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**Author:** Isiko, Alexander Paul  
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CHAPTER THREE

PERSPECTIVES OF TRADITIONAL BUSOGA SOCIETY ON TRADITIONAL HEALING

3.1 Introduction

The ideology of Busoga society concerning healing reveals that traditional healing practices are embedded in the socio-economic, cultural-religious and political realms of the Basoga. This chapter spells out the uniqueness of healing of the Basoga in the wider African setting. The belief that traditional medicine can be applied in all aspects of life is common among the Basoga as it is the case in many other indigenous societies all over the globe. Geest et al. show the centrality of traditional medicine in the following statement:

Throughout human history and across cultures, people have attributed special transformative powers to material substances. A love medicine turns the world upside down in Shakespeare’s *A Midsummer Night’s Dream*, and in Burgess’s *A Clockwork Orange*, the main character is treated with medicine to cure him of his violent behaviour. Abu-Lughod recounted a Bedouin legend about a man who took his wife’s fertility medicine, became pregnant, and gave birth to a daughter. It was reported that women in Zambia have ingenious medicines to prevent their husbands from engaging in extramarital sex, and Sacks described how a medicine awakened patients from a thirty-year lethargy. The Jesuit missionary Alexandre de Rhodes wrote in his diary: “They have such reverence for holy water…They give it to all the sick to drink, with marvellous results. Every Sunday I was obliged to bless at least 500 jars of this sacred water to satisfy their pious desires. (1996:153) Geest et al. portrays the strong belief that indigenous societies hold about their healing traditions. They unquestionably follow and believe in the efficacy of traditional medicine. This further illustrates how traditional medicine of all nature influences people’s lives in all spheres. Traditional medicine can deal with not only physiological conditions thought to be chronic like lethargy and infertility but also psycho-social challenges like strained marital relationships and deterrence of spouses’ infidelity. People’s faith in traditional medicine reveals that its efficacy is based on the belief that it transcends human knowledge and science due to its supernatural alliance, making it capable of treating illnesses that have been a challenge to biomedicine.

Health and illness are conceptualized and experienced differently in different societies of the world (Waldron, 2010:50). Busoga society’s uniqueness to healing is based on the argument that every society embraces particular ‘cultural theories’ or ideologies that set the parameters within which normal, abnormal and deviant behaviour are defined (Waldron, 2010:50). In this
chapter I discuss Busoga society’s perceptions of health and well being, diagnosis, treatment and prevention of diseases and illnesses, as well as practitioners and users of traditional medicine.

3.2 Health and Well-Being among the Basoga

It is important to examine the meaning of health in general among the Basoga. Romane (2000:138) states that without a healthy society, human existence cannot be possible. Perceptions and conceptions of health and wellness in Busoga were and still are gendered. This is because society has its rules and institutions that determine the roles to be performed by men and women towards the creation and maintenance of health and well-being. Sometimes, there are specific circumstances when either women or men are expected to undertake certain activities for the well-being of their families and communities. In some cases, it is a joint effort. There are at times significant variations between women and men in Busoga regarding health and wellness. The health of individuals and communities involves spiritual and mental considerations. Among the Basoga, one is considered healthy if he/she does not only have any physical injuries but also having psychological, mental and social balance.

Health among the Basoga concerns all people in each community. When an individual Musoga is unhealthy, then the whole community is considered to be so. The most immediate greeting espoused and known by the Basoga is ‘kodheyo?’ literally interpreted ‘how are you and all those in your household?’ This greeting is a sign of concern by all regarding the well-being of others in their community. The greeting is usually an extended one in terms of time and it is comprehensive enough for one to inquire about the well-being of the chicken, goats, cows as well as gardens of community members. Below is an example of a typical greeting that I captured between two women at one of the healing centres I visited, and it goes as follows:

*Musoga A: Khodheyo?* (How are you?)
*Musoga B: Tuliyo* (we are fine)
*Musoga A: Mulimuty’eyo?* (How is everybody at your home?)
*Musoga B: Tuliyo* (we are fine)
*Musoga A: Muliyu Balungi?* (Are you all well?)
*Musoga B: Bulungi* (fine)
*Musoga A: Abaana balibatya? Basoma bulungi? Ate abakulu, Ente eyo yazaala? Yazaala bulungi? Ooh! Eyisuuke, Kati iwe onwa ku mata!* (How about the children, are they all fine? Are they doing well at school? How about the older/elder ones at home, did your cow give birth, did it deliver very well? Ooh that is good to hear; at least you can now afford to take some milk)

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41 Kawuma Safina Nabirye ‘also known as’ Ssenga Wa Busoga
**Musoga B:** haaa baliy, naanhi ajja mu kyakusatu, naanhi ajja mu kyaikumi, aye naanhi neyagwa. (They are fine, so and so passed well and is now in primary three, so and so passed well and is now in senior two, but so and so failed)

**Musoga A:** Ate enkonko yo yatandika okubiika? (How about the chicken at home, has it begun to lay eggs?)

**Musoga B:** ekaali! (Not yet!)

**Musoga A:** Eeh nga erwilewo! (It is sad; it has taken so long to lay eggs)

**Musoga B:** Eyo amadhi gatoona? Iffe enno akasana katumazzemu! Amaidho gameera? (Are you receiving rainfall in your village? As of this village, there is too much drought! But how about the ground nuts, did they sprout?)

**Musoga B:** Munna gameera! Kibbumba mulungi (eehh, my friend, the groundnuts sprouted. God is good).

*Verbal Greeting exchanges between two unidentified Basoga women at the home of the Chairperson of Traditional Healers of Namutumba District-Kabaale Bitimbito.*

Apart from the richness in the greeting, it is institutional. The Kisoga greeting serves as a useful tool for communication and knowledge sharing about the socio-economic and well-being of households. This indicates that the health and well-being of individuals is not only dependent on their physical ability to move about with their duties, but is also dependent on the economic and social viability of their property. The spiritual dimension (*God is good*) is expressed here as an intervening variable in determining the well-being of individuals and society at large. The content of the greetings differs between men and women. Greeting between men and men revolves on wishing to know the well-being of another and is rather centred on the roles and responsibilities that men perform in society. On the other hand, greeting between women and men revolves around the reproductive functions of women in society.42 Women are most likely to take more time than men in greeting because they are brought up as carers for the rest of the society members. This greeting is, however, not used by people who are living together, because those staying together ought to know the conditions of the other.

Ill health of a member affects the whole community. When one becomes ill, the community members gather at his/her home early in the morning to find out his/her state and to give counsel. Sometimes work has to be suspended as a sign of solidarity with the sick.43 It is taboo for somebody to undertake any work in his/her garden, including pruning of crops, when a society member has died. This is to be observed until after burial. Community members are expected to gather at the deceased’s home as a sign of oneness.44 Those who fail to observe this

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42 Edisa Namwase
44 Mpadwa Lukowe, 73 years, Diviner, Nakawunzo Village, Namutumba district. Interviewed on 16th April 2015
practice risk being suspected as responsible for the sickness that has taken the member’s life. These practices are more pronounced in the rural areas than in the urban areas. The fluidity of Kisoga norms in the urban areas due to influx of people coming from other neighbouring places lessens their strict observance. The educated and corporate employees are now governed by their company rules that demand provision of labour for at least eight hours a day, for the five working days in a week. Therefore, they find it practically impossible to suspend work to commune with the sick community members. They show their solidarity with community members through their financial generosity to the families with ill members.

Illness and subsequent death brings untold communal grief known as ‘ensisi’. This is because death or illness of one person is interpreted to be an attack on the whole community. Batuuka and Nkanda (2006:65) interpret the Basoga’s suspension of work when one community member has died as having moral implications. They argue that everyone is bound to die and in the event that a family loses one of its own, needs everyone’s company. If one does not come to console the family of the deceased, he/she is regarded as bad or short of Obuntu. The punishment for that kind of lack of Obuntu can be administered in paying that person in kind. No one consoles such a defaulting family in their turn of grief.

The ideology of ‘communal consoling’ has also undergone a lot of changes, with the young generation frowning upon it. ‘Communal consoling’ is a form of social capital among the poor, who cannot afford to take on social challenges that befall their families single-handedly. They therefore depend on the community members to have their challenges responded to. They usually have no money to take care of the sick and fund the expenses that come along with the death of a family member. The poor therefore take ‘communal consoling’ with high regard. The introduction of funeral insurance and funeral services companies that perform all the expected services when a person dies is a major relief to the rich and educated members in Busoga. It has thus undermined the ideology of ‘communal consoling’ since those who are rich are no longer bothered with communing with other members of the community as they will not need their services when they lose their loved ones. As discussed in chapter one, the above changes are a clear manifestation that Busoga society ideologies on healing have since been adapted to new waves in society and in many instances, being completely disregarded by the young generation.

The communal attitude expressed by the Basoga aimed at promoting the common good is what many authors describe as ‘Ubuntu Philosophy’ (Batuuka & Nkanda, 2006:64-75; Warfield, 45

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45 Torofina Bitali
Strict observance of the principles of ‘Ubuntu philosophy’ is an embodiment of a health community.

To the Basoga it is simply ‘humanness and good conduct’ expected of community members. The Basoga believe that good health and well being is determined by the ability of the person to exhibit good conduct according to his/her society’s norms and values. Following a moral code of conduct in which individuals live is crucial in defining how well individuals and communities are. This is what the Basoga call ‘Obuntu bulamu’.

Hence, the Kisoga saying ‘Obuntu bulamu businga amaani’ means literally that behaving well and living harmoniously in a community is better than being powerful. Speaking about Obuntu Bulamu, Ali Wairagala describes how society reports about a dead man if he exercised this humanness:

\[\text{Omusadha oyo abaire muntu mulamu, ng'alina empisa, ate nga azira gw'alinaku mutawana yennayenna, abaire muntu mulungi innho} \] (translated: that man has been a humane person, well behaved yet he has not been having any problem with any one, he has been a good person).

The above statement attests to the goodness of individuals as making up the well being of entire society. This comes as a result of individuals being at peace with others. Once this is done by individual persons, then society is healthy. ‘Obuntu bulamu’ as conceptualized by the Basoga is the inner core defining the health and well-being of both individuals and the community in which they live. Batuuka and Nkanda (2006:65) rightly observe that this ‘Obuntu bulamu’ is the ultimate state to do away with pain at both personal and communal level. Among the Bantu a human being is regarded as one with conscience and tender heart and as such must behave rationally as a free moral being. The person who possesses Obuntu is that generous person who cares for others with a rational sense of belonging to a society. Observance of ‘Obuntu bulamu’ would result into complete wellness of both individuals and the entire community.

Somebody is considered healthy if they earnestly follow and show utmost respect to the cultural values and norms of the community in which they live. And these values may vary from one community to another. This is the reason why even the physically healthy can be regarded as ‘dead’ among the Basoga, if their conduct undermines the cultural moral values of the

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46 Isabiryie Rashid, 53 years, Local Council 1 chairperson, and remover of small bones stuck in one’s throat, also known as ‘empagama’. Bulagala Village, Namutumba district. Interviewed on 20 April 2015.
47 Fr. Gonza Kayaga, Busoga cultural research centre, Jinja. Interviewed on 16th April 2015.
48 Katende Kibenge (82 years), Isegero Village, Namutumba District, Interviewed on 9th April 2015.
49 Ali Wairagala, 68 years, Elder/Client, Bugembe, Jinja district. Interviewed on 8th August 2015.
community. For example, a man who commits incest would be regarded as sick or dead. Incest among the Basoga is a disease referred to as ‘amaghemukirano’.\textsuperscript{50}

Whereas there is much emphasis on people’s relationship with ancestors as defining the health of the Basoga, health also has to do with the relationships between the living. Some of the interviewees illustrated how young people today are living unhealthy lives by not greeting elders, not respecting parents and living permissive sexual lifestyles that are not in tandem with Kisoga norms and values. The Basoga strongly believe that having unhealthy relationships with other community members defines one as having ill-health too. In attempting to show a case of how health, well-being and illness are conceived to be determined by relationships between members of specific communities in Busoga, Dube says:

Failure of relationships results in the breakdown of health. Physical healing of the body is thus accompanied by healing of relationships. Consequently, healing is regarded as healing of all relationships. Health is therefore closely tied to health relationships. This philosophy requires an ethic of being responsible for one’s own health and for that of others through maintaining health relationships. The healing of relationships is integral to treating physical pain. (2006: 143)

Dube’s assertions relate squarely to Busoga society’s emphasis on concern for harmonious community living, as being integral to defining well being of everybody. The Basoga seek healing from traditional healers to restore health and to ensure that there is harmonious living in the whole society. Indeed, one sick family member means that the whole family is sick. This is the reason for the greeting of ‘edhibaluma’. ‘Edhibaluma’ is a short form of the greeting of ‘endwayire edhibaluma?’ loosely interpreted as ‘what is the health condition of the sick?’\textsuperscript{51,52} This greeting, however, is said not specifically for the individual sick person but for the whole family that has sick members. The idea here is that it is the whole family or community of the sick person which is affected and not only the individual sick person alone.

Whereas there are general considerations among the Basoga about health and well-being, there are also significant variations between women and men about well-being. This is occasioned by the social positioning and ascribed social and reproductive responsibilities that each of them carry. Men are conceived to be in good health if they are physically capable of carrying themselves from one place to another. Men with disabilities are looked at as being unhealthy and they need to seek services of a healer to regain their health.

\textsuperscript{50}Nabamba Budhagali
\textsuperscript{51}Nabamba Budhagali
\textsuperscript{52}Kabaale Bitimbito
There is, however, also a shared norm of perception of men’s well-being. Ability to provide for one’s family needs, having a wife or wives and biological children as well as land are essential determinants of a man’s well-being. This is what defines an embodiment of a complete man called ‘omusadha’. When these are absent in the life of a Musoga man, he is less of a man and he is not ‘omusadha’ in the real sense. Such conceptions undermine one’s masculinity. On the other hand, the well-being and health of women are determined by good health of body, which involves absence of deformities and impairments. This is the reason why women with disabilities are conceived to be sick and unwell, requiring the intervention of a healer. Other determinants include being married and able to produce children, especially sons. A woman’s well-being is reflected by a sense of appreciation from her husband and his relatives. Having children who are well behaved, successful in their marriages and being able to see and take care of grandchildren are all essential for the well-being of women. Healthy children mean healthy parents. Whereas in other societies (especially those from the Western world) a bony woman is cherished, the Basoga look at such women with scorn and label them sick. A rotund woman is the ultimate embodiment of a healthy woman among the Basoga.

