Water and Healing - Experiences from the Traditional Healers in Ile-Ife, Nigeria
EVA-MARITA RINNE
University of Jyväskylä, Finland

ABSTRACT

This paper examines the roles of water in healing among traditional Yoruba healers in southwestern Nigeria. The data for the study derived from five focus group discussions (FGDs) conducted between April and June of 1998 and between November and December of 1999 at the Ile-Ife region, Osun state, Nigeria. Pluralistic health care services in Nigeria are discussed in light of modern, traditional and popular branches of medicine. Originating from the ancient tradition of the Yoruba, the various roles that water plays in traditional healing are discussed. Issues of interest include understanding illnesses and diseases as misfortunes, the various ways to prevent misfortunes in life, ways of using water when preparing remedies, and understanding how water actually heals in the therapeutic process. This is highlighted by an example of the baths, which are common treatments, especially for women suffering from infertility. The study suggests encouraging further cooperation between the modern health care services and the traditional practitioners in order to achieve better health.

Keywords: health, illness, misfortune, traditional healing, water, Yoruba

INTRODUCTION

According to Yoruba legends, the world was created in Ile-Ife. The Yoruba believe that the world was originally covered with water. This was when Olodumare, the God of the Yoruba religion, showed his son Oduduwa/Obatala how to prepare the world for other gods and spirits. Oduduwa landed on the sacred mountain of Ile-Ife and poured a shellful of earth on the ground. He also had a cockerel and a seed from a palm tree. In other legends, the animals were a hen and a chameleon, which have also been considered sacred animals in Yoruba mythology. According to one version, the first man was created from clay and water. After that, flora and fauna and other human beings were spread around the world, and eventually the world started to cherish life. (e.g. Fabunmi 1985: 5; Simpson 1994.) Water seems to have a special role in all these legends, indicating that life would not have been possible without the basic element of water. This is also the basis for the Yoruba beliefs that consider water to be a vital and sacred origin of life.

The main aim of this article is to examine the roles of water in healing among some traditional Yoruba healers in Ile-Ife. Themes of interest include
understanding illnesses and diseases as misfortunes in life, ways of using water when preparing remedies, and understanding the therapeutic role of water. This is highlighted by an example of the baths, which are common treatments, especially for women suffering from infertility. During the several visits to the healers, an aspect of the study, i.e. healers’ perceptions of water and health in Nigerian communities was examined. The interviews focused both lay people and traditional healers. The fieldwork experiences reveal similar experiences with those of Sudarkasa’s (1986) notes of the separateness of the worlds of women and men, and the different roles they occupy in the society became obvious. There was long acquaintances with groups of traditional male healers in the area; an outcome of various coincidences and long-term cooperation with the local authorities and the university. The different cultural background of the researcher was an added advantage as the researcher was regarded as a foreigner strangely interested in the Yoruba culture and was treated merely as a privileged guest. Information, which would not come easily to a Nigerian, were made available to me, at least to some degree, because of my given role.

Having become more acquainted with the multidimensional system of health and healing in today’s Nigeria, the cultural understanding of the different elements of health, including water, have become more important and relevant for the whole study. For example, it was found out that the many factors related to water procedures impact on the patterns of reproduction in the everyday life of the communities. In the pluralistic health care system such as the one in Nigeria, the branches of traditional healing and self-medication are important (Van der Geest 1988; Pearce 1989). Water is regarded as an essential element in traditional healing, both practically and symbolically (Buckley 1985; Hallgren 1988). Thus, the focus of this article is on the perceptions of water in the healing process according to the meanings given by the traditional healers that participated in the study.

1. METHODS

The qualitative data discussed here is based on two fieldwork periods. The first phase (I) was conducted between April and June of 1998 and the second phase (II) between November and December of 1999 in the Ile-Ife region in Nigeria. Before Phases I and II, study locations had been visited in 1996 to conduct a one-month pilot study for purposes of the present study. Furthermore, a two-week preparatory visit to the Ile-Ife region in January 1998 was made shortly before the commencement of the first fieldwork (Phase I).

For the second fieldwork (Phase II), trips were made to the familiar research settings that consisted of three rural villages (Abagbooro, Oke-Ake, Elefon) and a small town (Ifewara). In addition to the data discussed here, materials were collected to support the main research task of perceptions of water and health. In this article, materials from focus group discussions (FGDs) among traditional
Yoruba healers were analysed. The data consisted of three FGDs from Phase I and two FGDs from Phase II. The discussion was supported by observations from both fieldwork periods.

In Phase I, only one FGD guide was used for both male and female groups and the traditional healers group. In Phase II, five thematized FGD guides were used for the different types of groups. For the traditional healers, there were two themes for the FGDs: 1. Water in healing and, 2. Health and misfortune. In Phase II, several types of FGD guides were held to update and complete the previously collected data so that it would be accurate for each group. The FGD meetings followed the typical pattern of an FGD (Khan and Manderson 1992; Dawson et al. 1993; Barbour and Kitzinger 1999), but some allowances had to be made. In a rural setting, it was only possible to have people already familiar with each other in each session. The form of the FGDs was always the same, but naturally each session had its own characteristics.

The FGDs were held on the yard of a compound. We sat under a tree in a small circle. When raining, we met inside the home of one of the participants. In each meeting, there were between six and eight participants, a Nigerian research assistant and me. All the traditional healers were men between the ages of 25 and 80, but mostly they were middle-aged or older. All healers belonged to the Yoruba religion, but some of them had also adopted Christian or Islamic doctrines in their beliefs. Most of them worked as herbalists (oníseègùn) or as diviners (babaláwo) besides farming. Three of the healers did not have another occupation in addition to the healing practice. The meetings lasted for half an hour to an hour. The discussions were held in Yoruba, tape-recorded and later translated into English by the research assistant. Some photos were also taken.

