



Healing Beyond the Body: Afemai Indigenous Medicine, Spirituality and the Philosophy of Holistic Healthcare

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Abstract. This study explored Afemai indigenous medicine, spirituality, and holistic healthcare philosophies by positing that traditional healing among the Afemai peoples of Edo state Nigeria extend beyond treating the physical aspects of illness to include the psychological, social, spiritual and ecological. In the Afemai worldview health is defined as being in harmony with oneself, others and the spiritual realm/natural environment. Therefore, when individuals are unwell, they are often experiencing a disconnection from these three realms. The study presents a qualitative analysis of the Afemai peoples indigenous healing methods such as herbal remedies, traditional bone-setting, divining, spiritual therapies, and traditional midwife care. The study's qualitative methodology used ethnographic studies, phenomenological interpretations and historical analyses to explore the philosophical underpinnings of Afemai indigenous health care. The study demonstrates that Afemai indigenous medicine is grounded in a holistic model of healthcare that understands body, mind, spirit, communities and nature as interdependent. The study suggested that despite threats from Westernization, modernization, western science and western regulatory agencies, indigenous healing methods continue to have relevance to current debates about African bioethics; integrative medicine; and culturally competent and responsive healthcare.

Keywords: Afemai indigenous medicine; traditional healing; holistic healthcare; African indigenous knowledge; bioethics.

1. Introduction

The Eurocentric way of viewing Afemai traditional medicine is representative of the historical Western academic method of evaluating and comparing African indigenous medical systems using Western

biomedicine, colonial thought processes, and enlightenment based only on rational thinking. Within Western approach, traditional medical practice among the Afemai people have been generally viewed as being unscientific, primitive, superstitious, and therefore incompatible with modern healthcare practices. Therefore, a practice that is to be rejected and discarded altogether. This point of view was developed during the time of colonization when Christian missionaries, colonial administrative officers and Western trained physicians were attempting to remove indigenous medical traditions from communities in order to provide them with Western medicine and Christianity (Comaroff & Comaroff, 1991; Hountondji, 1996).

In recent years there are numerous contemporary scholarly perspectives challenging the views that have previously been held regarding indigenous knowledge, specifically regarding how indigenous medical knowledge represents a sophisticated system for providing health care which is based on its own philosophical, empirical and cultural basis (Mokgobi, 2014; WHO, 2013). The introduction of Western biomedical science into Africa during colonial period, had an immense effect on the traditional forms of indigenous care for the sick. Western medical science was based on empiricism, experimentation, and standardised pharmaceuticals. Many times, colonial authorities viewed indigenous healing traditions of Africans as inferior and paganistic (Comaroff & Comaroff, 1991). However, despite the important medical roles played by traditional healers in Afemai communities, colonial officials often referred to them as "witch doctors" so as to diminish their credibility in the eyes of the public in favour of western healthcare (Hountondji, 1996). Missionaries of Christianity reinforced this perception in that they associated traditional healing practices with idolatry, paganism, and occultism. Therefore, many indigenous healing institutions of Afemai people suffered from being

marginalized, despite the continuous acceptance by their own local communities (Onimhawo and Adamu, 2026).

Critics of Afemai indigenous medicine fail to recognize that indigenous healers have been developing a vast body of empirical knowledge over the years through long-term observations and experiments. In fact, numerous current pharmaceutical drugs originated from medicinal plants used in traditional healing practices (Anyinam, 1995). Although many Afemai treatments need further validation regarding their pharmacological efficacy, dismissing an entire system of medical practice simply because of scientific verifications, ignore its very real contribution to healthcare.

Another primary characteristic of the Eurocentric viewpoint is the separation of medicine from religion. Western biomedical science generally interprets disease solely through biological optics of pathogens and genetics (WHO, 2013) whereas traditional Afemai medicine considers disease to be caused by a variety of different levels of causality (Mbiti, 1991). Biomedical science generally understands sickness as a problem that affects only the individual who has fallen ill. Diagnosing and treating sickness focuses on restoring biological normalcy through medical intervention, whereas traditional medicine among the Afemai people sees wellness as being inherently communal.

This communitarian approach to understanding health arises from African philosophical idea that personal identity occurs within interpersonal relationships rather than individually (Wiredu, 1996). However, Eurocentric scholars have frequently decried the explanations provided by Afemai medical epistemology, because they diverge from biomedical paradigms for explaining how diseases occur.

