

*UKUTHWASA* INITIATION OF *AMAGQIRHA*: IDENTITY  
CONSTRUCTION AND THE TRAINING OF XHOSA WOMEN AS  
TRADITIONAL HEALERS

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## Declaration

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## Abstract

The study explores *ukuthwasa* initiation process amongst *amaXhosa* women in the Eastern Cape Province. The focus is on the training of women *amagqirha* in three areas in the Eastern Cape. The study looks at how the women are trained as *amagqirha* and how they construct their multifaceted identities during their tedious five-year training process. The Komanisi *iphehlo* is used as a paradigmatic model school for the training of *amagqirha*. The ritual of *ukuthwasa* is analysed as a transformational practice that operates changes in those who undergo it. A brief review of the interface between *ukuthwasa* and Christianity is included and reflections in specific historical and socio-cultural contexts are provided. *AmaXhosa* have been shaping and reshaping their ethnicity, religious culture, their identities and political systems during the course of political instability and economic and social-cultural challenges, including challenges during the democratic government. Such challenges affected *amaXhosa* as a nation and their religious life, as traces of such can be observed in transformations that have affected *ukuthwasa* practice. The study reveals the structure of the training process and incidents that led to the evolution of *ukuthwasa*, ritualism, symbolism, myth or magic and possible inexplicable realities of the world of *ukuthwasa*, to reveal the epistemologies and existential realities of *ukuthwasa* and female experiences.

The polymorphism of *ukuthwasa* demands the use of various theoretical approaches to explain the process and practice of *ukuthwasa*. Consequently, that led to the use of a triangulation approach as a method of choice to collect, analyse and interpret the data. The grounded theory method was used. The life histories of four trainers and the spiritual journey of the researcher are used as retrospective data to explain the process, existential experiences and practice of *ukuthwasa*. In total, 115 participants, including *amagqirha*, faith-healers, public community members, family members of those who *thwasa*, initiates and key public figures have been interviewed through structured and unstructured interviews. Verification and soundness of data collected are maintained by means of verifying data through focus groups. Results reveal that the *amaXhosa* experience *ukuthwasa* as a cultural initiation process that helps in nurturing, awakening and stimulating the person's *umbilini* (intuition), which is an inborn gift used in divining. *Umbilini* is the only skill used to assess, diagnose and treat their clients and patients. Therefore *amagqirha* use inductive ways of assessing their clients. Through *ukuthwasa* initiation, women are able to understand their 'self' better. *Ukuthwasa* also instils maturity and opens up insights into their other gifts such as 'leadership' skills. In that way, *ukuthwasa* enhances their identities. In addition, *amaXhosa* understand *ukuthwasa* as a reality and an inborn gift that runs in families. The result is also that *ukuthwasa* is a complex and abstract phenomenon that unfolds as a long process and is

never completed fully in its entirety; only death relieves a person from its demands. It is fraught with various crises and to reject it is to invite continuous crises and ultimately madness and death; the best way is to accept it. To treat *ukuthwasa* as a possession and as a psychological phenomenon or syndrome is to underestimate the primary factor of the inborn disposition's importance as cultural text and cultural discourse. Variations in the structure and procedures carried out in *ukuthwasa* are identified within the cultural group and other Nguni cultures, as well as at national and international level. Furthermore, there is an inevitable interface between *ukuthwasa* and Christianity. The *amaXhosa* believe in one, universal world. The infusion of cultural doctrines with Christian values leads *amagqirha* to construct their multiple identities as *amagqirha*, faith-healers, powerful healing women as well as women leaders in the cultural and Christian healing profession.

Key words: *intwaso*, *ukuthwasa*, *amagqirha*, identity, Xhosa rites of passage, *intlombe*, gender construction, *amasiko*, *umbilini*, training stages.

## Opsomming

Hierdie studie ondersoek *ukuthwasa*-inisiësiëproses onder *amaXhosa*-vroue in die Oos-Kaap. Die fokus is op die opleiding van vroulike *amagqirha* in drie gebiede in die Oos-Kaap. Die studie kyk na die wyse waarop vroue opleiding as *amagqirha* ondergaan en hoe hulle hul veelvlakkige identiteite gedurende hierdie lang opleidingsproses van vyf jaar saamstel. Die Komanisi *iphehlo* word gebruik as 'n paradigmatische model skool vir die opleiding van *amagqirha*. Die ritueel van *ukuthwasa* word geanaliseer as 'n transformasiepraktyk wat veranderinge bewerkstellig in diegene wat dit deurloop. 'n Kort oorsig oor die raakvlak tussen *ukuthwasa* en die Christengeloof word ingesluit en daar word spesifiek in historiese en sosio-kulturele konteks oor besin. *AmaXhosa* het hul etnisiteit, godsdienstige kultuur, identiteit en politieke stelsels gevorm en hervorm te midde van politieke onstabielheid en ekonomiese en sosio-kulturele uitdagings, insluitende uitdagings binne die konteks van die demokratiese regering. Sulke uitdagings het 'n invloed op die *amaXhosa* as 'n nasie in hul godsdienstige belewenis gehad, aangesien tekens daarvan bespeur kan word in transformasieprosesse wat die *ukuthwasa*-praktyk raak. Die studie openbaar die struktuur van die opleidingsproses en gebeurtenisse wat gelei het tot die evolusie van *ukuthwasa*, ritueel, simboliek, mites, towerkuns en realiteite van die wêreld van *ukuthwasa* wat moontlik nie verklaar kan word nie, om sodoende die epistemologie en eksistensiële realiteite van *ukuthwasa* en die ervarings van vroue weer te gee.

Die polimorfie van *ukuthwasa* vereis die gebruik van verskeie teoretiese benaderings om die proses en praktyk van *ukuthwasa* te verduidelik. Gevolglik het dit gelei tot die gebruik van 'n drievoudige benadering as 'n metode om die data te versamel, te analiseer en te interpreteer. Die grondslagteorie-metode is gebruik. Die lewensgeskiedenis van vier instruktors en die geestelike reis van die navorser word gebruik as retrospektiewe data om die proses, eksistensiële ondervindings en praktyk van *ukuthwasa* te verduidelik. Onderhoude is met 115 deelnemers gevoer, insluitende *amagqirha*, geloofsgenesers, lede van die gemeenskap, familieledes van diegene wat *thwasa*, beginners en openbare sleutelfigure, deur middel van gestruktureerde en ongestruktureerde onderhoude. Die verifikasie en betroubaarheid van ingesamelde data is verseker deur die data deur fokusgroepe te laat verifieer. Die bevindings het bevestig dat *amaXhosa ukuthwasa* as 'n kulturele inisiësiëproses beleef wat meehelp om 'n persoon se *umbilini* (intuïsie) – 'n aangebore gawe wat vir voorspelling gebruik word – te koester, te laat herontwaak en te stimuleer. *Umbilini* is die enigste vaardigheid wat gebruik word om die kliënte en pasiënte te assesseer, te diagnoseer en te behandel en daarom gebruik *amagqirha* induktiewe prosesse om hul kliënte te assesseer. Deur middel van *ukuthwasa*-inisiësiëproses word vroue in staat

gestel om hul 'eie ek' beter te verstaan. *Ukuthwasa* bring verder volwassenheid teweeg en maak hulle bewus van hul ander gawes, soos die gawe van 'leierskap'. Sodoende versterk *ukuthwasa* hul identiteit. Verder beleef *amaXhosa ukuthwasa* as 'n realiteit en 'n aangebore gawe wat in families aangetref word. Gevolglik is *ukuthwasa* 'n komplekse en abstrakte verskynsel wat oor 'n lang periode ontwikkel en wat nooit ten volle afgehandel word nie; slegs die dood bevry 'n persoon van die eise wat dit stel. Dit gaan gepaard met verskeie krisisse en om dit te verwerp, is om verdere krisisse uit te lok, wat uiteindelik uitloop op kranksinnigheid en die dood; dit is beter om dit eenvoudig te aanvaar. Om *ukuthwasa* as 'n geestestoestand en 'n sielkundige verskynsel of sindroom te beskou, is om die primêre oorsaak van die belang van die aangebore gawe as kulturele teks en kulturele diskoers te onderskat. Variasies in die struktuur en prosedures wat tydens *ukuthwasa* gevolg word, word binne die kulturele groep en ander Nguni-kulture, sowel as op nasionale en internasionale vlak geïdentifiseer. Verder bestaan daar ook 'n onvermydelike raakvlak tussen *ukuthwasa* en die Christelike geloof. *AmaXhosa* glo in een, universele wêreld. Die vermenging van kulturele leerstellings met Christelike waardes lei *amagqirha* daartoe om hulle meervoudige identiteite as *amagqirha*, geloofsgenesers, invloedryke, genesende vroue te konstrueer, asook as vroueleiers in die kulturele en Christelike geneeskundige professie.

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## Preface

The World Health Organization (WHO) defines the well-being status of 'health' as a state of complete physical, mental and social wellbeing, not merely the absence of disease or infirmity (WHO, 1998). *AmaXhosa* has a similar philosophy regarding the well-being status of a person. To them to maintain a healthy status is to be mentally, physically, socially and spiritually healthy. Furthermore, the spiritual aspect is critical and central to being healthy. One of the ways to maintain spiritual wellness is to undergo *ukuthwasa* initiation. *Ukuthwasa* is a spiritual journey that is specifically designed by ancestors for those who are endowed with the gift of healing by their ancestors. In the past, *ukuthwasa* carried a stigma and no educated or Christian person would want to admit or show in public that she had an *ubizo* (a calling). Currently, the practice has attracted a lot of attention, but many people are not yet clear as to how this practice unfolds as much, nor as to as how much the practice differs amongst the cultures. The practice is fraught with afflictions or crises and may play an ambivalent role in the life of a person. My interest to study *ukuthwasa* is based on my personal life as a Xhosa woman who was brought up as a Western-trained and educated Christian but later on in life I had to retrace and reclaim my cultural roots to become an *igqirha* (a trained Xhosa traditional healer).

My grandmother was *igqirha* and later on my biological mother became one as well. I also discovered that both my paternal and maternal families were related to (that is, both on my biological mother and father's side) *amagqirha*. I never thought I would be one and in fact I never liked *amagqirha*. I did not like the white clay covering their bodies; it scared me. Although my grandmother was *igqirha* but also a Christian, she never wore clothes like *amagqirha*. She was a leader of the Women's Manyano at church, and as such I never perceived her as *igqirha*. Irrespective of her leadership role at church, my grandmother also divined and treated most of our people at church.

My grandmother told me that I was born prematurely and that I had cried a lot at night. *AmaXhosa* call this *ukuzilinda* (to guide oneself). I was also a special child to her and she called me *intombi ye BA* (a Bachelor-of-Arts girl). From birth, my grandmother had predicted that I would be a well-educated woman; hence she named me Nomfundo (mother of education).<sup>1</sup> Another measure of being 'special' is the fact that my grandparents gave me a name that symbolises a popular flower used in most Xhosa rituals and healing called *inyibiba* (a lily). My grandfather named me Lily-Rose when a second name (school/Christian name)

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<sup>1</sup> Read more about the naming of children in the article by Selby & Mlisa, 2007.

was needed at school as the white teachers were not interested in learning to pronounce our indigenous names.

As I grew up in a family of converts who were staunch Christians, I was baptised in the Methodist Church. At church I progressed from being a Sunday school member to being a full member of the Women's Manyano, a preacher and finally a pastor. As a child I was very sensitive and intuitive. If I hugged a person or shook hands with a person, I sometimes became sick. Sometimes I joined other children at play, feeling quite well, but would then later on feel sick. After playing I was well again. Sometimes when I sat next to someone I would feel sick and at times I just had to cry. At the age of seven I used to have a variety of dreams: crossing a huge river with clear water; flying like a bird; crossing forests; and climbing mountains. In addition, I dreamt of preaching in front of huge crowds and at times laying hands on sick people (crippled, paralysed and blind), after which those people would be healed. I often had dreams about white people. They talked to me or flew with me and at times swam with me in big rivers or in the sea. When I told my grandmother about my dreams she became angry with me and told me to concentrate on my education, not on dreams. She told me that dreaming about white people was bad, as white people were perceived to resemble witches. I used to be afraid when I had such dreams.

I experienced numerous incidents throughout my childhood, adolescence and young adulthood that shocked me. I recall two incidents that my mother often talks about. One day I prayed for rain (I was participating in a school drama). Soon afterwards, it started raining. The other incident happened when I went with my grandmother to the field to harvest maize. On my way I dug out a certain type of root called *inkalimasane* (*Euphorbia caput-medusae*), which on my arrival back home I ground to a paste. I then insisted on rubbing the paste on my grandmother's sister who was very ill and bedridden. She welcomed the idea and I rubbed the paste on her. Two days later she was up and about. She passed away a week later. I was probably five or six years old at that time.

As I grew up, my grandmother asked me to help her grind/pound medicine for her clients. Sometimes I went with her to collect medicines from the field and forest. More often, I had to write down prescriptions for the clients as well as dosages. As I grew older, specifically during adolescence, I hated these duties and showed great reluctance to help her. Sometimes she shouted at me or ignored my moods. One afternoon she told me that she felt sorry for me because by the time I realised how important it is to know about the medicine it would be too late for me to learn. Later on, when I left home for secondary school, I was

relieved that I no longer had to perform those duties. I finished secondary school without any peculiar incidents.

Later on in life, the dreams and dramas started to haunt me again and I had to be trained as *umthandazeli* (faith-healer) as a means to avoid *ukuthwasa*. Ultimately, after being initiated as *umthandazeli* in 1996, I thought that I had won, but I was wrong. In 1998 I still had to undergo the tedious process of *ukuthwasa* initiation, from which I graduated in 2000. My experiences of being *umthandazeli* and *igqirha* support the African world-view of one universe (more about this in Chapter 4). During the initiation periods many prophecies revealed that my ancestors wanted me to found a church. That was revealed to me in my dreams on 17 May 2001. In September 2007 I founded the church. The founding of the church came as the ultimate fulfilment of the revelations and prophecies by Matogu in 1994 and 2004 and by *tata* Mtini in 1996. The new church I have founded is the Episcopal Lutheran African Church. The name of the church was given to me through *ithongo* (dream), on 17 May 2001, a year after I had graduated as *igqirha*. I look forward to what the future brings. At this stage, I am more open to all possibilities and welcome them with curiosity and calm rather than fear. I see it as an endorsement that God is using me for a purpose (more about this in Chapter 4). *Ukuthwasa* is a reality. I narrate and share my spiritual experiences, knowledge and wisdom and that of my spiritual sisters (Chapter 4) in humbleness. It is also a means to share our phenomenological experiences with the world so that scientists could become aware of how the knowledge from diverse cultures is construed, as well as how spiritual encounters are experienced, defined and interpreted. The voices of the practitioners have to be heard, *Camagu!*

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## Glossary List

Term	Meaning
<i>Abagongqisi</i>	Special nurses for this ritual
<i>Ahlolwe</i>	Inspection (looking for evil marks on the body)
<i>Amadaki – isitafu</i>	Prints made from German material – chiffon
<i>Amafufunyana; umndiki</i>	Man-made spirits used as means of sorcery by naughty people or as love charms.
<i>Amakhankatha</i>	Special nurses; attendants
<i>Amakhosi; imilozi; mandawu</i>	Nguni ancestors associated with ventriloquism
<i>Amakhuko</i>	Floor mats from grass
<i>Amaqaba</i>	Illiterate; red blanket
<i>Amasiko</i>	Customs
<i>Amayeza</i>	Medicine
<i>Amazimba</i>	Maltabella
<i>Ayipheli</i>	No end
<i>Camagu; thokoza</i>	Term to salute <i>sangomas</i>
<i>Enkundleni</i>	Open space in front of the kraal
<i>Entla</i>	At the far inside of the house
<i>Hashe</i>	Gonorrhoea
<i>Ibhekile</i>	Billycan
<i>Ichibi</i>	Wellness centre;
<i>Iculo – amaculo</i>	Song(s); hymn(s)
<i>Idliso</i>	Poison
<i>Igama – lokugula,</i>	Name of illness
<i>Igqirha; umhleka; isanus; umntu omhlophe,</i>	Healer; chief; white person; the lion of the nation
<i>gobela (Shangaan) isangoma (Zulu); ingonyama</i>	
<i>yohlanga</i>	
<i>Igqoboka – amagqoboka (pl.); ikholwa</i>	– Christian(s)
<i>amakholwa (pl.)</i>	
<i>limpondo</i>	Horns
<i>lindaba ezinkulu; ingxaki inkulu</i>	Big news; big problem
<i>linduku; umnquma; umsimbiti</i>	Knobkerries; stick
<i>lintlanga</i>	Tribes
<i>lintsomi</i>	Fairy tales; myths
<i>linwele eziyephuyephu</i>	Silky hair
<i>linxili</i>	A small handbag made of floral cloth with her pipe inside
<i>linyongo; izinyi</i>	Gall; urine bladders
<i>Ikarolo</i>	Ritual (Sesotho term)
<i>Ikhuko</i>	Grass mat
<i>Ikomkhulu; umlambo</i>	River
<i>Ikrwala – amakrwala (pl.).</i>	Newly graduated <i>amagqirha</i>

<i>Ukunyanga; ukubethelela umzi</i>	To heal; to cleanse, strengthen a homestead
<i>Imbabhama</i>	A white chicken
<i>Igqirha; Idinala</i>	Birth rite of passage; dinner
<i>Imbokodo</i>	Stone used to grind
<i>Imbongi</i>	A poet
<i>Imfene</i>	Baboon
<i>Iminyanya – umnyanya (sing.); isihlwele – izihlwele (pl.)/abantu abadala; idlozi (Zulu) badimo (Sesotho)</i>	Ancestors
<i>Imithombo</i>	Springs
<i>Imphepho</i>	Incense
<i>Impilo</i>	Health
<i>Impinda</i>	A herb used to bring back the trouble or curse to the original sender
<i>Impundulu</i>	A bird that sometimes changed to any creature from being human and to being material, for example, a belt
<i>Imvubu</i>	Sjambok
<i>Imvula tasi</i>	The deposit paid to an <i>igqirha</i>
<i>Imvuselelo</i>	Whole night church service
<i>Incamazana</i>	Goat
<i>Indlu yam yokugula</i>	My house of sickness
<i>Ingethe; ihlathi</i>	Forest
<i>Ingoma</i>	Song
<i>Ingxowa edlakadlaka</i>	Sack cut into rags
<i>Inkalimasane</i>	Euphorbia caput – a root herb
<i>Inkomo</i>	Cow; ox; full payment for the treatment of an <i>igqirha</i>
<i>Intambo</i>	Cultural necklace from the goat's tendon and tail
<i>Intlabi</i>	
<i>Intlombe; umgidi; xhentsa</i>	Séance; ceremony; dance
<i>Intlonipho</i>	Respect
<i>Intombi</i>	Girl; unmarried woman
<i>Intonjane</i>	Female initiation
<i>Intsimbi</i>	Bead(s)
<i>Intsinda abadala</i>	Difficult problem beyond elders' wisdom
<i>Intsizi</i>	A blackish powder made from a mixture of medicinal roots, bark and leaves
<i>Intwaso; inkathazo; inkenqe; ingulo emhlophe, umshologu, ingulo yesixhosa;</i>	Trouble; cultural madness; white sickness; ancestral sickness; noun of <i>ukuthwasa</i>
<i>Inxopo</i>	Special grass found along the banks of the river
<i>Inyibiba</i>	A lily
<i>Inyongo</i>	Bile

<i>Iphehlo/iphondo; iphondo</i>	Training school of <i>amagqirha</i>
<i>Iqaba</i>	Illiterate; red blanket
<i>Eqadini</i>	The top part of the roof inside the house
<i>Iqwili</i>	Type of root herb
<i>Isifundiswa – izifundiswa (pl.);</i> <i>igqoboka – amagqoboka (pl.)</i>	Christians
<i>Isikhahlelo</i>	Praise name for <i>igqirha</i>
<i>Isimnyama</i>	Darkness/bad luck
<i>Isinyi</i>	Bladder
<i>Isipho/umrumo</i>	Gift to the ancestors
<i>Isithunzi</i>	Shadow
<i>Ithongo</i>	dream
<i>Ithonto</i>	Small round hut made up of grass – dome-shaped grass house
<i>Itshoba</i>	Ox tail on a stick – part of the <i>igqirha</i> 's regalia
<i>Ixhayi</i>	Forklike twig to shake <i>ubulawu</i>
<i>Ixhwele – amaxhwele (pl.)</i>	Herbalist/herbalists
<i>Iyeza</i>	Herb/medicine
<i>Iziko</i>	Fireplace
<i>Iindwendwe</i>	Clients
<i>Izingelosi</i>	Angels
<i>Izithebe</i>	Tablemats from grass
<i>Izithethe</i>	Suggested customs
<i>Iziwasho</i>	Medicinal mixtures; powders used by faith-healers
<i>Izulu</i>	Lightening to kill the alleged witch or person
<i>Ngokuzalwa</i>	By birth
<i>Phehla ibhekile</i>	Shake <i>ubulawu</i> in the billycan
<i>Qinisa; qaphula</i>	Method of healing by making incisions and/invisible to remove poison inside the body
<i>Siphosa ngasemva; sanele</i>	We throw behind; satisfied
<i>Ubizo</i>	Calling
<i>Ubugqwirha; ubuthi; ubugqi</i>	Witchcraft; magic
<i>Ubulawu</i>	Medicinal extracts from certain special roots of herbs
<i>Ubumnyama</i>	Darkness
<i>Uhexa</i>	Loose/hanging
<i>Ukombela/ayombela/ayavuma</i>	Traditional way of singing
<i>Ukothula iingcaza</i>	To take down gifts of ancestors
<i>Ukothula iqhiya</i>	To take down a headscarf
<i>Ukubaleka</i>	To run
<i>Ukubekwa</i>	To be seated
<i>Ukubekwa epehlweni</i>	To be inducted or baptised into <i>ukuthwasa</i>
<i>Ukubonga</i>	Poetry



<i>Ukubuyisa</i>	To bring back
<i>Ukuchitha iintsimbi</i>	Ritual to place beads of an <i>igqirha</i> in the forest
<i>Ukucula – bayacula</i>	Singing – they sing; Christian, educational way of singing
<i>Ukudibanisa</i>	Bring together; incorporate
<i>Ukugongqa</i>	Retreat
<i>Ukugqaba</i>	Smear the <i>umkwetha</i> with a specially prepared soft paste from various herbs and eggs
<i>Ukuguqula</i>	To turn, in this context to bring back
<i>Ukuhlalisana</i>	Cohabitation
<i>Ukuhleba</i>	Gossip
<i>Ukuhlonipha</i>	Respect
<i>Ukuhlwayelela</i>	To plant; to throw away
<i>Ukuhoya</i>	To nurture; to take care of
<i>Ukukhala</i>	Must bellow
<i>Ukukhanya</i>	Enlightenment
<i>Ukukhapha</i>	To accompany; to go with
<i>Ukungqawa</i>	Beading
<i>Ukungqwamba</i>	Wearing goatskins
<i>Ukungxengezeza; umsebenzi wekhaya</i>	To apologise
<i>Ukunqula</i>	Singing clan praises; saying traditional praises
<i>Ukunyuka</i>	To go up; to rise
<i>Ukuphinda Indlela</i>	To go back
<i>Ukuphuma; ukuphuma ekhaya/ emzini</i>	to graduate; get out of; from home/in-laws
<i>Ukuthetha</i>	To speak
<i>Ukuthwala</i>	Gaining powers for wealth;
<i>Ukuthwasa; thwasa; imvuma kufa</i>	To emerge, to be initiated as an <i>igqirha</i> ; accept <i>ukuthwasa</i>
<i>Ukutrona (Sesotho term); imfukamo; ukufukama</i>	Retreat/rite of passage
<i>intonjane</i>	
<i>Ukutshisa amathambo</i>	Burning the bones
<i>Ukutshotsha</i>	To be ragged
<i>Ukuvala</i>	To close/stop/to end
<i>Ukuvula; vula; umvulelo</i>	To open; ritual to open an <i>igqirha</i> 's gift
<i>Ukuxhoma iingcaza</i>	Hanging gifts for ancestors
<i>Ukuxilonga; ukuhlahluba (Sesotho); intlahlubo;</i>	Assessment and diagnosis/looking for lost property
<i>unontongwana; ukuvumisa</i>	
<i>Ukuzilinda</i>	To guide oneself
<i>Ukuzimela</i>	To be independent
<i>Ukwaluka</i>	Boy's circumcision
<i>Umakoti; umendi</i>	Bride
<i>Umamlambo</i>	Mermaid
<i>Umaphekwana</i>	A cook for an <i>igqirha</i>
<i>Umbilini</i>	<i>intuition</i>

<i>Umbono – imibono (pl.)</i>	Vision(s); images
<i>Umdali; Qamata</i>	Creator; God
<i>Umdiyadiya</i>	Curtain
<i>Umhlelo</i>	Fat
<i>Umkhonto</i>	Javelin
<i>Umkhosi</i>	Military regime
<i>Umkwetha – pl. abakhwetha; isigulane (in faith-healing) ithwasa (ne) – in other Nguni cultures</i>	Initiate(s), novice(s), trainee(s).
<i>Umlaza</i>	Ritual impurity
<i>Umlungu mabele</i>	A Bible hanging from the tree
<i>Umnquma; umsimbiti</i>	Stick from oak tree
<i>Umoya – imimoya (pl.)</i>	Spirit (s)
<i>Umprofethi/umthandazeli – abathandazeli (plural)</i>	Faith-healer
<i>Umqombothi; utywala</i>	Sorghum/home-brewed beer; liquor
<i>Umrawule</i>	Dispensary where an <i>igqirha</i> places her herbs.
<i>Umrazo</i>	Ritual to smear with red ochre
<i>Umrosho</i>	Certain bones from a sacrificed animal
<i>Umrumo; isipho</i>	Gift
<i>Umshwamo</i>	To eat a piece of meat taken from the right foreleg of a scarified animal
<i>Umswane</i>	The inside parts of an animal or a person (intestines, etc.)
<i>Umthomnyama</i>	Manure in a kraal; mean own grass root or cultural land
<i>Umzi; umkhuku</i>	Homestead /home/shelter
<i>Uthikoloshe</i>	Tikoloshe / tokolosie (Afrikaans)
<i>Zikhale</i>	Should bleat or bellow

**PART ONE BACKGROUND AND MOTIVATION TO STUDY *UKUTHWASA***

## CHAPTER 1 AN INTRODUCTION TO THE STUDY OF *UKUTHWASA*

The chapter provides some insights into *amaXhosa* divination as practised by *amagqirha* at the Komanisi *iphehlo* (training school). It introduces the reader to the general background and aims of the study. Firstly, a general background is given that covers the background to *ukuthwasa*: the terminology used; *ukuthwasa* as a calling, a process and a practice. In addition, the interface between *ukuthwasa* and Christianity is outlined. Secondly, the motivational factors and justification of why the study was conducted, including the value or expected contributions of this study, are specified. Thirdly, the problem statement is defined and the main research questions are presented. Fourthly, the objectives of the study are tabulated with an outline of the chapters contained in this study.

Despite the prolific studies done on traditional healing, this study is the first to focus on an in-depth exploration of the stages of *ukuthwasa* training and how *amagqirha* construct their identities during the training and practice of *ukuthwasa* amongst *amaXhosa* in particular. Most studies have mentioned the training of *amagqirha* without going deeper into the rituals and activities conducted during these stages (Hirst, 1990, 1997 & 2000; Hopa & Simbayi, 1998; Kruger, 1981; Hammond-Tooke, 1989; Mqotsi, 1957; Soul, 1974; Lamla, 1975; Broster, 1967 & 1981; Schweitzer & Buhmann, 1978, 1979 & 1982; Mabona, 2004 and Mndende, 2004). None of these studies links the process of initiation with identity construction. Moreover, there are few studies written on *ukuthwasa* as practised by *amaXhosa*. Most studies concentrated more on medicinal plant use and *sangoma* practice.

This study investigates how female *amagqirha* (diviners) are trained and how their authentic healing identities are constructed during the initiation process. It explores the crises involved in the process and how these crises are managed. The study also addresses the lack of practitioners' voices in the research of African traditional healing (in particular *ukuthwasa*) through the inclusion of four life histories and narratives of senior *amagqirha*, including that of the researcher as *igqirha*. The life histories address existential experiences of those who are trained or aspire to be *amagqirha*. The study seeks to contextualise and localise *amaXhosa ukuthwasa* in the following areas: conceptualisation of *ukuthwasa* process by *amaXhosa* in the Eastern Cape Province, as well as *ukuthwasa* in general – nationally and worldwide; gender roles and healing practices; the influence of Christianity; relationships between *ukuthwasa* and Christianity; and how *amaXhosa* relate *ukuthwasa* to spirituality. Because the study involves women, the use of the pronoun 'she' is used throughout the text, even where experiences of men are involved.

## 1.1 BACKGROUND ON UKUTHWASA

### 1.1.1 Placing *ukuthwasa* in context

In the twenty-first century, the debate on the discourse of spirituality and contact with spiritual mediums in the diverse cultures has received worldwide attention, including that of agnostics (Lewis, 1971:5). Such is the case with *ukuthwasa*. It is becoming a common occurrence to observe ritual ceremonies and performances of *amagqirha* on television screens and in local newspapers and national magazines. These media representations depict the nature of the process of becoming a diviner, that is, practices, beliefs, dynamic transformations and developments in *ukuthwasa*. Sometimes such media reports engage the diviners in debates and challenging discourses with their counterparts, namely Western-trained doctors (SABC 1, 2004).

As much as it is important to locate *ukuthwasa* discourse in the current Western debate and proper context, the main goal of this study is to give an in-depth description of *ukuthwasa*, a religious phenomenon difficult to understand if not an insider, that is, if not *igqirha*. In order to understand the basic principle of *ukuthwasa*, one has to understand that the topic forms part of the currently introduced heated debate on Indigenous Knowledge Systems. Yet, previously *ukuthwasa* was often either part of anthropology, partly sociology, psychology and comparative religious studies, an indication that *ukuthwasa* is part of those topics; therefore calling for a multi-disciplinary approach. For an informed debate to take place between *amagqirha* and Western-trained psychotherapists there must be in-depth knowledge and know-how of *igqirha*'s training and competencies, their cosmology of illness and how they manage their patients. The divination system must be investigated because such information is invaluable to support comparisons and a mutual understanding with a view to policy formulations in order to place *amagqirha* on a par with Western-trained psychotherapists.

To place *ukuthwasa* in the Indigenous Knowledge System (IKS) means that *ukuthwasa* is defined as an indigenous practice whose origins are basically culturally bound. The researcher supports Nel's (2005) definition of IKS as a dynamic knowledge system that is widely used, as it affects almost all cultures and races, even if certain races and cultures use different terminologies and ways of symbolism. The fact is, each cultural group has an indigenous knowledge system entrenched in its belief systems and cosmology. There are common attributes as well as various ways of expression, symbolism, meaning and interpretation of such meanings and yet all embrace the indigenous ways of knowledge. In this sense, *ukuthwasa* is integral to the socio-cultural landscape of the *amaXhosa*.

*Ukuthwasa* is also a dynamic practice that is affected by time, circumstances and context. It becomes affected by global changes.

The researcher concurs with Van Binsbergen's (1999) ideology on the existence of different cultures. Van Binsbergen argues that differences in culture are a matter of indicating economical and political boundaries created for justification of territorial boundaries and a creation of 'otherness'. However, for him culture does not exist. The researcher tends to differ with that statement and argues that, since there are economical and political differences between populations or within the same population groups, and that culture is not only measured in those two terms but also according to other terms, including language, colour, cultural values and religious belief systems; such differences create different cultures amongst various peoples as well as within a specific cultural group. As long as such differences occur, different cultural ways are created in order to adapt and such strategies tend to exist. More so, if a definition of culture involves factors such as language, religious beliefs and other factors that are a reality of the existence of people, then different cultures do exist.

Again, without going deeper into Van Binsbergen's notion of no culture, the basic principle to be touched on with regard to both these authors' philosophies (Van Binsbergen, 1999 & Nel, 2005) is that all cultures share indigenous beliefs and value systems. In their sharing, certain similarities and differences occur. However, such differences do not mean that there is a better or an inferior culture. Variations, differences and similarities occur because of other stratification indicators, according to Van Binsbergen's arguments. That is why Nel (2005) further argues that 'otherness' should not separate people from a basic common attribute given and shared by all people (irrespective of culture, race, creed and nationality) such as that which human beings share, namely humanity and uniqueness. What is needed, is respect for that humanity and uniqueness and that no particular culture is superior to any other culture.

The point is that all cultures have different symbolic and indigenous ways of expressing their perception of their reality and existence, as well as their construction of multifaceted identities. How such perceptions and beliefs are formulated in terminologies/phrases and meanings, is an altogether different story. However, such differences should not be seen as dividing barriers between cultures, but as different ways of constructing meaningful lives or identities, as well as perceiving and interpreting the world in different ways within cultures. Even if such perceptions may create different worlds that could be interpreted as Western,

African, Asiatic and others, the fact remains that all people live in one world, but in different socially constructed spaces, leading to different discursive realities.

The researcher's contention therefore to examine *ukuthwasa* is not to claim a separate existence of the *amaXhosa* from the African continental traditional healing, but to describe the unique talents, abilities, consciousness, similarities and differences in perceptions of realities created by people's differences as 'persons' and their mindset embraced by their cultural socialisations. It is to claim *amaXhosa amagqirha's* authentic healing identities as they are. It is also not to influence others to change from what they are, but to create intercommunicative strategies to bridge the created 'otherness' to unique personalities who share sameness more than otherness. In the researcher's view, differences amongst people will always exist, as they exist within immediate family members, but such differences never separate the family bonding of the members; instead, it distinguishes the uniqueness of each member in that family. More importantly, the shared unique abilities and skills complement one another and thus form strong units. *Amagqirha* share that sameness and otherness with their counterparts and their colleagues from other Nguni tribes (*amaSwati*, *amaZulu*, and *amaNdebele*) and other cultural groups.

Therefore this study is devoted to describing as much as possible the phenomenon of *ukuthwasa* from the *amagqirha's* perspective; their training, identity construction, gender issues involved and the interface between the traditional ancestral world and that of Christian religions (as some of the participants in the study share both worlds – if they are different at all). In that way, the study also explores differences and similarities between the *amaXhosa amagqirha* and healers in other Nguni cultures as well as other diverse cultures in the global world. Thus, the study is predominantly descriptive.

### **1.1.2 Definition of *ukuthwasa* and terminology used**

*Ukuthwasa* is defined in various ways, since it is a unique process for each individual. It is a spiritual journey. It is an incarnation of nature and the ancestral world. Xhosa tradition views it as an inborn gift that runs in families. This means that one cannot just get up one day and say, "I want to *thwasa*." A person has to have *ubizo* (a calling to *thwasa*). It is perceived to be in the blood of a person and cannot be given to a person by any means.

The Xhosa definitions seem to contextualise the various aspects involved in *ukuthwasa* and thus each definition demonstrates a different aspect from which the *amaXhosa* perceive *ukuthwasa*. To start with, the *amaXhosa* use the words *ukuthwasa* and *ntwaso* (noun of

*ukuthwasa*) interchangeably. However, the two terms differ slightly. *Ukuthwasa* is an action verb that means *to enter into the initiation process, emerging of a new moon, and becoming a new person*, whereas *intwaso* is a noun describing both the emic and etic symptomatology or characteristics of *ukuthwasa* (Mabona, 2004 and Broster, 1961 & 1981).

Because *ukuthwasa* is associated with crises or afflictions such as accidents, psychic and mystic experiences, deaths and endless lawsuits, *amaXhosa* also refer to *ukuthwasa* as *inkathazo* (trouble). It is *inkathazo* indeed, since it involves syndromatic illnesses and a conglomerate of factors that culminate in various afflictions. Part of the problem is the expense involved in the process, which people view negatively. Sometimes *ukuthwasa* involves signs that resemble madness, such as hallucinations and illusions. Due to these characteristics it is known as *inkenqe* (cultural madness), or *umshologu* (spiritual madness) not 'shades' as continuously referred to by many anthropologists (Hammond-Tooke, 1989 and Hirst, 2000 & 2005), that needs cultural doctoring. Hence, entering into the *ukuthwasa* initiation heals the person. *Shades* in Xhosa mean *isithunzi* (a shadow). In this study, the *amagqirha* refute the use of the term *shades* to refer to *iminyanya*.<sup>2</sup>

Above all, because *ukuthwasa* basically depends on *amathongo* (clear, directive dreams), *imibono* (visions) and is highly associated with purity, it is also called *ingulo-emhlophe* (white sickness) (Dwane, 1998). That is why the white colour is a key symbol, even in beads and cloth, and *ukuthwasa* is commonly viewed as a sign of purity. As such, a person who undergoes the process is called *umntu omhlophe*<sup>3</sup> (white person) or *umhlelezi* (a chief). This means that a fully fledged *igqirha* is given the powers similar to that of a chief. *Igqirha* is accorded the social status of a chief because the clairvoyant is expected to exercise expert skill in decision-making, diagnosis, planning and the implementation of a therapeutic treatment plan to protect people and the community against evil powers and illnesses. The clairvoyant has a keen eye to see beyond and up front and thus she is deemed to be *ingonyama yohlanga* (the lioness of the nation). She is the king of the jungle, the flora and fauna in her environment.