2. RESEARCH SETTINGS

Ile-Ife is located in southwestern Nigeria of Osun State. Mountainous ridges, hills and tropical rain forests characterize the environment. The hilly topography

---

1 Specialized herbalists are called oníseègùn among the Yoruba. This is a Yoruba name for an herbalist who is an expert of traditional herbal medicine (Renne 1996: 484), and can also be called a native doctor (Ojo, G. J. 1966: 232; Buckley 1985: 2). The oníseègùns are said to rely merely on medical history and symptoms for diagnosis, as they would not benefit from divination. Yet, as researchers (Odebiyi 1989: 987; Simpson 1994: 93) have observed, pure herbalists are difficult to find, as many Yoruba herbalists also possess some knowledge on divination, witchcraft or sorcery.

2 A babaláwo is a priest of Ifa (god of divination) who is a prophetic voice of the Orunmila god, one of the primordial divinities in the Yoruba religion. He is especially concerned with the maintenance of culture, health and the well-being of the people. His work is based on Ifa poetry and divination but also on herbal medicine. Generally, only men have been accepted to become a babaláwo. (Ojo, G. J. 1966; Buckley 1985; Pearce 1989; Simpson 1994.)
and the many rivers with their tributaries make the area very fertile for farming, which is the main livelihood. Petty trading and artefacts are also a source of income for many. Most people belong to the Yoruba ethnic group, but some Ibos have also moved here during recent decades for better farming opportunities. The Hausas dominate trading and inhabit one part of the Ile-Ife town. About half of the Yoruba are Christian and half are Muslim. About 10% of the population belongs to the traditional religions, of which the Yoruba religion is the most important in the area. (Eades 1980; Davies-Adetugbo 1997.)

There are four common beliefs in the Yoruba religion: the belief in a Supreme Being, the belief in deities or lesser gods, the belief in spirits including ancestral spirits and others, and the belief in the power of magic and medicine. (e.g. Ojo, G. J. 1966; Opoku 1978; Hallgren 1988; Rinne 2001a.)

Descent is patrilineal among the Yoruba, but also bilateral. Even though the extended family is the basic political unit and the group that lends itself to the most effective co-operation of its members, bilateral kindred is also prominent at many points during the life of the individual, especially in times of marriage, illness, death and burial. Residence is usually patrilocal, authority is patriarchal, and after her marriage, a woman is considered to belong to her husband’s family. Her children belong to her husband and to his extended family. (Fadipe 1991: 134-45.) Polygyny was widely socially approved before the introduction of Christianity because of the strong Islamic influence. It has maintained its status as a form of marriage also today, especially in the rural areas (Fadipe 1991: 65). There are no reliable figures on the extent of polygyny among the Yoruba, but according to Simpson (1994: ix), one-third of marriage-aged men had one wife, and another one-third had two, and the rest had two or more wives in the 1960s. My observations from the research sites confirm that especially among the Muslims and the traditional religionists, polygyny is an indication of wealth, and much appreciated also today.

2.1 Dual Residence

Farming is the predominant occupation of the Yoruba, supported by crafts and trading (Fadipe 1991; Simpson 1994). Farming forms an interesting pattern of livelihood because of the dual residences, as the farmers have farm dwellings, but also houses in town (e.g. Eades 1980; Adetunji 1991; Simpson 1994). Although the historical impact of Yoruba urbanisation is somewhat similar to that of the northern parts of the country, there have been distinctive patterns in the rural-urban interaction among the Yoruba. Many towns have satellite villages and hamlets, the residents of which consider themselves belonging to the town (Eades 1980). Regardless of that, people spend most of their lives outside the towns in farming and in other rural activities. Adetunji’s (1991: 1381) observation about farmers going to their farms between Tuesdays and Thursdays and returning to town by Saturday evening is similar to my
observation at the field sites. A typical Yoruba farmer regards his farmhouse as a provisional or even a temporary dwelling, and finds his real home to be with his patrilineal kinsmen in the family compound in the near-by town, where most of the social, economical and religious shrines are located (Eades 1980).

However, during peak farming periods, people stay on the farm for weeks or months, with only occasional brief visits to town on some errand. The farmers are usually very attached to their farm work. (Adetunji 1991: 1381.) According to our observations, the variation between rainy and dry seasons determines where the family is located. When the dry season starts between November and December, people start to stay more in their town residences and by Christmas time, only few remain on their farms. People stay in town until February or early March and pay only short visits to the farm dwelling during that time. In February and March, it is time to start preparing the land for the growing and harvesting seasons that last until the next dry season in November. During that time, the town is merely inhabited by old men, senior wives, chiefs, ritual specialists and young children (Barber 1991: 48). Farmers pay occasional visits to the urban residences, especially whenever any festivals occur.

It is obvious that the distance between the town and farm dwellings also determines where and how people look for help when faced with problems of health and illness. In Adetunji’s (1991: 1381) study, a government health worker told that people did not like receiving treatments, such as injections that required their attendance at the health care centre for three or more days, but preferred to be given drugs which they could take with them to use on their farms. With traditional methods of curing, that was not a problem, since patients could visit their traditional healer at periods most suitable for them, or the healer could be called in. Observations at the research sites confirm the custom of combining various treatments at the same time. It seems that in the rural villages, it is a natural choice to turn to a local healer and use some homemade remedies as first aid or as a treatment method. Yet, while people are willing to turn to traditional healing when staying on the farm, they may be determined to go to a doctor when in town, where these services are more easily available. Furthermore, even if they would prefer to use Western medical services, they may also have a trust in traditional methods. Thus, both branches of medicine are used to complement each other.

