

## African Cultural Practices and Health Implications for Nigeria Rural Development

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### *Abstract*

*African societies and cultural practices over these years had commanded global attention as it concern health conditions of the people. The paper looks at some of these practices (positive and negative) and showcases how these cultural heritages in attitudes and behaviors affect the overall progress of the people and society from the Nigerian perspective. The paper which qualitatively x-rays the African societal practices reveals that some of these practices are negatively affecting the lives of women and children and that cultural change and continuities in various angles will go a long way through enculturation to ensure that some of these negative practices are destroyed and new positive ones are enhanced. The paper concludes illnesses/diseases like malaria, typhoid, HIV/AIDS, cultural practices carried on by Africans makes the whole efforts a child's play.*

**Key Words:** *Culture, African Societies, Health, Implications and Rural Development.*

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### **Introduction**

African continent is one of the largest continents of the world and it's a multi-ethnic society with its peculiar nature and diverse practices (Ojua and Omono, 2012). Also one sees that Nigeria as a country is made up of people from different ethnic groups and cultural practices with the dominant groups being Igbos, Yorubas and Hausas. It has more than 250 ethnic groups with different cultural practices. Some of these cultural practices, which have endured centuries of practice work for the people. It is not uncommon to think of something crude and bad whenever one talks about cultural practices as it concerns health. Not all cultural/traditional practices are bad however, some have stood the test of time and have positive values, others are uncertain and negatively harmful. It is essential to have an idea about cultural practices of some communities because the practices a community adopts fulfill certain purposes for the culture bearers (Idehen, 2007).

The cultural practices of people not only affect their health but also affect all aspects of life including social relationships, contribution to societal functioning and disease condition. Man living in an interactive society is affected by what happens in his environment and how he reacts to it. All people, no matter the race, have their beliefs and practices concerning health and disease. Each society or community has its peculiar way of doing things and these practices go a long way in influencing the people's perception, attitudes and behavior in the management of diseases and health related problems that befall them (WHO,

2007). One therefore looks at the Nigerian experience over the years as one of the largest and most populous nations of Africa, which also harbours different ethnic groups and endures different operation of cultural practices. Culture is a way of life of a people, therefore, the way of lives of the people can determine their development over time in all ramifications as compared to global growth and societal development. It is necessary to conceptualize some key concepts for the purpose of this paper.

**Culture:** Culture according to Edward Tylor (1871) quoted by Abasiokong (2010), “is that complex whole which includes knowledge, belief, art, morals, law, customs and any other capabilities and habits acquired by man as a member of the society”. Culture in its simplest form and for the purpose of this paper can be said to be the way of life of a people.

**Health:** Health on the other hand, is defined by World Health Organization (WHO) “as a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”. It is a fundamental right of everyone. Though, many definitions of health abound, the one by WHO is seen as ideal definition because it embraces all aspects of life.

**Experience:** Experience knowledge and skill one gathers through doing something over a period of time.

**Health-seeking behavior:** Health-seeking behavior refers to all those things people do to prevent diseases and to maintain health.

It is clear that every individual desires a healthy living and society. This is altruism because the cultural practice which is a way of life determines the health condition, strength and activities of the people in any developing or developed societies. Recently, different groups and individuals have collaborated with various African governments, signed memorandum of understanding (M.O.U.) at different times, and others sponsoring health programmes in Africa etc. just to help in the improvement of the health conditions of the people, but to a greater extent the results have not met the commensurate investment targets. The problem generally as highlighted by Oke (2001) and Abia (2012) has to do with change of cultural beliefs and behavior towards health provisions and accessibility.

### Health-Seeking Behavior and Sociocultural Implication

Health-seeking behavior according to Tipping and Segall (1995) is “*any action undertaken by individuals who perceive themselves to have a health problem for the purpose of finding an appropriate remedy*”.