Two issues come out clearly here; women’s well-being is determined by their ability to exercise and perform those feminine functions that society expects them to undertake. Secondly, women’s well-being is determined by the level of contentment with their lives as women. This concerns the inner psychological satisfactions that women enjoy because of being appreciated for the complementary roles they perform for society to function. Women’s ability to fulfil their reproductive roles in society as well as having accorded space to function as such brings a sense of satisfaction to them. This can be attained when basic needs of women are fulfilled, which enables them to undertake the reproductive roles. For example, marriage and children born enhances women’s well-being because the two are a measure of women’s key social functions in Busoga society. Barrenness and unmarried life negate women’s social well-being as these conditions disable women from being active social agents in their communities.

To ensure that the whole community is devoid of disease of any sort, the Basoga have mechanisms that ensure prevention. This is called ‘bulungi bwansi’, which means doing communal work. Preventive health activities under ‘bulungi bwansi’ in Busoga includes

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53 Kawuma Safina Nabirye also known as ‘Ssenga wa Busoga’
54 ibid
55 Torofina Bitali
56 Kawuma Safina Nabirye also known as Ssenga wa Busoga
57 Nfuddu Isabirye
clearing and cleaning of water wells for domestic use, mandatory establishment of a pit latrine in each home, having gardens to fight hunger and food insecurity, construction of community roads, and involvement in community rites that put evil spirits under control. In pre-colonial Busoga, leaders dictated that there should be two mandatory gardens in each homestead: one for the family and another for the chief. This is what Fallers (1965:77) described as ‘Butongole’ and ‘Bwesengeze’ gardens. Butongole was a garden expected in every homestead by the chiefs, and the Bwesengeze was to be a personal estate of the homestead. Chiefs supervised every homestead to ensure that those two gardens existed. ‘Mandatory gardens’ was a mechanism by rulers to ensure that there was food security to ward off famine and malnutrition. However, it should be noted that activities at the communal level that were geared towards achieving a community without health challenges were performed by men only.

3.3 The Concept of ‘Illness and Healing’ in Busoga Traditional Society

Illness is used here to refer to the cultural construction of disease and sickness. Kleinman (1978:86) explains that all health-related concepts like ‘health’, ‘illness’, ‘healing’ are articulated within the cultural realm of societies; and they are part of the cultural systems. Teshome-Bahiru (2004:30) and Kleinman (1978:88), agree to the notion that disease is a biological and or physiological malfunction of the body. In other words, as according to Kleinman (1978:87), illness is the cultural shaping of disease, under the influence of cultural rules which govern the perception, valuation and expression of symptoms as well as the entire healing process of people of a specific culture. It is the way the sick person, his/her family and his/her social network perceives, label, explain, evaluate and respond to disease (Kleinman 1978:88). The understanding of Busoga society of health, well-being and illness is intrinsically connected to the cultural postulations and beliefs that the people of Busoga have followed since generations. For example, as Waldron (2010:51) and Abdullahi (2011:115) note, illnesses are culture-bound because various illnesses are based on personal understanding of health and illness that reflect the symbolic structure of specific cultures and societies, as well as local histories, and environments.

Illnesses are also defined in terms of social relations in society, and these are intertwined with gendered explanations. For example, the Basoga hold that certain sicknesses are for either men or women. Syphilis, also known as ‘kabotongo’, which is mainly transmitted through sex, is

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58 Ibid.
59 Katende Kibenge
considered to be a man’s disease. Men infected with kabotongo are looked at as heroes because it involved sleeping with multiple sexual partners. Kabotongo has come to be popularly referred to as ‘endwayire ey’abazira’ literally meaning a disease for heroic men. On the other hand, women who are diagnosed with Kabotongo are interpreted to be promiscuous while men are applauded. Even though such diseases are known to be transmitted through sexual contact, women are constructed to be the carriers and men as innocent victims. Yet another disease called ‘Amakiro’ (the equivalence of ‘Postpartum psychosis’) which involves a freshly delivered mother biting her newly-born baby is connected to the mother having committed adultery or the father having extra-marital sex during the wife’s expectancy. Amakiro is constructed to be typically a disease for women among the Basoga. Men cannot have tendencies of harming their infant children though the cause can be attributed to them. To have twin children grow up healthy, the parents are expected to follow certain strict sex taboos, which also involve avoidance of extra-marital sex. In situations where men are allowed to have more than one sex partner, are bound to abandon their expectant wives and lactating mothers for other women. This affects the welfare of both the expectant and lactating mother as they lose the care and attention from their partners. Therefore, taboos that restrain men from having extra marital affairs during their wives’ pregnancy are aimed at deterring the men from abandoning their wives who are expectant, to ensure their psychological well-being.

The Basoga believe that sickness is against Kibbumba’s plan for humanity, his creation. In an interview with Fr. Kayaga Gonza, who boasts of wide experience in researching the cultural dynamics of Busoga, he argues that God created human beings, and indeed all living beings, to be free. However, when the intended health is found wanting, sickness arises. Sickness is evil in the sense that the good life which God created, and which is supposed to be there, is absent at those moments when one is sick. Evil forces are against God’s creation and they will always produce both physical and spiritual mishaps in God’s creation. Fortunately, God, aware of the evil forces, made provisions so that what evil has taken away could be

60 Kibalya Mandwa.
61 Nakigudde et al. (2010), Perceptions regarding postpartum psychotic illness in two districts in Central Uganda WCPRR December 2010: 57-69, pp.58.
62 Kirangi Monica, 80 years (approximate age), Traditional Birth Attendant, Bulagala Village- Namutumba district. interviewed 14th/4/2015.
63 Ibid.
64 Fr. Gonza Kayaga
restored.\(^{65}\) Hence, in the physical arena, medicines have always existed and certain persons in society endowed with the gift of healing. From time immemorial, people have always known how to treat themselves each time they fell ill. Consequently, every society has had medicine men and women whose specialized work is to restore health.\(^{66}\) Busoga society exhibits Truter’s (2007:57) analysis of a typical African society where disease and illness relate to supernatural occurrences, governed by a hierarchy of spirits. Busoga society has several of these spirits. These include; *Emizimu, Emisambwa, Amaghembe, Ebiteegha.* Above the spirits, there is a supreme God-*Kibumba,* who can also cause sickness, when angered by the people. Traditional Busoga views on illness are nurtured from the people’s beliefs in these spirits and any other supernatural beings. It is highly believed that spirits are responsible for the cause of disease and illness, but they are also the ones that can provide guidance on cure.

The interconnectedness of the forces pertaining to health and illness in Busoga is illustrated by Nzewi (2002:3) when he says that in traditional Africa, cultures recognise it when the environment is sick, diseases become prevalent; and when such diseased material or spiritual environment is rehabilitated, human health becomes secure. When the group spirit is polluted, the minds of individuals become infected, the human sphere becomes sick. When a human body is sick, the animating spirit becomes poisoned and the human sphere becomes unhealthy. The Basoga believe that an illness can only be said to concentrate in one area of the body but has over-reaching effects on the entire person. In affirmation of Busoga society’s understanding of the holistic conception of health and healing, Nzewi (2002:3) postulates that the human person possesses both profane and spiritual symbiotic existence. The Basoga postulate that disease, or malfunctioning of the one impairs the stability or efficacy of the other, and thereby the health of the whole.\(^{67}\) To the Basoga and many African peoples, the cure of the sick must then be holistic. The process of properly curing involves the person’s psyche or spiritual well-being as well as the physiological.\(^{68,69,70}\) One of the female mediums, of the age of 20 years, is conversant with the Kisoga ideology on healing:

> We treat all kinds of sicknesses. We are also aware that even if a client (*omulwaire*) comes here with a known physical ailment, we cannot take it for granted that it is the

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\(^{65}\) Ibid.  
\(^{66}\) Ibid.  
\(^{67}\) Kabaale Bitimbito  
\(^{68}\) Nabamba Budhagali  
\(^{69}\) Patrick Wairagala Mandwa.  
\(^{70}\) Namuwaya Harina, 20 years, Diviner, Masese, Jinja district. Interview date 22\(^{nd}\) April 2015
only problem with him/her. Firstly she/he may have been bewitched or profaned the spirits (okusobya ku baadhadha).\textsuperscript{71}

The healer portrays the holistic concern of Kisoga healing. The major concern is total healing and not absence of the sickness that the client is complaining about. Healers move beyond the physical ailment to interrogate the causes which may be rooted in the spiritual realm of the individual. And just like biomedical doctors who would demand the patient to undergo several tests including urine analysis, malaria tests, and full blood count, even when the patient is complaining a simple headache, so are the healers, who do not interpret sickness at the physical value of it. Nabamba Budhagali the chief diviner, Bitimbito Kabaale, another diviner and Kawuma Safina Nabirye, the pure herbalist are in agreement with the fact that healing cosmology in Busoga is holistic. They specifically agree with what Bitimbito says:

Human beings are sick right from the head to toes, right from the hair to the toes. And this has the semblance of the healing medicine. Because one gets sick all over the body, it is very important that you use all kinds of medicine to treat the sick.\textsuperscript{72}

The above healers portray that holistic healing among the Basoga looks beyond the body. The Basoga take keen interest in seeking an explanation of the cause of sickness and how the person or community affected by the sickness can be brought back to normality. Basoga believe illness to be caused by social, moral or spiritual transgressions Nabamba Budhagali, in explaining the connection between the spiritual powers and illnesses in society stated:

Ekisingha okuleeta endwayire mu Bantu, n’okuba nti ensi evire ku by’obuwanga byaibwe. Basobya ku ba Dhadha ate tibenda kutukiriza ebyo emizimu byedhibasaba.\textsuperscript{73} (Translation: the most common cause of sickness among the people is that society has abandoned their traditions and cultural norms. They profane the ancestral spirits, yet they do not want to accomplish the wishes of their ancestral spirits).

Nabamba Budhagali is just emphatic about how the ideology of traditional healing focuses on the relationship between ancestral spirits and the living. A shaky relationship between the two, especially with the living profaning the ancestral powers breeds illnesses and social disharmony in society. Through traditional healing practices, the ancestral spirits guide society on what should be done for harmony to be realized not only between the living and the living dead but also between among the living. Traditional healers among the Basoga are looked at as the

\textsuperscript{71} Ibid.
\textsuperscript{72} Kabaale Bitimbito
\textsuperscript{73} Nabamba Budhagali
agents of good health, good fortune, fertility of not only people but also of animals and plants, peace and welfare. The absence or lack of activity of traditional healers in a specific community in Busoga is not treated lightly. The ‘Abayigha’ in Busoga use the natural environment to treat those that are sick and those who have psycho-social challenges. Healing in Busoga has a ritual element. These rituals are themselves real treatments in the sense that they treat the mind of the sick.\footnote{Fr. Gonza Kayaga.}

To summarize the Busoga traditional concept of illness, I argue that natural and supernatural circumstances blend in a co-acting manner to cause illness. Illness is seen as an antagonism with the physiological setup of individuals, accompanied with mental and spiritual disorder as well as unusual external misfortunes. As Nzewi (2002:3) and Waldron (2010:55) have argued, sickness is not always diagnosed as the malfunctioning of the body parts or organs in isolation, but a whole system’s failure that eventually affects the individual’s physiological, social and spiritual realms. This is the basis for the holistic traditional medical system in Busoga. Women play a significant role in maintaining a healthy community. In both biological and cultural bound approaches, women remain the main actors.

### 3.4 Women and Health in Traditional Busoga Society

In traditional Busoga society, women were charged with the responsibility of ensuring that all were healthy in the family. Sicknesses that occurred in the family bore more inconvenience to the women. This was because women cared for the sick as well as those who were well. Women in Busoga were therefore an embodiment of a healthy society. A healthy woman meant a healthy family. Whenever a woman fell sick in a home, there would be a general sense of emptiness.\footnote{Kagoya Sarah}

Yet women were also blamed for illnesses and sicknesses that affected the family members. For example, venereal diseases were stigmatized upon the wife; kwashiorkor or malnutrition was blamed upon the wife, who was accused of being lazy and a poor cook.\footnote{Kakose Seforoza, 80 years (approximate age), Traditional Birth Attendant, Bulagala Village Namutumba district. Interviewed 14\textsuperscript{th} 4/2015.} Reduced physical strength of a man was further blamed on the woman; for failure to cook and prepare energy-giving food for the husband.\footnote{Kirangi Monica} Persistent impotence of a husband would be blamed on the woman for being dirty and unattractive to her husband. Kirangi Monica stated this as follows:

\footnote{Kirangi Monica}

\footnote{Kawuma Safina Nabirye also known as Ssenga wa Busoga}
Kirangi Monica’s statements indicate that women are held accountable for failures and misfortunes that arise in the reproductive sphere. Busoga society attribute family and marital challenges to the socially disruptive behaviour of women and this is the normative view held by both healers and lay people seeking treatment, in which women are a variable (Shaw, 1985:286). Women are further blamed for bad luck upon their husbands. This is the case in situations when the husband experiences extreme poverty and failure in his economic ventures. Domestic accidents involving children are blamed upon the mothers. Mothers are blamed for being lazy and negligent. Once an accident occurs the first question is; ‘where was the mother?’ 

Therefore, women in Busoga society are made to be the epitome of health and well-being in community. A woman is credited for raising healthy children and having a healthy husband, yet she is also blamed for having poorly-fed children and a malnourished husband.

Female interviewees maintained that women in Busoga have the ultimate role of ensuring that the home and its family are well and free from any attack. For example, Kirangi Monica demonstrated that women in Busoga almost never sleep. They are the first to detect if there is a night attack on the family, whereupon she will wake up the husband. Women further ensure that children are well throughout the night by constantly checking on them. And this is exercised with a willing attitude. Whereas it has generally been assumed that men offer security to their family members, they can not effectively do this without the ‘intelligence work’ of their wives. Women are subsistence farmers. They grow all categories of food crops, which ensure a balanced diet for the families throughout the year. They maintain domestic gardens behind the houses with all sorts of vegetables like *eidhodho* (Amarnthus), *eikubi* (Pisum Sativum), *cabbages*, *mutere* (corchorus tridens/olitorius), *eiyobyo* (cleome frutescens), and *katunkuma* (solanum anguivi). 

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79 Kirangi Monica. The Lusoga dialect used here is Lupakooyo, as described in chapter two of this thesis.

80 Female interviewees like Kirangi Monica, Nabogho Juliet, Kawuma Safina, Kakose Seforoza, and Edisa Namwase; espoused these views on the centrality of women in society’s well-being.