Afemai's indigenous knowledge system was also devalued because of lack of written documentation of scientific evidence. Eurocentric assumption is that oral tradition, which is how indigenous knowledge is passed down from generation to generation, does not provide the same level of intellectual rigor as written documentation. Therefore, many researchers classify Afemai medicinal epistemology as "folklore," even though there are now significant ethnobotanical and anthropological evidence that show indigenous African societies were, and are able to identify large numbers of medicinal plants, understand how to manage diseases, engage in preventative health care, and conserve the environment (Anyinam, 1995). While it is true that the lack of written documentation does not eliminate the possibility of empirical

evidence or scientific observation, some researchers continue to assume that oral traditions do not involve scientific observation or experimental procedures.

Not only did colonial authorities reject indigenous medicine and impose Western medicine on colonized peoples, but the legacy of this process is still evident today in many parts of Africa. The once respected and valued traditional healers were devalued. Younger generations began to show little interest in learning about the history and practices of indigenous medicine. Additionally, increasing numbers of educated Africans went to hospitals run by Europeans and used prescription medications made in Europe (Comaroff & Comaroff, 1991).

While this loss of knowledge and culture is certainly a tragic result of colonization, traditional medicine remains an important part of daily life for many people living in Afemai communities. Many people continue to seek out traditional healers when they need help dealing with illnesses that have a spiritual, cultural and psychosocial dimension.

However, many post-colonial scholars challenge Eurocentric evaluations of traditional medicine arguing that such evaluations rely too heavily on Western scientific standards. These scholars argue that if we are going to evaluate indigenous knowledge systems we must consider the ways in which those knowledge systems are grounded in specific cultural, philosophical, and epistemological contexts (Wiredu, 1996; Asante, 2007).

Furthermore, recent studies conducted by the World Health Organization (2013) recognize traditional medicine as an essential element of primary health care and recommend that member states incorporate scientifically proven traditional medical treatments into their national health care systems. However, the WHO recommends doing so while establishing standards for safe use, effectiveness and quality.

Eurocentric perspectives tend to under appreciate the numerous positive features of traditional medicine practiced by the Afemai people. Some unappreciated positive qualities of traditional medicine include: a more complete understanding of what makes up good health, a greater focus on preventing disease before it occurs, more accessible for people living in rural areas where access to Western style medical facilities are very difficult or non-existent, more affordable than Western-style medical interventions (prescription and medication), much richer ethnobotanical knowledge base regarding medicinal plant properties, better provision for emotional-psychological needs related to

illness (community support), and more culturally acceptable methods of providing assistance with respect to recovery from illness (Anyinam, 1995; Mokgobi, 2014).

Although traditional medicine in Africa continues to attract growing interest among scholars, large areas of research are still missing relative to the traditional healing systems of the indigenous peoples of Afemai. Most previous studies of African traditional healthcare focused broadly upon African indigenous medicine, or the practices of larger ethnic groups, i.e., the Yoruba, Igbo, Hausa, Akan, and Zulu. As a result, relatively little scholarly work has been done to document empirically and philosophically the ways by which Afemai traditional healing unites medicinal knowledge, spiritual beliefs, community norms and values and awareness of ecosystems within a unified whole healing system.

One of the most glaring omissions in prior research is the fact that much of what has been studied concerning traditional medicine has been viewed through either biomedical, ethnobotanical or anthropological lenses, without sufficient consideration given to the philosophical and religious frameworks out of which the indigenous world view informing the various Afemai concepts of health and illness emerge. In particular many studies have focused upon whether plant extracts used by traditional healers possess pharmacological properties, or what social and cultural roles traditional healers play in their communities, without recognizing that the indigenous world views out of which the concepts of health, illness and healing arise also define the nature of personhood. Therefore, these body of research provide a less-than-complete picture of traditional healing as a comprehensive philosophy of human wellness as opposed to simply an alternative form of therapy.

Another area where there is currently very limited scholarly study is related to the relationship between Afemai traditional healing and current holistic forms of healthcare. While it is becoming increasingly evident in international discussions of healthcare that there should be increased integration of complementary therapies into conventional healthcare delivery models that emphasize patient-centeredness, there are few studies that systematically assess how the basic principles of indigenous Afemai healthcare (e.g., relational aspects of personhood, communal obligations for health, spirit-based explanations for illness and health) can inform contemporary healthcare policies and provide culturally relevant frameworks for medical practice.

Scholarly research typically views the respective areas of study independently, thus neglecting the multi-dimensional characteristics of indigenous healing systems. Another significant methodology gap has been identified within existing literature. Most of the research utilizes secondary resources and general descriptions of African traditional medicine and does not utilize primary qualitative data collected through phenomenological methods in Afemai communities. As a result, the voices and day-to-day lives of traditional healers, community leaders and patients and those who have inherited indigenous knowledge have remained relatively unexplored amongst the Afemai people.

