affliction to the offender and his/her family. Banyole healers are believed to be more powerful than Basoga healers. Because of this, some of the Basoga have moved across the Mpologoma River into Bunyole to utilise the services of the powerful Banyole healers. The Basoga therefore interact with the Banyole with mixed feelings due to these perceived powers.

Special attention has to be given to Buganda society, the most proximate people to Basoga in terms of geography and culture. The Basoga have always had very close interaction with the Baganda. Busoga and Buganda share several healing traditions. Some of the healing spirits used in Busoga bear Kiganda names and when they possess mediums, they communicate their will in the language of the Baganda - Luganda. Examples of these spirits are Kintu and Mukasa. Some of these spirits especially the ‘amayembe’ are an import from Buganda. Because of such shared healing traditions, traditional healers from Buganda are popular and dignified in Busoga. Hence, it is common to refer to all traditional healers in Busoga as ‘Abasawo Abaganda’ (plural)-Baganda traditional healers or ‘Omusawo omuganda’ (singular) - Muganda traditional healer. When this is said, they are indeed referring to a native traditional Musoga healer.

Areas of water that surround Busoga have always been an integral element in the healing traditions. Each of these areas of water hosts special features to the healing traditions of the people. They are also homes to many significant spirits of the Basoga. For example, the river Nile, called ‘Kiira’ in the Lusoga language, is host to the shrines of Nabamba Budhagali, near the Budhagali falls. Whenever misfortunes befall Busoga as a society, consultation has to be made to the spirit of Budhagali at the falls along the Kiira River. Most of the healing rituals and ceremonies performed by Nabamba Budhagali, the chief diviner in Busoga, are made at the river Nile in the village Budhagali. Other healing shrines have been erected along the Nile in Busoga. Another notable one is for the spirit called Kiira at Namizzi, north of the Budhagali falls.

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6 Banuri Wairagala, 45 years, Herbalist, Bukonte Village, Namutumba district. Interviewed on 17-05-2015
7 Patrick Wairagala Mandwa, diviner, 58years, Bulagala Village. Interviewed on 18-04-2015
Figure 2: Map of Busoga Sub-Region

Water is an important resource in the healing traditions of the Basoga, as there is emphasis on bodily ritual cleansing which involves the sick and afflicted going to these areas of water to bathe wholesomely in order to rid themselves of sicknesses and social misfortunes. The water provides several healing articles and objects used by healers. The most important of these are the

Source: MK Primary School Atlas 2015
MK Publishers Ltd.
Kampala, Pg. 20
cowrie shells, also locally called ‘amasonko’, that are commonly and widely used as medicine. Cowrie shells are sewn on the garments of most of the traditional healers especially the diviners. They are also used in divination to investigate the causes of misfortunes.

Busoga has two geographical zones; southern and northern. Both in the north and south zones, Busoga has an even distribution of rainfall throughout the year, with much rain between March and May, and less rain in the months between August and December. This rainfall produces a luxuriant growth of vegetation, including herbal plants. In both seasons; crops are grown depending on the relative expectation of rain. There are also characteristic crops that may be grown in the respective seasons. The March to May and August to December seasons are called ‘Matoigo’ and ‘Masambya’ respectively.\(^8\) The northern zone has a few hills and rocky areas. Busoga also has friendly climatic conditions due to several rivers that run through it. The rivers include Naigombwa and Lumbuye, which flow through to Lake Kyoga. Because of the adequate rainfall that is experienced in the areas near Lake Victoria in the south and Lake Kyoga in the north, these areas are host to many herbs that are used to cure various ailments. Herbalists all over Busoga move to these areas, especially in the forest reserves of Bunya near Lake Victoria, to gather herbs. Because of its thick forest reserve, diviner Isabirye Nfuddu describes Bunya in the Mayuge district as the area most feared because of the fierce spirits that reside there.\(^9\) Buyende district, which is in the north of Busoga, bordering Lake Kyoga receives scores of herbalists in search of traditional medicines.\(^10\) Herbalists interviewed complained of the high costs associated with the production of traditional herbal medicine because they are fetched from distant places.\(^11\) The adequate rainfall makes it possible for the Basoga to feed on wild vegetables that are said to have high nutritional values. These wild vegetables, which grow as weeds in the gardens and other places around the homesteads, are mostly cooked and given to children to treat malnutrition. They are boiled, and the leaves and water given to the children to eat and drink to boost their immunity.\(^12\) Such wild vegetables include Dodo (amaranthus spinosus), eikubi (pisum sativum), eiyobyo (cleome gynandra), mutere (olitorius), and katunkuma. These vegetables are common in those areas that receive adequate rain throughout the year.

\(^8\) Katende Kibenge, 82 years, at Bulagala Village-Namutumba district. Interviewed on 22\(^{nd}\) June 2015
\(^9\) Nfuddu Isabirye, 72 years, diviner, Kimaka- Jinja district. Interviewed on 08-08-2015
\(^10\) Ali Wairagala, 68 years, Client, Bugembe-Jinja. Interviewed on 22-06-2015
\(^11\) Kawuma Safina Nabirye, also known as ‘Ssenga Wa Busoga’, 54 years, Herbalist/TBA, Bugembe in Jinja. Interviewed on 11-06-2015
\(^12\) Edisa Namwase, 70 years, Client, Bulagala Village in Namutumba district. Interviewed on 22\(^{nd}\) April 2015
2.3 Origins and Settlements of the Basoga

The word ‘Basoga’, which refers to the inhabitants of the area of study, has been associated with many legendary stories. Bukyanagandi (1993:3) claims that originally the Basoga were not called so, but the term came after a reasonable period following several settlements in the area. The origin of the term, in this reading, is associated with Buganda’s territorial conquest of the area. In the numerous wars of conquest that the Baganda engaged with the people in this area, the would-be Basoga had a spearing technique of facing the spear downward while mutilating their enemy, the Baganda. In Lusoga language this kind of spearing is called ‘okusonga’ but the Baganda rendered it as ‘okusogga’ in their language which is akin to Lusoga. The Baganda therefore called their opponents the ‘abasogga’. In the long run, it developed into ‘Basoga’.

Differently, some of the earliest writers about Busoga like Fallers Lyolld (1965), David William Cohen (1972) and Batala F.P Nayenga (1976), observe that the name Busoga originally used to refer to a hill located in the south-central part of the country and later it became identified with a state known as ‘Busoga’. This state was in the south-west of Jinja and was ruled by the lineage of Ntembe, of the Reedbuck clan. The application of the term ‘Busoga’ to the whole region as we know it today began as late as the nineteenth century. By the time of Speke’s arrival in Uganda in 1862, the small state of Ntembe had gained much fame. The entire island was called ‘Usoga’ the Swahilli word for Busoga. The unrivalled fame and influence of the small state of Ntembe was due to its attempts to subdue parts of Bunyoro and Buganda (Fallers, 1965:21; Cohen, 1972:1; Nayenga, 1976:2-3).

Busoga was one of the centralized interlacustrine kingdoms that existed around Lake Victoria. Cohen (1972:1) observes that the creation of Busoga relates to the appearance of immigrant families that reached this part of the region beginning with the 13th century. Both Cohen (1972:1) and Nayenga (1976, 2002:42) agree that the formation of Busoga was occasioned by two different groupings, that is the Bantu and Luo speakers, who came from the east and north respectively. The Luo speakers were led by a legendary figure called Mukama, whereas the Bantu people were led by another legendary figure called Kintu. They established states within this area and then moved on to the other areas, with Mukama going as far as Bunyoro and Kintu crossing into Buganda.

Before the Kintu-Mukama migrations, the Basoga socio-economic and political society was dominated by various clans, which determine blood relationships (Nayenga, 2002:42). Cultural relationships were also forged through the indigenous religious institutions that brought
the Basoga together to worship. People all over Busoga would meet at religious shrines built for the founding figures Kintu and Mukama. The Basoga in the areas of Bukono, Busiki, Bulamogi and Buyende (found in the most northern parts of Busoga) have always observed Mukama as their Enkuni that is occasionally consulted when there are community crises. Most of the time, traditional healers especially male diviners from these areas carry the title of Mukama. Amasabo are erected in these areas in honour of Mukama the spirit. It is part of the tradition in these areas to perform ritual cleansing when facing the west towards Bunyoro, where it is believed that Mukama originated. Likewise, in the central and southern parts of Busoga, Kintu, the spirit is the most central in ritual sacrifices intended to restore health and wellness among the people. Kintu influenced mainly the southern areas of Busoga and crossed over to Buganda, accounts for the similarity of healing spirits between the Basoga and the Baganda. Ancestral spirits like Kintu, Kibuuka, and Mukasa are both in Buganda and in the southern parts of Busoga. To coexist with their neighbours, the Basoga, who lived near the border areas, adopted dialects that reflected their locations. Examples include groups known as the Bakenhe and the Banyala, who live on the eastern and western basins of Lake Kyoga, respectively. Although the languages (Lukenhe and Lunyala) of these groups cannot be classified as Lusoga, they are similar to Lusoga (Nayenga, 2002:42).

The indigenous Kisoga pattern of settlement consisted of randomly dispersed subsistence holdings that were in each omutala (a highland area between swamps). The omutala was subdivided into ekisoko (sub village), which had an appointed or hereditary headman who distributed land. Land was available to both relatives of the headman and non-clan members. As long as the land occupant paid the initial dues and fulfilled the customary obligations, the occupant had secure tenure (Nayenga, 2002:43). This pattern of settlement was aligned also to provision social services and amenities to be enjoyed by the people. Each Omutala had its water source, called ‘ensulo’; a gathering ground for meetings as well as a traditional healer, who provided healthcare services to the people on that Omutala. It was very common to have a bone setter, Mulerwa, diviner and herbalist on each Omutala. Communal healing activities were organised by each Omutala whenever it was necessary. Residents had more faith in the healers on their Omutala than in those of the neighbouring villages. Additionally, participation in these communal healing traditions is what defined both their individual and collective identity as people who stay together (Kirmayer, 2004:33). This tradition has long since disappeared.

13 Kabaale Bitimbito, 71years, Diviner and Chairperson of Healers in Namutumba district. Interviewed on 20-04-2015
14 Kagoya Sarah, 53years, Client, Isegero Village-Namutumba District. Interviewed on 16-05-2015
Traditional healers in Busoga today have moved beyond these boundaries. They have dispersed into areas where their services are much needed.

A village consisted of scattered homesteads, and a homestead consisted of a building or group of buildings. Traditional houses were round, beehive-shaped, and thatched with dry banana leaves from the top to the ground. During the twentieth century, this building style was converted to thatch with walls made of mud. (Nayenga, 2002:42). Photograph 1 below indicates that healing shrines owned by herbalists and diviners have maintained the traditional architectural shapes. Shrines continue to be built in round-shaped forms using mud and dry banana leaves - *eisandha* and grass - *eisubi*, despite the availability and possibility of modern building materials like iron sheets. This is because spirits wish to continue to live in their traditional hubs they were accustomed to. These traditional houses do not disorient the healing spirits from the realities when they were still living.\(^{15}\) It should be noted that, whereas some traditional healers have built palatial houses for their families’ accommodation, their healing shrines are still constructed using rudimentary building materials. Usually, there are several of these shrines for each ancestral spirit or *Mizimu or Emizimu* (both used in the plural) in one place, constituting a real homestead for these spirits.

