Yoruba Traditional Medicine and the Challenge of Integration

by

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Abstract

This paper argues to reject a recent call that Yoruba traditional medicine should be integrated into orthodox medicine. In the main, the paper argues that given that meaningful development precedes the call for integration, and it is possible that Yoruba traditional medicine could be developed on its own; such that the secret and the so called magical processes are objectified, and if Yoruba traditional medicine has been developed and used to serve humanity on its own, independent of the orthodox one, then the call for the integration of Yoruba traditional medicine into orthodox medicine is unnecessary, and thus, such a call lacks any justification, in the interest of cultural heritage preservation.

Culture as Identity Marker

Culture is the totality of the ways of life of a people and it encompasses the totality of people’s beliefs and practices. There are so many cultures in the world which are marked by their distinct qualities. For instance, we have American culture, British culture, Russian culture, etc. In Nigeria also, we have Hausa culture, Igbo culture, Urhobo culture, etc. One prominent of these Nigerian cultures is Yoruba culture which is the concern of this paper. One specific feature of culture is its originality. In this respect, for a way of life of a particular people to be regarded as a culture, it must be devoid of influx from people not of their culture.

Second, Yoruba culture is that it is situated in the metaphysical belief in the supernatural beings such as Olodumare, the Orisas, the oku orun. This marks their belief in two planes of existence; Orun and Aye. Aye (and everything therein including human body and soul) is believed to be created by Olodumare and the Orisas who resides in Orun. This informs their belief that the souls of the dead go to Orun, where it came from, to continue to live there. However, the requirement is that these souls must have fulfilled their mission in aye for them to be admitted to Orun to continue to live as ancestors. The souls of those who did not complete their mission before they died are believed to reincarnate and continue to live in aye until they complete their earthly mission. These reincarnated souls are referred to as abarameji, or akudaaya.
Also, Yoruba moral codes and rules include and also have their justification in the gods. In fact, Kola Abimbola argued that “in Yoruba culture, ethics has a supernaturalistic dimension in the sense that moral issues also have to do with the relationship between spiritual beings and humans, and indeed, it also has to do with the relationship amongst spiritual beings”\(^4\). He also argues that the spiritual and natural worlds form the same continuum in the Yoruba culture, unlike the Western conception. In a way, this may be so, in the sense that the life that started in aye is believed to be continued in orun, as ancestors are said to continue to live in orun. Moreover, the people in aye interact with the people in orun as in the same plane. This is exemplified by sacrifice and invocation of the spirits. But, hardly can all these support Kola Abimbola’s idea of ‘continuum’. This is because all the above may also be true of a conception that differentiates the two planes. Orun and aye need not form a ‘continuum’ for all the above to hold. In fact, an account that differentiates orun from aye, may still agree with all the senses above. But, however, this does not warrant any straight call for a collapse of the culture into an alien one, for lack of systematic explanation. The best that could be called for is systematic development in some aspects of the culture.

One of the covert aspects of Yoruba culture is to ensure the good health and wellbeing of the people. Good health includes the provision of healing from various kinds of illness and disease.

Correspondingly, Gbadegesin writes, “is sought for in all the nations of the world and is usually for various kind of diseases and sicknesses”\(^5\). There are so many ways by which different cultures approach the issue of ensuring healing and good health of the people. Some cultures deal extensively with physical wellbeing of the people alone. This is achieved by providing a curative process to physical diseases and ailments. This is characteristic of Western medicine. But Yoruba culture, not only heal the physical ailment, but it also ensures the healing of the spiritual part of the patient. This is what is referred to as the holistic healing\(^6\). This ultimately distinguishes Yoruba traditional healing from other modes of healings. To achieve this, Yoruba traditional healers make use of herbal medicine, and they also include the incantation and invocation of spirits to achieve an all round healing\(^7\). This background thus shows the connection of Yoruba traditional medicine with their cultural belief in the supernatural.

**Yoruba Traditional Medicine**

The close examination of the nature of the Yoruba traditional medicine, according to some of the available literatures and the practices in the society, makes it reasonable to conclude that Yoruba traditional medicine is also immersed in their cultural beliefs, which includes the belief in the supernatural powers. Mbti justifies this when he argues that “The point here is that for Africans, the whole of existence is a religious phenomenon; man is deeply religious being living in a religious universe”\(^8\).
Religious universe includes the belief in the supernatural powers. For Kola Abimbola however, there is a difference between African traditional medicine and the Western orthodox medicine. The Western or orthodox medicine is allopathic in nature while African Traditional medicine is Homeopathic in nature. Being ‘allopathic’ means “… that its methodology for the treatment of diseases is based on what may be called ‘the contrary principle’.

