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| RESEARCH ARTICLE

## Healing, Spirituality and Culture: A Comparative Analysis of Herbalism among Hausa and the Yoruba Communities

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| ABSTRACT

In this paper, Hausa and Yoruba herbalism activity in Nigeria was discussed as a cultural, spiritual, and therapeutic activity. Researching the aspects of similarities and differences in the consumption of herbs, the influence of the traditional healers, and the implementation of the spiritual practices into the healing process, the qualitative comparative approach is employed. Interviews, focus group discussions, and observation of herbalists, old men, and spiritual apostles were used to collect data. In line with the principles of cultural relativism and functionalist approach, the reading can demonstrate that the cultural depth of the knowledge about the indigenous medicine is similar in both societies, however, their spiritual frameworks are very different, with Hausa healing being strongly overlapped with the promotion of the Islam messages and Yoruba herbalism being a confusing composition of the fragments of If and divination and adoration of the *Orishas*. Some of the other problems, as illustrated by the findings, are a challenge to Western medicine, the religious reform, globalization, and urbanization, which are gradually reinventing the traditional practices. Herbalism has endured against this cultural pressure and is continuing to endure as a hybridity and popular interest. The policy which the paper proposes to bring about, so as to ensure the sustainability of such healing systems in modern culture is integration and regulation, advisory records and learning awareness of the culture of such minorities.

| KEYWORDS

Herbalism, Hausa, Yoruba, Traditional medicine, Spiritual healing

| ARTICLE INFORMATION

ACCEPTED: 11 December 2025

PUBLISHED: 30 January 2026

DOI: 10.61424/ijah.v4.i1.653

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### 1. Introduction

#### 1.1 Background of the Research

Traditional medicines have been the staple of health care delivery to a majority of the African communalities especially those that inhabit a rural environment where western medicine hardly exists. The Hausa and the Yoruba people who live in Nigeria have a system of healing that is not at all a healing process but it is a system that encompasses all the way of life in all aspects based on spiritual and cultural beliefs. Abimbola (2006) asserts that Yoruba healing cannot be separated with their cosmology and in most instances, herbalism is linked with the worship of *Orisha* and the *Ifa* divination. Still on the same point, Ibrahim (2014) has observed among the *Hawai*, herbs have merged with Islamic beliefs in the sense that the recitations of *Quranic* scriptures and spiritual proclamations are acceptable in the healing process.

These indigenous systems are not only physical treatment methods but most of all a philosophic system of awareness about the world where health is an interrelation of body, experiences and the community. The Yoruba

traditional herbalist (*Onisgun* or *Babalawo*) according to Fabunmi (2010) does not only belong to the sphere of traditional healer, he or she is a cultural and spiritual custodian. The spiritual liaisons in the north are also Hausa traditional curers, such as *Bokaye* and *Malamai*, and they were the Muslims who practiced the Islamic theology and the local knowledge reunion (Ibrahim, 2014).

Nigeria still has an abundant number of people who resort to traditional healers despite the existence of western biomedicine that has significantly penetrated in both cultural and locally profound forms of the illnesses such as spirit possession, infertility, and social curses. However, the vision and reality in terms of herbalism is gradually evolving coherently because of the impacts of globalization, urbanization and rising religious conservatism. This is the case because these traditions have managed to survive these forces hence timely and relevant to the level that they are compared.

### **1.2 Definitions of concepts**

The African definition of healing in the traditional way involves a healing not only of the physical health; but also of the emotional, spiritual, and the harmony within the society. Mbiti (1991) explained that there was no separation between African healing and cosmological correspondence, a holy act, which associated itself with the ancestors.

Spirituality is a presumed system of reinforcements, a conviction that there is a relationship with supernatural powers. Jegede (2002), in his paper on the study of the Yoruba health beliefs, stated that affliction is mostly viewed to be spiritual imbalance hence requiring the herbal medicine and support of ritual.

Herskovits (1948) has developed a definition of culture as a whole of all acquired practices, behaviour and beliefs united by a collectivity. In the context of healing, culture not only stipulates the definition of what could or could not be treated as an illness, it also stipulates the treatment of diseases.

Herbalism is described as the way of utilizing natural products of the plants in treating, preventing or management of the diseases. The World Health Organization (2013) believes it to be a major component of the traditional medicine systems the world over and proposes to incorporate it into the national healthcare policy in at least the third world countries.

### **1.3 The rationality of Comparative Approach**

The fact that the healing systems of Hausa and Yoruba are available as the opposing programs to be studied is a unique opportunity to reflect upon the variability of the approach of the two culturally distinct and powerful Nigerian groups to the understanding of the health, illness, and the spirituality. Even though the article by Abimbola (2006) describes the metaphysical part of the Yoruba medicine in relation to the worship of *Orisha* and the divination process, the one by Ibrahim (2014) documents the Islamic experience in the healing process in which the Hausas use herbs and the words of the Quran. It is in this kind of comparative view that we reach such things like similar beliefs of Africans regarding healing and those other things that are different according to specific adaptations of the cultures and how we get to learn how such traditional knowledge can be maintained, changed or ignored by contemporary forces.

### **1.4 Research Problem**

Given that individual studies have previously been conducted on each culture concerning their separate herbalism practice, there is not a systematic comparative study of the culture, spirituality and the medicine premise of both the practices of herbalism. It is no secret that practically the total part of the contemporary researches focused on these healing practices regards them independently and does not refer to the opportunity to create new knowledge on these problems owing to the lens of a cross-cultural comparison. Besides, the empirical studies have low impacts of modernization with the practices.

