



# Exploring the role played by African Traditional Health Care Practitioners in response to the COVID-19 Pandemic – A case study of Allandale Village, Mpumalanga Province of South Africa

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## ABSTRACT

The advent of the Coronavirus pandemic has revealed the need to fund and revive the role that African traditional health practitioners play in dealing with pandemics in Africa. Even though the Department of Health notes that African indigenous knowledge systems are not excluded in the search for a COVID-19 cure, gross imbalances in the funding seem to give a glimpse of the legacies of apartheid and colonisation. This is alleged to be ample evidence that the continent had learnt nothing from the previous health challenges (Ebola and Human Immunodeficiency Virus). Against this backdrop, this article explored the role played by African traditional health care practitioners in response to the COVID-19 pandemic in Allandale village in Mpumalanga province. Using participatory action research, five (5) African traditional health care practitioners (diviner, herbalist, traditional birth attendant, traditional surgeon and faith healer) were purposively sampled to participate in semi-structured interviews. The study was grounded using Ezikio Sipheka Sisophula's theory to delve into gems of African indigenous knowledge in response to the COVID-19 pandemic. The results showed that due to their unique characteristics and the trust in them, traditional health professionals were crucial to primary care during the COVID-19 lockdown. If the role of traditional practitioners is properly harnessed, the country can yield good health care results and eliminate the dependency syndrome wherein Africa relies on vaccines developed from outside.

**Keywords:** Traditional Health Care Practitioners, Covid-19, Indigenous Knowledge, Pandemic, Traditional Medicine

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## INTRODUCTION

The COVID-19 pandemic, a global health crisis, has had profound and far-reaching effects, exacerbating pre-existing vulnerabilities in healthcare systems and challenging nations to respond effectively to an unprecedented situation. In many parts of the world, especially in rural and underserved communities, conventional healthcare services struggled to meet the demands of the pandemic. In South Africa, where healthcare inequalities persist between urban and rural areas, alternative healthcare systems, including African traditional health practices, have played a significant role in responding to the crisis. These traditional healers, often the first point of contact for health concerns in rural communities, have long provided culturally resonant health services based on indigenous knowledge.

The advent of the COVID-19 pandemic brought numerous challenges globally. In South Africa, the effects were witnessed in all spheres of life, especially the health sector. The pressure facing the conventional health care system, among other challenges, ignited the authors to explore the role of traditional health care practitioners in South Africa. Contrary to the conventional system where drugs are expensive, indigenous knowledge systems offer solutions that resonate with the beliefs, histories, aspirations and value systems of most people in South Africa. According to Nxumalo and Mncube, bringing in indigenous knowledge to assist in the medical field complements the plans and efforts of the government to maximise health opportunities.<sup>1</sup> Since time immemorial, traditional health care practitioners have played a pivotal part in dealing with previous pandemics in the modern health care system by giving indispensable direction and support to indigenous communities. Thus, the article explores the role African traditional health care practitioners played in response to the COVID-19 pandemic in Allandale village in Mpumalanga province. The importance of cultural and traditional healing in South Africa is of various practices such as counselling, spiritual rituals, herbal medicine and divination.<sup>2</sup> According to the Traditional Health Practitioners' Act (THPA) 22 of 2007, one is allowed to register and operate as a herbalist, diviner, traditional surgeon and traditional birth attendant. They are well respected in their communities and have maintained the sacred practice of passing knowledge from one generation to the next orally.

Amongst their roles, they stand between the dead and the living, upholding the relationship among people, the community and their environment.<sup>3</sup> Mdhlu postulated that instead of depending on externally developed medical models and treatments, which are frequently imported at high financial cost, African scholarship should conceptualize and advance locally relevant, context-specific approaches that promote the holistic well-being of its populations within the realm of primary health care and traditional medicine.<sup>4</sup>

In view of the submission of Mdhlu, it can be argued that in African cosmology, the use of herbal plants to treat ailments is not a new phenomenon.<sup>5</sup> Despite the introduction of orthodox medicine in South Africa, traditional medicine is still used by most of its population.<sup>6</sup> To add, 80% of South Africans depend on traditional medicine for palliative, preventative and curative uses.<sup>7</sup> A critical assessment of this shows that this is an advantage, as indigenous knowledge helps reduce pressure on the already constrained mainstream health care system.

With all the overwhelming evidence that traditional medicine is providing help to indigenous communities, the conventional health care dismisses it as archaic, not scientific and regards their own as

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<sup>1</sup> Sabelo Abednego Nxumalo and Dumisani Wilfred Mncube, "Using Indigenous Games and Knowledge to Decolonise the School Curriculum: Ubuntu Perspectives," *Perspectives in Education* 36, no. 2 (2018): 103–18.