81 Botanical names of these medicinal vegetables were adopted from: Herbal Medicine: Sustainable utilization of herbal medicine in Busoga. Compiled by the Cultural Research Center, Jinja. Published in 2013 by Marianum Press Limited, Kisubi.
Women are the professional counsellors for the sick and aggrieved in traditional society. Their socially constructed role to be the carers for other members of society makes Basoga women specialists in the traditional mechanisms of psycho-social therapy. Women, unlike men, sit near the sick to provide psycho-social therapy. Women usually stay longer with the sick. On the other hand, men gather in the compound of the sick, especially if he was a man, to contemplate on how his family would be sustained in case of incapacitation or eventual death. Women console the sick, praise them for how hard working they have been before the illness and curse the illness for attempting to disrupt the progress of the sick.\textsuperscript{92} Women’s care and their emotional display to the sick and grieved members explain the reason why mothers in Busoga share a very close relationship with their adult daughters. The idea of daughters showing emotional pain when their parents are sick, or dead is what makes mothers wish to have more daughters than sons.\textsuperscript{83} Sons are incapable of doing this because they are socialized differently. It is this shared norm practiced by women that enjoins mothers and their adult daughters. I interviewed a mother who was categorical about daughters’ concern for the well-being of mothers and she expressed her preference of daughters to sons when she commented that:

All children are good and given to me by God (Katonda), and I thank Him greatly for giving me both sons and daughters. But the girl children (reads literally in Lusoga as – abaana abawaala) are more caring and dependable. They are always there whenever I become sick. The girls will always be near, soothing my body when I am dead in preparation for burial, which does not happen with the boys.\textsuperscript{84}

Such beliefs indicate that poor families (especially women) rely on an effective family support during sickness. Social support rather than financial ability is more pronounced among women in times of sickness. It also indicates the caring roles nurtured among females to take care and have more concern for reproductive functions. Another revelation is that even when one is dead, the body is believed to need the social care which is part of the healing process for those left behind but also a supposed establishment of health relationship with those who are dead. Apart from the social care that girls provide to their parents in times of sickness, it has been established by Cronk (1991:390-92) that mothers in some societies including the East African region, and in poor socio-economic conditions tend to have preference for daughters to sons because the daughters attract mates who bring in more resources that enhances the well being of the parents.

\textsuperscript{82}Interviews with Fr. Gonza Kayaga, Nalongo Budhagali, Kawuma Safina, Mpadwa Lukowe, Kirangi Monica, Kakose Seforoza, Edisa Namwase.

\textsuperscript{83}Kagoya Sarah

\textsuperscript{84}Ibid.
Yet to other people, daughters are desired for the help they render their parents in undertaking household roles and the companionship they offer their mothers in times of distress and general ill being (Raley & Bianchi, 2006:407; Arnold & Kuo, 1984:299, 316). Sex preference of children further illustrates the substantial differentiation in expected sex roles for boys and girls and in functions that children serve for their parents, especially in maintenance of the family well being.

Ehrenreich and Deirdre argued in the 1970s that in most societies of the world, women have been healers and the custodians of every people’s health (Ehrenreich & Deirdre, 1973:1). This is a clear manifestation of the position of women in the maintenance of health and well-being. Women are therefore general practitioners of traditional medicine in their communities. They combine and practice almost all branches of traditional medicine, being midwives, herbalists, counsellors, mediums as well as nutritionists. As Ehrenreich and Deirdre (1973:1) put it, ‘medicine is part of the heritage of women since time immemorial’. Indeed, women’s unquestionable role in ensuring a disease-free community has been supported by research on ‘the lived experience of Ojibwa and Cree Women Healers’ put forth by Struthers (2000). She analysed the role of healing in society and argued that it has been the responsibility of women in all cultures right from the earliest times to the present. Caring roles have always been ascribed to women, and since the sick require a lot of care, mothers and wives are a key constituent in the healing traditions.

Women in Busoga have also been known for being specialists in diagnosis and treatment of certain ailments. They are known to be very knowledgeable in childhood diseases like measles, polio, cough and tuberculosis, as well as neo-natal infections. When children fall sick, fathers are simply informed of the sickness and the interventions that have been taken by the women. For women are expected to know much better than men the likely remedies to children’s sicknesses. Men’s intervention are necessary if the sickness requires the child to be taken to a specialized healer. This is because in circumstances of sickness, women can not take decisions involving the intervention of a healer who is not related to the family or not known to the man.

Women make thorough examination of sick children by inspecting the eyes, noses, limbs, throat as well as the skin to detect any abnormalities. Detection of any abnormality in babies is
carefully done by women immediately after birth.\textsuperscript{88} This is because only women are expected to be present at the delivery of babies. Research done by the Cultural Research Center (2013) concerning the institution of marriage in Busoga, illustrates the enormous work in traditional Busoga, that was done by the mother, paternal grandmother and ‘Songa’ of the baby to detect and diagnose any abnormalities and deformities in the children. After birth the women looked keenly to find out if the child has any deformities. They would look for signs of impotence. A girl would be laid on her back and observed to see whether she pissed in a fountain-like manner. If the observation confirmed that she did not do so, then it was a sign that the baby had a sexual deformation. (2013:23).\textsuperscript{89}

Apart from considerable expertise in childhood diseases, women as healers in Busoga had inherent interest in ensuring the general health of fellow women. Women healers were indeed obstetricians and gynaecologists among their people. For example, women healers were specialists in the treatment of barrenness, delayed labour, prolonged menstruation as well as body odours among women.\textsuperscript{90} Traditionally, women healers in Busoga served mainly women and their children. This has been augmented by Mbiti (1988), who has elaborated on the significant role of women in healing, all over traditional Africa. Whereas traditional healing has been the profession of women and men, it has been more often the women practitioners who handle the medical needs of children and other women. Yecho’s work on the ‘Role of Nigerian women in the development of the health sector: the case of Tiv women of Benue’ (2014) suggests that, despite the diversity with which African culture manifests itself, women’s influential position in determining the health and well-being of members of their communities was unquestionably widespread and useful in all African traditional societies.

3.5 Categories of Traditional Healers among the Basoga

Busoga society has two major categories of traditional healers. Those with innate healing power and those who acquire it. The general term for a traditional healer in Busoga is called ‘Omuyigha’\textsuperscript{91} - simply meaning ‘healer’. They are also referred to as ‘Basagho ba Kisoga’ meaning ‘traditional doctors’. Earlier writers like John Mbiti grouped all traditional healers in Africa as ‘medicine-men’. This was in disregard of the role of African women in traditional

\begin{footnote}
\textsuperscript{88}Kirangi Monica
\textsuperscript{89}Ibid.
\textsuperscript{90}Nalongo Budhagali, 52 years, she is wife to Nabamba Budhagali and also doubles as a Spirit Medium. Interviewed on 15\textsuperscript{th} and 16\textsuperscript{th} April 2015. These skills that were taught especially to young mothers in diagnosis of ailments and discomfort among babies were echoed by other traditional birth attendants that I interviewed during the study.
\textsuperscript{91}Nabamba Budhagali
\end{footnote}
healing. However, the name may vary depending on the type of healing one provides. In other cases, healers in Busoga have today come to be referred to as ‘abasagho b’ekinansi’,\(^92\) meaning literally ‘cultural doctors’. The implication is that the healers are expected to cause healing using the traditional culture of the Basoga. Another categorization of traditional healers in Busoga depends on the source of power to do the healing ministry. Some use mystical-spiritual powers to heal people. Those in this category believe in the invocation of the spirits or deities to effectively do the healing. Examples include diviners, also called ‘Baswezi’, and bone setters who do their work without interfacing with the patient with a fractured bone. They are popularly called ‘abasagho ab’ayungira mwibanga’. Healers that employ spiritual forces are also concerned with finding out the cause of the sickness, and ultimately ‘who’ might be responsible for sending that sickness. Those that use spiritual forces are also known to be more ritualistic than the pure herbalists.

The other category of healers includes those who use purely herbal medicine to treat the different sicknesses and challenges that face the people. These do not invoke any spirits to do their work. These are pure herbalists called ‘abayigha b’emiti’. They are not concerned with establishing the cause and source of the sickness or problem. Their concern is to undo witchcraft - ‘eirogo’ using herbal medicine. It is, however, very common to find that a healer is a ‘one stop shop centre of traditional medicine’. This means that most traditional healers common in Busoga do almost everything. They are diviners (balaguzi, baswezi), herbalists (bayigha), bone setters (bayunzi b’amagumba) etc. In this section I also discuss the various diagnostic methods and resources used by each category of traditional healers. Not all traditional healers in Busoga offer diagnostic services.\(^93\) However, the goal for all traditional healers in Busoga is the same: to ensure that society is free of illness. In the coming sections, I discuss the following types of traditional healers that were identified in Busoga.

- Diviners- Baswezi, Abalaguzi
- Herbalists- Abayigha,
- Bone setters- Abayunzi b’amagumba
- Koranic healers- Abasawo baghalimu
- Traditional Birth Attendants - Balerwa, Mulerwa

\(^92\) Ibid.
\(^93\)Fr. Gonza Kayaga.
3.51 Diviners

Diviners are not only the most common, but also the most popular and the most feared among the Basoga. These carry several names because of the various functions they perform in the Kisoga healing tradition. Among these names are: Priests - *baswezi*, seers - *balaguzi*, mediums - *mandwa*, doctors - *basagho, baganga* etc. Diviners carry various descriptive roles among which are: *okulagula* - to foretell; *okulingamu* - looking into the matter; *okugya ku ndagu* - to go to the divining spirit; *okwebuuza* - to go and consult; *okugya ku musagho* - to go to the doctor etc. In the performance of their duties, the diviners use spiritual or mystical powers. These descriptions ascribed to diviners are what make them ‘a one stop centre for traditional medicine’. A diviner uses supernatural powers to not only diagnose the cause of the sickness but also tell the past and forecast the future. After consulting the spirits, the diviner can offer solutions.

Diviners own shrines (*amasabo*-plural or *eisabo*-singular), which also double as their healing centres or medical centres as in modern medical practice. The sick are expected to visit the diviner at his/her ‘medical centre’. The diviner acts as a medium (*mandwa*) by being possessed by the spirit(s) to establish the cause of the sickness or problem. This process of establishing the cause of the sickness is called ‘*okulagula*’ or ‘*okulingamu*’ - i.e. foretelling or looking into the issue that is disturbing the patient. Through the diviner, the spirits will tell the cause of the sickness and prescribe the solutions. If the solution could be an herbal remedy, the same diviner will perform the function of healer - *omuyigha*. Unlike other categories of traditional healers, discovery of the cause of the sickness by diviners will always involve an element of “witchcraft”. As a traditional priest, a diviner ensures that there is harmonious living between the living and the spirits. Once this is not achieved, then the spirits are believed to cause sicknesses and problems to the people.

Diviners use spiritual resources to identity the cause of the sickness. Such spiritual resources are embodied in physical objects, which have technically been labelled as ‘fetishes’ by scholars in the religio-cultural as well as anthropological studies. I present a conceptual description of fetishism and fetishes, which will help in understanding better, why healers use these objects and what salient purposes they serve, to enhance the believed efficacy of healing. In doing so, I show why there seems to be an obsession with fetishes as almost no healing activity take place without the playing or manipulation of some fetishes.

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94 Kibalya Mandwa
95 Nfuddu Isabirye
The word fetish has been used over the years in religious analysis, anthropology, and psychoanalysis of sexual deviance, economics and philosophy (Pietz, 1985:5; Tanaka, 2011:134). What is generally accepted by almost all scholars is that fetishes of all nature and intentions are material objects (Pietz, 1985, 1987, 1988; MacGaffey, 1994; Pels, 1998; Tanaka, 2011; Silva, 2013:80). Tracing the origin and meaning of the word ‘fetish’, Silva provides some insights. ‘Fetish’ is from the Latin facticius, ‘a thing made’ (Silva, 2013:80), to which Pietz has translated as ‘manufactured’ (Pietz, 1985:5). Tanaka refers to William Pietz’ work when he traces the word to have originated as a result of the interaction between Portuguese merchants and people living in West Africa. The merchants referred to certain objects venerated by the local people as ‘fetiço’, a word meaning ‘sorcery’, the root of which is also present in the word ‘artifice’ (Tanaka, 2011:134). Silva argues that for ‘things’ made or manufactured usually take the form not of material objects but of abstractions apprehended as autonomous entities. Silva further argues that fetishes do not share their ontological status, physical appearance, or functional attributes; but only share their being reifacts. To speak of fetishism is to speak of reification, the universal human tendency to apprehend abstractions as things (Silva, 2013:80).

David Graeber along with Sonia Silva (Silva, 2011:87), and Peter Pels (1998:91) argue that for all the literature about ‘fetish’, the most common denominator description is that of ‘materiality’, that is, how material objects are transformed by becoming objects of desire or value, a value that often seems somehow displaced, inordinate, or inappropriate. The fetish is irreducibly material and unlike an idol, which represents an immaterial something located elsewhere (MacGaffey, 1994:123). In David Graeber’s analysis, fetishes are objects created by human beings, and impose upon them a supernatural manifestation, which then end up having power over those who created them. The people therefore bow and worship these objects (Graeber, 2016:411). In Busoga society, these material objects are synonymous with the power of the spiritual being they represent. For example, the fetishes made of horns of cows, well decorated with beads and bark cloth, are a reification of the ‘amaghembe’-warrior spirits.

Therefore, when I refer to use of fetishes (representing the spiritual) in healing traditions of the Basoga, I am looking at material objects, that have been made by the actors in the healing traditions, which are also non-absent in the practices of witchcraft. My intention is not to trace the conceptual understanding of ‘fetish and fetishism’ from all the academic fields it has been used, but its restrictive meanings as used in this study. I am specifically interested in showing how beliefs and practices of fetishism shed light upon a better understanding of Busoga society
ideology of healing since the use of fetishes is prevalent. In the foregoing discussions, I present several fetishes that are paramount in the healing traditions of Busoga society.\textsuperscript{96}

The use of ancestral spirits in diagnosis of the illness is the oldest approach used by diviners in Busoga. This is usually done in a shrine (\textit{eisabo}), a healing house that also doubles as a traditional house of prayer to the spirits. The diviner invokes the spirits by burning herbs on a potsherd, also called ‘\textit{olugyo’}.\textsuperscript{97} This is done either at the entrance to the shrine or inside the shrine, with the smoke passing over the sick. A short prayer is made to invoke the spirits to come and diagnose the patient’s illness. The diviner must be dressed in his divination garments that include bark cloth, a necklace of cowrie shells, \textit{olutembe} (this is a band of seeds of wild banana plant worn around the head of the diviner) and holding a special stick called ‘\textit{oluga’}. The bark cloth is the traditional wear of the Basoga and so the spirits are pleased with it. The stick symbolizes authority and power among the Basoga.\textsuperscript{98} The patient is then asked by the diviner to ask the spirits to address his/her problem usually in silence/nonverbal communication. The patient’s prayer to the spirits is usually short.\textsuperscript{99}The implication is that the spirits cannot intervene on their own accord, even when the client has gone in their presence. The client is required to state in very precise terms the reason for his/her visit to the spirits. Meanwhile, the diviner shakes his shakers, called ‘\textit{ensaasi}’ or ‘\textit{enhengho}’; calling upon the spirits to come out very quickly and attend to the problem of the patient, also called ‘\textit{omwidhukulu’}. All patients that come to consult the diviner are called ‘\textit{baidhukulu’} - grandchildren (plural) and ‘\textit{omwidhukulu’} - grandchild (singular).