Further definitions on *ukuthwasa* are given by various authors, for example, Hirst (2000) describes *ukuthwasa* as a divination process that allows a person to inquire about future events or matters, hidden or obscure, directed to a deity who, it is believed, will reply through

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<sup>2</sup>See Mabona (2004:293-341) and note variations in the use of terminology by the *amaXhosa* (ignore the mixing of Xhosa terms with other Nguni terms as that is not the objective of this study).

<sup>3</sup> *AmaXhosa* like to speak in metaphors. The term means a person with bright and clear vision, as light brings visibility and removes darkness. It has nothing to do with racial issues.



significant tokens. Most authors (Turner, 1968; Hammond-Tooke, 1989; Soul, 1974 and Lamla, 1975) describe *ukuthwasa* as a process that involves afflictions of those who *thwasa* (the verb of *ukuthwasa*). However, such afflictions cannot be diagnosed in Western terms (Hirst, 1997) since, in Western terms, afflictions such as palpitations or auditory and visual hallucinations that are often experienced during *ukuthwasa* would be diagnosed as pathological conditions associated with mental disturbances. The researcher agrees with Hirst, because in *ukuthwasa* such afflictions are viewed as normal characteristics and as emic signs of *ukuthwasa*. They are personal internal experiences felt by an individual. There are also etic factors that involve behavioural issues, fate or crisis as well as socio-economic and political factors. Both experiences play a key role in the assessment and diagnostic measures of whether a person *thwasa* or not. As much as the previously quoted authors have written about the training of *amagqirha*, their studies fail to distinguish clearly between the stages of training and also to explore the dynamics in each stage of training. They all view *ukuthwasa* as an illness or affliction and neurotic syndrome. The researcher strongly disagrees and this discussion is taken up later on in this study.

The critical element in the definition of *ukuthwasa* by *amaXhosa*, as opposed to that of Western anthropologists and Westernised Africans as revealed above, is that the *amaXhosa* define *ukuthwasa* as an inborn gift that manifests in afflictions and crises as a person grows. In turn, afflictions and crises are viewed as normal processes to force a person to accept *ubizo* as well as train the person how to deal with odysseys of the others. On the contrary, the Western perspective defines *ukuthwasa* as afflictions and crises in pathological and psychological terms instead of an inherited, inborn gift and normal process.

### **1.1.3 *Ukuthwasa* as a calling, process and practice**

*Ukuthwasa* has a long history amongst the Nguni tribes. It is as old as the human race (Soga, 1931). According to the *amaXhosa*, *ukuthwasa* is a white sickness (*ingulo emhlophe*), which affects those who are targeted by ancestors in their family lineages to be diviner healers. The person has to accept the calling to be a diviner and has to go through a series of steps by means of rigorous training. The person has to be treated by a fully fledged diviner who has been identified and presented to the person through dreams (*amathongo*). *Ukuthwasa* affects Xhosa people, irrespective of their gender, education, religious affiliations or age. Yet, traditionally it was seen to be *into yamaqaba* (that is, the experience of the uneducated people) (Dwane, 1998:5). *Ukuthwasa* is an ongoing process and only a few complete the entire process (Chapter 5).

The process is complex and fraught with emic and etic crises, and/or afflictions. Hence, diviners are ultimately viewed as 'wounded healers'. The emic crises or afflictions involve emotional, personal and spiritual crises. In addition, a person often experiences hardships from etic factors such as social and economical factors (Preface and Chapter 4). Throughout the process, *umkhwetha* learns the coping mechanism and strategies to manage such crises. All the informants in this study confirmed that no-one really appreciates *ubizo* because of the hardships involved. Full appreciation occurs after graduation when some reconciliation and integration processes have taken place. Hammond-Tooke's (1989:106) report confirms that no-one wants to be called. His report reveals that when he interviewed a hundred and fourteen women to find out who would like to be a diviner, only six expressed the wish to be a diviner. No-one readily accepts the calling because of various factors, which are addressed later on in this study (Chapter 5).

According to *amaXhosa* tradition, *ukuthwasa* is a healing process that involves the use of *umbilini* (intuition), dreams and visions as core aspects of assessing, diagnosing and treating the sick and those disturbed in various ways (Chapters 4 and 6). Generally, treatments are based on medicinal plants as basic cures. The divination process is called *ukunyanga* (to heal). It includes various processes such as *ukuxilonga* (assessing at an individual basis); *ukuvumisa/unontongwana* (assessing the family as a whole/looking for lost property); and *ukubethelela umzi* (cleaning the homestead).

#### **1.1.4 *Ukuthwasa* and Christianity**

Historically, *ukuthwasa* had always been seen as pagan and heathen and as such, the missionaries, colonisation and the apartheid system tried hard to destroy African divination systems like *ukuthwasa*. It was often associated with sorcery, *ukuthwala* (gaining powers for wealth),<sup>4</sup> *ubugqirha* (witchcraft) and witch-smelling (Pauw, 1975a) rather than healing and *ubizo*. Yet the survival of the divination systems and the current interest shown by the very cultures that once demoralised it proves the validity, authenticity and realistic nature of the natural existence of *ukuthwasa*. Instead of dying, it is mushrooming on the doorsteps of the so-called strong religions: Christianity, Islam and Buddhism, as well as the education system, which served as the handmaiden of religion. Currently, Christians as well as educated people not only consult *amagqirha* but also enter *ukuthwasa* initiation (see Chapter 1 and Dwane, 1998). It is no longer a shame to see a well-educated person or Christian in *igqirha*'s regalia or wearing white beads both at church and at work. This proves what Masoga (2001)

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<sup>4</sup> See more on *ukuthwala* in Woods & Lewis (2007), *The Extraordinary Khotso*.

advocates, namely that the ancestors are neither outdated nor out of touch with current developments and the challenges and demands of modern living. However, Christianity has strongly influenced Africans to the extent that they had to integrate Christian values into their cultural value systems (Sanneh, 1994 and Comaroff & Comaroff, 1999). In fact, the two religions are often incorporated in traditional healing (more about this in Chapter 4 and 6). The researcher also agrees with Hirst's (2005) observation that to *amaXhosa amagqirha*, traditional and Christian religions are considered to be related systems of thought and practice, hence *amaXhosa*, like other Africans, view the universe as one, and not separated as in the Western philosophy (see Section 8.3, p.279).

### 1.1.5 The rise of faith-healers

The strong influence of Christianity amongst Africans has led to the mushrooming of a new diviner sector amongst the *amaXhosa*, namely *abathandazeli*. Staugard (1986) believes that through the influence of the Islam religion, Africans and the Basotho in particular introduced an *umprophethi* (prophet) instead of *ngaka* (traditional healer). The African prophets are believed to have *intwaso* but because of the Christian influence, those who are Christians have a tendency to adopt *ubuthandazeli* instead of *ubugqirha*.<sup>5</sup> This group adopts *izingelosi* (angels) instead of using the term *iminyanya* (ancestors). They also undergo training under a senior *umthandazeli*. Their training is shorter and often not as well structured or as clearly defined as that of the *amagqirha*. However, both the *abathandazeli* and *amagqirha* share common practices as they all play similar roles in healing. They all use symbolism, rituals, dreams and visions to assess, diagnose and treat their clients. In addition, *abathandazeli* use the Bible to assess and diagnose their clients, whilst the *amaXhosa amagqirha*, unlike other Nguni tribes such as the *amaNdebele*, *amaZulu* and *amaSwati* who use bone throwing, use the skill of *umbilini* (intuition) to divine. Purification and treatment methods are also similar. They all use enemas, vomiting, body washing, steaming and *ukunqula* (traditional praises). However, some of their treatment methods differ as they use *izitshiso* (that is, burning of offerings). In short, the introduction of the prophets can be seen as a means of the African to reconcile the challenges brought about by Christianity and to accommodate their own cultures.

The researcher's own journey in *ukuthwasa* (see Preface and Chapter 4) provides reflections on the complex nature of the spiritual journey of *ukuthwasa*. The process provides a long journey with both amazing and incredible experiences. The journey is full of dangers,

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<sup>5</sup> *Ubuthandazeli* is to practise faith-healing; *ubugqirha* is to practise divination.

surprises, crises, resentment, passions, tensions and moments of grace and ecstasy. The experiences are recounted with an 'authorial voice' that convey personal narratives and narratives of other *amaXhosa amagqirha* in an unselfish manner to the world, especially to a world predominantly dominated by Western lifestyles, values and 'scientific' principles, which tend to undermine the 'scientific' views of what it does not understand – the African traditional mythology and spiritual world, including *ukuthwasa*. Looking at the Eastern Cape's history in the next Chapter, the views of both Staugard (1986) and Hirst (2005) support that the transmission of the divining profession appears to have been disrupted by the introduction of Christianity amongst *amaXhosa*, where it became popular to join an established Christian Church as a faith healer instead of being initiated as *igqirha*.

## **1.2 PROBLEM STATEMENT AND QUESTIONS ASKED**

### **1.2.1 The problem statement**

The involvement of spirits, symbolism, dreams, rituals and subconscious realities render *ukuthwasa* a complex process and therefore difficult to subject to scientific research and dialogue. The challenging problem areas relate to the following:

- the fact that the gift of *ubizo* (calling) to be an *igqirha* or *umthandazeli* is not readily realised,
- that not everybody has this gift and that to reject it calls for resentment from the ancestors. In addition, a person who is imbued with the gift has no choice but to accept it;
- the apparently significant role played by *amathongo* (dreams) and *imibono* (visions);
- the crises at a physical, emotional, spiritual as well as socio-economic level;
- reconciliation and management of the crises; and
- the construction of a healing identity during the process.

From the variety of concerns about *ukuthwasa*, it is evident that there is a need for rigorous research and that the practitioners of *ukuthwasa* should be encouraged to actively participate in such studies. This is because each cultural group has its own unique indigenous strategies to define the structure of cultural belief systems, various ways of expression, symbolism,

meaning and the interpretation of such meanings, as much as there are common attributes amongst all cultures. It is unfortunate that this study cannot address all concerns relating to the complex nature of *ukuthwasa*.

### **1.2.2 Delimitation of the study**

To delimit the study, only three central concerns were explored: the full training of *igqirha*; the construction of healing identities by the trained *amagqirha* throughout the training phase; and the interface between Christianity and the ancestral world of the *ukuthwasa*. Various questions that demand an integrated approach have been addressed in this study.

### **1.2.3 The questions investigated**

The questions explored the grassroots epistemological and existential issues about *ukuthwasa* as well as the divination system practised by *amaXhosa*, including its regional variations. Questions also interrogated life histories and narratives of the major participants to reveal the retrospective aspects of the initiation process and the rich wisdom it upholds. As a result of this, energies, feelings, existential experiences, rituals, ideas and all necessary revelations were collected. The main question of the study is: “How do Xhosa-speaking (aspirant/novice or trained) healers experience and perceive *ukuthwasa* in the construction of their spiritual/healing identities?”

Based on the central question, the areas of concern were:

- the historical, cultural, social and religious aspects of *ukuthwasa*;
- conceptualisation and meaning of *ukuthwasa*;
- the context of *ukuthwasa* within local and national identity;
- the divination process and interaction between healers and patients;
- the role played by the family and the community in *ukuthwasa*;
- the relationship between *ukuthwasa* and Christianity;
- the reason why women seem to dominate the profession;
- initiation and its practice with regard to cultural and political transformations;
- the role and function of music in *ukuthwasa* process; and

- the current trends regarding the acknowledgement and recognition of *amagqirha* by the government and society.

To investigate the above and expand more on the central question asked in this study, the following questions were asked:

- What is *intwaso* (the verb of *ukuthwasa*)?
- What are the characteristics that confirm that a person has to be initiated?
- How does the process unfold to identity-healing maturity?
- How do *amagqirha* and their families experience and perceive the crises involved?
- How are the crises managed and what cultural role do they play in the process?
- How are the trainees tested and evaluated?
- What makes some complete the process and others fail?
- What are the competencies of the trainees on completion of the training?
- How do women view their social role in the process?
- How does *intwaso* relate to Christianity?
- Why is *intwaso* not documented?
- What would be the best way to document it?

#### **1.2.4 Aims and objectives of the study**

From the background information and motivations it became clear that the study involved the following aspects: the description of the *ukuthwasa* initiation training process followed by *amagqirha*; how female *amagqirha* construct healing identities during training; and the interface between Christianity and *ukuthwasa*. The focus of the study has specifically been on Xhosa-speaking traditional women. As a person trained as a teacher, a nurse, *igqirha*, a psychologist and a pastor at church, the researcher felt a need to reflect and conduct more research on the phenomenon of *ukuthwasa* to create a better understanding of *ukuthwasa* particularly amongst Western anthropologists; hence, this study is conducted through the Centre for Africa Studies Programme. It is to explore various cultural, religious, socio-economic, political, and linguistic factors that could have an impact on *ukuthwasa* process

and practice. This allows the study to take a multi-disciplinary format as well as to involve integrative theoretical and methodological approaches. In this way, *ukuthwasa* phenomenon is explored and described from as many perspectives as possible with more focus on the existential experiences of its practitioners.

The aims of the study are supported by the following objectives:

- To explore the stages of the initiation process of *ukuthwasa* and the ritual performances involved in each stage, including the competences learned.
- To provide an in-depth understanding of *ukuthwasa*, using the practitioners' existential experiences.
- To investigate the role of crisis in the process and how it is managed.
- To explore how women construct their multifaceted roles during the process.
- To explore the interface between *ukuthwasa* and Christianity.
- The end results of this study are 1) a thesis to satisfy the researcher's professional interests and purposes; and 2) to publish the findings as a book.

### **1.3 JUSTIFICATION FOR THE STUDY**

The acknowledgement of the traditional healers by the government and the passing of the Bill of Traditional Practitioners in parliament in September 2004, together with the World Health Organization's (WHO, 1989 & 1995) insistence that traditional healers be incorporated into the health system, generated more interest amongst some professionals to investigate widely on issues relating to traditional healing. For example, in a dialogue between the WHO representative and a group of *amagqirha* from KwaZulu-Natal, which included Western-trained doctors, a critical concern was raised by Dr Ngubeni (SABC, 2003) on the basis that *amagqirha*'s training is designed and controlled by *iminyanya* (ancestors). He viewed this in a serious light since *iminyanya* cannot be held responsible for *amagqirha*'s possible recklessness and negligence towards clients. *Iminyanya* are invisible and cannot be confronted by legal means as in the case of medical doctors. Medical doctors' training is planned and designed by a statutory body and controlled by legal and statutory legislation. This makes it difficult to hold *amagqirha* responsible since they are not legally regulated by laws, but by *iminyanya* that are invisible. Thus a need to explore the training of *amagqirha* and their competences as well as understanding the communiqué between *amagqirha* and

*iminyanya* (ancestors) has become necessary. During the same debate another critical factor was raised by Dr Matsibisa from the Medical Research Council who reported that 78% of those who were HIV/AIDS-infected used traditional medicine, whilst 30% of the general public used *amagqirha*. This confirms the fact that, no matter what negative attitudes some people may have towards *amagqirha*, *amagqirha* remain part of the healing practitioners in most communities. Hence Dr Goqwana, a former Eastern-Cape Minister of Health at the same meeting emphasized the need to acknowledge and respect the dignity of *amagqirha* and to encourage their responsibility and accountability to protecting their communities. The critical question raised during the discussion was: “How do we prove objectivity and scientific reasoning behind traditional healing, since it is controlled by ancestors whom we cannot see?” Dr Shasha as a representative of the WHO, was determined that the two healing systems could be merged (Western and traditional medicine), since they both seem to be working well for different people. It is discussions like these that call for a continued exploration on both systems and to know better on how traditional healing systems work.

The tensions and conflicts between *amagqirha* and Western psychotherapists are widely investigated (Oosthuizen, 1989; Pauw, 1975a & 1975b; Hammond-Tooke, 1989; Hirst, 2000; Erdtsieck, 2003 and Pretorius, 2004) and seem to persist. Therefore it becomes important to conduct rigorous research on how these practitioners are trained; the basis of their training and its origin; and their role and contribution in the societies where they live and practise. In that way, strategies to legalise and control it through statutory measures could be devised to ensure that their practice is legalised according to the national statutory measures applicable to all professional practices controlled by the Health Professional Councils in South Africa (HPCSA).<sup>6</sup> This would make *amagqirha* to be as accountable as their professional counterparts.

Often diviners are perceived as purveyors of spells and sorcery (Kiernan, 1995) and have been called witchdoctors (Elliot, 1970; Soul, 1974 and Soga, 1931). Sometimes *ukuthwasa* is perceived as a neurotic syndrome (Mqotsi, 1957 and Lamla, 1975); yet these are all biases generated by outsiders, as this study will reveal. Erdtsieck (2003) suggests that a great deal of knowledge can be gained by carefully assembling contextual information of inspired healing practices drawn from illness histories, and the life working conditions of healers and their clientele. Thus, the brief outline of the researcher’s life story in Chapter 2 provides the fundamental basis for the motivation of this study. There is a need to narrate the existential spiritual experiences of those who have undergone the spiritual journeys and also to address

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<sup>6</sup> Read more on its website through Google search.



the ignorance about *ukuthwasa*. Reflections from the researcher's resistance to entering *ukuthwasa* and the crises situations experienced motivated her to share her experiences with others who would also not understand the value of going through *ukuthwasa*. The researcher's own ignorance and delay to enter into the initiation hindered her spiritual growth. Her personal background knowledge as a teacher, nurse, psychologist, pastor, *igqirha* and a woman makes this study crucial and special because of a combined insider/outsider perspective to enhance and enrich the existing knowledge of ideas, views and perception of *ukuthwasa*.

Thus, the researcher's insider experience and expertise, combined with outsider experience as a professional and researcher from a Western background, could add a valuable contribution to the scientific world as well as the traditional world. These would be through the reflections from personal initiation experiences, lessons learned and critical assessment of all such experiences. Therefore the results of this study will not just contribute more knowledge but will also help to refine the already existing knowledge on *ukuthwasa*. The research outputs from this study will contribute more to scientific outputs on traditional healing. It is also intended to fill the gap identified because of the dearth of written documents on *ukuthwasa*.

In addition to points raised above, recognition of *amagqirha* by the government and attitudes of certain health professionals towards *amagqirha* prompted the researcher to include the *amagqirha*'s voice as practitioners of *ukunyanga* (to heal) in the scientific debate (SABC, 2003 and Pretorius, 2004). This motivation was also prompted by various studies conducted on the traditional healing system in Southern Africa and worldwide. There are few or no research initiatives that look at the in-depth training and rigorous process that *amagqirha* undertake or experience. To equate *amagqirha* with their Western-trained counterparts, more knowledge on their training and core competence skills is imperative.

Since *ukuthwasa* is seen as a response or treatment of afflictions, with less emphasis on its inheritance (Hirst, 2000 and Turner, 1969), the study seeks to clarify the role and identity of the diviner as well as the initiation process, because there are so many different and opposing views relating to *ubizo* (see Chapter 9).

The secondary motivation for the research was the valuable information or contribution that the results of this study would bring to different categories of communities. *AmaXhosa* would be authentic beneficiaries of this study, especially the participants involved, their families and future generations. The study could contribute to add more authentic knowledge and claims on *ukuthwasa* through the voices of the practitioners. Amongst beneficiaries of this study

would be people who could identify with the common characteristics of *ukuthwasa* and were not aware of what was happening to them. In addition, it would motivate those who, due to the entrenched Christian and educational teachings and philosophies, tend to ignore their traditional values and therefore negate or reject *ukuthwasa* as a reality. This means that Christians and educated people who had lost faith in traditional religion could be influenced to reflect on their attitudes and beliefs. They may want to embark on personal journeys. Lastly, the study will bring the phenomenon of *ukuthwasa* directly to the centre of a scientific discourse. There is a need for both the traditional and western knowledge systems to merge or be integrated for the benefit of maintaining holistic well-balanced therapeutic interventions for all human beings (Carl Jung, 1990 and Torrey, 1972).

The research on traditional medicines and the role of traditional healers is highly significant, as traditional medicine is being upgraded to be on a par with modern Western medicine. The results of this research would contribute much to increasing the research output of this neglected area of how traditional religious and healing knowledge is passed on and how it is rooted in a changing society (Erdsieck, 2003).

## **1.4 LOCATING THE PROJECT**

### **1.4.1 Locality of the research sites**

The focus of this research is on *amaXhosa amagqirha* trainers and trainees in the Eastern-Cape Province, with particular focus on the Komanisi *iphehlo* (training school). The school was named after a woman *igqirha* called Mandaba (clan name) from the Bhaca tradition who founded it. However, the school was given her husband's name Komanisi, an honour given to him on behalf of his wife. All the trainees from the lineage of the school alumni have maintained the name in remembrance of their *isanusi* (senior and popular *igqirha*) Mandaba. Matogu,<sup>7</sup> the trainer, an alumnus of Komanisi *iphehlo*, was the most senior *igqirha* amongst many *amagqirha* who constitute the alumni group of the school.

The training schools are not regionalised as formal learning institutions, but they are highly individualised (each trainer has her own *iphehlo* school). There is a possibility that *amaphehlo* (plural of *iphehlo*) may differ, irrespective of trainers coming from one *iphehlo*. For this reason, only one *iphehlo* was chosen and used as a paradigmatic model for the training of *amagqirha*.

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<sup>7</sup> It is with sadness and yet with respect to note that Matogu passed away in December 2004. May her soul rest in peace. *Camagu!*

The chosen *iphehlo* is the one where the researcher was trained. Consequently, it was relatively easy to approach *amagqirha* and be accepted by the trainees. Besides, it allowed the researcher to obtain information about *ukuthwasa*, which is considered highly sacred and confidential amongst the *amaXhosa*. The two senior trainers, who are very popular in the Eastern Cape, are personally known to the researcher.

Since the Eastern-Cape Province is a fairly extensive area, three regions were selected. In those regions two villages and one township were further selected as research sites. Therefore a village – Upper Mbinja in the Tsolo region, Tsengiwe, a village at Cala in the Xalanga region – and one township in the Ugie region were selected (see Figure 1-1).

#### **1.4.2 Biographic descriptions of the main informants in the study**

The specific information on the informants provide a mental picture of where each participant is located and what historical as well as socio-cultural and political influences have impacted on the construction of their personal and social identities. The biographic information also relate to how the person in turn links her identity with interrelationships of her clients and community at large. Their biographies are described in a concise summary and as far as possible key aspects are included that relate to how female *amagqirha* practise their profession and handle their clients (Preface, Chapter 4 and 7). The description of participants is also based on the researcher's fieldwork experiences and from observations made during interviews and participation in ritual ceremonies. The researcher is permitted and has been given full consent by all the key participants in the study to use the names given to them at the beginning of the *ukuthwasa* initiation process. These are not their biological names. However, in the case of others, these names are used throughout their lives (Chapter 4). The names of clients in Chapter 6 are not disclosed due to confidential issues.

The meaning of *amagqirha* socially constructed identities reflects on how they perceive their abilities and skills in reclaiming leading positions as healers in their community. With reference to the villages: in Tsolo water and toilet facilities are still restricted and underdeveloped, to the extent that unfenced *imithombo* (springs) are used as sources of drinking water. The open spaces are used for toilet purposes. Certain parts of Mbinja Village are the exceptions where at least some residents have pit toilets and there are communal water taps. Most of the residents survive through the pastoral farming of sheep, goats and agriculture. This is not well developed due to drastic changes in climatic conditions with regular drought periods.



**Figure 1-1** Map showing research sites

A small number of residents still grow vegetables like maize, potatoes, pumpkins, watermelon and beans in their gardens. In 2006, during a visit to the village of Mbinja, there were more development projects. The municipality introduced community projects on HIV/AIDS training and awareness and community vegetable gardens. Boniswa, a key participant *igqirha*, and three of her *amakwala* (newly graduated *amagqirha*), joined the HIV/AIDS training after a meeting with the researcher. At a meeting in December 2006, they all wore white skippers with HIV/AIDS trainee written at the back and a red HIV/AIDS ribbon logo in front. That was good progress and transformation for *amagqirha* in this rural area.

Boniswa seems to take after her trainer's (Matogu) fame and popularity in *ubugqirha* (divination). She was accompanied by four *amakwala* (newly graduated *amagqirha*) and six trainees at the first meeting. More recently it was observed that she often recruits *abakhwetha* at an average rate of three to four trainees every six months. Her *umzi* (homestead) is situated at the base of a mountain and comprises three rondavels with thatched roofs and a modern house with four rooms. She stays about 800 metres away from

the main road that runs through the village and connects to junctions to Tsolo, Maclear and Ugie, which are the towns nearest to the village. The three rondavels are named *indlu enkulu* (family house) where everybody meets, conducts *intlombe*<sup>8</sup> or sits. This is where she hangs her *umrosho*<sup>9</sup> (certain bones from a slaughtered animal) from a previous ritual *ukuphuma emzini* (to graduate at her in-laws) in 2001. They hang from the *eqadini* (the roof inside the house) while waiting for her *umvulelo*<sup>10</sup> (one of the rituals for the opening). They are neatly bound in a sack and hung in the middle of the roof, safely secured by two diagonally placed poles (see **Figure 1-2**).

The rondavel in the middle is reserved for children and visitors and the rondavel close to the mountain is her room where she keeps her *umrawule* (dispensary). Only certain people are allowed in this room and menstruating women are not allowed to enter for fear of polluting the power of the herbs (Matogu, 2004 and Boniswa, 2005). This is a general African perspective and is enforced by the teachings of the Old Testament, which perceives menstruation as a state of impurity.

Boniswa also has *iqonga*<sup>11</sup> (see **Figure 1-3**) in this rondavel and in the *indlu enkulu* (family house). Boniswa's arrangement is typical of almost all *amagqirha's imizi* (homesteads). She does not have a telephone or cell phone, although many people in her village do. She is afraid of talking on a cell phone and believes that perhaps "*abantu abadala abakandiniki imvume yokuyithenga*". (My ancestors have not yet given permission for me to buy it.) This made it difficult to consult with her for research purposes. Arrangements for the meetings were organised through her son, and that made it difficult to get hold of Boniswa. With much patience and resignation to the delays, the researcher managed to set up various meetings with her.

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<sup>8</sup> *Intlombe* is the basic and central ritual for all ceremonies and/or activities performed by *amagqirha*.

<sup>9</sup> See more about this in Monica Hunter (1936).

<sup>10</sup> This is a ritual done after the graduation ceremony when *umrosho* is burnt. This ritual involves slaughtering of two *iincamazana* (goats) (one for cleansing and one for the *abantu abadala* (ancestors) and two *iimbabhama* (chickens) (one with each goat). *Umqombothi* (sorghum) is prepared. This ritual is believed to open ways or opportunities for *igqirha* to get clients to treat.

<sup>11</sup> A place specially prepared against the wall. A plank is often put horizontally and secured by long nails underneath. This is where the gifts for *abantu abadala* such as drink, tea, tobacco, brand and other gifts are placed. Most *amagqirha* cover it with a white curtain to make it a private place. Usually three glasses are placed with a plate or saucer to place tobacco on.



**Figure 1-2** *Umrosho eqadini*



**Figure 1-3** *Iqonga* for the placement of gifts. Boniswa is placing gifts.

The late Matogu, a key participant in this study, as well as Boniswa's and the researcher's former trainer who passed away in December 2004, resided on the other side of Tsolo in Tyhini Bantu Village. She was a widow for more than 50 years. She never had any biological children but counted her numerous trainees as her children. Matogu lived about 2 km away

from the main road that runs near her village. She had a big *umzi* with three rondavels and a modern house with three rooms. One of the rondavels was an *indlu enkulu* (family house). That is where she used to conduct *iintlombe* and an *umgongqo* (Chapter 5) for *abakhwetha* in their last phases of the training. The researcher was assessed at that house by her *umkhwetha* (now an *igqirha*) when she first visited Matogu in 1994 (Chapter 4). One of the rondavels was for her *umrawule* and one for visitors. Matogu had a second *iqonga* in her modern house in her bedroom. She liked that house and used it more than the family house except when she was performing a ritual. She was 104 years old in 2004. She suffered from ill health. Doctors had diagnosed diabetes and high blood pressure. Unfortunately, she always defaulted in her treatment.

Due to ill health and for economic reasons she went to stay in Khayelitsha at 118a Section C, where she owned an *umkhuku* (shack) with two bedrooms and a kitchen. During the researcher's training she had to make visits to Cape Town, which became more expensive and time consuming, but she had no choice. She would come to the Eastern Cape only for conducting rituals. The trainees paid for her return trip to Cape Town. Sometimes she would call for money to consult with a doctor. As her child, the researcher was obliged to provide her with money. On visits to Cape Town, the researcher observed that she had more clients there than in Tyhini Bantu, a reason why she stayed in Khayelitsha. It was surprising to see how people in cities, especially in townships, sought counsel with *amagqirha*. The rate at which they consulted *amagqirha* was double than in rural villages. Most cases were court cases (due to petty crimes as a result of unemployment); herbs for luck to procure employment; to gain promotion; for love affairs; and physical ailments.

Both Matogu and Boniswa stopped attending their Christian churches long ago. Matogu used to claim that she was an Anglican Church member and claimed to like a hymn called *Njengebhadi libhadula ukufuna umthombo*. Perhaps she last went to church before she became *igqirha* in early young adulthood. However, it was the researcher's duty and pleasure to sing her song and to conduct a prayer before meals and before bedtime. She always appreciated that. Boniswa was a Methodism member and used to remind the researcher that she had stopped attending when, "*Ndabona intaka irewula umfundisi njengokuba eshumayela naxa ephuma. Xa ndibuza komnye ukuphuma kwecawe ukuba uyibonile na le ntaka wathi kum 'Suka ufuna ntoni ecaweni uligqirha uzakubona izinto ezingakufuniyo?*" (I saw a bird flying around the pastor as he was preaching and going out of the church. When I asked one of the congregants after church if she saw the bird she told me, "Go away, what you want in church, being an *igqirha* to see things that do not concern you?") After that she never went again. She is happy to be an *igqirha* but when conducting

certain rituals she lights candles (see Chapter 5). Both Matogu and Boniswa receive old-age social grants.

Approximately 49 km from the two villages, passing Ncembu Village (8 km away from Mbinja), where Boniswa also has a number of trainees who often attend the research meetings, one reaches the old location in Ugie. This is a real product of the divide-and-rule policy introduced by the apartheid system. About 4-5 kilometres away from the dirty, overcrowded (during commercial hours) town is a densely populated and dirty (and in other areas a slum) township with a variety of houses. However, there is a better infrastructure in the form of electricity, water and housing development.

Zanemvula lives in the old location township. She owns a beautiful modern, three-bedroom house, kitchen and an extended living room. Her homestead is close to a crèche and community hall. Although she originally comes from a traditional background, her parents educated her and her two sisters. She is a modern woman. She was previously employed as domestic worker and now receives a Social Development Old Age Grant because of old age and ill health. She understands English although she cannot converse in it. She is also a Christian and attends church in the local Dutch Reformed Church, where she holds an important position as a Financial Treasurer of the Church. She lost her husband in a car accident. She owns a small herd of cattle. Caring for the cattle presents many challenges but she wants to keep them until all her late sister's daughters have gone through *intonjane*<sup>12</sup> (initiation for girls). She is the only participant in this area.

Zanemvula's house does not provide the basic facilities for the *indlu enkulu* as in rural areas. She conducts her consultations in a small room in the house reserved for this activity. She also keeps her regalia and *umrawule* in that room. She does not have an *iqonga* and improvises by putting gifts in a small place on a small table besides her medicine trunk. Unlike other trainers, Zanemvula conducts *umgongqo* at the initiate's home as she did to the researcher's mother Zanethongo in 2005. She is the only trainer with this style, probably because she does not have a spare room; nevertheless, Zanemvula prefers it that way. Her house structure denotes transformations made to accommodate the modern challenges of urban life.

It takes almost an hour to drive the 105 km from Ugie to Tsengiwe Village near Cala. Tsengiwe Village, where the researcher resides, is 25 km away from Cala. Tsengiwe is a

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<sup>12</sup> See Turok (2002:30-76) and Turok & Mlisa (2004:88-92).



small village divided into two villages, an upper and a lower village. This village is more affluent than the two villages in Tsolo. It is electrified and has communal water taps in each section of the village. Each home has a pit toilet outside, often at least 800 metres away from the houses. Most of the residents are literate, but few are well educated with university qualifications.

The contact with *amagqirha* in this village is fairly flexible because research is only undertaken when invited to their rituals or when they attend those rituals performed for the researcher, both as a participant and researcher. There are many *amagqirha* in this village, although it is a village for *amagqoboka* (Christians). There are various different churches: Methodist, Uniting Presbyterian, Presbyterian, Dutch Reformed, Seven Adventist, about three different Zionist Churches, two branches of the Apostolic Church and the researcher's newly founded church, the Episcopal Lutheran Evangelical African Church.

There are two Junior Secondary Schools to service both villages, an Educare School for both villages and a modern clinic with maternity facilities and a unit to admit urgent cases, as well as for 48 hours' observation or less. There are various community projects including the project on HIV/AIDS awareness called the Masiphile Project. This project was founded by the researcher in 2005 after five youths had committed suicide. However, currently the community is faced with the challenge of school dropouts at an early age, substance abuse amongst both youth and adults, escalating numbers of rape cases of old pensioners on the day they receive their grants (perpetrated by unemployed and out-of-school youth) and theft cases. The moral values of the community are breaking down. Most of the youth are not at school due to financial problems and high unemployment rates. The quiet life and village solidarity is gradually diminishing and the developing villages are transforming into corrupt township lifestyles.

The researcher lives here in her grandparents' *umzi*. However, she is not at home all the time as she works in Alice, 450 kilometres away. She only visits when she is on field research trips, when attending rituals for study purposes and when performing her own rituals. She has two *amaqonga* in *indlu enkulu*, and in her new rondavel that was built after it had been shown to the researcher in a dream. This is *indlu yam yokugula*<sup>13</sup> (my house for my illness). The researcher still has to perform a ritual called *umvulo wendlu* (to open the house) before she can do assessments and put her *umrawule* (pharmacy) in this house. Currently,

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<sup>13</sup> This is a house that has to have *umrawule* and where the healer is supposed to hang her regalia and consult with clients. Because the researcher works far away from home all these necessities are done in the house in Alice and the house in Cala is used to conduct church services while still preparing to build the church.

the *umrawule* is in one of the unused bedrooms. As the researcher works and lives in Alice most of the time, she also has an *umrawule* and *iqonga* there. This is in the small study room in a four-bedroom house rented from the university. The *iqonga* is improvised by using one of the shelves in the study room, where the researcher does her clan praises, consults with clients and hangs her regalia. As Tsengiwe is predominantly dominated by Christians and educated people, more than the other areas of this study, consultation with *amagqirha* is not common and people prefer *abathandazeli* (faith-healers).

Alice is a small rural town and popular because it hosts a well-known African university, the University of Fort Hare. In a village called Ntselamanzi, about 20 km closer to Alice Town, Reverend Mrwetyana, popularly known as Mandlovu, lives. She is an *umthandazeli* and one of the key participants in this study. She initially became involved in *ukuthwasa* but left within a month. Later on, she joined the St John's Apostolic Faith Mission Church under the leadership of the then Reverend, now Bishop Jikijela, where she was initiated as an *umthandazeli*. She is a leader of her own society under the leadership of Bishop Matsuso in Lesotho. She lives with her daughter Thobeka and her two grandchildren. She has a huge practice as an *umthandazeli* in Ntselamanzi and most of the students and staff at the university consult with her. Others are part of her congregation.

## **1.5 METHODOLOGY FOR THE STUDY OF UKUTHWASA**

### **1.5.1 Integrated methodology**

It is clear that this study covers a number of issues concerning *ukuthwasa*, namely 1) *ukuthwasa* as a healing vocation; 2) gender and identity issues; 3) African religious aspects; 4) the role of these aspects in spirit afflictions; and 5) traditional healing modalities. To explore all these aspects requires the use of integrated theoretical approaches and various methodologies to collect information of which the majority relate to the qualitative paradigm.

The methodology of this study has been greatly influenced by Erdtsieck's study (2003) entitled *In the Spirit of Uganga, Inspired Healing and Healership in Tanzania*. In her study she refers to the medical anthropological research of Jansen (1985) among the Bakongo healers in Zaire and the salient strategies among the Ndembu cults of affliction by Turner (1968). These studies deal with factors common to the current study because each of them pays attention to the role and experience with regard to their informants. To a certain degree, also their own experiences as researchers are taken into account.