<sup>2</sup> Salome Thilivhali Sigida and Nare Judy Masola, "Diagnosis And Treatment Of Mental Illness By Vhavenda Traditional Healers In Vhembe District, South Africa," *International Journal For Psychotherapy In Africa* 5, no. 1 (2020).

<sup>3</sup> L. Kpanake, "Cultural Concepts of the Person and Mental Health in Africa," *Transcultural Psychiatry* 55, no. 2 (2018): 198–218.

<sup>4</sup> Tsetselelana Decide Mdhlu, "An Examination of the Role of Traditional Medicine in Primary Health Care in Bushbuckridge Region, Mpumalanga Province, South Africa" (2022).

<sup>5</sup> Mdhlu, "An Examination of the Role of Traditional Medicine in Primary Health Care in Bushbuckridge Region, Mpumalanga Province, South Africa."

<sup>6</sup> V. Shonhai, "Analysing South African Indigenous Knowledge Policy and Its Alignment to Government's Attempts to Promote Indigenous Vegetables" (University of Kwazulu-Natal, 2016).

<sup>7</sup> G. Gavriilidis and P.O. Östergren, "Evaluating a Traditional Medicine Policy in South Africa: Phase 1 Development of a Policy Assessment Tool," *Global Health Action* 5, no. 1 (2012): 17271.

superior.<sup>8</sup> It is no secret that traditional medicine is holistic in its treatment and provides the best alternative to most communities in South Africa. The current authors submit that there must be a hidden agenda behind the pharmaceutical industry in rallying behind conventional health care and dismissing traditional medicine. What is heartbreaking and amazing is the surreptitious moves by these companies in tracing the work of African indigenous knowledge holders, appropriating the knowledge, avoiding benefit-sharing arrangements, and quickly guarding this knowledge jealously through their intellectual property laws. Are they embarrassed and too shy to acknowledge that this was from an African? Why not show their dignity and collaborate with these practitioners to integrate this culturally valuable and sensitive system in a manner that is not dehumanizing in a bid to learn and foster its growth? The love of money and personal aggrandizement make this endeavour a mammoth task. The current authors do not doubt that such an initiative and design meet the aspirations of the indigenous communities that are led and guided by the spirit of Ubuntu.

This study seeks to fill this gap by exploring the role African traditional healthcare practitioners played in Allandale Village during the COVID-19 pandemic. Specifically, the study aims to assess how THPs responded to the health crisis, what practices they employed, and how their interventions complemented or diverged from state-led health policies and medical strategies. By examining the experiences of these health practitioners and their communities, the study will provide insights into the intersection of indigenous and formal health systems during a global health crisis.

## LITERATURE REVIEW

### Traditional Medicine in Practice

The basic definition of practice is that of an idea, plan, or technique that is likely to work or be successful in actual situations. Because of this, traditional medicine is practical. In the treatment of physical and mental illnesses, there is a discernible return to old methods. This leaning is partially explained by the perceived ineffectiveness and high cost of traditional medicine, as well as the growing belief that more affordable and efficient alternatives are available through traditional medicinal practices. The understanding that many Western medications are drawn from traditional knowledge systems serves to further support this notion.<sup>9</sup> Gavriilidis and Östergren state that traditional medicine's broad use in South Africa is mostly attributable to its holistic approach, which meets the patient's physical, mental, and spiritual requirements.<sup>10</sup> Unlike Western medicine, which is occasionally unavailable to impoverished rural populations, traditional medicine is widely used in South Africa in all regions and in a wide range of age groups, genders, socioeconomic classes, and educational levels.

Sobiecki illustrates this, emphasizing that the traditional health practitioner remedies made from plant, mineral, or animal sources are frequently recommended by traditional health practitioners and are frequently given in a ceremonial setting.<sup>11</sup> Depending on the desired physical, psychological, or spiritual effects, including protection, these treatments can be consumed, applied through bathing, used to induce vomiting, or sprinkled over the house.<sup>12</sup> The traditional healer uses these techniques to try to bring the physical, spiritual, and social (interpersonal) realms back into harmony. The authors argue that because it treats the patient as a whole, including their interactions with society and the environment, this method is a prime example of holistic medicine. As a result, the authentic African traditional healer plays a vital role in the healthcare system, especially in societies where the interdependence of spiritual, human and natural

<sup>8</sup> A.A. Abdullahi, "Trends and Challenges of Traditional Medicine in Africa," *African Journal of Traditional, Complementary and Alternative Medicines* 8, no. 5S (2011).

<sup>9</sup> Disan Kutesa, "Epistemological Base of Traditional Herbal Medicine: A Case of Uganda.," *African Educational Research Journal* 6, no. 3 (2018): 197–202.

<sup>10</sup> Gavriilidis and Östergren, "Evaluating a Traditional Medicine Policy in South Africa: Phase 1 Development of a Policy Assessment Tool."