Through the diviner’s prayer, the spirits are requested to make their presence and respond to the client’s problem.\textsuperscript{100} The implication is that divination is part and parcel of the spiritual. The diviner’s prayer facilitates the coming of spirits, which will diagnose the client’ problems and subsequently recommend remedies to be undertaken. When the ancestral spirit possesses the medium (who doubles as the diviner), it asks the client a few questions before giving the diagnosis of the problem or sickness. It is against the norms of divination for the patient to disagree with the spirit’s diagnosis. Disagreement with the spirit’s diagnosis is being disrespectful to the spirits. But because of the confidence and trust that is bestowed upon the healers in Busoga, it is rare for patients to doubt the spirit’s diagnosis.

\textsuperscript{96}Nabirye Madina, 26 years, Diviner-Medium, Bugembe, Jinja district. Interviewed on 11 June 2015
\textsuperscript{97}Namuwaya Harina
\textsuperscript{98}Interviews with female mediums- Nabirye Madina and Namuwaya Harina
\textsuperscript{99}Nabamba Budthagali
\textsuperscript{100}Patrick Wairagala Mandwa
In instances where the diviner is the medium, after the spirit has left him/her, the possessed diviner asks the client what the spirit has said and its prescription of the treatment. However, it should be known that there are circumstances in which the diviner and the medium are two different people within the healing centre. In such a situation, the diviner invokes the spirit to come and possess another person - the medium. The diviner then becomes acquainted with what the spirit has said. In other circumstances, the patient may be the one to be possessed by the spirit(s), especially when the problem disturbing him/her is concerned with his/her clan spirits.

The use of fetish spirits, also called ‘Amaghembe’, in the diagnosis and treatment of sicknesses among the Basoga is common. The difference though is that these spirits are mainly servant spirits imported from neighbouring cultural tribes of Buganda and Bunyoro. This is as opposed to the ancestral spirits that have their origins in Busoga. Amaghembe are spirits that have been put into animal horns, gourds and sometimes animal skins and bones. This process is called ‘okughanga amaghembe’, literally meaning ‘installing or assembling fetish spirits’. It is believed that certain objects used in assembling fetishes have the power to attract and keep the maghembe so that they can be used in divination. This therefore qualifies the assertion scholars over the years have put forward that fetishes are a creation of the people, who impose spiritual value over them.

Divination using fetish spirits can be done by anybody who purchases them. Fetish spirits are of two types: Those that possess the diviner as its medium. These fetish spirits are known as ‘Amaghembe ag’okumutwe’, literally meaning spirits that speak through a medium by possession. The second category consists of self-speaking maghembe, which speak literally in the air or through space. The diviner and the patient cannot see them but only hear their sounds. These are known as ‘Amaghembe ag’omwibbanga’. Women healers rarely become possessed by these fetish spirits because they are known to be very aggressive when possessing the medium (diviner). Women do not have the kind of physical strength to sustain being possessed by ‘eighembe’ (singular for fetish spirit). Generally, divination using ‘Amaghembe’ in Busoga is the preserve of male traditional healers. The aggressiveness of the fetish spirits may involve hitting of the door, walls, including the visitors and patients.

Other ‘fetishes’ used in diagnosis and treatment include, but are not limited to, the seeds of a wild banana plant locally called ‘amatembe’, cowrie shells, water, books/Quran and pens, 

101 Patrick Wairagala Mandwa
102 Ibid.
103 Interviews with Kawuma Safina, Namuwaya Harina, Madina Nabirye, Patrick Wairagala Mandwa, Isabirye Baligeya
104 Interviews with Patrick Wairagala and Namuwaya Harina
pencils, paper, talisman, birds especially chicken. Cowrie shells (*ensimbi*) and seeds of wild banana plants (*amatembe*) are a common sight with traditional healers including pure herbalists. *Amatembe* and *ensimbi* symbolize the ancestral spirits, wealth and communion between the living and the dead. They symbolize ancestral spirits in the sense that they are long lasting. These objects never lose their original shape and colour. They therefore signify the long lasting omnipresent nature of the ancestral spirits. The use of cowrie shells and *amatembe* signify the wisdom of the ancestors and are believed to discover people’s problems and offer solutions to them. A diviner takes ten to twelve cowrie shells and puts them together with a similar number of *amatembe*. He takes them in his right hand, shakes them and throws them on a bark cloth or animal skin. This is done as the patient watches.

The cowrie shells and *amatembe* provide information about the problem the client is experiencing by the way they fall on the bark cloth. The diviner has the power to interpret the cowrie shells and *amatembe* by the way they have fallen. For example, if they fall in a heap, it is a sign of witchcraft or death; if two of them fall separated from the rest, it means that enemies are after the client’s life; if one falls off the skin or bark cloth, it means there is a haunting spirit in the family (*omukyeno*); if one cowrie shell stands on top of another, it means the client will be victorious; if many of them fall upside down, it means someone at home is sick etc.\(^{105}\)

To ensure efficacy in the interpretation of the cowrie shells and *amatembe*, the traditional healer is expected to enhance his/her wisdom by taking certain herbs before the divination. The first one is called *omuvumbula byama* - a herb that discovers secrets. The second one is called *olumanho*, which is an assortment of medicines that help the healer to get to know the unknown.\(^{106}\)The throwing of cowrie shells and *amatembe* by the diviners is also important in foretelling (*okulagula*). Families use this kind of divination to get to know where their long-lost family members may be hiding. The interpretations made by the diviner may be accompanied by warnings not to get involved in certain activities. However, not all traditional healers in Busoga who are interested in the diagnosis of sicknesses and challenges of their clients have the wisdom to use cowrie shells and *amatembe* as instruments in the healing process. There are those who are specially endowed with the wisdom to use and interpret cowrie shell landings.

Just like in modern medical practices, not all medical practitioners have knowledge on using all medical equipment. I met traditional healers in Busoga who were not using either ancestral spirits or *Amaghembe* to diagnose, but exclusively used cowrie shells and *amatembe*.

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\(^{105}\) Nalongo Budhagali & Lukowe Kiira, Budhagali Village, Jinja district. Interviewed on the 16\(^{th}\) April 2015.

\(^{106}\) Ibid.
These can be equated to modern medical laboratory technologists, who take blood samples to establish the cause of the disease, but they cannot prescribe treatment. Other resources used in the diagnosis and treatment of the sick include but not limited to water, animals and birds, as well as herbal substances of all nature. I will discuss how each of these is used in treatment of the sick among the Basoga.

Water is a key resource used in diagnosis and treatment of sickesses by healers in Busoga. Some of the healing spirits are believed to dwell in the major rivers and lakes. This is the reason why each domestic water well, also locally called ‘ensulo’, is named after a certain spirit. For example, names of spirits like Meeru, Naigombwa, and Walumbe are given to some ensulo in Busoga. Consequently, under the influence of these water spirits, some healers use water, usually drawn in a bowl and is mixed with some herbs. The diviner then invokes the ancestral spirits to come and advise them on a particular issue. Shakers (ensaasi) may be played above the water. The image of the ancestor is believed to appear in this water and give information concerning the issue in question. Specialists in water divination keenly look into the water to interpret the diagnosis.

Regarding the use of birds in diagnosis, I interacted with a woman who claimed to specialize in herbal medicine that cures barrenness.¹⁰⁷ Whereas many herbalists in Busoga do not attempt to establish the cause but are more concerned with healing the illness, she was using chicken to determine whether the patient was worthwhile to spend the medicine on. She would demand that the barren woman goes to her with one hen, which she would place in between the legs of the patient. The diagnosis was that if the hen remained there for some time as determined by the female herbalist, then it was an indication that the woman in question would conceive once given the mystical herbs. But once the hen was placed in between the woman’s legs and it ran away, it meant that the woman would never conceive despite applying the mystical herb for fertility. Two issues emerge from this type of diagnosis. First, traditional healers in Busoga are trained to avoid wastage of medicine as this misuse would bring anger to the spiritual realm. Secondly, traditional healers take pride in curing illness, and inability to cause cessation to any type of illness reported to them by individuals and the community would challenge the authenticity and efficacy of their medicine.

A bitch is also used in pregnancy-related cases. According to Kayaga (2010:16), when a bitch is giving birth, it goes into hiding yet it always delivers normally. The soil from where the

¹⁰⁷Lukowe Robinah, 67 years, Medium, Bulange Village, Namutumba district. Interviewed 20th April 2015
bitch delivers is used by herbalists and diviners to treat women who are due to deliver. Traditional healers pick up that soil and mix it with herbs to make ‘mumbwa’- this is clay moulding in which herbs are mixed for a purpose or for curing a particular disease. This mumbwa made from soil from a place where the bitch gave birth is dissolved into water and the solution given to the pregnant woman, to avert any complications during childbirth.

Despite of the existence of the above resources, most of the traditional medicines in Busoga come from plants. The roots, leaves or branches are processed into different forms including powder.\textsuperscript{108} Herbal medicines are used in the treatment of diseases caused by bad magic, and for religious ceremonies. The use of herbs involves a health care system that treats diseases using plants. Herbs may be mixed with clay or ashes of burnt animal products, and are administered to a patient mainly through the mouth, smeared on the body especially the affected part, or bathed using water. They may also be burned or boiled so that the steam or smoke respectively can be inhaled by the patient. It is at times difficult to say whether it is the incantation or the herbs that has influence on the cure because both are used hand in hand in the treatment.

Herbs are used both in spiritually-diagnosed sicknesses and social challenges that affect the person who visits a traditional healer. According to herbalists with whom I interacted with, they claim to cure almost all diseases using the natural plants that they have in their vicinities.\textsuperscript{109} Some claimed to cure even chronic diseases like cancer and HIV/ AIDS. There are three categories of herbal medicines used to treat sicknesses. These include household herbal medicines, specialized areas of herbal health care, and lastly herbal medicines used by the fully fledged traditional doctors (\textit{Basagho}). The household herbal medicines are those that are generally known by everybody and can be prepared quickly and easily by anyone to treat an ailment. For example, herbal medicines for treatment of malaria are almost known by everybody in Busoga. Malaria is treated using the leaves of a common bitter plant called ‘olubirizi’ (\textit{Vernonia amygdalina})\textsuperscript{110}, which are crushed, and the juice given to the patient to drink. Specialized herbal medicines include those that are known by specialized herbalists. In other words, the practitioner knows the management of only one disease. Bone setters in Busoga are accustomed to knowing only herbal medicines connected with setting bones. Traditional birth attendants usually know only herbal medicine related with pregnancy and childbirth. On the

\textsuperscript{108}Interviews with Kawuma Safina & Baligeya Isabirye
\textsuperscript{109}Kabaale Bitimbito
other hand, the fully-fledged traditional doctors like the diviners and pure herbalists provide a one-stop centre of herbal medicine. These know herbal medicines related to almost all ailments and problems that affect the people.

Animal resources are also common in the treatment of sicknesses among the Basoga. Animals play a significant role in producing medicines. Such animal resources include snake oils from snakes, cowhides and milk from cows, red ants, horns of buffaloes, feathers, bones etc. For instance, ‘Ebiguuna’, (tinea captis) a type of skin disease which eats away the hair on the heads of children, is treated by application of excreta of sheep on the affected area.\textsuperscript{111} Kayaga (2010:17) also notes use of sloughed skin of a snake in treatment of pregnant women. It is common practice for pregnant women to rub the skin of a snake which has sloughed off, on their bellies. Since the snake finds no difficulty in sloughing off its skin, this very skin when rubbed on the pregnant woman’s belly will help her in having quick delivery. It is therefore used for inducing labour among women. Such an obsession with ‘fetishism’ communicates the personification and ‘agent-ification’ of material objects, which reifies supernatural forces, and commands a unique reverence because of this magical attribution. Peter Pels argues that these fetishes are inherent powers of agency (Pels et.al, 2002:4).

However, fetishism is accompanied by increasing charlatanism in society. This breeds ‘fake fetishes’, locally known as ‘amaghembe ag’ebikwangala’. The use of fake fetishes is manifested in several ways. Firstly, charlatans overplay the significance of fetish objects found in their shrines, and may demand the clients to perform extra ordinary rites as part of the healing. For example, they may demand to sleep on a piece of wooden carving for a week, as a prerequisite to taking away misfortunes-ebisirani. Some of them under the influence of darkness claim to ask the fetish objects about the cause of one’s illness, and then in a changed voice, usually a hoarse one, make the response claiming that it is the fetish spirit speaking. There is manipulation of clients by fake healers using these fetishes. Several fake healers have taken to making scaring objects and install them in their shrines to serve two related purposes; firstly, to instil fear among the patients, to the extent of belief that the healer (in this case a fake one) has very powerful spiritual forces in his midst. Secondly, there is common belief that the more scaring these fetishes are, the more effective the healer can be. Such charlatans assemble skeletons and dried skins of wild animals like leopards, pythons, chameleons, snakes, crocodiles and of recent increasing cases of human parts like skulls of the dead.

\textsuperscript{111}Interview with Isabirye Baligeya & Banuri Wairagala
Vulnerable clients cannot establish the authenticity of such charlatans. This untold suffering of clients under the tutorship of fake healers using fake fetishes is prevalent in other African countries like Cameroon (Hillenbrand, 2006: 8-9). Because Uganda is becoming increasingly monetized yet with increasing unemployment, men, who are expected to be the breadwinners, have become the majority of charlatans, compared to the women. Women suffer under the hands of these charlatans. The use of a fetish stick which the fake healers claim to have entered the body of their victims and then demand for exorbitant sums of money, in order to perform rites to remove it, speaks volumes about the extent of manipulation. Traditional healers in Busoga agree that there are fake healers amongst them. News reports by The New Vision indicate that Busoga healers are split over the method to be used to weed out quacks from the profession

3.5.2 Herbalists - abayigha

These are pure herbalists who use plant, mineral and animal resources to heal. Because their most common source of medicine are plants, they are often called ‘abayighab’emiti’, literally meaning ‘doctors who use plants and trees’. They also have a good knowledge of herbs to counteract witchcraft. They treat both physical and psychological diseases and can undoubtedly be called Basoga’s traditional pharmacists and clinicians.