---

3 In medical anthropology, two dimensions of sickness have been distinguished: the concepts of disease and illness. The diagnosis of disease is based on biomedical criteria. The concept of illness refers a to personal and cultural reaction to ‘perceived disease’, including the understanding of the experience of illness. Here, I will continue to use the term ‘illness’ when referring to personal experiences of health problems. However, the concept of sickness includes a more broad point of view. It refers to socially accepted local categories of the illness and the collective recognition and representation of the illness in the community in which the person lives. (Bierlich 1995: 504.)
3. THE HEALTH CARE SYSTEM IN NIGERIA

3.1 MODERN HEALTH CARE SERVICES

In Nigeria, the medical sector is recognised to be pluralistic, comprised Western medicine, traditional healing and the popular sector such as self-medication (Odebiyi and Pearce 1987; Okunola 1993; Pearce 1993), according to Kleinman’s (1980) sectored classification of health care services. The uneven distribution of health care services in Nigeria has been discussed a lot (Iyun 1988; Ogunbekun 1991), especially the regional, rural-urban and class inequalities in the ability to access health care services (Ityavyar 1988). According to recent state estimates, only about 35% of the population has access to modern health care services in the country (Akinkugbe and Salako 1995: 30). Most health care services are available only in the urban areas, while the rural areas are mainly without such services. Yet, Nigeria’s modern health care system comprised primary (primary health care), secondary (regional dispensaries) and tertiary (hospitals) levels of services. According to National health policy of 1988, the health care system has been planned to cover the main health problems of the country. However, the health care system has not yet managed to achieve or maintain equal health services for Nigerians. (Akinkugbe and Salako 1995.)

The history of Nigeria’s health care services dates back to the colonial time under the British rule (Ityavyar 1988). The modern health care services were established to provide for the medical needs of the European and other Western settlers in Lagos and other big cities. Local inhabitants were expected to manage with indigenous practices because many epidemic diseases were thought to be endemic among Nigerians. (Schram 1971; Hausen 2001.) When medical care expanded, the uneven distribution of health services continued. According to Ityavyar (1988), colonialism altered the mode of production, as well as the forms of medicine and health in Nigeria. Attempts to create public health care services evolved after World War II, due to the Colonial Welfare and Development Act. This was continued by the Ten-Year Plans for Development before and after Nigeria’s independence in 1960. Thus, even if Nigeria’s health care services have grown and expanded since then, there have not been any structural changes in the health sector.

The rural-urban inequalities are a concern not only because most people living in the rural areas have limited resources, but also because the services are often extremely poor because of a lack of basic funds for the whole system. There are only a few hospitals or health centres in the rural areas, and the small dispensaries may be staffed with only unqualified health personnel. These primary health workers or village health workers may have only a few months of clinical training. The use of inferior or expired drugs, and the lack of equipment are huge concerns. (Ityavyar 1988.) Health care centres may be run by nurses because the doctor has left for better working opportunities, or there
Water and Healing

has not been a doctor posted for many years (Ojo, K. 1990; HEPO 1999). Thus, the staff is only able to take care of minor ailments and injuries or to deliver basic medicines, and to offer some health education and maternal health care (Iyun 1988). This description is accurate also in the fringes of Ile-Ife. A more recent discussion on the state of health care in the Ile-Ife region has been published for example by Hausen (2001) forming another part of our research project.

3.2 TRADITIONAL MEDICINE

Traditional healing includes a wide variety of healers in Nigeria. Pearce (1989) distinguishes herbalists (oníseègùns), diviners (babaláwos), indigenous bone-sellers, indigenous pharmacists, indigenous psychiatrists, soothsayers, local Islamic healers, and traditional birth attendants who practice in rural and urban Nigeria (Pearce 1989: 924). The Aladura churches also belong to the traditional healing branch (Pearce 1993: 155). These churches belong to an independent Christian movement that has long traditions among the Yoruba. The churches are very strong in their healing ministry and are very aware of the evil forces and the spiritual tradition of the Yoruba (Ogungbile 1997). Many practices discussed here are common to the Aladura churches, such as the general principle of using water for healing, special soaps, bathing arrangements, and the concept of holy water.

The specialized herbalists, oníseègùns, are usually distinguished from the diviners, because they are said to rely merely on medical history and symptoms for diagnosis, but in practice, it is common also for them to have some knowledge on divination, witchcraft, or sorcery (Odebiyi 1989: 987; Simpson 1994: 93). It is widely agreed that the Yoruba traditionalists are reluctant or unwilling to start any undertaking without first consulting Òrùnmílà, the oracle god, as known by Ifá (Simpson 1994: 73). According to Idowu, Ifá is consulted for guidance and assurance in every situation in life, such as before a betrothal or a marriage, at successive stages in a man’s life, before a chief is appointed, and in times of crisis or illness (Idowu 1996: 5; 76). In general, in times of

---

4 The research project HEPECO (Environmental Health: Perceptions on Healthy and Health Care Services in a Nigerian Community) is a joint project of the Universities of Jyväskylä and Kuopio, Finland, and the Obafemi Awolowo University, Ile-Ife, Nigeria, funded by the Academy of Finland (1997-2000).

5 Especially in earlier times, it was regarded as important to confirm the suitability of a bride before a betrothal. Inquiries were made to Ifá concerning the moral and social qualities of the father and mother of the bride, and of other relatives. Inquiries were also made on whether any hereditary diseases ran in the family. After that, formal and legal betrothal of the girl to the boy was confirmed by the announcement of Ifá fo rê to fiancée’s family. A similar procedure was conducted in the fiancée’s kin. (See e.g. Fadipe 1991.)
serious trouble, a large population of the Yoruba consults a *babaláwo* or other traditional religious leader for guidance, and in many cases, this leads to the presentation of sacrifices to òrisà, one of the Yoruba gods. Traditional healers perform divination, but they may also discover the will of the òrisà through dreams or by foretelling what may happen. Dreams may enable a healer to tell which illness is ‘attacking’ a client and what should be used as a cure. (Simpson 1994: 74.)

