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The insufficient formulation and vagueness of the definition 'Traditional Health Practitioner' as included in the Traditional Health Practitioners Act (Act No 22, 2007) of South Africa

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RESEARCH

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ABSTRACT

Background

The main focus of the Traditional Health Practitioners Act No 22 (2007) is the regulation of traditional healing in South Africa. The role player who has to deliver this traditional health service to the public is the statutorily recognized *traditional health practitioner*. However, thus far the precise health practice offered, training and the practitioner's role as a healer in the society, have not been clearly defined. The various definitions and descriptions in the literature of the identity of the traditional healer are contradictory, making the formulation of a single definition and meaning impossible.

Aims

The study aimed to determine a definition for *traditional health practitioner*.

Methods

This is an exploratory and descriptive study in line with the modern historical approach of the investigation and review of the available research. The emphasis is on using documentation like articles, books and newspapers as primary resources to reflect on everyday thinking and opinions around the identity of the traditional healer. The findings are represented in narrative format.

Results

The Traditional Health Practitioners Act's regulations, as embedded in its 52 Sections, create a legal framework of definitions. One specific definition outlines what is meant by the *traditional health practitioner*. This definition includes four sub-types of healers, namely the diviner, herbalist, traditional birth attendant and traditional surgeon. Various other names for and types of traditional healers seem to exists outside the Act's statutory definitions. It also seems as if the practice scopes, training and methods of diagnosis and treatments of these different healers are not uniform.

Conclusion

It seems that the legal definition of a traditional health practitioner, as offered by the Traditional Health Practitioners Act No 22, is vague and insufficiently formulated. This shortcoming frustrates the intention of the Act to make the traditional health practitioner the exclusive role player who has to deliver a traditional health service to the public.

Keywords

Afterlife, health establishment, medical doctor, medicine man, traditional doctor, traditional health practitioner, statutory

What this study adds:

1. What is known about this subject?

Literature bears evidence of different names to describe the traditional healer. There is no uniform understanding of this concept.

2. What new information is offered in this study?

There seems to be many more types of traditional healers than the four sub-definitions of the Traditional Health Practitioners Act No 22.

3. What are the implications for research, policy, or practice?

There is confusion in South Africa about who can and may call themselves traditional health practitioners. This will jeopardize the implementation of Act No 22's.

Background

The primary intention of the Traditional Health Practitioners Act (Act No 22, 2007) is to regulate traditional healing in South Africa. The exclusive role player who has to deliver traditional health services to the public in terms of this Act is the *traditional healer*, called *traditional health practitioner* in the Act. This new term implies that the traditional health practitioner is now statutorily recognized as a health professional, similar to the medical practitioner. He or she will in time be allowed to practise this trade as a full medical partner in the formal health sector.[1]

When a new category of health practitioners apply for recognition to the Ministry of Health, these practitioners must offer evidence that their training has been established for many years, that it has a certified academic training system in place, that there is a need for and acceptance of these services and that the future continuation of the health profession is viable and sustainable. The statutory recognition of psychologists in the 1970s in South Africa is an excellent example of a successful application. A statutory mandate was only granted after the psychology fraternity offered constructive evidence, stretching over 50 years, of professional training courses executed by qualified staff at various South African universities and the existence of recognized professional programmes. This was supplemented a guarantee that the identity and entity of 'psychologist' has been established for many years and that the definition of a psychologist is familiar to the public and other health professionals. It was not an effort to register a range of unknown psychology types with names, training and scopes of practice that have never been described in psychology literature or that are unknown to the average citizen or to existing statutory health practitioners.[2–8]

Another excellent example of a clear definition of a health practitioner is that of the medical practitioner. The South African and international public and other types of healthcare providers all have a very clear and precise understanding of the definition of a *medical practitioner,* so much so that the courtesy title *doctor* has become embedded in the definition. Names such as medical doctor, general practitioner, surgeon and physician are synonyms of medical practitioner; meaning a health professional who is comprehensively and specifically trained to deliver a high level of comprehensive medical services and who is competent at all time.[2–6]

One can assume that the lawmakers conducted an in-depth study of traditional healing before the definition of the traditional health practitioner was formulated and written into the Traditional Health Practitioners Act No 22 to establish statutory recognition. In supporting the definition, one can assume that the training, competence and the practice scope of the new traditional health practitioner were researched in depth and confirmed. This would enhance the use and acceptance of the term by the public and will help it enter the health establishment to facilitate cooperation with the other health practitioners.