These learn the various types of herbs through inheritance (okusikira), birth (obuzaale) and purchase, called ‘okugula ekiti eky’obulezi’. They collect herbs from the nearby bushes. But because of increasing deforestation, herbalists have to move long distances looking for specific herbs. Whereas this is the case, herbalists also associate many of the herbs to spiritual beings, hence the need to perform certain rituals and sacrifices before obtaining the herb or using it by the patient.

In contrast to diviners, herbalists do not attempt to establish the cause of the sickness, but they have been well trained to know the specific herbs that can heal all kinds of sicknesses, including those that can be applied to ward off witchcraft and misfortune. Herbalists are doctors of African medicine and are strewn among village communities in Busoga. Their medicines range from roots, leaves, mineral substances, and dried parts of animals that may be mixed with special healing rituals for healing and warding off evil. Their healing centres are usually within their courtyards. Some of the herbalists in Busoga have no permanent places to either display

113Isabirye Baligeya, 52 year), Herbalist, Bukonte Village, Namutumba District. Interviewed on 14th /4/2015
114This very description of herbalists was made by Nabamba Budhagali & Patrick Wairagala-both diviners.
115Ali Wairagala
their herbs or meet their patients. Some work from their sitting rooms or just any shade within their compounds. With urbanisation, herbalists in Busoga - just like in many other parts of Uganda - have become commercialized, usually moving to the urban centres where they acquire many customers. In cities, people pay them higher prices than the village clients. Apart from the spiritual element involved, herbal remedies are believed to have high medicinal value, which are effective in treatment of diseases even in cases where western medicine has not been successful, like cancer.\footnote{Ibid.}

3.5.3 Bone Setters

These are commonly referred to as ‘abayunzi b’amagumba’\footnote{Kassan Ddamba, 78 years, Bone setter, Bubago Village, Namutumba district. Interviewed on 19th April 2015}, literally meaning those ‘who join bones together’. These are the orthopaedic specialists. They work not only on people but also domestic animals with bone dislocations, especially in the limbs. Bone setting has been practiced among the Basoga for a long time. Bone setters become so by inheritance. Some are born with an innate ability to do bone setting, whereas others have just acquired the powers and medicine from experts. There are two categories of bone setters in Busoga. There is the bone setter who uses herbal medicine and massaging technique. He/she does not invoke any spiritual powers to heal the fracture. He uses his bare hands, saliva, and sometimes small sticks as well as sand or soil. This kind of bone setter opens his palms, spits saliva in them, lays them on the bare ground and then places the palms together. According to the interviewed bone setters, this is intended to ignite healing power that is in their hands.\footnote{ibid}\footnote{Koowa, 49years, Bone setter, Bulagala Village, Namutumba district. Interviewed on 28-04-2015} In addition to the use of their bare hands, some bone setters apply herbal medicine to the affected part as they continue to massage it gently. The most important subject with bone setting is not the herbal medicine that is smeared on the affected part, but the bone setter himself, who is believed to have power that flows through his hands to the affected part of the body.

The second category of bone setters are those that mend fractured bones at a distance. These are commonly called ‘abayunzi ab’ayungira mwibanga’.\footnote{Interviews with Kassan Ddamba, Koowa, Nabamba Budhagali, Patrick Wairagala Mandwa} These meet the patient only once and the rest of the days, the patient receives treatment while the patient and the healer are far away from each other. Bone setters with claim to mend bones at a distance use mystical forces to do their work. Some of these bone setters practice divination too. The ‘technology’ used is the use of a banana plant that they turn, twist and turn gently at the appointed treatment
time of the patient. At this very time when the healer is turning the banana plant, the patient is expected to feel a lot more pain because of the mending process – though healer and patient are far-removed from one another. 121

3.5.4 Koranic Healers - Abalaguzi Abaghalimu

These are traditional healers who have received their influences from the Arab world and mixed it with the Kisoga healing traditions. These are men with respectable authority in Moslem circles. They have mastered the art of reading Arabic and the holy book of the Moslems, the Quran. These are called ‘Abalaguzi Abaghalimu’, literally meaning ‘Moslem diviners’ or ‘diviner sheiks’. Islam was introduced in the Busoga sub region as late as 1850s. Most of the traditional healers interviewed on the types of traditional healers in Busoga, all mentioned ‘abalaguzi abaghalimu’ as a distinct group of traditional healers in their locality. What makes them distinctive traditional healers in this region is that apart from receiving revelations by reading verses from the Quran to identify the cause of the sickness, the rest of the interventions relate purely to what is implemented by the diviners and herbalists. They, too, prescribe Kisoga herbal remedies to their patients. 122

They have the capacity to ‘arrest’ and or ‘chase away’ demons or ghosts, popularly referred to as ‘majini’. 123 They can successfully deal with evil spirits the way a diviner would do so. Whereas they do not discriminate against any patients on religious grounds, most of their clients are Moslems. There are gendered peculiarities with this category of traditional healers. It is a profession which is distinctively done by men. In many Islamic religious circles women are not allowed to interact with people with whom they are not related. 124 Since this is a trade that involves meeting many people, the sick and their relatives or caretakers, it means that women are ruled out of the profession. Secondly, the reading of the Quran and the explaining of the contents therein has always been restricted to men. Yet this is a healing tradition that involves the reading and the interpretation of the Quran, a role that has been dominated by the men in Islamic religious faith.

121 Interviews with Nabamba Budhagali & Patrick Wairagala (both diviners but claim to possess this power to carry out bone setting).
122 Banuri Wairagala, (45 years), Herbalist, Bukonte Village, Interviewed on 17th/5/2015
123 Samanya Hussein, 52 years, Koranic Healer, Mafubira, Jinja district. Interviewed on 19th July 2015
124 Katuramu Ausi, 60 years, Lecturer of Islamic Theology, Kyambogo University. Interviewed on 20th June 2015
3.5.5 Traditional Birth Attendants - Balerwa

Traditional birth attendants commonly referred to as ‘Mulerwa’ (singular) and ‘Balerwa’\(^{125}\) (plural) in Busoga, are one of the categories of traditional healers. Traditional birth attendants aid the mother to deliver the baby. Traditional birth attendants use local herbs to arouse labour pains and hold the claim to have herbs that can make an expectant mother to deliver normally, without going under Caesarean section. They also have herbs to ‘soften the pelvic bones’ so that the expectant mother will have a safe delivery.\(^{126}\) Traditional birth attendants form a healing tradition that is the domain of women alone. In a publication titled ‘Celebrating the Sanctity of Human Life among the Basoga’, by the Cultural Research Center (2004), it is observed that in traditional Kisoga society, every village had at least one renowned old woman who acted as a midwife. She would be consulted on pregnancy and birth. The Balerwa were so highly esteemed that they were only next in position to one’s mother.

However, the interviewed traditional healers are hesitant to group them as being part of the ‘traditional medicinal system’ in Busoga. ‘Balerwa’ have now been courted by the modern medical system in Uganda, and so the associations of the traditional healers have disregarded them as being part of them. Some have been trained in basic midwifery skills and integrated in the mainstream modern medical systems. Balerwa fall in the category of specialized herbalists, for they are concerned with knowledge of herbal medicine for pregnancy and birth only. These, too, provide both antenatal care services to expectant mothers as well as neonatal services using local herbs. As soon as the woman conceives, these Balerwa, who are generally very affordable, begin to provide the woman with different categories of herbs that vary at every stage of the pregnancy. Women who have ever delivered under the care of Balerwa attest to the fact that these women are friendly and will give the necessary support, because the Balerwa normally have a close link to the expectant mother and the unborn child. The Balerwa, however, do not use spiritual powers to enhance efficacy of their medicine.

Whereas the Balerwa have been quite useful in many communities in Busoga, their social situations and positioning is not any different from the rest of the women in the same communities, as they are grossly affected by class and gender differentiation. Interviews held with Balerwa reveal that they are still socially and economically disadvantaged, just like the rest of the other local women. A few that have been integrated into modern midwifery, occupy the lowest tier in the healthcare system in Uganda.

\(^{125}\)Fr. Gonza Kayaga
\(^{126}\)Interviews with TBA-Kakose Seforoza, Kirangi Monica and Annet Wambuzi
3.6 Rituals Involved in Traditional Healing among the Basoga

The importance of rituals in African traditional healing is underscored by many authors (Parrinder, 1974:79-100; Mbiti, 1975:126-136; Romane, 2000:141). Rituals are what facilitate healing among traditional medicinal systems in Africa. Some healing practices are more ritualistic than others. Diviners demand many rituals to be performed by either themselves or their clients. Healers that invoke a lot of spiritual influence are more ritualistic than those who are simply skilled in traditional medicine. For example, bone setters have no rituals expected to be performed by their clients, apart from spitting in their bare hands and then placing them either in some liquid herbs or soil before they can massage the affected part of the client. Traditional birth attendants are just skilled in helping fellow women deliver with application of some herbs. The rest of actions demanded of expectant mothers or lactating mothers are the usual practices that are not different from modern health facilities. Rituals performed by pure herbalists are less demanding and, in some instances, nothing at all is performed, apart from administering herbs to the client.

Rituals performed for the same sicknesses or challenges also differ from one community to another and from one healer to another depending on their background and training. The nature of rituals to be performed is influenced by the gender of not only the client but also the healer. Body cleansing rituals may be restricted when the healer is male, and the client is female. It is ethical practice among the healing traditions of Busoga for a female healer to perform body cleansing upon a female client and vice versa. However, quack healers are known to break these rules and end up sexually abusing their female clients. Some healers demand certain rituals to be performed at night while others during broad day light. Rituals in healing are not isolated from the society wide rites that traditional Basoga perform at all stages of their lives.

Just like in the modern health care sector, there is over servicing in traditional medicine through over performance of rituals upon clients, most of which are irrelevant. Some healers use rituals to assert their power over their clients. This is the case when the healer is male, and the client is female. The intrusion of quack healers worsens the influence of rituals on healing. Female clients have been the most victims to unnecessary ritual demands from quack healers. For the cure of barrenness or infertility, female interviewees reported male healers demanding their female clients to sleep with them, as an act of transfer of healing, through which medicine is administered to cure the barrenness. The claims that spirits demand to have sex with the barren client to unlock and dislodge the spirit of barrenness are common acts of treachery used by quack
healers. The practice of smearing herbs on the tip of the healer’s penis to insert herbs in the female client’s vagina as treatment of barrenness is rampant. These issues cast doubt on the authenticity, and efficacy of rituals in the healing processes. Ritual healing therefore involves quite a lot of manipulation of the mind of the sick, who are already vulnerable.

There are communal health rituals where, all members in that community take part in the healing process. Many rituals are performed in villages to prevent, delay, or ward off death. Even when death strikes, part of the funeral rites includes the idea of chasing away death from the family. For this purpose, the homestead and its occupants are purified ritually, and this renews normal life in the home and community at large. Communal health rituals are performed for villages where there is an epidemic. Time and again there are witch hunting rituals to ensure that witches do not cause disharmony, as their powers are kept under control. There are other rituals that are performed to drive away spirits from troubling the people. These are performed at family or community levels depending on the magnitude and who is being affected. If the troubling spirits concern only the family or clan, then rituals will be made at family level. But if there are evil spirits called ‘emijjini’, troubling a village, by raping women and young girls, then rituals will be done at a community level.

Materials used in the performance of health rituals are diverse. These include seeds and plants, soils, animals and birds as well as human saliva. Some of these materials are processed into powder form and mixed with other ingredients for ritual purposes. Roots, leaves, branches and flowers are all used in rituals of purification and prevention of harm. Seeds or beans are used in rituals of remembering the departed especially by placing them in domestic shrines. The Basoga also use animals as materials for health rituals. Such animals include sheep, goats, cows, etc. Animals are used to enhance good health in the community. Animals are slaughtered, and the meat eaten by those who are afflicted. The Basoga also believe that danger can be prevented by killing an animal as a way of appeasement. Some animal parts used in health rituals are more treasured than others. For example, horns of animals are very important as traditional medicines are kept in them. Soldier spirits or fetishes (Amaghembe) are composed of shells attached to the horns in a particular fashion with the help of a string.

Blood-letting is common when blood is collected or tapped in a container from the animal being slaughtered. The blood is drunk or sprinkled upon those faced with the sickness.

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127 Katende Kibenge
128 Kakaire Balimwikungu (72 years), Farmer/Client, Mpande Village, Namutumba district, Interviewed on 11/4/2015
129 Patrick Wairagala
Some of the blood is poured on the ground to appease the living dead and sustain good relations with those still living. Pouring blood on the ground is also intended to bless the ground and make it productive for the community.\textsuperscript{130} Chicken is also used in rituals that need to be performed for one to become rich and bear many children. Fertility rituals largely require hens to be slaughtered. During personal rituals, chicken is either used alive or killed. The feathers, claws, beaks of the chicken are used in various domestic rituals. A specific colour of chicken may be desired by the healer to enhance efficacy of the healing process. In a nutshell, human life is mystically tied up with that of other animals, but this serves the purpose of ensuring the wellbeing of community.

3.7 Diseases and Illnesses Treated by Traditional Medicine among the Basoga

Traditional medicine and healing in Busoga involves three things. These are the diagnosis of diseases and social challenges, the causes of the sickness as well as the attempt to cure, protect and counteract the sickness or problem. Bitimbito Kabaale summarizes the key roles of traditional healing when he states:

\textit{Abasagho b'ekisoga tukola ebintu nga bisatu; tulagula, twanonenkereza kubireta endwayire, twaidhandhaba abalwayire, ate era tuwha n'obulezi obukuma abantu n'ebintu byaibwe.} (Translation: We, traditional healers perform mainly three roles; we foretell, establish the causes of sickness and treat the sick and we also provide clients with protective medicine to make people and their property safe)\textsuperscript{131}

Bitimbito Kabaale’s argument reveals the specific concerns of traditional medicine. These include; mental and spiritual illness; physical-biological conditions of illness, as well as social illnesses; which are indeed the everyday life challenges that may be social, economic, and political in nature. Biological-physiological diseases largely consist of imbalances in the body system of an individual. Such diseases include cholera, malaria, dysentery, trachoma, sexually transmitted diseases, sleeping sickness, chicken pox, menstrual disorders, disability, leprosy, child related diseases, candidacies etc. Whereas the natural causation of such diseases is well known, the people in Busoga cannot rule out the spiritual-mystical causes of such diseases.