In Yorubaland it is typical to have one or few traditional healers living in a village or in an urban compound. If not, a traditional healer, most commonly a herbalist or a diviner, is easily found within a short distance. The traditional healers of the community are already familiar with the client and his family, and they are usually aware of the holistic situation of the family. Thus, any illness is reflected on the situation of the whole family, not only the sick family member. Most healers operate on part-time basis, in addition to farming. They may have a special room for consultations, but many practice in their homes. Simpson (1994: 93) describes a typical healer’s ‘office’ in his fieldwork in the 60s, but it can still be used to describe a Yoruba healer in 2000:

“A healer sits all day on a dirt floor surrounded by eggs, eggshells, a large bowl containing a mixture of eggs and native medicine used in treating temporary sterility in women, some thirty ‘Star beer’ bottles which had been re-filled with liquid traditional medicine, baked bean cakes, roots which have been ground and mixed with honey or sugar, leaves, native soap... some certificates hanging on the walls....”

### 3.3 Popular Sector

In Nigeria, a wide range of self-medication, the popular sector, is practised, and the exchange of previously prescribed medicines between neighbours and relatives is common (Pearce 1993: 152). According to Simpson (1994: 128), it should be pointed out that ‘going’ to a traditional healer for treatment does not tell the whole story of the use of traditional remedies. Since many people prepare some remedies for themselves, the extent of the traditional and popular branches is very difficult to estimate. It is common that people, who purchase remedies at a pharmacy, also use other types of treatments for the same illness. Likewise, they do not obtain drugs for all illnesses, but may try other alternatives. This practice of ‘shopping around’ is a very common way of dealing with problems concerning health and illness in Nigeria.

---

*The Yoruba inhabit most of the southwestern and southeastern parts of Nigeria. The states of Kwara, Lagos, Ogun, Ondo, Osun and Oyo form the present Yorubaland, called so for centuries. Presently, the area has a total population of about 20 million. Ile-Ife, situated in the Osun State, is considered to be the centre of all the Yoruba. (Ellis 1966; Eades 1980; Laitin 1986; Akinjogbin 1992.*)*
Thus, the popular sector is comprised of lay practices and tools for any matter concerning health and illness. It also includes buying medicine or medical ingredients easily bought at the markets without a prescription that are later used to prepare new medicine. The use of such medicines is very common, and people decide to buy them based on their earlier experiences or advice given by a neighbour or a family member. (Whyte 1997.) Similarly, lay people generally regard water as a part of the human body fluids. The natural state of this balance tells that the person is healthy. Any disturbance in the balance between body fluids and water will lead to an illness or a disease.

Many researchers have discussed the prevalence of medical pluralism in health care in Nigeria (e.g. Adetunji 1991; Pearce 1993; Adetunji 1996; Davies-Adetugbo 1997; Jegede 1998), but they have not found explanations to what determines the people’s decision on how to be healed when faced with problems of health and illness. However, many researchers agree that the Nigerians are very flexible in choosing between the different branches of health care, and it is believed that all methods can be used simultaneously.

4. MISFORTUNE AS AN ILLNESS

It is said that the idea of health and healing is a family affair and is deeply rooted in the traditional African setting. An extended family or kin forms a group in the action process towards health. This group force is seen as a significant element in the healing process. (Pearce 1993: 155.) It is generally thought that many illnesses and diseases have a supernatural explanation that cannot be treated with Western medicine. Even though some of the ailments can be treated by biomedicine, a wide range of people’s constraints concern the parts of human life that cannot be reached by these tools. There can be either natural or supernatural causes for a misfortune. As African systems of thought are considered quite open (Janzen 1981), including natural and supernatural explanations, numerous choices can be accommodated and many methods can be used at the same time (Pearce 1993: 152; 154). However, many diseases are seen as messages from the ancestors or from the spiritual world. In the local way of thinking, a traditional healer can only interpret these messages.

In general, misfortunes are manifested as illnesses and diseases that need to be interpreted before the health problem that they represent can be solved. It is always a question of why it happened to me, or why now, especially if the causal connection cannot be seen and there is no evident reason for the disease. In case of prolonged diseases, such questions need further considerations. (Whyte 1997: 30.) Similarly, some selected sentiments of the Yoruba beliefs emphasize the world as being made up of many unseen forces:

“People have it within their power to bring harm and misfortune to others through magical means. Therefore, we must be careful in the way we treat each other. Health is precious to all of us. We have heard about germs and
nutrition, but if someone is after you with magic, it is mainly sickness or death that he will be able to send.” (Simpson 1994: xi)

According to the FGDs in my research, the following explanations can be given to misfortunes. First, the healers explain them as very concrete situations in a man’s life, such as the incident of a broken leg or a car accident on the road. Since car accidents are extremely common in Nigeria, many people have experiences of losing family members or suffering bad injuries, and a car accident represents an ultimate misfortune that a man can face in his life. Second, since a misfortune always has multidimensional influences on the whole family, other dimensions are being explained with supernatural elements. Therefore, a car accident may signify a message from the ancestors. The cause for such a misfortune is explained by some reasons within the wider family context, as the following example reveals:

“It is a sudden mishap. A person may have a family crisis that is evolved from some witches or wizards, thus this may prevent the whole family in progressing in life.”

4.1 CHARMS AND AMULETS AS PREVENTIVE TOOLS AGAINST A MISFORTUNE

To prevent a misfortune, people wear many kinds of charms and amulets. They may be carried visible or invisible as a necklace, or they can be worn around an arm, be hidden under clothes or kept inside a pocket. They can also be tied on the doors or doorsteps of houses, buried in the ground near a doorstep, a house or a shop, hung from the ceiling of a house, suspended in a pot over the door, or fastened to the walls of a house. Furthermore, a charm may be something to eat such as a combination of leaves, roots and other materials ground together, a concoction to be rubbed on the body, especially the head or the arms, a traditional medicine mixed with ‘native soap’ to be used for washing or bathing, a silver ring with mystical signs engraved on it, or some medicine that is inserted into a necklace, a waist band or a bracelet. (Simpson 1994: 85.)

“We also believe in using charms which are tied around the waist, or around the arm. The one around the waist is called ighadi and the other around the arm is called ifunpa. When they are worn, the wearer will not feel tired no matter what the amount of work done or no matter what other harm is done on him.”