\(^{15}\) Patrick Wairagala Mandwa
Since each of these *Emizimu* (plural) play defined roles in the well-being of the living, each *Muzimu* (singular) is consulted depending on its specialty. For example, Igombe, the askari spirit can be called upon to hunt for stolen property.

British colonial rule introduced clustered settlements in Jinja (Nayenga, 2002:42). With a growing town population and scores of civil servants in the towns of Busoga, modern and sophisticated housing units have been erected. People prefer to build the so-called ‘self-contained houses’ especially in these urban settings.\(^{16}\) Due to increase in trade, Busoga is becoming urbanized. Towns like Bugembe, Busembatia, Namutumba, Buwenge and many others along the Jinja-Iganga highway have sprung up and have become some of Uganda’s major towns. Some have evolved into municipalities, like Iganga. The fast-growing urbanisation of Busoga has been due to the deliberate government policy of decentralization, with local governments being allowed some measure of freedom to determine and work on their needs. Feierman (1985:86) explains how urbanisation is notably associated with infrastructural development in terms of roads and railways as well as increased movement of people from one place to another, which inevitably enhances the transmission of communicable diseases. The trend shows that traditional healers tend to be attracted to places with a growing population.

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\(^{16}\) This is a housing unit with a bathroom(s), toilet (s), kitchen, and store, inside the structure.
study by the African Technology Policy Studies explains that this is because most migrants from rural areas are still attached to their traditions and still consult traditional healers for medicine (ATPS, 2013:26). Patterns of provision, access and utilization of traditional healing practices vary along the rural-urban divide. This will be explored in detail in Chapter Five of this thesis.

Another report by Amoah and Gyasi (2016:1) reveals that knowledge of traditional medicine, various modalities of traditional medicine and the sources of traditional medicine vary significantly among the general adult population between geographically delimited rural and urban areas. Given differences in baseline characteristics of individuals on the one hand, and the diverse political, socio-cultural, ethnic and environmental orientations across space as well as the various levels of social network types and cohesion on the other hand, one would expect specific variances in the form of traditional medical modalities accessed, information sources and sources of traditional medicine between the rural-urban spectrum. Consequently, the effect of migration and urbanisation on traditional healing practices cannot be ignored.

Amoah and Gyasi (2016:1) further analyse how rural-urban migrants who settle in urban communities retain their old ways of treating their afflictions. The formation of new acquaintances in urban localities by newly migrated rural dwellers transmits knowledge and popularity of traditional medicine within their new circles. The above authors conclude that personal health philosophies of people in both rural and urban prefectures invariably have a key role to play in the decision to access and use traditional medical modalities. Above all, movement of healers and people (clients) to new settings creates conditions in which new meaning, beliefs and practices connected to health and well-being on one hand, and illness and healing on the other hand, are constructed in relation to the new environment (Hungwe, 2012:145).

Laurence Kirmayer explores the challenges to healing traditions as caused by the dynamism in social organisations of previously known traditional societies. He states the following:

In multicultural urban settings, however, we face situations in which many people have only a shallow connection to a tradition and healing practices themselves undergo creative change and hybridization. Globalization has increased the pace of cultural confrontation, challenge and change. The contemporary world presents us with a new situation in which the coherence of traditional systems of healing and their links to an underlying culture and worldview are challenged and strained. Systems of healing that were rooted in a particular cultural tradition, community and way of life, have been uprooted, packaged and made available in a global marketplace. This has important implications for the efficacy, ethics and politics of healing practices. (2004:44-45)
Kirmayer’s views are a confirmation that healing traditions are re-invented in ways that match the needs and challenges of the people in the urbanized environments. As Flint notes, healing traditions change overtime but remain strong in whichever circumstances with a reflection of the current people’s wishes and interests (Flint, 2008:16). The continued use of traditional healing among people influenced by many modern and global changes indicates resilience of traditional medicine in the face of globalisation.

But just as I noted earlier, re-inventions of healing do not mean that traditional principles are scrapped altogether, as those who continue to practice in the urban areas get the knowledge through parents and grandparents of the earlier generation. In Busoga, I established that traditional men and women have found their way in the weekly open public markets of Busembatia and Namutumba town councils on Fridays and Tuesdays respectively, selling herbal remedies spread on the ground; some using amplified voice speakers luring prospective clients to buy their medicines. As Rosa and Alves (2007:550) analysed similar trends among Afro-Brazilians, traditional medicine in the urban areas have become part of the regular business that may involve advertising, the use of books, describing for example the components and indications for application of traditional medicine. Animals and birds especially sheep (entaama) and pigeons (engyibwa) that are demanded by healers in treatment of the sick are now sold in the public markets. Yet hybridization is common where some traditional healers have adopted the use of modern medical equipment in the diagnosis and treatment of the sick. It is not uncommon today to find thermometers, microscopes and test tubes in an urban traditional healing facility. Such changes are not unique to Busoga but have also been noticed in other sub-Saharan countries like Ghana, where Fuso (1989:400) has studied the impact of urbanisation on healthcare provision. This not only points to the fusion of commercialisation with healing but also indicates how traditional medicine continues to hold a lot of significance for the urbanized people.

2.4 Demography of Busoga

The Busoga sub region found in the greater eastern region consists of the following ten administrative districts: Bugiri, Buyende, Iganga, Jinja, Kaliro, Kamuli, Luuka, Mayuge, Namayingo and Namutumba. According to provisional results of the 2014 Population and Housing Census carried out by the Uganda National Bureau of Statistics, Busoga has a total population of 3,609,484 people (UBOS, 2014), which represents about 10% of Uganda’s total
population. This is no mean percentage to Uganda’s total population. During British colonial rule (1895-1962), Busoga attracted immigrants who sought employment in the cotton ginneries, the sugar estate at Kakira, and factories in Jinja, which together make up Uganda's industrial heartland. In the late 1980s Jinja had a population of fifty-five thousand, making it the second largest urban centre in the country (Nayenga, 2002). Jinja has since been overtaken by Iganga district being the 12th most populated district. Iganga has a total of 506388 people as compared to Jinja’s 468256 people (UBOS, 2014). Although this thesis does not undertake a quantitative approach, it would be very useful to know what percentage of this population has access to either traditional healthcare or modern health care facilities in Busoga. In this thesis, I have limited myself to analyzing perceptions, and identities of those who provide and utilise traditional healing practices in this society. Nonetheless, the impact of urbanisation on healthcare facilities is severe as urban areas are faced with an increasing population that does not match with the health facilities to cater for the population’s needs. Further with increase in numbers of people in the towns, there arise diseases that are linked with poverty as well as infectious diseases like HIV/AIDS, which spreads rapidly among the poor and vulnerable. Menan Hungwe Jangu (2012:3) notes that such health challenges ultimately overwhelm the existing medical facilities, which create opportunities for traditional healers to fill the gap. Towns therefore become an attraction for several traditional healers from all walks of life, who attempt to attend to the unmet health demands of the urban population alongside their other socio-economic deficiencies like poverty and unemployment.

Language is an intrinsic part of traditional healing, but its scale and direction of use is implicitly affected by all the demographic developments highlighted above such as population, urbanisation and migrations (O’riagain, 2002:8). There is a close relationship between a quantitative understanding of human space use, of population structure, and of cultural and linguistic patterns. It is therefore very important to analyse the language of the population described above as both population structure and language usage influence both provision and utilisation of traditional healing practices. Sharing a common language is one of the basic traits that define a group of human beings and this correlates with the evolution of cultural heritage (Manrubia et al., 2012:1). Urbanisation is one of the factors that influences the evolution of language through which traditional healing systems are preserved and perpetuated from one generation to another. It is therefore important that to fully understand traditional healing practices of the Basoga, the language of this cultural group has to be understood. The language
spoken by the Basoga is Lusoga, a Bantu language in the Niger-Congo family. As in the Bantu languages in the Lake Victoria region, nouns among the Basoga are reflected by changing prefixes: human beings are indicated by the prefix *Ba* (plural) and *Mu* (singular); the name of the country (region) by the prefix *Bu*; the language by the prefix *Lu* and an adjective derived from any of these by the prefix *Ki*. Thus, the region is called Busoga; the people are Basoga (singular, Musoga); the language is Lusoga; and ‘of the Basoga’ is described as Kisoga.

Lusoga is further divided into two dialects: *Lupakooyo*, a dialect similar to Runyoro, was traditionally spoken in parts of north Busoga, and the Lutenga dialect was used in the south (Fallers, 1965:1; Nayenga, 2002:42). Specifically, the districts of Kamuli, Mayuge, Jinja, Iganga, Luuka, and Bugiri use mostly Lutenga. Lupakooyo is used primarily in the districts of Buyende, Namutumba (formerly Busiki and Bukono counties of traditional Busoga) and Kaliro (Bulamogi). Whereas the Basoga living in Bukono and Busiki are said to be speaking ‘*Lukono*’ and ‘*Lusighini*’ respectively, it is very difficult to tell whether there is any difference between the two supposed dialects, which are not just akin but truly undifferentiated from *Lulamogi*. This is the case by even those who speak these three dialects. Consequently, the three together make up ‘*Lupakooyo*’. Today, due to migrations and interactions with other groups of people, many other languages are becoming dominant in the area. Lusamia, for example, is common in the district of Bugiri because there has been much interaction with the Basamia Bagwe, who are the most approximate neighbours of the Basoga in this district. The *Lunyala* language, which is akin to *Lupakooyo*, is also widely used by the Banyala who live near the lakes of Kyoga, in now the Buyende district and the shores of Lake Victoria in the Mayuge and Bugiri districts.

It is very important to understand the manner of communication of the people in Busoga if one wants to fully conceptualize their ideologies and interpretation of well-being and illness. The National Collaborating Center for Aboriginal Health (NCCAH) in Canada asserts that culture and language influence peoples’ perceptions and experiences of health and illness. Language is ‘a conveyor of culture’ and the means by which knowledge, skills, and cultural values are expressed and maintained. Language suppression, particularly for Indigenous peoples, is ‘a form of disempowerment and oppression’ that impacts self-identity, well-being, self-esteem and empowerment, all of which are key ingredients for individual and community healing. Language maintenance and continuity is critical to revitalizing culture and to the survival of any...

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indigenous people. In African societies that are plagued by disease and illness, the significance of language in enhancing the health of individuals and the communities cannot be underestimated. For example, ancestral spirits emerging from the Mukama figure communicate their will in the Lunyoro language, whereas those akin to Kintu communicate in the Luganda language, let alone those that use native Lusoga. The processes and conditions of eliminating afflictions have to be interpreted in a language that the afflicted understand.