This study attempts to address both of these gaps by investigating Afemai indigenous medicine as a holistic health care system rooted in African philosophy and religious thought. The study advances beyond mere descriptive narratives of traditional healing and explores the philosophical assumptions, spiritual convictions, moral and ethical values and community practices which contribute to the delivery of indigenous healthcare amongst Afemai people.

Therefore, the purpose of this study is to examine the spirituality of Afemai indigenous medicine and its relationship to holistic healthcare. This paper presents the argument that Afemai healing process represents a broad healthcare philosophy that sees human wellness as a reciprocal relationship between body, mind, spirit, society and nature. By studying these indigenous models of healthcare, this study seeks to contribute to larger discourses in African philosophy, African epistemology, religion, bio-ethics and anthropology of healthcare, on the viability of indigenous knowledge systems for addressing contemporary health-related problems.

This study adopted a qualitative research design employing a documentary and phenomenological approach to examine Afemai indigenous medicine as a holistic healthcare system embedded within the religious, cultural, and philosophical worldview of the Afemai people of Edo State, Nigeria. This study utilized the critical evaluation and interpretation of prior scholarly literature and indigenous knowledge to describe the interrelated nature of health, spirituality and traditional healing. The documentary method involved a systematic evaluation of both primary and secondary information. A large number of primary sources were utilized in the study. Ethnographic accounts of the Afemai people, oral histories collected by anthropologists and historians, historical documentation by colonial governments, and policy documents from the World Health Organization represent examples of primary sources. Secondary

sources include peer reviewed journals, books, doctoral theses, conference papers and reports on African traditional medicine, medical anthropology, African philosophy, religious studies and indigenous healthcare systems. Literature specifically addressing the Afemai people their Edo speaking relatives were given priority for inclusion into this study so as to provide cultural specificities while placing the study in a larger context of contemporary African scholarship (Anyinam, 1995; Mbiti, 1991; WHO, 2013).

In addition to utilizing the documentary method, the study utilizes the phenomenological method. The phenomenological method is utilized to examine how illness, healing, well-being, ancestors, spiritual forces and interpersonal relationships among family members are perceived by the Afemai people. The advantage of using the phenomenological method is to uphold the understanding of how the Afemai people interpret their own indigenous healing practices independent of Eurocentric or biomedical assumptions. This method is most applicable to the study of indigenous health care systems since they are typically defined by how healthcare providers and patients define health-related concepts and events as well as the meanings associated with them (Mokgobi, 2014; Wiredu, 1996).

An analytic framework that includes both post-colonial theory and African indigenous knowledge systems provided a critical means of evaluating both the merits and limitations of Afemai traditional medicine. From this perspective, traditional medicine represents a valid form of knowledge that has been generated over multiple generations through direct observation, experimentation and culturally transmitted knowledge. Using post-colonial theory as part of the analytic framework offered a critical means of analysing how colonialism resulted in a devaluation of African healing systems while providing legitimacy to Western forms of biomedicine (Comaroff & Comaroff, 1991; Hountondji, 1996). By using both frameworks simultaneously, this study was able to offer an objective assessment of the advantages and disadvantages of Afemai traditional medicine by avoiding either overly romanticised interpretations or stereotypical views rooted in colonialism.

An examination of relevant literature was conducted to identify common themes. Common themes included indigenous conceptions of health and illness, herbal medicine, spiritual healing, divination, ancestral mediation, preventative health care, community wellness and interactions between traditional and biomedicine-based health care systems. All identified themes were analysed in light of the philosophical and

religious beliefs held by the Afemai people. Therefore, this study demonstrated that traditional medicine is a holistic system of health care that incorporates several components.

Academic rigor has been maintained throughout this study. Perspectives were compared from anthropology, African philosophy, religious studies, public health and medical sociology in order to obtain a comprehensive understanding of Afemai indigenous medicine while contributing to ongoing discussions regarding decolonisation of health care services, indigenous knowledge systems, and holistic health care models for Africans.

2. The Afemai Understanding of Health and Illness

The Afemai are an ethnolinguistic people who live in the Northern part of Edo State, Nigeria. They can be found in six local government areas: Akoko Edo, Etsako Central, Etsako East, Etsako West, Owan East and Owan West. While there is great similarity in language and culture between the Afemai and the larger Edo speaking people, there is considerable historical identity, social structure, religious belief system and indigenous knowledge base that differs greatly (Bradbury 1957; Ogbomo 1997).

It was not until the last half of the 20th century that the Afemai gained widespread recognition as a single group of people to include such related subgroups as the Etsako, Owan and Akoko-Edo. Historically prior to that time each subgroup referred to itself as a clan or kingdom. In addition to having similar cultural practices, kinship patterns, traditional institutions and cosmology, they also differ from all surrounding ethnic groups (Ogbomo 1997).

