



**Biomedical Hegemony and Democracy in South Africa.**

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The main aim of this book is to create an avenue for collaboration between the African traditional and biomedical healthcare systems. The main narrative unfolds as follows. Despite the dominance of biomedicine, its inability to find a solution to the HIV/AIDS pandemic in South Africa did not just send desperate and frustrated patients to resort to traditional healers, but also forced the South African government to publicly adopt traditional medicine while refusing HIV patients access to much-needed antiretroviral therapy. South Africa is a multi-ethnic country with many traditional healers of different backgrounds and expertise, who are very much involved in the healthcare of its citizens, many of whom believe that there are certain illnesses (“African diseases”) that can only be cured by traditional healers. However, since such healers are not always well-equipped to diagnose diseases, some of the healing processes can be very risky to patients. According to South Africans who participated in the study, through integration, traditional healing can be improved to meet rigorous medical standards such as quality, measurement, and sanitary conditions.

The book is divided into nine chapters. In Chapter 1, the authors clearly introduce the main goal of the book, namely, establishing the grounds for a partnership between African traditional healing and biomedicine that will improve the state of healthcare in South Africa. In this chapter, the authors argue that the consumption of herbal remedies has become a global industry and it has contributed billions of Rands to the South African economy, increasing revenue for the country’s pharmaceutical industry (pp. 8-9). For a better understanding of why there should be integration of the two medical systems, the authors show how the two therapies complement each other, for example in the case of Chinese doctors who are increasingly and successfully combining traditional complementary, and alternative medicines (TCAM) with biomedicine in Tanzania (pp. 16-17). The authors also shed light on various misconceptions about traditional medicine and the pervasive negative views, or “false claims,” perpetuated by the media and academic literature (pp. 18-20).

Chapter 2 presents an overview of, and the rationale for choosing the study area. The methodology, theoretical framework, data analysis techniques and ethical considerations are elaborated. It is notable that the authors used a combination of both qualitative and quantitative methods for data collection. While qualitative methods provide rich detail, quantitative methods permit extensive statistical analysis, making this study unique. Questionnaires were administered to patients to gauge their perceptions and opinions about traditional medicine. Additionally, nurses and traditional healers were interviewed to complement the data.

In Chapter 3, the authors interrogate the relationship between traditional medicine and colonisation. The authors clearly show that the period of colonisation did not just allow colonial powers to gain knowledge about African traditional medicine, but also encouraged the use of biomedicine in Africa, while simultaneously discouraging and banning the spiritual side of traditional medicine (often dismissed as “witchcraft”). They argue that, despite the discouragement and banning of African traditional medicine, it later regained its “glorious” status and recognition during the post-colonial era. In this chapter, the authors competently unpack the entanglement of biomedicine and capitalism, as well as the racial segregation of apartheid. They argue that “colonial masters instituted medical apartheid which favoured colonial civil servants and other contributors to colonial enterprise at the detriment of women and children” (p. 49).

In the fourth chapter of the book, the authors explore the discourse of HIV/AIDS in South Africa. They persuasively show that the use of traditional medicine can be both a “cure” and a “curse” at the same time. They point out that, despite its effectiveness, the return to some traditional practices such as virginity testing and male circumcision that uses the same equipment repeatedly only helped in fuelling the spread of the pandemic (p. 86). The chapter also discusses the delay in the adoption of antiretroviral therapy – due to the government’s denial of the existence of HIV/AIDS, as well as the perception that antiretroviral therapy is toxic and harmful, coupled with the fear of “witchcraft,” which instead sent desperate patients to traditional healers for spiritual security (pp. 82-83). The authors convincingly show why traditional healers are preferred by HIV/AIDS patients, with an estimated 70 to 80 per cent of patients reportedly seeking help from traditional healers (p. 89).