### **1.5 Research Questions**

1. On what is spiritually and culturally based are some of herbal practices by the Hausa and the Yoruba?
2. How can the traditional healers in both groups acquire the skills to manipulate and transfer the knowledge of healing?
3. What is the impact of modernization and religion on herbal practice of the two societies?

### **1.6 Objectives of the study**

- In order to speak about the spiritual and cultural basis of herbalism as regards the Hausa and the Yoruba.
- To compare the content of the cultural healing, the technique and the materials of the traditional healer of the two groups.
- To determine the extent to which modernization, religion and policy identify the existence of traditional herbal practice.

### **1.7 Purpose of Research and Significance**

In providing the culturally-based and comparative representation of herbalism in Nigeria, the paper has contributed to the body of indigenous knowledge and that of medical anthropology in Africa. According to World Health Organization (2013), traditional medicine is considerably basic to health systems in the majority of the developing countries. The Hausa and Yoruba cultural logic can be ideal to inculcate national policies, integrative systems of medicine and preserve the knowledge of these cultures which are at risk at present. The traditional healers are best placed to fill in the void that effective health care system has created and offer culturally valid health care solutions as evidenced by the arguments used by FAbunmi (2010) and Jegede (2002).

### **1.8 Implications, Scope and Limitations**

The participants of this study are specific herbal healing among the Hausa of the Northern Nigeria and the Yoruba of the southern west. It does not look at the other practice of traditional medicine such as bone-setting, midwifery or spiritual exorcism. In addition, even though the project is directed at recording in authentic way the practices, secrecy, gender roles and requirements in spiritual initiations may be shut into the esoteric knowledge. It can further be hard to generalise the results as there can be regional and faith distinction in each ethnic.

## **2. Literature Review**

### **2.1 African Societies reviewed as Traditional Medicine**

There is also very strong aspect of traditional medicine in the healthcare in African societies or communities. It is not only a treatment way but also a way that helps to maintain the harmony between the spiritual and the corporeal. Reliance in the traditional medicine to offer primary healthcare is estimated to have between 60-80 percent by the World Health Organization among the developing countries including those in the sub-Saharan Africa (World Health Organization, 2013). The African traditional medicine encompasses application of herbalism, spiritualism, divinations, as well as rituals which are mostly passed by word of mouth over a long duration through the father to the son process (Mbiti, 1991).

Unlike powerful Western biomedical conventions of separate diagnosis of ailment as materially deformed, African systems of medicine are prone towards an all-inclusive sense of health. Akerele (1992) believes that the traditional medicine in Africa has firmly become a part of the culture since it is included into worldview and spiritual life of humans. Such a holistic component ensures that a disease is not perceived in a biological dimension only but socially, spiritually and morally distorted or balanced in the society. History of the herbalism of the Yoruba community background Though paintings and sculptures have won out over the last few millennia, making photographs and shrines a large part of humanity, still, there are some phenomena that are not tied to the photographic or the sculpture of the past few millennia. One of such phenomena is the herbalism within the Yoruba culture background. History of the herbalism of the Yoruba community background Though the paintings and sculptures have dominated the last millennia or so, making the photographs and shrines a significant portion of human kind, there

In south western Nigeria, people (the Yoruba) also have their thriving culture of herbalism whose native system of religion was being practiced before they adopted their religion (Islam or Christianity). The most basic Yoruba belief towards healing is the idea of a consistent world demystified by creatures (Orisha) who influence the wellness of people and destiny. The herbs knowledge is a holy one and it is one, which is never passed other than in a family or a group of priests. The combination of spirituality and plant medicine/divination of Ifa is used to mix healing techniques by *Oniagun* (herbalist) and *Babalawo* (diviner) practitioners (Abimbola, 2006).

Fabunmi (2010) provided a description of how the herbalism has been used by representators of the Yoruba people since before the colonial interaction and introduced it into cures of diseases, enhancement of spiritual protection, fertility induction and resolution of social-related problems. To open the spiritual power of herbs, chants (*ofoh*), sacrifice or incantations are typically used. Unlike the Islamic injection of Hausa medicine, the Yoruba herbalism is quite indigenous, and it has been capable of retaining its traditionalist model of cosmology amidst its versions that have been Christianized and have been revealed in the urban context only.

## **2.2 The role of Spirituality in Traditional Healing**

The factor of spirituality is quite critical in the healing of Hausa and Yoruba. The Yoruba cannot isolate the act of healing because of the relationship manifested between an individual and God; the diviners transfer their request to the deity called *Òrúnmìlà* using *Ifá* before prescribing any form of medications (Abimbola, 2006). The ritual and incantation brings the spiritual strength of herbs. Similarly, according to other cultures, it is indicated that *ruqya* (Islamic spiritual recitations) and *laya* (amulet) and herbs are ordinarily used in protection in the Hausa societies (Ibrahim, 2014).

According to Jegede (2002), the African concepts of health are holistic and spiritual imbalance is also considered as a major cause of ill health. Sickness may be regarded in the two groups as punishment by God, hatred by the ancestors or spiritual attack. The healer hence had to cure the unseen force that was the source of the disease in addition to the curing through herbal drugs. Owing to this belief system, the healer is influenced to act as the medical practitioner as well as a spiritual guide.

