

# A Blend of Western and African Psychotherapy

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#### Abstract

Pritz (2002) defined psychotherapy as a systematic application of defined methods in the treatment of psychic suffering and psychosomatic complaints as well as life crises of various origins. Madu (2015), also defined psychotherapy as a process that enables people to express their feelings in a protected environment, to a person trained to listen with understanding and compassion. In the African context, psychotherapy is a culture-based treatment, which starts with the recognition that culture is highly relevant to people's everyday behaviour (Grills, 2006). It includes social context, history, ethnicity and other issues that the client deems relevant. African Psychotherapy is therefore a holistic approach that encompasses the cultural, social, spiritual, psychological, and economic aspects of life. An estimate of 80% of Africans, seek traditional therapy and hence, the existence of both Western and African Psychotherapy, has posed a state of dilemma among the modern African psychotherapists as well as among the clients. The central argument of this paper is to look at how the Western and African Psychotherapies influence one another for the benefit of the black African. This paper is a systematic literature review on psychotherapeutic processes of African traditional and religious faith healers, the current western focused psychotherapy practices in Africa. The authors also used their own knowledge on the Africa Psychotherapy from both the Digo and the Kamba communities in writing this paper. The researchers hereby recommend a blended psychotherapy form, where the western, the traditional African, and the religious psychotherapeutic values are blended for the benefit of modern African clients.

# Keywords: African psychotherapy, Blended, Culture, Traditional, and Western psychotherapy

#### Introduction

African Psychotherapy has been in existence since the history of man. Madu et al. (1996) referred African Psychotherapy as "African indigenous counseling" or "African traditional counseling." Nwoye (2010) noted that African psychotherapy was devoted to the study of the psychological healing systems allied to the traditional communities



of Africa. There were traditional diviners. spiritual leaders and traditional healers (Commonly known as "Awe" in Kamba and as "Aganga" in Digo and "Waganga" in Kiswahili as used in Kenya and Tanzania) and these still exist today despite the shift towards Western psychotherapy. The initial preoccupation of African psychotherapy was the systematic study of the patterned ways and rituals, theories, and techniques, invented in indigenous African communities (Nwoye, 2010). Nwoye (2010) further stated that these rituals, theories and techniques would address the psychological needs and problems of the African populations. Today, many researchers in African Psychotherapy agree that more than 80% of Africans seek traditional therapy in addition to the Western Psychotherapy.

Western approaches of psychotherapy were introduced in Africa before and after independence. Nwoye (2013) observed that it was important to expound the relationship between Western psychotherapy and African Psychotherapy. This is because African psychotherapy is pegged on secure foundations of African indigenous healing systems. He added that today African psychotherapy is practiced as a blended science, which involves the study and application of the most appropriate practices in Western and African psychological therapies. From this perspective, African psychotherapy encompasses the study of the major theories such as Psychoanalysis, Behavioural and Cognitive theories and Systemic practice in both indigenous Africa and the modern West. Despite the introduction of the Western psychotherapeutic models, Madu (2015) noted that it is a challenge for professional therapists to treat the modern African clients and especially the treatment of emotional problems. Majority of the

psychotherapists have split in-between the Western forms of psychotherapy and African forms of Psychotherapy. According to Madu (2015), the problems encountered by the psychotherapists are trying to apply Western-oriented psychotherapies in African settings.

#### **Traditional African Psychotherapy**

Robbins (2014) asserted that the precolonization Africans effective have therapies and these were specific to the community inhabiting a geographical region. For instance, among the Duruma, Digo and Kamba communities in Kenya, had traditional ways in treating snake bites, psychological pneumonia, malaria, disturbances and many other ailments using herbs and spiritual powers which were specific to those communities. According to Madu (2015), sickness and psychological disturbances in Africa were believed to have been caused by one or a combination of the following: punishment from the gods for evil done, a wicked eye look, a curse, witchcraft, an offence against the gods, a disruption of harmony in one's earlier life, charms, break of taboo, a disruption of social relationships, angry ancestors and evil possession. Even today, these beliefs still exist as stated above. The Africans used a holistic approach in treating physical, emotional, mental and spiritual facets of health. It is worth noting that the treatment of most of the health issues in terms of physical, psychological and social were the responsibility of the traditional doctors, diviners, elders, and senior and respected family members. According to Robbins (2014), the African Psychotherapists used various traditional African therapies that varied greatly from one ethnic group to another and from therapist to therapist. These traditional African therapists used the