Mental-spiritual illnesses are those that cannot ordinarily present themselves as having a direct impact on the physiology of the victim. These conditions are thought to be caused by the contravention of rules of the spiritual realm of society. They bring about psycho-social

\textsuperscript{130} Interview with Isabirye Baligeya & Banuri Wairagala
\textsuperscript{131} Bitimbito Kabaale
imbalances. For example, madness (*eiraru*), epilepsy (*ensimbu*), attacks by evil spirits that make someone move naked, constant attempts to commit suicide etc.

Social illnesses include challenges such as business and employment failure, debt recovery, criminal charges; academic failure, poor harvests, and political contests. Traditional medicine is used to protect people’s homes and property. This is called ‘*Okuchinga*’. Traditional medicine used to bring good fortune, success, favour and promotion. The Basoga use traditional medicine to have their wishes in life fulfilled. For example, women in Busoga believe that traditional medicine can be used to win the love of their husbands or boyfriends. Traditional medicine is believed to make people perform extraordinary things. For example, application of traditional medicine can make one walk on fire, walk on thorns and other sharp objects without being harmed. Budhagali claims to use his spiritual power to put a mere bark cloth on the river Nile and sail on it to the other bank of the river. Such is the power of traditional medicine in Busoga that it is believed to enable some people to turn into animals, fly in the air like birds, as well interact with wild animals without harming them.

Buwaya (1976), discusses two categories of sicknesses among the Basoga, these are the localized sicknesses and those that are believed to have been brought to Busoga by foreigners. Any sicknesses for which there is no clear explanation and whose cure is not easily attained, is claimed to be coming from outside Busoga. On the other hand, localized diseases include impotence - (*obufiirwa*), infertility - (*obugumba*), madness - (*eiraru*), fits - (*ensimbu*), kwashiorkor - (*omusana*), dysentery - (*okwidukanaomusayi*), leprosy - *ebigenge*, and malaria - (*Omusudha*). Localised diseases are not considered life threatening if the patient gets to the proper traditional healer. The Basoga believe that localised sicknesses and diseases can be effectively handled by healers who live amongst them. In the past, other diseases, without adequate explanation, re believed to be imposed upon the Basoga through witchcraft - ‘*okuloga*’. Such diseases included sleeping sickness, syphilis and other such sexually transmitted diseases, trachoma, tuberculosis and HIV/Aids.

Further, because there was no clear distinction between the physical and spiritual, with the spiritual influencing the physical, a distinction between physiological-biological illnesses and mental-spiritual illnesses as well as social, economic and political challenges, is more imaginary.
than practical. What would be identified as a purely biological condition of illness would eventually turn out to be spiritual and therefore necessitating spiritual intervention. For example, whereas snake bites were very common in the rural settings with known herbal remedies for snake bites, the interventions ended up being spiritual as it was thought that the snake bite was a certain aggrieved spirit in dire need of sacrifice. In this case application of herbal remedies to such a victim was not the best alternative but appeasement of the spirit. There is protective medicine that people wear to ward off attacks by evil spirits. The use of ‘yilizi’, a protective charm worn around the waist and tied around the necks of children, is meant to protect people against certain illnesses and misfortunes.

Traditional medicine is used to help a barren woman (omugumba) conceive and to keep the unborn child safe till delivery. For barrenness, women’s interaction with traditional healers is more pronounced than with men. This is because women are solely blamed childlessness. The men cannot be abagumba (barren) in Busoga society. Scholarly works on social construction of infertility reveal a more skewed negative treatment of women than men in circumstances of barrenness. Women are always under pressure to conceive and give birth (Baloyi, 2017:1). There is a tendency to blame the woman for failed conception (Tabong & Adongo, 2013:2). There is quick judgment by some African males towards their wives when conception does not occur, and this happens even though there is no regular or normal sexual encounter between the wife and husband (Baloyi, 2017:2).

Women carry the blame and stigma of infertility within a marriage system as they suffer more socio-cultural and psychological distress than their husbands (Makoba, 2005:17). This further strain the relationship between the wife and husband let alone with the wider community. The infertile woman may be ridiculed and disrespected by her in-laws (Makoba, 2005:132-133; Tabong & Adongo, 2013:2). Traditional healers, therefore, become intervening variables in the search for a cure to the stigmatized barren woman. Among the educated and uneducated women alike, the belief in the ability of traditional healers to cure infertility is great. Whereas the uneducated women will straight away visit the traditional healers, the educated women are likely to visit both biomedical doctors and traditional healers concurrently. In Busoga society, just like in some other African societies studied by Greil, et.al (2010:151), wives are more likely to initiate treatment for infertility than husbands. Women seek remedies to barrenness from

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healers in secrecy of their husbands. Medicine for childlessness is used by women alone since there are strong beliefs that men cannot be infertile.

Since traditions change overtime, so are those related to treatment of infertility among the Basoga. It was initially a preserve of traditional birth attendants and female healers who provided treatment of infertility to fellow women. There are now a host of male healers, who claim to cure barrenness. Male healers’ entry into this previously female domain was because of the increasing numbers of women, seeking for treatment, hence becoming a financially lucrative venture. In the public media, quack male healers in Busoga have been reported, whose intention is to fleece the unsuspecting desperate women.138,139 These use trickery and manipulation to extort money and have sex with the desperate women.140 Crimes of fraud and rape by traditional healers have been described by the Uganda Police force as endemic, with women being the most victims.141 The efficacy of the treatment by male healers is doubted as they prescribe to sleep with the ‘barren’ women as a procedure of administering (inserting) the medicine in them.142 In Bugembe Town Council of Jinja district, a fake traditional healer called Mugenza Andrew Frank was arrested after several complaints by women in the area that each time they sought for his services, he hoodwinked them into sex.143 Another quack healer, named Sulait Mugoya, kidnapped, raped and incised a woman at his shrine in Mayuge district.144

Safina Nabirye (Ssenga wa Busoga), articulated how quack male healers are involved in the rape of women. Women are raped by traditional healers through what they term administration of medicine by the will of spirits.145 Such routine continues until such a number of children the woman wishes to have. Unfortunately, such ‘barren’ women are made to believe that they conceive by the ‘spiritual medicine’ inserted in them through sex with the healers. None the less, when such women get pregnant after their sexual encounters with the healers, it gives an

145 Nabirye Safina
indication that male infertility other than female infertility is the unbelieved fact as the cause of childlessness in marriage.

Traditional medicinal use continues thereafter conception. Herbs are used by the expectant mother to avoid miscarriage and premature births. At birth, herbal medicine is applied to the newborn and the mother. ‘Ekyogero’, a herbal concoction, is a mixture of several herbs prepared in a container for the newborn to be bathed in for several months. This medicine is intended to fight skin-related diseases. Ekyogero also has elements of herbs that ignite blessings and success upon the newborn. I have discussed in detail the functions and gendered nature of Ekyogero in chapter five of this thesis.

Medicine is applied onto the mother to heal any ruptures that she may have experienced during delivery. They are also given herbal medicines that improve blood regeneration and circulation. Medicine is used to make a child learn to walk very fast, whereupon herbs are smeared on his/her legs. The child can be taken to the short grasses with thick dew early in the morning. Morning dew is a common herbal remedy for children who tend to take longer time to walk. Whereas the perception is that the dew is medicinal in its real sense, it is also factual that the ice-cold grasses make the child to run from it, thus improving its motor function.

In the whole of a person’s adult life, there are social, economic and political challenges that require visiting a traditional healer. People are ever on the move, hence need protective medicine against accidents, and if it happens, bone setting is very useful. Fishermen use medicine to trap as much fish as they wish, yet they also use medicine to counteract weather changes and to avoid drowning. It is the responsibility of healers to establish the actual location where a dead body is stuck in the waters upon drowning. Farmers use medicine to ensure better harvests. Finding a suitable marriage partner also involves use of medicine at some stage. Medicine is used to win a person’s love and acceptance in marriage, yet there are medicines that are used to keep the marriage safe and long lasting, devoid of potential co-wives. At death and burial, medicine is used to make the spirits of the dead rest in peace without being disturbed by witchdoctors (abalogo, basezi) who might come after the dead body. In the past, though political rivalry and military incursions were rare among the multiplicity of states within Busoga, traditional medicine was necessary for one group to win military battles. All these are a demonstration that traditional medicine is part and parcel of the life of any Musoga.
3.8 Causes of Sicknesses and Ill-Being among the Basoga

Disease, sickness and misfortunes among the Basoga are considered supernatural experiences attributed to witchcraft, sorcery, spirits and magic; all of which have a religious connotation (Bukyanagandi, 1993:32). A scientific explanation given for the cause of disease and illness is not convincing until there is responsibility of some sort attributed to an individual. Basoga are preoccupied with establishing the cause of sickness before any remedies can be sought. This is the responsibility of the diviners, also known as balaguzi, baswezi, or mandwa (mediums). The other people who can do this are the Moslem experts called ‘BalaguziBaghalimu’.

Through spirit possession or reading verses from the Quran by diviners and diviner sheiks respectively, the cause and responsibility for the illness is sought.

In Busoga society, for any sickness and death recorded, there must be somebody who is held responsible. Sickness and death cannot happen suddenly and there are no ‘natural’ causes of sickness, including malaria, HIV/AIDS, and impotence. The effects of preoccupation with the ‘causer’ rather than dealing with the disease directly or mitigating its occurrence or spread have dire consequences on the individual and the community at large. For contagious diseases like skin rashes, also called ‘Wailindi’ in the Lusoga language is left to spread widely among the population. Busoga lost scores of people to HIV/AIDS in the 1980s and 1990s because locals believed that it was caused by witchcraft. Sexually transmitted diseases have continuously thrived among the local populace because they cannot seek for treatment believing that such diseases are the works of their detractors. Widow inheritance continued to be treasured because society believed that there was nothing like Aids but the works of evil neighbours. Due to such beliefs, the sick are left to succumb to sicknesses.

Kakaire Balimwikungu149 survived death about twenty-five years ago, when clan mates insisted on consulting their ancestral spirits, as to who was responsible for his loss of senses and mobility, yet the real cause was blood clots in the head/brain. A teenage boy succumbed to the poisonous snake bite as the Uncle spent hours consulting with spirits as to who was responsible for sending the snake. He died on his way to a modern medical facility. Another family that has had two accident victims, with a compound

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146Kakaire Balimwikungu
147Fr. Gonza Kayaga
148Samanya Hussein
149Interview dated 11th/4/2015, Mpande Village in Namutumba District
fractured femur was bothered for over two months, attempting to identify the ‘causer ‘other than taking the sick to either a traditional bone setter or a modern Orthopaedist.\textsuperscript{150}

The belief in establishing the causer of the illness robs the sick the opportunity to seek medical attention when the condition is still in a stage that can be controlled. Women and children are the major losers due to such beliefs. Decision making is the responsibility of men to seek for medical attention from specialized healers/doctors. Men are the ones who meet the costs of treatment for both their children and wives; except for diseases related to sexual promiscuity, in which case the wife may seek treatment in secrecy of her husband. Therefore, women’s inability to meet the costs of their treatment and that of their children, makes it almost mandatory that they cannot singularly take decisions as to where and when to seek for treatment. Busoga being a patriarchal society, where masculinity is celebrated over femininity, it feels socially accepted to wait for a man to take decision when his wife or children are sick. The idea that women are dependent and vulnerable reinforces this kind of health seeking behaviour. The preoccupation with establishing the causer of the illness is also rooted in masculine behaviour which promotes vengeance for crime committed against the male and his entire household, as a way of expressing power superiority among males. There are however changes in such decision making in health seeking behaviour due to education attainment among both women and men in society.

Instances when the sick abandon specialized treatment for serious illnesses like HIV/AIDS simply because traditional healers have convinced them that their conditions have been caused by their enemies are common. Even in circumstances when an employed person loses his job due to downsizing of the company, the Basoga would believe to be the work of witches or evil spirits leading to that person’s retrenchment. Nobody dies of old age. There must be somebody responsible for the death of a ‘centurion’. Thus, the Kisoga saying: ‘omufu tabulaku mulogo’, or ‘omufu tabulaku amwise’.\textsuperscript{151} This means that one cannot die without cause; they must have been bewitched. But the Basoga go to the extent of blaming the power of witchcraft for personal failures. Fr Gonza Kayaga\textsuperscript{152} explained that telling lies, committing adultery, theft by individuals is attributed to witchcraft hence the Kisoga saying, ‘aly’oti muloge, oba mulaame’, literary meaning ‘it is as though he or she was bewitched or cursed. This therefore, suggests the existence of an asymmetrical relationship between healing and

\textsuperscript{150} Mpala Robert, 38 years, Kisaasi Central Zone, Kampala. Interviewed 13\textsuperscript{th} June 2016
\textsuperscript{151} Edisa Namwase
\textsuperscript{152} Fr. Gonza Kayaga
The causes of sicknesses and ill-being among the Basoga include the following: witchcraft, sorcery, ancestral spirits and other such evil spirits, curses of older relatives, bad relationships with in-laws, pregnancy of mothers, failure to fulfil certain rituals etc. For purposes of understanding these phenomena, I discuss some of them in detail.

3.8.1 Witchcraft
This is the use of mystical powers for wicked purposes and is usually applied or practiced in secrecy. The motives of witchcraft are to cause harm, pain and kill the victim. The Lusoga word for witchcraft is Bulogo. Witchcraft takes mainly two forms. These are Basezi (Night dancers) and Balogo (Sorcerers). Although in everyday talk the two are used synonymously, technically there is a difference. A person who practices witchcraft is called a ‘mulogo’ - ‘witch’ (singular), and ‘balogo’ (plural). Therefore, all categories of witches are loosely called ‘Balogo’, the right word for sorcerers. There is, however, a difference between basezi and balogo in Busoga as we shall see later. Both men and women can be witches, but women are more likely to be categorised as such.