## **2.3 Comparison of the past research Compared perspectives**

Compared to the Yoruba, there exist few comparative essays that I can teach on healing practices in the Hausa. Olatunji and Ahmad (2018) state that even though the two cultures have access to resources as they both use common botanical substances, there is a difference of a large proportion between the two cultures when it comes to the process of healing. The very indigenous are the Yoruba and the Hausa natural and medicine though they can be categorized under the set-up of the *Orisha* cosmology and the Islamic theology respectively. Yet, the two systems pays attention to spiritual explanation of illness by the two systems and they rely on extensive pharmacopoeia of local herbs.

Another parallel observation made by Salisu and Adebayo (2020) drew attention to the fact that due to the Yoruba herbalists being predisposed to the possible rituals and enchanted items such as cowries, kola nuts and sacred stones, the Hausa herbalists are said to employ *Quranic* texts and waters pace materials. Being secretive and apprenticeship are also both valued in the two traditions though the training of the Yoruba is more ritual and is modelled upon ideals of priesthood.

## **2.4 Lapses in the Current Research**

Despite the magnitude of the ethnographic, anthropological literature who have dealt with the tradition of medicine in either the Hausa or the Yoruba people there is no single systematic, comparative literature that examines the manner in which herbalism takes place within their respective spiritual and cultural systems. It contains much of the given literature as ethnographic and descriptive (Abimbola, 2006, Ibrahim, 2014), but a cross-cultural analysis is very limited.

They are also not quite looked at as regards the factor of modernization, urban migration, religious fundamentalism and the health policy with regard to how the perpetual nature and adjustment of herbalism has transpired in such communities. The works of Pentecostal Christianity on the Yoruba healers or the *Salafi* Islam on the Hausa people have got rare literatures only. There is also not much evidence of how the young elders are either adopting or forgetting about the old knowledge of healing.

## **3. Theoretical Framework**

In this paper, a Sociocultural Relativist- Functionalist approach is formulated to explain the culture of herbalism in the Hausa and the Yoruba Culture as it combines the key principles of Cultural Relativism and Functionalism in order to bring about a comprehensive approach to the study. This method of thinking is based on the assumption that native healing practices shall be understood in context of their culture (relativism), and appreciated in terms of

their contribution to societal cohesion, health and continuity (functionalism). Herbalism is therefore not simplified as just a system of treatment, but as an institution that is culturally grounded playing some eternal spiritual, treatment and social roles. This dual perspective enables construction of cultural sensitivity and structuralism toward determining relevance and resilience of the traditional healing structures.

### **3.1 The Defences of Theoretical Application**

The two theories are highly appropriate as far as this study is concerned because they give the counter-balance opinions. Cultural relativism will make sure that the healthcare activities of the Hausa and the Yoruba will be interpreted in their interpretive regimes but not be evaluated against the outside standards. This helps the work to respect and account the tradition as it is.

Functionalism on the other hand helps to ask a question of the practical and symbolic functionality of herbalism in such societies. It helps elaborate why herbalism has not been abandoned yet despite the advancement of industrialization and how it supports broader structural bases of the society such as religion, family and the government.

In combination, the theories shall provide a valid foundation on which they will compare the spiritual, medicinal and cultural aspects of herbalism between the Hausa and Yorubas. They help to bridge the distance between the knowledge of the meaning of conventional healing or the interpretation of the meaning of such practices and the role that the given practices play in the definite society.

## **4. Methodology**

### **4.1 Research Design: Qualitative Comparative Research**

The design of the research will be qualitative comparative research and this is applicable when speaking of things related to culture and spirituality pertaining to herbalism as conducted during the analysis of the Hausa and Yoruba society. Qualitative designs are particularly useful when there is an interest in understanding living experiences, cultural encodings, as well as belief structures (Creswell & Poth, 2018). The comparative nature of the study allows to perform the cross-cultural analysis of herbalism by identifying the common elements and peculiarities in two traditions. This design serves better in the study of non-physical phenomenon such as spirituality, ritual and indigenous knowledge transfer incorporated in the healing processes involved in the study.

### **4.2 Population, Sample**

The traditional herbalists are the community elders and the spiritual healers of both the Hausa and the Yoruba people who make the target population. According to these people, they are ranked to be the holders of knowledge and realistic contributions to practice of herbalism and its upkeep. The study sample will be purposefully selected in the sense that it will target competent informants who have much knowledge and experience in traditional healing. The research will cover areas where these respondents will be sampled in the Northern and South western parts of Nigeria that are mainly either the rural or the peri-urban areas where the traditional medicine continues to dominate to a great degree.

They recommend that at least 20 participants (10 on each culture group) be regarded to keep the diversity including age group, gender, religion and healing experience. Multidimensional approach is given to the historical and the spiritual aspect of herbalism, essential because of the diversity of integrated community elder and spiritual leader (e.g., *Malamai* or *Babalawo*).

### **4.3 Methods of Data Collection**

Three qualitative studies will be used:

#### **4.3.1 Semi-Structured Interviews**

The interview of the sample of participant will be conducted in individual sessions based on open-ended type of questions thereby making it flexible and in-depth. The interviews will be focused on the following aspects: what participants believe about the illness and process of curing it, what is the spiritual side of herbalism, how to be trained and pass the experience and on what participants think about the influence of the modern world.

#### **4.3.2 Focus Group discussions (FGDs)**

FGDs will be conducted separately with the Yoruba and the Hausa healers with a view of reaching a collective knowledge and highlighting the similarities of the cultural views. Group interactions will also unveil the existence of intra-traditional differences or conflict within each-tradition.