Moreover, healing processes are full of metaphors and symbols of specific societies in which they are practised. Levers (2006:91) argues that this is significant because metaphor is situated in the language that links healing processes with wider social, cultural, epistemological, ontological, and cosmological considerations. Any attempt to ignore these linguistic and cultural linkages to illness and disease, risks to misunderstand the most effective treatment and preventive interventions that people in specific societies believe in. Therefore, to capture the actual perceptions of the Basoga, the researcher has used several Lusoga words along with their translations, and provided literal translations of these words. In many sections, the use of language in specific healing instances will be analysed.

Busoga, particularly southern Busoga, has experienced catastrophes since the nineteenth century. Between 1897 and 1911 Busoga lost many people to severe famine (endhala), smallpox (namusuna), plague, and sleeping sickness (Mongoota) (Nayenga, 1979:151-178). Although the population began to recover in the 1930s to the 1960s, AIDS has taken a toll since the 1980s. Traditional healers in Busoga have had remedies for all these diseases. Their efficacy in treating those suffering from these diseases is what cannot be ascertained. Even with HIV/AIDS, some traditional healers claimed that they have medicines that could cure the virus, only that they cannot be trusted by the government. Due to ignorance, healers in Busoga attributed the Aids disease to witchcraft in its early beginnings, but many have come to appreciate the scientific developments made in ascertaining its cause. They now encourage their patients to undergo a voluntary counselling and testing for HIV. Before colonialism, Busoga society always had traditional health safety nets to deal with these catastrophes so that they did not turn into epidemics to claim many lives. Even with the chronic Aids scourge, traditional healers have continued to play a significant role in the fight against it. Some of the herbs are said to boost

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18 Ibid.
19 Kabaale Bitimbito
20 Kawuma Safina Nabirye, also known as ‘Senga Wa Busoga’
immunity among those infected. Some of the healers have provided counselling to the infected and their families.

2.5 Social-Cultural Organisation of Busoga Society

As I delve into the social-cultural organisation of Busoga, it is important to state that traditional healing practices evolve from the social-cultural construction of society. It is on this basis that Comaroff (1980:639) observes that since healing is explicitly aimed at ensuring that there is balance and harmony between the physical, social and spiritual realms, it can only be understood better with the examination of the social-cultural system in which it is practiced. Understanding the cultural organisation of society is central to understanding its healing processes (Feierman, 1985:77). I should also state here that traditional healing is one of the most effective mechanisms through which African societies maintain their cultural values and institutions. Feierman argues that the person who controls traditional therapy serves as a conduit transmitting general social values, and is also capable of reshaping and reinterpreting those values in the healing process. The interaction between traditional healers and the clients greatly reinforces a society’s cultural values and norms (Feierman, 1985:75). Doubtlessly, the perpetuators of cultural values and institutions like marriage, religion, cultural leaders, and restrictive moral codes of conduct are the traditional healers.

Busoga society’s cultural organisation has been rich and unique for centuries. Pre-colonial Busoga enjoyed unhindered peace and lack of influences from other cultural groupings because of its geographical location as discussed in the first part of this chapter. However, this changed greatly with the coming of the Arabs, who opened this society to trade with other peoples; and the British through colonization. Pre-colonial Busoga was arranged in small groups depending on the purpose of each group. Groups were arranged based on families, village, clans, profession and age (Musana, 1995:7). However, the most significant social organisation was the clan system. The Basoga had a clan system called ‘ekika’ or ‘ebika’, (singular and plural respectively) which is still prevalent in modern day Busoga. This was a composition of people who were related to each other by blood. People who belonged to a certain kika had a common ancestry (Fallers, 1965:64; Cohen, 1972:6). Nayenga (1976:14) and the Research Cultural Center (2013:18) note that a clan in Busoga society was and still is today a patrilineal descent group that includes individuals who recognize a common ancestor through the male line. The father is central to the clan system because all his children and those of his sons belong to his clan. A married woman was adopted into the new clan of her husband, and her names upon death could
be named after children born in her husband’s clan. These later became clan names of the husband. One cannot marry a member of one's clan or one's mother's clan. A clan's identity is based on the name of its ancestors. A clan name is an important aspect in determining one’s identity. Traditional healers and heads of clans play a significant role in restoring the wellbeing of those who become sick due to being given clan names where they do not belong. Children are believed to experience unending episodes of sickness if their mothers conceived them by a man of a clan other than that of her husband. There are also certain names that area bad omen the child and are linked to sickness of the infant. To determine the right clan name for the infant, a clan head or the clan’s diviner performs a naming ritual by throwing two hens on top of a house; each hen with a different name. The hen that flies off first from the roof determines the name to be given to the infant.

Clan names are formed by combining the prefix mu (singular) or aba (plural) with the form ise (father) and with the name of the common ancestor. Basoga clans were divided into two categories: abakopi (commoners) clans to which the majority belonged and abalangira (royal clans). Intermarriages between commoners and royal families tended to close potential social gaps (Cohen, 1972:14). Currently these classifications are not as predominant in Busoga as they are in Buganda. The number of clans that make up Busoga has always been a bone of contention. In 1933, Lubogo estimated there to be approximately 133 Basoga clans, while by 1972, Cohen claimed that there were about 220. Nayenga, writing five years after Cohen, affirmed this number, but also explained that about 70 totems were shared amongst the clans. A totem is usually a plant, an animal, a bird or other natural figure that spiritually represents a group of people, who belong to the same clan. Normally each clan has a distinct totem, which it observes in reverence. Members of a clan are forbidden from eating, mistreating, profaning or blaspheming their totem. It is therefore a taboo to eat a totem of a clan to which one belongs. Eating one’s totem or desecrating it in any form promotes illnesses not only in the individual but also members of his/her family. This would require traditional healers to perform certain rituals to avert the illnesses.

Because there are dire consequences for profaning one’s totem, Paul Wangoola argues that the African system of totems is a demonstration that there is a very close relationship between humans, animals and plants (2000:266). By 2013, the Cultural Research Center at Jinja raised the possibility of an increased number of clans due to several cultural groups that have entered Busoga in the recent past (Cultural Research Center, 2013). The Cultural Center has not
been able to provide a definitive figure regarding clan growth. Furthermore, influential families with numerous descendants can outgrow their clans and separate from them to form new ones, usually taking on a new name but continue to observe and revere the totem of their former clans. Each clan has its specific traditional healers, who are custodians of the shrines in which the ancestral spirits dwell. They are e consulted in case of disharmony or disease to one of its members.

Specific clans are also endowed with specialized traditional medicinal practice. Among the Basoga, the Baise-Ndhase are believed to be gifted in the art of removing bones stuck in the throats of people. This practice is called ‘empagama’. As a result, some of these healing practices define the identity of the specific clans. Observance of clan norms and traditions cements a society’s well-being. Deviation from these traditions brings disharmony and ill-being among community members. For example, incestuous relationships are taboo and a sign of ill-being. Those involved are thought to be psychologically sick. To restore those who commit incest, clan leaders perform health rituals upon them using traditional herbs. Animal sacrifice is made to appease the spirits from delivering wrath upon the incestuous clan members (Fallers, 1965:66; Nayenga, 2002:44). The clan and lineage social systems are still very vibrant in Busoga. There is a hierarchy of clan leadership right from village level (ekyalo - singular or ebyalo - plural) up to the saza or Amasaza (counties). The leadership structure of associations of traditional healers in Busoga continues to use this socio-political structure to protect and promote traditional medicine. Marriage and children define the wellbeing of individual members of society. The ability to procure a wife and produce children is one way society identifies one as a man. There is much suspicion of impotence for a man who fails to procure a wife and have children (Fallers, 1965:74). Many children in a family were a safety health net among the Basoga. They provided care to the parents in old age. In a society where there are no state welfare services for the sick and elderly, the children are a ‘social insurance’ for their parents.

However, due to the emerging tough economic times, education levels and diminishing land, many Basoga today - especially those that have been to school - prefer smaller families. If one has many children today, this is not necessarily from a need to adhere to customs but often because of a lack of education and an inability to keep up with the changing demands of a globalized society. This may account for the fact that Busoga has the highest fertility rates in the country (UBOS, 2014).
It is, however, still a widespread practice for people to marry, establish families and have children. Elopement, known as ‘okubayira’ in Lusoga, was unacceptable and brought shame to the girl’s parents, let alone denying the family the ‘omwandu’ which the man was expected to pay. Parents, especially the mothers, use traditional medicines to prevent their daughters from elopement and becoming pregnant before marriage. Elopement was and still is looked at with scorn, as it deprives the girl of the necessary traditional health rituals that would be performed to ensure her well-being in her new home. For example, she stands the risk of being infertile, since the spirit responsible for marriage and fertility would not have been appeased before her marriage. In the recent past, ‘Okubayira’ has, however, become common among the young generation of Busoga. This eventually generates into cohabitation for longer periods of time and in several cases till death of either partner. Because it is now the most common in not only Busoga but in the whole of Uganda, there have been attempts to legalize it under the Marriage and Divorce Bill of 2009. During the marriage ceremonies, the role of traditional healers is significant in stabilizing marriages. Sacrifices have to be made to the spirit of fertility on the eve of the marriage. Usually, a goat is slaughtered, and its intestines are taken to the spirit’s shrine, asking it to let the daughter marry in peace and have several children.

For the educated, the influence of traditional healers in the marriage arrangements has been reduced. Diviners are no longer necessary to officiate marriage ceremonies of the urban educated. Marriage rituals performed by traditional healers, like the sacrifice of a female goat on the eve of the marriage ceremony, have slowly been eroded by the educated Basoga. Female traditional healers who provided marriage counselling to the bride have been shunned in favour of Christian priests and professional marriage counsellors.

There is a close relationship between marriage, life and health among the Basoga. Life is brought forth and maintained through marriage. Married men are expected to look healthier than unmarried men, because their wives’ chief role is to prepare good meals to enable them carry on with their duties in the public sphere. Blame is put on the wife whose husband looks malnourished. Marriage was and still seems to be a traditional health safety net used by the Basoga against sicknesses. Wives that take care of their sick husbands till they die are praised as heroines during funeral ceremonies. It is an honour for a wife or husband to be at the deathbed of his/her spouse until his/her death. The Basoga discourage okuwuala on the part of the men.