<sup>11</sup> J. Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine," *Indo-Pacific Journal of Phenomenology* 14, no. 1 (2014).

<sup>12</sup> Mdhuli, "An Examination of the Role of Traditional Medicine in Primary Health Care in Bushbuckridge Region, Mpumalanga Province, South Africa."

forces is deeply held. According to this perspective, traditional medicines are used to affect these interconnected energies, treating physical, psychological, and spiritual or transpersonal health issues.

Considerable institutional work has been done in South Africa to support and include African traditional medicine in the mainstream of health. The Traditional Medicine Research Unit was founded by the Medical Research Council (MRC), and the University of Cape Town created the extensive database TRAMED, which is devoted to African traditional medicine. The National Drug Policy, which promotes the safe and efficient use of all medications, including those used in the traditional health sector, provides additional support to these activities. In particular, in rural areas, traditional healers are often the initial point of contact for people with a variety of ailments, and their methods are becoming more widely accepted as legitimate by science.<sup>13</sup>

### **The Scientific Validity of Traditional Medicine**

The claim that traditional medicine lacks scientific credibility is one of the criticisms frequently made of it. This is mainly due to the fact that it is not subjected to the same stringent testing and experimental validation that is usually associated with Western biomedical techniques. Consistent with this viewpoint, this study argues that all conventional medical knowledge is essentially subjective and devoid of scientific support. Western medicine, on the other hand, follows the scientific approach, which involves methodical observation, hypothesis development, and experimental validation. Critics contend that this anecdotal and personal evidence does not form a sufficiently strong empirical foundation to guarantee scientific validity, even if many traditional healers have a wealth of practical knowledge that has been acquired over generations and is often seen as a sign of reliability.<sup>14</sup> This study argues that this is a paralysis of analysis since conventional medicine is not subjected to indigenous knowledge to be proven to be efficacious.

According to Tia et al, African Traditional Medicine's (ATM) continued use across many generations is evidence of its legitimacy and resilience.<sup>15</sup> According to Antwi-Baffour et al., scholars in Western scientific research are becoming more aware of and interested in ATM therapies.<sup>16</sup> In a similar vein, El-Ghani points out that Western scientific approaches have empirically confirmed the therapeutic effectiveness of a variety of substances, including plant, mineral, and animal-based remedies that are frequently used by traditional African healers.<sup>17</sup> To find therapeutic plants, animals, and minerals, several pharmaceutical corporations have focused on indigenous African communities, continuing to ignore patent rules, trademarks, and intellectual property rights.<sup>18</sup> The lack of real collaboration between biomedical scientists and traditional healers is partly responsible for the inadequate scientific validation of various traditional medicines, especially with respect to safety and efficacy according to Western biomedical standards. Broader scientific acknowledgement has been hampered by this gap more than by any fundamental defects in the treatments or their modes of action.<sup>19</sup> Deeply rooted, culturally embedded prejudices that reject African traditional medicine as unscientific are partly to blame for the lack of cooperation between biomedical scientists and traditional healers.<sup>20</sup>

In keeping with Mawere's conceptualization of Indigenous Knowledge Systems (IKSs) as a type of science, traditional medicines are used in accordance with methodical and defined protocols rather than being

<sup>13</sup> Jaco Beyers, "Who May Heal? A Plea from Traditional Healers to Participate in Treating Covid-19," *HTS Teologiese Studies / Theological Studies* 76, no. 1 (November 18, 2020), <https://doi.org/10.4102/hts.v76i1.6169>.

<sup>14</sup> Kutesa, "Epistemological Base of Traditional Herbal Medicine: A Case of Uganda."

<sup>15</sup> Maurice Tia et al., "Observation of Enhanced Chiral Asymmetries in the Inner-Shell Photoionization of Uniaxially Oriented Methyloxirane Enantiomers," *The Journal of Physical Chemistry Letters* 8, no. 13 (2017): 2780–86.

<sup>16</sup> S.S. Antwi-Baffour et al., "The Place of Traditional Medicine in the African Society: The Science, Acceptance and Support," *American Journal of Health Research* 2, no. 2 (2014): 49–54.

<sup>17</sup> M.M., Abd El-Ghani, "Traditional Medicinal Plants of Nigeria: An Overview," *Agriculture and Biology Journal of North America* 7, no. 5 (2016): 220–47.

<sup>18</sup> Abd El-Ghani, "Traditional Medicinal Plants of Nigeria: An Overview."

<sup>19</sup> Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine."