#### **4.3.3 Non-Participant Observation**

In situations where it is culturally and ethically possible the researcher will observe the healing sessions, rituals or herbal preparations. It will be focused on the observation notes on healing practices, herbs and their use, value of rituals and community interaction during a healing process.

The consent will be obtained in recording the interviews and discussions by audio- taping; it will then be transcribed when it is the time for data analysis.

#### **4.3.4 Analysis- themes: Thematic Analysis**

Thematic analysis will be taken during the data analysis because this method can be applied in data search, analysis and reporting the themes in qualitative data (Braun & Clarke, 2006). In that approach, it is possible to carry out inductive and deductive coding and themes can emerge to represent cultural, spiritual, and practical dimension of the concept of herbalism in the two groups.

It shall include:

- Familiarizing himself with the data through repeated readings of same transcripts  
Inventing first codes
- Themselves exploring typical themes in interviews, and groups  
Redoing and revision of themes
- Describing the results regarding the research questions and theory  
The data may be coded in a systematic way by using qualitative data analysis.

#### **4.4 Ethical Considerations**

Research of the indigenous knowledge system and spiritual practices should have ethical integrity in terms of its use. The second is going to be considered:

Informed Consent: Research will make detailed explanation in the area of research purpose and procedures of research and use thereof. The literacy level of the participants will not be contemplated by getting their approval either written or oral.

- Confidentiality: All the data will be treated as confidential and when reporting the results, the subjects will be given pseudonyms.
- Cultural Sensitivity: Cultural beliefs as well as ways of doing things will be respected throughout the process of the research. Practices that may be considered sacred or secret must not be reported as no one is expected to record anything without prior consent.
- Voluntary Participation: The respondents will be explained that it is not compulsory that the individual join study and unless I say so, he/she can quit study at any time.

The study shall be done considering the ethical considerations of the researcher. (Institution) and in a case where it requires, a formal ethics review board or community council shall be consulted and they should give an approval.

### **5. Findings and Discussion**

#### **5.1 Hausa Description of Practice Herb Hausa**

Usage of herbal medicine is a long time tradition by Hausa society, and the culture forms a amalgam of the natives culture and Islamic spirituality. It is normally performed by local healers referred to as *Bokaye* (herbalists), as well as *Malamai* (Islamic scholars/ healers), and they are supposed to be elders because they are known to cure numerous kinds of diseases that pertain the physical, spiritual, and psychological conditions of a man. The Hausa worldview of herbalism is highly utilitarian and it is likely to provide a cure to a particular illness or overcome some existential

danger faced by people supposedly possessed *by aljani* or the evil eye or artificial presence of powers that can be translated into witchcraft as an attack (Ibrahim, 2014).

There is a vast pharmacopeia of locally obtainable plants and other materials which are in practice by the practitioners which are handed down orally, apprenticeship and religious epiphany. Unlike the more ritualistic approach of the Yoruba curing system, Hausa medicine is more practical, Islam friendly, and fertilized with *protective Quranic* phrases (Last, 2004).

### **5.1.1 Significant Herbs and uses**

Hausa herbal culture can be described as variety of plant collection deployed in diverse medic sites. The most often used herbs include:

- *Gwanda* (*Carica papaya*) --- malaria, digestive disorders and wound healing.
- *Zogale* (*Moringa oleifera*) - It finds application in treatment of high blood pressure disorder, HIV, anemia and skin disorders.
- *Kayan lafiya* (mixture of ginger, garlic and local pepper) - This is commonly applied in respiratory disorders, flu and body cleaning in general.
- *Dabino* (*Phoenix dactylifera*, or date fruit)- With herbs and honey, it is administered to treat fertility or as sexual health tonics.
- *Aloa* (*Aloe vera*) - externally, it has been used against burns and skin diseases and is perhaps also used as a purgative (Ibrahim, 2014; Nasir, 2017).
- Mango leaves - it's use to cure arthritis.
- Guava leaves is use to cure different disease in the body especial brian disorder
- Pawpaw leaves is to cure high blood pressure.

The herbs may be taken alone or they may be blended as a combination, concoction, powders or infusions and may be taken orally, inhaled or aromatherapy in form of steam and the topical form depending on the disease. Spiritual elements of Hausa Healing

Spirituality cannot be divided in teachings on healing in Hausa society. The majority of health problems are believed to be due to its occurrence as a result of spiritual symptoms such as jinn possession (*aljani*), curses or as a result of the wrath of God. The usage of one or another herb is not enough to subject a person in such cases, without the help of spiritual treatment. Ibrahim (2014) also states that the efficacies of the herbs are normally coupled by Islamic incantations (*ruqya*) and recitals of the Quran that are recited on the ill body or written on papers and mixed with water and the patient is asked to drink it.

The most typical verses used in practices during the healing are *Al-Fatiha*, *Ayat Al-Kursi* (2:255) and the last three surahs of Quran according to the fact that they grant protection and purification. These verses are read or written in the Arabic script or rather put in amulets (*laya*) and pinned on the neck or the waistline or an arm so that protection is gained all the time. *Malamai* tend to act as the religious physicians that determine the meta-physical source of disease before the performance of treatment exercise (Last, 2004).

### **5.1.2 The Beliefs about Healing in the Culture**

Healthy according to the meaning of the Hausa is not seen as the lack of sickness, but instead a harmonization of the body, soul and community and also of will of god. Food, in the way, has often been understood as synonymous to spiritual or moral imbalance, social conflict or contravention of religio-moral spirit. The process of restoration, in its turn, is a very thorough process which implies a physical recovery, a spiritual, and a moral reformation.