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21Okuwuala is used in reference to men in Busoga, who stay unmarried especially for a long period of time.
because they risk not having someone to take care of them in old age and during illness. This is one of the reasons why older men were encouraged to marry young women.\(^\text{22}\)

Marriages have to be guarded against disintegration and the importance of traditional healers in ensuring that this happens is crucial. Suspected witchcraft on the part of co-wives is the obvious reason for such disharmony in polygamous marriages. Those who find it challenging to procure the right marriage partners, find solace in traditional healers, who claim to have medicines that can soften the hearts of those whom they desire to marry. Traditional healers are believed to have powers that can undo the witchcraft practiced by jealous neighbours, co-wives and ex-spouses, who prevent others from acquiring marriage partners.\(^\text{23}\)

Traditional healers have taken centre stage as marriage counsellors and sex education volunteers, replacing the old and waning fabric of Aunts and Uncles, who were the ultimate consultants on these issues especially for young men and women. Having strategically placed themselves as marital counsellors, traditional healers claim to be experts on how to stabilise marriages (\textit{okutereza Amaka}) and on sex education. No wonder many of the healers who offer these services take on the title of ‘\textit{Songa} and \textit{Kojja}’ for men and women respectively. The efficacy of traditional healers’ role in the marriage institution has less to do with the herbs and spiritual powers that they espouse to have, than with their ability to offer psycho-social support to those experiencing marital challenges. They have mastered the art of marriage relationships and, some of them being elderly and having been married for quite a long time, understand the challenges involved. Traditional healers teach women among others to be submissive to their husbands look physically attractive and ensure that they maintain clean homesteads.\(^\text{24}\)

Traditional Busoga society had extended family organisations. Nuclear families were frowned upon. They were described as an imposition of Europeans. A single household composed of a husband, wives and their children, usually staying in the same house or semi-detached houses but in the same homestead. Nuclear families are today preferred by those who are educated and who live in the urban centres. It should, however, be noted that each of the members in the extended family has a role to play for its well-being (Nayenga, 2002:44). The young take care of the sick and old members of the family, whereas the old are very instrumental in providing counselling and guidance to those who are faced with emotional and psychological challenges. The old members of the extended family offer fast remedies to the sick before they

\(^{22}\) Katende Kibenge  
\(^{23}\) Kawuma Safina Nabiry, also known as ‘Senga Wa Busoga’  
\(^{24}\) ibid.
call in a known and specialized healer. In times of sickness, the choice of healing to be sought for the individual member is determined by members of the extended family but not the sick individual himself/herself. Indeed, Feierman acknowledges that the efficacy of the therapy too is determined by its effect on social relations of members of the extended family. Relatives are known to hold ultimate authority over the nature of treatment to be given to the patient (1985:79-81). Relatives hold more power than the healer over the direction that the healing process should take.

Inheritance and succession mark one of the major milestones in recognition of the dead male member of society while at the same time ensuring that his life continues to be relevant to those living. This succession system helps to ensure continuity of not only the lineage but also the home of the deceased. Cohen (1972:10-11) observes how succession and inheritance have been crucial to the maintenance of the lineages in society. Sons are appointed as inheritors of the fathers’ estate.

The centrality of traditional healing practices in succession and inheritance among the Basoga cannot be ignored. Firstly, the last funeral rites, also known as ‘okwabya olumbe’ in Lusoga serves to mark a new dispensation of triumph over illness as many rituals are observed to ensure that the sickness that killed the buried family member does not resurface to kill another. This involves the sprinkling of herbs in and around the house of the deceased, aimed at providing protection to the living against the illness. ‘Okwabya olumbe’, literally meaning ‘bursting death’ indicates that through last funeral rites, death has been conquered and not expected to happen in that family again. The spirit of death has to be taken away from that specific family that has experienced the loss of a family member; and this is the sole responsibility of traditional healers; who are perceived to be the link between the physical and spirit world. Secondly, when there is contestation over the rightful heir, traditional healers are called upon for determination through consulting the ancestral spirits. Nabamba Budhagali, the chief diviner in Busoga was called on to determine who the rightful Kyabazinga25 of Busogawas; with two rival claimants to the throne of the Busoga kingdom.26 Sons, as heirs are to be the custodians of the family’s traditions and help to ensure the continuity of the clan/family (Nayenga, 2002). Among such family traditions, which are expected to be preserved by the sons, are the family’s healing shrines, graves as well as herbal remedies, also called ‘ekiti eky’obulezi’ to he handed over from one generation to

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25 ‘Kyabazinga’ is a title of the traditional cultural leader of the Basoga
26 Nabamba Budhagali, 90years (approximate age), Chief Diviner, Budhagali-Budondo Subcounty. Interviewed on 15-04-2015, 16-04-2015
another. Therefore, the choice of heirs sometimes requires the guidance of the spirits through the clan’s mediums and diviners. Traditional healers also perform cleansing rituals upon the selected heirs to bless and protect them against any acts of witchcraft.

All in all, the observance of inheritance and succession rites among the Basoga are indeed therapeutic to the victims and those who are affected by life threatening conditions like sicknesses. As it is with many other traditional societies in Uganda, clan leaders, extended families, as well as chiefs and other hereditary rulers are the custodians of their ancestors’ shrines; they have direct access to the guardians of customary morality, the ancestral spirits. While it is the ancestors who punish their sinful descendants with sickness and misfortune, it is those elders and leaders mentioned above who bring such troublemakers to the attention of the spirits. Therefore, lineage elders—when supported by the ancestors, mystical curses, or special knowledge of medicines—can use the threat of misfortune to exercise some control over their juniors. They can invoke the wrath of the spirits upon those members who defy societal rules. The wrath is in terms of sicknesses and other such misfortunes that may plunge the defiant families into crises. These elders are associated with witchcraft that causes chronic misfortunes and disharmony upon those who threaten their positions in society (Siegel, 1996:18)

2.6 Religious Setting of Busoga

Traditional healing and healers are essential elements of the religious traditions of Busoga society. They are the priests and custodians of the Kisoga traditional religion. Just like the Pope, Bishops, Deacons and all other clergy in the Christian religion and Sheikhs, Mufti(s), Imams are in the Islamic faith, so are the various categories of traditional healers in the traditional religious organisation of Busoga. Traditional healing and the religious traditions are intertwined. In his attempt to explain the interconnectedness Austine Okwu makes the following observations:

Traditional therapy on the whole is not meant for healing illnesses only. It is a process for restoring the harmony of relationship between man and divinity, between the individual and society, as well as for the total physical and spiritual well-being of the individual and society. (1979:24)

Okwu Austine suggests that there exists an inseparable web between religion and healing and that the belief system of indigenous societies clearly portray religion and healing as one and the same. Miller and Thoresen (2003:24) epitomize Okwu’s assertions when they point to the thinking and reality of people with such belief system where spirituality and religion have important influences on their health and behaviour. Coyle Joanne’s emphasis on the significance
of religiosity and spirituality points to the hope and explanations that these two offer to the 
people as they attempt to understand the cause and preventive mechanisms or measures to cope 
with illness and adversity (Coyle, 2002:594). Therefore, understanding religious beliefs and 
practices of one society is one step towards understanding their healing traditions, as spirituality 
and religion serve as important principles in the health and healing of society.

Further, Schumaker et al. (2007:709) argue that to attain a balanced analysis of healing 
traditions, it is important that one looks at the interconnectedness rather than the separateness of 
the material and spiritual realms. In the pre-colonial era, Busoga, just like other African societies, 
was very religious. The Basoga knew and worshipped their god. This god was known by 
different names among which were *Kibumba* meaning Moulder, *Katonda*, meaning Creator 
(Mbiti, 1967). Just as Mbiti (1969) states, the Basoga were notoriously religious and practiced 
religion in all aspects of their life. Right from conception up to death, the life of a Musoga was 
steeped in religious ceremonies, rituals and observances. The religious traditions of the Basoga 
were much related to their cultural, economic, social and political aspects of life. The people’s 
perception of God was rooted in their culture, and religion was their way of life. Therefore, the 
entire socio-economic organisation and the way society was governed were controlled by 
religious principles. Even today, political and socio-economic activities are often flavoured with 
religious expressions and rituals (Agbiji & Swart, 2015:1). African political and economic elites 
have often resorted to religion in their competition for the diminishing resources of wealth, 
political power and prestige (ibid, pp.4). The traditional religion of the Basoga was and still is 
cosmic and monotheistic, and without systematic forms of worship. Religion is not for an 
individual but rather the whole community in which individuals live and of which they are part 
(Musana, 1995:4).

The Basoga believe in the existence of spirit power which is omnipotent, timeless and 
this spirit is key in determining the occurrence or non-occurrence of certain activities in society. 
The influence of the spirit upon Soga society is said to be above the human level of 
communicates a hierarchical aspect of religious observance, as are their gods and spirits. It is, 
however, not contestable that the Basoga are highly religious and they live an entirely religious 
life.

The Basoga have a supreme god who is traditionally called *Lubaale*. *Lubaale* is the 
*Kibumba* (Moulder) and the Creator (*Katonda*). Below *Kibumba* are a series of beings in the
spiritual world of the Basoga who act as mediums between the Basoga and Kibumba. There is a belief that Kibumba is far from the people, yet it is very easy to reach out to him. This is through the other beings in the spirit world. Loosely speaking, all ordinary Basoga will refer to all these spiritual beings other than Kibumba, the supreme god, as ‘emizimu’ (singular- ‘omuzimu’). Therefore, on many occasions, all spiritual beings are referred to as ‘emizimu’. But technically speaking, the spiritual hierarchy in Busoga distinguishes between three categories of spiritual beings. These spiritual beings were emizimu, enkuni and emisambwa.

The ‘Mizimu’ are the spirits of the dead relatives and ancestors of the Basoga. But the Mizimu, also often called ‘emizimu’ are also organized in a hierarchical manner, with each muzimu having more power and importance in society yet complementing each other for the sustenance of Busoga society. Because the Basoga have a strong belief that the spirits of the dead can affect the living, effort is devoted by families to ensure that the dead are given a decent burial. These Mizimu are the living dead of society (Mbiti, 1969:83), because they have died physically but continue living and influencing societal affairs in their spiritual form. These are revered and appeased always. Failure to do so bring curses, misfortunes, and sickness upon those supposed to be responsible. In extreme circumstances, when the muzimu is so angry with the living it can cause death of a family member. To keep peace between the living and the Mizimu, constant sacrifices are offered. The Mizimu are respected mainly among members of the same patrilineal kinship (Cohen, 1972:19; Musana, 1995:4). The belief in spirits of the dead and the ideology that the dead continue living in the next world demonstrates how the Basoga’s concept of life after death is similar to that of Christianity and Islam.

In the next category of spiritual beings is ‘Nkuni’ (used as singular and plural). Nkuni are spirits of the founding fathers of the clans in Busoga. Each clan has this kind of spirit (Cohen, 1972:19). ‘Nkuni’ also written as ‘Enkuni’ represent the first place of settlement for the clan and thus this place is one of worship and reverence. The Nkuni rarely appears among its people and only shows up when it is a pressing issue. Places of worship are built at sites where the first settlers arrived. Nkuni are considered the guardians of the clan. They have the power to cure diseases, bring prosperity or punish errant individuals. Each clan has its enkuni, for which a special name is given. For example, the Baise Igaga clan’s enkuni is called ‘Nnendha’. It has always been customary for members of particular clans to occasionally make pilgrimages to the site of the enkuni (Nayenga, 1976:33). However, with time, due to migrations within Busoga members of particular clans have begun to establish sub shrines for this Nkuni in those places.
where they have settled. Currently, it is common to find several members of the same clan in different geographical settings of Busoga claiming to have their Nkuni with them with a shrine erected in this Nkuni’s honour. This is contrary to the traditional view in which the enkuni was worshipped in the particular place where the first man of the specific clan first settled.\(^{27}\)

The third category of spirits is called ‘Emisambwa’ or simply ‘Misambwa’. These are spirits of dead national heroes. In contrast with the Mizimu and Enkuni, which are related to individuals and groups of people, the emisambwa on the other hand are spirits of dead people that are regarded to be much more important to the country at large (Cohen, 1972:21). The emisambwa are thought to have distinguished themselves as significant actors in the sustenance of the people in their countries. They are so distinguished because they perform extraordinary things. These include single-handedly defending their countries from extinction due to invasion by neighbouring countries. The emisambwa are also associated with such important events such as marriage, birth, fertility and death (Cohen, 1972:21; Nayenga, 1976:34).