Various methods have been used to collect, interpret and analyse the data, which comprise a critical evaluation of the researcher's personal experiences and interrelationships with participants during the fieldwork. Reflections are used so as to give a fairly accurate ethnographic presentation. Schrijvers (1991) clearly states that a researcher makes a critical evaluation of the self as an insider; a researcher and participant in the fieldwork. The integrative methodology used also reflects on how the data were collected and how the researcher immersed herself in the study as an explorative researcher as well as being an active participant in an in-depth phenomenological ethnography of *ukuthwasa* practice as practised by the *amaXhosa* in the Eastern Cape.

This allowed the researcher to incorporate various components: to keep records of events, reflecting on transcribed data, regularly go back to participants to confirm and validate statements given, add more information, and make changes where necessary. More important was the incorporation of experiences and reflections on the researcher's personal spiritual journey as an *igqirha*. The reflections from *amagqirha's* life experiences, *abakhwetha* (initiates/novices) and personal experiences revolved in a reflexivity that enabled the researcher to synthesise, explain and understand the interface amongst the spiritual, personal, social and emotional experiences of those who *thwasa*. In this way it was possible to develop theoretical insights and philosophical background knowledge about the *ukuthwasa* initiation process and its role in humankind. It soon transpired that the researcher was using the grounded approach of Glaser & Strauss (1967). More information on the grounded approach and integrated research techniques and methodologies used to collect data, record, transcribe and analyse is discussed in the Chapter 3.

### **1.5.2 Female healing identity, construction and gender roles in *ukuthwasa***

Socially and in cultural terms *ukuthwasa* also means an indigenous way of finding oneself. Africans in general view the initiation process as a ritual process to ground the person with nature and *iminyanya* (ancestors) specifically responsible for certain *ukuthwasa* gifts. It is a process of incarnation. *Umkhwetha* (initiate/novice) undergoes a process of transformation from the time she accepts the calling. It is therefore a journey of self-discovery on a spiritual plane, the results of which transpire into maturity and smooth reconciliation of the emic and etic experiences (physical, spiritual, emotional and social tensions and crises) involved in the process. Hence, such experiences are culturally viewed as growth experiences and a way of constructing not only meaningful healing identities and modalities, but also multifaceted identities. Experience in any life situation offers a person a learning opportunity of self-

insight, so that one learns a different way of thinking on how to resolve a particular situation. The initiation process impacts on female identity construction in different ways, which will be evident later.

Women *amagqirha* have a powerful role to play in *ukuthwasa*. It is a well-known fact that most African cultures are controlled by patriarchal principles, which place women in inferior and powerless positions. In addition, women are traditionally expected to be submissive to men, who are often seen as heads of the household and as such superior to women. Consequently, men are also perceived as political leaders who hold central leadership roles in the society. In *ukuthwasa*, gender role reversal is not an uncommon practice. Women cross cultural borders normally restricted to them by leading rituals, such as standing at sacred places normally not permitted to married women and in that way taking over the male positions. *Amagqirha* informed the researcher that the healing role was ascribed to females by nature since they were created as soft, humble beings instead of rough and hard males. In *ukuthwasa* the role reversals are observed from the male side too (more in Sections 3.1.1, p. 71 and 8.1.5, p.229).

## **1.6 SCOPE OF THE RESEARCH**

Next, the scope of this study and contents discussed in each chapter are outlined. The chapters address the responses and information relevant to the research questions asked. The study comprises ten chapters that offer a variety of discourses from explorative and descriptive, to analysing and reflecting on data collected. For clarity, the researcher decided to divide the study into three parts: Part 1, 2 and 3.

### **PART ONE**

This section covers the rationale and scope of the study on *ukuthwasa*. The main objective of this section is to contextualise and localise *ukuthwasa* within the Eastern Cape's historical and cultural background. The section also covers the theoretical perspectives that give pedagogical genesis on various concepts that elaborate more on the understanding of *ukuthwasa* as an experiential process, the fundamental basis of its practice including the interconnection of *ukuthwasa* with folklore. In addition, the research method of choice that is used to collect data, analyse and interpret it is described fully. There are three chapters in this section and they cover the following scope of work:

**Chapter 1:** This chapter provides the introduction of the study, definition of key terminology, the problem statement and specific questions asked the aims and objectives of the study and justification for the study. In addition, brief information is provided on the location of the research sites, biographic information of the key four participants including mine and the method of research used.

**Chapter 2:** This chapter offers data on the historical and socio-cultural contextualisation of *ukuthwasa* in the Eastern Cape. It also explains the influences and impact of the socio-economic and political situation of the Eastern Cape on *ukuthwasa*.

**Chapter 3:** This chapter consists of two sections: Section A and Section B. Section A gives an integrative theoretical background context to the study of *ukuthwasa*. It explains the connection of ancestors and humankind, how *ukuthwasa* could be understood as well as the role and value of dreams in *ukuthwasa*. Section B provides an integrative methodological approach relevant to the questions asked. It also locates the sites where the study was conducted, participants' chosen and how data were collected, analysed and interpreted. The chapter also discusses the soundness of the data collected.

## PART TWO

This section provides a broader perspective to the descriptive context of *ukuthwasa* as an experiential process by means of giving an outline on the life histories of the four *amagqirha* participants and my spiritual journey. The life histories create a deeper insight on understanding the spiritual journey of *ukuthwasa* as it links the previous theoretical information on interconnections between *ukuthwasa*, ancestors and the complex world of supernatural powers, ritual and symbolism. In addition, the section critically discusses the phenomenological experiences of the practitioners and links them to how practitioners in turn construe their self image in the process. The world of the *amagqirha* practice and its dynamics is explained. There are four chapters.

**Chapter 4:** The chapter portrays the life stories of the key participants including that of the researcher. The chapter provides a backdrop for the reflections on *ukuthwasa* from the preface to the last chapter of this document. In addition, the researcher's experiences on the journey of *ukuthwasa* provide a point of reference throughout the study. The phenomenological experiences of *amagqirha* are central to understanding the complex nature of *ukuthwasa* initiation process and complex nature of an *igqirha* life in general.

**Chapter 5:** The chapter critically plunges into the main theme of this thesis. It provides a full description of *ukuthwasa* training process as it unfolds up to the internship stage. The full process of how the aspiring and initiated *amagqirha* perceive their calling is described. The sequence of the different stages of the training is described. The description includes rituals involved at various stages as well as their contribution in constructing the understanding of 'self' and healing identities by *amagqirha*.

**Chapter 6:** The chapter provides reflections on the divination process and briefly on faith-healing to show their relationship. The discussion is enhanced by use of different cases to explain different strategies used by *amagqirha* in their divination system. In addition, a standard daily schedule for *igqirha* is explained. The divination process is described in the context of case studies within consultation and treatment phases. The element of *umbilini* (intuition) as the key skill used by *amaXhosa amagqirha* in their divination is also critically reviewed.

**Chapter 7:** The chapter reflects the central role of songs in the form of *intlombe* (séance) in *ukuthwasa* divination process. The chapter focuses on the structure and roles of *abakhwetha* and reasons why *intlombe* is central to *amaXhosa ukuthwasa* ritual. In addition, a second popular musical ritual (called *ukuxhoma iqonga*) in the life cycle of *amagqirha* is described.

### PART THREE

In this section the focus is on the main key themes that are identified in the study as a response to the main research question – how do Xhosa-speaking (aspiring/novice healers or trained) healers experience and perceive *ukuthwasa* in the construction of their spiritual/healing identities. In addition, the section provides a critical discussion, general conclusions, limitations and recommendations as well as final remarks. The section consists of three chapters.

**Chapter 8:** This is a discussion chapter and provides a critical engagement with all themes identified from participants' responses to the research questions asked. The dialogue is structured according to the main aspects that the study sought to explore. The research findings and arguments are based on the soundness, value and contribution of integrated methodologies and approaches used to describe the context of *ukuthwasa*. The grounded method was used to collect, transcribe, analyse and interpret data, general conclusions identified, the productiveness and usefulness of data collected. Also, the chapter includes a note on limitations in methodology that were identified and how they were managed.

**Chapter 9:** This chapter provides general conclusions on the study as a whole and explains limitations to the study.

**Chapter 10:** In this chapter future research topics and strategies that could be used to address challenges identified by this study are recommended. In addition, a concluding comment is added.

Lastly, certain ritual dances such as *intlombe* are available on DVD. Access to some of these is highly reserved and can be retrieved from the main researcher by written request.

## **CHAPTER 2 THE HISTORICAL AND SOCIO-CULTURAL CONTEXTUALISATION OF *UKUTHWASA***

This chapter describes the historical and socio-cultural contextualisation of *ukuthwasa* in the Eastern Cape Province. Firstly, the historical outline on the general history of the Eastern Cape is covered. Following the historical outline, the broader history is divided into various periods: pre-colonial and colonial; the apartheid years, including the Bantu Homeland System; and finally the post-1994 era. In all the historical phases the focus is on how the traditional *amaXhosa* lifestyles were either enhanced or disintegrated. In addition, the *amaXhosa* beliefs in ancestors and their image of God are explained. Traditional lifestyles and the role played by Christianity in influencing the *amaXhosa* divination system and tensions between the two systems are reviewed. The independence era [post-1994 era] is discussed, with more focus on the future of the *amagqirha* and aims to legitimise traditional healing. Various cross-cutting issues during the historical phases are discussed and are indicated as such when examined under each period, in order to avoid repeating the debate about them. Secondly, the socio-economic and cultural perspective on the *amaXhosa* lifestyles and specific rituals related to *ukuthwasa* are described.

### **2.1 HISTORY OF THE EASTERN CAPE**

The history of the Eastern Cape is similar to the history of the indigenous peoples of South Africa in that it is restricted by factors such as:

- the history has always been transmitted orally;
- the dearth of written histories or limited written histories by people from the South African groups particularly the early history;
- the heterogeneous cultural groups and perhaps rigid stratification of the South African society, which leads to reflections of social inequality and act as a powerful instrument for the maintenance of inequality; and
- the bias deficiencies of writing in too narrow terms, as most writings seem to be predominantly focused on whites and politics, especially highlighting the history of the achievements of the white people (Wilson & Thompson, 1969); and I support Wilson & Thompson in that recorded events are mostly about



white successes and how inferior the indigenous people were and not more about the historical aspects reflecting the lifestyles and values of the indigenous people.

There is evidence that supports Wilson & Thompson (1969) and Giliomee & Mbenga's (2007) criticism of statements made to indicate that South African history started with the arrival of Portuguese Settlers at the Cape in 1497. The evidence includes the rich archaeological data that prove the existence of the *amaXhosa* in the Eastern Cape before the seventh century, which has previously been largely ignored (Magubane, 2000; Mabona, 2004 and Giliomee & Mbenga, 2007), while the history of their origins from the East remains only an assumption. In addition, little is written about the indigenous people's lifestyle and their healing practices in particular. Thus, the above factors have also contributed to the marginalisation of the relevant history of *amaXhosa* in the Eastern Cape, to the extent that what has been written tends to be fragmented. It does not provide events systematically and epistemic evidence of the life of the *amaXhosa* (Wilson & Thompson, 1969 and Mabona, 2004).

The Eastern Cape (see Figure 2-1) is one of the nine provinces of South Africa. It is situated at the southern tip of Africa and close to the warm Benguella Current of the Indian Ocean. The Eastern Cape coast stretches along the warm Benguella Current of the Indian Ocean and the Province extends to the borders of the Drakensberg Mountains. It encompasses two Karoos (Little and Great) and a beautiful Garden Route (N2) that stretches from Port Elizabeth to the Western Cape, linking the Eastern Cape to the Western Cape. The province has three important and progressively developing ports, East London, Port Elizabeth and Ngqura. They connect the province with the rest of the world. It is recognised as a historically poverty stricken province. It also includes the former Bantustans: Ciskei and Transkei, the political creations of colonisation and eventually the apartheid system. In addition, the Eastern Cape is confronted by the challenge of high unemployment rates, which are common throughout South Africa (Giliomee & Mbenga, 2007).



**Figure 2-1 Map of the Eastern Cape**

According to Wilson & Thompson (1969 & 1971), the *amaXhosa* form the largest population group in the Eastern Cape Province. The province has educational institutions of higher learning with a historical legacy, for example, the University of Fort Hare that is used as the cradle for the ANC records. However, literacy levels of females seem to be lower than that of men and more especially at post-doctoral level (Census Reports of 2001 – see **Table 2-1**). The number of people with no schooling is also high.

Historical records (Giliomee & Mbenga, 2007; Wilson & Thompson, 1969 & 1971 and Hunter, 1936) reveal that the Eastern Cape Province was the province most affected by colonial power and missionary influx; hence its population is highly Christianised (see – **Table 2-2**). The table shows various churches that are of the Zionist, charismatic and spiritual element which indicate a major move from the mainline or orthodox churches which are more administrative than spiritual in their doctrines, hence *abathandazeli* (faith healers) refers to mainline churches as *icawe zomthetho* (churches mainly dominated by law enforcement and administration principles) and refer to Zionist, Episcopal and all other Churches that have healing aspects as *icawe zomoya* (churches mainly dominated by healing and spiritual doctrines rather than laws and administration). Also, the colonial and apartheid era left it with a number of industrial and technological infrastructures such as clinics, hospitals, schools

and correctional service centres. The table also indicates that women are more spiritual than men.

Oral tradition informs us that *amaXhosa* are a wide-spread ethnic Nguni group roughly composed of Thembu, Ngqika, Ndlambe, Gcaleka, Mpondomise, Bhaca, Hlubi, Mpondo, Mfengu; Bomvana, Gqunukhwebe and other clanship groups. The composition is defined in various ways and it is too difficult to develop a legally or officially constituted list. The ethnic groupings are said to be a result of chieftdom clusters (see **Figure 2-2**).

**Table 2-1 Eastern Cape education levels by gender (from Census 2001)**

	Male	Female	Total
No schooling	441270	601347	1042617
Grade 1/Sub A (completed or in process)	238415	211679	450094
Grade 2/Sub B	153496	134388	287884
Grade 3/Standard 1	179795	161102	340897
Grade 4/Standard 2	186158	178626	364784
Grade 5/Standard 3	169196	179326	348522
Grade 6/Standard 4	170949	202802	373751
Grade 7/Standard 5	187210	238575	425786
Grade 8/Standard 6/Form 1	190853	257304	448157
Grade 9/Standard 7/Form 2	148349	198809	347158
Grade 10/Standard 8/Form 3/NTC I	157947	209288	367235
Grade 11/Standard 9/Form 4/NTC II	106455	150482	256937
Grade 12/Standard 10/Form 5/Matric/NTC III	222103	277844	499947
Certificate with less than Grade 12	3618	5186	8804
Diploma with less than Grade 12	2945	5398	8343
Certificate with Grade 12	16326	22207	38533
Diploma with Grade 12	40166	68935	109100
Bachelor's degree	13937	15613	29550
Bachelor's degree and diploma	5891	8136	14027
Honour's degree	4204	4236	8440
Higher degree (Master's or Doctorate)	5100	2984	8084
Not applicable	331113	326997	658111
<b>Total</b>	<b>2975495</b>	<b>3461264</b>	<b>6436758</b>

Komanisi *iphehlo* (sample group) originates from the Bhaca group and currently involves trainees from the Mpondomise and Xhosa groups. As much as a claim can be made that the *amaXhosa* present a general picture of cultural uniformity (Mayer & Mayer, 1974, as cited by Hirst, 2000:142), there are numerous variations within each of these groups and across all of them (Giliomee & Mbenga, 2007). Variations in *amaXhosa* culture need to be carefully identified, acknowledged and respected because if not, cultural variations may not be well understood by those from other cultures. Mabona's (2004:165-222) view is fully supported that it is of concern that linguistic differences, not just in dialect, but also in social construction of meaning can distort intergroup communications. For example, the terminology used for a style of dressing as well as performed rituals is different within each group and across groups. The terminological differences for rituals signal different meanings and interpretation. Thus, there is a need to understand and respect cultural plurality in the area.

**Table 2-2 Religious affiliations in the Eastern Cape according to gender (from Census 2001)**

	Fort Beaufort		Tsolo		Maclear		Eastern Cape	
	Male	Female	Male	Female	Male	Female	Male	Female
Dutch Reformed Church	725	804	640	818	713	849	119945	135345
Zionist Christian churches	591	667	2746	3686	1286	1819	203224	267536
Catholic churches	547	591	798	909	428	455	155184	182610
Methodist churches	1616	2020	6164	7470	1137	1361	503210	611230
Pentecostal/Charismatic churches	479	653	2156	2981	664	853	197453	254470
Anglican churches	178	194	12852	15048	492	599	173865	203894
Apostolic Faith Mission of SA	53	31	121	178	22	49	11515	14147
Lutheran churches	12	12	37	48	32	18	29209	33451
Presbyterian churches	1295	1433	5326	6305	199	269	139532	168506
Bandla Lama Nazaretha	24	9	258	314	15	41	8520	11173
Baptist churches	128	141	301	338	79	143	43080	52735
Congregational churches	1384	1744	145	198	9	27	66848	78003
Orthodox churches	15	3	6	12	-	3	5144	5937
Other Apostolic churches	1049	1174	6799	8794	1296	1711	338842	423554
Other Zionist churches	511	640	2405	3083	420	581	135749	178365
Ethiopian-type churches	818	1002	477	612	63	68	87395	105444

Other Reformed churches	91	100	91	125	15	12	2479	2851
Other African Independent Churches	104	141	432	548	52	79	35365	44641
Other Christian churches	1226	1444	2061	2592	516	698	263916	309479
African Traditional Belief	-	-	60	43	-	-	4737	4425
Judaism	3	-	-	3	-	6	2766	3186
Hinduism	6	3	28	24	-	-	4258	4774
Other faiths	53	65	264	365	112	125	15001	18500
Islam	9	3	54	24	9	18	10149	9546

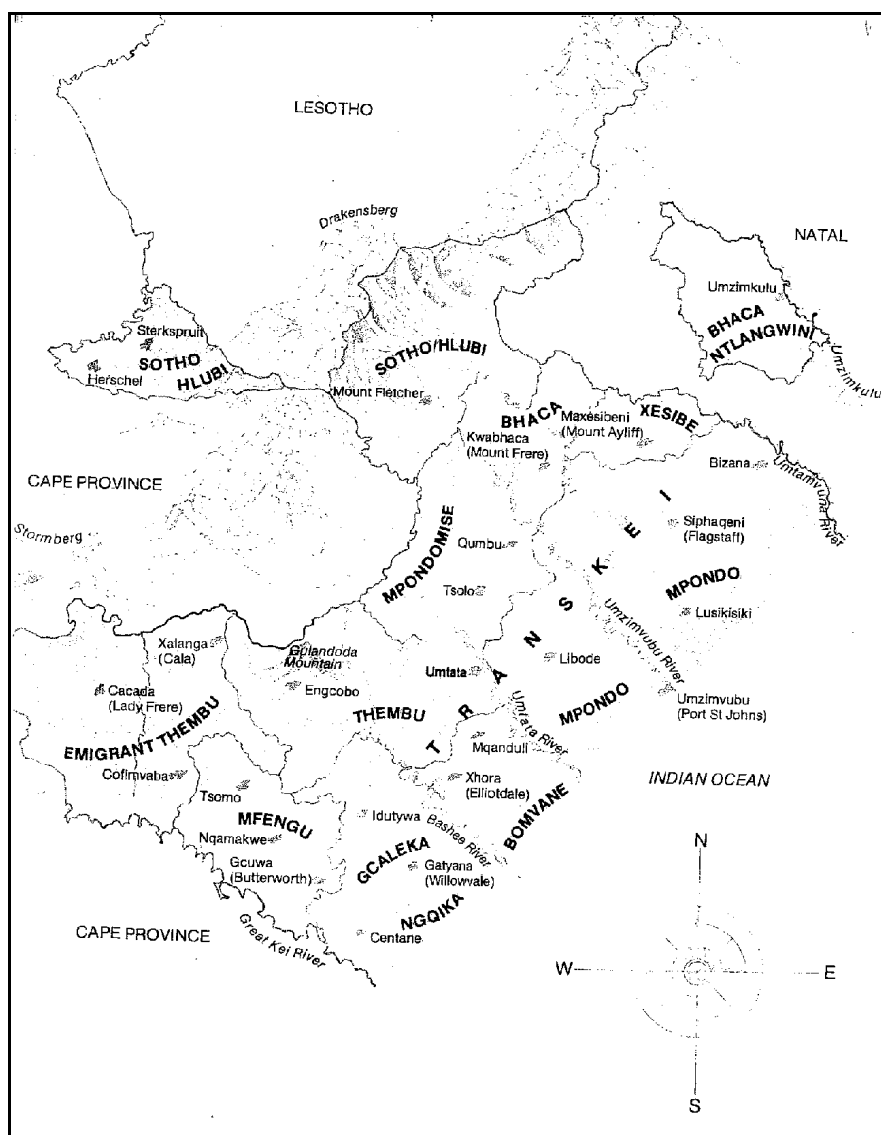


Figure 2-2 Distribution of *amaXhosa* cultural clusters in the Eastern Cape

The three areas covered by this study are Tsengiwe Village in Cala, the location in Ugie, Embeni wabathwa, famously known as Tyhini Bantu Village and Mbinja Village in Tsolo (see Figure 2.1). All are now located within the Republic of South Africa. Previously, Cala and Tsolo were victims of the Homeland Policy and were located in the old Transkei. The estimated population of these localities is approximately 35 000 in Tsengiwe Village; 18 000 at Embeni wabathwa; 30 000 in Mbinja and 50 000 in Ugie Township. Each of these places has a variety of churches ranging from mainline churches, Zionist, Independent and Pentecostal. The Methodist Church appears to be dominant. The number of churches in each village would indicate that most of the population are Christians. In Addition the table above shows a number of independent and pentecostal churches which indicates the charismatic character of most churches in the Eastern Cape. It is the charismatic churches that lure most *amagqirha* and *abathandazeli*. In addition. Women seem to be more willing to attend Church than men.

The developmental features in these three areas are interesting. One of the villages at Tsolo where the study was conducted has a very limited infrastructure. In 1998 when the researcher first visited Matogu to confirm the status of my illness, the traditionalist and backwardness of the Tyhini Bantu Village and its inhabitants shocked me. I observed a similar situation when I visited Mbinja in 2005. Neither of the villages had electricity (as is still the case) and the mode of lighting is candles or paraffin lamps. The roads are narrow, in a poor state of maintenance and in need of upgrading. The road to Mbinja is in a bad condition. It follows a route through a high and steep mountain. The gravel roads have potholes and dongas. Most of the houses are rondavels with thatched roofs, with an occasional attempt to build modern houses. The language spoken is the original Xhosa language, which is no longer used in villages dominated by educated persons and Christians such as in Tsengiwe Location. For example, Matogu used to call almost all the trainees *mnqundu uphatshile*, meaning 'blushed asshole'. I was shocked upon hearing that because it was the first time I heard a person of that age (104) talking like that. Surprisingly, none of the other *abakhwetha* found anything wrong with that. Very soon, their first-grade Xhosa language became very familiar.<sup>14</sup> Later on, it transpired that the terminology Matogu used was just a way of teasing her *abakhwetha* (trainees) although it still had the same original meaning. The variations in the cultural groups are consistent with the geographical and political influences that have affected them, as discussed below.

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<sup>14</sup> This is the term used when a person use original Xhosa words which, due to influences of education and Christianity, are seen as derogatory words.

### 2.1.1 The pre-colonial era (before the 17<sup>th</sup> century)

During this era, the specific focus was on the Southern Nguni style of life before encountering the influence of the Eurocentric lifestyle. Irrespective of the incomplete or unsystematic history, there is historical evidence (Alberti, 1968; Wilson & Thompson, 1969; Hunter, 1979; Magubane, 2000; Mabona, 2004 and Giliomee & Mbenga, 2007) suggesting that the lifestyle of the *amaXhosa* before colonisation was that of a rich and wealthy nation. For example, the observations made by Alberti (1968) on *amaXhosa* customs reveals that the *amaXhosa* were a healthy tribe that practised pastoral farming, hunting, trading and agricultural farming.

A picture emerges of a diverse cultural group that was mostly maintained and controlled by their own customary and societal belief systems. Control at the time resided with the chiefs, who had a superior role to protect the welfare of their people. The beliefs of *amaXhosa* focused on the protection and guidance of ancestors, especially those who believed in the traditional religion. It is incorrect to assume that all *amaXhosa* automatically believe in ancestors (Preface and Chapter 4).

The settlement areas for *amaXhosa* consisted of thatched roofs and were of a temporary nature as people often moved around in search of better grazing for their cattle – the source of their greatest pride. The man was designated as the head of each family and a key figure to safeguard, maintain and support the entire family (Sinxo, 1973; Soga, 1989 and Mkonto, 1979). The family structure was that of the extended family, which has since been greatly affected by continuous political structural changes and Western, Christian values. Currently, the family takes a variety of forms varying from a nuclear family (*ukuzimela* – to be independent); cohabitation (*ukuhlalisana*); and single parenthood, where partners simply engage in a contract that sets the code of conduct for their relationships. The chief occupied a position above the head of a family and in between the chief and the head of the family was *igqirha* who had a multi-faceted role to play both as a medium between the chief and the ancestors and, at times, between the families and their ancestors, as well as to oversee and protect the soldiers for the chief. *Igqirha* at that stage was well respected, to the extent of being called *umhlekaazi* (chief). This term indicated the high-ranking position accorded to a clairvoyant who had the ability to see beyond what the normal eye could see to tell, predict and suggest solutions to protect the chief and his people in all socio-cultural aspects (Soga, 1931).

Thus, *igqirha* was an independent asset to the chief. The chiefs also used *amagqirha* to kill and repossess property from their enemies through a well-known (at the time) witch-smelling art that readily earned *amagqirha* the derogatory name of witchdoctor. Many people still use this term to address *amagqirha*, probably because there are still those *amagqirha* who have not forsaken such practices, irrespective of the statutory sanctions in place against it. The community practice was based on chieftainship administration, even with regard to the allocation of land and resources. No taxes or revenues were paid and a social system was practised. Chiefs controlled the distribution of land with minimum payment (by means of cattle/sheep) for a titleholder of that piece of land and no further payment was expected (Giliomee & Mbenga, 2007).

*AmaXhosa* believe that all of nature and its abundant resources, including misfortunes, successes and all the experiences of their daily lives are brought about through the mercy of the Creator, uMvelinqaba, who resides above the clouds and whose powers cannot be compared to any person on earth (more on this in the next phase). Many authors confirm this belief (Soga, 1931; Hunter, 1936; Hodgson, 1982; Mbiti, 2000; Mabona, 2004 and Giliomee & Mbenga, 2007), even if that image of God does not quite correlate with Western, Christian doctrines. To them, Mvelinqaba do not have any other demands (such as repentance from sins) other than allowing people to be free and enjoy their lives. The only time that people are punished is when someone has done something bad.

As *amaXhosa* were originally pastoralists and hunters, their clothes were made from skins of animals (wild and domestic). It is important to mention that cleanliness, exercise and the use of decorative clays on their bodies were important attributes of their daily lives. In addition, singing, dancing and walking long distances on foot (in any case, transport opportunities were negligible) formed part of their good health habits. Hence, Alberti, on meeting them, could not help to observe that “the build of their bodies was healthy and strong with an evidence of happy blend of perfection. One does not find kaffirs who are born deformed; the way they manage their children is natural and unlikely to lead to deformity” (Alberti, 1968:27). These observations have been confirmed many times by traditional stories within their culture that *amaXhosa* were frightened of a deformed baby and considered it a curse, punishment, or witchcraft (Matogu, 2003 and Zanemvula, 2004). However, this observation is in contrast to the variety of deformities, which are common in labour wards today. As a result, such abnormalities are often attributed to the influences of Western lifestyles and due to the use of contraception in particular. In essence, in most rural areas young girls and women are not encouraged to use them, hence the high rate of teenage pregnancy.



*AmaXhosa* were very connected to nature and sleeping on the floor was normal. The habit still continues today. *Amagqirha* and in particular *abakhwetha* (novices/neophytes/ trainees), have to sleep on grass mats and be in contact with the floor to encourage the clear dreaming process. The floor is believed to ensure easier contact with *iminyanya* than the comfort of a mattress. Contact with the floor is contact with Mother Earth, the source of life, *umbilini* (intuition) and abundance in health resources.

Women were the source of healthy habits. They liked to wash and cover their faces and bodies with *imbola* (red ochre) for cosmetic purposes, while men would use *ifutha* (white clay) only during the circumcision period to indicate their transitional stage from boyhood to manhood. The same clay was also a popular cream for *amagqirha* and their *abakhwetha* to indicate their own transitional period to a healing identity. Red ochre is derived from a soft type of dark-red stone and white clay from a soft, white rock. Occasionally, pleasant-smelling herbs were added. Red was the favoured colour used for dyeing their cloth, the distinctive attire that often differentiated the educated from the uneducated. As the symbolic dyeing continued, with the influence of education and Christianity later on, some of *amaXhosa*, who were converts to the Eurocentric style, decided to wash the red ochre from their bodies and only non-converts remained with the old tradition. As a result, in later stages of transformation they were called *amaqaba* (denoting both smearing of the ochre and being uneducated)<sup>15</sup> and the converts were called *izifundiswa* or *amagqoboka*.<sup>16</sup> The latter term means that the minds of the converts were opened to absorbing and comprehending new knowledge.

*AmaXhosa* were also skilled in handicraft: basket making, bead making and brewing sorghum. According to Hirst (2000), beads were introduced by whites. *Amagqirha* could not tell what they used before. This craft engendered pride in their dress for different occasions, including the dress attire of both *abakhwetha* and *amagqirha*. Part of their handicraft was the creation of a variety of necklaces from beads, especially those who were *amagqirha*. Mats and baskets were handcrafted from special grasses and reeds (Soga, 1931). Irrespective of modern trends, the use of grass materials such as *izithebe* (table mats from grass) and *amakhuko* (floor mats from grass) are still used in activities on the journey towards *ukuthwasa*.

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<sup>15</sup> Boniswa (2004), one of the participants, informed the researcher that they were called *amaqaba* because *izifundiswa* (the educated group) felt that the ochre smeared on their bodies was the result of them (*amaqaba*) not seeing the light. That means the ochre avoided the penetration of the enlightenment brought by colonial rule. *Amaqaba* remained to stay in the dark ages.

<sup>16</sup> The term is also used when one bores a hole in something to encourage penetration.

Adult women and men smoked tobacco, whilst small boys and girls were not allowed to smoke. If they did, it would be not in front of the elders. Boundaries and limits were strictly demarcated. Both old and young (Alberti, 1968 and Soga, 1931) respected the disciplinary codes. Women gave priority to the raising and tending of both their children and husbands, in good health and in illness. According to Alberti (1968:42), severe illnesses were never observed except for sporadic fevers such as an epidemic of smallpox, which killed many. This epidemic was believed to have been spread by the crew of a stranded vessel. Madness and craziness appeared to be completely unknown. Women who used roots and herbs undertook the healing of wounds. If any internal illness occurred, it was treated by magic and charms or bloodletting. The average life span was estimated to be between fifty and sixty for both men and women.

As much as history reveals that women were highly adored and respected by their male partners, in contrast, Soga (1989) reveals that what is today termed as gender-based violence, was prevalent. For example, he cites an example of how chiefs would attend or send a representative to attend the *intonjane* (female initiation) and how they would select certain young females to have sex with chiefs. Even though there was a price to pay if the woman was impregnated, the exercise was practised with the full knowledge of the community at large and nothing was done to stop the practice.

Due to the practice of the patriarchal system, men were predominantly seen as leaders, while women were subordinates and as such were not highly and publicly involved in decision-making plans, especially those relating to customary activities. For example, payment of *lobola* would not be negotiated with women even though it concerned their daughters. *AmaXhosa* tradition informs us that at this stage (as is still the practice) unmarried women would have a fair chance to participate in decision-making plans, whereas married women did not. Married women were treated in the same way as a person who is a foreigner to the customs of *umzi* (homestead). This biased identity is illustrated by the fact that a child borne by a woman cannot bear the identity of a woman's family genealogy. A child is given the identity of the biological father. Yet, an illegitimate child could bear the identity of the mother's maternal (instead of paternal) family genealogy, leading to doubly misconstrued identities.<sup>17</sup> That is so because illegitimacy was a disgrace and a woman was always blamed but never the man who impregnated her.

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<sup>17</sup> A child was taken as an off-spring of a grandmother – denying the biological mother any rights to the child. Ultimately he would take the grandparent's family identity, denying a child the biological father's identity, creating identity crisis issues later on in life.

Gender issues also impacted negatively on the successions and heritage plans where women could not inherit their husband's property if there was a male first-born or males in the extended family. Although these cultural activities impacted negatively on women, women accepted their status as normal until recently, when women began to reclaim their human rights and social identity. However, irrespective of the gender differences of the time, men and women were involved in *ukuthwasa* and both shared the same names: witchdoctors and *umhlekezisi/isanusi* (chief/wise or experienced healer). There was no gender discrimination but there are stories of harsh treatment by the male trainers of their female trainees (Soga, 1931; Matogu, 2004 and Zanemvula, 2005).

*AmaXhosa* were not educated in Western terms; however, socialisation formed a major part of the informal education (in Western terms). They used fingers to count – bending them to count off – and ten was indicated by raising both hands. To count their cattle, they used their observational skills; the appearance and disappearance of each animal were immediately observed. They were also unable to indicate their age. They calculated their age by observing or associating with an incident during which a baby was born. Chronology was defined by events, especially those that happened recently. Time was measured by the sun's position and in relation to the shadow of the body. For instance, from the childhood experiences that the researcher recalls, midday was indicated either by the cry of a cock or the shortness of one's shadow. That indicated twelve noon. Once a person's shadow fell in front of that person, it indicated the afternoon.

The above description provides a sound background of the lifestyles and value systems of *amaXhosa*, for example: respect for cattle; use of skins; use of red ochre; cosmology of illness; role of music and methods the *amaXhosa* used to maintain bodily fitness and general health; the use of *umkhonto* (javelin) and *iinduku* (knobkerries); treatment of minor illnesses and the role of women in healing illnesses. In other words, the *amaXhosa* were already enlightened in their own cultural ways and had their ways of transmitting knowledge from one generation to another through *iintsomi* (fairy tales) and stories that would be narrated around *iziko* (fireplace) (Mabona, 2004 and Soga, 1931).

*Iziko*, a round place in the middle of the house that could be related to Jung's (1990) mandala circle, is a sacred place that has always been accepted as the family gathering place at the end of the day, when the successes, frustrations and challenges are shared by all family members. It is the time to console, support and at times to confront unresolved problems or cherish successes; however, all these are today disintegrated by the introduction of television, as people rather engage in watching television. The house was

always viewed as a place where *iminyanya* (ancestors) dwelled. *Iziko* was also a place where dancing in a circle was performed. The dance was attributed to both ancestors and audience. Dancing around *iziko* was often performed during certain ritual ceremonies called *intlombe* (séance) or when *umsebenzi wekhaya/womzi* (cleansing ritual for the homestead) was performed (Hunter, 1979 and Soga, 1931). In that way *iziko* had always been a healing circle for the family. Consequently, dance and song form a part of the spiritual aspect of the daily activities of African people (Chapter 8 and Mbiti, 2000).

The house was divided into a left side for men and a right side for women, meant to show *intlomipho* (respect) to *iminyanya* (ancestors) by married women who were not allowed to walk and sit on the left side of the house, with children sitting everywhere. This custom still applies in other family homes, no matter how modern they have become. Within those families who practise *amasiko* (customs), whenever rituals are performed, they begin in *indlu enkulu* (family house/big house). From the house, the procession proceeds to *inkundla* (an open space in front of the kraal). *Indlu enkulu* is believed to host female and male *iminyanya* and *inkundla* predominantly male *iminyanya*. *Inkundla* is critically important because that is where the graduation ceremony of *igqirha* is held and where she is positioned, acknowledged, and accepted as a legitimate healer by her trainer, family and community.

This stage cannot be completed without mentioning the fact that, as history reveals (Giliomee & Mbenga, 2007 and Magubane, 2000), *amaXhosa* were not the only inhabitants of the Eastern Cape at the time. Their interrelationships with the Khoi-San led to various changes and adaptations in their lifestyles. For example, *amagqirha* informed the researcher that to smoke tobacco and dagga in particular, was a habit that was learnt from the Khoi-San. The intermarriages between the groups encouraged a remarkable and fundamental impact both in the training and dressing code of *abakhwetha* and *amagqirha* in the Komanisi *iphehlo* (see Chapter 1, 5 and 9).

Yet, observation and experience has shown that for many *amaXhosa amagqirha*, the fact that there is a strong possibility that enculturation may take place through cultural intermarriages was to them a myth or a truth found hard to believe. For example, *umndawu* is closely associated with the Khoi-San clanships and many *amaXhosa amagqirha* tend to reject the existence of *umndawu* and associate it with *ukuthwala* (see Chapter 9). Yet they have incorporated many cultural activities from the Khoi-San such as eating the blood of an animal, having animal totems and certain symbols used by them and the inclusion of herbal medicinal products. The origins of Komanisi *iphehlo* claims its cultural and healing roots from the womb of the woman from the Bhaca cultural group and is believed to be from a Khoi-

San's family genealogy. Boniswa (2007) supports the historical findings that the first *igqirha* woman was from the Khoi-San clan (Giliomee & Mbenga, 2007). This period shows how *amaXhosa's* culture and *ukuthwasa* as a process have evolved throughout the years.