This principle stated that illnesses and diseases should be treated with chemical agents that produce effects that are in opposition to those exhibited by illnesses being treated. This type of medicine is “…also concerned primarily with the elimination of symptoms”. But Homeopathic medicine (that is the African Traditional medicine) treats like with like: it employs herbal remedies, which, if given in minute doses, would produce in healthy person symptoms similar to those of the sick person. Makinde slightly diverges from this. For him, “the treatment of a disease is the application of what the disease is forbidden to take, at whose sight the disease must disappear”. By this, I understand the forbidden thing to be what is against the disease and not treating like with like. Kola Abimbola then proceeds to draw a distinction between the two types of medicine thus; “Moreover, while allopathic medicine is preoccupied with getting rid of the symptoms, homeopathic medicine is more concerned with identifying the causes of the illness and disease in an effort to restore holistic balance in the biological system”. Makinde also agrees to this in his idea of (wa egbo dakun fun alaisan or wa arun t’egbo t’egbo).

What this means is that while Western medicine is only occupied with one function; getting rid of the symptoms, African medicine performs three distinct functions: (1) Getting rid of the symptoms, (2) Identifying and removing the causes of the illness, and (3) Maintaining a holistic balance (including spiritual) in the patient. With this, it becomes evident why African medicine is wider, deeper and more complex than the Western one. It may be argued that it is not true that Western medicine is not concerned with identifying and removing the causes of the illness. This is because mosquitoes are discovered as the cause of malaria fever and all efforts are being made to eradicate it. Also some illnesses have been discovered to have dirty water as their causes and attempts are being made to ensure clean water in order to remove the cause. STD and the warning against casual sex is another example. But the argument stands that Western medicine does not concern itself with the holistic (which includes seeking spiritual causes and healing) healing in the patient.

To achieve a holistic healing through Yoruba traditional medicine, Kola Abimbola argues that some certain conditions must hold. For instance, the Onisegun (Yoruba Herbalist) would be interested in the spiritual causes of the illness. To do this, there is the need for the understanding of the constitution of man. For him, a person has two parts which are ara, (the body) and the soul complex (emi, ori and ese). For Makinde, a person in the Yoruba belief is made up of ara, emi and ori-inu. The two are in agreement with Wade Abimbola’s concept of human personality. Again, the paraphernalia of Ifa divination is also very paramount in the healing process in the Yoruba medicine.
The Ifa priest, after series of incantation, divines to establish a link between the patient’s Ori and Ifa. He does this by determining “the ‘Odu’ (i.e., book) of the Ifa literary Corpus from which to select a poem” 17 which will reveal the truth about the illness during the interpretation. This is with a view to discovering the source and the nature of the sickness whether it is spiritual or natural. Again, Kola Abimbola explains that the priest is not told the nature of the sickness but Ifa reveals this to him unlike the Western medicine where the patient has to first give the complaint to the doctor before the doctor diagnoses the illness. If the illness is natural the Onisegun prescribes the herbs and herbal medication to cure the illness and also repair the body.

Then, the issue of sacrifice is another condition. This came in if and when the illness is spiritual. It is a common phenomenon in Africa to see people make sacrifices (Gbe ebo) at times when some certain problems defy ordinary solution. It might be sickness or other live endeavours. Sacrifices are not only made to solve a problem, it is also made as a sign of appreciation. Kola Abimbola also stresses that there are two conceptions to what is called Arun. “First it refers to the anti-god, (i.e., one of the Ajogun’s warlords) 18. There is also the Arun (i.e., the physical illness/disease). Both are claimed to be causes of Yoruba medicine, but while the Arun (the physical illness) can be cured by herbs and medicine prescribed by the Onisegun, “Only sacrifices and special pleading to Esu by one’s individual ori can save one from the powers of Arun (the anti-god) 19. For him therefore, once all these conditions are in place, the source, cause and nature of any illness (Arun, both conceptions) would be found and cured and both bodily and spiritual cure and repair are done in the patient’s life. This is what is referred to as holistic healing.