The Basezi are driven by the spirit of evil (ekitambo) to harm those around them. They practice their trade especially at home, in the compounds, homes and gardens of those they intend to harm or kill. Basezi are said to be the major cause of sickness and ill-being in communities. They behave rather oddly in the society. For example, they walk naked at night when undertaking their evil activities, dance wildly, and scare those who move at night, walk with their heads on the ground and the legs up in the air, and are earnestly annoyed with those who identify them in the dark as basezi. This may lead to the death of those who identify them. They are known to dig up corpses that have just been buried to eat them, and they use certain parts of dead bodies to mix with their medicine that they use to cause sickness upon those they hate.

The Balogo, on the other hand, are not driven by any mystical powers. These are just ill-intentioned individuals in society who do not wish to see others progress. This is because Bulogo is driven by hatred for someone, quarrelling and jealousy. The Basoga believe that Bulogo is practiced against those whom they hate. These may include people like adulterers, co-wives, thieves, step children and those who insult others rudely without sound reason. If one has a disagreement with another and he dies suddenly, or some unfortunate experience takes place in his family, the other would automatically be called mulogo - being held responsible for such a misfortune. Unlike the basezi, who invoke mystical powers the Balogo use poisonous medicine
to make others sick by putting it in food, water, clothes, bed, in the kitchen. It is common among co-wives to make others sick by concealing their harmful medicine in the gardens where their victims will go to dig and collect food. These kinds of activities can only be done by someone who knows you very well. This is the very reason why upon the death of someone in Busoga or sudden illness experienced by someone, the most immediate person held responsible is the neighbour or close relative. This is the reason for the Kisoga saying ‘anakwita tava wala’, meaning that he/she who will kill you does come from far away.153

The Basoga contend that balogo can send their poisonous medicine through objects that may be living or non-living. For example, a pigeon (engyibwa) is a well-known bird used by sorcerers in Busoga to take poisonous medicine to the homes of perceived enemies. And because of this, pigeons are rarely kept by Basoga. Snakes can also be used. This is the reason why a snake bite cannot be taken as an accident. Bulogo is attributed to be the cause of accidents among the Basoga. This is supposedly the reason why some people involved in the same motor accident may die yet others survive without any scratch.154 The sorcerers are also said to manipulate traditional medicinal power so that somebody is attacked by a wild animal. Bulogo or poisonous medicine can be employed by a sorcerer to kill one’s co-wives and their children. There are instances told of how a co-wife concealed poisonous medicine targeting her co-wife and instead herself or her own children became the victims and died.155 Several other forms of witchcraft were identified by interviewees. These include ‘rain stoppers’ (abachingaamadhi). Rain stoppers are believed to possess powers that can withhold rain for a long time. These are the first suspects when an area experiences a long dry spell. Ironically, there are circumstances when rain stoppers may be called upon to stop rain. This is in times of funeral or communal festivals, where community does not want interruption. Other witches include those who send hailstones, lightening etc.156

To some people, there is suspicion towards healers as the source of sickness. Later interviews I had with five respondents in mid-2017 revealed that there could be a connection between the activities of the healer and the witch. Kawanguzi Dan157 believes that because the business of healing has become monetized, healers can send spiritual forces or plant witchcraft in one’s home so that he/she could go to the healer’s place for healing in exchange for money.

153Banuri Wairagala
154Ali Wairagala
155Interviews with Fr. Gonza Kayaga, Edisa Namwase, Banuri Wairagala and Ali Wairagala
156ibid
157Kawanguzi Dan, Special Advisor to His Royal Highness the Chief of Bulamogi-Waako Wambuzi. Interviewed on the 5/6/2017 at Kampala.
According to Kakaire Balimwikungu, witchcraft is a reality in Busoga society, as there are several persons who are believed to die of unclear causes not easily explained by medical doctors.\textsuperscript{158}

To the ordinary mind the supposed difference between ‘mulogo’ –witch and musagho-healer is spurious. I sought to understand the difference between healers and witches and whether healers can also be a source of sickness. Interviews with Nabamba Budhagali\textsuperscript{159}, Nfuddu Isabiry,\textsuperscript{160} Kawuma Safina Nabirye\textsuperscript{161} and a client Kakaire Balimwikungu\textsuperscript{162} provided useful insights. Healers just like witches use ‘medicine’ (obulezi) to cure sicknesses and cause ill-being respectively among people. Obulezi meaning ‘herbs’ used by both could be in the form of ‘tree’ or ‘root’, translated as ‘omuti’ and ‘omuzzi’ respectively. Even when the healer or witch may have used other medicinal substances to promote wellbeing or suffering, the Basoga will refer to such medicine as ‘omuti’ or ‘omuzzi, especially if they do not use the general word of ‘obulezi. Statements used in reference to application of obulezi can refer to either witchcraft or healing. For example, when the Basoga say, ‘yamusimbira obulezi’, literary meaning ‘one applied medicine onto him or her’, could mean, on one hand that the medicine applied was for promotion of the other person’s health or his/her protection. On the other hand, the medicine could have been for destruction of the person upon whom it was applied.

Relatedly, the Kisoga statement ‘yamuwa obulezi’, literary meaning ‘he/she was given medicine’, takes both the positive attitude of healing medicine, if the context results in the person who was ‘given’ the medicine recovering from sickness or attaining something that brings good in his/her life. The statement also takes a negative side of witchcraft if the person who was affected by the applied medicine, experiences illness, distress and continuous challenging circumstances in his/her life. In this very context, the literal meaning of ‘giving medicine’, where the intention is known to the recipient is ‘healing’. In the context of witchcraft, the ‘giving (yamuwa) of medicine’ is not known to the victim. This is in line with the conceptual analysis I made in chapter one, where I illustrated that witchcraft is usually performed in secrecy, quite oblivious of the victim.

Whereas, there exists a thin line between healing and witchcraft among the Basoga, there are two general indicators of difference; the intention of the medicine and the effect that the

\textsuperscript{158}Kakaire Balimwikungu, Interviewed on 29/5/2017
\textsuperscript{159}Nabamba Budhagali, Diviner, Diviner, Budhagali Village, Jinja district. Interviewed on 8/6/2017
\textsuperscript{160}Nfuddu Isabiry, diviner, Kimaka, Jinja district. Interviewed on 10/6/2017
\textsuperscript{161}Kawuma Safina Nabirye also known as Ssenga wa Busoga, Herbalist, Bugembe, Jinja district. Interviewed on 5/6/2017
\textsuperscript{162}Kakaire Balimwikungu, Farmer, Mpande Village, Namutumba district, Interviewed on 29/5/2017
medicine brings upon the patient’s or society wellbeing. If the intention is to cause harm, unhappiness and ill-being, resulting into sickness and or death, then the use of obulezi is witchcraft. But if the intention of the medicine is to restore well being and do away with ill being, then the use of obulezi is clearly healing. Busoga healers take on the identity of witches in circumstances when the patient dies, in the midst of healing. This is because death is associated with witches and not healers. Therefore, as Ashforth (2005:212) puts it, a distinction between healing and witchcraft is essentially amoral one, based on interpretations of the motives of persons using the obulezi, and the effects that the supernatural medicine brings through application of the obulezi.

The Basoga make exceptions to the above distinctions between witchcraft and healing. For example, they use obulezi to protect life and property against unauthorized agents like thieves and murderers (locally called ‘okuchinga’). Theft or attempt to steal such ‘medicine protected property’ may result in untold suffering of the thief including death. The community celebrates along with the person (who in the essential meaning of ‘witch’, as one who uses medicine to cause harm or destruction), whowould have used protective medicine to cause death of a thief. Society further tolerates a desperate husband who uses traditional medicine to make his adulterous wife ‘get stuck’ having sex (okulemeramu) with her lover. Ironically, the pain that the adulterous couple experience because of ‘getting stuck’ during sex is not attributed to the ‘evil power’ of the medicine used but rather the ‘effective power’ of the protective medicine used by the desperate husband.

Another exception when ‘witchcraft’ is tolerated among the Basoga is the ‘sending back’ of obulezi (medicine)-but this time technically called ‘eirogo’ to the witch. Eirogo is the correct word for ‘medicine’ when used for witchcraft intentions. All these indicate that a person can take on a dual identity of healer and witch. It is therefore; clear that the Basoga tolerate those acts of witchcraft which serve as deterrence to what society considers ‘deviant behaviour’. These exceptions in witchcraft beliefs among the Basoga augments Peter Pels theory that rather than looking at witchcraft as only destructive, it should as well be a social system that is used to regulate society (Pels, 2003: 1-38). The contradicting beliefs in witchcraft cast doubt as to whether, these practices are indeed witchcraft, or they seem to be as Africans try to cope with the

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163 This condition is associated with several myths and beliefs among local Basoga. Modern science calls it ‘penis captivus’, a condition when the penis in the vagina becomes increasingly engorged while the muscles of the woman’s pelvic floor contract at orgasm, making the penis to become stuck. Literally, the genitals of those having sex become inseparable, leading to pain and anxiety. Basoga people believe that this condition can happen when desperate husbands and wives wishing to arrest their partners red handed in actions of adultery use traditional medicine to make their cheating partners get stuck with their lovers during sex. Locals, especially the uneducated believe in the efficacy of traditional medicine to make this condition happen.
European’s definition of witches. The European invention of witchcraft Geschiere (1998:831) presents distorting translations of local notions which often have much broader and more ambivalent meanings.

3.8.2 Spirits
Spirits are known to cause sickness as well as bring problems to people. The Basoga believe that for many unexplained deaths and diseases, the spirits are the primary cause. Such spirits include: ancestral spirits, spirts of the dead, wild spirits, fetishes, and nature spirits. Failure to sacrifice and appease spirits can ignite their anger upon humanity. Neglect of elders during their life time, leading to death and failure to accord them decent burial is believed to bring reprisals from the spirit world. The Basoga believe that the spirit of the dead, killed innocently can revenge upon those who killed the person. Sickness can also come from wandering spirits. These are believed to cause sickness to those who disturb their habitat. Wandering spirits rest under large trees and mountains or in cool vegetation. The sickness caused by these spirits can be experienced by members of the extended family other than the one who has disturbed their habitat. Other spirits like the ‘Amaghembe’ (fetishes) are used by professional sorcerers to cause sickness. Amaghembe are aggressive spirits, and are believed to be militant. They can bring untold destruction to households. These are believed to have been imported from Buganda and act as employees of Busoga ‘emizimu’. Certain diseases such as meningitis, madness (eiraru), deafness are associated with spirits. These spirits demand sacrifices and rituals to be performed by those who have been affected, to withhold their anger. The diviners or medicine men are consulted to talk to the spirits and ask them what should be done to take away the disease and misfortune.

3.8.3 Curses
This is another cause of sickness and ill-being among the Basoga. The common word for curse is ‘obulame’ or ‘bukolimire’ (as a noun), ‘okulama’ or (as a verb). Cursing (okukolima, okukolimira) is applied when somebody out of anger, disgust or mere intolerance speaks or utters words of misfortune against somebody else. It is mainly the uncles (ba’kojja) and aunts (Ssenga), who are endowed with the power to curse. Other older people who may not even be related to the victim have power to curse. Fathers and mothers are believed to use this kind of power against their children only in rare circumstances. But they can do it against children of their sisters and

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164Patrick Wairagala Mandwa
brothers as this position puts them in the category of ‘Ssonga’ and ‘kojja’. Their words can cause sickness, death, barrenness, miscarriages and other such misfortunes to those who provoke them into anger. Suffering because of a curse (bulame, bukolimire) can be done away through reconciliation with the offended elder and an appeasement ceremony thereby organized. The offended person is believed to have power to say certain words to reverse the sickness and suffering of the victim. It should be noted that unlike witchcraft and sorcery that involve the use of poisonous medicine to cause sickness and disease, cursing involves the use of words only. Sometimes it involves the offended person to simply say the word ‘khale’, loosely translated negatively as “okay”, with the rest of the bad wishes of the offended person said in silence.

Cursing is not applicable between people of the same status and age group. An aunt, for example, has no powers to curse a sister; a brother has no power to curse a brother. Romane (2000:139) argues from another African society perspective, the Kikuyu of Kenya, that curses are believed to affect the whole lineage or even generations of people to come in the family. Technically, cursing is a form of witchcraft though this is not accepted by many Basoga. Non-acceptance of cursing as witchcraft is based on the rationale for cursing as deterrence to offending elders. The Basoga justify cursing as the ‘cursed’ is blamed for having brought it upon himself/herself for failure to respect elders or perform roles that were expected of him/her. Those who curse are therefore not ostracized by community but instead plead with them to undo the curses. Unlike witches, who are tormented and even killed, those known to have cursed anybody need to be appeased to reverse the situation. This attitude is premised on society thinking that people don’t curse without a valid reason. Something very serious must have happened and the culprit must have failed to make amends.

3.8.4 Failure to Observe Certain Taboos and Rituals

Breach or non-observance of taboos and rituals can cause social illness among the Basoga. The Basoga, for example, believe that Parkinson’s disease (obuko) is a sickness associated with close contact between a man and his mother in law. This manifests in swollen cheeks and continuous trembling by the victims. One may also develop pale skin. A man and his mother-in-law are prohibited from handshaking, sleeping in the same house, using the same basins, latrines and

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165 Interviews with Fr. Gonza Kayaga, Edisa Namwase, Banuri Wairagala and Ali Wairagala
166 Kakaire Balimwikungu
167 Fr. Gonza Kayaga, Busoga Cultural Research Centre, Jinja. Interviewed on 7/6/2017
168 Cultural Research Center, (2003), Witchcraft, Divination and Healing among the Basoga, Marianum Publishing Company Ltd, Kisubi. pp.48
169 Eyazika Isabirye, 57 years, Herbalist, Buyanga, Namutumba district. Interviewed on 20th April 2015
sharing many other items. It is a taboo for one to have sexual intercourse with in-laws, especially the mother-in-law. A son in law and his mother in law are not to look at each other directly, lest they will be plagued with ‘Obuko’. The same taboo applies to both the daughter in law and her father in law. If a breach occurs, one is expected to perform some rituals and sacrifices to forestall this sickness.

Neglect of performance of rituals connected with the birth of twins is believed to cause sickness and untold suffering among family members. The mother may experience miscarriages in subsequent pregnancies. Twins are believed to have special spirits that need to be appeased all the time by preparing special baskets for them. These are placed in a special place in the house where they will dwell. Failure to do this may result in the physical twins not being able to live for long and family members experiencing misfortunes; impotence, as well as loss of skin pigment. Failure to perform the last funeral rites and installation of an heir can be dangerous for a family, as this may ignite the anger of the spirits of the dead. I have been in contact with one man, the eldest in a family, who believes that his failure in life, with many incomplete projects is a result of his failure to perform funeral rituals for his late father.  