From a historical perspective the Afemai identify themselves through separate migration stories (Adamu 2026). Many of these stories connect the Afemai to the ancient Benin Kingdom, while others describe their ancestors settling in the area without reference to any connection to the Benin Kingdom and also interacting with neighbouring Yoruba, Nupe, Igala and Epira peoples. As a result of these contacts throughout history the Afemai developed a rich cultural heritage that includes both decentralized politics in some communities and centralized monarchies in others. To this day most traditional leaders such as the Okuokpellagbe of Okpella, Otaru of Auch, Ogiene of Uzairue continue to act as guardians of customary law and indigenous religions. Furthermore, in conjunction with other traditional health practitioners, they are still very active in maintaining traditional

practices of indigenous healthcare (Egharevba 1968; Bradbury 1957).

The economy of the Afemai has historically been dependent upon agriculture, hunting, fishing, crafts and trade. Agriculture continues to be the primary source of employment with major crops being yams, cassava, corn, rice, cocoyam, vegetables and palm oil. The close relationship between the people and their natural environment has allowed for the acquisition of large amounts of indigenous knowledge regarding medicinal plants, forests, rivers and wildlife. It is this knowledge of ecosystems that provides the basis for Afemai traditional medicine, where a variety of plant materials (roots, bark, leaves etc.) are used for curative purposes (Anyinam 1995).

Religion plays a central role in Afemai society. Prior to the advent of Christianity and Islam the people had an indigenous religion based on belief in a supreme Godhead and many lesser gods and goddesses as well as ancestral spirits and many other spiritual beings that affect human life. Both the physical world and the spiritual world were seen as interdependent with health problems viewed as having both spiritual and physical components. (Mbiti 1991).

Socially, the Afemai operate under a social organization that is predicated on extended families, lineage structures, age grade organizations and community cooperation. There is a strong emphasis placed on respect for elders and veneration for ancestors as well as shared responsibility for the welfare of all members. All these communal elements provide a context for how indigenous health care functions among the Afemai.

Traditional healers serve as guardians of medicinal knowledge passed down through generations using apprenticeships and oral traditions. Their expertise goes far beyond herbalism to include divining, giving spiritual counsel, routine cleansing, bone-setting, midwifery, preventive health services. In essence healing is viewed as a holistic approach to restoring balance between the physical body, the mind, the community and the spiritual realm. This inclusive view of health sets indigenous health care apart from biomedicine's narrow focus on treating disease at the level of the individual organism (Mokgobi 2014).

Although Christianity, Islam, globalization, formal education and urbanization have had substantial effects on modern day society of the Afemai traditional medicinal knowledge remains an essential element of health care. Many individuals continue to see traditional healers whether alone or in conjunction with biomedical professionals especially when

experiencing illnesses perceived as spiritually, psycho-social and culturally unique. Continued utilization by individuals demonstrates long-term viability of Afemai indigenous health care and illustrates value of African indigenous health knowledge systems (WHO 2013).

The indigenous view of Afemai people concerning illness and health views humans as part of an interconnected universe which includes the physical aspect of the body, the spiritual, interpersonal relations, the moral order and the environment. As opposed to the current Western biomedical model, where the concept of health can be defined by the absence of illness or disease, Afemai culture has a traditional definition of health that describes it as "balance" and "harmony." In order for individuals to be described as healthy they need to have their bodies in good working order. However, this alone does not constitute health. Individuals need to be in good working order physically. Additionally, individuals need to have proper social relationships in place. They also need to have a positive and balanced relationship with the spiritual forces of the world. They also need to feel at peace emotionally. They need to have the ability to contribute positively to their communities.

Afemai people view the individual as a social being who exists in relation to other beings. Individual's well-being relies on them having harmonious interactions with their families, friends, and all members of their society. There are many philosophies throughout Afemai that emphasize social existence and how individual beings exist interrelatedly with both seen and unseen elements of our worlds. Mbiti (1990) states that an individual's health encompasses not only their physical strength but also their sense of belonging in society and their spiritual stability. Health represents a state of equilibrium among all aspects of existence. When one dimension of an individual's existence becomes disturbed, it may lead to disturbances in other areas of that individual's existence. Therefore, healing for Afemai people means restoring a balance among these areas as opposed to solely focusing on eliminating an individual's symptoms. An African way of life views human flourishing as being dependent upon each person maintaining positive relationships with other individuals, spiritual beings and nature (Gyekye, 1995).

