

Somali Traditional Healers: Role and Status

ABDULLAHI MOHAMED AHMED

Somali National University - Mogadishu

More than half of the Somali population live in rural areas and refer their health problems to traditional healers. In some areas where the two medicines coexist, people may prefer the traditional system because of their belief and the satisfaction they gain from it.

The Somalis have their own concepts of the causes and curing of diseases. Like other African societies, the ancestors play a great role in the lives of the individuals. Still many diseases and natural calamities are attributed to not satisfying the ancestors enough. Moreover, Somali had contacts with Asian countries, like the Arabs, Indians and Persians, from which they imported healing systems.

Some causes of disease in Somalia are considered to be evil eye, envy, sin or a mistake against someone in the society, or super natural causes such as spirits or Jinni.

The Islamic religion arrived in Somalia with its own concepts of disease and therapy which has intermingled with the pre-islamic concepts.

In this communication, we will look over the healing systems, types of healers and their roles in the society.

Types of Healing Systems

There are different types of healing systems that can be categorized as follows:

1. *Cauterization:*

Nearly all Somalis are cauterized either in their childhood or as adults. As it is well known, the Somalis believe that « disease and fire can not stay together in the same place ». The diseases that are always burned are hepatitis, facial paralysis, parotitis and rachitism. The instruments commonly used for cauterization are a piece of wood, a piece of palm or sometimes nails.

2. *Traditional Bone-setting:*

The bone-setting is the most advanced traditional healing system. They cure both simple and complex fractures using very elementary materials like wood and the cortex of certain plants. Many people prefer traditional bone-setting because of the simpler immobilization and the periodic controls and massages of the fractured zone. During the convalescence, the patients are adviced to sexual abstinence and to certain food.

3. Scarification:

Scarification is performing superficial cuts to draw out the spoiled blood from the body. They retain that the sedentary life brings about the formation of spoiled blood stored in certain parts of the body, especially the joints.

Another method of blood-letting is « *toobin* ». A piece of cloth is burned in a cow's horn and suddenly attached to the body so that it can create vacuum and suck more blood. After some minutes, the horn is removed, small cuts are practiced and the « spoiled » blood is sucked. Many children are victims of scarification for different disorders such as diarrhea and delay of deambulation.

4. Traditional Surgery:

Using very simple instruments, they sometimes perform difficult operations. They sterilize their instruments with fire. The common operations are the frenectomy, tonsillectomy.

5. Exorcism and Magical rites:

Exorcistic rites differ with the life pattern of the people. The nomads have *zars* that do not need drums or other heavy instruments because of their continuous movements from a place to another in search of water and grazing lands. On the other hand, the farmers and the fishermen are settled people and they can have rites that may need big drums, traditional guitars and different metals for producing noises.

Some of the rites have spread from their place of origin to the whole country like the *Mingis* from Bari region, while others are still confined in their original places like the *Anyagow* in the Gosha along the Juba River. This phenomenon is the result of the continuous immigration of nomads and fishermen into the inter-river areas bringing with them their cultures.

Some of the magical rites practiced in Somalia are:

- *Mingis*
- *Boorane*
- *Wadaaddo (Ardooyin)*
- *Saar Lugeed*
- *Saar Mooye*
- *Baar Cadde*
- *Nuumbi*
- *Xayaat*
- *Anyagow*
- *Bebbe*
- *Barkiin (Baacalwaan)*

6. Medicinal Plants:

Use of medicinal plants is common all over the country. Healers have herbal remedies for all disorders. The plants used are mostly local, but sometimes imported from abroad. Herbal medicine is well developed and heartily believed in the inter-river areas.

Until now, we have registered about 500 plants used in Somali traditional medicine of which about 200 are botanically classified. Testing for the pharmacological activities of some plants is in progress.

7. Religion (Quran):

All Somalis believe that the Quran cures disease and this comes from the fact that the Quran by itself says that it has been revealed to cure Moslems. All psychiatric disorders are initially treated with the Quran and later people try

hospitals. Even in physical diseases such as fractures, the medical therapy is integrated with the Quran.

Religious therapy is common even in hospitals. In the afternoon, visitors read verses of the Quran to the patients. Sometimes, the family of the patient invites a group of Sheikhs into the hospital to read the Quran to the sick. Sometimes, permission is requested to take the patient home to read long verses of the Quran and make animal sacrifices.

Traditional Healers

The above mentioned healing systems are practiced by different healers. Sometimes a healer may practice different systems.

