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## Les Guérisseurs Forestiers (Forest Healers)

MACENTA, Guinea

September 1, 1997

By Randi Movich

### THE PATH TO BECOME A HEALER

The recently swept earthen floor is cool and bare beneath my feet. Light trickles in from a tiny wood-framed window, gently warming the chocolate-colored walls freshly plastered with mud. My eyes wander toward the ceiling of woven straw mats, held in place by long wooden poles resting on top of the short, mud-brick walls. The furnishings are modest: a single bed, table, and chair. Numerous sizes of aluminum pots and utensils are neatly stacked on the corner floor. The only evidence of an "outside" world is the presence of brightly colored enamel bowls imported from China. I am sitting in the home of Sila Gilavogui, a 95-year-old Toma<sup>1</sup> healer and traditional birth assistant from the village of Bakema (See map, page 4). I have just walked 15 kilometers on a mountainous trail from the *sous-préfecture* (sub-county) of Panziazou to reach her village, and am now thinking how many times Sila must have walked this path with a heavy load on her head. The miles of walking and years of hard work show only faintly on her slightly wrinkled face.

Sila is the oldest woman healer in the area and is considered to be the *grande-maitre* (master teacher) of all the women who practice in the vicinity. She originally learned her skills from her mother, and only after her death did Sila gain healer status. I asked her what changes concerning healing she had seen over the years. She gave only one example: "I have lived two different lives. Life used to be easier for traditional birth assistants like myself. The reason is that women used to be allowed to grow up before they were given to men. Women used to be

<sup>1</sup> The Toma are a forest ethnic group based in and around Macenta. In Toma culture all surnames designate an animal or plant totem for the clan. In the history of this particular clan, the tale of their totem goes like this: One day my great-great-great grandmother was in the field weeding her rice. She had left her baby in a small palm-frond cabana (*koti*) in order to shade him from the sun. Before returning to her weeding she had put a pot of leaves on the fire to boil. She was working away, and heard the barking of her dog (*gila*), which she had left near the *koti*. She looked in the direction of the *koti* and saw nothing unusual. She continued working. What she did not know was that the flame from her cooking fire had been blown to the walls of the *koti*. A little bit later she heard the sounds of barking again. She looked up and much to her horror saw that the *koti* was engulfed in flames. She ran over to the *koti*, but it was too late. She began wailing at the loss of her child. Her *gila* kept barking and running off to the edge of the forest and then back to her. Through her tears, she began to question this strange behavior. This time she followed the *gila*. Looking on the ground she noticed a newly made wide trail that the *gila* was leading her on. The *gila* finally led her to the shade of a large tree. There she found her baby sleeping in the small basket that she had originally left him in. She then figured out that it was the *gila* who had dragged the baby out of the burning *koti* to the safety of the forest. From that point on, all of her ancestors were forbidden to eat *gila*.

at least 25 before they had a child. Now ten-year-old girls are going with men." There are typically more complications associated with women giving birth at a young age.

This collapse of cultural restrictions is echoed by Sila's husband, Balina Gilavogui. He has been a healer for 28 years and is currently the only male healer in Bakema with an apprentice. He explains, "Most people don't have apprentices nowadays because the young men of today think only of women. Certain plants require that the man cannot "touch" a woman when he is working with them." On this note, he invites me to take a taste of his anti-poisoning brew — a slimy, greenish mixture of secret leaves and seeds that have the taste and consistency of okra. After seeing a companion eagerly taking a sample, I put a small amount on my hand and lick gingerly. Now I should be protected from anything or anyone that tries to put evil in my path.

Some healers learn their skills from their mothers, fathers or other relatives. Others serve as apprentice or helper to another healer. This is the somewhat unique case with Saran Ouédéno. She has been learning about medicinal plants from her husband, Faya for the past few years. Although Faya's father was a healer and *sorcier* (a type of healer that works with the spiritual and supernatural; they can do things like stop the rain or put curses on people), Faya apprenticed with another man who was his *maître* for over ten years. He was profoundly attached to his teacher, saying, "I cried when I left that man."