Community ideas and attitudes toward health and illness affect the way people utilize health services. In Nigeria and in many developing countries, the factors that commonly affect the way rural dwellers sort for health are multi-varied and hence, produce different results and spread of different diseases and infections amongst dwellers. Some of these factors are as follows:

**Religious beliefs:** Everywhere, the quest for health easily shades into issues of morality and religion which play a significant aspect of social life. The basic explanation is that in serious illness there is an underpinning of the supernatural, the most frequently evoked agency is ancestral spirit anger (Ojua and Omono, 2012). Ancestral spirit constitutes part of the ordered structure of the African religion. People believe that upsetting the ancestors produces a disturbance of this order and hence disharmony and illness occur. In African thoughts, all living things including man are linked in harmonious relationship with the gods and the spirits, such relationship is ascribed to vital forces which each entity generates. A state of health exists when there is perfect harmony between man and his environment (Abia, 2012). This belief is inherent in those who practice African traditional religion as well as in many Christians and Muslims religious practices at one point in time or the other (Omotosho, 2010).

Ill-health and other misfortunes, which often times defile scientific and orthodox treatments are explained as spiritual forces directed by witches, wizards, sorcerers, evil spirits or angered ancestors (Ojua and Omono, 2012; Obot, 2012). The popular notion is that people do not just suffer illness by chance; serious

illness is believed to have its origin in a primary supernatural cause. The people see the causes of illness from viruses, bacteria and parasites as secondary causes.

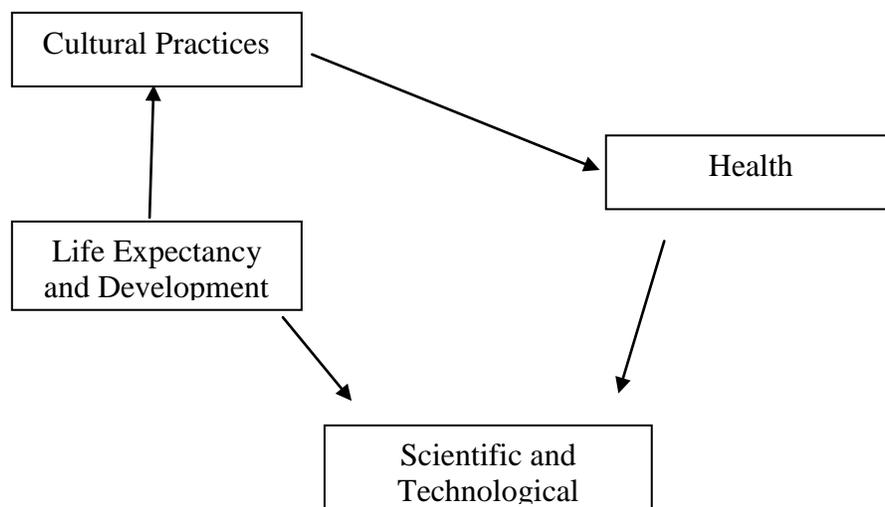
**Traditional African Medicine (TAM):** Since TAM has been with the rural dwellers for generations and also for the fact that orthodox medicine is often in short supply, expensive and often times fake, the people’s approach in terms of ill-health is first turned towards patronizing the easily accessible traditional African medicines.

Fundamentally, most Africans specifically belief in the efficacy of African Traditional Medicine and as enunciated earlier this belief and practice have long been with them and have affected or influenced to a greater extent their attitudes and behaviors to themselves and others around. An average rural dweller before now in Nigeria for instance belief, utilizes and concentrates on traditional medicines like for the cure/treatment of fracture, unexplainable ailments, malaria, poison and even infertility to mention but a few. Although development, civilization and education among other factors have helped to introduce change tremendously towards these beliefs and behavior to orthodox medicine patronage (Ojua, 2000; Katung, 2001).

Studies though show that considerable positive results had been attained by this practice, also issues of complications, standardization, efficacy, etc. have hindered the progressively positive results that are being envisaged, hence due to fake claims of its all purpose efficacy in illness treatment more deaths have been recorded in and amongst rural dwellers who are noted as higher percentage of those who patronize them. It is when this fails that they resort to chemist shops or medicine vendors and then the hospital as the last resort (Katung, 2001). In TAM, divination (consulting the oracles enchantments), confession, ritual sacrifices, incantations and potions made from plants and animal parts are essential components of illness management. These are aimed at restoring the patient to a harmonious relationship with his environment and to counteract the effect of evil forces. Our clear and very enticing reason for patronage is that almost every illness condition is interpreted as a spiritual (evil) attack that needs traditional healing powers.