The different healers are as follows:

1. *Sancoole (practitioners):*

They are able to conduct different operations like surgery, cauterization, scarification, blood-letting, extraction of teeth from children etc. They generally study this *sanca* (techniques) from their parents. Some of them have small knowledge of herbal medicine like laxatives and herbs for healing wounds.

2. *Astrologists and Faallow:*

Astrologists have certain knowledge of the « stars ». They are generally consulted during chronic disorders. *Faallow* is a person who diagnoses diseases by making special signs on clean earth and from the figures that come out, he reads the causes and sometimes the therapy of the disease.

The use of playing cards, throwing shells and reading the bottom of a cup of coffee are all increasing as methods in diagnosing diseases.

3. *Herbalists:*

The herbalists have good knowledge of the local and imported plants used as remedies. Herbalists along the rivers have more knowledge of plants than the nomads.

4. *Baxaar:*

Baxaar is a herbalist who can prevent harmful animals in the river. Every village along the river has its own *Baxaar* who prevents the villagers and their animals from crocodiles. Moreover, he manages the boats for crossing the river.

5. *Exorcists:*

The exorcists differ according to the type of *zar* they practice. For instance, the master of *mingis* is called Calaqad, while in the case of *Boorane* he/she is called Macallin or teacher.

They cure patients possessed by spirits (Jinni, Zar) with traditional dances and animal sacrifices.

6. *Religious healers:*

They cure with the Quran in different ways:

a) by reading the Quran in front of the patient and blowing it on him

b) *Tahliil* which can be prepared in two ways:

i) by writing verses of the Quran on a plate or a board, washing with water and giving the solution to the patient. The ink is commonly saffron solution or milk blackened with charcoal.

ii) by reading the verses of the Quran and blowing directly to the water.

c) Amulet: Some verses of the Quran are written on a piece of paper and

protected with leather or copper plate. Amulets are hung on the neck, arm, leg or hips. There are other types of amulets prepared by herbalist, *Baxaar* or others. Instead of the Quran, they use plants or other materials like animal nails or beads. This type of amulets is used for preventing evil eyes.

The religious healers claim to have supernatural powers for understanding the disease very quickly. Some of the them have *tibb* books, imported from Arabian and oriental countries, written in Arabic. They ask their patients the name, mothers name, date and day of birth, they make calculations and find out the *burji* (horoscope). Then, they consult with their books and find out the cause and the therapy which is frequently the Quran and natural products imported from Arabian and Oriental countries (Abdullahi M. Ahmed 1979).

Besides the above mentioned healers, there are charlatans who make different tricks. Some pretend to pick out larvae from the nose (in case of allergic rhinitis), or from the ear in case of purulent otitis. Others make very superficial cuts with razor blades on the abdomen to suck out evil-eyed food in case of epigastric pain.

Training of Healers

Traditional healers are selected in different ways. In Somalia, most frequently, parents pass their knowledge to their children. If someone wants to learn the art from another healer, it is possible but it requires a very hard internship and obedience to the teacher. We still see the trainings of three traditional healers, namely a *Baxaar*, a *Sheikh* and a *Calaqad*.

1. *Baxaar Mohamed*.

He was born at a village near Marka. His father, grandfather and grandmother were all healers. At the age of 10 he was sent to Koranic school. After one year, he refused to continue the school, claiming that he wanted to study plants. But his parents refused because he was very young to keep plants' secrets.

Dissatisfied with his parents, Mohamed fled to Kaytoy near Jilib along the Juba River where he met Mayow, his grandmother's brother. Mayow entrusted his grandson to the hands of *Baxaar Nasiis Yaasiin* who firstly tested Mohamed's knowledge about the plants.

Mohamed and a guide were sent to the forest to collect plants. But before sending him, a cock was sacrificed to prevent him from the harm of the Jinni, wood, snakes and the wild animals in the forest. The guide taught him the conditions for collecting medicinal plants. He was ordered to keep away his shadow from the plant to be collected, throw some sand on it and recite the ancestors, who had taught them the plants. When these conditions are met, the plants can be collected without any fear from its spirits, and its therapeutic effects will be complete.

In that evening *yuunge* (a ceremony in which a cock is sacrificed and porridge is prepared) was performed. *Pampa* (porridge fermented for two days) and *dha-naanto* (unripe maize ear fermented for a week) were put in a big *leebo* (a traditional recipient made of red clay).