In addition to viewing health as balance and harmony in several areas of existence, the Afemai also identify what is referred to as harmony within each area. These include: physical harmony which indicates whether a person is strong and free from diseases. Psychological

harmony which refers to a person's emotional stability and lack thereof. Inner peace and mental well-being are reflective of psychological harmony. Social harmony which demonstrates whether or not a person maintains peaceful relationships within their family and community. Spiritual harmony which refers to a person's relationship with God, ancestors and spiritual beings. Environmental harmony which relates to how well a person interacts responsibly with the natural world. Therefore, for Afemai people, sickness and illness is not just a problem confined to the physical aspect of the body, but is also representative of a total disconnection within all areas of an individual's existence.

Traditionally, Afemai conceptualization of illness may be caused by more than one factor. While some illnesses may be conceptualized using a framework based on purely physical causations (e.g., injury, infection, malnutrition, environment), other illnesses may be interpreted within a socially-constructed and spiritually-based framework. Traditional Afemai medicine has historically operated with an expanded definition of causality. Illnesses may be understood as arising from: some illnesses are caused by physical factors such as: infections and diseases, accidents and injuries, dietary issues, environmental conditions, weak body. Treatment for these types of illnesses can include herbal medicine, dietary changes, physical therapies, etc. all of which have been developed through indigenous practice.

The African ethos and worldview of the Afemai people also understand that human relationships influence health. Therefore, various situations including but not limited to conflicts between individuals, society-wide injustices, broken relationships, and other moral transgressions can lead to personal suffering. Restitution for these types of illnesses may require reconciliation with those who have been wronged, forgiveness for those who have committed wrongdoings against the sick person or their family members, and restoration of social order and harmony. This is based on the African ethical principle that individual well-being cannot be separated from community well-being (Wiredu, 1996).

Furthermore, some illnesses experienced by Afemai individuals may be perceived as involving spiritual realities. The causes of this type of illness may include: disturbance of the spiritual connection between humans and spiritual entities, neglect of cultural responsibilities, violation of sacred traditions, ancestral wounds and disturbances and spiritual disharmony. As a result, healing for this type of illness may involve spiritual consultations and counselling

with spiritual leaders or priests, prayers and rituals, and other culturally significant practices.

A distinguishing aspect of Afemai views of health is that healing often takes place communally. In this way, when someone becomes ill it is considered by many to affect their entire extended family. Support for the sick person can be provided in various ways including by relatives; elder people; traditional healers and members of their community. Support from the community includes emotional help; counselling; conflict resolution; performing rituals and social integration of the patient back into the community. This collective approach to healing is representative of the belief in Africa that "a person is a person because of other persons," which has been described as a common philosophy within most aspects of African communal thinking (Mbiti, 1990).

Spirituality plays a vital role in the way Afemai people think about their health. For many Afemai, the spiritual world is very much alive and it contributes to our experiences; therefore, we must maintain balance among ourselves and the spirits in order to achieve good health. This belief system leads traditional healers to view medicine through a dual lens - one being medical and the other being spiritual. When patients become ill physically, they are also experiencing illness spiritually. Therefore, healing occurs at two levels.

The Afemai understandings of health reflect how they see humans related to the natural world. They use forests, plants, rivers and animals as a source of healing remedies, and for their cultural value. These healers have been using knowledge from medicinal plants passed down for generations, showing that there is an ecologic awareness, based on traditional ways of providing health care. In addition, this ecological perspective aligns with the African indigenous views which promote respect for nature, and responsible management of our environmental resources.

3. Major Traditional Healing Practices among the Afemai

Afemai traditional health care has been maintained across generations of indigenous knowledge. As such, the knowledge has been passed down from generation to generation using family networks, apprenticeships, ritual institutions, and customary practices. The main forms of traditional healing practices among the Afemai people are herbal medicine, spiritual diagnosis and divination, bone-setting, traditional midwifery, therapeutic rituals, and group-based healing techniques.

The use of medicinal plants (Pharmacopoeia) is one of the largest components of Afemai traditional health care. Traditionally trained herbalists are knowledgeable about many types of medicinal plants. These can be leaves, stems, roots, barks, seeds, etc. The knowledge about these plants is usually gained by observing how others use them to prevent or cure ailments. Most of this knowledge is also learned through hands-on experience. Many ways exist to prepare medicinal plants for the purpose of preventing or curing illness. Some examples are: preparation of decoction made from boiling medicinal plant material, crush leaves and roots for medicinal extracts, grind leaves and roots into powder for ingestion, apply topical mixture to open sores or skin lesions, prepare combination medicines out of medicinal plants with other natural products, use of medicinal herbs can help with a number of ailments. Examples are: treatment of fever and malaria, curing stomach problems, relieving respiratory issues, treating skin problems, reducing body pain and inflammation, helping to close cuts/sores, prevent infection, addressing reproductive health issues.