The traditional medicine is culturally honored and more so in the rural areas and this is meant to be put forward by the traditional medicine as opposed to the western medicine by those who go to the traditional medicine, and also some of the ailments such as infertility, lunacy or bad fortune. This ideology of taboo contravention, spiritual pollution, and ancestral curse is normally applied in the choice of the treatment of the disease besides describing the sickness (Nasir, 2017).

### **Boka and Malamai (Traditional healers) Mission of Traditional Healing,**

The tradition of the traditional healers plays great social and religious role in Hausa culture. *Boka* is notably known in the handpicking, making and the delivery of natural compositions. Partly trained by a family tradition or by apprenticeship, *Bokaye* absorb so much of ethno botanical information and the art of combining herbs to treat specific diseases that they are able to list off combinations of thousands of herbs. They are usually consulted on the illnesses that may not be explained or even cured by modern medicine and this includes the spiritual illnesses, infertility or impotence.

In his turn, the *Malami* is a religious person and healer. Of course the *Malami* is trained in the study of the Quran, but also in the spiritual aspects, healing such as writing against verses of amulets up to a safe degree, or performing exorcisms (*karya aljani*). The *Malamai* have the tendency of believing that sickness is a divine punishment or kind of test and are very influential in the societies where Islamic values are valued.

The two healers being the custodian of the cultural information ensure the preservation of the healing tradition to pass it to the succeeding generations, although modern healthcare institutions and modernizations of religious movements are pressurizing a great deal.

## **6. The Yoruba: herbalism among the Yoruba**

### **6.1 Description Yoruba Herbal Practices**

Herbalism of the South-western Nigerian Yoruba is a highly developed medicine imbibed wholly into the cosmology and religion of the community as well as their social life structure. The Yoruba healing doctrine goes far beyond being a bag with interventions of physical illnesses, yet it is a creed of spiritual nature that uses the metaphysical energy that surrounds people. Abimbola (2006) has found out that herbal medicine in the Yoruba is inflated by its people in its perception of a well-ordered cosmos, which has been dominated by supernatural agents referred to as *the Orisha*, and has jurisdiction over health, destiny, and morality.

Oni se g run or Yoruba herbalists also known as people trained to heal and treat are the herbal healers who deal with the medicines of the vegetables, roots, trees, and minerals to cure, encourage health and prevent diseases. Mostly they acquire knowledge by apprenticeship, dreams or Godly instructions and the transmission is oral within the generations (F AB UN mi, 2010). Yoruba herbs are outstanding and they are employed ritualistically and symbolically; every single one of them has a physical component which is also spiritual and the entire process of choosing, preparing and making use of it should be in congruence with both cosmic fairness and God approval.

### **6.2 Valuable Herbs and their uses**

Hundreds of plant species are described in the repertoire of Yoruba pharmacopeia and characterised by their use and spiritual associations. Among the common herbs include:

- ***Ewúró (Vernonia amygdalina)* – This is commonly applied in the treatment of malaria, stomach troubles, and also as a blood cleanser.”**
- *Ewe Tàbà (Nicotiana tabacum)* – It is useful in healing of wounds and spiritual cleansing.
- *Ahun (Alstonia boonei)* – It is administered against fractures of the bone, fever, and arthritis.
- *Ewé Àsùnwùn (Senna alata)* – Good to treat sores and ringworm.
- *kola Orogbo (Garcinia)* - applied in protection ceremonies, cough remedies and liver ailments (Fabunmi, 2010; Adebayo and Ishola, 2016).

Very few occasions also the use of these herbs is taken alone. They are prepared as decoction, as an ointment or religious washing away. They may be used to enhance a treatment often it is in the form of a decoction with other things being sacrificed, but also may be the form of rituals items.

### **6.3 Spiritual ingredients of Yoruba Healing**

There is no separation of spirituality and divination in healing of Yoruba. It goes without saying that the healer is most likely to consult If t oracle when giving remedies because the If t is a sacred system of divination believed to give the unknown causes of sickness and the proper way of curing it ( Abimbola, 2006). Casting of signs, often consisting of the use of palm nuts or cowries and interpreted by means of the divinity process usually conducted by

a *Babalawo* (diviner-priest) establishes not only the physical problem, but establishes the spiritual or moral foundation of the problem. The first one, treatment, in the majority of the circumstances involves the invocation of an *Orisha* e.g. 199 OH-suspended fertility, OH-suspended justice (and protection) and OH-suspended mental clarity/reason, call 199 OH-suspended *Obatala*. To please or request assistance of these spiritual creatures, sacrifice or chants (of on), and ritual offering may be required. Cosmology of the *Yorubas* would necessitate undertaking the actions at the herbal and spiritual level, given that the violation of balance between people, ancestors and the deity could be seen as illness (as it was underlined by Jegede, 2002).

#### **6.4 The Healing Cultural Beliefs**

The Yoruba consider many conditions as forms of illness that are not necessarily biological in nature. As a general rule, disease is often perceived as the result of spiritual attacks, the displeasure of ancestors, or a failure to fulfill moral obligations. Concepts such as **ayé** (the physical world), **òrun** (the spiritual world), and **ṣe** (God's will) shape the framework within which health and illness are understood and interpreted. The healing as such is therefore a process of restoring the balance and spiritual order rather than curing any symptom (Abimbola, 2006).

Yoruba also believe in the *fate (ayanm Ontario)* which deciphers the health and the life path of an individual. Then there are those diseases that people claim to be fatal ones and they are managed rather than treated. In such cases, the healer provides religious assistance, practices and activities so as to reduce the pain and bring back the balance (Fablummi, 2010).

