Research article

HARNESSING CULTURAL RESOURCES IN FIGHTING HIV AND AIDS EPIDEMIC

Beatrice Lantern

Department of African Languages and Literature
Great Zimbabwe University.
E-mail: bealantern@gmail.com

This work is licensed under a Creative Commons Attribution 4.0 International License.

Abstract

The issue of HIV and AIDS epidemic has had a devastating effect not only in Zimbabwe, but the world at large. HIV and AIDS kills many adults in the prime of their working and parenting lives, it decimates the workforce, fractures and impoverishes families, orphans millions and shreds the fabric of communities (World Bank (2000)). The cost that it imposes forces countries and the world at large, to make heartbreaking choices in mitigating its impact through a number of inventions. One of those inventions, and of concern in this article, is the Ndebele traditional medical institution. The traditional medical institution is attracting more and more attention within the context of health-care provision and health sector reform and is proving to be a fountain of hope to the Ndebele majority or even to some cultures, due to its affordability and nutritional boosting nature. Indeed, there are some traditional medicines that mitigate the impact of opportunistic infections that come through HIV and AIDS. The paper also discusses the fundamental nutritional and survival needs of the less privileged through alerting them of some cultural resources that can be harnessed in positively fighting this HIV and AIDS epidemic. In light of the above ideas, the researcher, therefore, discovered that though the traditional medical institutions are often looked down upon, a closer analysis of their significance may be of paramount importance as they seem to prove that they are wonderful in as far as fighting HIV and AIDS epidemic.

Key Words: culture resources, harnessing, HIV and AIDS, opportunistic infections, nutritional boosting, Ndebele traditional medical institution.
1.0 Introduction

The Ndebele people, as experienced in other societies, have been struck by a severe and incurable pandemic – HIV and AIDS. Scientists, doctors, traditional healers or all those in the health sector are ever-busy on the never-ending search for its cure, but, unfortunately, till today nothing of significance has been discovered for its cure. As a result, it is of paramount importance for the people to then embark on mitigating measures and these have been traced back to our valued indigenous knowledge systems - the traditional medical institutions, in particular.

HIV and AIDS has spread with ferocious speed and the shocking statistics as of the 2009 estimations indicate that 22.5 million people were living with HIV in sub-Saharan Africa and this includes 2.3 million children. During 2009, an estimated 1.3 million Africans died from AIDS. Almost 90% of the 16.6 million children orphaned by AIDS live in sub-Saharan Africa, (http://www.avert.org/africa-hiv-aids-statistics.htm). These appalling statistics show that the HIV and AIDS disease is rife in developing countries than in affluent ones. This mirrors that there is a substantial interface between poverty and the excessive spread of HIV and AIDS in less developed countries like Zimbabwe. Elfstrand and Florén (2010) postulate that HIV and malnutrition tend to occur in the same populations (the underprivileged and resource-poor), in the sense that malnutrition increases severity and mortality of infection. In the same vein, WHO (2002:24-25) propounds that statistics demonstrate overwhelmingly that it is the world’s poorest countries who are most in need of inexpensive, effective treatments for communicable diseases and, at the same time, that access to modern essential chemical drugs is lowest where people are suffering most from such communicable diseases. The reasons are well known and include inadequate financing and poor health-care delivery. Given these realities on HIV and AIDS, everyone is urged to take responsibility in preventing the further spread of HIV infections and to care for and support the millions of Africans already infected and affected.

The survival strategies of infected people in Third World countries like Zimbabwe, especially of Ndebele people, which are tailor-made by their situation to suit their unprivileged status and at the same time meeting their needs, have been found mainly to be based on the traditional medical institutions. It is in this line of thought that the article found it imperative to share this fountain of hope embedded in our indigenous knowledge systems. Apropos to the above view, therefore, the paper discusses the crucial role of the Ndebele traditional medical institution in curbing and healing some of the opportunistic infections that come through HIV and AIDS. The paper also suggests the collaborative use of anti-retroviral and the traditional medicinal therapies as a way of suppressing the epidemic progression. The paper concludes by discussing the fundamental nutritional and survival needs of the less privileged that boost the human immune system, especially that of the infected.