following specific techniques to correct imbalances; 1) divination or prediction to foretell or forecast events or situations; dreaming of events to come, 2) Use of natural elements such as water, fire, smoke, stones as a projective device to help distinguish the cause of an imbalance. 3) prayer, 4) chanting, 5) use of music; singing, drums, rattles, dance 6) laying on of hands, 7) talking, 8) guidance, 9) Use of medicinal plants 10) ritual ceremonies, 11) story telling among others (Robbins, 2014). These techniques were specifically applied by traditional healers and not everyone from the bigger community could apply such techniques. The techniques are inheritance from father to son or mother to daughter and from generation to generation.

From the above methods, it is clear that many of the African traditional healers used techniques are similar to those of Western Therapists who focus on behaviuor, psychoanalysts who focus on dream analysis and hypnosis, and Client-centred psychotherapists who focus on empathy and group therapists (Madu, Baguma, & Pritz, 1996).

# **Types of African Psychotherapy Clients**

According to Ebigbo & Ihezue (1981); Madu (2015), there are three types of African psychotherapy clients; the traditional, the mixed, and the western oriented types. The traditional type grew up and spent most of his or her early childhood years in rural areas. Some of them moved to the townships at a later stage in their lives. Their world image is analogical, magical and pictorial. They always go to traditional healers when they have health problems. Madu (2015) added that the intermediate mixed type was either born and bred in the rural areas but moved to the city to work and live as an adult or grew

up in a city but continued to have a very strong tie to the rural areas and their customs. This type uses a blended therapy of the traditional African and the Western-oriented Therapies. Madu (2015), Mahomoodally (2013) and WHO (2010), agree that about 80% of the black African population today fall within either the traditional or the blended types. Most of the western-oriented type of clients were born and bred in townships. They are educated, mostly Christians or Muslims and their parents are educated. From childhood, these clients have been treated in hospitals and have never thought of going to a traditional healer for treatment. The Culture-Centered Psychotherapy with its inherent values would also appeal to many of them since they are attracted to charismatic forms of Christian healing.

# **Religious Faith Healing Values**

Madu (2015) agreed with other researchers that the traditional and the religious faith healers still take care of about 80% of the psychiatric, including emotional and spiritual problems in Africa. Western trained psychotherapists, medical doctors, senior family members, peer groups, or а combination of two or more of these groups were used to treat the rest. Reflecting on a holistic Africa World view, an indigenous African Christian Psychotherapy model emphasizes the role of the church, spirituality and community (Mwiti, 2014). Further, Mwiti (2014) stated that rooted in a Christian perspective. African Christians Psychotherapy draws on the wisdom of African cultures as expressed in rituals, proverbs and sayings from those cultures. For example, Christian religious faith healing has gained strong grounds in Africa. Today, most Africans in the rural areas who have



emotional problems go to a traditional healer or a religious faith leader from charismatic churches to seek help. According to Madu (2015), the therapeutic values embedded in religious faith healing include the following among others;

- Use of music and dancing for healing process, for example amongst the Digo community, cultural music known as "kayamba" is used to expel evil spirits and sickness. The client is supposed to dance to the tune of the music and this is therapeutic
- Exorcism, for casting of evil spirits out of a client,
- Group rituals are also used to promote group togetherness for example passage rites like rite of birth, rite of adulthood, rite of marriage, rite eldership, rite of ancestral.
- Open confession and open testimony are often used to 'empty the hearts' of the clients. For example, amongst the Kamba community there was the traditional oaths,

The authors added that breaking of taboos, for example, a father engaging in sexual intercourse with daughter, cleansing was necessary. For instance, amongst the Kamba community, a goat was slaughtered and some rituals were done.