For Makinde however, apart from attacking a certain illness with what it is forbidden to take, Makinde also argues that the Onisegun divines to discover and then calls the illness by its secret name. Once the secrete name is discovered and revealed, the power of the illness becomes weakened and it becomes helpless. According to Makinde, “Ifa, the deity identified with Orunmila, the owner or possessor of wisdom and knowledge” 20 plays a predominant role in the healing phenomenon of the Yoruba traditional medicine. This deity Ifa, identified with Orunmila is a repository of knowledge. He possesses knowledge in virtually all human endeavours. He has the knowledge of the science of nature (physics), plants and animals (Botany and Zoology), Medicinal plants (herbalism), oral incantations (ofo and ase/afose), and all the science associated with healing and disease 21. Given this background, since this is the nature of Ifa, then to treat and cure any illness, the people consult Ifa through the Ifa priest and he in turn takes some steps. (1) He divines to discover the cause, nature and the name (both common and secret) of the illness. (2) He calls the original and the secret name of the illness and (3) applies what the illness is forbidden to take. These steps ultimately make the illness vanish from the patient. 22
It must be noted that Ifa does all these through the Ifa priest (Babalawo). Ifa priests are those who study and then understand the language of Ifa. In other words, they deal directly with Ifa and thereby act as intermediaries between Ifa and the people. The people consult them with their problems and they help them find out about the nature and or the way out of their problems. This is because since they understand the language of Ifa, he then speaks to the people through them. There is also the Onisegun, another traditional healer who specializes in herbalism. In fact, "some people combine both". The degree of the effectiveness of the treatment of an illness depends to a large extent on the level of competence of either the Babalawo or Onisegun. This is because “In other circumstances the illness may not respond to treatment if it is handled by a quack traditional healer who has no knowledge of the secret power of the illness and the appropriate medicine for its treatment”. If the treatment is handled by a professional and competent traditional healer, it is believed that the patient will get a complete and perfect healing (iwosan).

It is not the case that these Babalawo only has the knowledge of the science of nature, he equally has the knowledge of the principal organs of the human body. This is because their medicines have to get in contact with the organs of the body to facilitate healing. It then becomes important for them to understand the nature of human being. According to Makinde therefore, Yoruba believe in the tripartite division of human being. These are: ara, emi and ori-inu. He then argued based on the information he had from his father, that not only heart but also blood represents emi (soul) in the physical plane. That blood represents emi (soul) is seen in “The importance of the blood as representing the soul in the physical plane is suggested in the saying: the life of a man is in his bloodstream.”

Also, it becomes clear that Makinde and kola Abimbola agreed on some cogent issues on the phenomenon of traditional medicine and healing in Yoruba belief. Some of their convergent points are: the paraphernalia of Ifa as a repository of knowledge of and solution to all the illnesses, the influence of the Babalawo and or Onisegun in the process of traditional healing, the usefulness and the efficacy of sacrifice (ebo) as a means of getting rid of some stubborn problems and the phenomenon of holistic healing. Both of them also agree on the efficacy of herbal medicine and the power of incantations and spirits.

Makinde identifies some other traditional tools which are employed in the battle against the “evil forces or the willful maleficita—who are said to do bodily harm to their fellow human being”. Some of these other traditional tools are: Madarikan (protective counter-medicine), epe (curse), ase/afose, Olugbohun, Gbetugbetu, Apeta/ Apepa, Aasan, Asisan/ Ayajo. All these include Ifa divination and in form of oral incantation and are accounted effectively powerful as protective and defensive devices against the Ajogun. In making a provision for healing and good health, Makinde notes that there are forms of medicine which are marked for the care of the pregnant women and the old people. For instance, Agbo-Aboyun is used to take care of pregnant women from conception to delivery.

There is the *Sagba-d’ewe/Ajidewe* which the old people use to protect their health from deteriorating and make them strong during old age. All these were powerful and efficacious in Yoruba medicine. And through the knowledge of all these medicines, “a number of genuine healers who have learned, through years of study and experience, to recognize the symptoms of sickness and disease and to apply effective remedies through knowledge of medicinal herbs and other traditional means”\(^{33}\) were produced.

Yoruba people also have medicinal means of punishing the offenders. For instance, if a certain man was found having extramarital affairs with another man’s wife, there was no need of formal arrest or physical or public assault as of today. All they did was prepare *Magun*\(^{34}\) on the woman. The next affairs will reveal the man. But, most of the time the effect is fatal. If a certain man was observed to be stealing things from another man’s farm, there were charms which the owner would put in the farm. At the next attempt it will be discovered that the culprit will have the psycho-mental part of his/her life distorted and thereby losing his/her reasoning. He/she would not be able to leave the farm until the owner came to decide his/her fate. The fear of such traditional means of punishment curbed such unethical acts in the traditional society. Some of the herbalists are still in custody of such till today but many of the traditional healers of today are quacks who are only looking for means of putting body and souls together. Well, while it might not be argued that there are no more professional and competent traditional healers, such are rare and scarce to come by.

Makinde made an important outline by noting that as those medicinal herbs and those other traditional tools mentioned above are useful for positive purposes of healing, protection, and prevention, they are also used by the Yoruba for evil or negative purposes. *Ase* is an example\(^{35}\). In fact, both positive and negative purposes might be argued to be necessarily needed in the society. Positively, those herbs, medicine and tools are needed to effect healing and good health, for prevention and protection. Negatively, they are needed to fight against evil and its forces- the ‘willful maleficia’ or those considered the enemies. But, it must also be included that the traditional healers use these medicine and charms against each other, especially when there is an unresolved fatal disagreement\(^{36}\). They also, at times, use it against ordinary people, perhaps when that person constitutes their enemy or to actualize a certain purpose. To ask how roots, backs and leaves of trees would be mixed together and actuated by some certain divinations and incantations to effect an evil act, becomes an unnecessary question as long as it is believed or agreed that the same method can be used to achieve protection, prevention or healing. But the important point is that it works.