The aim of the study was to determine if the definition *traditional health practitioner* denotes a single practitioner's identity and entity and if it reflects a comprehensively skilled and competent professional in traditional healing. The statutory profiles and development histories of the psychologist and medical practitioner are used as guidelines to test the descriptiveness of the definition in the Traditional Health Practitioners Act 22 (2007) and to probe the comprehensive practise and know-how embedded in the definition.[2–6]

Method

This study was done by means of a literature review. This method entails building a viewpoint based on research evidence. This approach is used in modern history research where information is scarce. The databases used were EBSCOHost, Sabinet online and various contemporary sources like newspapers and reports for the period 2003 to 2014, articles from 1993 to 2016, books for the period 1990 to 2013 and official documents covering the period 1999 to 2015. These sources reflect on opinions, viewpoints and thinking on the definition of the *traditional health practitioner*. The research findings are offered in narrative

form.[9,10]

Results

In light of the envisioned professional role and practice rights of the traditional health practitioner in the healthcare establishment, it is of utmost importance to determine a definition for *traditional health practitioner.* It is also pertinent to establish which training and skills and what practice scopes are embedded in the definition as described in the Traditional Health Practitioners Act No 22. An evaluation of the Act's various definitions describing the traditional healer can elucidate this matter.

The statutory definition of the traditional health practitioner in terms of Act No 22

The person of the *traditional health practitioner* is prominent in Section 1 of the Traditional Health Practitioners Act No 22 (2007). This definition only reflects the single descriptive name *traditional health practitioner*, which refers to a person to be registered in one or more of four categories or sub-types of traditional healers. This description entails an immediate conflict with the definition of the medical practitioner, which does not include sub-categories of medical practitioners in its definition. The definition of the traditional health practitioner is purely an umbrella description and it is superficial and misleading. As the definition appears in the Act, it fails to stipulate who the traditional health practitioner really is. Legally and theoretically, the definition is only applicable when the healer is registered for all four the sub-categories at the same time. It also fails to define the scope of practice, training and the diagnosis and treatment approach of the traditional health practitioner. This incomplete definition compounds the registration problems with respect to the approximately 200,000 traditional healers. This presently unknown identity will surely also neutralize any cooperation within the healthcare sector.[1]

The statutory definitions of the four sub-groups of traditional health practitioners in terms of Act No 22

There are four sub-groups of traditional healers that can be registered under the umbrella term traditional health practitioner. They are in fact the primarily role players in the delivery of the intended traditional health services and not the traditional health practitioner as reflected in the Traditional Health Practitioners Act No 22 (2007).[1]

Sections 19(1) (c), 20(1) to 20(5), 47(f) (i) of the Traditional Health Practitioners Act No 22 of 2007[1] identify the four types as follows:

1. *Diviner*, meaning a person who engages in traditional health practice and who is to be registered as a diviner;
2. *Herbalist,* meaning a person who engages in traditional health practice and who is to be registered as an herbalist*;*
3. *Traditional birth attendant,* meaning a person who engages in traditional health practice and who is to be registered as a traditional birth attendant*;*
4. *Traditional surgeon*, meaning a person to be registered as a traditional surgeon.

The Traditional Health Practitioners Act No 22 again fails to describe the practice scopes, training and methods of diagnosis and treatment of the four categories in the descriptive wording of the four definitions. The description merely tries to associate the diviner, herbalist and traditional birth attendant with the definition traditional health practitioner with the wording "engage in traditional health practice" as reflected in Sections 19(1) (c), 20 (1) and 20 (5).[1] This wording is absent from the description of the traditional surgeon. The Traditional Health Practitioners Regulations 2015[11] adds the following phrase to the description of the traditional surgeon: "as a circumcision practice and to be involved in the initiation schools".