# Western Psychotherapy

According to Madu (2015), Western psychotherapy is still struggling to gain their grounds in Africa. Despite this, it is important to note the two main categories of Western focused psychotherapies: insight therapies and behavioural therapies. Insight therapy assumes that behaviour, emotions and thoughts become disordered because people do not adequately understand what motivates them, especially when their needs and drives conflict. The main value in insight therapy is that it tries to help people discover the true reasons for behaving, feeling, and thinking as they do. The assumption is that greater awareness of motivations will yield greater control over and subsequent improvement in thought, emotion, and behaviour. Some examples of these psychotherapies are; Person-centred Therapy, Gestalt Therapy, and humanistic therapy. According to Jim, Fleg, Zuniga, & Straits, (2011), it is worth noting that Western psychotherapy is a science-based and oriented to physical causes of illness. Behaviour therapies focus on changing maladaptive behaviours that are a result of learning and can be removed the same way they are learnt. Behavioural therapies use techniques such as systematic desensitization, aversive therapy, flooding, and reinforcement and counter conditioning. It is paramount to note that, most of the black African clients in the present era fall within the group that uses the Western-African blended type of therapy. They consult both Western therapists and African therapists concurrently. Therefore, African traditional healing methods alone or the Western focused therapy alone would not address their needs (Madu, 2015).

# A Blend of Western and Traditional African Psychotherapy

Robbins (2014) noted that in the world today, treatments would have been more effective if Africans hold the holistic approach that recognizes the physical, mental, emotional and spiritual aspects of human being. The authors noted that to blend the Western Psychotherapy with Traditional African psychotherapy, there is a need to give insight into the empirical causes of diseases and the connectedness of physical and spiritual aspects respectively.

Jim, Fleg, Zuniga, & Straits, (2011) noted that Western psychotherapy is science-based and oriented to physical



causes of illness while traditional healing incorporates social, moral, environmental contributions and causes of health concerns. For those who might seek for or benefit from traditional healing approaches, there is a continuum of client needs, which must be assessed to determine the appropriate approach. For instance, where a traditional healer is able to make the appropriate referral to a physician for a client's specific needs, it would be ideal if Western therapists are knowledgeable enough to do the same.

# Conclusion

Psychotherapy in modern Africa should take the form of a blend, where the Western psychotherapy and the traditional African Psychotherapy constantly enrich each other. This blend should contain the psychotherapeutic aspects borrowed from the African traditional and religious faith healing techniques and the universal principles of Western oriented approaches.

Gone (2010) informed that multicultural proponents in psychotherapy called for culturally competent counseling interventions. They affirmed that traditional therapeutic practices are an important resource for developing novel integrative forms of psychotherapy that are specifically tailored for diverse populations. Culturespecific psychotherapy reveals significant convergences as well as divergences between these therapeutic traditions, causing more dilemmas. This therefore necessitates training of modern psychotherapists in using an integrated approach of Western and traditional African Psychotherapies with cultural sensitivity.

#### Recommendations

Culture determines how we view our illness and in turn our choice of healing treatments; our choice in treatment stems from our own culture and upbringing. Despite the firm recommendation of the use of Western medicine, the value in treating the body, mind and spirit as one is an important aspect of traditional African psychotherapy that we could all greatly benefit from (Madu, 2015). The authors concurred with Jim, Fleg, Zuniga, & Straits, (2011) recommendations for blended Western and Africa Psychotherapies as stated below:

- i) Institutions of higher learning in Africa should develop academic programs in the area of African psychotherapy in order to train new psychotherapists in embracing a blended approach.
- ii) The governments of African states should provide scholarships for studies in the area of African Psychotherapy.
- iii) Recognition of the importance of clientcentered approach by developing rapport and establishing a strong relationship
- iv) Therapist should ask his/her client's permission to discuss more about his or her culture/beliefs on traditional healing practices
- v) Create the space, time, or mechanisms for having conversations and building collaborations (e.g. Ethics committee with representation from traditional and western views)
- vi) Take cues from your client/patient for their needs, readiness, and interest in traditional healing or other cultural approaches to wellbeing
- vii) Address cultural and personal identity development as a part of client's health
- viii) Learn the culture, values, traditions, and beliefs around wellness/sickness and healing of your clients by going there,

making friends, educate yourself by reading and attending events.

- ix) Therapists should include culturally relevant questions in initial intake or do a cultural assessment
- x) Demonstrate the value of traditional approaches by talking about them as a regular part of your practice.
- xi) Recognize that the Western and Traditional African therapists have their own roles and find ways to complement rather than conflicting each other.

# **Further Research**

The authors recommend further research in the area of

- i) Modern African Religious Approach to Psychotherapy versus the traditional African Psychotherapy, and
- ii) Traditional African psychotherapy among the traditional African communities

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