<sup>20</sup> M. Mawere, *The Struggle of African Indigenous Knowledge Systems in an Age of Globalization: A Case for Children's Traditional Games in South-Eastern Zimbabwe* (African Books Collective, 2012).

used haphazardly.<sup>21</sup> Strict attention to these protocols is crucial for the effectiveness of such treatments; deviating from them may have less beneficial effects. This is not to say that traditional medicine follows the norms of Western biomedical science, represented by laboratory coats and stethoscopes. Rather, it represents a unique epistemological framework that has its roots in African science and is generally known as Indigenous Knowledge Systems. To strengthen this viewpoint, Sobiecki presents the following clarification. Sobiecki postulates that the biological and psychological effects of specific plants or plant combinations used in traditional healing methods are often communicated using metaphorical language in African traditional medicine. Since these conceptual frameworks are so ingrained in indigenous societies' language and cultural backgrounds, outsiders frequently find them difficult to understand. As a result, it can be deduced that misconceptions or a lack of knowledge of these culturally established metaphors are often the cause of the belief that traditional medicine is ridiculous. Sobiecki concludes that an integrative research method that incorporates anthropological, ethnobotanical, and psychopharmacological perspectives is crucial to addressing widespread academic prejudices and better acknowledging the empirical underpinnings and therapeutic efficacy of African traditional medicine.<sup>22</sup>

Frans et al. contend that such presumptions are baseless and refute the idea that African traditional medicine requires a less thorough and exact evaluation of efficacy.<sup>23</sup> Much information has been collected over millennia about how to prepare, choose, identify, and harvest traditional medicinal substances at the best times.<sup>24</sup> Therefore, it is inaccurate to believe that traditional medicines are dangerous only because they do not follow Western scientific testing procedures. Sobiecki challenges the disproportionate scrutiny often directed at traditional medicine by highlighting that Western biomedical treatments are not exempt from toxicity concerns, some of which may, in fact, be more severe than those linked to traditional remedies.<sup>25</sup> Sobiecki calls for a more balanced and equitable evaluation of both systems of healing.<sup>26</sup> This study shows that the ongoing debate over the safety and efficacy of African traditional medicine exemplifies a broader pattern of skewed academic bias. Although standardized assessments of safety and effectiveness are indeed essential, particularly when traditional medicines are commercialized, it is problematic that concerns about harm are predominantly directed at traditional practices. Biomedical treatments are not without similar problems, yet these are often overlooked or not adequately addressed in academic and regulatory contexts. Importantly, traditional health practitioners have long employed methods to reduce or eliminate potential toxicity, including specific preparation techniques and carefully measured doses administered over limited periods.<sup>27</sup> Sobiecki cautions that one of the key challenges for scientists is to approach traditional medicine with openness and intellectual curiosity. He emphasizes the importance of recognizing that what may appear as mere ritualistic expression could, in fact, conceal scientifically valid practices.<sup>28</sup> Against this view, this study posits that a deep understanding requires scholars to interpret the cultural and linguistic contexts in which traditional knowledge is embedded. Although such knowledge may initially seem incompatible with conventional scientific reasoning, it often reflects internal logic and efficacy that merit serious scholarly attention. Building on this perspective, it is essential to acknowledge that traditional medicine systems have used empirical evaluation methods for centuries. Their longstanding reliance on natural products makes traditional practices a valuable resource for modern pharmacological research, particularly in the identification of lead compounds and potential drug candidates. As Yuan et al. argue, traditional medicine

<sup>21</sup> M. Mawere, "Critical Reflections on the Principle of Beneficence in Biomedicine," *Pan African Medical Journal* 11, no. 1 (2012).

<sup>22</sup> Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine."

<sup>23</sup> Franceline A Frans et al., "Systematic Review of Exercise Training or Percutaneous Transluminal Angioplasty for Intermittent Claudication," *Journal of British Surgery* 99, no. 1 (2012): 16–28.

<sup>24</sup> H. Yuan et al., "The Traditional Medicine and Modern Medicine from Natural Products," *Molecules* 21, no. 5 (2016): 559.

<sup>25</sup> Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine."

<sup>26</sup> Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine."

<sup>27</sup> Mdhuli, "An Examination of the Role of Traditional Medicine in Primary Health Care in Bushbuckridge Region, Mpumalanga Province, South Africa."

<sup>28</sup> Sobiecki, "The Intersection of Culture and Science in South African Traditional Medicine."

provides a robust foundation for investigating drug-like properties, including physicochemical, biochemical, pharmacokinetic, and toxicological characteristics.<sup>29</sup>

When appropriately studied and applied, traditional medicine has enormous potential to contribute to the development of new therapeutic agents, a pursuit central to scientific innovation. Despite the absence of formal documentation, traditional remedies have undergone generational ‘field-testing,’ which has ensured their survival and continued use. As Sinson et al. note, this long-standing practical validation, coupled with widespread cultural endorsement, has led to the deep social acceptance of traditional medicine, even as it remains under-recognized by mainstream biomedical systems.<sup>30</sup>