HEPF 1999/2.3

HEPF 1998/1.11
Many charms are used to offset evil forces, to nullify both old and new types of hazards, and to facilitate the gaining of desired ends. As Simpson continues, there are charms to be used in the curing of illnesses such as stomach-ache and headache, or in seeking a job, attaining prosperity, increasing one’s popularity, improving one’s luck, succeeding in love, getting one’s wife back, restoring peace among quarrelling wives, attracting customers to a shop, and passing examinations. (Simpson 1994: 85.) Charms are used as protective devices to prevent witches and evil spirits from entering a house or attacking a person, to prevent small-box, to insure against accidents such as the earlier mentioned motor car collisions, to nullify harmful attempts of enemies or sorcerers, and to keep thieves from breaking into one’s house. Usually one obtains a charm from a healer or a diviner after it has been specially prepared for the person or the family. After preparing the charm, the babaláwo usually presents an Ifa odú and asks Orunmila’s aid to make it effective for the purpose that it is prepared for.

In the FGDs of this research, we found out that a person is expected to gain a good and healthy life by wearing charms or by using them otherwise. Many of the healers emphasised that the charms were particularly effective against venereal diseases or for contraceptive purposes. Furthermore, it was reported that a charm might protect the owner from any infectious disease, even though others in the family or the compound would be infected.

The interviewed healers mentioned various taboos that concern behaviour, cleaning and food habits. A taboo may concern an individual or a family, but is usually shared by patrilineal family members. A wife may continue to follow her father’s taboos, while simultaneously adopting taboos from her husband’s family. Furthermore, taboos are usually revealed on an individual basis by divination at the initiation ceremonies of a cult or on other occasions. The taboos must be observed for life, even if one’s life situation changes (Simpson 1994: 65).

Breaking a taboo, concerning for example an amulet, takes the power away, or turns it against the person and thus causes special harm to the family. Furthermore, even though the healers interviewed agreed that water is the best medicine for treating certain misfortunes, it cannot be used in all cases. If the misfortune such as an illness is caused by a malevolent charm, which has been

---

9 Odù means a verse or a chapter in the Ifá poetry (Idowu 1996: 7). The Ifá system includes about 256 odùs which a babaláwo is supposed to learn by heart. Ifá is said to be a geometric type of divination. In learning Ifá odù, one starts with òpèlè, which is a divination chain with eight half nuts. When the òpèlè is thrown on the ground, the odù is indicated by the combination of the nut segments which fall “up” and which fall “down”. The diviner then quotes from the passages in the odù that he knows or that he thinks are appropriate for the occasion or the question that he has been asked and gives his interpretation. An alternative divination technique involves the use of sixteen palm-nuts that are placed in the palm of his left hand and grabbed with his right hand. Marks are made according to how many of them are in his right and left hand and interpreted accordingly. (Simpson 1994: 73.)
prepared with water, water in the healing process will turn the effect against the illness and cause it to become worse, or even kill the victim.

5. THE USE OF WATER IN PREPARING TRADITIONAL HEALING REMEDIES

It is common to use pure water as a constituent factor when preparing any kinds of medicine or medical tools. Water is also used when manufacturing tools and containers to prepare medicines. One healer reported about making a container out of the skin of an antelope (ígalà). The skin of an antelope is used for making a ‘pété’, in which a black soap ‘àwúre’ is made. The soap is later used to attract some benefits in life. The water used in this process must be specially treated to become holy water. For example, Simpson (1994: 9; 11) describes how some offerings are prepared for Òrúnmilà ceremonies. Sixteen leaves are collected from sixteen different plants, representing the sixteen palm-nuts used in Ifá divination. The leaves are arranged on the ground and an Ifá board is placed on them. After cutting and washing the leaves, a of bowl water is used to wash the objects that will be used when worshipping Òrúnmilà. Usually, the Ifá priest will bathe in that water before starting the rites. In another ceremony, the water from a snail and the blood of a pigeon are poured into water with some herbal leaves in it. Palm oil and shea butter are added and the Ifá emblem is washed in this water. The water is not thrown away, but is used for curing illnesses.

However, there seems to be some medicines that do not require water, such as some particularly wicked medicines, for example making a ring to curse a certain person. Certain diseases cannot be healed with water. This includes mental illnesses such as sudden madness, caused by witchcraft. Sudden madness is believed to be caused by bad water, either treated to become harmful or otherwise not suitable for use. The healers agreed that bad water refers to water that is somehow harmful or unsuitable for use. Sometimes the bad quality cannot be visually observed, especially if supernatural forces have caused the condition. Yet, bad water can also mean water that is contaminated, smells bad or has a colour that is not regarded appropriate for human consumption.

In general, all water that is used fresh must be clean and fetched from a flowing water source. The meaning of flowing water has been discussed in other publications of my research (Rinne 2001b). According to the findings, flowing water is regarded as the most pure water, and thus, flowing water is considered suitable for holy practices. Stagnant water is never used for medical purposes or divination practices. There are other aspects related to flowing water, such as the origin of the water, which are very important. Three sacred mountains are located in the heart of Ile-Ife. According to the Yoruba mythology, the world

10 HEPF 1999/4.4
was created on top of one of the mountains. Between these mountains runs a river. All rivers and streams in Yorubaland are regarded as sacred according to the river god Osun. However, a special status is given to the river and streams located in Ile-Ife, as it is considered the sacred place of the Yoruba.

In traditional healing, some of the medicines are boiled, but some of them do not need to be warmed or boiled. A very common herbal medicine is àgbó, common in both rural and urban areas and among educated and uneducated people (Pearce 1993; Koster-Oyekan 1999: 20). There are many variations of àgbó, but mainly it is used as a cold preparation (àgbó tutu) or as a hot/boiled mixture (àgbó gbígónó). It can be used on a regular basis by drinking it every morning, or otherwise once a week according to the instructions of the healer. (Buckley 1985: 43; Pearce 1993: 152.)