**Denial of reality:** Majority of the rural dwellers in Nigeria are at variance with reality when it comes to treatment of chronic diseases such as diabetes mellitus, bronchial asthma, hypertension, arthritis and epilepsy (Obot, 2012). On repeated follow-up treatment and check-ups, the people concluded wrongly, that orthodox medicine does not have effective remedy for such diseases, therefore they opt for TAM. Whenever the people envisage that treatment outcome may be unsuccessful example during critical illnesses like terminal cancer, coma, tetanus and babies with congenital abnormalities, they decide to go home from hospital to seek traditional medicine attention with the hope that herbalists can restore life (Omotosho, 2010).

**The Link between People’s Cultural Practices, Health, Life Expectancy and Scientific Development**



From the diagram above, it can be deduced that the people's cultural practices affect their health either negatively or positively, depending on the prevailing practices. Also, people's health considerably affects their scientific and economic development and vice versa. It is the combination of these three levels which are interrelated and intertwined that determines the peoples' life expectancy, growth and development at any point in time. This chain trend however is not static, because culture and behavior of humans change from time to time. On the other hand, the amount of scientific and technological development people command determines to a large extent, the prevailing cultural practices among them. This is because as popularly said 'when the desirable is not available, the available becomes the desirable'.

Nigeria as earlier mentioned is a pluralistic as well as a multi-ethnic and multi-cultural nation made up of over 250 ethnic groups, even in the same ethnic groups, where different cultural practices exist. Most of these practices are based on trial and error and have endured centuries. Some of the practices in Nigeria that promote health and those that affect health adversely are examined below. It is interesting to know that these practices cut across families, marriages, religious, beliefs, etc. and create a difference amongst people, which are also passed from one generation to another.

### **Some of The Positive Cultural Practices That Promote Health Amongst Women**

In Efik and Ibibio culture, it is a common practice for mothers to breastfeed their children for a long time. This is a good practice as breast milk is far better than any other food a child can receive within the first six (6) months to one (1) year and this acts as family planning to the mother.

It is common practice for women who just delivered to be placed on special diets. This they believe helps the woman to regain lost nutrients during pregnancy and delivery and this really does.

Sexual abstinence during lactation is also widely practiced because of the belief that a woman is not fully pure at this time. This practice helps in child-spacing and family planning.

Also among the Igbos of South - East, the Binis of Edo State, the Ijaws in South – South Nigeria, and several other ethnic groups in the Southern Nigeria, it is a common practice for people to embark on wrestling combat when it is not farming season; this promotes physical activity and healthy (Idehen, 2007).

Environmental Sanitation: This is practiced virtually in every Nigerian society. Early morning sweeping of the house and compound by both men and women is encouraged to promote health.

### **Some Harmful Cultural Practices and Disease Conditions**

In the Southern part of the country during circumcision of the children, it is common practice to use cow-dung to clear the umbilical cord, this results in tetanus infection caused by a bacterium called "clostridium tetani".

In a typical Nigerian rural society, there are cultural beliefs that children are usually not given foods like egg, meat etc for fear that they will become thieves, witches/wizards, this leads to a condition of kwashiorkor which is as a result of lack of protein in the system.

Female and male circumcision is practiced not only in Nigeria but also in at least 26 countries of Africa (Myers, 1997).

Scarification and tribal mars are practiced commonly all over Nigeria but especially in the Southwest and Northern part of Nigeria.

Unhealthy and early marriage practices especially in Northern Nigeria cause vesico-vaginal fistula (VVF).