### 2.1.2 The colonial era (the 17<sup>th</sup> to the 20<sup>th</sup> century)

Many authors have written widely on the history of the South –Nguni (*amaXhosa*) people during this period. To mention a few: Wilson & Thompson (1969)<sup>18</sup> provide a detailed and well-documented history of *amaXhosa* in the Eastern Cape up to 1960; Peires (2003) provides a well-documented and critical discussion on the Cattle-Killing Event and its disastrous results for *amaXhosa*; Walker (1990) writes about women and gender oppression in South Africa and Hunter (1979) gives a well-documented account on Nguni (Mpondo) customs and their transformation due to their contact with Europeans; frontier wars and epidemic diseases that killed millions of people; the Boer Wars and other events that had confronted *amaXhosa* (Peires, 2003; Pauw, 1975a and Giliomee & Mbenga, 2007). In addition, Khabela (1996:5) in his book *The Struggles of the Gods* summarises the impact of certain evidence as follows:

*The wars of conquest against the Xhosa form an ambiguous nucleus of colonial rule combined with missionary enterprise. The systematic conquest and subjugation of amaXhosa took three significant stages. The first stage climaxed in the war of Hintsa. During this time, the amaXhosa were driven beyond the Keiskamma River. The second stage is climaxed by the war of Mlanjeni, a major effort to seize more of the land of amaXhosa. AmaXhosa were expelled from the frontier and restricted to segregated locations. The third stage was the fall of the Xhosa nation, a dramatic event that led amaXhosa to make a drastically religious protest against their ancestors by embarking on widespread cattle killing in the wake of the Nonqause Prophecy in 1857.*

All these struggles impacted negatively on the lifestyles of the *amaXhosa*. For example, the impact of deaths alone led to the loss of rich information and wisdom to carry over to new generations, the missing preserved wisdom to enrich the culture indicating the weakening of the independent and powerful structure of the chieftains of *amagqirha*. The incident of Nongqause was viewed by other *amaXhosa* as a political coup led by Sir George Grey, the

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<sup>18</sup> See Wilson & Thompson (1969 & 1971), Volume I & II.

British Governor at the time (as taught by our class teacher, Sirurumbana, in Standard 3 (Grade 5 in 1965), to overthrow the powerful solidarity structure of the strong Xhosa nation (Peires, 2003). According to our class teacher, Nongqause was promised money and beautiful presents to spread the story of the faked dream. It is possible that Nongqause might have dreamt but the mistake came in with the interpretation of the dream. The dream does reveal the possible changes that were to take place. For instance, ancestors could have shown Nongqause the modern, Christian and technological structural and political as well as infrastructural changes that were to take place. For those changes to take place the current practices at that stage had to change and that meant the 'dying' of old habits to allow the new possibilities. The lesson in this incident is that to interpret and understand dreams is a difficult process and need a clear mind, which Nongqause and many *amaXhosa* at that time could not have had because of the political tensions. The political situation could have muddled their thinking as the white man was an enemy.

Without delving deeper into this *intsinda abadala* (difficult problem beyond elders' wisdom) the researcher's experience in *ukuthwasa* taught her that dream interpretation is a difficult process and needs careful measured speculations and comprehension of the knowledge at hand. The issue of the possibility for misinterpretations is also raised by some authors in the new history book (Giliomee & Mbenga, 2007:176), which supports the view that the prophecy could have predicted the victory of superstition and the collapse of the traditional beliefs as well as the Christian belief of changing old times to new through repentance and rebirth.

However, due to continued political instability, tensions from the colonial irruptions and the Boers and Settlers continued to increase the emotional and social instability amongst all the inhabitants of the Eastern Cape during that period. In addition, new legislation was promulgated and enacted to ensure that white supremacy dominated not only in the Eastern Cape but throughout South Africa. For example, the Native Land Act (1913) that set aside 10,5 million morgen of land (7% of the country's land area) for Africans and prohibiting purchases and share cropping in the rest of the land; and the Native Urban Areas Act (1923), which devolved the function of implementing pass laws and administering African townships onto white municipalities, with property rights not allowed for Africans in the 'locations' (Giliomee & Mbenga, 2007:184). This led *amaXhosa* to be viewed as foreigners in their own grassland. The results of that led to the downfall that not only cost them their high social ranking but also distorted their cultural identity in such a devastating manner that some *amaXhosa* still struggle to reclaim it even today (Comaroff & Comaroff, 1990 & 1991).

Reflections on the colonial stage took away the independent status of *amaXhosa* and degraded them to the inferior status of being labourers on farms and having to abandon their homes to travel to cities in search of jobs (Giliomee & Mbenga, 2007). *AmaXhosa* socio-cultural lifestyles were grossly affected; from their personal identities and national identities to the state of socio-cultural disintegration. For example, the core centre of *amaXhosa* solidarity, *umzi* (homestead) disintegrated because of Christian values that forbade polygamous marriages and promoted nuclear marriages over and above extended families (Walker, 1990). Women lost their identities as a result of becoming nannies for white women, thus reverting to an additional inferior and subordinated status to that of being subservient to their husbands. The destruction of the social structure led to less support amongst the families and created a Eurocentric style of an individualistic approach versus the collective support role the Africans had adopted long ago.

The fall of the traditional leadership and implications of various Acts and Laws such as the 'divide-and-rule' principle led to the Bantustan and/or Homeland System after World War II in the 1950s, causing more tension and an unstable emotional environment for *amaXhosa* at that time (Giliomee & Mbenga, 2007:308-437). The situation eroded solidarity amongst *amaXhosa* to the lowest levels that even today one can still observe mistrust amongst *amaXhosa* themselves. Amamfengu and Khoi-San were ultimately viewed as *iimpimpi* (sell-outs) because of their support for the Settlers. As historians recorded, not all *amaXhosa* supported the prophecy of Nongqause since the prophecy broke the strong solidarity of the collective *amaXhosa* (Giliomee & Mbenga, 2007:177). The interrelationships amongst the cultural groups became tenser and widened the gap between them to the extent that more distinctions were made between *amaqaba* and educated as well as clanship classes (Hunter, 1936; Soga, 1931 and Dwane, 1998).

As much as *amaXhosa* were exposed to endless struggles, they did their best to maintain the momentum to continue to devise strategies to reclaim their land and lost dignity. One of the tools that helped them was to adapt their traditional religious beliefs and to try to adopt Western lifestyles and to integrate the two. This is evident from various attempts, starting from the prophet Nxele's radical strategies to reject religious strategies to tame *amaXhosa*, to the conformists' strategies of others, for example, such as those of Ntsikana, Nontetha and Mjijima, who tried their best to diffuse Western religious belief systems with their own cultural values (see below, Hammond-Tooke, 1989 and Pauw, 1975b). Later on strategies to refute the enforcement of Western values over and above those of the indigenous people in South Africa were intensified through political circles. That became an intensive strategy that provided many opportunities, ultimately leading to social relief strategies that promoted the

founding of various intensive political organisations such as the African National Congress, Black Consciousness Movement and others to reclaim the African identity status, voting rights and freedom of expression by all citizens of South Africa (Giliomee & Mabenga, 2007). This process slowly and gradually led to South Africa gaining its independence in 1994 and its new democratic Constitution in 1996.

Of importance to this study are the results of the interface that took place between the two systems: traditional religion previously practised by witchdoctors and the Christian faith principles brought about by various Faith Missions, including the Christian and Islamic missions. As the image of God was expanded more through the missionary stations and the building of schools, the education as a handmaiden of colonisation empowered *amaXhosa* more with regard to evangelism and an interest in understanding and accepting Christian values. Many Africans, including some *amagqirha*, became converts. Reflecting from the time of the arrival of the first missionary amongst the Khoi-San to the time *amaXhosa* prophets were emerging it is easy to depict that the Word of God was indeed very powerful and fell on ears that were already prepared to hear it (Pauw, 1975b; Booï, 2008 and Hasting, 1996).

There are many examples one can allude to that show the reaction of *amaXhosa* to the pain of colonisation and the apartheid system. The researcher's argument is based on only three examples that captured the times of this period: that of Ntsikana, Enoch Mqijima and Nontetha. Most historians (Booï, 2008, Hasting, 1996 and Pauw, 1975a) relate to Ntsikana as the first prophet of *amaXhosa* and the researcher does not support this stance. For instance, according to Hasting (1996:218-221), Ntsikana was born round about 1780. He had two wives, two sons and three daughters. He was illiterate and a warrior and royal councillor like his father Gaba. His father Gaba worked for Chief Nxele who was a convert in his own way, although he was not an accommodative convert, since he was against the British. According to Hasting, there is a strong hypothesis that Ntsikana started to show signs of repenting around 1815. He washed the red ochre from his body through full immersion in the river and later on he instructed his family to do so as well. Ntsikana claimed that there was "this thing which has entered me, it says 'let there be prayer'" (Hasting, 1996:218; Hodgson, 1982:135-6 and Mabona, 2004:303-305). According to Hasting, he must have heard the 'thing in him' whilst attending church services conducted by the missionaries Van der Kemp and Read. It could have been that he heard a conversation between missionaries and Nxele. Otherwise, his expression sounds like a form of spiritual revival.



The researcher agrees that he must have heard something at church because after washing off his red ochre, he commanded one of his wives to leave him and go back to her maiden family as he perceived polygamy as a sin. The concept of polygamy as sin is a Eurocentric view based on Christianity and is contrary to most African traditions. That is a sign of being converted to Christianity. He probably died in the autumn of 1821, having predicted his death (Hasting, 1996:220). Hasting's and Hodgson's assumptions are therefore supported, since the first white people arrived in South Africa from the 1490s onwards. In that case, Ntsikana could not predict the arrival of white people in South Africa with a button with no hole (coins) as was depicted in his song (Ulo Thixo Omkhulu) as they were already there, having already arrived by the 1400 to 1700s. The song also reveals that white people would bring technology that would lead to the production of railway lines. If the first European to set foot in Cape Town was Vasco da Gama in 1497 (before Ntsikana was born) and, according to Giliomee & Mabenga (2007), the first full-time missionary arrived in South Africa in 1737 and worked amongst the Khoi-San, how does one then view Ntsikana's revelations on the arrival of white people as a prophecy? How does a person prophesy on what has already happened? According to Hasting, Ntsikana's father worked for a missionary and Ntsikana was brought up in that environment. His visions about railway lines in South Africa are difficult to accept because he could have heard about such plans through his acquaintance with missionaries. For that reason, Ntsikana's vision and the fact that his songs are about his vision on what was still to happen are questioned.

It is not disputed that Ntsikana had *ubizo* as depicted by the content of his songs. His calling could be based more on being an *imbongi* (a poet), with naturally stimulated *umbilini* (intuition) and visions all being characteristics closely associated with *ukuthwasa* phenomenon. His calling could be defined as depicting the need for people to understand the broader perspective of the image they had of their Creator, which by that stage had changed into various terms: uMdali (creator) uQamata, Sifuba-sibanzi (one with the broad chest to be able to feed, nurture and hug all His creation) as already predicted in Nongqause's controversial prophecy. Boo (2008) suggests that Ntsikana's prophecy was a way to allow the deep penetration of Christianity and incorporating it with his own roots and that of his culture. Again, the researcher hesitates to agree with this because if Hasting and Hodgson are correct to say that Ntsikana's conversion led to him refuting his own cultural values, then one's intuition informs one that Christianity had brainwashed him into losing his Xhosa identity and to prefer a Eurocentric identity, as proven by his divorcing his second wife and not allowing his family to use red ochre again, as well as evidenced in his last address before he died, "Do not allow the children to return to the red clay ..." (Hasting, 1996:220). On the other hand, his accommodative stance to Christianity reflects the power of Christianity to

those who become converts and a sign that Christianity shall continue to remain with us. Thus, a Christian identity created in the pre-colonial era was reinforced and merged with the traditional roots of *amaXhosa*. Ntsikana is therefore the first strong representative of the transformation of the witchdoctor-*igqirha* image to that of the prophets.

Instead of following his *ubizo* through traditional religious calls, he accommodated the so-called two worlds – Christian and traditional – in a sense because, according to Hodgson, Ntsikana refused to be baptised in a church, since he had immersed himself in water when washing off the red ochre. His behaviour demonstrates the biased identity that is often caused by the very conversion to Christianity, which often confronts a person whether to stick to some of the traditional religious belief values or to reject all. No matter what the case is; after all, his accepting his prophetic call and rejecting going through *ukuthwasa* could be seen as one of the strategies towards the evolution of *ukuthwasa*.

In the researcher's view, his washing off of the red ochre was a sign of a cleansing process and purification ceremony that signified transmission from one particular developmental phase to another. That is also a common practice in *ukuthwasa* process. The bias and confusion remain part of the lifestyle since there is no total divorcing from any of the two worlds (traditional – Christian). The researcher also often experiences such biased feelings since she has tried to integrate the two worlds and that feeling at times is frustrating (see Preface and Chapter 4).

The Bull Hoek Massacre of May 1921 after World War I (Giliomee & Mbenga, 2007:247-248) was another source of attraction to the government after Nongqause's controversial prophecy. Again, the massacre attracts a number of explanations from a political perspective to a cultural (Xhosa) perspective. According to Giliomee & Mbenga, the prophet Mgijima had a vision that *amaXhosa* would kill the white people and would send them away. "The bullets from their guns will turn into water" and *amaXhosa* would seize back their land from the German troops (Giliomee & Mbenga, 2007:247). The other story is that in 1919, Enoch Mgijima, the prophet of an independent church group called the Israelites (*amaSirayeli*) near his holy village Ntabelanga at Kamastone to await the end of the world. Irrespective of threats from the government to leave, he refused and instead his followers kept taking more land. The government officials ultimately sent a troop of about 800 men drawn from all over South Africa to Bull Hoek to force the Israelites out of the land. About 200 people were killed and that massacre left "an indelible imprint on the official attitudes toward prophetic movement" (Edgar & Sapire, 2000:13).<sup>19</sup> Mgijima brought in the element of faith-healing

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<sup>19</sup> Edgar & Sapire, 2000. *Divine madness in the Eastern Cape: The case of Nonteta*, c. 1918-1935.

practice as he used blessed water. According to Giliomee & Mbenga (2007), Mjijima was part of the movement of the Ethiopian or Independent churches that represented black resistance towards white dominance.

The third is the story of Nontetha, a female prophetess who proselytised from King William's Town, in the Middle Drift area of the former Ciskei. She preached unity of African people; the cleansing of the society by ending the use of tobacco and liquor, suspending circumcision ceremonies, and predicting an approaching judgment day (Edgar & Sapire, 2000:1).<sup>20</sup> As much as the themes of her prophetic work were credible (according to her principles) and as much as she had a huge following, her prophetic career was short-lived. The government officials did not know how to deal with her prophetic messages. Her message called for reform (and therefore was inherently good, rather than inciting trouble or crime) but the government officials saw it as threatening their governance. Later, Nontetha included in her prophecy that, in fighting for unity, *amaXhosa* had to work together and against whites. This resulted in more mixed feelings in the government of the day. Some officials did not see her teachings as a threat while others feared the strength of her followers and outcome of her warnings against the white people.

On the other hand, Nontetha's prophecy combined two important features: changing bad habits and the destruction of the old tradition – drinking and circumcision. It is clear that Christianity brought mixed ideas to many since Nontetha was not sure how to integrate the Christian and traditional values as shown by her prophecy against circumcision, which even Jesus himself had undergone eight days after His birth, as that was a Jewish custom. Again another element of accuracy in dream analysis is observed in how dreams were interpreted, as Mjijima's misinterpretation of his vision also reveals.

The South African government, fearful of the independent religious leaders and the consequences of the two previous instances, namely those arising from the prophecy of Nongqause and the Bull Hoek Massacre, decided to silence Nontetha by committing her to permanent institutionalisation from 1922 until 1935 when she died in a prison hospital. Her family was never informed. She was then buried in a pauper's grave. Her body, with the support and assistance of Hillary Edgar, was exhumed and reburied in October 1998 (Sunday Times, 2007:15), in her *umthomnyama* (own grassroots cultural land) in the Eastern Cape to rest in peace close to her own *iminyanya*. It was a long wait but her followers knew that her prophecy would be fulfilled. "Nontetha told us an American will come and do

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<sup>20</sup> *Ibid.*

something miraculous. You have fulfilled the prophecy,” one of the followers told Edgar (ibid.).

It is important to mention that Nontetha had all the visionaries and personal characteristics similar to that of a person who has to *thwasa*, but in her last vision she saw *umlungu mabele* (a Bible hanging from the tree) and was shown to use it in order to save her people from destruction. She was illiterate but would read scripture messages on her hand as if reading from the Bible (Edgar & Sapire, 2000:3-14). In fact, her following continued the services even when she was in prison and not only illiterate people (*amaqaba*) but also educated people were converted. Some followers came from mainline churches in her area. This illustrates how powerful her prophecy became and perhaps why government officials felt threatened.

During the time Nontetha was detained in the Valkenberg Mental Hospital, many campaign activities took place to attempt to secure her release from the hospital. Those involved included her followers, empathetic whites, Prophet Ntsikana’s grandson Dwane, the media, and others. Her confinement to the hospital can be attributed solely to the poor diagnosis of mental illness at the time. For example, according to Edgar & Sapire (2000), the last report in 1930 from the Superintendent, Dr FD Crosthwaite that could have secured Nontetha’s release from the hospital was disappointing. After he had called a full conference in 1930 to discuss Nontetha’s history and diagnosis he revised the Fort Beaufort Mental Hospital diagnosis of *praecox* sub-group *hebephrenic*.<sup>21</sup> He argued against it and classified her “among the Paranoiacs, sub-group ‘prophets, Saints and Mystics’; amongst whom visionary experiences are common”.<sup>22</sup> Informants at Nontetha’s church informed the researcher that currently they were working hand-in-hand with the Church of the prophet Enoch Mgijima to reclaim the dignity of their followers and to try to put the record straight about their histories, as well as to remove allegations made about their founders.

For a psychiatrist to classify prophecy as madness or delusion could be seen as a political strategy to suppress the evolution of spirituality amongst the Africans. In addition, it clearly defines the negative stereotypes the North Atlantic philosophers continue to attach to the African religious beliefs (Van Binsbergen, 2003). It is interesting to observe that in the 21<sup>st</sup> century our scientific research is still based on issues of defining philosophical aspects of *ukuthwasa* irrationally, and yet as early as the 16<sup>th</sup> and 18<sup>th</sup> centuries, comparative studies between traditional and Western psychotherapies have been undertaken and positive recommendations suggested. For example, Fuller Torrey (1972) in his book *Witchdoctors*

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<sup>21</sup> See Sapire & Edgar (2000:54).

<sup>22</sup> See Bhungra D (ed.) (1995. 23-47). *Psychiatry and religion. Context, consensus and controversies*. London: Sage.

and psychiatrists, a revised edition of the mind game clearly states that the classification of mental disorders and their cause is time-bound as well as culture-bound. While the Western-trained doctor saw prophecy as 'madness', to *amaXhosa* Nontetha was normal; hence her congregation grew instead of being disintegrated.

According to Laing (1989:51), the mistake of Western science is that it works on a philosophy founded on the denial of 'self' and 'experience' and in turn, the 'psychiatric ceremony' of examination, diagnoses and treatment invalidates the clients as human beings. Consequently, that interferes with the healing potential of their process. The researcher can attest to the truth of misdiagnosing patients who *thwasa* as psychiatric patients. This is due to the similarity of the presenting characteristic that marks the manifestation of *ukuthwasa* such as delusions and hallucinations (see Chapter 6). However, to *amagqirha* these are different because in *ukuthwasa* a person does not hallucinate (as in Western understanding), as the noises are real, as opposed to pathological hallucinations where a person hears noises that are not there.

Nontetha did not just fight for the social justice for her community but also fought for the feminist identity and tried to reclaim the healing identity of women. She followed Ntsikana's example with a splendid feminine pride and humbleness. In my view, her story deserves to be published like those of other male prophets such as Ntsikana and should be seen as a first female pioneer to embrace the interface between traditional religion and Christianity with a bold stance. Even the walls of darkness in prison never threatened her clear *umbilini* (intuition) as she continued to offer true prophecies until her death parted her from us. The fulfilment of her prophecy deserves to be and has yet to be sounded out, celebrated and acknowledged beyond the limits of the Eastern Cape. It should be heard to Pretoria and back, summoning the agnostics at national level, to hear and listen to the revelations of the prophecies of *umprofethi womthonyama* (the grassroots prophetess).

In conclusion, this period reveals the successes that the traditional religion had realised at this stage despite all odds. *AmaXhosa* continued to reclaim their land and identities. Some rose and others fell and more rose in their place, again against all odds, and towards the end of the colonial period *amaXhosa* gained momentum to strengthen their struggles for freedom (Giliomee & Mbenga, 2007). It is interesting to note that, although the colonisation and apartheid systems brought so much disdain, by contrast, through industrialisation, technology and education, *amaXhosa* were empowered. They gained time to make reflections on their journey with positive lenses as the struggle continued to intensify in the following era.

Reflections from this era also show that witch-smelling which dominated the pre-colonial era was overcome because of the deep penetration of Christian values into the Xhosa tradition. The accommodative stance of those who seized the opportunity to acknowledge and adopt the new challenges brought by Christianity, without rejecting their cultural roots, enriched *amaXhosa* cultural religion. The prophets of the time could be seen as pioneers of the interface between traditional and Christian religions. In that way *ukuthwasa* can be seen as an evolutionary profession rather than a static profession. Afterwards, many women stood their ground and took up their *ubizo* and reclaimed their healing identities, whether as *amagqirha* (as the term 'witchdoctor' was gradually being replaced by the term 'prophetess'), or as *abathandazeli* (faith-healers). The mushrooming of the prophets and silence on *amagqirha* could reflect the fact that *amagqirha* of that time could still not practise in public and being *umthandazeli* was a better option.

### **2.1.3 Apartheid and the Bantu Homeland Systems**

The era of apartheid and the Bantu Homeland System did nothing positive to bring relief to the lives of the majority of the citizens of South Africa. Instead, the political struggle intensified and spread to various social and civil organizations that were formed by various structures as well as cultural groups (Giliomee & Mbenga, 2007:245-391). The white people intensified their struggle to maintain supremacy at all costs. The missionaries failed to end the continuing and changing political situation brought about by the colonisers and the white Afrikaners who were keen to see that Africans remained inferior in status for the rest of their lives.

The result of the policy of divide and rule (by the apartheid system) was to separate people into different territories and give them separate treatment. Thus one cultural group was split into different sectors. In the Eastern Cape *amaXhosa* were divided into the Transkei and Ciskei regions through the Homeland System. One would have thought that the Independence of Transkei in 1976 as the first Independent State would bring relief to the struggles of *amaXhosa* caused by the Homeland System introduced in the 1960s. Instead, it brought more pain as the political tension between the leaders of the Transkei and Ciskei became more pronounced. The seed of hatred planted by the settler grew profusely and became more unbearable. *AmaXhosa* fought one another more than ever before. It was difficult for people to cross the borders of both states and passports were required. This divided *amaXhosa* more into sectors of 'us' and 'them'. The former solidarity was melting and enmity against one another became more pronounced. *AmaXhosa* had new identities,

namely Transkeians and Ciskeians. However, both states were still excluded from being citizens of the Republic of South Africa. In fact, three identities were allocated to *amaXhosa*, a Xhosa, a non-citizen of South Africa and a Ciskeian or a Transkeian. There was migration from both homelands; people preferred one homeland to the other, preferring the Ciskei, as it never actually became 'independent'. Without further discussion on the Homeland System, it is important to look at what happened to *amaXhosa* style of life and to *ukuthwasa* in particular during that phase.

The exchange of cultural values happened beyond the control of even the politicians of the time who had formulated policies to prevent intercultural activities. For example, a policy opposed to intercultural marriages, especially between Africans and whites, was constantly ignored by the natural boundaries of love. Other cultural transformations could be related to the influx to cities, as people had to seek employment opportunities there. The influx to cities affected the traditional structure of the family and encouraged more cultural diffusions and transformations of cultural value systems, including *ukuthwasa*. Due to the dearth of written stories or documents about *ukuthwasa* amongst *amaXhosa* at the time, there is not much to write about what happened to *ukuthwasa*. However, in the limited literature available, there is evidence that *ukuthwasa* never died but evolved to what it is today.

In essence, there is sufficient evidence showing that the training of *amagqirha* continued (Broster, 1967; Broster, 1981 and Hammond-Tooke, 1985) across the discussed historical times. Moreover, many educated people, including Christians, joined *ukuthwasa* initiations and many consulted with *amagqirha* (Dwane, 1998). However, most of the educated and Christian people would consult with *amagqirha* in private. Yet, like during the pre-colonial and colonial periods, not all *amaXhosa* automatically practised their cultural customs. With the influences of modern times many *amaXhosa* transformed rituals and integrated Christian values (Pauw, 1975b). It was common to see a luxury Mercedes Benz car of a prominent leader next to the houses of *amaxhwele* or *amagqirha* late at night. The interface between Christianity and traditional religion could not be prevented and it kept expanding and evolving. Through the integration of the two, interrelationships between *amaqaba* (illiterate) and *amagqoboka* (Christians) also changed and tolerance thresholds between the two groups improved. The people were keen to learn to adapt to the challenges in various accommodative and positive ways.

As far as political and legal systems were concerned, *amagqirha* were not allowed to treat patients and clear policies were formulated to control the practice of *amagqirha*. Irrespective of all those legal stipulations, people continued to use *amagqirha* and those who believed in

the gift continued to go into initiation ceremonies to be *amagqirha* (Mabona, 2004 and Broster, 1981). In fact, although the practice of *amagqirha* was illegal, legal steps were taken against *amagqirha* when they had disputes with their patients and/or clients that ended up with the police and courts of law. It was a criminal act to practise *ubugqirha* and the case and punishment would follow set criminal procedures (Mabaco, 2007). This flexibility allowed *ukuthwasa* to continue.

However, due to Christianity and education influences, the mentality of some of *amaXhosa* were polluted by such indoctrinations; they still saw *ukuthwasa* in negative terms. This refers to the researcher's own experiences as revealed in Chapter 1. To many, the differentiation between *ukuthwasa* and *ukuthakatha* (witchcraft) created a problem. Many often saw it as one thing. Also, because at that stage the chieftainships amongst the *amaXhosa* were dissolved by the social and political structures, *amagqirha* lost their previous status accorded to them by chiefs and they were mostly seen as purveyors of sorcery (Kiernan, 1995), and *ukuthwasa* as a neurotic syndrome (Mqotsi, 1957), often defined by means of psychopathology, as seen in the case of Nontetha and according to research interpretations in those times (Soul, 1974).

On the other hand, *amaxhwele* (herbalists) received better treatment since they could register their practices for medicinal use if they had undergone training at certain training colleges. It is interesting to observe that training in those colleges or Schools of Medicine involved teachings about the use of traditional medicine and yet the onus for that legitimacy was given to people who had less knowledge or lacked advanced knowledge on indigenous medicine. However, because whites controlled those colleges, they were given the power to take charge of the training colleges. In the Eastern Cape there was one *ixhwele* who became not just popular amongst the people of the Eastern Cape but also with the government of apartheid, abroad and across racial boundaries. He was called Sethuntsa Kgotso and lived in Mpondo Land in the Kokstad area. Much research has been done about him and a book has been written about him (Wood & Lewis, 2007). The main issue for discussion concerning Kgotso with relevance to this study is the power he had to train people for *ukuthwala* (the power to accumulate wealth). During that period, more attention was taken up by the popularity of this extraordinary man and many *amaxhwele* who followed him.

Irrespective of the unpopularity and political marginalisation of *ukuthwasa*, *amagqirha* never gave up. They continued to practise their divination and to market themselves in various ways, such as selling herbs in depots. The continuation of the marginalisation of *amagqirha* even during this period led to great transformations in the whole process of *ukuthwasa*



including the training process, dress codes and transfer and integration of the art of healing amongst the various Nguni cultures. At that stage there were clear practical variations in the *ukuthwasa* process within the regional structures of the Eastern Cape alone and with the influx into cities, the penetration of art healing skills from other cultural groups was more pronounced, as proven by examples in Broster (1981) and Mabona (2004). The changes in the structural management of *ukuthwasa* affected even the name of *amagqirha*. From being witchdoctors during the pre-colonial and colonial stages and being prophets in the mid-postcolonial system, *amagqirha* during apartheid and Bantu Homelands were referred to *izangoma* (plural of *isangoma*) and by those from other cultural backgrounds in particular (Hirst, 2000 and Van Binsbergen, 1990).

The profession continued to be mainly dominated by women. This signifies the healing identity given by Mother Nature herself, as Mabona (2004:199-222) devotedly dissects the biological and chemical aspects of the folklore and mythology predicting the origin of the healing gift in women. Without giving up on the struggle for their cultural gifts and blessings, *amagqirha* were left with one huge step after this period, that of reclaiming their powerful status of leading their healing profession as well as that of reclaiming full self-healing identities as fully fledged and recognised healers. It must be mentioned that, their fight was a step behind from the developments that had already taken place in other countries to integrate the traditional healing system with the Health Care System. For example, in Botswana, traditional healing had already been incorporated into the Health Care System by the 1960s when the ngakas (diviners) were issued with licences to practise. Today, women *amagqirha* praise the WHO's relentless call to integrate the Traditional Health Healing System into the Health Care System in the late 1970s. In addition, the Independence of South Africa in 1994 brought positive and eschatological hopes to all citizens of South Africa, including *amagqirha*.

#### **2.1.4 The independence era and future prospects for *amagqirha***

At the beginning of 1994, *amagqirha* were still practising underground and illegally due to being marginalised by the South African Health Act 19 of 1974 and the Associated Health Service Professions Act 63 of 1982, which excluded them from registering with the South African Medical and Dental Council. *Amagqirha* were restricted from practising in public and treating certain diseases. With the advent of democratic governance in South Africa in April 1994, the status of *amagqirha* started changing. The South African government followed

steps already taken by governmental authorities in other African countries such as Zimbabwe (1981) and initiated a process to acknowledge them.

A full process was set up by the government to acknowledge *amagqirha* and to try to include them in the Health Care System. Soon after independence in South Africa, the government started negotiating with groups of *amagqirha* on the process to include them in the Health Care System (Hopa & Simbayi, 1998). As a result, the Traditional Health Practitioners Bill of 2003 was passed in parliament in September 2004. The news on the South African Broadcasting Committee (SABC 3) revealed that, for the first time in the history of South Africa, traditional healers were about to be licensed to practice. The Bill recognized traditional healers and was to set, regulate and control the practice of traditional healers. The Minister of Health, Manto Tshabalala-Msimang, predicted that in future the healers would be able to claim from a medical aid or write sick certificates. This was ground-breaking for the traditional healers. After the alleged (since only government officials were aware of them) public hearings, the Bill was passed as the Traditional Health Practitioners Act of 2004 and taken to the Constitutional Court in 2006 for approval. It was declined and sent back for more public consultation processes (City Press, 2006:2). The decline of the Act supported what *amagqirha* in the areas studied had said. The main complaint was that few, if any, public hearings were conducted and the consultation process had not been applied fairly. Many of *amagqirha* and those in rural areas seemed to have been victims of such exclusions.

As a woman who lives in rural areas and *igqirha* herself, irrespective of her associations with institutions of higher learning, the researcher has never heard about any meeting or call in the Eastern Cape Province for public hearings on the formulation of the related Bill. She was aware of the regional workshops conducted in the late 1990s when awareness campaigns were conducted where *amagqirha* were made aware that the government was keen to hear them and consider their status. At that stage, issues of concern were that *amagqirha* had to form associations as bargaining structures to initiate the planned consultations processes, which had not clearly been defined yet at the time. They had to work together, irrespective of where *igqirha* was trained. Even during that time there was severe tension between *amagqirha* trained by *amaXhosa* and those trained by those with *amandawu*. The latter were referred to as *amagqirha omgubo* (healers of the powder).<sup>23</sup> In turn, they were not acknowledged or respected by *amaXhosa amagqirha*.

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<sup>23</sup> This term indicates the fact that *amadlozi* (ancestors) are said to 'come out' and the healers go into a trance through the ingestion of pounded herbs or roots.

In fact, in 2003, when attending a workshop on Child Care at the University of the Western Cape in Cape Town, the researcher met *igqirha*, Mr Kubukeli, who mentioned the formulation of a Bill for Traditional Health Practitioners. When pressed for more information he said, “I’m sorry, I cannot talk about it now because it is still private; the public will know when the right time comes.” When confronted about when the right time would be and why it was a secret, he could not address any questions and the topic was changed because nobody else had the right to know! It also transpired that he was working with the support of white male medical doctors who were apparently his former trainees as *amagqirha*.

It soon became clear that even Matogu and her trainees (although they were in Khayelitsha) knew nothing about this. It was only after the researcher had graduated and was interested in undertaking this study that she followed up on what Mr Khubukeli was supposed to tell her but never did. In 2004, during a visit to Matogu in Cape Town, the researcher decided to go and see Mr Khubukeli. This time she went to his home and found him in his office with one of his trainees, apparently a secretary for his *amagqirha* association in the Western Cape Province. Apparently the process did not involve all *amagqirha* but only certain sectors. Mr Khubukeli was the President of the Western Cape Traditional Health Practitioners’ Association. With all due respect, his white associates tried to set a good example for him, compared to the processes followed in the Eastern Cape Province.

For example, in the Western Cape Province’s registration form, the details of the trainer and the trainer’s information and contact details are entered. This is a prerequisite before the trainee or graduate can be registered with the Association. Confirmation of the trainee’s particulars is also checked with the trainer afterwards. In contrast, in the Eastern Cape such details are not required and as a result, when the researcher registered in 2005 (to learn more about their procedure), she observed that anyone could register and claim to be *igqirha*. It was surprising to receive a card with a statement “member of the committee” (see Addendum A). Upon the researcher’s return to the office in Alice (where she had registered) to enquire about the meaning of that statement, no-one could provide an answer. Apparently they never asked the alleged chairperson of the Eastern Cape Traditional Health Practitioner’s Association, Mr Nduku, who never availed himself for interviews for this study up to the time of writing this chapter (August 2007). The researcher was the first person to query the statement. In spite of many appointments with Mr Nduku and at times through his secretary Zikhona, all attempts from 2004 to date (August 2007) have been in vain. Sometimes appointments with him were cancelled the day before or on the day of the appointment.

Registration of Traditional Healers and, in fact, Health Care Practitioners as they are now called,<sup>24</sup> has not been well planned in the Eastern Cape, even at national level. Apparently Mr Khubukeli visited Zimbabwe and learnt some of the skills there. He implemented some strategies used by Professor Chavunduka in Zimbabwe, the President and founder of the Zimbabwe National Traditional Health Association (ZINATHA), a process the Eastern Cape seemed not to have followed. Mabaco is a student in this programme and is assigned to explore processes followed to formulate the Act or Bill regulating the practice of *amagqirha* (Mabaco, 2008). It is important to note that at the time of conducting this study it was not yet clear how many associations there were in South Africa, nor even provincially and regionally.

In spite of all the apparent chaos in the process, some healers register with their associations and use the title of Doctor. When the researcher went to Mbinja, Tsolo, she was interested to hear from Boniswa (2004) about meetings where *amagqirha* met with people who introduced themselves as officials from the Bisho government. In turn, those people sold illegal Diploma Certificates to *amagqirha*. Subsequently, the researcher was introduced to Mrs Mtyeku by a colleague, who manages the issues of professionalising the practice of *amagqirha* at Bisho in the Department of Health of the Eastern Cape Provincial Government. Mrs Mtyeku was phoned to make an appointment for an interview with her based on alleged concerns. She appeared surprised by the researcher's report. She informed her that all those areas had representatives and gave her their contact details. She also provided a contact number for the Chairperson of the Eastern Cape Province Health Practitioners Association, Mr Nduku.

In February 2004, an appointment was made with Mrs Mtyeku. The researcher went to her with her previous supervisor, Dr Wouter van Beek from the Africa Studies Centre in Leiden, The Netherlands. They were received warmly and soon asked questions about what plans the government had for *amagqirha*. Mrs Mtyeku informed them how the process began, what was happening and the future plans. The brief interview with Mrs Mtyeku revealed the following issues:

- In 1993, when the new government showed interest in acknowledging *amagqirha*, Mrs Mtyeku became one of the first leaders to start the process.
- A strong Interim Coordinating Committee (ICC) representing nine provincial committees, chosen by traditional healers or through volunteering, was founded.

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<sup>24</sup> The researcher has learnt this in July 2007 when she was trying to get the names of the other officials of the Association in the Eastern Cape.