Examples of emisambwa in Busoga include Kintu, who relates to prosperity; Mukama, who is associated with the deformities of newborn children and Walumbe, who is associated with death. There are other categories of emisambwa in Busoga that are known to be harboured and manifested in nature. These have their ‘homes’ stationed in rivers or riverbanks, trees, wells and hills. For example, one of the most common musambwa found at wells is Meeru. Nabamba Budhagali, the protector of Busoga territory and who could walk on the waters of River Nile without drowning, has come to be the most well-known musambwa among the Basoga in this generation. Usually, worshipping places called shrines are erected in honour of these spirits. Those who wish to be blessed, as well as those with several sicknesses and life challenges often visit these shrines to have their problems solved. Musana (1995:5) analyses how all these various categories of supernatural beings, in the religious traditions of the Basoga have been for ensuring the ultimate well-being of the living.

Sacrifices were a key ingredient in the pre-colonial religious traditions of the Basoga. For all the spirits identified above, regular offering of sacrifices in form of cattle, sheep, goats, chicken, pigeons were made (Musana, 1995:5). Sometimes the spirit itself would demand certain special sacrifices to be made in its favour, failure of which would bring misfortunes to those concerned. In all activity of sacrifices, the shedding of blood was key to the appeasement of the spirits. Nayenga (2002:46) notes that performance of rites involving sacrifices is part and parcel

\(^{27}\) Patrick Wairagala Mandwa
of the religious practices of the Basoga. To avert any misfortune or sickness as well as death thought to be caused by the *Mizimu*, sacrifices are made. Nayenga further cites circumstances when families are faced with calamities such as sickness, drought, poverty; the Basoga believe that this is due to displeasure from the spirits, who need to be appeased. The Basoga keep in contact and communion with these spirits through their special religious leaders that live among them in the communities (Cohen, 1972:23). These are men and women whom the spirits have chosen to be the mediums of communication to the people. The aspect of ‘spirit possession’ is what makes it possible for the people to get to know the will of the spirits. A spirit can be invited by the people in situations of difficulty for consultation.

Sometimes a spirit can possess one of the religious leaders in the community if there is something important or in case it has demands to make to the people. Whereas there are circumstances where any person within a family can be possessed by a spirit of his or her ancestor to have its will communicated to the family or clan, there are also specialized persons who act as mediums. These include the *Baswezi*-diviners; who perform *obulaguzi* (foretelling). Kawanguzi (1986) has made an elaborate description of the work of the ‘*Baswezi*’ in the traditional religion of the Basoga. The ‘*Baswezi*’ can diagnose the specific sicknesses and troubles faced by an individual or community. The spirits usually pick who should become the medium (*Omuswezi*) through whom their will can be known to the people (Cohen, 1972:23; Nayenga, 1976:34). Other religious leaders in Busoga society include traditional doctors, also called *Abayigha*. These heal people of various diseases and protect them against any dangers to their lives and properties (Cultural Research Center, 2003). Traditional doctors called ‘*abayigha*’ continue to exert a lot of influence over the healthcare needs of the people of Busoga today. These will be the centre of discussion in the next chapter.

These religious traditions of Busoga are, however, diminishing due to the influence of foreign religions introduced with the coming of foreigners. New religions have had profound influence upon the religious life of the people of Busoga. Some Basoga have taken on foreign religions, abandoning their traditional religious beliefs. Others are in a ‘syncretic religious box’, where they subscribe to both the traditional religious beliefs and the foreign religion of their choice. Yet others have completely abandoned the religious influences that hover upon Busoga society and are atheistic.

During the colonial era, Busoga witnessed the intrusion of many foreign religions. The Arabs introduced Islam. Then there was Christianity in forms of Protestantism and Catholicism.
Christians denounced the traditional religion of the Basoga as being satanic, devilish, and uncivilized. They also erroneously labelled the traditional religion of the Basoga as having no God. The three foreign religious traditions struggled throughout the colonial period to have overwhelming impact upon the people, with instances of conflict. Today, most of the people in Busoga claim to belong to one of the foreign religions. Other religious traditions that came along with Asians, notably Hinduism and Sikhism, have not been a major influence and are only practiced by the small Indian communities in the urban centres of Busoga.

During the post-colonial era, Busoga began witnessing many other religious traditions. These have been independent churches and cultic religions. Among the independent churches are the Isa Masiya faith, founded by Apostle Besweri Kaswabuli in Busiki, now Namutumba district, and the Universal Apostles’ Fellowship Church of Righteousness, founded by Prophet Nuwa Nabogho. The rest are numerous Pentecostal churches and splinter religious groups with a large following. In some cases, there has been a fusion of Kisoga traditional healing traditions with those of the new religions. The ‘Balaguzi Abaghalimu’, a fusion of Islamic and Kisoga traditions of healing, is one example and will be discussed in the next chapter.

The rich religious traditions in Busoga have not left society unaffected. Religion generally affects the socio-economic and political thinking and practice of the people. Whereas the foreign religions have greatly undermined the traditional religious beliefs, they remain deeply rooted in the hearts of many Basoga. In all these religions, healing of the afflicted is a key factor that they espouse to win the minds and hearts of their adherents. The foreign religions have mainly introduced modern medical facilities to treat not only their followers but also the wider community. This is in addition to the spiritual healing they claim to undertake through the ‘gods’ they profess. Traditional healing, which is akin to the traditional religious beliefs of the Basoga, remains unrivalled and, as will be discussed, is still widely practiced. Indeed, the way the traditional religious beliefs of the Basoga interplay to produce a healing tradition that has been kept for ages will be the focus of discussion throughout this thesis. I now turn to analyse the economic organisation of Busoga, showing its significance to the construction and reconstruction of the healing traditions of this society.

2.7 Busoga Society Economic Organisation

In pre-colonial Busoga, the major food crop grown was banana plantain, locally called ‘amatooke’ (Fallers, 1965:46-54). The hoe was significantly used in the cultivation of amatooke and other food crops. Cohen (1972:3-4) refers to pre-colonial Busoga subsistence activities as
composed of a ‘hoe economy’. The Basoga were so fond of the hoe that they often referred to the ‘hoe’ as a ‘mother’ - for it could provide all they needed to survive, just as a mother does in ensuring her children’s survival. Amatooke was suitable for growing due to the plentiful rain that Busoga received throughout the year. Every Kisoga homestead had a plantain garden that provided the staple food (Mudoola, 1993: viii; Nayenga, 2002:43). Amatooke was the staple food until the plantain was affected by pests. A growing population also made the land to lose its fertility. In the southern part of Busoga, (present day Mayuge district), people had invaded the forest reserves for the growing of this plantain. They were evicted due to government legislation of non-settlement in government forest gazetted areas.

Amatooke is no longer as famous as it was during the pre-colonial, colonial and immediate post-colonial periods (Fallers, 1965:46). In fact, only the elderly in Busoga talk about matooke plantains with nostalgia, and this has dwindled into a legend. Currently Busoga is supplied with Matooke from Ankole and parts of western Buganda where the soils are still good for the plantains to flourish. Because of the scarcity of Matooke and the high cost associated with buying it, it has become a reserve for the well-to-do, and a preserve for the sick. Because Matooke is traditionally central among the Basoga, the sick are provided with this food to soothe the pain.28

In addition, each household had gardens for seasonal crops such as peanuts, millet, corn and potatoes. On the edge of the holdings were patches of uncleared bush used as a source of wood and grass. In the present, untilled land is rare in the region due to the increasing population. There is unprecedented fragmentation of land. Nonetheless, the availability of these foods was determined by where one lived. The south, which receives plenty of rain, grew plantains, beans, cassava, and potatoes, while the north, with somewhat drier conditions, grew famine-resistant crops such as finger millet (obulo) and sorghum (omughemba) (Cohen, 1972:5; Nayenga, 1976:43).

The northern kept herds of cattle. In the recent past, very few Basoga kept cattle and other such domestic animals mainly due to land fragmentation. In the 1980s, cassava and sweet potatoes were the most important food crops but sadly the cassava was affected by the most dangerous cassava wilt disease that led to the famine of the 1990-1995. The government has since introduced a cassava wilt resistant type. Sweet potatoes, maize and cassava remain the staple food crops of the area. Millet (obulo) and millet bread also known as ‘obwita’-literally

28 Edisa Namwase
interpreted as ‘that which kills’ is a much-appreciated food stuff for Basoga with much inclination to ancestry of the Luo-speaking group found in the northern parts of Busoga.

But changing climatic conditions resulting in long dry seasons negatively affects Busoga’s agricultural sector. It results into lower agricultural yields, which makes it difficult for Busoga to fulfil the foodstuff requirements of her neighbours especially Buganda. The Basoga also grow foods like groundnuts, beans, peas as well as leafy vegetables like dodo, eiyobyo, and eikubi. The Basoga are also famed for being leaders in growing groundnuts called ‘amaido’.

The well-being of a society largely depends on its capacity to produce or import enough food for her people. Food self-sufficiency is an important indicator of material wealth and prosperity (Hungwe, 2012:23). Pre-colonial Busoga society fought malnutrition in children by ensuring that enough food was produced by individual families. This was enforced by chiefs, who demanded that each household maintained two large gardens, one for the family and another for the chief. The chief did not take any of the yields from the gardens ascribed to him, but this was one way of ensuring that families produced enough food to maintain family and society well-being. Poor harvests brought worry not only to the residents but also the leaders of the society. Some of these foods are so important that they are used as medicines to minimize some diseases. In some cases, there are some foods that are used as sacrifices to the gods in healing rituals. Millet and sorghum are the most common foods offered to the spirits in Busoga. They are grains used to make a local brew, locally called ‘Amalwa’ or simply ‘Malwa’. This drink is used in times of celebrations and festivities and it is also given to spirits as an offering.

The Basoga had limited commercial farming activities in the pre-colonial period. Large-scale commercial economic activities among the Basoga were introduced after the British annexation in 1895. The occurrence of famines and the outbreak of sleeping sickness between 1897 and 1911 made it difficult for the British to find a reliable source of revenue. To alleviate that problem, the British experimented with a protectorate wide “dual economic policy” between 1894 and 1923 that involved the cultivation of coffee, rubber, and cocoa on European plantations as well as African-grown cotton. Commercial cotton growing was introduced in 1905 and by 1939 had become the chief source of cash earnings for the majority of the Basoga. In addition, cotton could be grown alongside subsistence crops. Cotton cultivation also became attractive because its products were critical for industries in Jinja such as animal feed factories, textile mills, and oil and soap factories (Nayenga, 1981:185; Mudoola 1993: ix; Nayenga, 2002:43).