2.0 The Conceptual Frameworks

Culture, according to Smith, Stanley and Sores (1978) is that part of his environment which the humankind has created in the process of trying to control nature for its survival. While Schein (1992:60) in Cole (1995:239) postulates that culture is “a pattern of shared basic assumptions that the group learned as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered valid and, therefore to be...
taught to new members as a correct way to perceive, think and feel in relation to those problems”. On the other hand, Graen and Wakabayashi (1994:9) in Cole (1995:329) conclude that culture could be seen “….not as a system of predispositions but a set of conceptual tools to be used to solve different kinds of problems”. The above definitions of culture imply that humankind has power or ability to harness the environment and use to its advantage and not to be driven by it. Accordingly, the Ndebele society has tapped from this indigenous knowledge system and used to cure ailments that come through opportunistic infections resulting from HIV and AIDS.

The Nutrition Unity Ministry of Health and Child Welfare Zimbabwe (2005:1) define AIDS, “as a disease caused by retrovirus known as HIV, a disease which attacks and impairs natural defense system against disease and infection”. HIV is a slow-acting virus that may take years to cause severe illness to a human being and incur far reaching health effects to the infected and affected. As a result many efforts are focused on its suppressive measures and these have been trekked to traditional medicine. Traditional medicine, according to WHO (2000), is the sum total of the knowledge, skills and practices based on the theories, beliefs and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness.

3.0 The Traditional Medical Institution

Since time immemorial traditional medical institutions have been on the riding steed in terms of offering medical treatment to people. Bourdillon (1993:97) postulates that for centuries in history in this country, healing was practiced by traditional practitioners including herbalists and diviners using different kinds of dice or “bones” and mediums who became possessed by healing spirits. In the last hundred years, Western medicine has been introduced and many people have already replaced the traditional system. In line with the above thought, National AIDS Council Newsletter (2005:5) concedes that, “the use of medical herbs was quite common in the nineteenth century but declined early twentieth century with the increased availability of synthetic drugs”. The recent resurgence in the use of medical herbs is thought to be due to disillusionment with conventional medicines together with their increased costs. However Bourdillon (1993:97) emphasizes the idea that in some rural areas, people still go routinely to traditional healers and trek to a clinic or hospital only as a last resort. In the towns many people now go first to a clinic or hospital and revert to traditional medicine only when doctors and nurses are no longer seen to be useful. Others go to both types of medicine, depending on the circumstances.

Jackson (2002:213) observes that, “in much of Africa, traditional healers are the most trusted and widely utilized source of spiritual support, problem solving and health care, particularly for the rural populations. Peter Sibanda (1992) of the Zimbabwe National Traditional Healers Association, ZINATHA, calls the traditional healers “the traditional priests, lawyers and advisors in communities in addition to their health role”. This is also true about the Ndebele Traditional Healers who play a pivotal role in offering medical services to the HIV infected people either psychologically or spiritually. Physically, traditional healers, according to Bourdillon (1993:109), delay the progression of the disease and giving the patient more active years of life”. In addition to the above point some of
the drugs administered by traditional healers can also be useful particularly in controlling stomach problems caused by an excessive use of western antibiotics.

On psychological grounds, Bourdillon (1993:110) mentions that, “more seductively, traditional healers may offer a hope of a cure while Western medicine promises only death. Thus, he says that some traditional healers can help an AIDS victim to cope with shock by instilling hope to them. They can also help the patient to act responsibly and carefully not to spread the disease to others.