- The ICC developed the constitution for traditional healers. It was presented to parliament on 1 February 1998. She described the process followed to have been inclusive of all stakeholders.
- Afterwards, parliament sent members of the portfolio committee to conduct 'public hearings' and 'everybody was happy that traditional healing was included in the Health Care System'.
- Various meetings were conducted in 1999. Traditional healers met with the MEC for Health to accommodate Traditional Healers. The Eastern Cape Province took the lead.
- The first workshop was held in June 2000. Resolutions were: (1) that the MEC for Health would help with the infrastructure to support the process. (2) They were provided with office space accommodation in Bisho. (3) She was seconded from the Cecilia Makiwane hospital to come and open the office of Traditional Healers. (4) They were incorporated into a health-care campaign team that renders community services. The campaign is part of the Health Care Promotion Programmes directed at educational campaigns on various health-care aspects for the community. In this team, Mrs Mtyeku represents Traditional Healers.
- The goal for the programme is twofold: to educate the community and to encourage and train *amagqirha*, *amaxhwele* (herbalists) and *abathandazeli* (faith-healers) on various skills, including HIV/AIDS and other related illnesses.
- Structures looking at registration issues are now being created at district and local municipality levels.
- The Bill for the Traditional Health Practitioners was passed in parliament in September 2004. The signature of the President is required before the Bill can proceed to the next level, the Constitutional Court.
- The office handling the Traditional Health Care Practitioner's registration issues is supported and funded by the government as from 1993.
- Their main funding support is from the Eastern Cape Health Department.

Mrs Mtyeku, when asked about the public's attitude and relevant issues directed to the Act of Traditional Health Practitioners (2004), informed the researcher and Dr Van Beek that there were differences of opinion about what the future held for healers. In addition, there were

bias and scepticism amongst the healers themselves, causing an element of mistrust between the key stakeholders. However, healers were given time to interrogate the move more seriously.

One of the major moves Mrs Mtyeku mentioned was the issue of improving literacy levels amongst *amagqirha* in rural areas through one of the government Adult Basic Education Training (ABET) initiatives programmes. On the issue of whether inclusion of *amagqirha* in the Health Care System meant that they could claim on medical insurance schemes and write sick leave certificates for their clients (South African Broadcasting Committee, 2004), she informed her visitors that, that aspect had not yet been decided upon. However, she mentioned that, for those registered *amagqirha*, who would accept medical aid scheme methods of payment, the schemes were eager to let them join the schemes and that the medical schemes would be willing to honour them. Subsequently, registered *amagqirha* could enjoy the benefits provided by medical schemes.

The statement suggests that some *amagqirha* may not agree or accept the medical aid schemes' options because there are certain rituals conducted when *igqirha* receives payments or gifts from a client (see Chapter 6). Payments through a bank or by cheque may not be convenient. In fact, *amagqirha* like the researcher would really accept such options but clients may have to pay a deposit to allow the researcher to perform the necessary ritual. This issue could still be investigated in order to obtain the views of *amagqirha*. According to Mrs Mtyeku, the healers, unlike their counterparts – medical doctors – do not receive any benefits from the government such as subsidies, referrals from doctors or psychologists and other health team members.

The information provided by Mrs Mtyeku has little or no motivational aspect at all for *amagqirha*. This is in view with the already known factor that in the field many *amagqirha* do not trust the government's involvement. There is still mistrust about the government's interest in their sacred gifts and knowledge. Dr Wally Serote, in an interview with the researcher in March 2007, alluded to this point and suggested that strategies to bring the healers on board and secure their cooperation were mandatory. It had to be a slow process to give *amagqirha* time to understand the expected outcomes of the set strategies.

When Mrs Mtyeku was asked if South Africa had followed the process used by ZINATHA in Zimbabwe, her response was, "No. Zimbabwe took a strategy to be an NGO (Non-Government Organisation) and South Africa does not want that. ZINATHA is struggling to prosper because of their position as a NGO, whereas South African traditional healers receive support from the government." In all fairness, this statement underestimates what

ZINATHA has achieved and South Africa is far from achieving much by depending solely on government support (Mabaco, 2007). The truth of the matter is that both systems (NGO/Government) have its own advantages and disadvantages. From the researcher's personal experience and observations from the two visits to the offices of ZINATHA in February 2004 and November 2006, ZINATHA has promoted the status of their healers to a higher level. It could be said without reservation that ZINATHA's status has been boosted through the involvement of Professor Chavunduka, a former academic at the University of Zimbabwe's Department of Anthropology. Also, looking at how the Western Cape Traditional Health Practitioners Association has progressed compared to the Eastern Cape Association, ZINATHA's model needs some acknowledgement and respect.

At that point, the interview ended. Mrs Mtyeku invited her guests to go to Dr Alan's office and to Mr Dweba. The two officials were both introduced as Supervisors of Mrs Mtyeku. Dr Alan was busy with visitors, so we could not meet him. Mr Dweba was in his office. He greeted the visitors and informed them that he was busy collecting information to create a database on the Traditional Healing System in the Eastern Cape. Upon an enquiry about the original roots of *ukuthwasa*, and he informed the visitors that there was no database at the time and showed them a handful of papers in his hand. He could not even provide the number of traditional healers in the Eastern Cape Province. He promised them information when he received it. The promise was not fulfilled up to the time of writing this chapter (August 2007).

Further discussion on the mainstreaming of *amagqirha*, legal recognition, as well as their fears and suspicion continues in the discussion chapter.

## **2.2 AMAXHOSA SOCIO-CULTURAL SYSTEMS AND UKUTHWASA**

The historical perspectives created a fair background to the epistemological issues that bears testimony to the reality of the phenomenon of *ukuthwasa*. This section describes certain fundamental pedagogic epistemes that provide fertile soil for the full vegetation of the seed of the art of healing imbued in the African blood of those blessed with the fertile egg of *umbilini* to enable them to divine. Traditional knowledge informs us that the familial genealogy alone bears no fruit to the fruition of a fully fledged *igqirha* without proper grounding and nurturing. Therefore certain critical socio-cultural concepts relating to *ukuthwasa* have to be critically reviewed to allow a clear understanding of how a person who *thwasa* emerges to a new, transformed identity. The focus is on the following concepts of choice based on the aims and objectives of this study: the status accorded to *iminyanya*

(ancestors) by *amaXhosa* in particular, the clan processes related to *ukuthwasa*, the socio-economic factors, various perspectives on *ukuthwasa*, and the language and its implications.

### 2.2.1 The status of the ancestors in the *amaXhosa* culture

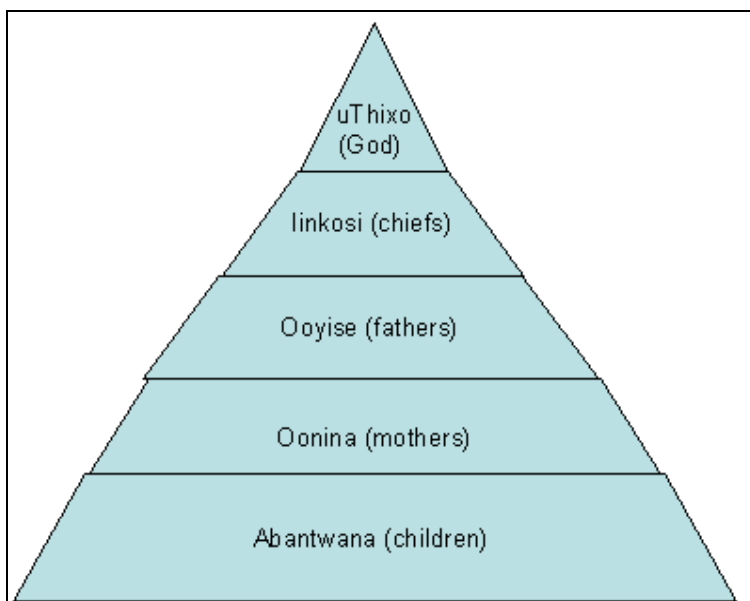
As revealed in the foregoing historical account, *iminyanya* are accorded a role higher than human beings but lower in status than the Creator. *AmaXhosa* refer to their dead as living human beings (*abantu abadala*); *iminyanya* (old people or ancestors), not spirits. To refer to spirits means something else. Spirits are seen as ‘foreign’ cultural beliefs and believed to be a practice of those who *thwala* (buy foreign powers) and not who *thwasa* (being initiated). To prove this, the *amaXhosa* attribute human characteristics to *iminyanya* such as ‘ancestors do feel cold, thirst, hunger, the need to be re buried elsewhere’ and many other traits. In other words, they are not seen as dead but as living amongst the people. The ancestors are mediums between the Creator/God and people; they do not share any status with God and are lower than Him (see Figure 2-3).

The ancestors are represented by a male figure in *amaXhosa* families. The male had always been a spokesperson of the family and a leader in family rituals (Soga, 1931; Sinxo, 1973 and Mkonto, 1979). This is the case, even if a male is younger than the woman, when it comes to ritual performance, a male has to be a spokesperson, or a relative, or someone from the same clan. That is why a child takes the biological father’s name, a critical factor in *ukuthwasa* process. For example, if a person is born out of wedlock before *thwasa*, the person has to be linked with the biological ancestors before or during *ukuthwasa* initiation process (no matter at what age). A man exercises his power within inherent cultural disciplinary values called *amasiko* (customs) and *izithethe*<sup>25</sup> (suggested rituals) at all times.

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<sup>25</sup>The term also refers to activities observed by copying elsewhere or created through creativeness but carry no harm to the wellbeing of the family members, whether done or not.





**Figure 2-3 The hierarchical position of ancestors in the *amaXhosa* family structure**

The issue is that the latter can become the former and at times they are both used interchangeably (Soga, 1931). Each family has a flexible right to decide about familial customs and how to carry them out. Often this is done in a systematic way in groups of families where such customs are shared and transmitted through generations by a socialisation process. Families are closely linked to one another by means of clans. In that way, no-one is without a family. In fact, there could still be small variations in performances and observation of customs within the same clan or families. That is because all these social structures are affected by global changes and are orally communicated and not recorded. The clanship process becomes the nucleus in sustaining family ties.

### **2.2.2 The clanship processes: *amaXhosa* cultural concept**

*AmaXhosa*, like other Nguni people, observe strict blood ties through clan kinships. The blood ties are often maintained through patrilineal lines (see Section 3.1.1, p.71). All children in a family are always bonded with the biological father's family, and thus take the father's identity. Only children born outside wedlock may take the biological mother's family identity. This practice is dying out because of its challenges later on in the life of the child. It is not uncommon to find that a child is reunited with his or her biological ties later on in life. *AmaXhosa* believe that when a child has to *thwasa*, a biological link with the patrilineal family is necessary (Masoga, 2001 and Alice Focus Group, 2005), otherwise the progress becomes affected.

In the case of the researcher too, as much as her parents overlooked her biological ties or consciously neglected them (see Chapter 1), later on, after graduating as *igqirha*, she had to return and make connections with her biological roots – amaMvulane (her patrilineal clan kinship). That means that being an illegitimate child carries another burden and challenge in *amaXhosa* culture and it is good to see that the culture is transforming. Nowadays unmarried girls claim their children and insist that their children know their fathers. In this way, children's biological identities are maintained.

The birth of a child is perceived as a blessing. *AmaXhosa* do not have name-giving rituals but have a tradition that is observed regarding name giving (Selby & Mlisa, 2007).<sup>26</sup> The young ones are often given names from previous generations. This is to preserve the wisdom, respect and any good characteristics that the late person had. The name of the child is believed to be one of the driving forces that motivate or stimulate the child towards her future destination or career path and/or life orientation. For example, Nomfundo (my name) means 'mother of education'. My grandmother used to tell me that I would be a "BA girl" and as such my nickname at home was "Ntombe BA" (BA girl). At that stage, I did not know the meaning of my nickname. As I grew up I soon forgot about it and nicknames often fade once in adolescence, especially if the prominent name (in my case, Nomfundo) is often used. It was when I graduated with my first BA Degree in Nursing Science in 1987 that my grandmother reminded me of why I was "Ntombe BA". I had satisfied her wishes and she would not have minded if she died the next day. It was as though she had looked forward to that day (Preface).

In *ukuthwasa*, name giving becomes a crucial aspect (see Chapter 6). In the family, name giving is a blessing ritual as well as an extension of the family genealogy, whereas in *ukuthwasa* it is part of the transition to a different level or entering a new phase in life. It expresses a rebirth cycle. After name giving, the family undertakes a series of rites of passage at various levels of the child's development. For example, at birth or at any stage during childhood a child is introduced to ancestors through *imbeleko* (rite of birth). Variations may be observed and because of various factors (accessibility to resources, employment factors, and others) this ritual can be conducted just before circumcision at adolescence. This means that it is a compulsory ritual and no other ritual may be undertaken until the rite of birth is completed. Other rituals are *ukwaluka* (circumcision) for boys and *intonjane* (female initiation) for girls, during adolescence (Turok & Mlisa, 2005 and Hunter, 1969).

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<sup>26</sup> The article is dedicated to "Naming Children in Maori and Xhosa Families" in the special edition of the *Women's Studies Journal* 21(2)(2007):20-29.

The rituals after that specifically focus on *ukuthwasa*. These range from *ukungxengxeza* (to plead with ancestors) when there is a delay in *ukuvuma* (to accept) or the family wishes to apologise or to plead for the blessings. *Imfukamo* (retreat); *ukubuyisa izihlwele* (to bring ancestors back); *intlwayelelo* (to sow) and *umsebenzi wekhaya* (the homestead work) are those rituals that would be performed before *ukuthwasa* (Hunter, 1979; Soga, 1931; Erdtsieck, 2003; Broster, 1981; Hirst, 2005 and Mabona, 2004). All rituals are concerned with strengthening the interrelationships of the aspiring *igqirha*, family, and ancestors. They are to ground and/or incarnate the aspiring *igqirha* with her ancestral cultural ties, spirits, and the universe. They become basic ingredients or seeds to fertilise, awaken, and sharpen *umbilini* (intuitive abilities) of *igqirha*. The rituals performed during the training phase are mentioned in the chapter on the training stages (Chapter 5).

### **2.2.3 The socio-economic status of the Eastern Cape and *ukuthwasa***

The basic cost for just one ritual that the researcher happened to witness in Tsolo Village in 2004 was approximately R8 000. The researcher had time to observe and negotiate prices with a close family friend on what was bought. The expenses included transport for *amagqirha*, groceries for the house of *amagqirha* and for the whole ritual, animals to be slaughtered, payment for *igqirha* and other related expenses, including brandy and beers.

Taking into consideration the low socio-economic status in the Eastern Cape and still continuing unstable socio-political situation since the colonial period, it is understandable why some of the people reject the calling or others take more than ten years as initiates (as in the case of certain participants in this study) fixed in one stage. Again, with the continuing high unemployment rate, it is understandable that some people will take longer to enter the initiation process or may choose not to enter. Due to droughts and cattle diseases, most families no longer own cattle; they have to buy oxen, goats, and sheep from farms far away and must hire vehicles to transport the animals to their homes.

Due to the escalating costs and continuing high rate of unemployment, many of those who are supposed to enter the initiation process are unable to reclaim their healing identities and remain lost or confused. A number of people are still in a dilemma and try to obtain help from the independent churches, but no proper reconciliation is found as *ubizo labadala* (the calling from ancestors) reclaims its cultural process, not church-related rituals (see Chapter 7). Considering the costs involved, many suffer in silence and have to live and cope with the consequences of the continuing afflictions in their lives. For example, Nomtose (2006), a 62-year-old woman in Ugie told the researcher that, "*Ndixolele ukufa kunokuba ndiyiqale into*

*yentwaso. Ndingenza njani ndingasenabo nabazali, ndingena nto? Ndiyakuthini? Mandife kube kanye!*" (I am prepared to die rather than to enter into *ukuthwasa*. How would I do it without parents, when I have nothing? What would I do? Let me die!) As she was talking, she was coughing badly. She has since become thinner and thinner. The worrying part is that she has been admitted to different hospitals from time to time but doctors are unable to make a diagnosis. Her X-rays do not show any signs of tuberculosis or any lung disease. She is aware of her dilemma – that she has to *thwasa*. She got the confirmation from many *amagqirha*, but does not have the financial means to do it. Nomtose is also a member of the Zionist Church but there does not seem to be any resolution from the church.

#### **2.2.4 Witchcraft, *ukuthwala* and *ukuthwasa***

One of the myths is the witchcraft aspect in the African cosmology of illness. A tradition informs us that the *amaXhosa* believed in *ubuthi/ubugqwirha* (witchcraft) as one of the main causes of illness and misfortunes. According to stories in *amaXhosa* families, *ubuthi* means a wide variety of issues as also mentioned by Ashforth (2000, 2002 & 2001) and Hirst (2005). In essence, by talking to the participants in the field, it was observed that the same meanings were still attached to witchcraft. In addition, jealousy/envy seems to be involved as a means of wanting to hurt others. Reflecting on witchcraft, it becomes clear that the witch-smelling was mainly driven by all the elements of jealousy/envy and bad heart. That is revealed by the fact that chiefs had family *amagqirha* who looked after their safety against witchcraft as well as the protection of *umkhosi* (military regime). It is clear that chiefs sometimes used their power to lure their wives back and repossess cattle from their enemies through witch-smelling. Evidence from Soga (1931 & 1989 and Alberti, 1968) confirms such information and by the revelations that Khwane, the Chief of *amaGqunukhwebe* created his own cultural group (*amaGqunukhwebe*) and *umkhosi* (military regime) by hiding and protecting all those who were 'smelled'. If these were true witches, why would he protect them?

This indicates that *amaXhosa* had a belief and awareness that witch-smelling was (at times) used as a way of punishment or revenge. In addition, it was to satisfy the chief's abuse of power and their unnecessary covetousness. There is no clear evidence and/or way of actually defining *ubuthi/ukuthakatha*. A common statement in *amaXhosa* villages even to date supports what our elders used to say, "*Ubuthi yinto enqabileyo. Akukho bani obuvumayo nabani ulilo igqwirha umntu uzazi yedwa*" (Witchcraft is a secret thing. Nobody accepts responsibility or claims to be a witch; anyone can be a witch, only the person himself knows.) It therefore becomes clear that *ukuthakatha* (witchcraft) can be attributed to factors

due to envy and jealousy (Hirst, 2005). Sometimes, because some people do not believe in ancestors, everything done by those who believe is seen as witchcraft. Therefore ignorance about *ukuthwasa* and its related nuances affects or prevents an opportunity to learn and understand the difference. Again, the mythological factors involved in all three are misleading, since it is difficult to differentiate one from other.

The belief in witchcraft therefore involves the use of magic, curses, words, and certain animals of which *imfene* (baboon) and black cats are amongst the most prevalent. Also, symbolic creatures like *umamlambo* (believed to be a white mermaid) *uthikoloshe* (tikoloshe) and *impundulu* (a bird that sometimes changes to any creature from being human and to being material, for example, a belt), according to Mqotsi (1957); Soul (1974); Hirst (2000) Hammond-Tooke (1989); Broster (1981) and Ashforth (2000; 2001 & 2002). Suffice to say that *ubuthi* has always been viewed as the negative or dark side of *ukuthwasa*. Perhaps it is wise to indicate that even if *igqirha* would use *impinda* (a herb used to bring back the trouble or curse to the original sender), that *igqirha* would be labelled as impure. Moreover, *igqirha* would be seen as acting like *ixhwele* (herbalist) and/or *igqwirha* (witch). *Igqirha* have always been perceived as a clean, pure and honest healer, whereas *ixhwele* has always been seen as a person who can use any type of herb or method to exact revenge – to the extent of using human parts and sending *izulu* (lightning) to kill the alleged witch or person.

In a workshop organised by the Psychiatric Health Care Professionals at Fort Beaufort Hospital in the Eastern Cape in 1996, for example, a well-known and popular *ixhwele* presented a talk on their methods of treatment. He mentioned the use of human body parts to heal as a normal method used anywhere. He told us that motor mechanics take parts from other cars for repairs. Medical doctors use donated organs to heal others. His example was that of a 'donor' kidney plant. As much as his presentation was understandable, he failed to explain the legal and ethical procedures and stipulations followed by *amaxhwele* (herbalists) to procure human parts as is practised in the conventional medical field. Sometimes the confusion is created by those *amagqirha* who act as *amaxhwele* and by those who do not understand the difference between the two healers.

This means that as far back as the pre-colonial era *amaXhosa* could clearly distinguish between evil and good. Punishment of evil was associated with ancestors, and *umDali* (Creator) who were viewed as strong pillars of maintaining social order and health. Yet, Alberti's (1968:21-29) report reveals that they had no image of God. Consequently, Hodgson (1982) and Pauw (1975b) confirm *amaXhosa*'s image of God as Qamata and *umDali*.

### 2.2.5 Linguistic aspects

The Xhosa language is one of the richest languages in the world. *AmaXhosa* use *ukuthetha* (speech) as in normal straight communication strategies: metaphorically, idiomatically, in jesting/teasing form, music, *ukubonga* (poetry), *ukuhleba* (gossip), *ukuhlonipha* (respect) and to express their feelings. *Ukuthetha* is at the centre of all processes carried out in the form of *ukunqula* (clan praises) (Mndende, 2004). The understanding of linguistic issues relating to the construction of social knowledge in this regard is imperative since the end results demand the need for a 'contextualised meaning'. The Xhosa language is one of the richest Nguni languages and *amaXhosa* are often creative in language construction. As such they have a broad 'contextual vocabulary' that would be difficult to list here in full. However, for this study it suffices to touch on various key terminologies that need to be understood (see Mabona, 2004).

Most of the time, self-constructed vocabulary comes from jokes, *ukukweka* (metaphor) and *ukuhlonipha* (respect). From self-construction the language spreads through the immediate families and ultimately to regional level. By simply talking, the complexity in understanding certain differences in scenarios is created by the fact that words with similar dialects or syllables have different meanings. For example, terms such as: *ubugqwirha* (witchcraft), *ubugqi* (magic), *ubugqirha* (divining), *igqirha* (diviner), *ugqirha* (medical doctor), *ukuthwasa* (initiation process) and *ukuthwala* (gaining power for wealth) can create problems in differentiating such contexts. That is why it is easy to confuse *ukuthwasa* with all these scenarios.

As the historical perspective outlines the diverse groups in Nguni cultural groups in the Eastern Cape alone, it does not come as a surprise that such diversity affects regional language construction and meaning associated with terminology used. For example, the term *ngoma* (song), which Janzen (1992) and others relate to music and drum beating associated with afflictions, changes to *ingoma*, which means *amaculo* (songs/hymns). Traditionally, the word *iculo* (hymn) is used to denote Westernised hymns but the way of singing is very different from that of *ingoma*, denoting traditional music. Linguistic problems are created at times as others still use the term *ingoma* to mean both music and/or songs. The two vary radically in many ways: the keynote, tune, rhythm and coordination of notes, hence they are termed differently. For example, the differentiations are contextualised as *amagqirha* and the *amaXhosa*, when singing, are said to *ayombela/ayavuma* (sing) while the educated Christians *bayacula* (sing). As much as the noun is the same *ukucula* (to sing), the verbs seem to differ accordingly (Chapter 8).

## 2.3 CONCLUDING REMARKS

In this chapter the historical and socio-cultural contextualisation of *ukuthwasa* in the Eastern Cape Province was discussed. Reflections on the historical and socio-cultural contextualisation of *ukuthwasa* reveal that *amaXhosa* hold strong beliefs with regard to ancestors. Ancestors have human physical characteristics rather than just spirits, and as such they have the ability to perform, feel and behave in a manner similar to that of human characteristics, such as being thirsty or feeling cold. It is evident that it becomes a misnomer to think that *amaXhosa* had an image of God only through missionary education and development. Over the past decades the image of God has been improving and *amaXhosa* have developed abilities and skills in merging the traditional and Christian worldviews. There seems to be a fluid continuity of events on *ukuthwasa* since the pre-colonial phase such as the need to clear the reality of *intwaso*, although at times the influences of the unsecured and inefficient political management, did try to demolish the practice. *Ukuthwasa* has evolved and continues to evolve. *Amagqirha* have transformed from being witch doctors to being traditional health practitioners. They have managed to reclaim their ethnic identities as well as be recognised as healing practitioners.

As much as *amagqirha* were previously marginalised, the continuity of the process provides positive hope for those who admire their healing roles. The acknowledgement and acceptance of future prospectives is a sign of positive regard from their side. This also means that *ukuthwasa* is a dynamic process that will not perish overnight. The training and on-going update of the process shall continue. In other ways *amaXhosa* seem to be flexible in accommodating other cultures, while at the same time seeming to retain and keep reclaiming their authentic cultural roots and identities as they still practise their rituals. The high inflation rate and failure of improvements in the socio-economic situation in the Eastern Cape could affect the number of the people who aspire to be *amagqirha* in future, since *ukuthwasa* is expensive. The question is, what will be the future of *amagqirha* with all the flaws and elements of mistrust that still seem to be a challenge to both the government and *amagqirha*? The tension between the traditional and Christian religions seems to be inevitable. In Chapter 9 the matter will be discussed in more depth during a discussion of the findings of the research.

Language is also used in *ukubonga* (poetry) and *ukuhlonipha* (to respect) in various ways: respect for elders by the young; in relationships; sacred places (in the case of *amagqirha*); in certain ritual ceremonies (for example, *ukuthomba* – female initiation), *umkhwetha* (initiate/novice), *umakoti* (bride/daughter in law) and *umendi* (married woman). At certain

homes brides are not expected to call certain things by their original names, especially if those things relate to their in-laws' names and surnames. For instance I, the researcher, am Nomfundo and my father's sister (dadobawo) was married to Mfundisi (surname of her husband). She called me Notisho (that is Nomfundo). She had to respect all the names associated with Mfundisi or Mfundo. Notisho then cannot be found in any Xhosa vocabulary because it was created by her only. This respect relates to *ukuthwasa* too, where sacred places are not called by their original names. For example, *ihlathi* (forest) is *ingethe* and *umlambo* (river) is *ikomkhulu* (Chapter 5). The meaning of these words are neatly intertwined with relevant clubs/societies and spread to the extended community by use, from small circles to the wider circle. This creativity to construct a name also creates linguistic problems within the groups whilst the creator still enjoys egocentric results of her creations – other partners suffer the communication breakdown until the constructor is ready to share both the contextual aspect of the word and its meaning.

Since language forms part of the social construction of a multi-faceted identity, the same applies in the context of *ukuthwasa*. A woman entering *ukuthwasa* enters as a *tabula rasa* (clean slate) concerning the language used in the profession. Once admitted, she is introduced to all the codes of the profession and as she emerges and progresses as *ukuthwasa* process unfolds, she consciously and submissively has to change her language in order to identify and conform to her group ethical standards and discipline. In that way, her new identity is constructed. Language has also been affected throughout the various historical periods and had to adapt to similar global changes affecting humankind.



## **CHAPTER 3 THEORETICAL CONTEXT AND METHODOLOGY TO THE STUDY OF *UKUTHWASA***

In the previous chapter, the basic concepts of *ukuthwasa* were addressed. Three concerns were identified as crucial: *ukuthwasa* initiation process and practice; the construction of the healing identities by *amagqirha* during *ukuthwasa* process; and the interface between Christianity and the ancestral world of *ukuthwasa*. Included in all three concerns are the gender roles in the whole process. Despite the fact that there is prolific research on traditional healing modalities and about traditional healers, none of these studies go into depth on the training of *amagqirha*, the psychological background on *ukuthwasa* as well as its relation to Christianity. In addition, *ukuthwasa* remains a confusing and incomprehensible phenomenon. Often, there is a tendency to associate it closely with witchcraft.

Therefore, to elaborate about the epistemology of *ukuthwasa* and its dimensions, one has to approach its epistemology and explanation from various perspectives: social, psychological, spiritual and personal understanding and experiences of those involved in the process. To accommodate such concerns, three main approaches are employed. These are: feminist theory based on liberation theology by Oduyeye (1995); the narrative approach; and the psychoanalytical theory on the collective unconsciousness and ego psychology. Since this study is not based on any particular theory/approach/methodology, seriously relevant major assumptions of each theory that are able to describe the critical issues identified in relation with *ukuthwasa* are taken into account.

The chapter is divided into two sections: the theoretical framework and methodology sections. The first section deals with three theories and the second section covers the grounded theory as a method of choice for this study. Later on, the chapter ends with conclusive remarks.

### **3.1 THEORETICAL CONTEXT**

#### **3.1.1 Feminist approach**

Despite the fact that this study is not based on any particular feminist theory, the researcher found Oduyoye's feminist approach based on the Theology of Liberation relevant to this study. However, later on various assumptions from other feminist approaches were taken as well. Oduyoye (1995) argues for African women liberation, not only in a theological context,

but also in their social environment. *Ukuthwasa* in this case is part of theology, as it fits in well with the religious belief systems of *amaXhosa*; hence *amagqirha* are perceived as diviners. Oduyeye (1995:5) identifies most oppression to be from the church or religious as well as having patriarchal dimensions. She claims that, "Women want to join in the search for the truth about human life and how to live it; we want to decide for ourselves, for our day and situation, what constitutes a liberating and liberalise life."

Basically, feminist approaches argue from the vantage point of women's life experiences, their positioning, feelings, successes and failures, and how they acquire and maintain their power in patriarchal social structures. In this study these female foci, that is, the issues that often take the centre stage in feminist approaches, namely the incorporation of all issues in the previous sentence, are utilised to describe the women's life experiences in the process of *ukuthwasa*. For instance, with a historical background of the marginalisation of women in most societies and also the implications of colonisation and the apartheid system as already discussed in previous chapters, *amagqirha* have to stand up and let their voices be heard and thus liberate themselves from the previous bondages, thereby creating new lives for themselves, including reclaiming their healing professional status.

According to Oduyoye (1995) and Fabella & Oduyoye (1998), the feminist approach is a liberating tool for women to revolt against their oppressions. Both authors perceive a woman to be always extending herself, carrying people through her experience of faith, prayer, life, feeling the impetus to overcome individualism and hearing the call to community experience (Fabella & Oduyoye, 1988:167). This indicates that a woman has a strong sense of accepting the call to nurture, care, and serve her community at all times. To women then, spirituality becomes a liberating factor to sense, feel and experience who they are, acquiring strength for their daily nurturing of all around them and for healing those in suffering. The theory therefore informs society of how women construct existential meanings in their encounters with nature, struggles and crises of life by means of their narratives.

Oduyoye further explains how women's identities have been enhanced and reshaped as well as inhibited by means of folktales, myths and proverbs. In addition, she looks at how the patriarchal cultures of both African and Christian religious practices have maintained the status quo of women (see Section 2.2, p. 61 and Chapter 4). Allowing women to narrate their stories opens up a channel through which women are able to share their successes and thus liberate themselves from the dominant patriarchal structures of current societies. The marginalisation of women occurs worldwide and in all spheres including the scientific field. In this study, Harding (1987:9-23), who advocates that women have been marginalised in

almost all social structures, including the scientific world where a significant difference between men and female writers is experienced, is supported.

Feminist perspectives such as those of Harding (1987:74-88) reveal that research approaches that use the insider/outsider perspective and narrative approach are recommended as reliable approaches to give women their voices to the world. On the other hand, traditional theories such as functionalism, structuralism, positivist approaches and many others have failed to represent women's issues because of their rigid concentration on the objective facts and reduction of experiential and subjective knowledge to nothing (ibid.:86-88). In addition, more emphasis has been placed on 'objective' findings, over and above the subjective knowledge. Such approaches have used women as variables and not as full participants whose voices should be heard.

Their conceptualisation of gender has included gender as a dependent variable with the main aim to test hypotheses, conduct experiments and enforce control by means of applying strict scientific laboratory or testing procedures on their studies. Such procedures failed to allow for the human and experiential factor. As a result, that impeded the inclusion of any valuable information outside the controlled laboratory-created environment (ibid.:29-50). In that way, women's views, ideas, feelings and their existential learning experiences and valuable information get lost. Moreover, women's power and identity as nurturers, caregivers, information builders and community developers are not reflected well. Moore (1986) confirms that by using songs and stories through which women can express themselves and transmit that wisdom and knowledge throughout next generations. Through narratives women are therefore able to share the status of the 'reality' of their experiences and can enjoy the social liberation they experience in expressing themselves.

Feminist approaches therefore advocate the proper liberation of women as full participants in the social and scientific construction of knowledge. As far as feminists are concerned, the use of approaches allowing for the inclusion of knowledge from the insiders should form part of the new purpose for social scientists (Harding, 1987:6-8). This study serves as a liberating platform for female *amagqirha* to enable them to reflect on their own experiences and spiritual journeys for the first time since they have embarked on their *ukuthwasa* journey. In that way, the researcher also had the opportunity to liberate her own previous fears of the unknown about *ukuthwasa* as she narrates and reflects upon her spiritual process and growth into constructing the healing identity of being *igqirha* (Preface and Chapter 4). Feminists believe in people's narratives as basic truths about the realities that surround their own existential experiences.

That is why this study has engaged in such approaches to try and let women *amagqirha*'s voices as practitioners of *ukuthwasa* be heard and to expose first-hand information about the *ukuthwasa* phenomenon. This resonates with Bell (1983); Bell, Caplan & Karin (1991) and Moore's (1986) views that space, text and gender are key social constructs that cannot be divorced in learning about social existence and the dynamic relationship between people and their environment. In addition, Moore (1986) emphasises the inclusion of the cultural environment in such reciprocal relationships. Women are fundamental in creating, maintaining and sustaining all such relationships. According to Bell et al. (1991:71), women become the social fibre without which no positive productivity can happen in any society. Bell views women as the key to the ultimate production of the society. According to Moore (1986) and Geertz (1973:80), such a reciprocal relationship serves as a textual analogy that characterises culture in the broadest sense as it is made up of a number of cultural texts that have to be read over the shoulders of social actors. Again, this point resonates with the value of using an insider perspective to understand a world different from that of outsiders.

Moore (1986:92) confirms that the only way of knowing a socially constructed world is to know it from within. This means that until the world of *ukuthwasa* is constructed from knowledge within, there is no way to understand what the journey and the meaning associated with the mythology, magic, religiosity, cultural and personal experiences of those who practise it is all about. The aim of this study is that, through narratives, the epistemological factors surrounding *ukuthwasa* are explained. In addition, it helps those who still perceive *ukuthwasa* as a negative adaptation to the larger society and view *amagqirha* in negative terms; an opportunity to review their perceptions.

Therefore feminist approaches provide women with the opportunity to take a stand and claim their liberation and provide reflections on their feelings, ideas and successes. In that way they can identify with their strengths and weaknesses, coping skills, as well as the energies used in constructing their healing identities. Narratives offer time and the opportunity for them to reflect on their discursive interrelationships within their own functioning levels and the challenges of the universe. The results of their energies are also enriched by the authenticity of engaging the communicated experiences with successes of the past, present and future that have either enhanced and/or disintegrated their their spiritual journeys.

### **3.1.2 Narrative approach**

Crossley (2000) describes the narrative approach as an ideology of transformation and reflexivity, and of the construction and reshaping of the life encounters towards sense

making and identification of the 'self'. The narrative approach is also a mode of knowledge construction and knowledge communication. The narrative approach provides women with an opportunity to tell their stories, which reveal their lived experiences and spirituality. The women's narratives are used as phenomenological, epistemological and experiential tools to examine how Xhosa women construct existential meanings, redefine and shape their struggles and crises, and make and construct their identities in *ukuthwasa* process. For example, as women narrated their life stories in this research it was easy to observe how new meaning was constructed as they reflected upon what had previously been taken for granted as a normal journey. The researcher herself was surprised by the power of the reflexology approach when she had to reflect upon how she experienced and managed crisis contexts, and how some seemed to resonate with her current life.

The researcher supports Balcomb's views (2000:49) in the book *Orality*, namely that the power of the narratives in shaping peoples worlds, identities and their lifestyles can be described in the following way:

*Narratives play major roles as epistemological categories. This is possible as people are able to tell or narrate their human experiences, lifestyles as lived and perceived by them from their own perspectives and that of others as stories are shared or told from generation to generation in a particular community. Thus, meaning is not just shared at individual level only, but also at group level, family level and community level as stories.*

According to Balcomb, narratives form part of people's personal identity. People can tell from their own world-views and life experiences who they are and therefore, through stories, they are able to make sense of their selves and the quality of the life they live and experience. Therefore, through narratives, women who aspire or are trained as *amagqirha* are given a platform to narrate their experiences and feelings, to reflect on the meaning and values and the significance of rituals performed in *intwaso* process and upon their own personal and emotional experiences during those rituals. The women interviewed for the research took time to respond to questions that demanded reflections on their past and even what they were doing. Sometimes the researcher had to rephrase questions more than once to obtain responses.

Balcomb categorises stories into three categories, namely 'big stories', 'mundane stories' and 'utopian stories'. He then describes the big stories as those that give ultimate meaning. Such stories illustrate the experienced events with a beginning and an end. They tell what happened before the event, how it happened, and what happened afterwards. In Chapter 6

of this study the epistemology of *ukuthwasa* is given from beginning to end. As Balcomb (2000:51) recommends, through their narratives it was easy to understand the phases of *ukuthwasa*, the rituals involved in each phase and their meanings. Narratives make it easy to dig up the 'myths' of origins while endings, the graduation stage in this case, give some sort of closure to whatever happened, such as resolution, judgement, a heaven or a hell (Balcomb, 2000:52).