Having identified some of the harmful practices seen in our country, some health problems are analyzed to see how these practices enhance their propagation. These health problems are:

HIV/AIDS

Malaria

Maternal and child mortality

Hypertension

Mental illness

**HIV/AIDS:** Since the discovery of HIV (Human Immunodeficiency Virus) case in Nigeria in the late 1980s, its prevalence has been on the increase. Latest available data says the infection rate ranges from 4.5 to 5.6% in Nigeria (WHO 2007). Also Nigeria is been said to be the 3<sup>rd</sup> country with the largest number of orphans due to HIV/AIDS. These high prevalence rate and mortality due to HIV/AIDS in Nigeria are largely due to some cultural practices which promote the spread of the virus. For instance, sex is traditionally seen as a private subject. The discussion of sex with teenagers, especially girls, is seen as indecent, unhealthy and unacceptable. As such, young people wallow in ignorance as far as sexual health information is concerned.

**Stigmatization and Discrimination:** Stigma and discrimination is inherent in the people in Nigeria since the people living with HIV/AIDS (PLWHA) are seen as those with immoral behavior and this definitely affects the behavior and attitude of people towards them ([www.engenderhealth.org/iff/nigeria2.html](http://www.engenderhealth.org/iff/nigeria2.html)).

**Harmful Marriage:** Practices also contribute immensely to the increasing HIV rates especially among women. Early marriage is still the norm in many parts of the country. Some parents see it as a way of protecting their girls from the outside world and maintaining their chastity. In most rural communities, widows are made to swear to deities, shrines and ancestral spirits explaining due to accusations the reasons for the death of their husbands. Some are forced to drink the water of the corpse, sleep in the same room with the corpse, eat with unwashed hands, etc. (Ojua, 2000) all pointing to the fact that if they survive they are innocent of the accusations.

In almost every part of Nigerian society, it has almost become an acceptable norm and practice for men to have concubines outside marriage especially when their wives are pregnant or have just put to birth. This increases considerably the chances of contacting and spreading this deadly disease. Also because of the large age gap between husband and wife, lack of education and low status, young married girls cannot negotiate condom use to protect themselves against HIV and other Sexually Transmitted Infections (STIs).

Male and female circumcision is another cultural practice that enhances the transmission of HIV. Apart from other attendant obstetric problem that female genital mutilation may bring, it puts women and girls at risk of contracting HIV from unsterilized instruments such as knives, and broken glass that are used during the procedure, this is because most of these circumcisions especially female genital mutilation are done in the villages where no form of asepsis is taken into consideration ([www.state.gov.g.wi/ris/rep/crfgm](http://www.state.gov.g.wi/ris/rep/crfgm)).

**Malaria:** Malaria is endemic in most tropical parts of Africa including Nigeria. Malaria is responsible for the death of millions of people annually especially young children. Being in the latitude zone where malaria is endemic is not solely responsible for the morbidity and mortality that malaria causes in Nigeria, so many cultural practices and beliefs contribute to this. These include;

The African way of building houses does not protect in anyway against mosquito invasion. Houses are built with thatch and mud with openings that mosquitoes easily enter through due to poverty.

It is a common practice for houses to store water in pots and other containers after rainfall; this encourages the breed of mosquitoes around houses. Not uncommonly, vegetations are grown around homes in a typical rural Nigerian society; this also encourages the breed of mosquitoes.

Also in some places in Nigeria people believe that the symptom of high fever and chills is caused by staying under the sun and too much oil in one's body, as such they try to restrain the person from going under the sun and also from taking much oil in order to achieve cure instead of seeking orthodox medicine. Some also believe in the efficacy of herbs such as "dogoyaro" in the treatment of malaria. These practices in one way or the other help to keep the morbidity and mortality due to malaria very high in Nigeria.

**Maternal and Child Mortality:** In Nigeria, maternal and child mortality have been unacceptably high that urgent and practical measures have been instituted by Federal government to reverse the ugly trend. This trend, apart from the general poor healthcare services in Nigeria as in most other developing nations, can be attributed to some inimical traditional practices obtainable in our society. Some of these practices include;

So much believe in the traditional birth attendants – In Nigerian rural society, a pregnant woman would prefer to be delivered by a village birth attendant to going to a healthcare delivery center or a hospital. These birth attendants are not well trained to identifying complicated labour and hence complications that do arise, throw them off balance as they find it quite difficult to cope hence may readily interpret such as spiritual attacks leading to death most times.