What should in fact bother us most at this point is not how these healings and or evil ends could be achieved, but why is such process of traditional medicine not objective and empirically verifiable and accessible. We must remember that these processes are not open to ordinary people. Well, must it be so open? This is why Makinde laments on the nature of that medicine that “The secretive nature of their knowledge, however, has made the principle and practice of traditional medicine inaccessible to curious minds”\(^{37}\).
For you to know it, you must engage in the process of initiation into a certain occult or secret society (egbe awo). Perhaps, this is what Gbadegesin means by ‘familiarising’, in “For it is only when one is familiar with the practice that one is in a position to inquire into its foundations”\(^{38}\). Since these initiation processes is somehow intricate and complex and not many are willing to go through it, then “all the knowledge of traditional medicine dies with traditional healers”\(^{39}\). At times some ordinary people do go to these Traditional powerful people for charms and or medicine against their enemies, for protections or for healings. What the traditional healers do is to give them those of little power since they are aware that it is not the case that they really want to pass through the real initiation. This is the point of divergence between the orthodox western doctors and the Yoruba traditional healers. The traditional healers will not reveal the secret explanation of their medicine to an uninitiated individual. The orthodox doctors are not prepared to be initiated. This is the reason why the traditional medicine is termed magical, mythical, secretive, and unscientific. The traditional healers also refer to the western medicine as incomplete.

Gbadegesin notes that Makinde presents Ifa as the one “believed to know the cause of things and events\(^{40}\), the names and nature of things, as well as their origins and chemical compositions\(^{41}\). This is “to show that African traditional medicine assertions occur already in an epistemologically constituted universe\(^{42}\). While sounding an alarm that such presentation of the Yoruba medicine might appear mythical to an empiricist, he raises a question “on how to acquire this knowledge and make it available for research”\(^{43}\). He is referring to the mythical or the secret part of the Yoruba medicine which Makinde himself admits. Then, according to Gbadegesin, since “the secret of its efficacy is not revealed by its practitioners’… then it becomes impossible to develop it, or for it to lead to any spectacular discovery”\(^{44}\).

The question that readily comes to mind is why is it not possible for the Yoruba traditional system of medicine to be made empirically verifiable or to lead to any spectacular discovery as Gbadegesin asserted? In the orthodox medicine, the ingredients used, the proportion of mixture and the precision of use are all clearly specified. What does this signify? This means that the medicine is empirically verifiable. The procedure can be repeated and the medicine can be reproduced. Any doctor elsewhere in the world who experiments it is expected to get the same result. But this is not the case of the Yoruba traditional medicine. It is limited in scope of acceptance as well as being secretive in nature. That, in all possibility, may accounts for the unscientific nature of the medicine.

Makinde suggests a solution through his system of ‘symbolic traditionalisation’ as it is being practised in India’s Ayurveda, Chinese Acupuncture and some African countries such as Zimbabwe, Tanzania, Ethiopia, North Africa, Zaire, and some others\(^{45}\), where attempts are being made to integrate traditional medicine or indigenous medicine with the modern ones with a view to inculcating a new look to the traditional guise. But as far as I am concerned, such a step might not mean any good to the Yoruba traditional medicine. I will take this up in the next section.
‘Objectivisation’ and the Challenge of Integration

It must be clear that by this term ‘objectivisation’, I mean making a system, claim, process, practice, belief, etc, etc, open for empirical verification and demonstration. By this, I do not only mean the specification of the ingredients used, the proportion of mixture and the precision of use, but also, and mainly, the ‘objectivisation’ of the process of preparation of the Yoruba traditional medicine including and most importantly the ones that involve oral invocation of spirits and or incantations. When this is done, the world will be compelled to recognize the medicine in its own significance and not to integrate it with the orthodox.

This may be seen as a challenge to the traditional doctors that it is time they faced the challenge of making a great effort to provide necessary and helpful empirically verifiable explanations on what accounts for the efficacy of epe, eedi, Ayeta, apepa/ apeta, Magun, and all such traditional medicine that are used to cure diseases such as epilepsy, Leprosy, Insanity, barrenness, etc. What, for instance, is the explanation of the causal connection between the òrò (word) identified with èèdì (abnormal performance) and the actual event which purportedly follows it (making somebody behave according to the spell of the word uttered)? It might be of help to begin from the simple ones and later then proceed to the higher order ones. Such explanation must be able to include repeatedly testable process and must be able to enjoy universal verification and certification just like the orthodox ones. It should not be a relatively based efficacious process. Professor Femi Williams argued in (National Concord, Lagos, Nigeria, July 25, 1988) that “appreciable level of success can be realized by scientists if they can conduct research into incantations and charms, particularly in the field of transcultural psychiatry”. However, orthodox scientists may not be able to achieve this task. They cannot go beyond the empirical. I think the task should be left in the hands of the traditional experts.