### Culturally Endorsed Practices

Culturally acceptable practices that complement people’s cultures and life experiences are used in the practice of traditional medicine. According to social links and configurations, traditional medicine practitioners aim to restore the mental and social equipoise of patients.<sup>31</sup> For instance, Opare-Hanuku asserts that most Africans prefer to have queries like "why one got that sickness?" rather than "how the person got the sickness?" answered.<sup>32</sup> According to Teuton, Dowrick, and Bentall, African traditional practitioners’ responses to their clients’ inquiries offer more comprehensive relief than Euro-Western practitioners’ decontextualized diagnoses, which are mostly pathology-centric.<sup>33</sup> Although African cosmologies varied across geographic settings, they all share fundamental principles. The holistic approach, which remains a key and unified element of African traditional medicine, is one such shared idea.<sup>34</sup>

Over time, traditional medical methods have become socially abnormal due to the prevalence of impostors and charlatans masquerading as traditional healers. African Indigenous Knowledge Systems (AIKS) critics frequently draw attention to the problem of muthi killings, also known as ritual murders, in which vulnerable groups, including those with albinism, are allegedly targeted and killed at the request of some self-proclaimed traditional healers, with their body parts allegedly being used as ingredients in traditional remedies.<sup>35</sup> It is crucial to differentiate these behaviours from the true tenets of African traditional medicine, which are based on moral and social ideals. Ubuntu is a key idea in African cultural philosophy that promotes humanistic ideals and the inherent dignity of every person.<sup>36</sup> The ethical framework of Ubuntu, which is based on respect for human dignity and the sacredness of life, does not include ritual murders. Therefore, it is not appropriate to discount the importance and role of traditional medicine due to the behaviour of a small number of dishonest people. This kind of generalization is just as irrational as disparaging Western medicine for the immoral or damaging actions of a small number of rogue practitioners. Real traditional healing must be distinguished from the activities of those who distort and compromise its tenets.

### THEORETICAL FRAMEWORK

The study was based on the Eziko Sipheka Sisophula theory to plumb gems of African indigenous knowledge that can be used to address the COVID-19 pandemic and/or other future pandemics to come. With the

<sup>29</sup> Yuan et al., “The Traditional Medicine and Modern Medicine from Natural Products.”;

<sup>30</sup> J. Sinson et al., “Non-Invasive Prenatal Sequencing for Multiple Mendelian Monogenic Disorders Using Circulating Cell-Free Fetal DNA,” *Nature Medicine* 25, no. 3 (2019): 439–47.

<sup>31</sup> Yuan et al., “The Traditional Medicine and Modern Medicine from Natural Products.”

<sup>32</sup> Annabella Opare-Henaku, *Notions of Spirits as Agents of Mental Illness among the Akan of Ghana: A Cultural-Psychological Exploration* (Virginia Commonwealth University, 2014).

<sup>33</sup> Joanna Teuton, Richard Bentall, and Chris Dowrick, “Conceptualizing Psychosis in Uganda: The Perspective of Indigenous and Religious Healers,” *Transcultural Psychiatry* 44, no. 1 (2007): 79–114.

<sup>34</sup> Tia et al., “Observation of Enhanced Chiral Asymmetries in the Inner-Shell Photoionization of Uniaxially Oriented Methyloxirane Enantiomers.”

<sup>35</sup> J.K., Asamoah-Gyadu, “Therapeutic Strategies in African Religions: Health, Herbal Medicines and Indigenous Christian Spirituality,” *Studies in World Christianity* 20, no. 1 (2014): 70–90.

<sup>36</sup> Sabelo Abednego Nxumalo and Dumisani Wilfred Mncube, “Using Indigenous Games and Knowledge to Decolonise the School Curriculum: Ubuntu Perspectives,” *Perspectives in Education* 36, no. 2 (2018): 103–18.

adoption of Eziko's theory, the study sought to restore, recover, research, and recreate the adoption of African indigenous health practitioners in response to the COVID-19 pandemic. Eziko Sipheka Sisophula means the 'gathering around the hearth to cook and dish out' is depicted to mean gathering African organic intellectuals in a bid to produce a distillate of unadulterated knowledge and intelligently disseminate it to the public for consumption.<sup>37</sup> Eziko cultivates unity, togetherness and cooperation in its process. These are key nuggets that were adopted to strengthen the role traditional health practitioners played during the COVID-19 pandemic. Eziko's theory does not promote unjustified imposition but calls stakeholders to come to the negotiating table to reason together in cooking the best meal. This theory was critical for this paper as it sought to present a practical and positive response to all concerned stakeholders to the presented information.

## **METHODOLOGY**

### **Study Setting**

Data was collected in Allandale village in Mpumalanga Province. The participants were picked from Allandale. The area was chosen because it is known for a hybrid of traditional health care practitioners due to its proximity to Mozambique and Zimbabwe. The village is also located near the Kruger National Park, a home to many animals and plants. Additionally, the village was chosen because there are many traditional health care practitioners who were active during the COVID-19 pandemic. The place has a reputation for traditional health care practitioners, who have made it in life, harnessing their livelihood from the flora and fauna.