Those sessions of healing are met to be more group centred, community interactions, and social reinforcement. That makes healing a shared spiritual affair and it is a process that incorporates all, including the family, the ancestors and gods where the healer and the patient are concerned.

#### **6.5 Role of Traditional Healers (Oníṣẹ̀gùn, Babaláwo)**

Traditional healers are respected individuals in the Yoruba culture due to the following factors; they are healthcare providers, they provide the tribute to the gods or spirits and they are the custodians of culture. In the physical illnesses, healing is based almost entirely on the *oni-segban* the use of herbs. They are extremely experiential, spiritual in their experience and probably guided by dreams or divinatory teaching. Protective rituals, creation of spiritual medicines and exhortation against moral and social problems are also performed by a lot of *onisegun*.

However, *the Babalawos* rather are experts in religion and diviner who will use the divination of Ifa oracle to establish the spiritual nature of the illness and provide the appropriate ritual or a piece of herbal medicine. Abimbola (2006) observes that the *Babalawo* is well versed with a lot of theology and philosophy in terms of cosmology, moral and metaphysics which is taught in the Yoruba community. He is able to consult *with nonisegu* in intricate healing where there should be physical and spiritual healing.

The workplaces of these healers will normally be a shrine like spot or sacred groves where they preserve the herbs, prepare them and consecrate them. They are not only therapeutic employees but also educational because they are one of the educators and trainers who introduce the knowledge about the connection with the sacred into the hands of the younger generations.

### **7. Comparisons Healing Practices**

#### **7.1 Similarities in Healing Practices**

The Hausa and the Yoruba are fairly disparate when it comes to language, religion and historical backgrounds of culture despite the fact that there are still some of the basic grounds which are shared by the traditional way of healing based on these two. The two groups rely on large numbers of indigenous or natural herbs and material in both physical, spiritual and psychological healing of a condition. They have good knowledge of the local vegetation, so their own herbalists create decoctions and pastes, powders or infusions of local plants as well (Ibrahim, 2014; Fabumni, 2010).

Holism approach to health is also embraced by the two likes of healing. The Western society does not just accept the disease as disturbance to the body (biological), but also signifies spiritual maladjustment, social disorder or

divine curse (Jegade, 2002). As a result, the treatment is most likely to include the employment of natural medicine and spiritual procedures, praying, fortune-telling, chatting, or religious sources and guidelines.

The other distinguishing feature is that of apprenticeship which involves the passing of the traditional knowledge of the past generations on to the younger generations through oral communication and maintenance of the continuity and culture. The role of healers in both cases is that of a role player, or a role player as long as it comes to the role of medical practitioner, but also the moral compass, a ritual expert, a counsellor to the community.

### **7.2 Difference Observed in Religious Buildings**

A spiritual foundation of the healing systems is also one of the significant variations between Yoruba and Hausa herbalism. The Hausa healing tradition is most affected by Sufi and *Quranic* spirituality. The healers also use the verses of the Quran, amulets (*laya*) and *ruqya* (spiritual recitation) to heal conditions that are related to the jinn, curses or Gods test (Ibrahim, 2014; Nasir, 2017).

Yoruba medicine, on the contrary, is based on an autochthonous theology and religious cosmology that adheres to the religious pantheon of *Orishas*, *Ifa* divination and the presence of a given supreme power which can be referred to as a *SS* to (divine power). The process of recovery would normally involve an interview with a *Babalawo*; the interpretation of signs given by *Ifa* which would assist in the determination of the cause of illness and how it can be overcome (Abimbola, 2006). This is mostly done through rituals, sacrifices, and spiritual songs (*ofof*) and other objects of representation cowries or kola nuts.

Granted, the two systems acknowledge the metaphysical explanations to the causes of sickness, the Hausa people incline towards discussing their approaches to healing as an Islamic theology rather than a polytheistic and oracular religious system that guided the Yoruba people.

### **7.3 Gender Role in the field of Healing Professions**

In the healing professions gender plays a significant role which is culturally divergent in between Hausa and the Yoruba people. The Yoruba men and women can be *Onisegun* (herbalists) although those of *Babalawos* is mainly male because the activities of *Babalawos* is put in the process of the initiation rites of that of *Ifa* (Fabumi, 2010). Because of its social purpose to provide care, women tend to practice on certain areas like in midwifery, fertility care and child related illness.

In the case of the Hausa community, men are more likely to meet and serve at public or spiritual healing. *Bokaye* and *Malamai* are the completely masculine zones because the religious study (Islamic education) is one of the largest opportunities in curing and the occupation of women to professional training is limited (Ibrahim, 2014). Women may however become healing people at the family or even neighbourhood level since the herbs are available at the domestic level.

Hence the two systems are gender inclusive in nature but the Yoruba system is more accommodative to women in the healing field at least in public openness as compared to Islamic system which is more patronizing to the men in the Hausa society.

### **7.4 Domestication of Herbalism in the Daily Life Culture**

Not only is herbalism limited to the incident of illnesses in the two cultures but it is also incorporated in the daily life of the respondents. The Yoruba use herbal teas (*agbo*) on a regular basis in the name of well being and cleansing and to prevent illnesses. The magnitude of the spiritual importance of plants is also revealed by the use of plants in food and rituals, child birth and naming patterns (Adebayo & Ishola, 2016).