The narrative approach also holds that narratives can be perceived as a framework that gives experiences a structured format in 'plots'/'meaningful units'/'texts' that provide a natural way of recounting existential and learned experiences (Moen, 2006). Moen further reflects on narratives as natural, practical solutions to fundamental problems in life and a way to create reasonable order out of experience. This means that storytellers do not just produce narratives to order and structure their life experiences, as the social and structural theories would do, but also create descriptions about their experiences for themselves and others. They also develop narratives to make sense of the behaviour of others (Zellermayer, 1997). According to Polkinhorne (1988), people without narratives do not exist. Life itself might thus be considered a narrative within which one finds a number of other stories (Moen, 2006). In other words, narratives can also be looked at within the framework of socio-cultural theory as they interlink between the individual and their context. The individual in question is irrevocably connected to her social, cultural, and institutional setting (Wertsch, 1991). Thus settings on the background of *ukuthwasa* and necessary rites of passage conducted before the initiation and ritual ceremonies during the initiation provide information on how connections and incarnation are made possible.

In that way the narrative approach supports this study's objectives in that it allows *amagqirha* to: 1) narrate their life journeys in *ukuthwasa* and in that way the epistemology of *ukuthwasa* is outlined; 2) let their experiential learning provide first-hand information about life-crisis experiences during the initiation process, revealing their meaning to them and others and tell us how such crises are managed and coped with; 3) through their narratives open up a dialogue that engages with the interface between the ancestral world and Christianity; 4) their stories enable the reader to understand how *ukuthwasa* initiation process offers growth and thus allow those who go through it the opportunity to know themselves and how they construct their own identities; 5) make it easier for the reader to understand the ecological relationships between those who *thwasa* and their cultural and social environments as one delves more into the symbols, rituals, dreams and their analysis and interpretation, as well as the scenario of sacred places, animals and environment.

Furthermore, the narrative approach does not only offer a means of enquiry, but also allows for the inclusion of biographies and autobiographies, case studies, phenomenological and ethnographic studies and thus creates a research genre situated within the qualitative or interpretive research family (Gudmundsdottir, 2001). On the other hand, others have claimed that the narrative approach is not a method but rather a frame of reference in a research process wherein narratives are seen as producers and transmitters of reality (Heikkinen, 2002). Hence, in this study, narratives are used as both the phenomenon and the method. In that way narratives allow one to understand how *igqirha* is transformed from a patient to a healer. Through narratives the whole journey is explained in simple terms so as to have an understanding of a strange and not easily comprehended phenomenon (see Chapter 6). In this way, the socio-cultural foundation of the narrative research is outlined. The researcher entirely agrees with Vyotsky (1978:64-65) when he states:

*We need to concentrate not only on the product of development but on the very process by which higher forms are established ... To encompass in research the process of a given thing's development in all its phases and changes – from birth to death – fundamentally means to discover its nature, its essence, for it is only in movement that a body shows what it is.*

In addition, narratives allow the narrator to explain the dialogic interaction between herself and the environment from her own experiences. For example, in Chapter 2, the preparation for ritual ceremonies, structures, ceremonies and activities involved, such as *intlombe* and clan praises, are all a means of allowing the dialogical interaction of *igqirha* with her environment. The expression of such experiences also includes dialogue with others. An individual always exists in relation to others, and living means being in an endless dialogue with others. In that way, as Balcomb (2002) agrees, the narrator is able to create meaning for her personally as well as for those she comes into contact with, namely family and friends, as well as a researcher who listens to the story, their voices creating meaning and understanding. Meaning and understanding cannot be transferred from one person to the next, but are created when voices engage in a dialogue with one another. In other words, the narrative approach enriches this study, as its main aim is to create meaning and understanding about *ukuthwasa*, not only from the researcher's point of view, but also from society's point of view (see Chapter 2 and 9).

Balcomb (2000) also supports the value of storytelling in shaping human existence by linking it with how culture is shared. According to Balcomb, cultures depend on shared schemata, which determine intelligible actions by shared consensus, that is, by a person and others. It

is therefore not just one person's perceptions and views but also others' views sharing common ideas. Narratives in the community help to transmit community values through future generations. Narratives, therefore, capture both the individual and the context (Heikkinen, 2002). In other words, narrative research offers three basic claims:

- That human beings organise their experiences of the world into narratives;
- The stories told depend upon an individual's past and present experiences, her values, the people to whom the stories are told, the addressees, when and where they are told and "the multi-voicedness that occurs in the narratives" (Moen, 2006:3).
- The three basic claims therefore enrich the information collected through narratives in various ways: 1) we are able to understand how individuals assign meaning to their experiences through the stories they tell; 2) narratives become linked to the language; and 3) narratives allow a socially and culturally constructed identity.

Through storytelling people learn what kind of meaning culture has imposed on various events, rituals and symbols used by culture. One is able to learn commonalities and differences between cultures and how each culture constructs its identity. Diverse stories or collective stories allow persecutions to a number of realities that are constructed in the process of interactions and dialogues. Since the narrative is situated within the qualitative or interpretive research method (Gudmundsdottir, 2001), it means that the researcher investigates a phenomenon in a natural setting, attempting to make sense of and interpret the phenomenon in terms of the meaning people bring to it. That is exactly what this study seeks to do. The aim of this study is not to obtain truths about *ukuthwasa* but strives to provide a detailed description of the phenomenon of *ukuthwasa* as the practitioners of *ukuthwasa* experience, perceive, feel and live it.

In other words, narratives do not only offer personal meanings but collective stories are also shaped by the addressees and the cultural, historical, and institutional settings in which they occur (Elbaz-Luwisch, 2002 & 2005). Narratives also inform one of the types of methodologies to use to collect data; hence interviews, focus groups, life histories and personal stories form part of the methods of data collection in this study (see Chapters 3,4,6 and 9). The multiple voices ultimately render narrative research as an ongoing hermeneutic or interpretive process. In that way, different theoretical perspectives, analyses and interpretations of the collective stories enable a person to gain further understanding and insight.



Balcomb concludes by strongly advising that stories therefore have to be kept alive, updated, transformed and modernised to keep up with life dynamics so that they do not die and rot. This therefore shows the vital concept about stories, namely that they are part of life. Life is lived to tell a story, and a story tells one about oneself. It is without reservations that the researcher strongly believes that the stories of *amagqirha* collected in this study on their respected religions (for those who believe in it), should be taken beyond the academic demands of this study. This would support the suggestions of Balcomb (2000:56), who supports the value of listening to the stories by suggesting that the universality of the truth of stories is proven in the lives of the people who live and tell them. According to him, people with phenomenological experiences “do not live for a universal that cannot be demonstrated in the acts, lives, and beings of people” (Balcomb, 2000:56).

Denis (2000) also supports the value of listening to people’s stories as it also gives them time to share their memories and the opportunity to deal with unfinished business. However, to Jan Vansina (in Denis, 2000:2) narratives are a means of transmitting messages from generation to generation and thus to bring to light as reliably as possible a fragment of the past transmitted by word of mouth. Finca is of the opinion that narratives always keep the bonds and linkages between people’s ancestors and themselves. He recalls an experience of being reminded by one of his elders at church that they needed to talk about people who made people who they were, their ancestors and families – “in life my son, you will not amount to anything until you learn to bless your origins” (Finca, 2000:2).

Narrative approaches, therefore, unlike the formal theoretical systems of analysis that look at global accounts of life and universal accounts of human nature, bring forth the contradictory experiences of subjectivity and denaturalise the notion of a self that is multi-faceted. In the structuralism analysis, life is presented in terms of behaviours that are considered to be the surface manifestations of deeper elements or forces, whilst in narrative approaches the lived experiences are construed as actions constitutive of life – these experiences reflect what is going on.

Ultimately, narratives provide expressions of subjective experience found through the consciousness of those engaged in the actions. It is these explorations of subjective experiences that contribute to ‘rich’ or ‘thick’ descriptions. These descriptions are in turn contrasted and juxtaposed in contrast to notions of surface and depth descriptions created through exploration conducted by ‘expert knowledge’ on behaviour as in structural analysis.<sup>27</sup>

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<sup>27</sup> Kelly TL. 1998. *Towards a common-sense deconstruction in narrative therapy*.

That is why in this study Carl Jung's concept of the collective unconsciousness is seen as important to form part of theoretical perspectives.

Ultimately, through the sharing of the key events in the stories the mundane stories were able to reflect more meaning to the context of the journey and what it meant to them, and thus their multi-faceted identities were enriched with interrelationship experiences rather than individual stories. In that way a collective social healing identity was achieved (see Chapter 4 and 6). Narratives provided transmission of knowledge in an unthreatening manner. From the scenario described, a reader may accept, listen and acknowledge and/or be eager to ask further questions and/or to join the train to a new venture of embarking on an evolving spiritual journey.

### **3.1.3 The psychoanalytic approach in *ukuthwasa***

To understand the concept of analytic psychology relating to *ukuthwasa*, it once again becomes necessary to reflect on the contents of Chapters 1, 2, 4,5 and 6 regarding critical factors about *ukuthwasa*: (1) *ukuthwasa* as an inherited gift that runs in family genealogies; (2) the guidance role played by ancestors during the training of *igqirha* and in healing; (3) the major role and value of dreams and rituals in the process; and (4) the role of *igqirha* in constructing her identity and acquiring growth during the training. It must be reiterated that amongst *amaXhosa* no-one can become *igqirha* unless she has been called. That means that a person has no conscious choice, will or act or power to choose 'to be' or 'not to be'. She is chosen even if she can consciously choose to deny or reject the calling later on. Her life is determined by her folks. Her predetermined journey is designed, manipulated and controlled by dreams, a means of connections between her and her ancestors. Dreams play a leading role because they set the curriculum baseline for the training process. Without *amathongo*, there is no training (Buhrmann, 1982).

In this section, the researcher will describe two theories based on a psychoanalytical approach and link them with the theory on religion of psychology. Firstly, a concise principle of each theory as an introduction will be given, followed by the basic principles of each theory to set a background about their application to the description of *ukuthwasa* and related factors mentioned in the first paragraph of this section. Later on, the common elements of all theories are integrated to postulate their application to contextualise *ukuthwasa* as a ritual of inheritance, growth, maturity and which provides a person with the fulfilment and insight to know who she is.

Carl Jung was a Swiss psychoanalyst who adopted a more sympathetic approach towards religion. He was more concerned with a positive appreciation of religious symbolism. He used a concept of collective unconscious to describe a person's developmental and maturation process. To him, 'soul' was an important aspect and should not be neglected. He also suggested that man was to be viewed in totality, that is, as a whole or in all aspects. A brief look at the concept of collective unconscious reveals a close connection between the person and her cultural and ecological environment. According to Jung, a person's development is determined by his/her inheritance, culture and social factors influencing him/her (Jung, 1990). However, in order to understand his principle, Freud's description of the personality structure and its interrelationship to the levels of awareness is critical, and is discussed later on in this chapter.

In addition, history reveals that most psychologists have long been interested in the psychology of religion. For example, William James (1842-1910), who served as President of the American Psychological Association, is well known for his concept on varieties of religious experiences, which is considered to be a classic work in the field. He distinguished between institutional religion and personal religion. Institutional religion refers to a religious group or organisation, and plays an important part in a society's culture.

Personal religion can be experienced regardless of the culture. In this religion, an individual has a mystical experience. According to him, there are two distinctions: that of a healthy-minded person and a religious person with a sick soul. The healthy-minded person tends to ignore the evil in the world and focus on the positive and good, while the person with a sick soul is unable to ignore the evil and suffering. The person would also have to find a unifying experience, religious or otherwise, to reconcile good and evil<sup>28</sup> (James, 2007).

On the other hand Erikson, a psychoanalyst, in his theory of ego-psychology (Hjelle & Ziegler, 1976 and Meyer, 1989), suggests that the process of personal development and maturity throughout the life cycle is a personal effort to combine clinical insight with social and historical forces. According to Erikson, in order to understand the developmental change and personality, it is crucial to explore a person's background of social and historical forces, including how the person manages life crises. Erikson, unlike Jung's (collective unconscious) and James's concept of a sick soul, concentrates on the strength and development of the ego structure. The common factor in all three theories is the principle of holism: looking at the person as a whole: psychologically, social, historically, physically and spiritually (religious/soul aspect).

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<sup>28</sup> See Google Search: Wikipedia, Free Encyclopedia.

The psychoanalytic developmental principle resonates with Bakhtin's (1986) concept of dialogic nature. According to him, all human action is dialogic in nature. This means that a person is always in dialogue, not only with his/her surrounding but also in interaction with other people, as well as with his/her consciousness. As Hiele & Ziegler (1976) suggest, this dialogue then involves all aspects of consciousness. In order to gain insight into what dialogue implies means that one must consider utterance, addressee and voice. Considering that none of the three elements exists in isolation, the voices interact and together they create meaning and understanding, which constitutes a collective, group and socially constructed meaning.

*Ukuthwasa* is a communicative ritual. It is full of utterances (clan praises), voices (people and ancestors) and addressees. In that interaction there is always a valuable message passed on, whether in utterance or through a symbol/ritual. These messages are in a meaningful context to give direction, meaning and understanding, which explain any actions/movements and symbol used. In that way a personal, group and collective social understanding is often maintained and people are allowed to identify with the value belief systems and/or comprehension of what is taking place within themselves or about others. Thus *amagqirha* often utter the expectations and demands of the ancestors or the Creator. Their voices are overpopulated with other voices because of their special connection with the collective unconsciousness.

According to James (2007), a person chooses her path in life, whereas Jung and Erikson view a person's development to be determined by her inherited constitutional makeup, including her culture and social aspects around his/her environment. In fact, James and Jung agree on the critical role the 'soul' plays in an individual person's development, while Erikson clings to the 'ego'. All agree on the role of culture in the person's developmental process. In addition, Jung and Erikson also agree that, for a person to grow and mature, (s)he has to manage the developmental struggles, which Erikson refers to as conflicts/crises of each stage of development by means of a process called epigenetic principle. That means that, according to Erikson, the development of an individual is determined by his/her inheritance (a genetically fixed progression in development); the urge to adapt and control the environment; and the nature of social and cultural environment (Meyer et al., 1989). By contrast, Jung has a different process called the individuation process, which also works in a similar way to that of Erikson in that, for a person to grow and mature, she/he has to manage the struggles of the soul and fantasies of the dreams from the collective unconscious. Positive successful management leads to maturity. The two psychoanalysts use their theories based on that of Freud discussed below.

Freud was the pioneer of analytic psychology. According to Hjelle & Ziegler's (1976:21-57) topographical model of personality organisation, psychic life can be represented by three levels of consciousness: the conscious (thoughts, feelings, perceptions and memories); the preconscious (all memories not available at a conscious level but can be summoned spontaneously or with an effort); and the unconscious (instincts and drives). The structure serves as a mental map to describe the degree to which mental events such as thoughts and fantasies vary in accessibility to awareness.

According to Freud, all these levels are influential in the person's life. The preconscious level (available memory) bridges the unconscious and conscious regions of the mind; for example, a person in her mind may have information, becomes aware of it and acknowledge it. Under certain conditions she may forget it and when influence is exerted by certain therapeutic ways (meditation, catharsis or hypnosis) she may remember it. He also warns that the information at the unconscious level may be expressed in disguised or symbolised forms such as slips of the tongue, dreams and intuitive expressions. Hence the interpretation of fantasies and dreams is critical for a deeper understanding of the unconscious processes underlying human behaviour.

Furthermore, he developed the structure of the personality that depicts a strong co-relational interrelationship to the levels of awareness. The personality structure has three structures: the id, which refers to the innate component of the personality, the mental agency containing everything inherited. It is present at birth, is fixed in the individual's constitution (instincts) and operates on a primitive basis. The ego works to gratify the needs of the id but taking care of the restrictions posed by the outer reality and superego. The ego derives from the id and borrows energy from the id to respond to the demands of the environment, the ego and the superego. The ego is the critical part as it ensures the safety of the person. It acts like a buffer system between the id and the superego.

The superego enables a person to function constructively in her society. This is a social structure that provides a person with a system of values, norms and ethics through a process of socialisation. That is, for a person to mature and to act as a moral-ethical person, she must be mentored and trained in order to acquire an insight into what is wrong and right, or good and bad, as well as to cultural values and belief systems. According to Freud, the interrelationship of the personality structure with the levels of the consciousness is the id, because it is the main structure that encompasses a major portion of the unconscious level, whilst the ego and superego encompass the unconscious, preconscious levels including the id.

However, Erikson (Hjelle & Ziegler, 1976:58-93) regards the ego as an autonomous personality structure. His principle of ego psychology is based on the principles that (1) ego development proceeds through a series of universal stages; (2) development is determined by a person's willingness and readiness to proceed to the next stage through interaction with his/her environment; (3) The stages of development evolve by the epigenetic principle of maturation; and the process is called psychosocial development. He identified eight stages of development (ibid.:64). The stages are the result of the epigenetic<sup>29</sup> unfolding or 'ground plan' of personality that is genetically transmitted (ibid.:63). That means that each stage has a critical period in which it emerges, but when all stages have matured according to plan, a fully functioning personality comes into existence. This implies that development takes place in visible and in unnoticed ways. While a specific trait dominates the development at any particular stage, certain changes occur spontaneously and simultaneously in all other areas of the individual's personality (Meyer et al., 1989). For example, as the trainee is confronted by fears of the unknown and anxiety separation at the beginning of the initiation (as she departs to live with her trainer), the skills she adopts to manage, adapt and cope with that situation simultaneously lead to the development of positive life skills she will use at almost all stages, as separation will happen now and again (see Chapter 5). In that way, her cognitive skills, emotional strength, spiritual growth and social adaptation skills all develop simultaneously, although that may show as she progresses across the stages.

However, Jung suggests that an individual experience forms a valuable empirical observation, which contemporary scientists may not accept. According to him, the collective unconscious is the repository of human experiences that contain the 'archetypes' (the basic images that are universal in that they recur regardless of culture). According to Jung, the concept of the unconscious can no longer be left solely to mean the repressed or forgotten contents as Freudian analysis predicted.<sup>30</sup> To Jung, the unconscious mind is divided in two: the personal, unconscious level, which is a superficial layer, and the collective unconscious, which is universal and forms a deeper layer on which the personal layer rests. The personal unconscious is inborn and inherits part of the collective unconscious as it lies in close relationship with it.

That means that the collective unconscious does not develop individually, but is inherited. A child is thus born with inherited genetic traits of *ukuthwasa*. In addition, it means that the

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<sup>29</sup> *Epi* means 'upon' and *genetic* means 'emergence'.

<sup>30</sup> According to Freud, the person's mind is divided in three levels: the id, which is primitive and instinctive; the ego, which is personal; and the superego, which denotes the universal social structure or collective consciousness. According to him, man is partly conscious and partly unconscious (Jung, 1990:3).

inheritance of the collective unconscious is not derived from personal experience and is not a personal acquisition (Jung, 1990). Therefore the collective unconscious deals with archaic, primordial, or primitive information that is universal and has existed since the remotest times. In that way a child is born with an empirical knowledge that becomes consciously available to her during her growth development.

This corresponds with the fact that a child with a gift can be identified at birth and by her intuitive abilities as she grows, such as: *ukuzilinda* (safeguard); shaking hands in greeting gestures or sweeping a floor; or *ukutulusa* (bending her head and raising her buttocks). All these are signs indicating the possibility of arrival of the visitors (see Chapter 1). During adulthood similar signs can be demonstrated by means of slips of the tongue and strong premonitions about what would happen (see Chapter 1).

In this way, both Jung's collective unconscious and Erikson's epigenetic principle can be related to what *amaXhosa* refer to as *imfuza* (to take after). That means a process whereby certain family values, talents, skills and abilities of past family members seem to stay in future generations through inheritance by certain children (see Chapter 1). For example, the researcher is always reminded that with her loud voice and harsh attitude she takes after her *dadobawo* (her grandfather's sister). However, the researcher's sharp skills and stubbornness are often attributed to her biological father's personality, whereas her 'healing gifts' are often related to both her grandmother's and father's (both paternal and maternal) and biological mother's gifts (see Chapter 1). This means that the researcher has taken something from each of her ancestors. According to Jung, all people share this universal collective unconsciousness. This resonates with what James believed, namely that the personal mystical, religious experience happens regardless of culture. This is what Van Binsbergen (1999 and 2003) also underpins in his philosophy of 'no culture'.

According to Jung, the transmission of information or knowledge is by means of archetypes. The archetypes are the unconscious images of the instincts; in other words, they are patterns of instinctual behaviour based in the id. Instincts, in turn, influence how a person behaves, as they are rational motivations of the conscious mind (Jung, 1990:44). This means that a person's imagination, perception and thinking are likely to be influenced by inborn and universal elements. According to the researcher, this reinforces the idea that, if a person has the calling, she cannot deny the existence of such a gift, as much as she wants to reject it.

According to the editors of Carl Jung's collected works (Read, Frodham, Adler & McGuire, 1990), man views the world as more or less a fluid phenomenon, with the stream of fantasy where the subject and object are undifferentiated and in a state of mutual interpenetration –

“all that is outside also is inside” (Read et al., 1990:101). According to their understanding, that occurs because man’s behaviour is influenced by the intra-psychic factors of the unconscious, which are not related to the external objects except by way of projection. This gives the psyche the authentic position of being part of the innermost mystery of life and has its own peculiar structure and form like every other organism. The only way to understand the images of the archetypes through the collective unconscious is when such images are projected through the conscious level. Such projections are often in dreams, visions, and symbolic structures and at times by means of instinctual behaviour. In that case, dream analysis and careful interpretation of dreams become crucial strategies. Again, the psychological view of dream interpretation links such interpretations with cultural environment on how society interprets certain symbols.

It becomes clear then that the cultural context, value and meaning of dreams as well as the unique individual perceptions are involved in dream analysis. What complicates the analysis and interpretation of the collective unconscious is the boundary that seems to be created between the unconscious and the conscious level. The boundaries of the unconscious level are wide and limitless and that is why *igqirha* has unlimited intuitive abilities to sense beyond what a normal person can. That is why a person is assessed, including her work, family, etc. (Chapter 6). Freud and Jung accordingly suggest that no dreams can be interpreted without the cultural context of the dreamer’s background. In that way the narratives of the dreamer are placed into context with her socio-cultural background in order to construct the socio-cultural meaning and understanding (Chapter 8).

Carl Jung’s concept of the collective unconscious suggests that some persons by their constitutional make-up can be more intuitive and more informative about archaic information than others. For example, those born from the family lineage of *amagqirha* are more prone to sharp, intuitive abilities concerning the secrets of nature or the primitive world through their dreams and visions. Nobody is responsible for this gift except the gift of nature. A parent cannot consciously make her child *igqirha* (see Chapter 1). Moreover, not all children in the royal family (family of *amagqirha*) may become *amagqirha*, even though some may have intuitive abilities. The ones with strong and sharp intuitions are at high risk of inheriting the gift. In reality, not all children of *amagqirha* inherit but often all possess the intuitive abilities. This is the case in the researcher’s home too. Her mother is *igqirha* in a family of four children, but all her siblings are intuitive.

According to Carl Jung, both the unconscious layer and conscious mind are called the psychic nature of the mind, which operates automatically without any conscious control from



the person. The aim of nature is to reconcile the functioning mechanism of the unconscious and the conscious to balance or harmonise the psychic functioning of the person. This is done through a complex process called individuation. By contrast, Erikson remains quiet about this.

Before dealing with individuation, it must be pointed out that participants in the field would always make one aware that life is about dual aspects in nature, a duality of opposites. Life experiences are always about opposites or a binary: good/bad; evil/good; success/failure; conscious/unconscious; inferior/superior; persona of a person – animus (anything masculine in a woman), and so forth. All such situations are sources of conflict, ambiguity and stress, which can also be associated with Turner's 'between and betwixt' principle (Chapter 8). As much as the dual situation is perceived as the reality; in *ukuthwasa* with a strange scenario of secrecy about the process, *umkhwetha* is confronted by regular moments of uncertainty as to whether to stop or proceed with the training.

Erikson perceives the created conflicts as necessary and as such responsible for engaging the person's superego to come up with positive ways of managing and resolving them rather than negative ways. A positive resolution to a crisis is a positive sign of growth and maturing process. *Amagqirha* also view the crisis as a normal process, even if their perception is socially based, as opposed to that of Erikson, based on physiological and biological processes. This therefore means that *amagqirha* also support the analytic approaches view since they perceive crises as normal training strategies to provide *umkhwetha* with experiential insight to their clients' world-views. In that way, they learn how to understand their clients' dilemmas and how to treat them. That then contradicts the perceptions of those who view and relate *ukuthwasa* as psychopathology or neurosis (Chapters 1,2, 6 and 8).

That is why Erikson views a crisis at each stage as a critical turning point in the individual's life. The crisis therefore arises from physiological maturation and social demands made upon the person at that stage. This principle can also be applied to the training of *umkhwetha* where she has to meet and overcome the demands of each training process to proceed to the next. What Erickson suggests is the positive achievement or management of crises at all stages, becoming a sign of growth and maturity. According to James, the person with the ability to manage the crisis positively would be a person with a healthy mind. One who rejects *ukuthwasa* or abandons the training would be a person with a 'sick soul' and irrational mind. In other words, a positive mind and attitude must be related to the submission and loyalty required from *umkhwetha* during the training.

Hjelle, *et al.* (1976), Meyer, *et al.* (1989) and Jung (1990) reveal that negative management of a crisis does not lead to the resolution thereof. This retards positive development. However, a person is not bound to the same stage of development through which is progressed, but to mature the person has to resolve all crises of the eight developmental stages. This can be related to the issue of rejecting and delaying *ukuthwasa*. This attitude can be seen as a way of negative management of the crisis an aspiring person is confronted with: fear, anxiety or reluctance to enter into *ukuthwasa* and which leads to some rejecting *ukuthwasa* or abandoning the training before completion (Chapter 4 and 5). As Erikson suggests, the binary principle also applies in the development process in that it is either a positive or a negative resolution.

According to Jung (1990), individuation is the process whereby the unconscious is integrated with the conscious. The process is a life journey in which an individual becomes what she always was (Jung, 1990:40). The process is not smooth; it varies and usually runs a dramatic course with many difficulties. Expression of the dramas is often through dreams, visions related to the 'representations of the collectives', which in the form of mythological motifs have portrayed psychic processes of transformation. The individuation is explained as a process by which a person becomes a psychological 'in-dividual', that is, a separate, indivisible unity or 'whole' (Carl Jung, 1990:275).

This means that crises and/or afflictions have to be managed through transformation, reincarnation, and/or rebirth. The question to ask is: How does this happen? Because the unconscious communicates through projections, a person who *thwasa* identifies who she is through the continued analysis and interpretation of her fantasies, dreams, visions and mythical experiences with her trainer during the training. In addition, visits to sacred places have a healing effect and that promotes the incarnation with nature and later on relieves *umkhwetha* of her anxiety. Consequently, the songs, dance, rituals, sitting and at times sleeping on *inxopo*, periods of meditation, rites of passage and the trainer's support, including that of the family, all provide a therapeutic environment conducive to support *umkhwetha*'s willingness and motivation to proceed with her training. A positive attitude is stimulated and *umkhwetha* also gets relief through free expressions and honest description, interpretation and dream analysis (catharsis). In that context she learns about who she is, where she is coming from and where she is going. These moments become self-revealing and reflective opportunities for growth.

These theories contribute to the broad description of the epistemology of *ukuthwasa*: what it is; aspects of inheritance as opposed to the suggested psychological or mental illness;

relevance and origins of symbolism in *ukuthwasa*; the developmental process from a neophyte to a fully fledged healer; and how a person ultimately identifies herself as an *igqirha*. In addition, theories provide an insight into dreams and their role including the understanding the role of socio-cultural value systems in the developmental process and maturity.

People might worry if they do not dream, because they then see themselves at risk. Dreams are also important as a warning of what may happen (as they do) or to confirm something that a person may be querying. For more information about dream interpretation, see also Buhrmann (1977, 1979 and 1982). Rogers (1976), a phenomenological psychologist, advocates that the best understanding of a person's behaviour is obtained through observation of his/her internal frame of work: thoughts, feelings, behaviour of a person. The content of dreams also helps to identify who the person is. Dreams provide a person's world-view as she narrates her experiences. *Ukuthwasa* as a phenomenon is a product of the unconscious level and in that case can only be explored in phenomenological ways that involve narrative ways to understand it as discussed in this Chapter.

The dream's healing effect projects conflict from the unconscious to the level of consciousness so that a person can take action. This means that the crises and afflictions a person who *thwasa* experiences mark an internal conflict (the gift of healing being denied or unknown to the person); hence, when afflictions occur, both the individual and family seek the counsel of a senior *igqirha* (Chapter 4, 5 and 6) for confirmation, guidance and support. Ritual performances, dancing and various strategies such as cleansing and purification processes are mandatory to help or support reconciliation processes between the unconsciousness and conscious levels. Positive reconciliation strategies allow growth and maturation.

*Igqirha* assesses and evaluates whether an initiate progresses or regresses through her dreams. Conflict or the unused libido (energy)<sup>31</sup> in the unconsciousness has to be accepted, understood and managed positively and effectively. For instance, after *intonjane* (female initiation), the researcher had clearer dreams and felt as if 'an internal missing link' had been discovered, causing her to feel very different emotionally and in spirit.<sup>32</sup> After the training, the researcher was calmer and could control outbursts of anger in a mature manner. This means

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<sup>31</sup> In this case the unused libido could be seen as the unused healing abilities and skills within a person. To make a person aware of these, crises and/or afflictions are reinforced. Without these the person may not be forced to accept *ukuthwasa*.

<sup>32</sup> See Turok (2002) and Turok & Mlisa (2004).

that the ritual power mysteriously and magically defuses the conflict-ridden complexes of the unconscious.

Through this growth and maturing, *igqirha* gradually identifies with the 'self' and starts to have a sense of her strong inward healing abilities. The initiate, as she goes through the training, feels freed from her unconscious weirdness and strangeness, because she receives and experiences clarification on the unconscious processes, their role and their meaning. It is this new knowledge or expansion to the integration or closing of the gap between the hidden unconscious and the conscious mind that marks the growth in a person as well as maturity levels. The healing of the afflictions and/or expanding of the intuitive skills relieve the unconscious of the blocked libido and in that way the energy is used positively. That is why *amagqirha* cleanse, purify and engage in *intlombe* and *xhentsa*, and very often ingest *ubulawu* during the process to stimulate *umbilini* (the intuition) resulting in energy to be used in constant assessment, diagnostic procedures and treatment procedures for their patients.

That is also why initiates are trained rigorously to do *ukuvumisa/imvumisa* (assessments and diagnosis) throughout their training. Through their healing practices they are also healed. In other words, their bodies are used as magnetic objects to allow cross-transference of their client's illnesses. Through individuation, *amagqirha* perceive themselves as wounded healers and are able to heal those wounded.

Since *ukuthwasa* is a gift from the ancestors, clan ancestors are seen as representatives of the complexes of the personal unconsciousness. In addition, ancestors in sacred animals, the symbolism of totems (animals, birds, snakes), and ancestors dwelling in sacred places (rivers, caves, mountains, sea, forests) are seen as personifications of the complexes of the collective unconsciousness. Therefore the integration of all these with the conscious mind becomes imperative to avoid conflicts. Again, included in the harmonisation of the psychic functioning, initiates are encouraged and guided to meditate. That is why rites of passage are mandatory before and during *ukuthwasa* process (Chapter 2, 4 and 6). More information on the individuation process and the mandala, which supports growth and maturity, can be read in Carl Jung (1990:355). At the end of the training, *umkhwetha* graduates because she has managed to resolve the crisis of each stage positively.

Thus, the use of the psychoanalytic process describes the link of *ukuthwasa* between individuals and their ancestors. It becomes possible to dissect how folklore wisdom and knowledge reach our conscious levels so that we are able to transform and interpret it in a comprehensive way that allows for practical use. The individuation and epigenetic principle (psycho-social development) processes charter a way to the completion of a final product,

the 'wounded healer' and fully matured *igqirha*. Both processes show how *igqirha* reclaims that position and acknowledges it as her art in the making. At the same time the trainee learns and understands the role played by ancestors during the training phase to enrich her growth process and certain events that did not make sense at the beginning. Ultimately, she receives insight into who she is. The level of understanding and accepting of the 'self' is made possible by peaceful positive reconciliation of all crises experienced through a sensitive and carefully crafted guidance by the trainer throughout the process.

## **3.2 METHODOLOGY AND FIELDWORK**

This chapter describes the approach and methodology used to conduct this study. It locates the researcher's role as researcher and participant; how participants were selected; and the methodology used to collect, transcribe, analyse and interpret data. In addition, it describes various dynamics that took place during fieldwork between the researcher and participants.

### **3.2.1 On being an insider and *igqirha***

The researcher is a fully fledged, graduated female *igqirha* of Xhosa birth and currently in the internship process of *ukuthwasa* initiation. The study is conducted in the Eastern Cape Province where the researcher also lives. The observation and descriptions are obviously informed from an insider perspective emanating from the personal experience of the training and practice of *ukuthwasa*. This renders the study to be of a special kind and adds richness to the data, which studies of this nature often fail to exhibit. In this respect Babbie (1998:308) is supported, who states that the actor's 'inside' knowledge (emic view) is of great importance in research. This background was helpful to place the feelings of participants into words and phrases of their culture and also to contextualise them in a scientific language. The narrations and testimonies are often revealed by nonverbal cues as well as settings in ritual performances and ceremonies only familiar to the insider. The insider status provides first-hand access to rare privileges not often offered to strangers. In fact, as time passed, the researcher was able to resolve some of the conflict and/or tension felt during the process and personal biases formed against the *amagqirha*. Such biases could have been projected from the childhood and young adulthood experiences of the researcher as an educated person and a Christian. Therefore the multiple roles of the researcher were more positive rather than negative.

The privileges of being an insider and a researcher are underscored and advocated by researchers. Yet Patton (1990) states that, to be an active participant during fieldwork, enables one to develop concepts, insights and understanding from the patterns in the data as they form. This further allows a person to construe meaning from those concepts without using her or his own preconceived hypothesis or theories. Friedson (1996) encourages researchers to be part of the actual existential experiences of 'being' and of full participation in the participants' lived experiences in analysing the results of an ethnographic study. In that way, a researcher is able to immerse herself in the client's own world as a co-partner in the creation of that socio-cultural knowledge. Hence, Palmer (1969:215) advocates that a method where a researcher is an 'insider' requires participation and openness instead of manipulation, control and knowledge; dialogue and not just methodology (as may be in the case of an outsider).

As much as scientific analysis may be against the insider/outsider approach, according to McCutcheon (1999), outsiders cannot hope to understand insiders and vice versa. That is, to understand an insider, one must become an insider. Therefore *to understand is to be* (researcher's emphasis). To be an insider in this research helped to understand the language used, the phrases and terminology, and the meaning behind gestures, cultural symbols and rituals *amagqirha* used. As an outsider the researcher was able to analyse, systematise, interpret, reflect and integrate a full picture of what is involved in *ukuthwasa*, not just from personal experience. The researcher's personal narrative serves as a text alongside the texts of the research participants and serves the role of an authentic data source, but simultaneously also as a coherent narrative so that the personal experiences may be seen coherently and contextualised in the structure of the process of becoming *igqirha*.

The full main ethnographies of the four trainers are presented in the form of brief and concise information to showcase important scenarios of each participant's life journey (Chapter 4). Some data form part of the series of texts in the whole study. In that way the participants' phenomenological experiences and perceptions are fully integrated from the beginning to the end product of this research. In addition, certain information touching on client care and how *amagqirha* conduct their practice is included in the form of cases that were seen by trainers (Chapter 4 and 6). The data support descriptions, personal interpretations and reflections. Thus the methodological process followed allowed a social construction of knowledge on *ukuthwasa* training by *amagqirha*. Case studies also created a platform for the confirmation, verification as well as validation of information as a reliable database. The data also provided the authenticity of data presented. In the end, the insider biases have been controlled by the

use of various participants' views other than practitioners of *ukuthwasa* as well as focus groups. That was to render the results of this study not self-directed. Hence, participants were selected from the families of *amagqirha* as well as the community at large. The complex nature of *ukuthwasa* demanded the use of a triangulated approach and the grounded theory was the method of choice.

### **3.2.2 Grounded theory**

According to Glaser & Strauss (1967), the grounded theory is generated by or grounded in a close inspection of qualitative data gathered from concrete settings, for example, unstructured data from interviews, participant observation and archival research. In addition, according to Pidgeon & Henwood (1997) and Erdtsieck (2003:9), the aim of any grounded theory is (1) discovering and analysing social and psychological processes; (2) data collection and analysis proceed together; analysis leads to discovery or hypothesis; (3) wider systematic sampling is used to refine, elaborate and exhaust conceptual categories; and (4) the systematic application of new conceptual categories serves to create more abstract theories. On this basis this approach is relevant to the study.