In some cultural practices in Nigeria especially among the Ibibios, Annang, Akpabuyo, Obudu people of Akwa Ibom and Cross River States, pregnant women and young children are restricted from taking certain foods. In some parts of Igbo and Southern Nigeria, pregnant women are forbidden from taking snail for fear of their children drooling saliva. Also young children are not given eggs and meat for fear of becoming thieves in future. Effect of these practices could be imagined in areas where snail is the major source of protein.

Also in some parts of the country, the villagers believe that diarrhea is associated with the appearance of the anterior fontanel and teething, many believe that every child has to experience one or two episodes of diarrhea as a sign of survival, and for them it is unnecessary for one to seek medical care when a child is having diarrhea (Iyun, B. et al 2000).

Early marriage practices also increase maternal and child mortality since the woman would be biologically, economically and socially unprepared to cater for a family and some young girls end up with vesico-vaginal fistula ([www.phishare.org/documents/popcouncil78](http://www.phishare.org/documents/popcouncil78)).

**Hypertension:** Hypertension has been a major silent killer in our environment especially in recent years. In Calabar, it is the leading cause of heart failure encountered in the University of Teaching Hospital (Health Record Information, 2010). Again, most of the traditional practices predispose to this deadly disease. For instance, people at riverine areas take alcohol in great quantities. In some houses, the symbol that greets one in the morning is a palm wine tapper climbing his palm tree. No wonder, the Health information identified hypertension as the leading health problem. Heavy alcohol intake is a major risk factor for hypertension.

Also excessive salt intake is a common practice in our society. It is not unusual for one to see people adding raw salt to the food they are eating not minding how much was added when it was being cooked. Salt is used to preserve fish in riverine areas of Nigeria and these are often consumed as raw as they are. Increase salt intake is also a major risk factor for hypertension.

**Mental Health:** In many parts of Nigeria, mental illness is attributed to various causative factors. Nevertheless, all seem to explain mental illness as an affliction on man from the spirit world. In some parts of the country, people suffering from mental illness are seen as being the architect of their own misfortune. They are seen as being serving the consequences of one evil or the other they have committed in the time past. As such, when someone is mentally ill it is unusual for his people to seek orthodox medical care.

They would rather consult the herbalist since the cause of the problem, for them certainly is from the spirit world or inflicted by enemies. This practice affects both the prognosis and the overall outcome of the illness because in most cases, these herbalists do abuse the power and trust bestowed on them by their people (Ikechukwu, 2007).

## Conclusion and Recommendations

The following recommendations are made based on the determinants and distributions of the practices that affect health in our country.

Health education and re-orientation of the people: In many parts of the country, people embark on certain practices because they are ignorant of the basic information about the better way of doing things.

The masses should be well informed and educated.

A multi-disciplinary approach at national and international level of advocacy and re-conscientization should be employed to expose the dangers of these cultural (negative) practices and the need to adopt orthodox practices.

More research should be made on identifying those practices that promote health in our communities and encourage them and discourage those that are harmful to human existence.

Female education: The importance of female education cannot be over-emphasized. Not only will an educated woman refuse to be a victim of a harmful practice that does not promote health, she will also keep her home and propagate the information to her generation.

There should be improvement on the National health system. That is, the National health system must work, to bring health care services to where the people are. This is because the majority of the people live in areas where general health care is inaccessible and the people give interpretations to the problems they cannot solve and make use of what they have.

Finally, before health policies are formulated in Nigeria, the cultural and ethnic diversity of the people should be put into consideration to ensure that there are no resistances to its implementation and that its purpose is achieved.

The cultural practices of people not only affect their health, but also affect all their affairs including health and disease. Man living in an interactive society is affected by what happens in his environment and how he reacts to it. The determinants of health and disease in a community cannot be completed unless the cultural practices of the people considered. Many cultural practices have helped to perpetuate and increase the prevalence of certain diseases and health problems in Nigeria. However, not all cultural practices and beliefs in Nigeria are bad. Many have withstood centuries and actually promote health. Most of the negative practices are due to ignorance and non-availability of better alternatives. Efforts should be made to encourage those practices that promote health and then, through the provision of information and better health care services, discourage those that harm human health.

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