However, Sofowora notes that “the effect or the function of the incantation in producing a cure in traditional medicine cannot be easily proved experimentally. For this reason, ethnomedical research in many institutions has been limited to those aspects of traditional healing methods which do not involve incantation”. In view of Sofowora’s observation, I think the best the world can expect of the Yoruba medicine is what I call objectivisation of a kind and not the one required by the west: the Yoruba kind. This is because; it may be difficult if not impossible to scientifically experiment some spiritual or mythical process involved in Yoruba traditional medicine. However, at least, it is possible that some major aspects of the medicine, such as the wordings of incantations used, the invocation of the spirits and sacrifice process, the ingredients used for preparing the medicine, and also importantly the process of initiation into the cults, may be openly specified. But what may be left unempirical and scientifically unexplainable is the connection between the preparation of the ingredients, invocation of the spiritual forces and the actual event that occur. This requires a deeper familiarization with the elders. It is not automatic, one may get all the ingredients, use the words of incantation to invoke the spirits and still not get the desired results.
However, I think Yoruba medicine is getting to the level of the objectivisation of a kind. This is may be observed in the reaction of some traditional healers’ position towards the directive of NAFDAC, in the interaction with Moji Olateju et al;

During some of our interaction with them, the Practitioners of traditional medicine complained that NAFDAC insisted that they should write the composition of their drugs on the labels for packaging but they too insisted that some of their component parts are supernatural incantations which cannot be written on paper. These are rapidly spoken supernaturally laden words and sentences which serve as the mediums through which the supernatural powers flows through the roots and the herbs.

This does not say that all the ingredients are not labeled on the packaging of the medicine. In fact, most improved traditional medicine have some of their ingredients labeled. What it says is that not all the ingredients can be labeled on the packaging. Some cannot be labeled.

One may now ask; why did Gbadegesin make a call that two radically and significantly different medical practices such as Yoruba traditional medicine and the orthodox (western) should be integrated? He made the call in this argument; since “the secret of its efficacy is not revealed by its practitioners”, then “it becomes impossible to develop it…” Therefore, “all that seems feasible now for a philosopher is to appeal for the integration of traditional and modern medicine…” Notwithstanding, some people have made a call for the severance of the secret part of Yoruba traditional medicine from the rest to allow for easy integration since the aspect defiles any attempt at experimentation. But it must be noted that the removal of the secret part and the so called magical part from Yoruba medicine only leaves us with an equivalence of the orthodox medicine. This is because herbs and herbal medicine can, with all accuracy, be experimented and explained scientifically. But Yoruba traditional medicine is not complete without the so called mythical or spiritual aspect. What passes for Yoruba traditional medicine includes the herbal part and the so called secret part; the part that includes incantation, invocation of spirits, etc etc. Any research must deal with it as a whole and not in part.

‘Appealing’ for integration already presupposes a sense of qualitative inferiority on the part of Yoruba medicine, as Gbadegesin uses the word. So, the third interpretation is also appropriate. Now, let us consider the second dictionary meaning of the word: ‘To absorb into an existing whole’. ‘To absorb’, according to the Cambridge International Dictionary of English Language, means to take or suck (something) in, especially gradually, as plants absorb water or carbon dioxide. Now, if we go by this simple breakdown of word, then it becomes clear that to integrate Yoruba traditional medicine into the orthodox one may mean that the latter should be allowed to be taken or sucked in by the orthodox one, perhaps as plant does to carbon IV oxide.
From this analysis, it is clear that integrating Yoruba medicine this way may mean passing its identity into total oblivion. I do not think this is what Gbadegesin has in mind. Let us scout for another possible meaning of the word. To ‘integrate’ may mean (1) To become an accepted member of a group and its activities, or help somebody do this and (2) To make something part of a larger whole, or to become joined or combined in this way. It would be evident that the first meaning here could be seen to capture the mind of Gbadegesin to a large extent. This is because it includes the word ‘acceptance’ which presupposes appealing or begging. ‘Acceptance’ may also implies the word ‘qualify’.