All ate the *Yuunge* and drank *Pampa* and *Dhanaanto* from the *Leebo*. Mohamed refers that the minds of all became perfect. After this drink one becomes proud and feels that no one can harm him.

The same night, he was vaccinated on different parts of the body. Small cuts were made and a powdered plant (*Mafuumbo*) was put into the cuts. The vaccinated areas are the big joints, abdomen, head and the back. The vaccinations help

- not to be afraid of anyone,
- not to remember parents, so that one can devote himself to plants only,
- to have confidence in the teacher,
- to keep the art of healing very secret.

From that night, Mohamed was one of the students of the *Baxaar*. He used to help the teacher in the farm and passed many difficulties and trials. He studied the medicinal plants very carefully and he learned how to deal with the animals in the river.

After 13 years of training, a great feast was organized by the teacher. As before, *yuunge*, *paampa* and *dhannanto* were prepared. The great ceremony was concluded by announcing that Mohamed was a *baxaar* and as recognition he was given a necklace and a horn. Baxaar Mohamed returned back to his family and became a famous baxaar of his village.

2. Sheikh Aden.

He was born at a village in the Western Somaliland. He went to Koranic school and helped his father. One day he decided to abandon his father in search of advanced religious studies, but his father requested him not to do so while he was alive. This request of the father affected him and he decided to stay with his old father until his death.

At last the father died and Sheikh Aden buried him. He sacrificed animals on the tomb of his father.

At the age of 21, he went to Mogadishu where he met Sheikh Mohamed Farah who became his teacher. Later, he moved with his teacher to El Bur of Galgadud Region.

Aden became one of the *xer* (students) and he refers that he worked for the teacher very hard. He collected water and wood for the whole camp, served all the students and at night, participated in studying sessions. He used to accompany the teacher when coming to Mogadishu.

On one trip, the teacher and many students came to Mogadishu. The teacher organized a great ceremony in which he invited all the famous Sheikhs of the city and many government senior officials. No one knew the purpose of the ceremony. In one corner, there was a decorated empty chair.

After reading some verses of the Quran, the teacher, unexpectedly, ordered Sheikh Aden to sit on the chair. The teacher announced that Sheikh Aden was his representative in Mogadishu.

After 13 years of training, Sheikh Aden sat on the chair and still represents his teacher, leading the largest religious therapeutic community in Mogadishu.

3. Calaqad Isa.

He was born in the Bari Region. His father and grandfather were very famous *Calaqad* in that region where the *Mingis* originated. From childhood, he used to help his father when curing patients. At the age of 14, Isa was possessed by the spirits of *Mingis* and got sick. He had undergone all therapeutic phases of the *Mingis* which are:

— diagnostic phase in which the patient goes to a *Calaqad* and the diagnoses is established,

— incense phase, only different types of incense are fumed for the patient and the spirits are given a later appointment,

— *Samradayn*, a ceremony characterized by dancing and donating fish and rice to the spirits,

— *Muul* or *Mingis* phase where sheep, clothes and perfumes are donated to the spirits.

With these four phases the patient completes the therapy and visits the *Gole* (where *Mingis* is danced) periodically. But Isa continued to the last ceremony which is becoming *Calaqad*. A great feast was performed where there was dancing for seven days. Goats and sheep were sacrificed, perfumes and beautiful clothes were also donated to the spirits. On the last day of the ceremony, the title *Calaqad* was awarded to Isa and as a certificate he was given a drum, a ring and *Shaaruq* (a coin special for the *Calaqad*). He continued to help his father for some more years.

Calaqad Isa came to Mogadishu where he is one of the most famous *Calaqad* practicing the *Mingis* in the outskirts of the city.

If we consider the internship of the above three healers, although their field are quite different, we can observe that the familiarity of the art and the long and hard training are common. In the case of spiritual rites healers, they should be initially possessed by the spirits. After curing themselves from the spirits, they can become healers.

The end of the training is decided by the teachers and ceremony is performed in which a kind of recognition is awarded to the new graduate. This initiation resembles the graduation sessions of modern universities where the graduates are given recognitions and proclaimed to be specialists in certain fields.

Another characteristics that the traditional healers study during their training is keeping the art of healing very secret and being loyal to the teachers.

Role and Status of Healers

Early anthropologists who made contacts with the traditional healers gave them bad names such as quacks, charlatans, magicians and others. But recently, with the advancement of medical anthropology, the attitudes towards traditional healers have completely changed. It was noticed that healers in their communities represented an intermediary of the common people and the spiritual world. Sometimes, the healers do not only cure diseases, but they are diviners who can bring about rain, make women give a male baby and solve many social problems (Landy 1977: 415).