Using medicinal herbs is evidence of how Afemai recognize nature as a resource to obtain drugs for healing. Traditional healers have very complete information regarding each type of plant's characteristics and potential uses for treatment. Thus, there exists a relationship between the inhabitants and their surroundings based upon ecology (World Health Organization [WHO] 2019; Olupona 2014).

Divination plays an important role in Afemai traditional healing since some maladies occur due to reasons that cannot be explained physically. A traditional healer or diviner will seek to find those unknown variables that cause a person to become ill and determine what treatments should be employed. Factors that a traditional healer may examine in order to make a spiritual diagnosis could be: a disruption in relationships between individuals and supernatural beings, violations against cultural prohibitions and taboo, disruptions in family dynamics, concerns related to ancestors, imbalance in moral and social behaviours

In contrast to the Western scientific method of identifying bacteria, pathogens, physiological causes for disease, Afemai traditional spirituality attempts to explore the broader meaning and context of a person's suffering. The healer acts as both doctor and spiritual guide.

The fact that many Africans view themselves as humans having both visible (physical) and invisible

(spiritual) aspects to existence is demonstrated by the spiritual diagnosis process (Mbiti 1990).

Another major aspect of Afemai traditional medicine involves spiritual treatment and healing. Since health encompasses spiritual well-being as well as physical being, it follows that treatment and healing can involve procedures that restore equilibrium between the individual, community, spiritual reality and the natural world. Procedures that may fall under the category of spiritual healing and treatment are: prayer invocation, ritual cleansing, protective measures, reconciliation rituals and group worship. It would be incorrect to consider these practices simply as religious when considering their function as therapeutic interventions targeting the emotional, sociological, spiritual dimensions of human suffering. That illness is often interpreted within a conceptual framework of meaning, morality, relationship rather than primarily through biological causation is exemplified by the spiritual component of Afemai healing (Idowu 1973).

Bone-setters use their hands and local materials to treat broken limbs. Massage therapists use manipulation and pressure to stimulate blood flow and relieve pain. Herbalists use plants to create remedies to alleviate symptoms such as fever, nausea, vomiting, etc. Dietitians advise on proper food choices to prevent malnutrition, maintain energy levels, and reduce risk of various diseases. Spiritual counselors offer advice on how to live a balanced life; they often perform rites and ceremonies designed to bring people closer to God. In addition to these forms of healing, there exist several preventative measures taken by the Afemai to avoid sickness and misfortune. These include: adhering to certain traditions and customs, protecting oneself from evil spirits through prayer, ritual, and other means, taking care of one's body through proper hygiene and diet, maintaining social harmony and respect among members of one's community. All of these approaches serve as reminders that preventing illness is just as important as treating it once it has occurred. In fact, many believe that if the mind, spirit and body are all working together in a healthy way, then we will not become ill in the first place. This philosophy promotes overall wellness and good health.

4. Holistic Health Care System in Afemai Traditional Thought

The holistic nature of Afemai traditional medicine includes recognition that emotional and psychological issues can directly impact a person's health. Issues such as fear, anxiety, grief, social isolation and unresolved conflict can contribute to decreased

wellness. These traditional healers and elders are not only medical practitioners but also counsellors. They help individuals make sense out of their suffering and gain confidence in themselves again. This represents an African perspective on healing where the whole person is restored to wellness versus just treating a specific physical issue (Gyekye, 1995). Spirituality plays a significant role in the Afemai traditional healthcare philosophy. The Afemai perspective recognizes that human existence encompasses both seen and unseen realities. Some illnesses may be interpreted as having spiritual components that require spiritual interventions. Interventions such as prayer, spiritual consultation, ritual purifications, reconciliation rituals and religious practices can be utilized in attempts to achieve healing. However, the spiritual dimension does not exclude or replace physical treatments but rather supports them by answering questions concerning meaning, purpose, suffering and human destiny. African traditional religions serve as frameworks to assist in interpreting human experiences (including illness and healing) (Idowu, 1973).

Conflict Resolution Mechanisms are established and practiced to prevent conflict from leading to further suffering or illness. Reconciliation processes are followed to promote harmony among all parties involved. All members of the community participate together in various forms of healing activities. The community perspective in which the individual achieves fulfilment through positive relationships with others corresponds to the African philosophy, i.e., that the realization of one's full potential occurs when we cultivate healthy relationships with others. In fact, as argued by Mbiti (1990), many African concepts of personhood underscore the idea that "being a person" is best exemplified by participating in community life and that achieving social harmony is essential to our overall well-being.