The grounded theory approach enables first-hand analysis of the information collected at its infancy stage when it is spoken up to the time that data are ready for interpretation. This allowed the researcher to have an accurate record of all events as well as discursive dialogues and events that took place. The researcher's diary was extremely valuable, as it was easy to keep reading, reflecting and to follow through certain themes and statements as the data were collected. Later on, notes and transcriptions could be made on contextual aspects, structural relationships, and phenomenological life experiences of the participants.

The flexibility built into the grounded theory allows the integration of various methods and approaches. Erdtsieck (2003:9) further suggests that a grounded theory can be well-connected with a transformative approach that seeks to acquire a critical or scientific view from below, the explicit aim of dialectical or reflexive research. Schrijvers (1991:162-179) defines the term 'dialectical' to mean the total dynamics of continuing (self-) research. In dialectical research, the objects of research become subjects as well, with their own senses, experiences and felt needs. Within the term 'dialogical' Erdtsieck refers to a specific reciprocal manner of exchange and communication between the researcher and the subjects of research during the research interaction.

During the rich dialogical discourses between the participants and the researcher some positive and at times negative reciprocal communication dialogues were experienced, which demanded that the following questions be asked:

- In whose interest is the choice of perspective or methodology?
- How relevant is the knowledge and the perspective of the participants?
- In whose favour is this study?
- Was the researcher supposed to do this research as an insider?
- Were the ancestors happy about this?
- Who is the researcher to do this?
- Where would this sacred information be stored and how?

These are questions that have always confronted the researcher, even when transcribing and analysing the data. At the same time, bias was created by many factors, including a limited insight into *ukuthwasa*, curiosity to learn more about personal roots, and the burning need to avoid losing this rich wisdom on orality again. The ongoing tensions are evident and seem to be inevitable because of the researcher's multi-faceted identities.

As an insider in the study, the researcher felt responsible and accountable for whatever information was collected; its accuracy and authenticity. The rich information from *amaXhosa* culture was not just for the study and *amagqirha* in the study but also for future generations of *amaXhosa* and wealth for the diverse cultural global world. Although an insider, the researcher felt a need to respect the senior *amagqirha* and *amaXhosa* culture as a whole by taking the necessary precautions when making decisions as to what information should be made public. Confidentiality about certain types of information is not selfishness amongst *amagqirha* but one of the ethical strategies to protect the integrity of the profession from abuse. Confidentiality is part of protecting *ukuthwasa* against abuse by those who are not called. The issue on the storage of information became a critical and sensitive debate between *amagqirha* and the researcher. It became important that all participants agreed that *amaXhosa* had to store their information on *ukuthwasa*. That brought in a positive angle, namely that of the use of real names instead of pseudonyms. That encouraged *amagqirha* to commit them to give as much honest information as they could.



### **3.2.3 Reasons for the grounded theory**

Many authors oppose the stance of the rigid positivistic research principles and argue strongly that the grounded theory does not only allow the researcher to use various methods to collect information from participants, but also allows a researcher to describe, explain and understand the lived experiences of a group of people and using reflections from his/her own experiences too (Denzin, 1989; Giorgi, 1995 and Charmaz, 2003:29). It also relies on inside knowledge in contrast to the positivistic approaches that lead studies from the 'outside', or rely substantially more on observers' concerns and interpretations of the research participants' behaviour. The grounded theory method bridges interpretative analysis with traditional assumptions because they are used to discover the research participant's meaning, assume an empirical enterprise and they provide a set of procedures to follow (Charmaz, 2003; Bigus, Hadden & Glaser 1994; Glaser, 1978; Henwood & Pidgeon, 1992 and Strauss & Corbin, 1990). Charmaz (2003:30) further suggests that the interpretive tradition relies on knowledge from 'inside', that is, the tradition starts with and develops analyses from the point of view of the experiencing person. The grounded theory therefore provides the space to integrate the 'insider' perspective in the study in order to validate other participants' ideas and perceptions, and critically reflect on the researcher's own experiences (see Section 4.1, p.115).

More importantly, the grounded theory involves triangulation, which in qualitative research allows the researchers to be more confident of their results. As De Vos, Strydom, Fouche & Delport (2007) argue, triangulation may help to uncover the deviant or off-quadrant dimensions of a phenomenon. This means that triangulation allows the creation of different viewpoints that may lead to either fitting into existing theories and/or the refashioning of old theories. On the other hand, it can lead to the synthesis or integration of theories by virtue of its comprehensiveness. In this way, the grounded theory was the perfect approach for exploring the complex nature of *ukuthwasa*.

### **3.2.4 Selecting the sample for the study**

The population sample for this study was chosen by means of purposive sampling. Participants were selected according to the criteria or needs of the study. De Vos *et al.*, (2003 & 2007) suggest the use of the purposive sampling in studies where the researcher has to identify participants to suit the characteristics of the study. In addition, other researchers such as Marshall & Rossman (1989), Babbie & Mouton (2001) and Richards

(2005) also support the use of purposive sampling because it has elements of theoretical sampling (interviewing participants until one exhausts the information needed). In that way, the method is adjusted to accommodate snowballing. The qualities for all three methods are that participants should agree and be available for the duration of the study. In addition, participants should be fully involved in the study. This approach allowed ample time to identify the clients for autobiographies and to select participants who qualified according to the set criteria of being *amagqirha* and other relevant participants to this research. Also, it made it possible to add other participants during interviews and their flexibility afforded the opportunity to verify information by interviewing as many participants as possible. Ultimately, 115 participants (including the four key participants) were interviewed.

### **3.2.5 Selecting the participants and methods used**

The three trainers were approached individually and the objectives of the study and reasons why it was conducted were explained to them. The criteria for the trainers were that trainers should have at least two years' experience practising as *amagqirha* after graduation. In addition, they had to have trainees who had qualified under their supervision. The trainers involved are from Komanisi *iphehlo* (training school) and their demographic details are given in Chapter 2 (see Section 1.4.2, p. 17). The initiates were often from Komanisi *iphehlo* too. The identity issues were discussed and participants' preferences about using their names were negotiated with them. The healers preferred the use of their *amagqirha* names instead of pseudonyms and others permitted the use of their real names (see **Addendum B**). Also involved in the research study were two students: an Honours student and a Master's student. At times other students would provide technical assistance on an *ad hoc* basis.

Since *ukuthwasa* has no age or gender boundaries, there were no restrictions imposed relating to age and gender. The participants were selected according to set criteria: being an *igqirha* trainer or trainee; Xhosa-speaking and living in the Eastern Cape Province; being a family member or relative of an *igqirha* or *umkhwetha*; at a village where an *igqirha* or *umkhwetha* lives; and availability for interviews when required.

### **3.2.6 Additional information on participants and ethical principles**

During fieldwork it became necessary to involve other participants such as family members, community members and members of traditional associations in the province and nationwide. Normally one needs to obtain permission from the associations before

interviewing *amagqirha*. However, in the Eastern Cape the registration process of *amagqirha* is still unfolding, so it was not necessary to contact the association. *Amagqirha* in this study were not registered and did not belong to any association. They only knew about registration from the interaction during the fieldwork. Some participants started registering through the researcher's acquaintance with them. Hence, permission for studying *ukuthwasa* was provided by the *amagqirha*. Each participant was informed of the role(s) that each would play, including that of a researcher. Each participant in turn gave their personal agreement to participate, except for the trainees. Although their personal agreement was requested, their trainees and family were further consulted to provide a formal approval to the researcher and trainees. All participants were aware that they could inform the researcher when they did not want pictures taken during certain rituals or would stop the researcher from going to areas where ritual ceremonies were conducted. Similarly, they would state what information they did not want to record for the sake of secrecy. They were made aware that they could decide to withdraw from participation any time they felt the need to do so. Their full participation up to the end was highlighted and the benefits of such participation were explained.

### **3.2.7 Interaction with participants and codes of conduct**

At the beginning of the fieldwork, the researcher could sense some tension and rigidity amongst the participants, irrespective of knowing the rules and the permission granted to them. There were feelings of distrust because previously some researchers had consulted them. Apparently there was no clear information given as to what the researchers were going to do with the information. The researcher always explained what she was doing and introduced her students when she met with them, because every time they met, there were new *amagqirha*. Therefore the researcher always asked permission from newcomers. What impressed them was that the study enabled *amagqirha* to have a voice in the transformations taking place in the society around them.

The fact that this study could help the process of improvement of best practices while their sacred information would be stored in higher centres of learning such as libraries encouraged their full participation and eliminated the principle of distrust. In addition, public information on *amagqirha* can indeed elevate their status even more as it may change any biases that people have about *amagqirha*. In addition, *amagqirha* gave permission for the use of their first names given during *ukuthwasa* initiation. That was to reclaim their lost recognition and to give authenticity and validity to the information gathered taking ownership of their product.

Occasionally, it was necessary to explain the students' role to the groups. Whenever the students took on an active role in interviews and visualising, the researcher took a leading part or fully participated in ceremonies or ritual performances. In total, one hundred and fifteen (115) interviewees participated in this study.

What was interesting was a ritual that took place every time the researcher was in the field with *amagqirha*. The ritual is called *ukuxhoma* (to place on top) and *ukothula* (to take down) *iingcaza* (variety of gifts to ancestors). This is discussed in detail in Chapter 7. In fact, it soon transpired that, during any ritual or meeting, and whenever *amagqirha gathered together*, a gift to *iminyanya* was often required: a bottle of brandy and a packet of tobacco and snuff, drink and sugar. During the fieldwork such gifts were taken along and the researcher would introduce herself and/or the students to *amagqirha*, the family and *iminyanya* and inform them about the reason for the visit.

Then a spokesman from the healers' side (usually a senior trainee or junior *igqirha*) would accept the gift. Afterwards a spokesman for *umzi* would welcome the research team and thank them for the gift. Only then was the team accepted as part of *umzi* and allowed to participate in the ceremony. Later it became a habit that, whenever the researcher went to a ritual – when there were new *amagqirha* – she had to buy a bottle of brandy, a case of beer and soft drinks. The bottle of brandy and soft drinks were always shared with *iminyanya*, and placed at an *iqonga*<sup>33</sup> for *iminyanya* to drink.

The interesting part is that, all the time when the gifts were brought down (*ukothula*), it was observed that they had been used. The glasses would be three-quarters filled; yet they had been full when brought up. This is always observed by *amagqirha* and must be reported, for example, by *igqirha* bringing them down, saying, “*Ndibuyile eqongeni, andiphandlwanga. Abantu abadala bafikile basishiyela nathi.*”<sup>34</sup> It is a positive sign to denote that the *iminyanya* have consented to what is being done or have welcomed the gift. If not used, then that sign is associated with rejection from *iminyanya* and the senior *amagqirha* would always try to find a reason for that. Different codes of conduct and specific gestures to show respect to various

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<sup>33</sup> This is a space that is created to place any offerings to *iminyanya*. It is a place in the main house (*indlu enkulu*). It is a high place *entla* (at the far inside end of the house) and a plank is placed against the wall secured by nails. A white cloth is placed on the plank before anything is put on it. This space is well respected and whenever it is approached a certain ritual is performed. Only *igqirha* and/or trainees at senior level are allowed to approach this space. Respect to *iminyanya* is also accorded by means of quietness when any activity is taking place, for example, placing and or removing something from this space. A person approaching the space has to have her beaded necklaces and, if not, must make an apology in front of other *amagqirha* before approaching the space.

<sup>34</sup> I have come back from *iqonga* and I am not blind (as it is believed that ancestors can also blind a person – if provoked). The ancestors have come (have taken their portion) and have left something for us. This is a good symbol that all is well. It also indicates visitation of ancestors to the ceremony.

sections of the rituals were observed. By the end of the fieldwork even students were experts in knowing how to behave in certain situations.

At faith-healing sessions the rules and codes of conduct were different. However, it soon transpired that it was just a matter of terminology, for example, *amagqirha* would use *Camagu* as a means of acknowledgement and/or confirmation, while *abathandazeli* (faith-healers) would use *Amen*. *Amagqirha* would dance in a traditional way, while the *abathandazeli* used the Western style of shaking their bodies and their songs were mostly church hymns. However, at times traditional songs would be used. The same would happen on *amagqirha* side when at times they used church hymns to *xhentsa*. It was soon easy to adapt on either side. In the beginning it was a little awkward, but it soon became clear that at times differences were a matter of setting boundaries and claiming territories and power more than just the meaning of symbolism and cultural values.

### **3.2.8 Data gathering**

Due to the complexity and variety of aspects to be covered in the study, various methods and techniques were used to collect data, for example: interview guides and individual interviews; both unstructured and structured interviews; life histories; focus groups; and observations. In all these techniques an interview guide was the key instrument used to collect the information needed.

#### **3.2.8.1 Preparation of interview guides**

Interview guides were prepared based on the broad themes and at times certain standard questions that all participants had to respond to. Questions were mostly open-ended. The interview guides were used as tools to gather information (see **Addendum C**). Two interview guides were developed: one addressing general questions and themes on *ukuthwasa* and one based on themes relating to the life histories of the trainers. The use of interview guides was advantageous since they enabled the researcher to be able to change the structure of questions as challenged by the responses from the participants. In that way rich data relevant to questions or themes were collected. That technique also allowed participants to share their own views and ideas which they felt important and were not taken care of by the researcher's themes and questions.

The interview guides were used to conduct structured and unstructured interviews. For example, unstructured interviews were more valuable when information of life histories was

collected and at times when a certain ritual was being conducted and certain factors were to be explained by the trainers and other people involved in the ritual. The unstructured interviews allowed an opportunity to collect more information on participants' personal viewpoints. Structured interviews helped the researcher more with general individual and focus group interviews.

### 3.2.8.2 Individual and group Interviews

Unstructured and structured interviews were used interchangeably in conducting in-depth individual interviews<sup>35</sup> to obtain key important matters on the trainers' life stories and at times with other participants attending rituals. Sometimes group interviews were conducted as well. Participants were informed about the interview beforehand and their consent to participate was obtained. At all interviews a tape recorder and at times a video camera were used. All these instruments were introduced to the participants and they were informed about how that data were going to be used. If, at times, students were present, they would be introduced to the participants. Students were helpful to capture particular sessions on video or to take written notes whenever a tape recorder was used. Notes were used as backup and to record the nonverbal cues from participants as well as to record key issues about the environment. For instance, at times participants were leading a ritual and it was important to observe such settings and record key features, for example, *inxopo* (special grass) covering the floor of the house, gestures, behaviour and the actions of the person conducting or participating in the ritual scenario. In the case of capturing the scenario, the consent was requested by *igqirha* leading the ritual and at times a family member would request it on behalf of the researcher. Interviews lasted at least an hour and thirty minutes, as a lot of explanation had to be done in between to make sure that all members understood what the interview was all about. After interviews participants were permitted to discuss any other issues not covered by the interview guide.

In addition, individual interviews were also conducted with other *amagqirha* introduced to the researcher during the fieldwork as well as with healers from other areas visited during the field research. That was a way of investigating whether there were common trends or variations in the healers' initiation processes and experiences, as well as to observe and note any incongruence and contradictions in the information given by *amagqirha*. In that way, it was possible to continuously validate the information collected. Where differences in opinions or interpretations occurred, further consultation with participants took place, using

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<sup>35</sup> Smith, Harre & Langenhove (2003) suggest the combination of the two methods when collecting data in cases where people's opinions, feelings and perceptions are studied: unstructured and structured interviews.

focus groups and individual sessions interchangeably. At all times research ethical issues were observed.

This method helped to clarify various issues. For example, when conducting individual interviews, confusion pertaining to the use of different terminologies such as *iphondo* or *iphehlo* occurred. What appeared to be two different things later transpired that the same referent, a training school, was implied by the two concepts.

Group interviews consisted of ten to fifteen participants. Similar basic rules on why the interview was conducted and the use of devices were always communicated from the beginning where group members were collected. Once seated, formal ethical principles were again repeated and introductions made. Members of the group were asked to set rules before the group started, such as giving each member a chance to talk, respecting one another's views, or a member who wanted to say something had to give a show of hand. In addition, members were informed that they were not forced to participate actively, although their contribution was welcomed. The fact that the information collected was to be recorded made members take part actively in dialogues. The use of their *amagqirha* names was welcomed by all. The only challenge that arose was that, whenever groups or focus groups were held, *amagqirha* expected some incentives. Groceries, brandy, drink, tobacco and snuff had to be bought. In the end individual incentives appeared to be more cost-effective. In case of conflicting versions, it was necessary to verify that information either in individual groups or focus groups with different participants.

### **3.2.8.3 Life histories**

Allport (1942) supports the value of life histories in psychological autobiographies and the use of diaries and letters to collect ethnographic information of the four trainers. The life history method was used to collect their life histories from childhood to their current age. The interviews on the life histories were conducted in two ways. An interview guide and an unstructured interview were used as well as an informal way by means of narratives to allow the participants to be comfortable to talk about their sacred journeys in a more user-friendly manner. The brief summary on the biographical information on the four *amagqirha* healers and trainers is presented in Chapter 1, while their brief ethnographies form part of the thesis and are presented in the next chapter (Chapter 4). This information was collected during those sessions. Though the permission of the trainers was required before the study was started, their permission and consent were requested during subsequent sessions to make sure that they were still prepared to be interviewed or to continue with their narratives. On a

certain occasion Zanemvula had a problem with being interviewed, because her ancestors would not allow her to narrate her story. However, at times she narrated her story without being prompted by questions.

The ethnographic information collected from the four healers and the researcher's own journey is presented in the next chapter and it serves to broaden the scope of the insight into the journey of *ukuthwasa* by offering a retrospective picture. Personal life narratives were advantageous to providing information to support data collected from general questions in the interview guide. In life histories the trainers had to remember certain key moments in their lives, for example, the incidents that either made them happy or inflicted pain or fear or successes and/or failures and how they managed or coped with experienced fears or crises. Subsequently, they had to talk about feelings and experiences during certain rituals at different stages; competencies they acquired throughout their training; and how they were supervised, criticised and/or encouraged to proceed to the next stage. Trainers were at an advantage to reflect on their experiences with ancestors. Furthermore, the trainers were able to reflect on their daily schedules

Major sub-questions with regard to the individual experiences of healers and trainees were related to the following aspects: the onset and circumstances regarding a calling to heal; the extent to which personal crises anticipated the calling; the process of acceptance of the call and the training; and the personal feelings of trainees who undergo *ukuthwasa*.

During the fieldwork, it transpired that it was necessary to adapt the interview guide and add questions that seemed to be in demand from the viewpoint of *amagqirha*. The questions mainly concerned health benefits. The healers want the government to make provision for their needs. The following questions were added:

- What is the standard of care provided by the *amagqirha* for their patients?
- What role does the government play in supporting respected *amagqirha*?
- What are the expectations of *amagqirha* from the government?

As much as *amagqirha* included the question on the standard of care provided when they responded to the questions, it was clear that they drew no distinction between that question and the one on their expectations from the government. Most of the time *amagqirha* responded better to the informal style of just asking them to talk freely about their lives than responding to questions that were asked. Therefore the combination of freestyle, informal life history narratives and using an interview guide was helpful.



#### **3.2.8.4 Focus groups**

Focus groups were mostly used when general questions about *ukuthwasa* were addressed amongst *abakhwetha* (trainees), general community members or the healers. Basically, focus groups existed of five to ten participants to obtain consensus or to validate certain issues. At one occasion in Alice, a group of more than fifteen *amagqirha* were interviewed. The information was recorded either on audiotapes and video cameras and subsequently transcribed and analysed. Participants were always made aware of how the recordings were going to be taped as well as of the protection of their information. Focus-group sessions helped to confirm the reliability of information gathered from individual interviews, especially when discrepancies occurred.

#### **3.2.8.5 Use of audio-visual equipment and additional material**

Data were collected using tape recorders, which was particularly helpful in rural areas where there was no electricity. However, where there was electricity, videotapes were used, especially for capturing ritual performances and ceremonies. In fact, not all rituals could be recorded by the use of visual aids since it was not allowed. All the restrictions imposed were respected, as these restrictions formed part of the agreement with participants from the beginning of the study. However, nothing escaped attention since tape recorders were used during interviews. Also, writing and recording in diaries were permitted by participants. Videotaping was restricted, mainly at sacred places: *komkhulu* (rivers), *enkundleni* (household kraals) and in *engetheni* (forests). The explanation given was that at such places *iminyanya* were not to be disturbed by light as it could incur their wrath. At such places noise other than that of songs was also not permitted; people had to speak in low tones to show respect to *iminyanya*.

#### **3.2.9 Observation as a core method in symbolical activities and gestures**

According to De Vos *et al.* (2007:281), an observation technique involves all sensory sensations such as hearing, smelling, touch and seeing. These techniques were implemented and nothing was taken for granted. It was observed how people reacted and responded to various stimuli, gestures and a variety of non-verbal communication gestures. Notes were made and at times the camera was used to capture certain scenarios, including behaviour and action. On most occasions various symbols, activities and gestures were used by participants and those needed critical observation. For example, most of the time jokes, songs, and certain actions (such as hopping like a baboon) would be performed without a

clear indication as to what *amagqirha* were doing. There was a tendency to assume that the researcher knew the actions. Yet as an intern, exposure to any rituals due to set restrictions pertaining to the training has not been permitted. Songs were also used to warn somebody about something or to make other *amagqirha* aware that it was time to perform a certain ritual. For example, it could be observed that when the time came for *ukuphehla ibhekile* (to stir *ubulawu* in a billycan) a song and clapping of hands would be sung by one *igqirha*, summoning others to leave whatever they were doing and to join the performance. A song – *ithongo malibuye* (dreams must come) would be sung, summoning the ancestors to give *umkhwetha* (initiate) *amathongo* (dreams). This command is afforded much respect and cooperation.

At times it triggered another gesture, for example, Matogu once made a gesture where her hand kept pointing to her head. Later on, one *igqirha* guessed what she was reporting; *igqirha* was singing and clapping for the song without her head bead lace called *icamagu*. *Igqirha* who made a guess made a frog's jump to a small saucer *entla* (at the far inside end of the house) came back and knelt in front of *igqirha* without her head bead. For a brief moment the victim was shocked and was apparently not aware that she was without the bead (as shown by her gaping mouth and the surprised look on her face). They both giggled but *igqirha* with the saucer kept pointing a finger to the saucer. She had to pay a fine, and she did.

The communication in this situation is nonverbal because the timing is a moment that commands total respect and humbleness to all – summoning blessings from the ancestors. The only vocal communication is singing and interruptions are only allowed when *umkhwetha* licks the foam of *ubulawu* in her billycan. She is also the only one allowed to talk and say clan praises as she stirs the herb mixture in the billycan. It became apparent that when exploring *amagqirha*'s performances one always had to be on the alert and should observe and query each and every move, gesture and action; otherwise it was possible to miss the meaning of each ritual.

Sometimes observations were recorded on how the environment would be prepared for a ritual, for example, the placing of *inxopo* (a special grass); how *amagqirha* and *abakhwetha* prepared themselves to be ready for activities; and unspoken issues like hiding something for *umkhwetha* to search for it. It was interesting to find out that there was a lot more information hidden than what was revealed. At such moments the assistance of an accessible *igqirha* could ensure the relevant information.

### **3.2.10 Data encoding and transcription**

According to the grounded theory, data encoding, analysis and interpretation begin with the collection of the data. As the data are collected, questions are asked to clarify and verify it. That process already includes encoding, analysis and interpretation. Therefore the processes involved continue simultaneously. However, for the sake of clarity, these processes are explained separately. During data encoding, the researcher is able to disseminate data into categories and begin to view processes (Charmaz, 2003:39). As data were collected, using a variety of methods, so were the methods used to encode and then transcribe it and vice versa. Data from observations were first recorded in the researcher's fieldwork diary and then typed to be stored electronically according to themes/topics and/or discourse. Where verification was still needed, such information was marked for verification later. Students involved in the research study also helped to transcribe the data from tape recorders and videotapes. Final transcriptions and the translation of all the tapes were the responsibility of the researcher. That allowed the identification of themes and discourses that emerged at an early stage. Students' transcriptions helped to identify certain themes that could have been taken for granted. Their questions and reflections offered an added value to validating the findings of this study because it was a collective effort of making sense of *ukuthwasa*.

#### **3.2.10.1 Verification process of the transcribed data**

All interviews were conducted in Xhosa and later on the information that related to the main aspects of the study was translated into English. In the beginning students helped with translations of such data but later on it transpired that too much information was lost. Students missed a lot of valuable information from gestures and other nonverbal cues. After translation, verification of data was often necessary. Consequently, follow-up visits to participants to verify the information were required before and after it was analysed. Verification included different participants. Data from individual interviews were mostly verified by means of focus groups and individual interviews with different participants. Having collected and transcribed the information, reflection and interpretation followed. Feedback was then again given to the respondents to validate data and interpretations.

#### **3.2.10.2 Gathering, processing and storing information**

As data were collected, it was easy to jot down, transcribe and analyse it, as the scenario was still clear in the researcher's mind. That assisted the researcher to link verbal and

nonverbal messages. Key themes, statements, terminology and certain key incidents were grouped according to relevant topics to allow subsequent associations to be made.

### 3.2.11 Data analysis and interpretation

Analysis starts from the point of view of the experiencing person (Bigus, 1994 and Charmaz, 2003). It aims to capture the worlds of people by describing their situations, thoughts, feelings and actions and by relying on portraying the research participants' lives and voices. Plummer (1983) suggests the use of narrative analysis to break down the participant's story into key elements, plots, characterisation, temporal ordering, etc. He further suggests that a story has a beginning, middle and an end that reveal someone's experiences (Plummer, 1983). His suggestions support Balcomb's idea on stories (2000). The same procedure has been implemented. Sometimes the trainers were expected to recount some critical aspects at the beginning, in the middle and at the end of their life histories. However, it was soon observed that that method was not working for some of them. It confused them. They liked to start from the end, where they were and then moved backwards. It was also difficult to understand their narratives as they did not all keep any chronological sequence in them. Consequently, decisions as to whether the information belonged to the beginning, middle or end regularly had to be made. It was a demanding skill but soon their linguistic and discourse strategies were managed.

The use of tapes, diaries and videos helped. Narratives had to be read and re-read to determine a chronological sequence of what they had told. For example, the training process was described as follows, "*Umkhwetha uyangena ufake intsimbi lakufika ixesha avume ukufa aze akulungela ukuphuma agoduke.*" (An initiate enters the initiation and you beat her when the time arrives she accepts the death [metaphor for illness in this case] and when she is ready to graduate you take her home.) That was a concise statement that all trainers and initiates gave in response to the question about the stages of the training. It was as if the training process was an activity of a week or month, yet it took years (see Chapter 5). It was responses like these that called for other questions in order to try and obtain the information needed. It was also observed that self-reflection was not the norm for *amaXhosa*. Narratives had to be broken down to capture the meaning and reflections on their lives and experiences. For the researcher questions from the supervisors and mentor helped to make meaning of what has been personally experienced. At times, listening to the participants and motivating them to reflect also kindled reflections about personal feelings and experiences whilst reading recorded notes.

Breaking down the clients' narratives into plots helped to highlight various phases of development and crises as well as successes in their lives, and in that way prominent phases in the trainer's life experiences were highlighted. In addition, it was possible to identify the stages of the initiation and certain levels of growth development in the healing capabilities of *amagqirha*.

According to Goffman (1959) and Plummer (1983), the categorisation of narratives into themes and plots that highlight certain major times of activities allows the researcher to obtain rich information that can easily be lost if careful attention is not paid to participants' general as well as specific statements. Being a participant allowed the researcher to observe how *amagqirha* and initiates represented themselves in their daily activities and some of the themes were picked up during such times. In order to construe meaningful arguments, access to *amagqirha* and other participants to verify the themes and the meaning behind them was a prerequisite. In that way discrepancies amongst *amagqirha* were corrected and certain truths confirmed.

In this process, some information would be refuted by *amagqirha* and the researcher would have to consult with the former groups to gain more clarity. In other words, where *amagqirha* rejected information it was easy to replace it with correct information.

### **3.2.12 Cultural analysis of texts and data collected**

Being an active participant in this research and using the methods already discussed, allowed the researcher to observe and record the activities of the participant as accurately as possible. It was easy to record how *amagqirha* perform various activities: rituals, divination sessions, songs, dancing activities, their interactions with patients and clients. This enabled the researcher to observe and record the structure, settings, procedures followed in various rituals, the communication skills, nonverbal cues: gestures and unspoken rules and codes of doing things. In cases where tape recorders and videos were used it was easy to record the communication styles and words verbatim as used by the participants. In certain texts in this study such statements and/or words, including the names of certain key songs sung at almost all rituals are given in relevant chapters (Chapter 7).

The statements used by participants are referenced as such using their names of *ukugula* (see Chapter 4). Their patients call them *mama* (mother), which is a sign of respect. In this study the divination sessions between *amagqirha* and patients or clients (*iindwendwe*) are not explored extensively because it is confidential. However, in the section that deals with

divination techniques, few examples of cases are given and pseudonyms or no names at all have been used for clients. Also, information on certain herbs used has not been recorded extensively except to mention them here and there. That is because there is already extensive research regarding the aspect and various workshops have been conducted in South Africa covering the medicinal use of plants and possible strategies to integrate traditional and Western medicine (Daneel, 1993; Tshikalange, 2003; Mulemfo, 1995; and Rukangira, 1998) as also revealed by prolific research data in the Nexus Database System and Medical Research Council (can Google search on these engines to retrieve data).

### **3.2.13 Managing the reliability and validity of data collected**

According to Marshall & Rossman (1989 & 1995), all research must respond to canons that stand as criteria against which the trustworthiness of the project can be evaluated. They paraphrase those canons as follows: 1) How credible are the particular findings of the study? 2) By what criteria can we judge them? 3) How transferable and applicable are these findings to another setting or group of people? 4) How can we be reasonably sure that the findings would be replicated if the study were conducted with the same participants in the same context? 5) How can we be sure that the findings are reflective of the subjects and the inquiry itself, rather than a creation of the researcher's biases or prejudices? (Marshall & Rossman, 1995:143-145).

Lincoln & Guba (1995:290) refer to the questions raised by Marshall & Rossman (1995) as questions establishing the "truth value" of the study, its applicability, consistency and neutrality. They match these values to the conventional positivist paradigm terms such as: internal validity, external validity, reliability and objectivity. However, the said positivist paradigm terms are inappropriate to the naturalistic or qualitative inquiry. Therefore Lincoln & Guba propose four constructs that more accurately reflect the assumptions of the qualitative paradigm as firstly, credibility – in which the goal is to demonstrate that the inquiry was conducted in such a manner as to ensure that the subject was accurately identified and described; hence the effort to describe and contextualise the subject of study in Part One of this study by describing the problem explored and how complex it is as well as the setting, theoretical framework/context, symbolic and cultural interactions involved. In that way the attempt to state the parameters, context and imposed boundaries of the study of *ukuthwasa* aspires to meet at least minimum validity in terms of the positivist paradigm, as well as sound inquiry in terms of qualitative inquiry.

The second factor is transferability (external validity), in which case the responsibility shifts from the original investigator to the one who would make that transfer of knowledge. In other words, the generalisation of the information in the qualitative inquiry is often seen as a weakness; yet such a challenge can be managed through the use of a theoretical framework or triangulated approaches. Triangulated approaches have been used in two ways in this study: by way of placing the context of *ukuthwasa* within three theoretical frameworks or approaches – the feminist approach, narrative approach and psychoanalytical approach (Chapter 3) to show how data collection, analysis and interpretation (Part Two) were guided by concepts and models describing *ukuthwasa*. Hence, the section on the data collection, transcription and analysis were managed by a triangulated approach – the grounded theory. In that way, the use of multiple sources of data helped to corroborate, elaborate and illuminate the research questions asked in this study. In addition to the personal narratives of the four trainers, various individual interviews, focus groups, families of *amagqirha*, and community members are incorporated. All these techniques helped to strengthen the study's usefulness for other settings as well as the verification of the 'truthful value' of the data collected.

The third factor is dependability (reliability). Whilst the positivist's notions of reliability assume an unchanging universe by relying on objectivity of facts, this is in direct contrast to the qualitative/interpretive assumption that the social world is always about being constructed, and the concept of replication itself is problematic (De Vos, *et al.*, 2007:346-7). Therefore this study seeks to account for changes that had to be made in refining and adding new questions during fieldwork to accommodate demands that one was not aware of during the initial stages of this study. In addition, an interviewing guide enabled the researcher to change or rephrase questions accordingly, as long as they were based on themes to be explored.

The final construct is conformability (objectivity). This is to ask whether the findings of the study could be confirmed by another. Asking this question removes the evaluation from some inherent characteristics of the researcher (objectivity) and places it squarely on the data. In other words, the data must help confirm the general findings and lead to the implications. Chapters 5 to 9 provide the results of the findings and sources from which the data have been collected and also relate such findings to other sources from other research findings apart from this study. The life stories of the four healers, as well as that of the researcher's journey, confirm the process, setting, context, complex nature and implication of *ukuthwasa* as well (Chapter 4).

In addition to the above discussion, Van Zyl (1993:291-302) also tested his findings against the four criteria developed by Lincoln & Guba's (1985) classic criteria and could prove that the credibility, transferability, dependability and conformability of research results were impeccable (see De Vos, *et al.*, 2007:347). Equally, Strauss & Corbin (1990:254-257) suggest that, if a yes response is given to the following seven questions, then the study is evaluated as a successful grounded theory study that contributes to the knowledge base of the scientific world. The questions are: 1) Are concepts generated? 2) Are concepts systematically related? 3) Are there many conceptual linkages and are the categories well developed? 4) Do they have conceptual density? 5) Is such variation built into theory? 6) Are the broader conditions that affect the phenomenon being studied built into its explanation? 7) Has the process been taken into account? 8) Do the theoretical findings seem significant and to what extent?

Looking at these seven questions and reflecting on the process followed to explore the phenomenon of *ukuthwasa* in this study the researcher is convinced that this qualitative inquiry was sound. For example, via the encoding process it was possible to identify key themes, statements, terminology and other relevant concepts and later on associations were made. In addition, life stories of key participants also provided other concepts that were similar or different from the data collected from other participants. Themes and concepts from these stories were linked and associated with both evolutionary and transformative processes that affect both the initiation process and practice of *amagqirha* as well to gender relationships, social, economic, political and religious aspects of their environment (see Chapters 1, 2, 4, 6 and 8). In that way, questions 1 to 6 were taken care of and managed according to the criteria needed for conducting a sound qualitative inquiry.

The theoretical framework and reports from other research findings conducted worldwide provided a sound basis and evidence to confirm the soundness of the findings of this study. This is revealed by detailed information not only from the background information to this study but also through the historical perspective to this study of *ukuthwasa* that depicted similar studies that evidenced the soundness of findings of this study, for example, those results from Hirst (2005); Campbell (1998); Cumes (2004) and many others. More so, the detailed explanation on the theoretical framework, the stages on the process of initiations and the discussion chapter indicate the insight the researcher had on interpreting the meaning brought up by linkages and associations made amongst the concepts and themes that were identified. The methodology used in this study also resonates with Richards's (2005) suggestions on how to manage qualitative data and how a researcher must try to avoid influencing her results with her personal biases. Wherever possible the researcher



tried to quote participants verbatim and give information from their worldview and where necessary clarified when information was from her own experiences. Consequently, it is believed that this study satisfied the appropriate criteria for a qualitative inquiry and may therefore be judged sound (reliable and valid).

#### **3.2.14 Documenting private and sacred information on *ukuthwasa***

Documenting sacred information in researchers' diaries, videotapes, and videocassettes created misunderstandings with participants and again an element of distrust was raised. The main issue was: how much did a participant have to divulge and how safe was that information in the hands of insiders like the researcher? Thus, it was crucial to remind participants of their rights not to tell anything which made them uncomfortable. Consistent emphasis was placed on the value of honest information as the information was going to be recorded and read by many people, including their grandchildren, in times to come. Sometimes it was necessary to stress that if they died before having had the opportunity to narrate crucial information, the information would get lost and their generations would suffer from the loss of that valuable contribution.

When participants understood that principle, it made them eager to confront one another during debates. In the end, the discourse sessions with them became more informative and more clarity was possible. Sometimes, while documenting took place, clients were often confused as to which information to permit to record to books and/or which information was to be recorded but kept private.

An issue was raised regarding information on ritual performances at certain stages that should be handled carefully, since it was private information to those not yet at those stages. More importantly, was the content of dreams at certain stages, for example, the stage leading to graduation? Also, names of certain herbs and *ubulawu* were not to be made public. One participant, Boniswa, took her time in explaining that secrecy about certain systems involved was to protect the profession. From this argument it transpired that the reality was that much information had already been as other people easily forgot, and as such, there were some transformations in the process created by a lack of continuity, as new groups introduced new rules and rituals.