The National AIDS Council of Zimbabwe Newsletter (2005:5) asserts that all the cultures throughout the world have used a variety of plants and materials derived from plants for the prevention and treatment of diseases. Even to this day a major portion of the world’s population still depends almost exclusively on medical herbs for health-related problems. The evidence of the beneficial therapeutic effects of these medical herbs is still seen in their continued use. For example, in the Nyanga communities at Regina Coeli Mission hospital and the Diocese of Mutare Community Care Programme (DOMCCP) served someone’s life which was almost in shambles. The Newsletter of the National AIDS Council of Zimbabwe (2005:4) put forward that:

*It is from this herbal project that an inspiring story of a 30-year old HIV positive woman was given a new lease of life after doctors had given up on her. According to her mother, Ambuya Memory Chakaigai, Irene was a ‘pack of bones’ when her husband dumped her at her homestead. She had been in and out of hospital until doctors at the mission discharged her to Home Based Care (HBC) programme, and referred her to the herbal project under DOMCCP. At DOMCCP she began herbal therapy and made a miraculous recovery. Thanks to successful drug therapy, Irene now weighs 67kg (August 2005), up from 33kg in July 2004.*

The above Irene’s inspiring story portray that herbal medicine do play an important role as far as fighting HIV/ and AIDS is concerned.

### 3.1 The Ndebele Traditional Medicine

It is well known that HIV and AIDS destroys the immune system and renders patients susceptible to opportunistic infections. Opportunistic infections constitute a major health problem in patients infected with HIV. Therefore, this section concerns itself with some Ndebele traditional medicine chosen from a group of many, used by some People Living with HIV and AIDS (henceforth PLWHA) to cure some of the opportunistic infections they once experienced. Below are the names and guidelines for use of the selected medicines which have worked well with some infected people.

**A. HERPES**
Herpes refers to any of several inflammatory diseases of the skin, caused by herpes viruses, characterized by the formation of small watery blisters on the skin. PLHWA are said to be mostly affected by herpes.

(i) AMAKHASI AMAZAMBANE / GROUNDNUT SHELLS / MAKANDA ENZUNGU
Groundnut shells are used to cure herpes.
Method: burn the shells to black ashes. To improve fineness pound them to powder and then smear the affected area for 4-5 consecutive days.

It is imperative to note that a certain PLHWA who preferred anonymity said that healing signs will show after 3 days. According to her, she used this medicine on the first occurrence of herpes, that is, (May 2006) till to date it has not reappeared yet.

(ii) UCHANE
The uchane tree leaves have proved to be useful as far as treating herpes is concerned.
Method: Pound the green leaves of the tree into a paste and then apply to the affected area.

(iii) ICHENA / ALOE / GAVAKAVA
An aloe is also a herpes healing agent.
Method: Smear aloe juice on the affected area.

B. CHRONIC DIARRHOEA

Gupta (2008) states that diarrhea is one of the most common complaints in HIV infected individuals. Elfstrand and Florén (2010) propound the view that patients are usually diagnosed with diarrhea when three or more defecations occur per day. Chronic diarrhea, is defined as persistence of diarrhea beyond four weeks and is a common symptom in HIV infected patients in the Tropics (Thomas P. D et al (2003)).

(i) UMTHUNDULUKA / NHENGENI / THE UMTHUNDULUKA TREE
Umthunduluka is an excellent remedy for chronic diarrhea, syphilis and mouth sores.
For chronic diarrhea, roots are useful.
Method: Dry the roots first and then pound them to powder and take half tea-spoon full of powder and add to a cup full of warm water and drink or add a half teaspoonful of powder to porridge and eat.
For syphilis: soak the umthunduluka roots in warm water and drink.
For mouth sores: chew the umthunduluka leaves and get healed.

C. GONORRHOEA.

Gonorrhea is a highly contagious sexually transmitted disease of bacterial infection, sometimes referred to as clap. It is characterized by thick discharge or pus-like substance from the penis or vagina. In addition to male reproductive
organs and female genital tract, gonorrhea may infect the rectum, throat, eyes, blood, skin and joints (www.std-gov.org/stds/gonorrhea.htm). The umatshisa shrub has proved to be an excellent cure for gonorrhea.