The environmental area is not just regarded as a source of goods and services but as a living entity that sustains spiritually and culturally. Therefore, the preservation of natural areas such as forest, sacred spaces, and the conservation of natural resources are directly related to the promotion of health and wellness within communities. Destruction of these ecosystems will negatively affect not only biodiversity but also indigenous health care systems based on traditional ecological knowledge. This environmental viewpoint is reflective of an African indigenous worldview that emphasizes sustainable relationships between humans and the natural world (Olupona, 2014).

Prevention is a major component of traditional health care in Africa and amongst Afemai people. Maintenance of health involves practices that protect individuals against harm caused by physical, social, and spiritual forces. Some preventive practices used in traditional health care by Afemai people include: proper nutrition, respect for cultural norms, fulfilment of One's responsibilities towards others in society, protection of the environment, preservation of harmonious relationships. Prevention is understood broadly as maintaining equilibrium between individuals and their surrounding environments.

Amongst Afemai people, traditional healers serve several functions: medical practitioner, herbalist, expert spiritual advisor, counsellor, custodian of indigenous knowledge and guide to community development. Unlike Western-trained physicians who typically specialize in diagnosing and treating diseases affecting specific parts of the body, traditional healers frequently treat illnesses holistically by considering the totality of a person's life circumstances. Principles underlying holistic health care amongst Afemai people provide insight into the evolving discussion regarding integrative medicine, and culturally sensitive health care. The modern biomedicine movement is increasingly recognizing that treatment of patients should be approached from a holistic perspective, focusing on treating the total person as opposed to merely addressing an isolated biological issue.

Key contributions made by the holistic health care system of the Afemai people include: patient-centred care, community participation in health care delivery systems, prevention of disease and health Issues, promoting environmental health and wellness, providing spiritual support to patients. However, successful integration between indigenous and biomedical health delivery systems requires careful consideration, including documentation of indigenous knowledge and regulatory mechanisms to ensure safety for patients.

5. Traditional Healing and Contemporary Healthcare

This is an important area of study in global health and specifically within Africa's indigenous populations who are still using indigenous medical practices alongside biomedicine. For the Afemai people of Edo state, Nigeria indigenous medicine remains an important part of the population's overall understanding of the individual and how they interact with both the natural world and each other. On the other hand, modern medicine or what we call today contemporary or biomedical medicine is based almost

entirely on the sciences. It relies upon diagnostic methods which involve science and technology; evidence-based treatments; advanced medical training; and various technologies used during the treatment process.

In addition to looking at these two types of medicine as two separate entities, many researchers, practitioners, and organizations now advocate for collaboration and engagement between them. Collaboration would require acknowledging the positive aspects of indigenous medicine while working to address issues regarding safety, validity, ethics, and consistency across all areas of indigenous medicine. The use of both types of medicine together will allow for the creation of healthcare models which incorporate culture; are holistic; and meet the unique needs of the patient and community.

Afemai traditional healers do not just ask "what disease is this person experiencing?" but may ask additional questions such as: What societal influences contributed to this person's suffering? Are there disruptions in family and community relations? Has this illness taken on cultural and spiritual implications? How can this person achieve balance and harmony again? This is consistent with the larger body of thought on personhood found throughout most of Africa, where individuals are viewed as relational beings connected to community, ancestors, the divine and nature (Mbiti, 1990).

Indigenous medicine has continued to offer valuable contributions to modern healthcare, particularly in remote and rural areas where patients may lack access to biomedical facilities. Some ways that indigenous healers provide care to members of the Afemai community includes: herbal medicine, bone setting, birth assistance, spiritual counselling, health prevention activities and community-based health care. Perhaps one of the greatest contributions that indigenous medicine offers is its wealth of information regarding medicinal plants. Many indigenous medicines utilize plants native to their regions, and have represented generations of collective knowledge regarding the therapeutic potential of plants. The WHO recognizes traditional medicine as a viable healthcare option for millions of people around the world and recommends research and responsible integration of indigenous practices into health systems (WHO, 2019).

Biomedicine has had a profound impact on human health through advancements in scientific discovery and technological innovation combined with evidence-based treatment options. Advances in

biomedicine include: diagnostic accuracy, surgery, immunizations and epidemic control programs, emergency medical services, laboratory investigation and testing, pharmacological development and specialized clinical treatment options. Advances in biomedical practice have provided unparalleled success in controlling infections and diseases, traumatic injuries, chronic illnesses and emergency situations. Research and clinical trial processes exist to evaluate the efficacy and safety of new treatments.