I ask him why he did not learn from his father and am surprised at the honesty of his response. "My father pulled me out of school when I was about ten. He wanted me to learn medicine. I can also do the types of *sorcier* work that my father did, but I focus more on healing plants. When I was around thirty, I suffered from impotence. My father could not heal me. My friend Soluko brought me to a man named Sano Ouöndé who healed me and, my father thought it was best that Sano become my teacher." [At this point in the discussion Saran runs into the house, her hand covering her mouth to keep from bursting into laughter over Faya's admission of impotence. Several of the neighborhood women who have overheard the conversation are now in hysterics. Faya defends himself, saying that it is better to be up front and honest about these things.]

Saran is learning about medicinals more from necessity than anything else. This is due to Faya's failing eyesight (he is in his sixties), which makes Saran (in her twenties) indispensable on collection trips, helping him to find the plants he needs. Saran knows as many medicinal plants as Faya

and she seems to have a better memory for some. Saran and Faya work well together as a team, which is somewhat unusual for a man and wife here in Guinea. Generally women and men have very separate lives. A trip *en brousse* (in the bush) with the Ouédénos feels like a Sunday family outing. Their little girl Sia, who is four, accompanies us and calls out the names of plants that have just been collected. Faya says he wants to teach her about medicinals. She is the next generation of healers and a wonderful assistant.

Just as there are earthly ways to learn about medicines, there is also the stuff of dreams. Marie Zumanagui<sup>2</sup> describes her experience learning the collective ancestral wisdom from women elders. "One night I was lying in my bed. There was a woman in the *quartier* (neighborhood) who had been in labor for more than two days. Until now I knew how to heal general ailments for women but I was not a midwife, therefore I could not help with this woman. I had just finished reading a religious leaflet, and I had turned down my lamp. I had



The Ouédénos collecting Kpilingkongo, a plant used to promote labor.

<sup>2</sup> The Zumana is a small, black, goat-like creature.



*Sia Ouédéno holding plant parts. She'll be in the next generation of healers.*

fallen asleep. All of a sudden three old women came to me in a dream. I saw a radiant light, huge, shining behind them. They told me to observe everything that they did, because they said that I would be the one to deliver the baby of the woman who had been in labor for so long. I was trembling. One of the women came behind me and held me up. She told me that I shouldn't be afraid. They went through a long, detailed procedure where they put the laboring woman's feet up on blocks and massaged her back, hips, and stomach. They told me to do exactly as they did and the baby would be fine. I awoke from my dream petrified. I heard the moans of the woman in labor. I realized I couldn't go through with it. I started to pray, and the women returned. They told me to simply close my eyes if I needed any help remembering. I finally took the courage. I went to the laboring woman and did exactly as the women had shown me in my dream. I simply closed my eyes when I couldn't remember what to do next. The three women would appear to guide me. That baby and mother are still alive today. This is how I started being a midwife." Today Marie is called upon daily to assist with births as well as general healing.

Many healers claim to have gained their knowledge of traditional medicine through dreams. This is often referred to as *héritage*, meaning someone that has been "chosen" to inherit collective ancestral wisdom. Lansana Karouma, a healer and employee of the Prefectoral Department of Education, tells me he started healing people at the age of seven when he was shown which plants to use for different ailments in his dreams. He said although his father taught him about many medicinal plants, he knew about the healing properties of some that

even his father didn't know. Nowadays he can only see people after work for consultations. He says he just doesn't have the time, but hopes to become a full-time healer upon his retirement. "It is not my medicine that has enabled me to build my house," says Lansana as he explains his choice to continue his studies to become a government civil servant.

## GATHERING MEDICINALS

I am clutching ancient wisdom in my hands: freshly picked plant medicine. The knowledge of these healing vines, entwined in my sweaty fingers, has been passed down by the grandmothers and mothers of Saran and Koli Zumanagui. These two healers and traditional birth assistants (*mavynzowei*, in the Toma Language) from the village of Zoulakoro are my teachers as we amble down the forest-lined path leading east from their small farming village (See map, page 4). My classroom has no walls and the smell of decomposing vegetation lingers sweetly in the cloud-filled, clear blue air. Walking purposefully on the rutted, rain-soaked, weedy road (now impassable by motorized vehicle or bicycle) we scan the varied forms and endless colors of green, a tapestry of textures with subtle differences seen only at close range. To pick out the plants that prevent miscarriage and facilitate labor Saran and Koli need keen eyes and an intimate knowledge of plant ecology.