However, at least in some sense you appeal or beg for acceptance of something. This may be seen as the meaning since Yoruba medicine does not qualify for acceptance into the orthodox medicine. This also goes with some implications. (1) Since Yoruba traditional healers could not make their medicine open for empirical research, then they should appeal or beg for acceptance (integrate) as a member of the orthodox one. This may be with a view to making it gain recognition or to throw it away to the larger world. But, it is clear that this kind of integration cannot take place unless there is a level of western objectivisation of the Yoruba traditional medicine; because for two things to be so integrated, they must have some similar properties. Oxygen and stone cannot be integrated for instance. The best one may get as I have argued is an objectivisation of a kind, not necessarily the western type. The objectivisation of a kind argued for regarding the Yoruba medicine, although different from the western one, it is coherent, efficacious, and functioning in its own system. In fact some sicknesses which orthodox medicine cannot handle have been cured by Yoruba medicine. This is what Barry Hallen has in mind in:

We would argue, however, that the evidence from which that dichotomy emerged, and indeed its entire argumentative basis, are mistaken –that the use of the scientific method as a paradigm of thinking has led to misleading comparisons, obscuring rather than illuminating the methodology of non –western systems of knowledge. The methods of such systems may be not only different from their western analogues, but coherent and objective in their own terms.

It should therefore not be rejected for that sake. I must also make a call for caution for the sake of retaining Yoruba cultural identity while trading with the world.

It must be noted that through similar attempts, some rich parts of the culture have been so allowed to dissolve into the alien cultures under the pure guise of modernization. (2)That by integrating it with the orthodox medicine (objective and scientifically verifiable one), it can be made objective or the scientist and orthodox medical experts could help make it empirically verifiable. This is impossible. To objectively explain Yoruba medicine, one must familiarize oneself with its core fundamentals.
The orthodox medical experts do not familiarize themselves with it. Then, the conclusion follows, that the orthodox medical experts cannot explain it. (3) By ‘appeal for the integration’, it presupposes confusion and inferiority which coerces subjection. This could be seen to transcend medicine but covers all the Yoruba worldviews and culture. No rational owner of a certain significantly valuable and functioning property would willfully allow it to be subsumed under or consumed by some distant neighbours.

Therefore instead of integration, I think Sofowora’s co-recognition will be appreciated regarding Yoruba medicine. This is because it can be developed on its own standards and qualities and then made to be useful and serve humanity. What I am arguing is that such development in Yoruba traditional medicine must be done with a view to making it more useful to the people who understand it and then making it serve the rest of mankind. That should be the main purpose of such a call for the development. Or is it the case that Yoruba medicine cannot make any meaning until it is integrated with the modern one? After all the western people did not develop their medical aspect in order to integrate it with anyone else. Theirs was to first make themselves and later the rest of the world live a healthy life. This should also be the primary reason why Yoruba traditional medicine is going to be developed and not to be integrated with another one. This does not mean that Yoruba medicine cannot utilized the universal or orthodox methods where applicable. Yoruba medicine has its own potency and can also be developed independently.

In that case, the people concerned could and should expedite action to develop and modernize what is their own and make it serve the humanity on its own. Such attempt would aim at providing empirically verifiable and repeatedly testable explanation for Yoruba medicine as much as possible. Such explanation should include most important processes (including some of the most secret aspects where possible) involved in making such medicines. It is not my prerogative at this point to determine whether such explanation is possible, the appropriate quarters will have to take care of that. I know they can do it and they need to. The attempts to showcase the development in the Yoruba herbal medicine through these Traditional Herbal and Medicine Trade Fair in most part of the country is commendable and lends credence to the fact that the ‘objectivisation of a kind’ is actually possible. The likes of Professor Paul Omo-dare can now change their opinion as contained in (Daily Times, July 14, 1986). This is because there are reliable evidences that Traditional Medicine can contribute to solving health problem, not only in the country but also in the world.

The language problem which Makinde raises poses difficulty for my suggestion. But, one sure hope is the possibility of linguistic development. The language and linguistic departments of the Nigerian Universities could also intensify effort towards technically developing different cultural languages in Nigeria. This implies that such development towards achieving technical and sophisticated African languages has started and it is in progress.
Other developed languages in the world did the same thing. If these two are done, then the world should be ready to welcome Yoruba medicine for better and ‘holistic’ healing. I have to leave an aspect of linguistic problem for further research. This is because I am aware that we are also beset with the problem of the translation-interpretation of one language to the other. This consists in the problem of finding a perfect synonymy between two languages. It is an issue for further research.

Who decides acceptability and the usefulness of a certain medical system? If we can work upon and modernize Yoruba medicine as a system such that its processes become objectively known and its efficacy becomes generally acceptable, then it is left to the whole world that would benefit a lot from it, and not a particular region, to determine its efficacy and acceptance. By that, our heritage will be jealously preserved. Such is my own call for the development in the traditional medicine and not with a view to dissolving it into or make it part of an already developed one, where the identity will go into complete oblivion. We should always be conscious of and desist from being an atúlèta, (Those who dispose or sell out their valuable heritage).