However, biomedicine has some shortcomings in treating the cultural, societal, spiritual aspects of illness. When biomedical healthcare providers fail to take into consideration patients' cultural beliefs and their social context patients may perceive the healthcare system as impersonal. Although traditional healing has strong roots in culture, there are many obstacles facing traditional healing today. The three major challenges to traditional healing today include:

Lacking standardized procedures. Traditional remedies have varied among practitioners and, therefore, varying ways of preparing and dosing these remedies create a problem in assessing the efficacy of these remedies and maintaining patient safety. Limited documentation of indigenous medical knowledge. Much indigenous medical knowledge still exists in an unrecorded form. There needs to be further documentation through science to assess what are the active ingredients in medicinal plants, the beneficial effects they have as therapies, and possible adverse reactions to them. There are also some ethical concerns about using traditional healing like patient consent, confidentiality, safety standards and access to immediate medical treatment for emergencies. Also, modernization, environmental damage and changes in cultural practices pose a risk to passing down this traditional medical knowledge to future generations.

Establishing a collaborative working relationship between traditional healing and modern medicine will require developing a model based on mutual respect, not competition. It will not involve blindly accepting all traditional healing practices without first evaluating them. Rather, it will involve critically examining them scientifically, establishing ethical regulations governing how they can be used, and recognizing the value of indigenous medical knowledge.

Examples of potential areas of collaboration include: research and documentation, and training and regulation. Traditional practitioners could receive training in basic hygiene, patient safety, referral systems, and other aspects of basic healthcare. Traditional healers and biomedicine professionals could collaborate through referral systems where a traditional healer refers patients who need special or

advanced medical treatments to biomedical professionals. Communities should be able to protect their own indigenous medical knowledge while being prevented from exploiting the use of their traditional medical resources for profit.

6. Contributions of Afemai Indigenous Medicine to African Bioethics

The philosophical and spiritual dimensions of Afemai healing make considerable contributions to contemporary bioethical debates in Africa. Many contemporary bioethical frameworks emphasize universal principles such as autonomy, justice and individual rights. Although these principles continue to hold relevance, they provide an additional framework for indigenous African ethics which includes consideration of interconnectedness of communities, relational concepts of personhood, wellbeing as defined by spirit, responsibilities across generations and ecological interconnectedness. Therefore, Afemai traditional healthcare provides an alternate model that sees health as a common concern for humanity and the earth as opposed to seeing health as simply another medical condition to treat.

7. Conclusion

Afemai traditional healing practices illustrate a sophisticated indigenous healthcare model which goes far beyond treating just the physiological aspects of health, and instead includes all aspects of human existence. From the perspective of the Afemai people, their view of health encompasses a holistic world-view encompassing the interrelated dimensions. In this context, illness is viewed as potentially disrupting one or more of these four realms: physical; interpersonal; spiritual; and ecological. Therefore, healing in the view of the Afemai means restoring wholeness via combinations of physical, social/spiritual, and environmental intervention(s).

The study illustrated that indigenous medicine among the Afemai peoples is representative of a large body of knowledge that is practiced through several forms including, herbal remedy; spiritual diagnosis; traditional bone setting; midwifery; ritual healing; and community-based care. All of these practices represent key aspects of the underlying philosophical ideas concerning relational personhood, community responsibility, and the non-separation of persons from their spiritual and natural environments. As such, healers function as both practitioners of medicine and as guardians and custodians of culture and tradition and as moral guides to the well-being of communities.

From a religious viewpoint, traditional healing practices among the Afemai reflect the belief that health is contingent upon a harmonious relationship between human beings and the sacred order of existence. Healing rituals and spiritual practices offer frameworks for making sense out of suffering; for regaining meaning and purpose; and for dealing with existential concerns. Thus, indigenous healthcare in Africa cannot be completely comprehended without taking into account its religious and philosophical foundation.

Moreover, holistic health care among the Afemai also contributes significantly to current debates regarding integrative medicine, African bioethics, and culturally sensitive health care. The focus on preventive care, active participant role by communities, responsibility towards their environment, and total person care are examples of what could address many of the shortcomings found within pure biomedicine. However, for indigenous and modern health care systems to effectively collaborate there will need to be careful analysis, research and evaluation regarding ethics, regulations, recognition and respect for indigenous knowledge.

Therefore, traditional healing among the Afemai is greater than an alternate form of medical treatment; it is a representation of an indigenous philosophy of living that views health as a condition of harmony existing between human beings, society, community, spirituality, and nature. It is crucially important to protect and store this knowledge base not only for maintaining cultural heritage, but also for providing new perspectives toward more inclusive and humane models of health care in Africa and elsewhere.

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