### **Research Design and Paradigm**

This study adopted a case study design within a qualitative research framework. This design allowed for an in-depth and comprehensive generation of narratives from the five traditional health care practitioners. In that regard, the authors employed the interpretivist research paradigm, which emphasises "understanding individuals' interpretations of their unique contexts and circumstances to understand the complexities and presentation of the subject matter under investigation."<sup>38</sup>

### **Sampling**

In this study, a non-probability sampling method was employed to obtain relevant and reliable data from five (5) selected participants: a diviner, a herbalist, a traditional birth attendant, a traditional surgeon, and a faith healer. Specifically, purposive sampling was used to intentionally select participants based on their relevance to the research focus.

### **Data Collection Instrument**

Semi-structured interviews were used for collecting in-depth qualitative data. The semi-structured interview schedules allowed probing of responses to generate in-depth information. Formal informed consent was obtained from all participants before data collection. Initial contact was made in person to explain the purpose of the study and arrange preliminary interview appointments. A follow-up visit was conducted to confirm these appointments and ensure that interview times and locations were convenient for the participants and did not disrupt their routine work activities. Data collection was facilitated through the use of a structured interview schedule, with researchers reading questions aloud to participants. The questions were carefully designed to obtain responses aligned with the study objectives. To promote inclusion and ensure the collection of rich and culturally grounded data, participants were encouraged to respond in the language they were most comfortable using. Due to COVID-19 protocols, the initial interviews were conducted face-to-

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<sup>37</sup> N. Goduka, "Eziko: Sipheka Sisophula: Nguni Foundations for Educating/Researching for Sustainable Development," *South African Journal of Higher Education* 19, no. 3 (2005): 467–81.

<sup>38</sup> Haradhan Kumar Mohajan, "Qualitative Research Methodology in Social Sciences and Related Subjects," *Journal of Economic Development, Environment and People* 7, no. 1 (2018): 23–48.

face while strictly adhering to safety measures, including social distancing and mask-wearing. These interviews took place at the respective workplaces of the participants. Additional follow-up and questioning were conducted via telephone. The collected data were subsequently analysed using thematic analysis.

## **PRESENTATION OF FINDINGS AND DISCUSSION**

The themes that were established through the findings are discussed as follows.

### **The Outbreak of COVID-19**

From the narrative provided by the participants, the COVID-19 pandemic that ravaged the globe is attributed to starting in December 2019 in a place called Wuhan, China. Many conspiracy theories were being shared based on the media platforms that participants followed. These views ranged from political views, social views, religious views and economic views. One widely acknowledged consequence of the pandemic was its profound socioeconomic impact across the globe. It led to the postponement or cancellation of major political, religious, cultural, and sporting events. Additionally, the pandemic triggered widespread supply shortages, which were further exacerbated by instances of panic buying.

It should be noted that on March 5, 2020, South Africa's National Institute of Communicable Diseases (NICD) reported its first confirmed case. Unlike the given predications of cases rising at an exponential rate, the number of verified cases steadily increased. After being hit by the pandemic in March 2020, South Africa was soon hit by the pandemic and became the leading affected country in Africa. In the context of a global public health pandemic, it is interesting to see how South Africa responded and addressed the crisis. Instead of developing its own vaccines and PPEs, South Africa relied on external supplies of PPEs and vaccines.

It is trite to note that from the one South African single case reported on March 5th, the infection rate rapidly increased, thereby coercing the government to react hastily by placing the country under a stringent lockdown. The participants noted that this move was key to limiting the spread of the virus. The study participants also noted that despite the challenges of food supply, mainly in informal settlements, the majority of South Africans adhered to the imposed lockdown rules and regulations. In the areas where they disregarded the lockdown rules and regulations, the South African Police Services and South African Defence Forces were deployed to maintain and enforce the lockdown regulations. Given that the pandemic was sudden and unprecedented, budgets had to be re-adjusted to purchase PPEs in the form of masks, sanitizers, gloves and even protective suits.

### **Traditional Health Practitioners' Status**

In Allandale Village, the local community holds traditional health practitioners in high esteem by the local community. The researchers observed a notable increase in the number of individuals practicing traditional healing in recent years. This rise is accompanied by growing interest and active participation among younger generations, signalling a revitalization of traditional healing practices. The practice of traditional healing in South Africa is formally regulated under the Traditional Health Practitioners Act 22 of 2007. The implementation of this Act has been interpreted as giving rise to two distinct categories of practitioners: modern/trained practitioners and conservative/traditionalist practitioners. Some within both groups are officially registered, while others operate without registration. Conservative practitioners tend to resist innovation and the integration of contemporary healing methods, whereas modern practitioners are more open to adopting updated and complementary approaches.