(i) UMATSHISA / MATSHISA.

Umatshisa or Matshisa (for Shona) helps to cure gonorrhea and sores along the alimentary canal. For gonorrhea soak the roots in a cup full of warm water and drink. For the alimentary canal sores; either do as for gonorrhea above or dry the roots and pound them to powder and then add the powder to porridge.

(ii) UMLUGULU LESAFICE.

Also good for gonorrhoea cure.

Method: Take the roots of both trees and soak them in water and drink.

D. BOILS

Boils (furunculosis) are painful pus-filled bumps on the skin resulting from the deep infection of a hair follicle. The infection is usually caused by a type of bacteria called *staphylococcus aureus* (“staph”) (www.skinsight.com/adult/furunculosisBoil.htm). Boils may heal with simple self-care measures, like applying warm compresses to the affected area for 20 minutes at least 2-3 times a day to ease the discomfort and help encourage the boil to drain. After draining one can apply the suggested mixture onto the boil tip. Untreated boils can enlarge or grow together to form a giant multi-headed boil (carbuncle).

(i) UMPHAFA LENDUMBA / MPHFA AND COW BEANS / MCHECHENI NENYEMBA.

Umpafa (mchecheni) and cow beans are effective in healing boils. Method: Take the umphafa leaves and green dried cow beans, and pound these together and put the mixture onto the boil tip (emlonyeniwethumba).

NB. The above mixture is said to encourage boil drainage and at the same time completely clearing the infection thereby allowing the boil to heal.

E. WARTS

The online medical dictionary defines warts as small, benign growths caused by a viral infection of the skin or mucous membrane. The virus infects the surface layer. The virus that causes warts are members of the human papilloma virus (HPV) family.

(i) UMKHIWA / SYCAMORE TREE/ MUONDE

When the fruit of the sycamore tree is broken off the tree before it is ripe, milk escapes and this has wonderful healing properties. If this milk is put freely on warts it removes them. When this
milk is also applied on sores and boils they are healed. Split open the fresh ripe fruit and lay it on a boil or carbuncle and will give great relief.

4.0 Ndebele Herbs for a Healthful Living.

Ndebele people are creative. Garnie (2005:45) points out that creativity can be developed by consciously focusing your strength and abilities in the direction of your difficulties. Creativity means taking a good look at what surrounds you and seeing their potential as part to the solution to your situation. On the creative bases the Ndebele have substituted some of the herpes for the healthful living that were and are of English origin with their indigenous ones.

Constipation (akugabelana), according to Hospaz Care Card (2003:13b) takes place when a patient is unable to exercise or does not eat or drink much and as a result the body slows down. As a result a full bowel can be very uncomfortable and cause nausea and a hard dry stool can be painful to pass. Hospaz Care Cards (2003:13b) suggests that one of the remedies ‘is to use local herbal treatment. For example, crush some dried paw-paw seeds and mix half a teaspoonful in water and give the sick person to drink’. The Ndebele people use umpalule to get rid of constipation problems. According to one of the interviewees, you take ‘umpalule’ roots, dry them and pound them to powder and add a teaspoonful of the powder to tea, or all drinkable liquids (amahewu, inkovuyomxhanxa) and soup. Also ‘impandezomsusu (the Msusu’s roots)’ may also get rid of constipation; you simply soak the roots in warm water and drink. Also a nettle plant which is said to be an excellent remedy for kidney trouble in the Ndebele society is replaced by ‘umqathuva’. It is the roots of this tree that are medicinal, simply boil the roots in water and drink the concentrated solution when still warm.