Other official definitions of the traditional health practitioner in terms of Act No 22

Other names allowed in terms of Section 49(1) (e) of the Traditional Health Practitioners Act No 22 in the place of the umbrella name *traditional health practitioner* seems to be *traditional healer* and *traditional health doctor*.[1] These two official descriptions seem to be of limited value at the moment and only complicate the situation, seeing that they are synonyms for the term traditional health practitioner.

Other common, but non-statutory names used for traditional healers

Literature shows various other names for traditional healers in terms of abilities and tribal uses that are not mentioned in the Act. Some of these names are synonyms for existing names, while some describe unique types of healers.

These names are *ngaka chitja* (herbalist), *ngaka ea litaola* (diviner), *ngakana-ka-hetla* (learner), *Mathuela*, *Moapostola* and *Pentecostal faith healers*.[12] Other general names for the *diviner* are *sangoma* and *diagnostician*, while certain tribes identify the diviner with names like *izangoma* (Zulu), *amagqirha* (Xhosa), *ngaka* (Northern Sotho), *selaoli* (Southern Sotho), *n'ango* and *mungome* (Venda or Tsonga). The *herbalist* is also generally named *inyanga*. In the Zulu culture they are known as *inyango*, while the Xhosas call

them *ixhwele* and the Swahilis call them *mganga*. There are Christian practitioners also, called *faith healers* or prophets (known as *umthandazi* in Nguni and *umprofiti* in Sotho). The traditional *birth attendants* are also known as traditional midwives or *ababelithisi*, while the *traditional surgeon* is known as *ingcibi*.[1,13–22]

Gumede's various doctors of traditional healing

The above-mentioned list of names goes further. The well-known South African traditional health expert, Gumede[23], identifies many other types of traditional healers (whom he calls specific "*doctors in traditional healing"*). The Traditional Health Practitioners Act No 22 fails to specify the different categories. According to Gumede, each healer's group has its own function, with some dovetailing and overlapping.

Gumede[23,p51-2,77-80,85,92,99,107-9] identifies 20 types of traditional healers, each with a unique name:

I Destructive and evil
  (1) *Abathakathi* wizards
  (2) Witches
II Diagnosticians or Diviners
  (1) Izangoma, with types:
    (a) *Zamathamba* (Bone throwers)
    (b) *Zehlombe* (Hand clappers)
    (c) *Zezabhulo* (Stick diviners)
    (d) *Zegithupla* (Thumb diviners)
  (2) *Izanusi* (The smellers)
  (3) *Abalozi* (Ventriloquists)
  (4) *Amandiki*
  (5) *Amandawu*
III Therapists
  (1) Medicine men (*Izinyanga zokwelapha* and *Izingedla*)
  (2) Herbalists (*Izinyanga zamakhambi* or *zemithi*)
  (3) Midwives (*Umbelethisi*)
IV Specialists
  (1) Sky herds (*izinyanga zezulu*)
  (2) Rainmakers (*izinyanga zemvula*)
  (3) Military doctors (*izinyanga zempi*)
  (4) Disease specialists (*inyangas*) with types:
    (a) Chief special physicians
    (b) Heart specialists
    (c) Kidney specialists
    (d) Chest specialists

Mbiti's medicine man and his other traditional healer types

Mbiti[16] offers further insight into traditional healer types. His book *Introduction to African Religion* does not make reference to the three sub-types of traditional healers of *herbalist, birth attendant* and *traditional surgeon* as the Traditional Health Practitioners Act No 22 (2007)[1] does, nor does he refer to the term *traditional health practitioner*. He refers incognito to the Act's herbalist as a *medicine man,* while he clearly, in addition to the *medicine man*, identifies the *diviner, medium, seer, ritual elder, religion leader, rainmaker* and *priest*. To a great extent his definitions of the different healers/religious practitioners are, like the definitions of the Traditional Health Practitioners Act No 22, also non-informative and contradictory and only contributes to a further confusion about the term *traditional health practitioner*. On the other hand, his definitions offer some useful descriptions of scopes of practice, treatment approaches and diagnoses.[16]

Mbiti's[16,pp151,155-6] definition of *medicine men* says the following on this person's scope of practice, diagnosis and treatment approach:

> "They carry out the work of healing the sick and putting things right when they go wrong. Their knowledge and skills have been acquired and passed down through the centuries; they are the ones who come to the rescue of the individuals in matters of health and general welfare. Major illnesses and troubles are usually regarded, treated and explained as religious experiences, while minor complaints like stomach upsets, headaches, cuts and skin ulcers, are normally treated with traditional medicines.
>
> In persistent and serious complaints, the medicine man has to find out the religious causes of such illness or complaint which is usually said to be magic, sorcery, witchcraft, broken taboos or the work of spirits.
>
> The medicine man prescribes a cure which may include herbs, religious rituals and the observance of certain prohibitions or directions. These measures also involve religious steps and observances. Therefore, the medicine man serves as a religious leader, who performs religious rituals in carrying out his work. Some *medicine men* are also the priests of their areas. They pray for their communities, take the lead in public religious rituals, and in many ways symbolize the wholeness or health of their communities.
>
> They deal in medicine, which means much more than just the medicine which cures the sick. It is believed that their medicine not only cures the sick, but also drives away witches, exorcizes spirits, brings success, detects thieves, protects from danger and harm, removes the curse, and so on."

About the *diviners*, *mediums* and *seers*, Mbiti[16,pp158-9] writes that these persons often work with the *medicine men* and they may even perform the duties of a *medicine man*:

- *Diviners* normally also work as *medicine men* and they deal with the question of why something has gone wrong. They can tell who may have worked evil magic, practiced sorcery or witchcraft against the sick or the barren, which spirit may be troubling a possessed person, what it wants and what should be done to stop the trouble. They discover the unknown by means of pebbles, numbers, water, animal entrails, reading the palms, throwing dice and many other methods. Sometimes, they get in touch with spirits directly or through the help of mediums. Diviners have knowledge of how to use some of the unseen forces of the universe.

- *Mediums* are people who make contact with the spirit world. They are often women and they are attached to medicine men or diviners. They can contact spirits at will, normally through ritual drumming, dancing and singing until they become possessed without being aware of it. Under possession they may do things that they may not do when their normal selves and they may communicate with the spirit world. Some mediums are possessed by only one particular spirit. They are said to be 'married' to it. Others may be possessed by any spirit. During their possession, they speak in a different voice and some of them may speak languages that they do not otherwise know. The diviner, medicine man or priest who is in charge of the medium, is then able to interpret what the medium is saying. Most of the communication through a medium comes from the spirit world to human beings, people rarely have messages to deliver to the spirit world. The medium tells people where to find lost things, who may have bewitched a sick person, what types of rituals and medicine are necessary to cure people's troubles, whether an intended journey will be a success or not, which of the living dead may have a request to make and of what kind, and many other things.

- *Seers* are people who are said to have natural power by means of which they 'see' certain things not easily known to other people. Sometimes they foresee events before they take place. On the whole, there is no special training for seers. They are often people with foresight and insight into things. It is also possible that some receive revelations through visions and dreams, in addition to being able to use their intuition. Others have the ability to receive information through forces or powers not available to common man. Seers may be either men or women.

Traditional surgeon

Regarding the sub-category *traditional surgeon,* the Traditional Health Practitioners Act No 22[1] again does not offer a description of its functions and roles. Nor do the writers Gumede[16] and Mbiti.[23]

The only reference to the practice and functions of the traditional surgeon in the literature up to 2016 comes from a group of South African scientists and public health experts. In a less flattering remark about the abilities of the traditional surgeon in the *South African Medical Journal* (SAMJ) of August 2014, they call for the banning of unsterile traditional male circumcision practices by traditional surgeons. These practices often cause death among the young men.[24]

It was only in 2015 that the proposed Traditional Health Practitioners Regulations No 1052 (2015)[11] officially referred to the traditional surgeon as a circumcision practitioner involved in initiation schools. This addition to the Traditional Health Practitioners Act No 22 will be valid as of 2016.[1]

Discussion

It is clear that the various types and sub-types of traditional healers differ greatly and are sometimes quite distinct (including their methods and techniques, diagnosis and treatments, and their traditional formulations, muti and medical concoctions). The above analyses, evaluation and discussion shows that defining the *traditional health practitioner* is much more complex than what the Traditional Health Practitioners Act No 22 (2007) reflects in its definition.[1,11,16,17,23,25–27]