**Conclusion**

This paper has established a connection between Yoruba culture and Yoruba medicine. Some important issues mentioned by Kola Abimbola, Makinde, and Gbadegesin regarding Yoruba medicine, are critically examined. Then, two important issues are suggested: that an attempt should be made by the Yoruba traditional healers and herbalists to make some important aspects of the Yoruba medicine empirically demonstrateable and verifiable, and that the main purpose of the felt need for development in Yoruba medicine should not be with a view to integrate it with any other form of medicine, as some have argued. Thus, I suggest that it should be developed with a view to serving humanity side by side with the so-called orthodox ones, this referred to as co-recognition; and that Yoruba medicine could use the objective and empirical method which is a universal method. However, I identified that the most that may be possible is the objectification of a kind, and that the language problem and the possibility of achieving technical and sophisticated African language use, given the progress linguists, philosophers and language expert are making.
1 *Orun* is believed to be uncreated or the Yoruba cosmology could not accommodate the belief that orun was created. This is because the beings in *Orun* are believed to be self made and uncreated also. It must be noted that the denial of *Orun* being created is not founded on the fear of the possibility of undermining their explanation for *Aye*. But they could not just think of the explanation which will then establish the creation of *Orun*. But they could think of the explanation which linked the creation of *Aye* to *Orun*.

2 If an elderly person dies, it is believed that his/her soul will go directly to *Orun* to continue live. These are referred to as the ancestors. This is because it is believed he/she must have completed the earthly mission. But if a youth of twenty years dies, it is believed that the soul will reincarnate and continue to live on earth because it is believed that he/she could not have completed the earthly mission. See Abimbola Wande, *La Notion De personnel en Afrique Noire (On the Yoruba concept of Human Personality)*, (Paris Central Natural de la Recherche Scientifique, 1971) But, is it impossible that the soul of twenty years old youth has completed the earthly mission and should be allowed entrance into *Orun* to continue life while the soul of the so called elderly person has not completed his/her earthly mission and should not be allowed into *Orun*? This possibility is not granted in the Yoruba belief. They see the death of a 20 year old person as *iku*-ofo, *iku odo* or *iku omode* (mournful death) The denial of this possibility in their belief leads the belief to presuppose the knowledge of the content of the mission of individual person that come to this *Aye* and to presuppose that part of the content is that each person must live to the old age before he/she could be said to have completed his/her earthly mission. But clearly this may not follow. Any age could be the old age. This is true since we are shut out of the content of the mission of each individual person to *aye* which is secretly contained in ones *ori*. Therefore, the conclusion is that anybody who dies at anytime does so at his/her own old age, that is, when he/she completes his/her earthly mission. But this conclusion will be contrary to and rub the belief of anything accidental or sudden such as *iku-ojiji* or *iku-ofo* believed by the Yoruba, because given the conclusion there would not be any sudden death. But if the criteria of entering *orun* is the completion of the earthly mission and we do not know the content of the mission, then the conclusion is strictly consistent and inevitable. This means that any age when individuals complete his or her earthly mission is his/her old age and this can be any age.

3 This is a common belief in the Yoruba society. A young man that died in Osogbo may be reportedly seen again at Lagos after his death. Of course, this poses some philosophical problems. These reincarnated souls are also called *abarameji*. For further information on this, read Makinde M.A. ‘Immortality of the soul and the Yoruba theory of seven heavens’, *Journal of cultures and ideas*, No 1(December, 1983) Pp 31-59.


6 This is also supported by Gbadegesin E. O. in Revitalisation of African Healing in a Global Context, opt cit, P 221.


10 Italic, mine.

11 Abimbola Kola, *opt cit*, P 79.


13 *Ibid* P 79.

14 Makinde, *opt cit*, P 89.

15 *Ibid*, Ajibade G. O., in The Role of Yoruba Traditional Birth Attendants in Global Health Care Delivery, ed, Sola Akinrinade et’ al, *Locating the Local in the Global, Voices on a Globalised Nigeria* (Ile-Ife, faculty of Arts, Obafemi Awolowo University, Ile- Ife, Nigeria, 2004), also shared this view in the introductory part of his paper, P 121-122 of the book. In the concluding part of the paper, he even note clearly that the orthodox medicine is deficient in the spiritual aspect of healing.

16 Abimbola Wande, La Notion, *opt cit*.

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Kola Abimbola, opt cit, P 81, explains that in the Yoruba theology, the Ajogun are completely evil and as such they have no redeeming virtues whatsoever. The aim of all the Ajogun, including Arun, is the complete ruination of mankind.

Ibid.


Ibid.

Makinde, opt cit, Pp 88, 89.

This is the traditional healer that specializes in the studying of the corpus or the secrets of Ifa. They serve as the middle people between Ifa and the people. Since Ifa cannot talk to people directly, he has to use a certain medium. The Ifa priest is the medium. They then specialize in divination to find out about the problem from Ifa.


Italic, mine.


Ibid P 90.