29 Lameka Isiko, 100 years (approximate age), Elder & Client, Bulagala Village in Namutumba district. Interviewed on 23/05/2015
Cotton production dropped precipitously because of chronic political instability and erratic economic management during the 1970s and early 1980s. Because of the labour-intensive nature of cotton cultivation, the Basoga abandoned cotton to focus on growing cash-generating foodstuffs such as corn, peanuts, and rice. This was in addition to massive privatization carried out by the National Resistance Movement government, accompanied by dwindling cotton prices. Crops like maize, rice, amaido, and sweet potatoes, which were predominantly for subsistence, currently double as the major cash crops in Busoga. The decline of cotton production in Busoga diminished the region’s significant role in Uganda's economy. However, the Basoga contribute to internal trade by selling food items (bananas, cassava, beans, corn [maize], potatoes, peanuts [groundnuts], and soybeans) within Busoga and to other parts of Uganda (Nayenga, 1981; 2002). Most of these food stuffs are commonly associated to the Basoga by the rest of the cultural groupings in Uganda. Their local Lusoga names are fondly talked of by their neighbouring cultural communities. For example, the Lusoga words ‘embooli’ for sweet potato; ‘duuma’ for maize corn; ‘amaido’ for groundnuts are synonymous with the description of a Musoga.

Fishing was once a lucrative business activity as the region is surrounded by major areas of water including Lake Victoria, Lake Kyoga and the river Nile. This is no longer the case. There is overfishing in the major lakes that have led to the depletion of fish. The central government’s regulation concerning the suspended fishing nets have made it tough for the Basoga whose source of livelihood was the lake. The fishing industry has grown, however, and is one of the major foreign exchange earners for Uganda. This is because foreign investors have made it difficult for the locals to enjoy the benefits of the lakes, as much of the fish is processed for export by the well-established factories.

Jinja town has always served as the major capital for the Busoga region. It was strategically developed by the colonial administrators as Uganda’s major industrial hub. All the major industries and factories during the colonial and post-independence era were in Jinja. The opening of the Owen Falls Dam in 1954 catapulted Jinja to a position of potential economic leadership in Uganda. Jinja attracted several major industries, including textiles, blankets, spinning mills, copper smelters, steel rolling mills, and breweries. Poor management during the 1970s resulted either in the underuse of these facilities, or their closure. Jinja’s decline as Uganda’s industrial town has exacerbated Basoga’s economic difficulties (Nayenga, 2002:43). The few surviving factories and companies still operational in Jinja act only as production units of major companies and factories found in the Kampala and Mukono districts in the
neighbouring Buganda region. Post independent government’s deliberate policy to turn Kampala into the country’s industrial hub killed the possibility of reviving Jinja’s industrial glorious past. The Madhvani Group of Companies, which is located at Kakira, is one of the surviving viable enterprises in Busoga. Started in 1905, the Madhvani Group is an Indian-owned enterprise whose operations include several large companies, the largest of which is sugar production. The Madhvani Group employs over fifteen thousand people and contributes more than $50 million annually in taxes to the national economy (Nayenga, 2002:43).

Other sugar factories have also come up, one being in the Kaliro district and another in the Mayuge district. The Basoga mostly benefit from these factories as out-growers of sugarcanes. Unfortunately, the out-growers’ scheme for the sugar industry in Busoga has had a significant negative impact on subsistence farming, where there is constant shortage of foodstuffs in those homesteads that practice sugar cane growing. Other surviving factories like grain milling, Nile breweries and power generation depend mainly on skilled manpower, which has to be sourced wherever it can be procured across the country.

Division of labour is highly gendered in Busoga society just as in other societies across the African continent. This has been the case before, during and after colonialism in Busoga. Women carry out most of the work related to subsistence farming. They are responsible for ensuring that the family has enough food throughout the year. Women and their children tend the garden and cultivate most of the subsistence crops as mentioned before. The growing and tending to the plantains (*amatooke*), was women’s work (Fallers, 1965:76). Men took an interest in commercial farming, and were heavily involved in cotton and coffee growing. Men usually claim to have no knowledge when it comes to undertaking roles that lead to subsistence maintenance of the household. Mudoola (1993:11) argued that the main reason though for the men to claim ignorance is based on their wish to promote their dignity and superiority. Involvement in such supposedly feminine duties will deprive them of the authority over their subordinates.

Until recently, when rice has become one of the major cash crops, men dominate in cultivating the swampy areas for the growing of rice for sale. In addition, because there are certain commodities that have to be bought, men have the responsibility of procuring them for their families. The introduction of commercial cotton cultivation enabled children to acquire a Western education and increased opportunities for individuals to work in cotton-related industries by then. Men found work in cotton ginneries, the civil service, and the private sector
(Nayenga, 1981; 2002:43). Since education was the key to obtaining these jobs, Basoga women, whose education was neglected, ended up becoming homemakers or working at low-paying jobs. However, with gender sensitization, there is general awareness of the changed roles of women in Busoga society. Women now play a key role in the economic transformation of Busoga. The uneducated are involved in the informal sector activities, as well as subsistence farming. Therefore, as of today, both women and men of Busoga are commonly acquiring their subsistence survival from the public service and service sector that require education. With limited sources of income due to decline in cotton production, a portion of food crop harvests is sold by the Basoga to ensure an income. These food crops are sold by the poor households to obtain money for healthcare services either with traditional healers or medical doctors. This is the case because some social challenges that need the attention of healers, like winning a husband’s love, can wait until the afflicted has the means to contact the healer. Some healers suggest that this could be the reason why they receive more clients during harvesting and immediate post-harvest period.\(^{30}\) This is a common trend with women, whose major activity is the growing of food crops. Healer Kibalya explains as follows:

Those women are so inclined to us because we understand their problems. I have, however, realized that whenever these women get money, the first stop is to go to their healers to buy love potions and to make their husbands disown other wives. They usually come after harvesting and selling maize and rice.\(^{31}\)

Healer Kibalya’s argument points to a correlation between gender, health and income. Firstly, women’s health problems are well attended to during the peak harvesting season because they would have got money from the agricultural proceeds to seek services of traditional healers. But even those who intend to visit biomedical visitors, there is a tendency for them to wait till the harvesting time to go and consult health workers over a chronic ailment. Secondly, women’s access to healthcare service is dependent upon how much they harvest.\(^{30}\) This implies that ill health among women can be associated with poor agricultural harvests, and the reverse could be true. The patriarchal nature of Busoga society complicates women’s access to health service as the income from sale of agricultural harvests can be held by the men.

In pre-colonial Busoga, land was largely communally owned, though patriarchal ideologies determined its use and transfer from one person to another or from one generation to another. Men had the upper hand in land ownership. Land was passed on from one male to

\(^{30}\) Kibalya Mandwa, 65 years, Diviner, Napochopocho Village-Kibbale. Interviewed on 20-04-2015.

\(^{31}\) Ibid.
another male(s). Only sons could inherit land. The men also determined how much land each woman would have had, especially in polygamous marriage arrangements. A father had absolute powers to divide his land among his sons, when still alive. But he could as well withdraw a son’s share of the land, in case he exhibited unbecoming conduct in the family, especially towards his father (the owner and controller of the land). Women had absolute access to the land, as they were the major providers of subsistence food for their families, but held no control over it. This is because women held no rights to sell or transfer land to another person in society.

In pre-colonial and colonial times, the Basoga had a unique land structure. The consisted of four levels: the state level, the omutala, the ekisoko, and the individual level. Each of the pre-colonial Busoga states was subdivided into emitala (singular, omutala), an area of land bounded by either swamps or natural features such as rivers, valleys, or mountains. Omutala could be small or large. With these natural boundaries, the omutala became a convenient administrative unit for the allocation of land to individuals. The third level in the land structure was the ekisoko, a subdivision of the omutala and the final administrative unit in the state system. Land ownership on a small scale is the last stage in the structure. This category included the majority of cases in which individuals were granted land for daily use (Fallers, 1965:51; Cohen, 1972:16-19; Nayenga, 1976:19; Nayenga, 2002:43). Pieces of land were passed over from one generation to the next one. Land usually belonged to a clan, and members of specific clans had a share on that land. Clan land could not be sold, more so to another person outside the clan. This was for purposes of maintaining the closeness between members of the same clan and related families. It was also to keep related families from being joined by people with whom they did not share a common ancestry. This was because land and ancestry were one and the same thing in Busoga.

Land defines one’s ancestry in Busoga. One has to be buried on the land where his/her ancestors were buried. This is believed to provide for communion between the spirits of the dead related to each other. The living, guard this land jealously, because it defines their identity, linking the living and the departed ancestors. There is a very close relationship between land, life and one’s identity as a Musoga. It is the wish of every Musoga that upon death, they are buried at his/her Butaka - the land of their ancestors. This kind of feeling brings a sense of contentment about joining the ancestors. Land has always been a basis of feuds between societies and individuals. A disagreement over land, usually leads the aggrieved to undertake witchcraft to punish the other. Several deaths are attributed to witchcraft in connection to land disputes.
Namwase Edisa explained that a land dispute is never won on merit; even if one of the claimants dies a natural death, it is attributed to the powerful forces of the medicine man the enemy may have visited. Though majority of women still have no ownership and control over land, the successful ones in in education, business, and politics, have generally changed and demystified the traditional land ownership structure in Busoga. Presently, ancestry ties to land have diminished. Increasing populations have led to land fragmentation and the pressure on land for both human settlement and economic utilization has made its value to skyrocket. This is due to the high demand for land titles that enable individuals with registered land and own it in perpetuity, as opposed to the pre-colonial system of communal ownership.

The significance of traditional healing in the economic organisation of African societies cannot be underestimated. The knowledge that traditional healers have on forecasting certain events, protecting crops and animals from hail and thunder storm, healing the sick, and driving away evil spirits is often not documented and as a result it is slowly going into extinction (ATPS, 2013:8). People’s economic activities are greatly influenced by healing practices among indigenous people. Visiting a traditional healer is necessary, for example, before one can open up a retail shop. In pre-colonial times, there were medicines smeared on the bodies and spears of hunters prior to a hunting expedition, so that they could be able to capture some animals for food. Hunters also moved along with various herbs for treatment of bruises and snake bites while in the bush. Blessings had to be sought from diviners and specifically from the spirit for hunting, Ddungu.