Àgbó can be used both internally and externally, or by adding it into bath water or spreading it on the skin. It is widely believed that àgbó will protect people from many kinds of diseases or misfortunes caused by evil spirits, but also from diseases by natural causes. (Buckley 1985: 43; Pearce 1993: 152.) Furthermore, similar to many other traditional medicines, àgbó is said to be able to neutralize the effect of a poison (e.g. a snake bite) the same way that water is used to put down on fire (Simpson 1994: 103).

The ‘native soap’ used in healing is prepared as a by-product of palm oil. A palm kernel is roasted and pounded and sieved to get oil. Wood ashes are put in a pot with a hole in the bottom, and water is poured on top of the ashes. Some cocoa pods are also added. Water drips through the hole. Palm-kernel oil and the dripped water are cooked together and coagulated into native soap. Water used in the preparation must be sacred. (Simpson 1994: 88; HEPO 1998/1-4; HEPO 1999.)

“Some of us use a specially made soap for them. It can be used also for children so that they would avoid measles. In case there are measles around us, some medicines and this soap are made for them, so whenever they contact any people with measles, they can not be infected with the disease.”

The black soap can be used in a variety of ways. In general, it is said to be able to wash off misfortunes, illnesses and diseases (Ogungbile 1997: 106). Many times the healers emphasised that it is usual for the healer to prepare a special soap for a particular case, depending on the life situation and the type of misfortune, such as an illness, of the client.

---

11 HEPF 1998/1.11
6. WATER IN HEALING

Water is used in various ways by the traditional healers. Water is used before the actual healing process when the healers consult Ṣẹ̀ àà to find out the reason behind an illness or any misfortune. The ceremony consists of incantations and sacrifices. After that, the healer will look into the water and find the answer. According to the traditional healer, it is possible to find out the nature of the illness by looking into water whether the cause is natural or supernatural or whether witchcraft is involved. It may also be possible to foresee how the healing will succeed.

6.1 IN WHICH AILMENTS CAN WATER BE USED?

Water is used in various stages during the healing process. During the FGDs, specific questions were asked about the diseases that water can be used for and cannot be used for. The healers told that water is used almost always, that is whenever a traditional remedy is prepared, as one of the ingredients. Yet, there are special occasions when water is regarded as especially useful, or as harmful or even dangerous. The cases when water is suggested to be used include different body aches, such as rheumatism, headache, and breast and neck pains. Many of the healers would also recommend water to be used in case of eye and ear diseases. Other diseases include diabetes (ाटोबे) and gonorrhoea (ाफोजी ाजा), but in these cases water needs to be mixed with some herbal mixtures. Furthermore, the procedure requires some incantations for the ancestors and spirits:

“Water is quite useful in healing. If somebody has stomach disorder, one will just take some water, speak some incantations into it, and give it to the sick person. The disorder will then vanish.

Also, if someone is feeling dizzy, we sprinkle water on him and then he feels okay.”

As the example shows, in most cases clean water alone is not regarded as sufficient, but an essential part of the mixture. Rituals and incantations are also needed, as well as some food or animal sacrifices. Water may can be sprinkled on a person, and in addition some goats or hens may be sacrificed.

All healers agree that water is of great importance in healing. Some of them claim that water is not needed for preparing the medicines, that it is sufficient to

12 HEPF 1999/4.4
13 HEPF 1999/2.3; HEPF 1999/4.4
use water when the actual healing process is going on. However, using water may ensure and increase the effect of the medicine.

“All medicines require the use of water. It may be used in preparing the medicine or in using the medicine. For example if some medicines are prepared in a powdered form (agùnmù) the user will need water to get it into the body.” \(^{14}\)

One of the healers in the FGDs described a much-feared situation among the Yoruba (ògún òro). The situation of ògún òro means a sudden attack in which a person cries ’from his sleep’ completely confused. To the healer, this represents an attack of the devil or wicked people, and the evil can only be cured with water and some incantations. The healer emphasised that this example is only for short mental disorders, and that water cannot be used in a similar way for long-term mental disorders \(^{15}\).

Healers often think that water has the capacity to purify and to eliminate the illness. For example, a patient with tuberculosis may get his cough healed when taking medicine that includes water. It is believed that water will flush away the disease. Another example describes a patient that is losing weight:

“There are times that some people will just be losing weight and get thinner and thinner, such people are treated mainly with water. It is also believed that water is part of the body fluid that makes the blood, so water works with the blood in the body.” \(^{16}\)

“Also, after exhausting the herbs and hospital treatment that have not averted the illness, the oracles are contacted. And, after consultation with the spirits, the treatment will be made that is known to us. For even a very serious ailment, the treatment might only be water. Water is what will heal.” \(^{17}\)

7. THE GODDESS OF OSUN AND THE MEANING OF BATHING

In the Yoruba religion, gods are categorised as being of natural or functional origins. One of the natural gods is Osun, the daughter of Yemonja (Awolalu 1981: 46). Yemonja is regarded as the goddess of all water and her daughter is regarded as the goddess of rivers and streams (Hallgren 1988: 94). It is believed that the Osun god can cause a river to dry up or to overflow, and she may even

\(^{14}\) HEPF 1999/4.4

\(^{15}\) HEPF 1999/4.4

\(^{16}\) HEPF 1999/4.4

\(^{17}\) HEPF 1998/1.11
attack people by making them drown when they try to cross a river. She is believed to be a fertility goddess, giving the joy of childbirth to barren women and healing the sick by means of her medicinal waters (Awolalu 1981: 47). Yet, whenever she is irritated and enraged, she may fill a woman’s stomach with water so that she would look pregnant when she is not. She can also cause difficulties in childbirth. Furthermore, many diseases that are known to be caused by bad water are regarded to be caused by Osun as punishments for irritating the god. (Simpson 1994: 27.) It is further stated that a pot filled with ‘sacred’ water from any river is to be given to barren women begging for children from Yemonja or Osun. A similar pot can also be given to children that were born as a result of some sacrifices or rites for the river gods. (Awolalu 1981: 46.)