Literature also reveals that the South African Ministry of Health itself acknowledges that there is a variety of healers that can confuse classification. They also admit that no groundwork has even been done to establish systematic approaches to the categories and their specialities. The legislation pertaining to traditional healers should make allowances for this. Lawmakers should take into consideration that the various undescribed categories of traditional healers could differ dramatically in functioning and skills from the statutory defined traditional health practitioner and its four sub-types of healers. These differences can even occur from region to region and clan to clan. It is clear that this differentiation should have been made when statutory recognition was bestowed on traditional healers in terms of the Traditional Health

Practitioners Act No 22 (2007). Furthermore, the training of these types and sub-types must be characterized by the institutionalization of standardized training and qualifications before any trustworthy definition of the *traditional health practitioner* would be possible.[17,28,29]

The name *traditional health practitioner,* as reflected in the Traditional Health Practitioners Act No 22 (2007), is defined in English. The same language approach was followed with the four categories of healers in the descriptions[1]. Considering the South African Constitution's recognition of cultural uniqueness, these five legal definitions in Section 1 of the Traditional Health Practitioners Act No 22 do not meet the Constitution's requirements of language and individual (cultural and tribal) rights. It also fails to acknowledge that each of the four official categories of traditional healers can be sub-divided into various other sub-types of healers with unique practice approaches, beliefs and customs, perhaps exclusive to a certain tribe or clan, region or group, as described by Gumede[23], Mbiti[16] and Pretorius.[17]

First, traditional healthcare professionals have failed to provide evidence of their development. South African psychologists provided proof of 50 years of development to get statutory recognition as a health profession. Second, they have failed to thoroughly establish the identity and entity of the traditional health practitioner over years. They have not created an understanding of the definition of the traditional health practitioner with the public and among other statutory recognized practitioners like the medical fraternity that acknowledges the medical practitioner.[2,5,6]

Strength and limitations

The research clearly shows that the Traditional Health Practitioners Act No 22's statutory recognition of the entity *traditional health practitioner* is inappropriate and that the terminology is misleading.

A country-wide study of the various types of traditional health practitioners and workers, with a focus on their work, training and education and practitioner names, could aid the development of a clear and understandable definition and description.

Conclusion

It is clear that the present-day definition of the *traditional health practitioner* and the definitions of the four sub-categories of traditional healers as described in the Traditional Health Practitioners Act No 22 (2007)[1] is incomplete, vague and misleading. It had failed the main aim of the Act, namely to define the profession *traditional health practitioner,* especially regarding its scope of practice. About 200,000 (or more) healers are awaiting registration. Describing each of the four subtypes or the many other types referred to in the literature, in terms of the Traditional Health Practitioners Act No 22 (2007), is going to take immense input and time. It will be impossible for the Interim Council to declare ±200,000 healers (of various healing, cultural, training and experience backgrounds) fit to be registered within the present classification, especially if this is expected in a short period of time. The Regulations No 1052 (2015)[11], which is an effort to provide clarity on registration pathways for future traditional healers, also failed to solve the problem.

The traditional fraternity and the compilers of the Traditional Health Practitioners Act No 22 (2007) failed to offer a single acceptable definition or description of who the traditional health practitioner is. It is also clear that the practice, diagnosis and treatment styles and approaches of the various traditional healers cannot be embedded in a single identity as the Traditional Health Practitioners Act No 22 had tried to do with the definition of the traditional health practitioner. The inclusion of the traditional health practitioner in the country's formal health establishment and its acceptance by the established medical fraternity as a profession in healthcare is at this stage clearly impossible.

Sound legal formulations and definitions of the various types of healers are needed before the Traditional Health Practitioners Act No 22's definitions on the *traditional health practitioner* and its sub-types can be accepted as legal and as applicable to all traditional healers for registration. At the moment, the definition *traditional health practitioner* fails the test to pass as a uniform professional identity acceptable and useful for all the tribes or ethnic communities in South Africa.

The definition *traditional health practitioner* is undefined and insufficiently formulated. This inadequate definition jeopardizes the implementation of the Traditional Health Practitioners Act No 22 (2007) and the establishment of professional traditional healing in South Africa.

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