Some of the medicinal trees and herbs for a healthful living were obtained from HIV and AIDS workshops where the affected and the infected people discussed their experiences. Among the medicinal trees are Sycamore or fig tree (/ umkhiwa). The sycamore tree has excellent healing properties of quite a number of ailments. It is said that tea made of the leaves will take spots off the face or body. The tea is also excellent to wash old sores. Moreso, where the flesh has turned black from bruises or blows, bathing with the warm tea stimulates the circulation of blood and carries away discoloration. Snuff the tea up the nose when there is difficult and pain in the nostrils. The tea is also good when dropped in an earworm. The tea made of sycamore leaves is a good oral mouth-wash and gargle. For hoarseness, sore throat and bad breath drink it with tea. The tea is also good for lung troubles, asthma, bronchitis, dropsy, spasms and convulsions.

**Sycamore tea preparation method:** Add one teaspoonful of sycamore powdered leaves in a cup of boiling water. Drink 3 or 4 cups a day an hour before meals. Sometimes the results are better when taken six times a day. The sycamore tree can also be used as a cough medicine. Simply cut to small pieces sycamore ripe fruits add half cup of water and boil the mixture. Simmer for a few minutes, using a cloth or dish towel squeeze out the juice, add juice of 2 lemons and a little honey if desired. This makes an excellent cough syrup.
Another medicinal tree which is recommended is *Umsuzwane /Zumbane. Zumbane /umsuzwane* is said to be very good for all chest troubles, coughs, bronchitis, whooping cough, asthma and many others.

**Method:** Add one teaspoonful of dried leaves in a cup of boiling water, simmer for 15 minutes and then drink. Note that, fresh leaves can also be used. It is also good for stomach problems and headaches. Drink two or three cups a day.

An aloe is a medicinal herb which has wonderful healing properties. It is one of the best herbs that cleans out the colon. For external body remedies, an aloe may be used to heal any kind of sores, cuts, burns or wounds.

**NB.** Aloes are not to be taken during pregnancy or while breast-feeding. It is also worth noting that all the addressed diseases are usually opportunistic infections that come through HIV and AIDS.

### 5.0 Antiretroviraltherapy vis-à-vis traditional medicinal herbs.

The AIDS pandemic, whose origins are not known exactly, has claimed more lives than any other pandemic. It has caused more strain socially, economically, physically, mentally and spiritually than any other natural disaster. It is for these reasons that Zimbabwe, amongst many countries in the world, is on its toes trying to alleviate HIV and AIDS’ devastating effects. One of the ways in which Zimbabwe has tried to do so has been through the currently introduced anti-retroviral therapy.

Anti-retroviral therapy is a special combination of medicines for people with HIV and AIDS. These medicines suppress the Human Immune Virus (HIV) from multiplying in a patient’s body and delay HIV from killing the immune system cells—the cells that defend our bodies against infection. Antiretroviral (ARV) drug therapy is rendered to patients with World Health Organisation (WHO)’s clinical stages like chronic diarrhea for more than a month, more than 10% body weight loss among others, and should be used by patients who really are in need of it. The problem with this Western medicine is that in most cases it shows side effects to some of its consumers. This is not the case with African medicinal herbs which do not have side effects; people take and stop taking them as per their wish. However, just as ARVs, these herbs do not cure this pandemic. Nevertheless, it is suggested that if both types of medicines are collaborated, improved results may result in the sense that where one package has weaknesses or fails the other package might cover up the gap. It is important for people to note that good health comes with a balanced nutritional diet. The Ndebele cultural food has proved to be excellent in terms of providing a balanced diet.