The situation has not changed much within contemporary Busoga society. Traditional healers cleanse new business premises by sprinkling herbs around the premises. Some people consult a healer before they begin to dig a foundation for a new house. There are also traditional medicines for attracting clients to ones’ business, called, ‘akasenda abaguzi’. Protection of one’s economic resources especially property is cherished among the Basoga. This is called ‘okuchinga’. The idea that some people are not always happy with another’s success breeds suspicion of witchcraft among neighbours, hence the saying; ‘ezira ayenda eyamwine ezare eibiri’. This literally means that no one wishes to see another person’s cow or goat produce twin calves. This necessitates seeking the services of medicine men and women to provide ‘protective medicine’ to one’s wealth. In Busoga, economic and financial stability define the

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32 Interviewed on 22-04-2015
33 Kawuma Safina Nabirye also known as ‘Ssenga wa Busoga’
34 Kibalya Mandwa
well-being of men but also enhances their masculinity. A man whose family has plenty of food is envied by the whole society. With enough financial resources, one can seek healthcare services, not only for himself but for his wife, children and extended family as well. Such a man can take his children to good schools and provides his family with all the basic necessities of life. This is the embodiment of a model family, also called *Amaka*, which all people in Busoga wish to have. However, due to the decline in Busoga’s economic activities the area is now reported to be the second poorest region in Uganda, second only to northern region, which is just recovering from a war that lasted over 20 years. With no recognised consistent cash crop, dwindling fish in the lakes, a decline in the cotton production and an increasing population which has led to land fragmentation, the socio-economic status of the people of Busoga is deplorable. A poor socio-economic situation is likely to increase the population’s vulnerability to disease. Also, poor people are most likely to utilise traditional healing practices because the treatment costs are low. But most importantly, poor people guard their traditions so jealously that it is the most important non-material property they can be proud of. Traditional healing practices are not simply about the treatment of the sick, then, but also serve to respond to the socio-economic challenges that the Basoga face in their everyday situations. This is in view of Feierman’s argument, who believes that political and economic influences upon African societies leads to new perceptions of diagnosis and treatment as well as health and disease among Africans (1985:73).

2.8 Political Setting of Busoga: Cultural and Central Governance
Politics determine the way societies are run. Politics influences the socio-economic, religious and cultural activities of societies. Politics supersedes all other issues of society because political actors control the resources and planning. Politics should be seen in the wider perspective of being integral to both formal and informal activities. Politics as well concerns itself with less analysed organisations, in addition to the traditional activities of having elections for political offices and having political leaders. Politics goes beyond public political activities to include all other activities that take place in society, though not publicly recognised (Bompani, 2008:666). Traditional healing is one of those informal, less analysed institutions of society and very often takes place in the private domain. Yet there is always a cross-cultural connection between medicine and power. Citing the example of the traditional Zulu nation, Flint (2008:67) argues that healers are also powerful actors in the political and military activities of their nations. It is very useful that an analysis of the political system of Busoga is made since pre-colonial times to
the present and later discusses the way traditional medicine has been an integral element in Busoga’s political dispensation.

During the pre-colonial era, the clan system provided the political administrative structure of Busoga society. For each clan, there was a head known by different titles, depending on the clan. The clan head had the responsibility of protecting his people against invasion and was expected to convene and preside over clan and council meetings as and when there was need. Heads of clans also acted as judges in their areas of jurisdiction. They too had powers to allocate land to whomever was found to meet the requirements (Nayenga, 2002:43). This was so because members of a given clan usually lived in proximate geographical locations. It was rare for persons who belonged to different clans to live in geographical areas that were for another clan, unless there were servants amongst them. Therefore, there was no unified political authority holding control over the whole of Busoga in this period (Cohen, 1972:12).

The traditional political setting of Busoga was largely patriarchal. There is no record of any woman before colonialism in a leadership position, because this was not acceptable in Busoga society. Clan leadership was exclusively the role of men and sons, rather than daughters, were groomed to take on this responsibility. The women acted as being advisors to the chiefs, their husbands, and even this was only done in private. Noirfifre (2014)35 affirms that this was the case across many African societies where women influenced a lot of decisions made at the household level.

Fellers (1965:30-45) and Nayenga (1976:19) explain that the political organisation of Busoga changed from a clan system to a state system between the 13th century and 18th century. This was occasioned by the incursions of new settlers, who at the time were more powerful than the indigenous inhabitants of Busoga. People coming from the Mt. Elgon area are said to have invaded Busoga and began to carve out territories for them to govern as paramount rulers over several clans that were geographically close to each other. The clans, however, still remained relevant in the new political dispensation. Clans served as the most immediate social units of organisation and administration. But the political roles of the clans were taken over by the new rulers. Clan heads only exercised their powers regarding family and lineage affairs, while difficult cases had to be referred to the new state lords.

‘Busogacentric’ writers like Nayenga Fredrick, Cohen Andrew, Lubogo Yekonia and Fellers Lyolld argue that Busoga was made up of many states, each with the kind of salient

features including autonomy that make up a state. This view is pitted against the standpoint that there were no states in Busoga but chieftdoms and principalities instead. I agree with the arguments that there were states in Busoga because each of these states had a supreme ruler, who had the authority to administer justice, settle disputes and preside over council meetings and who was a representative of the royal clan. Nayenga (1976:26) notes that the supreme ruler administered the state with the help of the katukiro (prime minister), abamatwale (provincial governors), abémitala (village chiefs), and abékisoko (subvillage headmen). By the arrival of British officials in Busoga, there were eleven significant states that had an official engagement with the British, which was to culminate into takeover by the protectorate government (Cultural Research Center, 2013).

During the colonial era, Busoga's political and administrative structure changed once again. The numerous states in Busoga were amalgamated into one single and unified political unit (Fallers, 1965:144-148). The British also abolished hereditary rule in the states and instead adopted the political structure that was being used in Buganda kingdom (Nayenga, 2002:45). To hold the numerous states together and have full control over them, the British established the Busoga council, called ‘Olukiiko’ or simply ‘Lukiiko’, with a president as its head. Semei Kakungulu, from the kingdom of Buganda, was its first president in 1906. The Lukiiko was mandated to advise the colonial government on how best to manage the area and acted as the area’s Supreme Court (Nayenga, 1976:29).

The title of ‘President’ of the Lukiiko was changed in 1939 to ‘Isebantu Kyabazinga’ (the father of the people who unites them). The new title gave the position a Kisoga identity, and the incumbent was no longer a spokesperson for the council but for the entire region (Nayenga, 2002:45). This coincided with the reality that the reigning ‘President’ of the Lukiiko was a Musoga. The political and administrative structure of Busoga was once again revised to pattern that of the neighbouring Buganda kingdom. Hence, counties or Saza (plural - Amasaza) were created from the larger states. Amasaza was to be the second administrative tier after the kingdom headquarters led by the Kyabazinga. Below the Amasaza, were sub-counties or Gombolola (plural-amagombolola). The next tier was parishes or emiluka (singular-omuluka). The lowest administrative structures were the omutala (singular-emitala) and ekisoko (plural-ebisoko) respectively. At each of these political and administrative levels, the reigning cultural leaders retained their status, only now they were more like employees of the British colonial government.
After Uganda's independence in 1962, Busoga was accorded the title ‘territory’, a status that gave the region semi-autonomy under the leadership of the Kyabazinga. The institution of Kyabazinga, together with other monarchical institutions, was abolished in 1967. Between 1967 and 1996 Busoga was administered directly by the Uganda central government officials, who included a District Commissioner, a Saza (county) chief, a Gombolola (Sub County) chief, and a Mutongole (parish) chief (Nayenga, 2002:45). The Kyabazinga institution was restored in 1996, with its role limited to ceremonial and cultural functions. The administration of the kingdom is headquartered at Bugembe hill. The institution has an administrative structure made up of ministers and a parliament - the Lukiiko. The Kyabazinga is elected from among and by the designated 11 chiefs that head the eleven chiefdoms in Busoga area.

The political administration of the Busoga area has been vested in districts. The districts, ten of them, connect directly with the central government at Kampala. The districts are under a decentralized form of government but largely depend on the central government for finance. Each district is led by a Local Council 5 chairperson together with a district council composed of people’s representatives from the sub counties and other interest groups. The Local Council system has been key in bringing harmony and stability in Busoga, since the local people are left to manage their own affairs and settle disputes that may arise in their areas of jurisdiction. These local councils run from the village level to the district level.

There are also parliamentary constituencies that provide a representative to the national parliament every five years. These are called Members of Parliament (MPs). These have to ensure that they present the problems and development needs of the people they represent in parliament. In all the political activities leading to the presence of political leaders, the Basoga, just like other areas of Uganda, have the sole authority to dictate who should lead them through the power of the vote. In an era of competitive politics, traditional healing has continued to be influential in determining the local politics in Busoga. Candidates offering themselves for political positions tend to seek blessings of the spirits and the healers to emerge victorious over their rivals. There is latent thinking that powerful politicians that emerge winners in elections employ traditional medicines. Politicians who are close to powerful healers have higher chances of winning the elections. Traditional medicine therefore is used as a negotiating tool between population groups with different interests and access to power. Medicine becomes an arena for contestation of power between different groups of people (Flint, 2008:6).

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36 Kirya Wairagala, 42years, Client, Nawaikona village. Interviewed on 20-04-2-15
The importance of traditional healing in the political organisation of Busoga and many other traditional African societies cannot be underestimated. For example, traditional healers in Lesotho and other African countries have since pre-historic times played a major role in primary health care, counselling and the rituals performed for different purposes in the society. Traditional healers in the past had their houses located very close to the main house of the village chief. This was to ensure that the healer is always accessible to the chief, as they were not only entrusted in disease healing and driving away witchcraft, but they were also the main advisors to the chief (ATS, 2013:8). In Zululand, each king or chief had his own healer, who helped him to obtain and maintain political power. The healer also assisted the king in settling judicial cases. (Flint, 2008:67). Traditional healers perform rituals upon a new Kyabazinga before he is presented to the subjects. This is because the rationale to healing is to ensure that there is not only body equilibrium but also political harmony. A healthy chief implies a healthy community. The absence of a Kyabazinga for close to five years, after the death of Isebantu Waako Henry Mulooki, was believed to have led to the jigger epidemic in some parts of Busoga. In the Observer newspaper, a diviner called Muyiru Waiswa Hassan argued that the unending misfortunes including the jigger epidemic in Busoga was due to the absence of a Kyabazinga in Busoga. He is quoted to have said the following:

The spirits are enraged and have threatened to bring more calamities until a successor is found. Jiggers will continue feasting on Basoga and the region will never get rid of this deadly parasite, not until there is a fully enthroned and respected Kyabazinga in the palace. Famine, violent rainstorms, dry spells, domestic violence, accidents and internal conflicts will not end because our spirits are not happy. When the spirits are not happy they in return punish the people.

Whereas this is an outright misconception about the causes of jiggers, it indicates how the Busoga think that there is a direct relationship between their socio-political institutions, health and the people's general well-being. Nonetheless, the local people are ignorant about the fact that jiggers thrive in unhealthy environments. The Kyabazinga has been central in mobilizing the communities and sensitizing them about health and promotion of hygiene. The Kyabazinga is changing the perceptions of his people about effective control of diseases and maintaining healthy lives. This is because socio-political institutions in Busoga are now being led by cultural leaders who have attended western educational institutions and who are more knowledgeable.