Furthermore, the study revealed that traditional health practitioners are not only respected but also well-recognized in their communities. Word-of-mouth referrals play a significant role in patient outreach, with individuals recommending healers based on successful treatment experiences. Moreover, it was noted that traditional healers often refer patients to other practitioners or to local clinics when cases fall outside their scope of expertise, demonstrating a degree of collaboration within the broader healthcare system.

Despite the widespread use of traditional medicine, estimated at almost 80% of the South African population, the study highlighted several key findings:

- Even though the traditional health practitioners are officially considered part of the government system to provide healthcare and recognised in terms of the Traditional Health Practitioners Act, 22 of 2007, they were not consulted by the Department of Health during the COVID-19 pandemic.
- In the past, healers collaborated with the government to effectively treat HIV and TB by receiving training on how to recognize and send patients to hospitals or best practices for client visits. THPs believe that the national response to COVID-19 did not include them.
- THPs were not categorised as priority workers or given permits to work during the COVID-19.
- When looking at the financial status of most registered THPs, they did not receive PPE.

One herbalist noted, “Some folks were afraid to approach us. I'm not wearing a mask. Gloves are not on me. I have no hand sanitizer. I have to offer them sanitizer if they come here. I have no money.”

- Some of the herbs they discovered that could help with the treatment of COVID-19 were merely dismissed without any efforts to do any scientific tests or take any empirical evidence, but relied more on the Western vaccines at the expense of developing their own.

From the Act and known Indigenous Knowledge Systems (IKSs), the role and activities of traditional practitioners are diverse. Against this backdrop, traditional health practitioners contended that they played a critical role and contributed to the South African healthcare system during the COVID-19 pandemic. Their role is discussed below.

### **The Role of Traditional Health Practitioners**

Regarding their role, the traditional health practitioners performed the following functions during the COVID-19 pandemic;

- **Preparing and Dispensing Herbal Medicine to Treat Patients**

The study findings showed that traditional health practitioners were responsible for the preparation and dispensing of herbal medicine to treat symptoms of COVID-19 from various parts of animals, minerals and species of plants. Diviners, herbalists, traditional birth attendants, and traditional surgeons play a central role in traditional healing systems. Both faith-based practitioners and traditional healers utilize a variety of therapeutic compounds to prevent and treat a wide spectrum of illnesses. These healing practices are often accompanied by rituals, initiations, appeasements, spiritual dedications and protections, sacrifices, and other culturally and spiritually meaningful acts. Rooted in spiritual belief systems, such practices are considered vital to their communities for holistic management of illness.

During the COVID-19 outbreak, traditional health practitioners were playing an indispensable role in treating patients. These interventions focused on therapies and treatments that were administered to patients to completely cure them of their illnesses and return them to their pre-illness state. The results of the interviews showed that traditional medicine had a significant curative component. The majority of the responses indicated that conditions such as fevers, breathing challenges and asthma were eradicated using animal extracts, herbs, ceremonies, and other materials, including soils.

The rehabilitative dimension of traditional medicine includes helping patients restore physical, mental, and cognitive functions that have been impaired due to illness, trauma, or spiritual afflictions. Findings from the study indicate that traditional medical interventions play a crucial role in patient recovery, particularly for conditions such as depression and musculoskeletal disorders, including back pain. These interventions help patients to regain functionality and reintegrate into their communities. Participants identified rituals, libations, sacrifices, and the application of medicinal oils as integral components of the healing process.

- **Education and Awareness**

Traditional health practitioners played key roles in educating and giving referrals to patients to the appropriate levels of care despite being undermined and sidelined in the process. According to them, this was made in a bid to fight fake news and myths that could be disseminated to the communities and the clients. The education they gave to the public was based on their access to the media and indigenous training, as they did not have a direct link to the information from the responsible authorities, to contribute to the reduction of the infections.

In the context of primary health care, traditional medical interventions encompass health promotion and educational components aimed at enhancing well-being. These efforts encourage voluntary behaviour change across the biological, psychological, and physical dimensions of individuals and communities. According to participants, traditional medical practices play a vital promotional role in shaping and improving overall health outcomes. This includes influencing behavioural changes related to physical contact, sexual conduct, dietary habits, and social interactions. Some of these changes were shaped primarily by observing taboos. Some of these included avoiding sexual relations with someone who has attended a funeral and restricting access to a newborn baby until a certain period has passed. Therefore, followers of such taboos had to adhere to certain behaviours that promoted hygiene.