Koli has been Saran's apprentice for the last 10 years, yet their relationship seems more sisterly than that of student and teacher. Ahead of me these two women navigate with fluid ease. They are familiar with the route, taking it every morning to farm their fields, collect firewood or



carry water. In contrast, I clumsily and carefully make my way down the slippery roads, trying to look to the sides while at the same time maintaining a vertical position. Each step is greeted with the sound of chattering birds, with the rustle of wind-brushed leaves, with changing types of forest — and possibly, with a sore, muddy behind.

Walking downhill from the village<sup>3</sup> we pass the dark green understory of coffee plantations sheltered by mature towering trees and palms. These native trees have been left to provide essential shade, food, wood, medicines and palm wine for the local population. Large-leaved banana plants, cola and cacao trees also make up the understory. Domestic goats, chickens and pigs scratch and snort their way through the fallen leaves looking for tasty morsels. Most villages in the Forest Region are surrounded by cash-crop plantations, which literally make a circle of protection from wind and fire around the oth-

erwise plant-less, mud-bricked village compounds. The *forêt sacrée* (sacred forest), where initiation takes place, is also located adjacent to the plantations, its location marked by the tallest and most robust trees. Cultivated upland fields and lowland rice swamps are located at a greater distance from the village center, their locations marked by a maze of smaller paths leading into the brush off the main road. A walk of up to five kilometers to reach them is common.

By the time we complete our thirty-minute round-trip walk, we have collected six medicinal plants, all of which have been found just off the main path at the edges of the coffee plantations. In the past weeks, I have been out *en brousse* with seven different healers and all of the plants have been collected within eyesight of a secondary road or well established footpath. Most commonly, the medicinals we have collected are located in the under-

<sup>3</sup>Many Toma villages were strategically located on hilltops in order to fend off colonial and immigrant invaders.

story of young forests,<sup>4</sup> or within coffee plantations. Less frequently we entered into remnant yet partially disturbed forest patches.<sup>5</sup> I have been told that medicinals are also collected in the primary forests (which are older and mostly undisturbed). Part of the reason I have not collected in these places may be the relative inaccessibility of primary forests, which are typically located in very mountainous areas with little road access. Where medicinals are collected has interesting implications for forest management and conservation. The following questions swirl around my head: Are people currently collecting where they do because these are the most accessible places? Have species used as medicine changed over time given changes in the forest? Which species are no longer available to be used as medicinals? How would more permanent agricultural systems (in contrast to shifting cultivation, which continually creates young forest) with designated forest reserves affect the availability of medicinals?

My questions are scattered when Saran calls me over to look at a new plant. Collecting time is spent wrenching vines free from their shrub and tree supports, pulling leaves off stems, hacking off pieces of underground roots, and chipping bark from trunks. Healers keep a mental map of where they find specific plants, returning to the same places time and time again. Others, however are simply found by chance. I have been told that most plants used for healing are very easy to find, although a few require long-distance travel to the relatively scarce primary forest, often referred to as the *grande forêt*. There are no formal systems of conservation or ownership of medicinal plants, but the traditional healers I have collected with do not take an entire plant, cut only a small portion of a root, and don't peel away more than a quarter of the circumference of the bark of a tree in order not to kill it.

Most healers say it is rare to see a case of over-exploitation, partly because each healer has his or her "own plants" (different species as well as individual plants) that they work with. On the surface there is little competition between healers for plant resources, although knowledge of specific remedies is highly guarded — so much so, that a son will pay his own father for certain remedies.

Of course where the healers live determines how far they travel for medicinals. From Macenta, healers usually walk five to ten kilometers from the town center to find most of their plants. In some cases they will take a bush taxi to more distant forest patches where they think they



*Faya Ouédéno, preparing an eight-plant remedy called Mooliondö (in the Kissi language) used for infertility.*

will be successful in finding a particular plant. Sometimes a healer will send a younger family member in search of particular plants, especially if longer distance travel is required. Therefore, just because plants are found in "managed" areas isn't to say that the healer doesn't have to travel to collect them.

