

indescribable suffering into a wider context. Christianity can do this, but so equally do secular belief systems, including non-theistic religions such as Buddhism.

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Jeremy A. Holmes, Visiting Professor, Department of Clinical Psychology, University of Exeter, email: j.a.holmes@btinternet.com

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What about traditional healers?

In studying the relationship between culture and the concept of mental distress, anthropologists have shown how people from different cultures explain mental distress and how these models of distress influence causal attribution and presentation of disorder as well as determining patterns of help-seeking. It is important to try to define some of the concepts we talk about in our clinical practice as they are important to set the context for any valid research.

It has been recognised that traditional healing practices exist side by side with modern medical practice.¹ The term 'traditional medicine', as identified by the World Health Organization, is 'the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness'.² This definition is very broad and does not suffice in a culturally aware and unbiased context. It acts as an external definition imposed on the people using these methods of healing, as they were not asked what a traditional/spiritual healer represents to them, and it is clear that the meaning is different to different people; this is why there is a need to have more focused qualitative research in this area.

The role the healer plays could be holistic as the patients seek help for a variety of illnesses, including sexually transmitted diseases, divulgence of secrets, protection against witchcraft, prophecies of future events, and annual check-ups.³ It is important to know that healers are not a homogeneous group and there are distinct differences between diviners, herbalists and faith healers. While these broad distinctions seem to be generally valid across different cultural groups, it is not unusual for healers to integrate aspects of more than one orientation into their practice.

There is a relative lack of critical literature on indigenous healing,⁴ although examples of indigenous treatment that have caused harm to patients are frequently cited. I argue that it is critical to appreciate the importance of the patients' understanding of their mental illness in relation to traditional/spiritual healing and that there should be an emphasis on the role of the local explanatory models for mental illness in the different cultures. As practitioners we need more awareness and resources for developing locally relevant community mental health programmes to meet health needs of our target population. This will provide better understanding of local concepts and may inform policy makers on how to incorporate traditional/spiritual/local healers' services into the existing mental health services to enable patients to have input according to their needs.

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- 3 Hund J. African witchcraft and Western law: psychological and cultural issues. *J Contemp Relig* 2004; **19**: 67-84.
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Ibtihal Elshikh, ST4 in Child and Adolescent Mental Health Services, East of England Deanery, Hemel Hempstead, email: ibtihal_gha@hotmail.com

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