It is also the same case with the Hausa society whereby the mixtures of the herbs are used in their day-to-day lives as beauty products, aphrodisiacs, relief of sleep, and heightening mood. Herb stores are present in urban and rural areas and such products as *zogale*, *dabino* or *kayan lafiya* are a usual thing in every house. Religious traditions include herbal knowledge because specific herbs are used during the Islamic festivals as a form of spiritual support, which belongs to the religio-cultural functionality of herbs (Nasir, 2017).

This conjunction is the reason why herbalism among both cultures extends beyond the practice of medicine into personal identification, spirituality and communitarianism.

### **7.5 Modernization and its Effects to Both the Traditions**

Both traditions have experienced the impact of the forces of modernization, urbanization, religious reforms and the western medicine and they have been experiencing them in varying ways. The Orthodox Islam and *Salafism* movements among the Hausa communities have cast doubts on the legitimacy of the traditional herbalists especially those who are associated with the products of amulet or syncretism beliefs. Last (2004) explains that the herbalists have been criticized (by some of the Muslim reformists) as un-Islamic meaning, they are no longer popular to the people.

In the present example, Pentecostal Christianity has also posed a threat to the traditional undertakings of the Yoruba. Some pastors are of the view that herbalism is rather idolatrous or is not Godly thus creating inconsistency and conflict between the traditionalists and the Christian converts (Jegede, 2002). However, by virtue of comparison with the Hausa situation, the Yoruba herbalism has been found flexible, some herbalists changing their trade mark to that of offering natural health, or African alternative medicine in bid to relate with the urban and educated population (Fabe bomi, 2010).

All these pressures have however failed in killing these traditions out-right since they are still being practiced in one way or the other due to the cultural movement to revive the cultures, the spread of information through the media and the growth in the arena of complementary and alternative medicine. The resistance of people to change as far as traditional healing is concerned shows that it is strong and is part of the culture of the two communities.

### **7.6 US and India Traditions and its Effect on Modernization**

The forces of modernization and urbanization, the religious reform and the influence of western medicine have affected both traditions, but to a different extent. Due to the entrance of orthodox Islam and the *Salafism* in the Hausa communities, it has cast doubt upon the belief in traditional herbal medicine where the traditional beliefs regarding herbalists and individuals that use amulet or syncretism were not believed anymore. Although this is a betrayal of trust amongst spiritual healers since an increasing number of people abandon these services because of the condemnation by certain Muslim Reformists by declaring the work of a herbalist as being un-Islamic (Last, 2004).

The Pentecostal Christianity has also threatened local customs on Yoruba population. The majority of the pastors condemn herbalism as an idol or demonic presenting an anomaly between the Christian converts and the traditionalists (Jegede, 2002). Yoruba herbalism has however been accommodating as compared to the Hausa context where re-branding has been practiced by the herbalists to natural health or African alternative medicine in an endeavour to reach the urban and educated members of the society (Fablumi, 2010).

Despite all that progress, these two cultures continue to exist, in incessantly transforming forms, through cultural-restoration movements, news media promotion, and growing interest in complementary and alternative medicine. The fact that traditional healing is still in practice is a sign that it is also strong and well integrated in the cultures of the two communities.

## **8. Challenges and Modern Day Forces**

Modernity is threatening traditional herbalism of the Hausa and Yoruba culture because of the numerous challenges and other transformative forces which have found their way to their society. These are invasion of western medicine, progressive laws, globalization, religious reinventions, urbanization and generational differences. Even herbalism now forms or rather falls within the realm of culture and practices culturally even though it has been said to be cultural in the past.

### **8.1 Occidental Medicine Impact**

The rise of the western biomedicine has been regarded as one of the worst challenges to the herbalism because it is now widely accepted to be the standard in ensuring health delivery not only among the governments but the global population at large. Practices of the traditional method have been judged as inferior or non-scientific by

people because of the institutionalisation of the western medicine, which can perhaps be attributed to the development and establishment of the scientific and knowledge education (World Health Organization [WHO], 2013).

In both Hausa and Yoruba settings, hospitals and clinics have become the first point of acknowledgement with regard to problems with health, especially, in the urban settings. The new generations are raised on the belief in the efficiency of pharmaceutical medications rather than herbal ones (Creswell & Poth, 2018). The change however has not done away with this kind of medicine completely especially in the rural areas where the modern health care is relatively inaccessible or where cultural bend tends to be very strong.

### **8.2 Policy and Legal framework**

The traditional herbalists lack proper legal status and regulatory frameworks of their activities, which has made the activities hard. Nevertheless, in Nigeria, the issues concern the absence of general commitments that implement the traditional medicine as a formal sector of the national health framework in spite of high utilization (Okafor & Onyema, 2018). There has been a planned Traditional Medicine Development in Nigeria but very little has been implemented as well as investments and as such the herbalist may be left free to actually continue to practice in a grey area or else work in an unregulated underground system.

The outcome of such non-regulation is improper management of quality, standardization and safety that breeds suspicion among the minds of people. Commercialization of some of the goods by the herbalists has made the product to be labelled in the most deplorable manner; this has been exacerbated by the unknown doses and uncertified products hence claims of fraud or injury. States have also attempted to establish methods through form of licensing or associations to control practice but this has not been similarly harmonized in all states.