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38 Baleke T (2013), Busoga Witchdoctor knows the origin of jiggers. The Observer. Published on 7th July 2013.
about the causes of diseases in their societies. These cultural leaders have therefore taken the lead to mobilize the Basoga for better health through encouraging domestic hygiene. In the *Daily Monitor* newspaper, the Chief of Bugabula launched a jigger eradication campaign with a call for promotion of personal hygiene, and creation of bylaws to enforce cleanliness and sanitation.\(^\text{39}\)

Politicians in traditional societies were and still act as the chief custodians of traditional knowledge. Traditional healers are among the highest in leadership hierarchy in Busoga society since time immemorial. Traditional healers are mediums of the spirits that determine the direction that a given society is to take. In Busoga, Nabamba Budhagali\(^\text{40}\) was consulted about who should succeed the late Kyabazinga, Henry Waako Mulooki; the throne being contested between two rival chiefs, Gabula Nadiope and Waako Wambuzi. Flint (2008:67) notes that in Zululand healers were very influential in resolving disputes relating to political succession. This shows how traditional healers in Busoga have actively been involved in sustaining the political processes of this society and hence maintaining the identity of the African people.

For Uganda’s case, the use of traditional medicines and healers in several politico-military confrontations has been evident over the years. The smearing of traditional herbs on weapons of war to ascertain military victory is a common practice in some cultural groups in Uganda. For example, in the mid-1980s, the Lakwena Holy Spirit Movement, rallied an army from the predominantly Acholi community in Northern Uganda to fight the National Resistance Army government, with assurance from Alice Lakwena, the female commander and spiritualist that victory was guaranteed once they smeared their bodies and guns with herbal substances. The herbal substances were to act as shields against bullets. The Lord’s Resistance Army (LRA) an offshoot of the Lakwena rebel movement would smear herbal concoctions upon the abductees to scare them from escaping from captivity. And that escaping would ignite spiritual wrath against them (Sturges, 2011:76). The post-election violence of 2016 in the Rwenzori region of Uganda, which involved the local people’s confrontation with government armed forces, was rooted in the Bakonzo’s belief in their traditional medicine. Young men belonging to the ‘Kirumiramutima’ group, associated to the Rwenzururu cultural kingdom, had assurance that bullets would not strike their bodies when they attacked the government’s military establishments. Because there is a belief that healing and the spiritual realm are one and the same, and there is strong fear of the


\(^{40}\) Interview with Nabamba Budhagali at his home in Budhagali in Jinja district
spirits, ill-intentioned political actors use traditional medicines to enlist fear and submission from the locals.

Finally, the political administrative structure provides a regulative framework for traditional healers in Busoga. Though the healers regulate themselves, they have a hierarchical structure that is aligned to the political administrative framework of Uganda, from the villages (ebyalolo) to the national level. This is the case because, as Levers puts it, the political and economic forces that shaped the African continent’s history also established the framework within which patterns of diagnosis and treatment, health and disease emerged (Levers, 2006:90). Therefore, traditional medicines do not concern themselves with treating the physical and social body but also the body politic (Flint, 2008:66). They also create a sense of cultural and national pride and identity. The healers play a key role in maintaining local beliefs and power structures of society (ibid.pp.7).

2.9 Gender Roles in Pre-colonial, Colonial and Present Busoga Society

Since time immemorial, Busoga society has had patriarchal institutions. It has been a male dominated society. Women were conditioned not to talk when their husbands had already talked. This led to the popular Lusogasaying; ‘Omwami kyakoby e zzena ky’enkoba’, loosely translated as ‘what the husband has said is what I say, too’. Young men were socialized to take charge of their families and provide leadership and security for their wives. Young women were socialized to be obedient to their husbands. This has gradually changed with attainment of education, and the human rights movement wave that has promoted the rights of women in society.

There was inequality between women and men regarding distribution of authority and roles in society. Men were bestowed with greater authority, not only over their family members, including their wives, but also concerning the ownership of and control over economic resources (Mudoola, 1993:12). Men, especially the married ones, expected their wives and children to treat them like lords, and often their authority was unquestionable. A wife was expected to kneel when greeting her husband and address him as ‘ssebo’, the English equivalent of ‘sir’. Fallers (1965:77-79) notes that male dominance in Busoga society centred on the sexual and child-bearing potentialities of women and that male dominance over women declined with the decline of these potentialities. As a result, more elderly women exercised a lot more freedom than younger women in the childbearing age bracket. Indeed, gender limitations reduce as women grow older. This accounts for the increasing authority of elderly women in society. This is not
different with healing practices in Busoga. More elderly women than younger women are involved in the provision of healing services, due to experience and respect that comes with old age. The influence of age and gender upon traditional healing practices is discussed in detail in Chapter Five.

The colonial era ushered in society opportunities that considerably changed gender roles in Busoga. Education, for example, was used as an attempt to change the gender landscape in society. Girls who had opportunity to go to school achieved a certain level of empowerment. A new consciousness began to be aroused among families, especially with the fathers, who began to realize that their successful daughters were being of greater importance to their families than their uneducated boys. Urbanisation and the subsequent employment opportunities that appeared in the towns of Jinja, Iganga, Kamuli and, provided Basoga women with an opportunity to circumvent male authority by seeking jobs in those places and factories (Fallers, 1965:79).

Women who had acquired personal resources due to employment in the urban areas began contesting the unequal social relations that were prevalent in traditional marriages in Busoga. Some refused to get married to men and rather owned small houses where men would visit solely for sexual pleasure. Since they owned these places of abode, they had the power to end those relationships with the domineering men. This group of women is popularly called ‘banakyeyomebekeire’ (plural) or ‘nakyeomebekeire’ (singular). Later, even those without resources would contest unfair treatment from their husbands, whereupon they would separate from them and build small houses allotted on their fathers’ plots of land. That time of ‘separation’, when the wife left her husband’s home to settle at her father’s or brother’s home, was one way of negotiating for better relations in her marriage.

Relations between parents and their sons and daughters were somehow skewed. Sons were more preferred, while daughters were pampered more by their parents, mother and father alike. Sons ensured the continuity of the patrilineal kinship. Fallers (1965:79) observes how sons conceived of their fathers as the focus of authority in the homestead and how the relationship between the two was both close and distant. The closeness was due to the fact that they needed one another, but also distant because the son was supposed to submit to the unquestionable authority of the father. Fathers treated their sons with strictness to instil responsibility. Mothers treated their sons with adoration, because these are the ones that ensured their legitimacy in their husbands’ extended families.
Girls, differently, were treated with compassion and were overly-protected by their fathers and brothers. This “protection” also meant legitimate superior authority over them by the males. This was to ensure that they grow up with the expected female characteristics in order not to be an ‘embarrassment’ to the family. Well-groomed girls meant they would be highly valued and easy to be married off. Education has significantly changed these events in society. Children began to join boarding schools and their behaviour and supposed relationships with parents and siblings were no longer determined by society but rather by the westernized form of education. Many were being taught how to behave well, based on the Biblical principles of brotherhood and eldership rather than on tradition. Those children who had a chance to move beyond Uganda for further studies later returned to their societies as liberating forces.

Even with the acquisition of western education and adoption of biblical principles, relations between women and men have not changed much in traditional Busoga. Men treat their mothers with much respect and mothers usually have great influences over their children, even in old age, when it comes to important decisions to be made. Men therefore tend to give more respect to their mothers than to their own wives, resulting in tensions between wives and their mothers-in-law. This breeds feelings of disharmony not only in the family but also in the larger community. As a result, suspicions of witchcraft and visits to traditional healers become prevalent.

The mother-in-law is constructed as the witch, attempting to cause pain and agony to her daughter-in-law. The daughter-in-law is constructed as the victim, who should protect herself against the witchcraft of the mother-in-law. In some instances, when the daughter-in-law or one of her children dies, the person, that society suspects to be responsible for it, is usually the mother-in-law. This causes a division in the community, as members of the daughter-in-law’s family gang against the mother-in-law to defend their daughter. Since the sick community then needs to be restored to normality, conflicts need to be resolved, which may require rituals to be performed involving the sacrifice of animals to reconcile the two families. These circumstances have changed due to enhanced mobility and migration. Sons increasingly prefer to live alone, establishing their homes quite far away from their parents. Therefore, the tensions described above have been minimized to an extent.

Some scholars on gender issues in Busoga Society contend that the position of the educated Musoga women has changed, but that the position of women in the villages has not (Mudoola, 1993:13). Patriarchal tendencies and the oppression against women are still a reality.
for those who live in the poor Busoga region. However, the central government of Uganda has introduced several legislations and programmes to protect and guarantee the freedoms and rights of women and girls, not only in Busoga but in the whole of Uganda. Legislations like the Constitution of Uganda (1995); the Land Act of 1998, the Domestic Violence Act and the Equal Opportunities Act are in place to protect the fundamental rights of women and girls. Corruption, poverty, illiteracy and lack of political will among others continue to be obstacles to the implementation of the above laws to realize gender equality in society. Therefore, gender relations permeate the social, cultural, religious, political and economic spheres of life among the Basoga. Traditional healing practices have not been left unaffected. Since pre-colonial times, the roles of women and men in healing traditions have been led by division as well as complementarity. There were specialized traditional healing practices provided by women. This was true of traditional birth attendants - the Balerwa. Knowledge of traditional healing practices was also highly gendered, with women more knowledgeable in traditional remedies that were domestic in nature and they knew much more about herbs than men since they were charged with the responsibility of meeting the reproductive functions of society.

2.10 Conclusion
Busoga traditional society had well-defined institutions that were observed and respected by the local people. These institutions held the people together and defined the social, political and economic organisation. They outlined how people should relate to each other, enhancing social cooperation and harmony. These institutions legitimized certain forms of inequality especially between women and men, which brought about social tensions. Traditional medicine and its practitioners are intermediate factors in any Musoga’s life and influenced all aspects of his/her life. It is important to note that the religions of the African people are embedded in other epistemological and metaphysical conception of reality thus the traditional healers profoundly pride themselves in possessing the ability of responding to the physical and spiritual health needs of the people. The Basoga interpret health as the physical, spiritual, psychological, environmental and social-cultural well-being both of individuals and the wider community. The masterly essay ‘Celebrating the sanctity of human life among the Basoga’ by the Cultural Research Center (2004) attests to this fact. A holistic analysis of the environment of society is very important too; because patterns of diseases and healing depend on the environment in which people live (Alexander, 2012:27). It will be interesting to see what role state institutions as well as other social, political and economic organisations will play, both in the development and
organisation of traditional healing and in its dispensation. An examination of Busoga's socio-economic, cultural, religious and political circumstances helps to analyse the transformations that its traditional healing practices have undergone. As Kirmayer (2004:46) puts it, systems of healing are part of local worlds of meaning and power. The meanings conferred by healing practices include the personal, social, religious and moral significance of affliction and recovery. The forms of power invoked include personal feelings of efficacy and self-control, the professional and institutional authority of healers, and larger forms of economic, political or spiritual power. The quest for meaning and power in healing cannot be entirely disentangled from one another: sometimes achieving power is enough to foreclose any further search for meaning; more often, meaning is offered as a salve for the powerless.