Because of the special qualities and capabilities of the river water in Ile-Ife, bathing is generally suggested as a healing method for various illnesses or difficulties, such as headache, stomach-ache and other stomach disorders, a sudden increase in body size, a sluggish child, or general bad luck in life:

“This is a situation where an individual is always having a bad luck, having any kind of misfortune. If such a person goes for such a bath, he or she will start having good luck in life.”

It is very common to use flowing rivers for such healing baths. While bathing, the person washes off the misfortune into the flowing stream and is released from it.

For interpreting dreams, a healer may also suggest taking bath with soap-containing medicine, including a secret mixture of traditional medicines. The soap for such a bath is usually black soap (Simpson 1994: 75). Furthermore, baths are used for blessings, for example when a healer is discharging a patient who has been mentally ill. This simple procedure consists of bathing with a specially prepared medicine and blessing the patient by saying that the evil forces should depart and never return, nor afflict his kinsmen. Another blessing procedure includes some medicine that is mixed with water in a big pot. Symbolically, the victim is called from inside the pot of water, and when he appears, he is stabbed with a knife or an axe that has been treated with medicine. (Simpson 1994: 82-83.)

The Yoruba consider the connection to the ancestors as very strong, and people experience the presence of their ancestors in their everyday life. It is very important to take good care of the local stream to show respect for the forefathers. If the connection is disturbed, the river god would be exasperated and cause people illness or other suffering. The close connection between the people and their forefathers confirms the special status of the local river and its streams in relation to other rivers. Earlier experiences have confirmed the

\[18\] HEPF 1999/2.3
medicinal power of the river. Thus, people continue to believe in the medicinal power of river water.

7.1 SPECIAL ARRANGEMENTS FOR THE BATHS

It seems that each healer performs his healing practices in his own typical way. The time and the location have a special meaning in every healing incident, especially since the healer aims to mainly influence the spirit that is causing the illness. Baths are a much used healing method. Bathing may take place in specially prepared water, meaning that the water has been prayed upon (Ogungbile 1997; Koster-Oyekan 1999: 18), or at a special location suitable for bathing. Special type of sponges can also be used. Therefore, to best gain the attention of the sprits and ancestors, the healers prefer a confluence of rivers or streams, or a flowing stream. In case there is no confluence of streams close by, a road conjunction is an alternative. (Buckley 1985: 145.) This was also mentioned in the FGDs many times:

“There are ways in which the baths are used, some herbs are gathered into a big pot, and he or she will be taken to a T junction and then have the bath there late at night.”

If the illness is more a chronic kind, he will be asked to go and have a bath on a stream; in this case the problem may be due to some charms by wicked people. The patient will be asked to go and to take a bath at the confluence of two rivers.”

The confluence of streams or road junction offers an interesting point of discussion. If the healer considers the misfortune to be caused by evil sprits, this is the place where these evil sprits are best contacted. For example, Simpson (1994: 83) mentions crossroads in many connections. It is common to use medicine at the crossroads, and when the partner of the victim appears, he is injured by the medicine.

In addition to the location, the timing and the quantity of bathing are also relevant. For some ailments, one or few times is not enough, but the healing requires several sessions. For example, for an injured leg the treatment may require at least five times of bathing in the nearby stream. In another case, it may not be enough to take several baths, but to take them in several different

---

19 HEPF 1999/2.3

20 HEPF 1999/4.4

21 HEPF 1999/4.4
places. One example was that the required baths should be taken in seven different streams to solve the misfortune.  

7.2 BATHING DURING PREGNANCY

As was mentioned earlier, the god Osun also occupies pregnancy and fertility issues. Whenever irritated, she may fill a woman’s stomach with water and prevent her from becoming pregnant. On the other hand, she is often contacted as the ultimate force in solving problems connected to fertility and pregnancy. If a woman has had such problems before, she may turn to Osun in the early stage of pregnancy for guardianship (Simpson 1994: 27). According to Simpson (1994: 100), sterility and temporary infertility are generally believed to be caused by witchcraft, impure blood, and worms in the stomach or a ‘hot uterus’. It can also be caused by the presence of dirt in the woman’s blood or in the reproductive organs, or by dysentery. The most common recourse for infertility in women is an appeal to give offerings to one of the òrisàs. It is usual to have older female family members present at the time of the offering.

Thus, the main ‘tools’ against problems of fertility are connected to bathing. Young women go to local rivers and streams to give sacrifices when they wish to get many children. It is said that it makes barren women fertile, and has healing power for the sick.  

This is the reason why many women bathe during their pregnancy. During the baths, some incantations can be said to reinforce the effect, or special soaps and other herbal preparations can be used. Sometimes the healers do not tell all their reasons for suggesting special baths for pregnant women, since they have secrets that only they are able to see when looking into sacred water. As one healer told, “it is very common to ask a pregnant woman to take a special bath. The healer usually has his reasons, but he does not tell them to the pregnant woman.”

7.3 BATHING AN INFANT

It is regarded as very important to bathe the infants immediately, before any other procedures follows. This is a heavily symbolic bath. With the bathing, the newborn baby is accepted as a new member in the family. The importance of this particular bath was confirmed in the FGDs and the individual interviews.

---

22 HEPF 1999/4.4

23 HEPF 1998/2.5

24 HEPF 1998/2.1
during my fieldwork. Women emphasised that they would not leave their children without the first bath under any circumstances.

Usually, some palm oil is added to in the bathing water, and black soap is also used. Some water is sprinkled on the baby’s head and body. This introduces the newborn baby to the family and to the water that is used among the family members (Davies-Adetubgo 1997). The first bath of a newborn is seen as the key connection between the baby and the whole family. Forgetting this ceremony will lead to serious problems later in life, such as affect the fertility of the child in his or her adulthood, especially in case of male infants. In addition to problems with fertility, a child may become deaf or disabled later in life.