### **8.3 Globalization and influence of Religion**

The problem with globalization is the introduction of new sets of religious ideologies, system of values and cultural norms that in one way or another challenges the established way of healing. The expansion of orthodox Islamic faith (*Salafism*, in particular) in Hausa society has condemned certain herbal practices that received the status of innovations (*bid'a*) or proved too short to the spiritual welfare of an individual (Ibrahim, 2014). The capability of the *Malamai* who practice healing is also made to solidify using amulets, charms and the divining aspects that reduces the sphere of the traditional herbalism.

The traditional religion is also comprised of herbalism, which is an inseparable part of following the *Orisha* deities, it has been stigmatized in the Yoruba regions by the evangelism and evangelization of the Pentecostal Christianity religion. Most of the converts as theorized by Jegede (2002) reject the practise of their traditional beliefs and refer to them as satanic or pagan. However, two herbalists have responded by re-established their image back into the Christian or non-religion, stressing on herbalism as natural, scientific or ancestral, rather than being spiritual practice.

### **8.4 Generational Changes and Urbanisation**

Great cultural dislocation has also been brought about by Urbanization. It may be predicted that urbanized youths will be brought up disassociated with the reality of the village and that the elders will be the custodians of the old knowledge on the basis of the herbs (Fabcum, 2010). Many youth people or rather are not even exposed to most of the indigenous knowledge since the education systems lay a lot of emphasis on western science and dilute the value of native knowledge.

Apart from that, city life discourages participation in rituals, collective healing and diving into the culture which is valued in conventional apprenticeship. The herbal training as a profession did not even have an opportunity to be considered in terms of time and resources due to economic constriction in the cities and the bloating of the digital culture takes away the faces of legacy jobs in the shape of *Babalawo* or *Onisegun* and so on.

Meanwhile, under the aegis of another niche group of youth activists, researchers and cultural revitalization actors, at least a fraction of the indigenous knowledge systems are currently being researched, digitized and restored, in some cases, in conjunction with more recent health and wellness waves (Okafor & Onyema, 2018). This kind of

recovery means that though the field of herbalism has numerous daunting issues, it can still be reversed to emerge once more in a different form, a hybridized version in the later generations.

## **9. Conclusion and Recommendations**

In this paper, the research in Hausa and Yoruba culture has been carried out concerning herbalism with the intention to investigate the means of the application of herbal medicine as the method of treatment, the place of religion and culture in the given process, the adaptation of this treatment in the culture, and the issues which may arise in the context of modernization. It can be concluded on the basis of the qualitative comparative analysis that there is the system of herbalism in both societies that presupposes not only the approaches to the use of the plants and root as the parts of the plant, but also the spiritual and community activities.

Herbalism among the Hausa are performed through strongly practiced Islamic spirituality especially through *Quranic* verses, amulets as well as prayers through recitation of prayers, which are conducted mainly by *Malamai*. The Yoruba embraces healing, *Orishas'* worship, divination with *Ifa*, and symbols rituals, practicing of which is recommended by *Babalawo* and *Onisegun*. The two traditions stress metaphysical causes of sickness and both stress spiritual harmony, social harmony and gifts of god as essential to health.

The other notable similarity that the research creates is that of the herbs used and apprenticeships in transmission of the knowledge and the way of adapting healing to life. It means to call against spiritual systems, the difference in gender role, and the response pattern of modernization. Herbalism is very cultural, this is largely in the rural areas and among the societies which still hold their ancient systems of knowledge close to their hearts.

Nevertheless, herbalism practice and the discipline in general are already under redefinition by western medicalization, the need of religious reform, the globalization phenomenon, legal uncertainty and urbanization. The traditional elements have been abused ruining them; hence some of them have morphed or re-emerged in hybridizations.

### **9.1 Recommendations**

In order to conserve and, to a great extent, to bring indigenous healing practices back to the modern world, as well as to ensure safety, credibility, and dignity, it is proposed to follow the following propositions:

#### **9.1.1 Culture Conversation and Documentation**

The governments and academic establishments should give special priority in the recording of the indigenous herbal knowledge through carrying out ethno botanical surveys, oral history and electronic archives. It will help prevent losing the knowledge as geriatric healers might not exist anymore and the younger generation is falling into the world of contemporary city (Okafor & Onyema, 2018).

#### **9.1.2 Policy Making and legal Acceptance**

Countries as well as individual states should devise a consistent and legal framework that recognizes and promotes the traditional healers to document them and regulate them officially. They are not limited to licensing systems, safety measures and collaboration between the practitioners on the traditional and the biomedical domains (World Health Organization, 2013). It would raise the level of credibility, in general, and ethical practice.

#### **9.1.3 Inter Disciplinary Education and Training**

The health science studies must include the traditional medicine studies, by universities and health institutions, especially the ethno pharmacology, medical anthropology and public health studies. The cultural-related training will promote the respect of the biomedical and the traditional health systems towards each other and will offer a room where they can collaborate to utmost levels rather than competition.

#### **9.1.4 Community-Based Research and Support**

There may be additional community-based research or support opportunities in the future, but currently, there is no specified dream. The finances should be carried out on the sphere of community research and herbalist co-ops which opportunities gives practitioners the opportunity of information exchange, and conservation of rare plant species, and improvement of standardization of preparations. The herbal gardens will be located within the

community and the local research facilities where conservation and education can be performed (Adebayo & Ishola, 2016).

### **9.1.5 Relative concept of Modernization and Spiritual Integrity**

Despite the fact that modernization is inevitable, one must ensure that the traditional healing can carry spiritual and cultural baggage. The healing systems with spiritual outlines are common in the societies and cultures, where religious cosmologies take primary importance at the level of everyday life within the given community (Abimbola, 2006; Ibrahim, 2014).

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