The traditional healers are self-confident and have the power to convince sick people. They show great sympathy to the patients and have enough patience to listen to their problems.

The price of a healer's treatment is neither fixed nor anticipated. He treats the patient and generally when he gets better, the family of the patient gives him something as reward.

The relationship between the healer and the community depends on the type

of healing system he practices. The religious healers are greatly respected. They lead their communities in many ceremonies like religious holidays and commemorating ancestors which is an integral part in the lives of the Somalis. The common people believe that God has donated a supernatural power to the Sheikh which helps him to diagnose and cure diseases.

The herbalist and the *Baxaar* are respected by the people in villages. Besides curing disease, the *Baxaar* protects villagers and their animals from crocodiles and he is paid for this function. The outsiders who come to give water to their cattle should give gifts to him so that they are safe from crocodiles. People avoid disputing with the *Baxaar*. They think that he might order his crocodiles to kill anyone who creates conflict with him.

The herbalist and the *Baxaar* are the only ones who can cut plants for therapeutic purposes, because they know the conditions for collecting medicinal plants. It is believed that if others try to cut medicinal plants, they may harm themselves or they do not gain the therapeutic effects needed from the plant.

The practitioners (*Sancoole*) are a desired group and are considered beneficial to the society. They conduct their normal activities like farming or animal herding and assist patients when they are called.

The exorcists and *Faallow* are generally feared and the common people try to avoid them. For instance, if someone disputes with a *Calaaqad*, the latter is able to send his spirits on that person so he will be possessed by the *Mingis*. On the other side, if a *Calaaqad* or a possessed person loves someone, they may transfer their spirits to the loved person. In this way many mothers transfer their Jinni to their sons or daughters. That is the reason people try to keep as far as possible from exorcists, magicians and even possessed people.

The possessed patients show great dependence and obedience to their teachers. They visit regularly the ceremonies and donate gifts to the teachers.

Influences on the Traditional Healers

The Somali villages are not genuine and intact as they were twenty years ago. The villages are explored by government personnel. In a small village, we can see a village committee, school teachers, policemen and tax collectors.

Since the healers are part of the village elders, they participate in the political organizations of the village like the Party and the Women's Association. This membership enables them to go to the town and sometimes to the capital city. A huge influx of healers in Mogadishu occurred in 1974 when the Ministry of Health invited them to sit for an evaluation test. Certificates were awarded to those who succeeded. Some of them were assumed as government personnel and integrated into the health services of the country. Others returned to their towns and villages with certificates. They opened small drug shops in Mogadishu and other towns where they sell natural remedies.

At the same time the oral Somali language was written. Literacy campaigns were carried out all over the country where hundreds of thousands studied how to read and write the Somali language. The healers were among those who studied and this influenced their practice. Now some healers are able to prescribe medicinal plants.

Another great influence on healers is « modern » medicine. The healers, especial-

ly those assumed by the government, have studied and adapted many techniques from « modern » medicine. For instance, the bone-setter now uses cotton and bandage instead of the cortex of a plant. About the measurements, a healer may say to mix his remedy with a liter of water or use a drop counter. Some have learned how to inject and utilize surgical instruments. In the field of traditional obstetrics, the TBA may use gloves and sutures the epitomy with synthetic fibres. The TBA sometimes demand that the girl to be infibulated should be injected with tetanus antiserum.

The traditional healers not only gained benefits from the « modern » medicine, but the latter has absorbed some clients from them.

The political and security influences on the traditional healers have limited their powers. Previously, the *Baxaar* or the exorcist were able to take revenge on anyone who disputed with them. But now, if a crocodile kills a person in a village, the *Baxaar* may be questioned about the matter by the police or the village committee.

In conclusion, the traditional healers have still an important role in healing and solving the problems of their communities. As other classes of the society, they are evolving and adapting knowledge and experiences from different disciplines and generally utilize them positively.

References

1. Abdullahi M. Ahmed 1979, « Indagine sulla medicina tradizionale somala, con particolare riguardo alle piante ad attività purgativa », Tesi di Laurea, Facoltà di Medicina e Chirurgia, Mogadishu.
2. Landy, D. 1977, « The healers: statuses and roles », in *Culture, Disease and Healing. Studies in Medical Anthropology*, London, Macmillan.