- **Counselling**

Traditional health practitioners provided necessary counselling to patients during the COVID-19 lockdown. During that time, most people were depressed and losing hope in life, and they stood in the gap as counsellors. A person who has training to provide advice on psychological or personal issues is known as a counsellor. THPs offer counselling to patients, particularly those who have given up, believing that the illness will end their lives, or who are struggling to cope due to stress, stigma, or a lack of family support.

- **Nutritionists: Health and Nutrition Guides**

Traditional health practitioners (THPs) reported acting as nutrition and health counsellors, according to the responses given. A nutritionist, according to Santiago, is a specialist in using food and nutrition to manage illness and improve health.<sup>39</sup> In this situation, THPs gave their patients advice on how to adopt healthy lives, including what foods to eat and what to avoid. The findings also showed that THPs have historically believed that lifestyle decisions and food consumption are important determinants of disease risk. As a result, many THPs had different opinions about what kinds of food patients should eat or eliminate from their diets.

- **Rituals**

Waldon emphasizes the critical role of religious practices and ceremonies within African societies in facilitating healing, attributing this to the foundational African belief system rooted in reverence for ancestors.<sup>40</sup> Similarly, Berg highlights the Ubuntu principle, which underscores the interconnectedness of individuals within indigenous African communities, asserting that a person exists through others.<sup>41</sup> In everyday life, African indigenous peoples venerate their ancestors, often referred to as the "living dead," acknowledging their continued presence and influence.

According to the study, traditional ancestral rites are commonly performed to bring healing to individuals, communities, the land, and other elements of the environment. Mawere defines a ceremony as a

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<sup>39</sup> Karen McCarthy et al., "Social Participation in College Students with Chronic Pain," *The Open Journal of Occupational Therapy* 9, no. 1 (January 15, 2021): 1–12, <https://doi.org/10.15453/2168-6408.1711>.

<sup>40</sup> Mike Waldon, "TOC Working Group to Examine Refugee TP Concentrations in May and June 2005," in *Technical Oversight Committee Meeting on October*, vol. 18, 2005, 2005.

<sup>41</sup> B. L. Berg, *Qualitative Research Methods for the Social Sciences*, 4th ed. (Boston: Allyn & Bacon, 2001).

ritual observance typically performed during grand or formal occasions.<sup>42</sup> Etkin et al. also describe ceremonies as formal religious or public events, often conducted to commemorate specific achievements, milestones, or anniversaries.<sup>43</sup> The researchers observed a prevalence of customs used to communicate with ancestors, conduct burials for those who died during the COVID-19 lockdown, and support bereaved families. These rituals were carried out according to government health regulations, although their specific form varied from household to household, depending on the guidance of individual traditional practitioners.

## RECOMMENDATIONS

To decolonize the healthcare system and systematically dismantle the dependencies left by colonization and apartheid without compromising public safety, the Department of Health must implement a regulated, specialized integration framework for African traditional health practitioners during public health crises. Rather than adopting a blanket "essential worker" status that risks spreading infection, the state must grant strictly defined, conditional operational permits to practitioners during lockdowns, explicitly matching their specific designations (diviners, herbalists, traditional birth attendants, traditional surgeons, and faith healers) to appropriate, non-transmission-risk primary care and psychological support roles. To ensure this integration is clinically viable, the state must establish a bi-directional regulatory framework that respects indigenous knowledge systems while co-developing standardized hygiene protocols, mandatory personal protective equipment (PPE) training, and clear boundaries on infectious disease management. This must be backed by a transparent, state-audited funding infrastructure dedicated to indigenous knowledge systems. This infrastructure will bypass rigid Western validation models by utilizing community-vetted efficacy data and legal frameworks designed to protect the collective intellectual property rights of local lineages, effectively creating a self-reliant, safe, and culturally grounded pandemic response.

## CONCLUSION

The findings indicate that traditional health practitioners played a pivotal role in delivering primary health care during the COVID-19 lockdown, particularly due to their unique attributes and widespread acceptance within rural communities. These practitioners used a diverse range of traditional remedies that addressed the core functions of primary health care, including prevention, treatment, rehabilitation, and health promotion. In addition, their holistic approach encompassed key factors such as nutrition, dietary practices, social behaviour, environmental awareness, and sustainability, elements that collectively serve as foundational pillars for the promotion of health and well-being in rural settings. Unfortunately, the role of traditional health practitioners in the usage of traditional medicine is on paper (arguably vague) and very limited and shunned in the real world. If properly harnessed, the country can produce good results and eliminate the dependency syndrome in which Africa relies on outside-developed vaccines.

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<sup>42</sup> Mawere, *The Struggle of African Indigenous Knowledge Systems in an Age of Globalization: A Case for Children's Traditional Games in South-Eastern Zimbabwe*.

<sup>43</sup> Caryn D Etkin et al., "Feasibility of Implementing the Strong for Life Program in Community Settings," *The Gerontologist* 46, no. 2 (2006): 284–92.

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