## REPRODUCTIVE HEALTH REMEDIES

Prepared plant remedies come in many forms. For example, some fresh leaves are mashed in cold water and the mixture is sipped. Other leaves and twigs are prepared as teas (boiling water is poured over the plant and left to steep for a few minutes) or infusions (plants are boiled for an extended time with the water). Sometimes the leaf, bark or root is dried in the sun, pounded in a large wooden mortar and then dried again, ultimately being made into a fine powder. The powders are used in teas, infusions and sitz baths. They are also

<sup>4</sup> I define these as fallow areas where the vegetation is left to grow after the land has been cultivated for one to three years. Typically, trees of varying sizes and species have been left in the cultivated fields and these continue to grow, providing an overstory for smaller trees, vines and shrubs.

<sup>5</sup> These areas have not been cultivated in the past fifty years or more. They contain a variety of plant species and age groups, differing canopy layers and have some characteristics of an undisturbed primary forest. Unlike an undisturbed forest, however, these areas are exploited for wood, lianas, cords and other forest products. In these habitats the bark is harvested from the larger trees.





Saran and Koli Zumanagui, teacher and apprentice from Zoulakoro. The plants they are holding are used for miscarriage prevention and labor promotion.

mixed with termite-mound earth into elongated balls (*cataplasme*) to be used at a later date. This is a common form of storage, used in order to preserve the strength of the medicinal in a very humid climate. The *cataplasme* are often mixed with a small quantity of water to be licked directly off the hand or made into teas.

Saran and Koli collect fresh leaves from the vines of *Zowowalai*, *Telelevai*, and *Imidaasai*. In Toma, *Imidaasai* literally means "breast-milk-cord," appropriately named because the vine exudes a white, milky latex when the heart-shaped leaf is pulled from the stem. Koli gives me the miscarriage-prevention recipe for these three vines. "Any aged leaf can be used. I take a handful of leaves from each plant, mashing and massaging them by hand in water. The woman then drinks the mixture throughout the day until her pain ceases." Glancing up at the man who is my traveling companion and interpreter (who is also a healer), she adds in a warning voice, "A man shouldn't see the preparation because it is not meant for him." Several healers have told me that men and women know different kinds of plant medicines and some are not to be shared between the sexes.

Although men and women may have different knowledge, the male healers that I have talked to all have a full range of plants that they use in reproductive health. There don't appear to be taboos against men treating women's gynecological problems. The exception to this is giving birth. Men may not be present, yet they are often called on for medicinal remedies to help with labor promotion or hemorrhaging after birth.

I have asked healers about plant contraceptives and abortifacients, yet very few have mentioned the use of these. They say few women come to them asking for these products. There is a much greater emphasis on promoting fertility than on inhibiting it in Guinea. The ex-

ception to this is the frequent use of emmenagogues,\* which one healer said was popular with high-school girls. Although, I have been shown several plant remedies used for birth control (more likely emmenagogues than contraceptives), the most commonly mentioned form of traditional birth control lies in the meta-physical/religious realm. Cotton string is made into a cord, in which seven knots are tied. The healer then chants wishes that the woman not become pregnant, invoking supernatural powers. The healer then spits on the cord (according to one *guérisseur* this signifies that the healers' words were actually spoken). The cord is then tied around a woman's waist for four days. On the fifth day she unties the cord and puts it safely away in a corner, usually with a small rock that has been "blessed." When the woman wishes to become pregnant, she simply cuts the string in a stream of running water. I have talked to several women who have used this method, each claiming it's efficacy. Details as to the time period of effectiveness remain unclear.

*Les guérisseurs forestiers* have talked about and shown me a full range of healing plants used in women's reproductive health. There are remedies for infertility, painful menses, amenorrhea, excessive menstrual bleeding, prevention of miscarriages, yeast infections, urinary tract infections, sexually transmitted diseases, difficult pregnancies and lengthy labor. The health problems that are treated are as diverse as the healers themselves. Traditional healers use a wide variety of plants for the same conditions, a situation most likely attributable to the different ways they learn their skills, the secretive nature of their remedies and the distinct habitats where they live. The importance of traditional medicine should not be underestimated. It is often the only form of medical treatment available for a large percentage of the population, and it will continue to play a vital role in the health and well-being of Guinean women. □

\* a substance that begins or increases menstrual flow.

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