8. DISCUSSION

Water as a basic element of life and as an essential factor in the Yoruba religion symbolises the man’s relationship to God, the lesser gods, and to the whole universe. Since the Yoruba believe water to be a symbol of force and strength, they regard it as more powerful than fire, another important element in the origin of life according to old mythologies. Comparing the forces of water and fire, water will overtake fire in all cases (Hallgren 1988: 95; Simpson 1994: 103). Thus, water is regarded as a symbol and a tool, able to influence all misfortunes and matters dealing with well being and health.

According to the examples presented here, water is regarded as an important part of both preventive and curative herbal remedies or other mixtures. The most common type of herbal remedy is àgbó; an herbal mixture widely used in both urban and rural areas, and among Christians, Muslims and Yoruba religionists. It is used to prevent various kinds of misfortunes, as well as to cure and alleviate existing problems of both natural and supernatural causes. It is important to understand the symbolic role that water has when aiming for safer water and sanitation in rural and urban areas.

Two particular aspects are related to the use of water in healing procedures. Water can be used as a clean and fresh material by itself. In the FGDs, the healers emphasised the natural characteristics of cool and fresh water, sometimes considered to be more effective than the other practices conducted during the healing process. As the water god (Osun) is believed to have power over the god of fire (Ogun), the strong relationship between life and water is emphasised. Since life would not be possible without water, it is regarded as the first and the most basic element of all life. (Simpson 1994: 103.)

Secondly, water can be used after it has been treated to become holy or sacred water (Ogungbile 1997). Certain rituals and incantations are required before water is considered sacred for healing purposes. Drinking concentrated water will cure certain ailments or diseases (Ogungbile 1997: 99), and often water is mixed with some other ingredients or parts of animals.
The symbolic role of water is present in everyday life, for example in matters related to fertility. The convincing history and present experiences in such problems have reinforced the local knowledge on the power that water has over fertility. The importance of the relationship between ancestors and gods is hard to deny when a woman has finally been blessed with children after various treatment methods by both Western and traditional healing practices.

It seems that the interest towards indigenous healing practices such as traditional healing, faith healing and local home remedies may even be growing (Pearce 1993), in spite of attempts to support the existing modern health care services in present Nigeria. The special role of traditional healing and the healers is especially evident in the rural areas, where many health problems are regarded as punishments by ancestors or evil spirits even today. These interpretations are evidently important, despite of the explanations of modern medicine. How the constraints of health and well-being are interpreted is an interesting challenge for the Western medical branch. The local governments aim to reinforce the prevailing health care services and are even launching new programmes due to the political changes in Nigeria, and combining both branches of medicine has become an important current issue (Osun State... 1998).

As I compare my observations to the earlier study on the traditional Yoruba healers by Simpson (1994), I find many similarities in the traditional healing practice in general. The principles and practices of Yoruba healing among the interviewed traditional healers are much the same today. Yet, as my fieldwork covered only a short period of time in the late 1990s and Simpson’s fieldwork is from the 1960s, huge social and economical changes have taken place in the whole society. Many researchers agree that the generally negative opinion towards traditional healing has declined in today’s society. Even though traditional healing still has a strong role in rural communities, there is also a tendency to regard it as backward, suspicious and even dangerous, especially among people that wish to use modern health care services more, as also Pearce’s (1989) study indicated. There is now a more clear distinction between the concepts of illness and diseases; diseases are to be cared by modern methods and illnesses by traditional healing and religion. People turn to modern health care services when faced with an evident biomedical injury, but they will simultaneously meet a traditional healer, to find out the final reason behind the incident or the family crisis. Therefore, I believe that the religious dimension of traditional healing has even strengthened and reinforced the feeling of cultural unity in the communities in today’s unstable political, economical and social conditions. The religious intensity that people have is a strong indication of this, especially when some of the traditional healing power is found in strong religious movements that combine Christianity and ancient Yoruba culture.
ACKNOWLEDGEMENTS

I am grateful for the supervisors and the whole ENHICA (Environment, Health, and Information Activities for Communities in Africa) network of the Universities of Jyväskylä and Kuopio, Finland, and the Obafemi Awolowo University, Ile-Ife, Nigeria. I also want to thankfully acknowledge all people involved in the project, especially the healers who gave their time to this research. This research has received funding from the Academy of Finland for three years (1997 - 2000).

REFERENCES


Adetunji, J. A. 1996.

The Cradle of a Race, Ife from the Beginning to 1980. Port Harcourt: Sunray Publications Ltd.


Yoruba Beliefs and Sacrificial Rites. Essex: Longman Group Limited.

Barber, K. 1991.


Bierlich, B. 1995.

Buckley, A. D. 1985.

Nordic Journal of African Studies

Dawson, S., L. Manderson, and V. Tallo (eds.) 1993.

Eades, J. S. 1980.
The Yoruba Today. Cambridge: Cambridge University Press.

Ellis, A. B. 1966 [1894].
The Yoruba-Speaking People of the Slave Coast of West Africa. Oosterhout N. B.


*Patients and Healers in the Context of Culture.* Berkley: University of California Press.


Ojo, K. 1990. 

*Primary Health Care in Nigeria.* University of Ibadan, Department of Sociology.


Opoku, K. A. 1978. 

Osun State AT7 1998. 
Renne, E. P. 1996.  
Schram, R 1971.  
*A History of the Nigerian Health Services.* Ibadan: Ibadan University Press.  
*Yoruba Religion and Medicine in Ibadan.* Ibadan: Ibadan University Press.  
Sudarkasa, N. 1986 [1970].  
FOCUS GROUP DISCUSSIONS

HEPF 1998/1.11
HEPF 1998/2.1
HEPF 1998/2.5
HEPF 1999/2.3
HEPF 1999/4.4

FIELD OBSERVATIONS

HEPO 1998/1-4
HEPO 1999