3.8.5 Pregnancy of Mothers

Many people believe that a mother’s pregnancy can cause sickness to her children or those of her sisters, especially the youngest. They believe that a child becomes sick during the early months of its mother’s pregnancy. The Lusoga name for this sickness is ‘eryuuse’, which is ‘malnutrition’. The young child manifests the following characteristics including, swollen cheeks; hair loss on the head, protruding stomach and the child becomes emaciated. The Basoga believe that eryuuse is caused by several issues including witchcraft from co-wives, who may be barren, and therefore envious of the fertile woman. The barren co-wives are believed to send evil spirits that drain blood from the young children, so that they can die. Apart from the cultural beliefs held by the Basoga as explanations for ‘eryuuse’, it is a tendency for mothers to discontinue breastfeeding their babies when they become pregnant. Some of the mothers conceive before the babies reach the age of six months. Such children become malnourished due to inadequate milk, yet the families are usually too poor to afford supplemental nutritious foodstuffs. Eryuuse is common among children of poor and rural families. Eryuuseis treated with herbal medicines that are given to the child to drink and bathe. However, the Basoga believe that this is not a

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170 Yasin Nabogho, 44 years, Painter, Bulagala Village, Namutumba district. Interviewed on 30/04/2015
171 Kirangi Monic and Safina Nabirye
172 ibid
serious sickness, and that it can disappear without any intervention as the mother’s pregnancy progresses to maturity.

3.9 Taboos observed in Traditional Healing Practice in Busoga

There is a code of conduct expected to be followed by both healers and their clients. The expected behaviour is to be adhered to lest the medicine will be ineffective. It should be noted that although there are generalized taboos that all healers and patients are supposed to observe, there are also specific taboos for specific categories of traditional healers. With increasing mixture of Kisoga culture with other external influences, some of these taboos are fading and not taken seriously.

Some of the taboos include the following: Medicine is not to be collected very early in the morning when the dew is still on the plants, nor during or immediately after it had rained; the patient should not thank the healer until he or she has been cured. Before a healer gives medicine to a patient, the patient has to pay some money known as ‘ekavundha ensiko’, meaning ‘paving the way into the bush’.

It is believed that failure to pay this money can ignite the disease after the healing process. Just in case one did not have the ‘ekavundha nsiko’ with them at the time of seeking treatment, they are expected to make a commitment to pay later.

When one tells another individual or a student in the healing tradition the name of the traditional medicine commonly referred to as ‘ekiti or omuti or omuzzi’, the student should not utter it in affirmation as this may cause him to forget it. Other taboos concerning traditional medicine are that the client is not supposed to look behind when leaving the healing place.

This taboo is observed among healers who use a combination of herbs and spiritual powers. Women are restricted from visiting certain places, especially islands in Lake Victoria. These islands are host to valuable flora and fauna used to process medicinal herbs. It is taboo for women to visit and enter the once thick government forest reserve in Bunya (now Mayuge district) on the pretext that spirits of the forest reserve forbid women from visiting the forest.

Taboos such as those mentioned above are used to exclude women from lucrative activities in society. Women are socialized to accept and observe them as the ideal for societal function. They however put females at a disadvantage, as women become victims of subtle discrimination in traditional medicinal practice. Consequently, male healers are put in a better position to exploit herbal resources from this forest. Female healers are reduced to traditional medicine retailers and retailers.

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173 ibid
174 Ibid.
175 Nfuddu Isabirye
their ability to explore and discover new herbal remedies from such natural environment is curtailed by taboos.

Adultery and sex with your own partner disallows the healer from dispensing the medicine, except after thorough cleansing of body. Failure to observe this taboo makes the medicine ineffective. The taboo is intended to ensure purity of medicines dispensed and kept in houses that are considered to be very holy as the spirits also dwell in them. Adultery and/or sex profane the spirits. I have made a detailed discussion of sex and menstruation taboos in chapter five. Taboos associated with traditional healing are part and parcel of the wider taboo system that governs other activities in society. The taboo system is gendered in a way that there are restrictions imposed on either gender in the process of provision and access to healing. These restrictions have obvious implications on the health and wellbeing of men and women. Taboos do not have a direct effect on the efficacy of healing, but they are used to ensure that both the healers and clients conform to the expected norms and values of society, which ultimately define their identity as a unique people.

Relatedly, observance of certain taboos during the healing process is no different from the restrictions that modern medical doctors impose on their clients, to make the treatment effective. The difference between these restrictions is that the former attaches a spiritual interpretation to the taboos. Prohibition of pork and other such categories of fatty foods, on the pretext that the spirits forbid them, could in reality be that the efficacy of traditional medicine provided can be undermined by the accumulation of fats in the body; in the same way, a modern medical doctor is likely to impose the same restrictions.

Some healers impose restrictions upon their clients regarding sharing food and household items. The sick individual must use separate saucepans, plates, basin, and cups. This is common among people receiving spiritual healing. To the healers, this taboo is imposed when the evil spirit, causing the illness has to be restricted from having contact with the rest of the individuals in the family who are not yet sick. It is, however, true that some healers use taboos to manipulate the minds of the sick to prove that they are more powerful and efficient, and therefore over-service their clients by imposing irrelevant restrictions. Restricting interaction between the sick and healthy members could be a realisation that the sickness being treated is a contagious one, which should require isolation of the sick individual from those who are well but not a need to curtail the supposed power of the ‘spirit’.

176 Patrick Wairagala Mandwa
3.10 Dispensing Traditional Medicine and Healing Among the Basoga

There are different methods used in healing, depending on the nature of sickness. The methods of dispensing traditional medicine include the following among others: cleansing - *okwambulula*, incision of medicine - *Okusandaga*, fumigating - *okunioteza*, arresting evil spirits - *okukugemakumizimu emibi*, drinking medicine - *okunhwa obulezi*, sending away the disease - *okusindika ewalabulwayire*, resurrecting hidden witchcraft - *okutolagho eirogo*, setting bones - *Okuyunga amagumba*, bleeding - *okulumika*.

3.10.1 Dispensing Herbs

This is the basic treatment provided by healers in Busoga. Almost every healer and patient are used to this mode of treatment. Provision of herbs may be in various forms, such as mixing with water, smearing the patient’s body or putting the herbs in a specific place where the healer directs the patient. Herbs are believed to have ingredients that treat several diseases. Spirits usually direct which herbs to be given to the patient. However, in the case of pure herbalists (*abayigha b’emiti*) who do not use divination; have mastered the herbs that effectively treat specific conditions. These do not require consulting any spirit in the prescription and dispensation of the herbs to the patient.

3.10.2 Cleansing (*okwambulula, okwogolola*)

This is used when the patient/client has to be cleansed of bad luck or witchcraft - *eirogo*, as the source of sickness. A ritual bath is prepared in a specially made basin popularly known as ‘ekyogo’. The *ekyogo* is constructed from banana leaves into which herbal medicine is prepared for the patient to bathe. This ritual bath is usually done far away from the home. A patient cannot take a ritual bath in the communal bathroom. They may for example be required to go and bathe at the crossroads and usually at night. They may also be required to go and bathe deep in the bush or on top of a mountain/rock nearby. Sometimes, depending on the type of traditional healer, sacrifices accompany the cleansing. Sacrificial accompaniments are common with diviners and other such spiritualists. Pure herbalists may not require the client to make any sacrifices for complete healing to take place. Blood of the animal sacrificed may be mixed in the ‘ekyogo’ for the patient to bathe. It should also be noted that in some cases, it is the responsibility of the healer to bathe the patient. But many of the healers whom I visited insist that a female client has to be bathed by another woman. That in circumstances where there is no other woman

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177 Kawuma Safina Nabirye
around, the healer gives strict instructions to the female client regarding how she is supposed to bathe with the accompanying statements she has to make in his absence. In the past cleansing was widely used in circumstances where there were skin related diseases that the patient exhibited. The form and method of cleansing also helped to ensure that other people within the area do not become afflicted with the contagious disease. The healers explained that taking ritual baths at the crossroads at night was to ensure that the bad spirits could be left there to possess another person. The cleansed person is thus healed and enjoys a problem-free life.

3.10.3 Incision of Medicine (Okusandaga obulezi)
Incising is yet another method of treating certain diseases as well as dealing with evil forces among Basoga. Incision is done by a healer on the patient’s body. The healer rubs herbal medicine into the cuts so that it enters the blood stream. These incisions are usually made on the hands, legs, forehead etc. Incising is also one way of giving protective medicine to the individual against impending dangers that may ruin one’s health. There are, however, some healers who vehemently argue against incision as a way of treating illness among the Basoga.

Whereas incision works as described above, it has another purpose. Through incision of herbs, traditional healing powers can be transmitted from one person to another. This is the usual form of transferring power and knowledge of bone setting among the Basoga. The intending bone setter is incised on the wrists and herbal medicine rubbed into the cuts. There is also incision of a special nature where a cut is made into the sick person for drawing blood from him as a form of treatment. This is common when one has suffered snakebite. Basoga traditional healers, though not educated in western medicine, knew that the snake’s venom would be counteracted if a cut was made where it bit the victim to let the toxic poisonous blood flow out of the victim’s body before it spread. In addition, after bleeding the person, herbal medicine was put in the place where the incisions had been made.

3.10.4 Fumigating - ‘okunioteza obulezi’
Healers in Busoga prescribe certain herbs to their clients for fumigating (kunioteza). Such herbal medicine is usually dried. The medicine is put on a potsherd and lit with fire. This involves the patient sitting in front of the burning herbs so that the smoke from the potsherd wafts over him/her. Sometimes herbs are burnt somewhere at the corner of the house of the patient without the patient seated nearby. Okuniotezais popularly applied in instances where and when the

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178 Interviews with Patrick Wairagala Mandwa, Nabamba Budhagali & Kawuma Safina Nabirye
179 Ibid.Interviews with Patrick Wairagala, Nabamba Budhagali, Safina Nabirye
patient is being disturbed by evil spirits. It is also applied when the person is thought to have bad luck. The burnt herbs are believed to produce the smoke that drives away evil spirits. Several times, ‘okunioteza’ is accompanied by statements that invoke the spirits to leave the person so that he/she lives in peace and attains his hearts desires.

3.10.5 Healing by unearthing hidden or planted witchcraft

Healing can be achieved by unearthing witchcraft that may have been planted in the victims’ compound or house. Once such evidence of witchcraft has been unearthed and taken away or burnt, the patient regains his life and the sickness immediately disappears. Unearthing witchcraft cannot be done by anybody. The services of a traditional healer are thought to undo what was planted by the witches. Using his/her power, the spirits are invoked to identify where the bad medicine was planted. Witchcraft is unearthed either by use of spirits, use of herbs and or a combination of the two. Sometimes, herbs may be used only to counteract the power of the witchcraft, and it is rendered powerless from causing any further harm to the victim. In this case the healer also provides protective medicine to the victim.

3.10.6 Bone setting - ‘Okuyunga amagumba’

Busoga society has the uniqueness of having a specialized group of traditional healers called bone setters. These are commonly referred to as ‘abayunzi b’amagumba’ (plural) and omuyunzi w’amagumba (singular) literally meaning ‘one who joins fractured bones together’. These ‘abayigha’ for bones are so specialized that they do not get involved in other healing activities. Their trade is to help people who have suffered fractures to attain normalcy. Some bone setters in Busoga claim that they are born with the innate ability to perform this traditional medical practice. Others receive the power and knowledge from established bone setters. The latter is achieved by having herbs incised into their bodies especially their hands and palms, that they use to set the fractured bones. Other traditional healers that are involved in divination and herbalism have the power and ability to perform bone setting. However, the typical bone setter in Busoga looks very ordinary, does not have a specialized work place and does not have to invoke any spirits during work.

There is a category of bone setters who claim to heal a broken bone without the physical presence of the patient. They need only to meet the client once and then treat the patient remotely. All they need is to agree on the time the treatment. At the agreed time, the bone setter uses a banana plant (ekigogo) that he twists and massage, as though it is the actual affected part of
the patient. At this time the patient feels a lot of pain. This category of bone setters is said to have spirits that are invoked to conduct bone setting.

3.10.7 Arresting evil spirits - ‘okugema emizimu emibi’

It is a well-known belief that a person experiences life challenges due to evil spirits. These evil spirits are thought to be responsible for person’s misfortunes, bad luck, frequent sicknesses among his/her children, lack of money, impotence as well as failure to be progressive in life. Spirits like ‘ebiteega’ and ‘Amaghembe’ are thought to be responsible for such unhealthy incidences. To bring about good health, such spirits have to be arrested and taken captive by the greater good spirits. Such bad spirits are enticed to make their presence by the diviner using ‘ensaasi’, whereupon they can be captured from the ill person. This is accompanied by the burning of herbs also known as ‘okunioteza’, the intention being to either scare the bad spirits away from the person, or appease the same spirits into submission.

3.11 Conclusion

As Romane (2000:141) observes, among the Kikuyu of Kenya, a Bantu group akin to the Basoga, healing is perceived as a process of bringing someone to good health, and to commune with the community and with the ancestors. Healing helps to strengthen the communion between the living and the living dead. With healing, what has gone wrong is corrected. To the Basoga, healing is therefore the route to attaining humanness in its fullest sense.

Busoga society ideologies on healing are not static. Though they follow the long-established principles and norms, they are adaptable and flexible to accommodate the present generation. The healing traditions are ever evolving and engaging with the tenets of modern society. The needs and challenges that necessitate consulting a traditional healer have since evolved to include remedies that can secure individuals visas to visit and work in the Western world. Scientific advancement and modernity dictates that herbs are well packed and labelled to match the current trends yet retaining both the cultural and medicinal values that have been associated with the very traditional medicines since time immemorial. Traditional perspectives on the character of healers have since evolved from those living in ramshackle grass thatched houses to well ventilated shrines, yet they continue to undertake the same diagnosis and treatment using their local herbs as well as consulting their ancestral spirits. Some of the factors which are responsible for these changes in the healing traditions of the Basoga are globalisation, education and colonialism. The moral consciousness reflected in the solidarity exercised by the
people of Busoga as a form of social capital is waning. Today this spirit of solidarity which was a safety net against ill-being is threatened by modern capitalistic practices that are rigorously influencing many parts of the world. The capitalistic practices are packaged in knowledge systems, technology, financial investments and education. These have been sold much more effectively through colonialism. The colonial period of about one hundred years that Uganda experienced brought both opportunities and challenges to the political, socio-economic, religious and cultural fabric of society. Traditional healing was one of those social fabrics that became affected by colonialism and its associated activities.