### 6.0 Cultural Food and Nutritional Diet

Food is any substance we eat. The Nutrition Unit Ministry of Health and Child Welfare Zimbabwe (2005:5) defines nutrition as, “the science of food and how the body uses it to provide nutrients in sufficient quantities to ensure normal body function, growth, development and maintenance of the immune system”. They further state that food is made up of macro and micronutrients. Micronutrients such as vitamins and minerals are needed in small amounts.
Macronutrients such as carbohydrates, proteins and fats are needed in larger amounts. Moreso, The Nutrition Unit Ministry of Health and Child Welfare Zimbabwe (2005:5) also asserts that the body cannot work properly if one or more nutrients are missing. Therefore a healthy and balanced diet is one that provides the right foods in the right amounts and combinations and is safe and free from disease and harmful substances. Also no single food contains all the nutrients; therefore a human body is in need of all the five nutrients for its healthful living.

(i) **Carbohydrates** – these are starches and sugars which provide the body with energy and should make up the biggest part of a meal. The rural Ndebele diet offers umumbu (maize), imbambayila (sweet potatoes), inkobe(mutakura),isitshwala (sadza obtained from maize, rapoko (uphoko) and sorghum (inyawuthi)) and amahewu.

(ii) **Proteins**- these build and repair the body and build strong muscles . The Nutrition Unit Ministry of Health and Child Welfare Zimbabwe (2005:5) points out that proteins have to keep the immune system active. The sources are,inhlanzi (fish),amaqanda (eggs), inyamayembuzi (goats’ meat), uchago (milk), amacimbi (caterpillars), amazambane (groundnuts), indumba(beans), and many more.

(iii) **Vitamins and mineral salts**- keep the body functioning well and the immune system strong. Good sources are from vegetables and fruits. Care Zimbabwe Cards (undated) identified some of the sources of vitamins and mineral salts. Vegetables include- ulude (nyovhi), ibhobola (muboora), imibhidayendumba (munyemba),amathanga (pumpkins) and amakhowa(mushrooms), amatomatisi (tomatoes). Friuts include- umkhemeswane/matamba, umgwadi, umhlali.

(iv) **Fats and oils** -The Nutrition Ministry of Health and Child Welfare Zimbabwe (2005:7) asserts that fats and oils provide extra energy. Fats also help in the absorption and transportation of some vitamins. Good sources according to Care Zimbabwe Cards (undated) are,amazambane (groundnuts), idobi(peanut butter), ulaza (cream).

In between meals, one should have nutritious snacks like umxhanxa, amahewu/mahewu, amazambaneakhanzingiweyo (roasted groundnuts), intangazamathangaiezikhanzingiweyo (roasted pumpkin seeds), ihiqa (sour milk). In addition to the above view, the Nutrition Ministry of Health and Child Welfare Zimbabwe (2005:) also postulates that locally available or indigenous foods can give you a healthy diet and have been found to be very useful in supporting the health of the ill person. They are (a) nutritious and easy to prepare (b)wholesome (c) natural (d) available (e)affordable and (f) accessible. In terms of mealie meal type, the Nutrition Ministry of Health and Child Welfare Zimbabwe encourages straight-run mealiemeal (umgayiwa /mugayiwa) because its wholesome.
Most of the informants who were interviewed concerning the traditional food as a nutritional booster concluded that food plays a crucial role as far as nutritional body boosting is concerned, especially, for People Living With HIV/and AIDS (PLHWA).

7.0 Conclusion

The Ndebele medical institutions seem to be helpful in terms of alleviating the health status of the infected people and this is enough to be used as the basis to argue that people should return to the source- culture. Implying that cultural resurgence maybe is the answer to an AIDS free society. In relation to the above point, one may point out that war against HIV and AIDS is won every time when a person makes an effort to prevent its spread or atleast suppress some of the opportunistic diseases that result in the HIV and AIDS infection, through using some of the outlined medicinal therapies presented in this article. The collaborative use of anti-retroviral and the traditional medical therapies is also discussed, though the former proved to be laden with side effects. In this paper, therefore, the researcher concludes that the Ndebele medical institutions play a significant role in curbing and healing some of the opportunistic infections that come through HIV and AIDS.

REFERENCES

Books


Magazine Articles


Newsletter Articles


Internet sources