Sacrifice (*ebo*) in Kola Abimbola is useful only and when the cause of the illness is spiritual. For Makinde, sacrifice is useful to appease the ancestors in order to facilitate and hasten the healing.

By this spirit, I mean they believe in the powers of the Orisas, whom the traditional healers invoke during the process of healing. This might be during the preparation of the herbal concoctions of during sacrifice. In Yoruba culture these Orisas are of great importance in the process of healing. A good example is Ifa identified with Orunmila.
The traditional healer must trust in and seek the opinion of Ifa when a client/patient brings any problem to them or during any problem even in the village or town. In fact, in those days, the king trusted in the efficacy and the power of Ifa by relying on the words of the babalawo against any situation. This is because it is believed that the words of Babalawo are the words of Ifa, which bring solution to any problem. An example could be seen depicted in Prof. Ola Rotimi’s ‘The gods are Not to Blame’, chief Ogunrinde’s movies: Aye, Jayesimi, etc, and in other films where traditional beliefs are displayed.

31 Makinde M.A., opt cit, P 90.

32 In one sense, these Ajogun may be said to be evil and wicked spirits but the effects of their attacks are physically felt through illnesses and sicknesses. At the same time they may manifest through a human being such as the spirit of witchcraft. That accounts for the possibility of the Ifa priests attacking any human being suspected of harbouring the spirit of the Ajogun. That may then account for the reason why it is heard that two powerful persons are fighting against each other with charms in the Yoruba society. Such fight may even be as a result of disagreement over a patient. The evil forces may wish to kill a certain person by inflicting that person with kinds of illnesses while a certain traditional healer is trying to save that live. On this issue a battle line may be drawn, leading to powerful people fighting against themselves.

33 Ibid P 91.

34 Although Magun (don’t climb it) is powerfully respected in the Yoruba culture as a means of punishment for having wrong affairs with another man’s wife, the antidote which can neutralize the power of Magun is also present with the Yoruba traditional medicine men. Once the man observed the Magun could have been prepared on the woman he would just activate and use the anti-magun charm. It is believed that Magun will not have any effect on such person.

35 Makinde speaks of ase thus; “But it (ase) can also be used for evil purposes, such as destruction of a person either physically or mentally”. And “…most of the mental illness in Yoruba society is attributed to some evil forces including the evil use of ase by wicked herbalists…” Makinde M. A., opt cit. p. 98.

36 For instance, a certain herbalist may connive with the other evil forces, for instance the witches, to terminate somebody’s life perhaps for their evil purposes. That individual may then, in search of a way out, visit another powerful herbalist who discovers the truth of the matter and promises to rescue that person. This will draw a battle line between the two parties. They would now be using their powers and forces against each other. This often leads to the death of the less powerful and it may be from either side.
By ‘events and things’ though could be understood to mean all the state of affairs which I do doubt he would have in mind, I think Gbadegesin had in mind, as Makinde has noted, that Ifa knows the name, (both common and secret), nature and scope of all illnesses, and that Ifa also knows the roots, leaves and the degree of their mixture to combat such illnesses and effect the healing of the patient.

For more on this see Sofowora A., *Medical Plants and Traditional Medicine in Africa*, (Ibadan, Spectrum Book limited, 1982.)

Integration is being considered from a dictionary meaning of the word.
51 These interpretations are all supported by dictionaries such as ‘The Encarter Dictionary of North Africa and Webster International Dictionary of English Language.


53 Those days, value was placed on marriage and virginity but now in the name of westernization, such is no more. In fact it was becoming a taboo for a lady to keep her virginity till the wedding night. Such ladies are castigated in the society. Again, respect meant a lot in those days. It was not only in abstraction but demonstrated (prostrating for male and knelling for female) at all levels. Today it is almost gone. All, in the name of Westernization. The harm these have done to the society cannot be over emphasized. But, these and more are what made the society respectable and valued in those days.

54 Sofowora A., opt cit.

55 Makinde M.A, African Philosophy, Culture, and Traditional Medicine, (US, Center for International Studies, Ohio University, 1988) Pp 17-19. The argument is that for any system of belief or practice to be given a universal acceptance, it must be conveyed to the world through a technically developed language. African,(Yoruba inclusive) beliefs and practices have not enjoyed universal acceptance because it is not conveyed through a technically developed language.

56 As discussed above.

57 I have something like Quine’s indeterminacy problem in mind here Quine W.V.O., Word and Object, (Cambridge, M.I.T. Press, 1960). This is because for the exercise I have set out, language plays important roles. But the problem of translating some if not most of the technical or mythical expressions to other languages in a way that they will not lose their exact meaning becomes an issue. Remember that in an incantation to achieve a purpose of healing, no word must be lost or be pronounced wrongly. Such is dangerous, it can backfire on the person trying to heal a patient.