The first part of Chapter 5 discusses the social context of HIV/AIDS in South Africa with specific reference to the area of study where traditional and modern medicine are used by HIV/AIDS patients concurrently. The authors explain that the neglect of the Eastern Cape

region through apartheid and post-apartheid era policies that fuelled unequal development in terms of healthcare, as well as lack of employment and other opportunities, led to the migration of adults in search of work in the mines. In some cases, miners returned infected with sexually transmitted diseases and HIV/AIDS (pp. 112-113). The second part of the chapter continues by exploring how the preference for traditional healing over biomedicine affected the management of the pandemic. They suggest that the simultaneous use of both methods of treatment offers a welcome solution because of “the deep embeddedness of illness in sociocultural relationships and ontological frameworks as well as the social nature of the healing experience” (p.103). That is, illnesses are being interpreted through a cultural lens, for example, people categorise diseases to determine which diseases to take to traditional healers and which to take to biomedical practitioners.

Chapter 6 explores the pros and cons for integrating traditional medicine into the mainstream healthcare delivery system in South Africa. Through in-depth analysis, the authors show that though biomedicine had faced challenges in managing the HIV/AIDS pandemic, the diversity of traditional healing practices by different ethnic groups and different cultural environment, also poses as an obstacle to the integration of traditional and biomedicine (pp. 122). Moreover, despite the recognition of traditional healers by international bodies such as the World Health Organization and the United Nations for their contribution to caring for HIV/AIDS patients, policy makers are still reluctant to pursue integration.

In Chapter 7, the authors present the concept of “African diseases,” and introduce different groups of traditional healers and their domains of expertise. They believe that the most significant duty of traditional healers in the contemporary world is the treatment of so-called “African diseases”, which are perceived as incurable by physicians. Their analysis demonstrates that despite the expertise of traditional healers, their real intentions are usually misinterpreted. For example, in Cameroon, the head of the HIV/AIDS program declared that most of the traditional healers in Cameroon are “fake” and “unreliable” (p. 184).

The primary argument of the book is fully articulated in Chapter 8. The chapter proposes a joint work force integrating traditional and biomedicine, such as the one in Qokolwine Location of the Eastern Cape Province of South Africa. By looking at the different opinions of participants and health personnel in both biomedicine and traditional healing, the authors uncover the ways in which perceptions of health and traditional medicine are shaped by local factors and how local context, cultural factors, and the historical legacy of decades of

underdevelopment and neglect, have shaped these perceptions. For instance, an estimated 60 per cent of respondents associate traditional medicine with nature. According to these respondents, traditional medicine comes directly from nature, and, unlike Western medicine, it is unsullied by chemicals and has been used for many years by their ancestors.

Chapter 9 investigates the “African” concept of health, the daily use of traditional medicine in Qokolwine, attitudes, and perceptions towards traditional medicine as well as those who make use of African traditional medicine. It also concludes the book by providing a summary of the findings, and recommendations for integrating both traditional and biomedicine.

The stories of respondents about their preference for African traditional medicines, along with narratives about how Africans view the HIV/AIDS pandemic (see p. 89), point to the fact that a study of this nature is essentially investigative. The book is very well written and fills up a gap in the literature of integrating African traditional medicine into biomedicine for the overall improvement of healthcare. Its logical, perceptive, and in-depth analysis with various references to different African countries makes the work an impressive resource for a comparative view on the practice of traditional medicine. The subject matter of the book is well elaborated and covers all aspects of the subject in a balanced fashion with sufficient evidence and convincing examples that are not only limited to the country used as a case study, but also from different countries around the globe.

However, the authors, as they mention themselves, have failed to critically explore the ontological content of TCAM and the challenges it poses to integration (p. 28). A critical analysis of this content would not only give the readers insight into the challenges that lie ahead but also place them in a position to formulate their own opinion on integrating African traditional medicine and biomedicine.

Notwithstanding this minor weakness, this is an excellent, readable, and relevant book, suitable for students of sociology, anthropology, and other social sciences, as well as medicine. This book covers timely issues such as race, inequality, class distinction, politics, and religion, addressing them in a local and global context, and the theoretical and methodological tools introduced provide added value.