Another issue raised by *amagqirha* was the issue of the exploitation of information by researchers. This provoked a heated debate on Intellectual Property issues, because the drafted National Policy on Intellectual Property Rights (IPR) on Indigenous Knowledge

Systems in South Africa has not reached the phase of implementation as yet. To address the issue of the storing and safekeeping of the information on *ukuthwasa* further, assistance was received from a Master's student whose thesis topic involved investigating how researchers could best document such information. However, with regards to the video recordings, the participants gave their consent to use the information in a respectful and discreet way.

### **3.3 CONCLUDING REMARKS**

This chapter consisted of two sections: the theoretical context and the methodology and fieldwork experiences. The first section examined three different approaches used in this study to try to describe the phenomenon of *ukuthwasa* and its epistemology. The three approaches seem to have one theme in common: emphasis on the reciprocal relationship between people, culture, and environment. In addition, the focus is on the need for acknowledgement and acceptance of the phenomenological narratives from insider perspectives in order to describe and explain complex phenomenon such as *ukuthwasa*, its abstract nature and how those who follow the process define and explain it. There is definite common ground between the theories that can be explored productively in the current inquiry. For example, all theories and/or approaches discussed allowed the researcher to delve deeply into personal life histories and reciprocal interrelationships that occur between those who *thwasa*, the resources and privileges brought about by universal nature and how those who *thwasa* acknowledge and accept their calling to be 'wounded healers with a mandate to heal others'. The approaches allowed the women to reclaim their identities and to take it upon themselves to address their phenomenological experiences on the journey of *ukuthwasa*.

On the other hand, the second section on methodology allowed the researcher to vest much energy in describing various methods used to collect data, analyse and interpret it. Ethical issues relating to the study are explained and how these were managed in various areas: the use of real names, visits to sacred sites, and storage of sensitive data relating to *ukuthwasa*. The issue of intellectual property rights was briefly visited and this is a critical issue that needs further exploration on its own.

The use of a triangulated theoretical approach in both sections provided a holistic approach to the study. It is hoped that with such background knowledge the reader will gain a mental picture and understanding of the content of the following chapters and why these approaches have been selected as the methods of choice for this study.



**PART TWO DESCRIPTIVE DATA AND REMARKS**

## CHAPTER 4 LIFE STORIES OF THE HEALERS

In this chapter a brief account of the spiritual journeys of the key participants and that of the researcher into *ukuthwasa* initiation will be given. The researcher's personal experiences in *ukuthwasa* permit reflections on *ukuthwasa* process as presented in this study, and provide a backdrop to various issues concerning *ukuthwasa* on which her colleagues, (*amagqirha*) may fail to expatiate. In addition, this story will also inform the dual role of the researcher being both an insider and outsider in this study. Such active participation embodies various identities such as scientist, researcher, theologian, and Western-trained psychotherapist. The stories are told as authentically as possible without any reflections except passion, humility, respect and selflessness in sharing that personal space with the world. The trainers' life stories provided retrospective information on the experiential, phenomenological and existential spiritual journey of *ukuthwasa*. Narrating the stories gave the trainers time to reflect on their own experiences and enhanced the understanding of their 'self' and those of their *abakhwetha* (neophytes/novices).

### 4.1 BACKGROUND TO THE RESEARCHER'S STORY

I come from a family of *amagqirha*. I was born at Tsengiwe Village, Cala in the Eastern Cape Province. I got married in 1972 at the age of twenty. I have four children: two sons and two daughters. I am also a grandmother to two boys and a girl. I was born out of wedlock and was raised by my grandparents. I grew up believing that my maternal grandparents were my biological (paternal) parents. I was mostly raised by my grandmother since my grandfather worked far away from home. Later on, I found that one of the girls whom I had considered as my sister was in fact my biological mother. She is the first-born in the family.

#### 4.1.1 Adulthood and intensification of afflictions

When I started working as a teacher, the sense of profound feeling became more pronounced. I could just sense or feel if someone was going to be ill. At times I dreamt about incidents before they happened to students in class. Later on, my grandmother instructed her brother, my uncle, who was *ixhwele* (herbalist), to give me herbal medicine so that I could stop dreaming and having such feelings. That is called – *ukuvala* (to close). For a while the medicine helped but when I got married the same dreams started appearing and I experienced similar feelings.

After six years of marriage I had various marital problems with my husband and every time I tried to understand them, my family and relatives always informed me that the problems were caused by my gift of *ukuthwasa*. My family and *amagqirha* were consulted and at times those I would meet on the street advised me to accept *ukuthwasa*. In that way my marital difficulties would be overcome. I refused. I was completely uninformed about *ukuthwasa*. As much as my grandma was *igqirha*, and my mother was an initiate at the time, I refused to *thwasa*. It was difficult for me to have friends because I always had misunderstandings with them, as well as at work. Similar incidents occurred at home and with my children. I was very sensitive and became angry very quickly. Most of the time I wanted to be alone and at times I just cried without any tangible reason. Often, I did not want to eat. I never felt hungry after I had not eaten for a few days. At such times I felt a need to sing church hymns or to preach and was calmed down.

There were also times when I thought that I had lost my money. When I complained about that, it was associated with the gift of *ukuthwasa*. I also had lots of problems raising my children who also experienced strange dreams and exhibited personalities resembling mine. They were moody, sensitive and difficult to handle. My family and I (in particular) were often involved in accidents. My car would be bumped even if I had parked it correctly and I always lost lots of money as a result of such incidents. I became so used to mishaps that I perceived myself as an unfortunate person.

#### **4.1.2 Entering scientific realms**

In my final year of the Clinical Psychology Programme in 1994, my sense of the calling to be a healer became stronger, but I still resisted. At that stage my dreams became more pronounced. At times when I saw patients in sessions, especially psychiatric patients, I fell asleep during consultations. The strange part, which my children still talk about, was that every time I tried to work on my Master's thesis, I became drowsy and fell asleep. I took long breaks from writing. At times I fell asleep when driving to the university, yet I never had an accident. The situation and incidents continued to occur and I felt frightened most of the time.

During the third trimester of my Master's studies, the professor who is English-speaking suggested that I consulted a physician. After numerous tests which all proved negative, the physician suggested that I went home and talked to my family about all my incidents. He further suggested that as much as my professor was trying to westernise me, I was still a traditional Xhosa woman. I did not understand what he was talking about, but I was very distressed and did not argue with him. Going home sounded well and was a possible option

to consider. I left his consulting room with eyes full of tears. I was definitely convinced that something was wrong but did not know what. At that stage, for the first time in my life I thought about witchcraft, but could not dwell much on that since I had little knowledge and experience about such events.

The professor gave me a week to go home. He and my Afrikaans-speaking supervisor were supportive. They both had a certain wisdom that I had to undertake a spiritual journey. I was not sure what they meant, but at that stage I was willing to listen to anyone who tried to explain my dilemma. I went home. To my surprise, when I narrated the entire story, my biological mother and her sister were calm. On 20 September 1994 my family decided that we should consult a popular *igqirha* Matogu in Tsolo (Chapter 6). On our return, my family told me that I had to be initiated into *ukuthwasa*. They advised me to forget about the degrees and education I had. I should just abide by my cultural rules, enter the initiation and all would be well. My mother emphasised that I had to be humble and respectful to my culture in order to transform my life to normality again.

I was the only black student in the Master's Programme and the only student who had not received a bursary. To me that was normal since I was the only black student in the group. Having been raised in a country that was ravaged by colonisation and the apartheid system, I had no choice but to associate my experience with the racial and political situation of the time. Yet, to my surprise, my family attributed the problem to one of the difficulties caused by my resistance to undergoing *ukuthwasa*. Their comments surprised and confused me because no-one in my family had ever told me that I had to *thwasa*. How was I then resisting it? That was a mystery and I was confused. I was not sure what to believe.

#### **4.1.3 Strategies to seek cultural bonding**

My mother suggested that I make *umqombothi* (sorghum/home-brewed beer) so as to *ngxengxeza* (to plead) with my *iminyanya* to allow me to complete my studies. I had to promise to undergo the initiation once my studies were completed. I was eager to comply as long as I would be relieved from the strain of dreams and incidents. I slaughtered a white goat to offer my *iminyanya* a meal.

I was asked to invite the community to attend the ceremony, as was the usual practice. On the day of the ceremony, the cultural procedure was followed: the prayer service was conducted before *umcimbi* (ceremony) started (an old tradition at my home). It began *endlwini enkulu* (inside the family main house) and ended *enkundleni* (in a space in front of

the kraal). After a prayer, my brother as the eldest male in the family had to say a few words. He started by *ukunqula* (saying our clan praises), welcoming those who honoured the invitation and to brief them about the reason for the occasion. In turn, I also said a few words telling the community about my misfortunes and reasons why I made the sorghum. Thereafter, I pleaded with my *iminyanya* to allow me to complete my studies. I also promised to humble myself, and that upon completion of my studies, I would accept the call. I requested them to give me *intlantla* (luck) to obtain the bursary for the Master's Programme and a job immediately after graduating. My mother and aunt followed to support my prayers and pleas and lastly, community members were given a chance to take turns talking. My mother was allowed to say a last word in both instances. She was short and concise:

*"Ndingulela indlela ka Nomfundo icace ibemhlophe njengenyanga elwagcwebeni nimkhokele Madlomo, Mamvulane, Bhayi, Mangethukazi, Mazengele, Masukwini, Makhwemte, Mandlovukazi de iyokuphuma intombazana elugqatsweni. Asisenabazali sithembe nina. Nimnyamezele umntwana ufundile; nini nabamnike loo mfundo kwaneli zwi le Nkosi. Camagu!"* (I pray for Nomfundo's journey to be clear and as white as the moon at the seashores, that you lead her, Madlomo, Mamvulane, Bhayi, Mangethukazi, Mazengele, Masukwini, Makhwemte, and Mandlovukazi until the young lady wins the race. We have no parents; we trust you. Be patient with her; the girl is educated; it is you who gave her that education and the Word of God. *Camagu!*) My mother repeated these words like an incantation during both instances and both times she ended up on the verge of crying. She was emotional but calm and I was not sure why.

The night before I left home I had a dream. I entered the university office at the clinic. My professor's administrator came to me smilingly and handed me a long, brown envelope. I woke up before I could open the envelope. I told my family about the dream and my mother suggested that I was going to receive a bursary. I did not believe that. On my return to the university, the administrator welcomed me and had a brown envelope in her hand. It was a bursary letter from the Medical Research Council. I cried with mixed feelings, astonished but happy that my dream had come true. I phoned my mother and reported the outcome of my dream. She was excited and persuaded me to understand and acknowledge these revelations in a serious way. I promised.

After the ceremony at home, I had peace of mind. All the frightening incidents were gone but the dreams and other revelatory incidents continued. At last I was aware of what was happening. I successfully completed my Master's Degree in Clinical Psychology in 1994 and



started working as a clinical psychologist the following year, 1995. While I was working in the field and things appeared to be working fairly well, I forgot about the promises to *iminyanya*.

#### **4.1.4 The second phase of the afflictions**

It was not long before the misfortunes started recurring. At that time I worked for the Department of Correctional Services in East London. One Saturday as I left the compound to join the Manyano's gathering I had to stop at the gate to sign a register. Suddenly I heard a loud 'bang' on my side of the car. The window of my car was smashed and my door could not open. Apparently, a bus driver, who was talking to a security guard whilst I was signing the register, reversed into me without looking in his mirror. That was the beginning of many crises that occurred one after another up to the end of that year.

The last straw was at the beginning of the following year on New Year's Eve in 1996, when my son Lucky was shot. The bullet penetrated the back of his neck through the internal structures and exited below his right eye. How he survived that accident was a miracle; even the doctors could not explain it. He was admitted to hospital and was discharged with no complications after a month. I often remember that day of the accident. I woke up feeling very dull and lazy. I did not feel like going anywhere, but at midday I decided to go to the bank. I had to use an ATM machine since it was a holiday. I failed to draw the money since I had totally forgotten my pin number, which was most unusual. I went home and straight to bed. I woke up at the ring of a phone. A friend of mine told me that my son had been shot and admitted to Cala Hospital. I was very nervous, but managed to drive 120 km to join him at the hospital. He was well taken care of and was still alive.

#### **4.1.5 The early beginnings of the spiritual journey**

According to *amaXhosa* cultural practice, after such a misfortune a family seeks the advice of *umprofethi/umthandazeli* (faith-healer) or *igqirha*. I had no intention of doing that. However, my eldest daughter, Nontobeko, forced me to do so. She had just missed being struck by lightning a few days after my son's accident. After a long debate I agreed and we consulted a faith-healer. On consultation with *tata* (father) Siyobi (the faith-healer) in Queenstown, I observed that he belonged to St John's Apostolic Faith Mission Church, one of the largest independent churches in South Africa. It was founded by a Sesotho woman, *mama* (mother) Christina Nku, also known as Ma' Nku, of the small farming area in Evaton, Vereeniging, in Gauteng Province. Faith-healers at that church use a Bible and light three candles for their

basic therapeutic procedures. The same procedure was followed for my assessment and diagnostic session.

After *tata* Siyobi had repeated the Lord's Prayer three times (twice in Xhosa and once in Sesotho), he gave me the Bible to open. The Bible opened at 1 Kings Chapter 17. The main theme was about the destruction of Jerusalem. Then he read the passage and interpreted it in the context of my problem. All that time I was restless and irritable. In my opinion, the whole routine was a waste of time. The worst part was the fact that *tata* Siyobi appeared to be an ordinary man, humble and shabbily dressed. Furthermore, he was not well educated. That was significant to me. As a well-educated person I felt that I was wasting my time with the man.

As if he had read my thoughts, he started talking to me. He wanted to know the whereabouts of my son who had an accident and was in hospital. "What happened to him?" He asked. I was cheeky and said, "Tell us". His questions irritated me. His response was humble, calm and soft-spoken. He was not at all concerned about my agitation. He went on to tell us about everything, including the lightning that had missed my daughter. He also quoted almost 80% of the mishaps that had occurred, which he attributed to my resistance to enter the healing initiation (he was careful not to talk about *thwasa*). I had to be a healer. I argued the fact that, by training, I was already one. I mentioned all my qualifications and he just smiled and acknowledged all that information. Yet, in a soft voice he begged me to just forget who I was, to humble myself and enter into the initiation. He also quoted some of my dreams and contextualised them according to the practicalities of being *umprofiti ngokuzalwa* (born prophet). After a long and heated debate, my daughter started crying and begged me to save their lives and mine by accepting the plea to embark on a dangerous journey. I accepted *ubizo* (calling) for their sake.

I joined the St John's Faith Apostolic Church, thinking that at least it was better than joining *ukuthwasa* initiation. I had to take three baths at separate occasions and attend church services three times a day. In addition, I had to be baptised again by full immersion in water. The Methodist baptism on the forehead was not acceptable. That created a problem that nearly made me reject *ubizo* again. That doctrine was totally against my Christian understanding that a person is baptised once only. Ultimately, I accepted.

As I went through the faith-healing initiation process,<sup>36</sup> I was subjected to a second assessment by the Bishop of the Church, *tata* Mtini, whose headquarters are in Dimbaza Township in the Eastern Cape Province. He prophesied that I was a prophet by birth and that my ancestors were giving me a church that I had to found and lead. The church was going to have a huge membership. Later on, I was trained in how to use the Bible for *ukuhlaluba* (assessment and diagnosis) and how to carry out different types of treatments such as bathing, vomiting, giving enemas, massages and laying on of hands. Furthermore, I was taught to conduct different services and liturgy for specific services and other routine measures. Instead of using the roots and bark of trees, as *amagqirha* would do, I was taught how to prepare *iziwasho*<sup>37</sup> – as the medicinal mixtures used by *abathandazeli* (plural of *umthandazeli*) are called. Most *iziwasho* are prepared from generic medicines bought from the chemist. However, the methods of treatment are almost the same as those used by *amagqirha*: vomiting, enemas, bathing (cleansing through body wash) burning incense (*imphepho*) and other similar methods. I began the faith-healing initiation at the age of 42 years, 37 years after I had experienced the first characteristics of a healer. The training took one year.

An initiation in church, a ritual called *ikarolo*<sup>38</sup> (borrowed from Sesotho) was performed involving the slaughtering of a sheep. A plea was made to the ancestors to allow me to follow the faith-healing initiation instead of the traditional one. A whole-night *imvuselelo* (night church services) was held. Some parts of the sheep were burned in a sacred place in the yard specifically made for those holy sacrifices (see Chapter 6), based on the book of Leviticus Chapter 2. A small portion of blood from the sheep mixed with blessed water was used to bathe me as an initiate. I was called *isigulane* (a patient), a term similar to *abakhwetha* (initiates). *Isigulane* denotes being sick and therefore needing treatment. In this context, I was *isigulane* because I was sick in spirit and had to be spiritually healed so I could heal others.

After *ikarolo* ritual at home, I had to attend the church regularly. At times I had to stay at the church's mission for a few days. That is called *ukutrona*.<sup>39</sup> In addition, during that time I went

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<sup>36</sup> Faith-healing processes – *ukuthandazela* is closer to *ukuthwasa*. However, initiation involves a similar process of ritual performance but differs in structure and procedure. The church conducts it. It is short and less expensive.

<sup>37</sup> *Iziwasho* are herbal extracts used by *abathandazeli*. The terminology includes all types of mixtures from the kitchen house: salt; vinegar; bicarbonate of soda; pepper etc. to herbs: dried and burned bark of trees and other pharmaceutical products (Vaseline, Dettol, aloe, etc.) and dairy products: milk, cow dung, etc.

<sup>38</sup> *Ikarolo* is a ritual performed for a person preparing to be a faith-healer. The St John's Church believes that when a sheep (instead of a goat as in *ukuthwasa*) is slaughtered then ancestors will allow a person to leave *ukuthwasa* to be a faith-healer.

<sup>39</sup> Another term adopted from Sotho meaning 'to stay at the church for retreat, training and treatment'.

through a cleansing regime. I took routine baths, enemas, vomited, and fasted. Periodically, rituals such as *amahobe* (blessed meals) were conducted. The blessed meal involves the baking of scones (without baking powder as indicated in Leviticus 2). That was accompanied by tea, coffee, cold drinks, biscuits and white chickens (depending on whether a person is financially sound). This is the central ritual at St John's Church to appeal for help from God and to seek counsel.

After a year, the Bishop opened *ichibi* (wellness centre) for me at home. I had to engage in an annual thanksgiving where an ox or sheep was slaughtered and there were *iimvuselelo*<sup>40</sup> from Saturday to Sunday morning. That is to thank God and the ancestors for the successes at *ichibi*. At church, prophecies play a bigger role than in *ukuthwasa* initiation. Eventually, I remained in the St John's Church for two years. In my case, accepting the church training before *ukuthwasa* caused further problems. I still had a problem with persistent dreams about my ancestors.

The clapping of hands and the ringing of the bell at church disturbed me. Although I was trying to adapt to the new structures and form of St John, I still had days when I felt like losing myself, as if going to a trance. I could cry and feel agitated for no apparent reason. Later on, I learned what my problem was. Bishop Mtini explained that *umoya* (my spirits) was high.<sup>41</sup> He prayed and gave me blessed water to drink. I felt better. Sometimes I stayed for two days for *ukutrona* (like a retreat) and attended the church services. *Tata* Mtini also insisted that I went home every Sunday so that I could lay hands on my own patients and pray for them. That helped because it relieved and calmed me down. After a year, I experienced more problems than I had anticipated. I closed *ichibi*.

#### 4.1.6 Entering the *ukuthwasa* initiation

It was as if the ancestors were waiting for me to close the *ichibi*. At that stage my *amathongo* (dreams) were more pronounced and clear about the route to follow. I was overpowered by dreams of goats entering the church and me serving *umqomboti* (sorghum) at church. In 1998 my family suggested that we consulted with Matogu again. She told us that until I entered the initiation, my life would not change. In other words, my life would only change if I accepted to become an initiate. Matogu, said, "*Sele egqityiwe lo mntana ligqirha eliphelleyo eli izinyanya zimxonxe zamgqiba.*" (This child has been well prepared, this is a fully fledged

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<sup>40</sup> All-night church services.

<sup>41</sup> See Mabona, 2004 for a variety of terminology used in various instances.

*igqirha*, and ancestors have already prepared her) (see Section 5.1, p. 136). Matogu tried to convince my family that I had wasted much time and any further delay would cost my life or I could become insane or paralysed. She told us that she saw me in a wheel chair, as other people had told me before. To hear that again from Matogu reinforced my apprehension and fear.

Simultaneously, my family sought counsel with a local *igqirha*, the late Mzwamadoda, who repeated almost the same words as those of Matogu. He predicted that I was *umthandazeli* but had to be *igqirha* first in order to be grounded within my roots. I wanted to agree with him and wished that I could just be *umprofethi*, not *igqirha*. I asked what benefit I would gain by going through *ukuthwasa* instead of just being *umprofethi*. Furthermore, my dreams were about laying hands on people and not about being *igqirha*. He informed me that *ukuthwasa* was a foundation to ground me in my cultural roots and ancestors, which served as a concrete foundation for *ubuthandazeli* (faith-healing). My hopes were gone. He concluded by telling me that if I continued to hesitate to enter the initiation, I could soon experience more crises. I gave up and in 1998 at the age of 46 I decided to *thwasa*.

I had to retrace my footprints and cross over the Westernised boundary of education and Christianity to reclaim my birth cultural values. Little did I know of the richness and importance of *amaXhosa* rituals. Upon seeing Matogu again, Matogu informed me that I had to be beaded because I was already in trouble. *Intlombe* was held at her shack in Khayelitsha in Cape Town. I bought a packet of white beads, a white chicken, a bottle of brandy, a new *ibhekile* (billycan) and white cotton to make my bead laces. My niece, Nonkululeko, had already sewn a khaki suit (skirt and top).

Before *intlombe* started, I washed my body with the medicine prepared from various roots and bark for cleansing purposes. After washing I put on the new khaki suit. I brought water from the tap with my new *ibhekile*. Matogu put in pounded roots of different *ubulawu* (herbal extract from roots). I shook it with *ixhayi* (twig shaped like a fork) and ate the foam. While shaking it I had to praise *iminyanya* to request their wisdom to lead me along my new journey of *ukuthwasa*. Matogu asked me to stand up and face the other initiates who had formed a circle singing, dancing and drumming. I had to say a few words.

Matogu led me, as I was not sure what to say. I praised *iminyanya* (ancestors) from my parents' side, grandparents, in-laws, *igqirha*'s side (both paternal and maternal and in-laws). I asked them for guidance and protection and told them that I was now accepting *ukuthwasa*. I apologised for undergoing that in Cape Town and not at home without my family around, me but the follow-up ritual of *imvuma-kufa* would be conducted at home. Matogu supported

my apology with the ancestors and explained why I had to rush into doing this. She said, “*Kungenxa yokuba umntwana niyamhlupha ngoku ke sifuna nibone ukuba unyanisekile ekuwenzeni lo msebenzi nifuna awenze.*” (Because you are troubling the child and now we want you to see that she is honest in taking up the work that you want her to do).

Following that ritual, Matogu prepared the white beads and beaded me around all my joints (neck, elbows, wrists, ankles), including the head. I also had a pair of earrings prepared from the beads. During the beading, the initiates were singing and drumming, at different stages praising the ancestors. When Matogu finished beading, she stopped them and said, “*Ngoku ndimnika igama – Novintsholo ayakubizwa ngalo ukususela namhlanje. Kaloku intsholo uyiva ikude yile nto andilande apha, uve yona. Uze uyilulamele ingulo yakho mntana wam abantu bakowenu bakuphile, utyebile ngentetho yesiXhosa, akukho nto bangakunikanga yona.*” (Now I give her a name Novintsholo – the one who hears news – that will be used to call her from today onward. Because she hears the sound from afar, she came to me here. She heard the sound. You must be loyal to your sickness, my child, your ancestors have given it to you. You are rich, they have given you everything). After this ritual, I travelled back home to Cala to inform my family of the ritual ceremony.

With that initiation process, I was able to reclaim my own cultural roots linking myself with my ancestors as expected by the Xhosa tradition. Since my family only performed two rituals: *imbeleko* and *ukwaluka*, I had to undergo all the basic rites of passages as a way to *ukungxengxeza* (to plead) to *iminyanya* and for my protection from further afflictions. I underwent two critical rites: *intonjane* (female initiation) and *imfukamo*. I had to retrace my cultural links with my ancestral ties. Fortunately, *imfukamo*<sup>42</sup> was performed by *igqirha* while I was still at St John’s Apostolic Church. In addition, certain rituals were performed.

The first ritual I had to undertake was to cleanse my home of all problems and to connect with my ancestors. We call it *umsebenzi wekhaya/womzi* (work for the homestead). Thereafter, I had to undergo *intonjane*, an initiation ritual for Xhosa girls during the adolescent stage (Turok & Mlisa, 2004), the ritual bonds a prospective *umkhwetha* (initiate/novice) with the ancestors. It is a means of awakening *umbilini* (intuition).

After a year, I went through the various stages of training with Matogu (see Chapter 5) as *igqirha* as I was shown in my dreams. As I had no insight into the process, I relied more on my *amathongo* (prominent dreams), and on Matogu and her trainees’ support. Matogu and

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<sup>42</sup> A ritual done by placing a person in a round small hut made from reeds and grass. The hut is placed near the kraal – *enkundleni*. A person sits on *inxopo* and sits alone in the hut for several days (3-7 days) shaking *ubulawu* and eating the foam. During the stay in the hut other *amagqirha* and family members are always engaged in the night *intlombe* (séance).

her trainees had never gone to school and I was the only educated trainee she had ever had. That caused made other trainees to be jealous of me. During *ukuthwasa* initiation I not only learnt the terminology used in *ukuthwasa*, but also the ethical code, dressing codes and other rules and regulations about *ukuthwasa*. The stages of the training process brought about their own turmoil. The experiences changed me into a patient and devoted initiate in order to cope and adjust until I graduated in April 2000 at the age of 48. By the time I began this study (2003), I was in my third year as *ikrwala* (newly graduated *igqirha*), practising as an intern graduate *igqirha* to learn processes that were not taught during the training (see Chapter 5).

#### **4.1.7 The one world and the fulfilment of the prophecy**

In September 2007, I performed two rituals – firstly, *ukubuyisa izihlwele/abanrtu abadala* (to bring back ancestors) and secondly, *ukudibanisa izihlwele necawe* (incorporating ancestors and the church). The two rituals were to allow my skills to work harmoniously as ‘one world’. In that way, I would be able to use all the skills and experience learnt from both situations as well as to use the universal knowledge I had in one universal and unified world. My late uncle Vakele’s words echoed in my ears: *intwaso ayipheli*, (*ukuthwasa* has no end)<sup>43</sup> and indeed, it does not. At the end of the ritual, on 29 and 30 September 2007, the St John’s Apostolic Church, Rev Siyobi and Rev Mawethu Mabusela from the United Methodist Church where I was ordained as a pastor in 2001, came to conduct the service to install me as a new founder of my own church.

The founding of the church comes as an ultimate fulfilment of the revelations and prophecies by Matogu in 1994 and 2004 and by *tata* Mtini in 1996. The new church I have founded is the Episcopal Lutheran African Church. The name of the church was given to me through *ithongo* (dream) on 17 May 2001, a year after I had graduated as *igqirha*. I look forward to what the future brings. At this stage, I am open to all possibilities and welcome them with curiosity and calm rather than fear. I see the gift of *ukuthwasa* as an endorsement that God is using me for a purpose.

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<sup>43</sup> *Ukuthwasa* is endless, it is timeless and boundless and only death parts us from it.

#### 4.1.8 Reflections

*Ukuthwasa* is a reality for those who are called and cannot be denied. It knows no boundaries. *Ukuthwasa* has allowed me to uncover what was 'hidden' in me and has provided me with a platform to identify the 'hidden' qualities I have. Also, it gave me a platform to unravel the 'hidden' transcripts of not just the marginalised profession of *amagqirha* but also of the historically oppressed worldview of *ukuthwasa*. Going through the process allowed me to reflect on all the perspectives of my experience, as different worldviews in one broad universe with multiple dimensions. It simultaneously allowed the experience to shape me. I grew into a new, mature person. My antithetical body that was struggling to accommodate the traditional and Christian world has been transformed into a new constructed 'self', that of a healer with a holistic view of one universal world and I being *igqirha*. When I had to become *igqirha*, I became confused. I had no clear picture of how to reconcile my status as an academic and confessed Christian with my decision to become *igqirha* until I humbled myself and entered the initiation process of *ukuthwasa*.

#### 4.2 THE LIFE STORY OF MATOGU THE ISANUSI (SENIOR AND WISE IGQIRHA)

Matogu, the senior *igqirha* in Komanisi *iphehlo*, was a mature, tall, heavily built woman. One could not miss her mannish appearance, which also indicated her strength and braveness. She started to show symptoms of *ukuthwasa* at the age of twelve, but her father was stubborn and did not want to spend money on *ukuthwasa*. According to her, during a 'typhoid' fever outbreak – approximately in 1918, she was already in training to be *igqirha*. She graduated eight years later ( $\pm$ 1926) in her twenties. Since then she has been *igqirha*. Apparently she was a popular *isanusi* (senior wise *igqirha*). She had *abahlekazi/imilozi* (ventriloquist). *Abahlekazi* have names, "sisi (sister) and dlakaza umkhala (a male one). Matogu was also popular in Khayelitsha Township in Cape Town. The observations I made during my short visits to her both in Cape Town and the village of Tsolo were interesting. I would stay for a week or weekend and at times for two weeks. When in Khayelitsha, many clients came for consultations. The average number varied from four to five clients a day. Clients consulted with her for various reasons: most clients wanted *intlantla* (luck) to get jobs; others had stomach ache, headaches and problems with relationships; were in need of promotion at work; had infertility problems and pending court cases. Some clients were students at high schools, technikons and universities, mostly with bad dreams, poor concentration, relationship problems, fatigue and insomnia. There were about four



*abakhwetha* staying with her. As *abakhwetha* we took turns to assess, diagnose and treat clients with Matogu's guidance and support. All clients would be treated with herbs and would be given a date to come back again. Some returned and others did not. There were no written records for clients but she did not forget them. Her brief story is:

"At twelve years old, I would be out in the fields looking after my father's sheep. When playing with others it would feel as if someone was throwing stones at me. Sometimes I would hear some voices but others would not hear them. One day I picked up something which at first we (the children looking after the sheep) thought was a stone but it was different. I picked it up and all I can remember was a huge sound that blocked my ears and the next thing I remember is that I woke up in hospital. I had injured my hand and lost the fingers. I was then informed that I had picked up a hand grenade (*idamanethi*). Whilst recuperating I also had visions as if I were amongst the nurses and were healing people. I also dreamt about my grandparents and they were giving me *intsimbi* (beads). My father did not want to hear anything about my dreams. Later on I became ill. I had headaches, palpitations, noises in my ears and became very ill. I was taken to the local *igqirha* who told me that I had to *thwasa*. I went through the training under a very cruel and harsh *igqirha*. One day I ran away and went back home. In those years *abakhwetha* were beaten by sjamboks and male *amagqirha* were corrupt and would want to have sex with you. My father sent me back for the training, but to another *igqirha*, Sonkwelo, where I underwent training and graduated as *igqirha* after eight years. I had a difficult life time because I do not have a child of my own. The only child I had died at the age of twelve. I see my trainees as the only children I have. I have trained so many and cannot count them. *Intwaso* is like my child. I like it, respect and live it." She laughed and kept quiet looking down as if she were far lost in thoughts. Her other popular *isikhahlelo* (graduation name) was Zweliyakhukuma, lishukuma ekapa (Cape Town), e Vurnagen (Vereeniging), Maray Sitywathi (Murray Stewart). Her *isikhahlelo* indicates the places she visited to heal people and became popular.

#### **4.2.1 Reflections on the visit of Matogu's *abahlekazi***

I had my own experiences of how Matogu's *abahlekazi* worked. On 18 June 2003, I observed a very interesting session when Matogu's *abahlekazi* visited her. It was at night and we were already in bed. *Abakhwetha* slept on floor mats and our heads faced the wall so that our dreams could not be disturbed. There was a soft whistle above our heads *entungo* (on the roof). I heard other *abakhwetha* saying "*Camagu!*" I was curious. One of *abakhwetha* stood up and put out the candle next to Matogu's bed. The soft whistle continued and Matogu

joined the “*Camagu!*” response. At times I could predict what the whistle said and at times I could not make sense of it. Matogu began to translate what was being said. Apparently, *abahlekazi* came to welcome me and wanted to tell me some news. They wanted to know how I was. In addition, they came to tell Matogu to perform certain rituals for me and that my *ukuthwasa* was going to go well. I was impressed and amazed by that visit as it was my first experience with *abahlekazi*. I used to hear stories about this but never wanted to believe such *intsomi* (myth). That night, I heard it with my own ears. One thing though that disturbed me was that I could not see them. The switching off of the candle was an issue for me. Matogu explained that *abahlekazi* are very tiny people easily blown away by the wind. I could not see them, but could feel their presence. One’s ears would be full and one would sense the presence of someone without seeing anybody.

#### 4.2.2 My comments

I was amazed to see people in townships believing so much in *amagqirha*. A different situation occurred in Tsolo, however. There were few clients and at times I would not see a client during my entire stay. That led to Matogu preferring Khayelitsha more than the village. She would then only come back to the village in December. In the village, therefore, we (*abakhwetha*) practised how to conduct *intlombe* and *ukunqula* and we would go to the forest to pick up herbs. Matogu would then guide us on how to use different herbs in our treatment regimes. Simulation was the best method, as Matogu would quiz us on what to give if a person had certain problems. Most of the time, there would be time for her to lead various ritual ceremonies for us at our homesteads.

Matogu’s reputation as *igqirha* emanates from her experience of being *igqirha* from an early stage. Her (1) knowledge and understanding of the cultural and social aspects around *amaXhosa*’s aetiology of illness; (2) understanding of signs and symptoms of *ukuthwasa*; (3) ability to interpret and analyse the initiates’ dreams; (4) guidance from *abantu abadala/amakhosi (imilozi)* in assessing, diagnosing and treating clients; (5) knowledge and vast experience in dealing with *ukuthwasa*; as well as (6) the physiological processes of how the body works and a wise and vast knowledge of herbal remedies made Matogu the most trustworthy and popular *isanusi* (senior *igqirha*). Above all, Matogu was popular in a treatment plan called *ukumbulula*, that is, to search for the clothes stolen by witches in order to send a curse to the owner. She followed the *isikhahlelo* name given by her trainer. Her *isikhahlelo* was ‘Madumakude’ meaning being ‘very popular far away’, which she was.

At my village, Tsengiwe, there is valid proof of Matogu's skills in *ukumbulula*. My grandmother used to talk about how a young man, a teacher, who was apparently conceived by his late mother after consultation with Matogu. His mother was my grandmother's client and was referred by her to Matogu. Matogu accused witches from within her in-laws. Apparently, they stole the woman's underwear and used sorcery to make her infertile. Matogu's *abahlekazi* searched for the underwear and once found they were burnt. Then the woman underwent a cleansing treatment and after that, gave birth to four children, all still alive. The Western-trained doctors had given up and had told her she was unable to conceive.

Matogu was clever and I used to wonder how she would have been if she had formal education. She was a quiet person and would never blame any of her colleagues as they would do to her. She had a strong ethical code of practice and professionalism. *Ukuthwasa* was her passion and she lived what she was – a good *isanusi*. Her popular *isikhahlelo* of Zweliyashukuma describes her popularity in divination in various cities in South Africa. This name means 'to shake the world' and in my opinion she shook the villages, towns and cities which she visited by touching positively on the lives of those who consulted with her. She will always be in the minds of those who had contact with her.

### **4.3 THE LIFE STORY OF BONISWA**

Boniswa started having symptoms indicating the need to undergo the *intwaso* initiation at approximately adolescent stage. She narrates her journey by saying:

*"Xa ndiqala ukuqina amabele* (when my breast began to be strong). At first, I had persistent palpitations and headaches. I was taken to *igqirha* for assessment and diagnosis. On numerous occasions *inkathazo* (trouble)<sup>44</sup> was diagnosed. However, my parents ignored that. My father complained that *intwaso izindleko iyatshonisa* (*intwaso* is expensive). Later on, I had *amahlaba* (sharp chest pains). A different *igqirha* was consulted who confirmed the results of the first one by telling my family that *ndiqajiwe* (have been elected). The second *igqirha* also told my parents that I was sick because I needed *ukubhinqiswa*<sup>45</sup> (one of the

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<sup>44</sup> Trouble means *ukuthwasa* (see Chapter 2).

<sup>45</sup> This is a rite of passage that almost all Mpondomise girls have to undergo. A goat is slaughtered and a sequence of activities happen (has information if this is needed). Otherwise, apparently amongst Mpondomise girls this is one of the mandatory rites of passages for all girls, for their general health and in particular it is associated with fertility. According to Boniswa, failure to do this rite of passage may render a Mpondomise girl infertile. This is to an extent that an infertile young married woman if she does not conceive may be sent back to her maiden family to perform the ritual with a hope that the ritual would be a solution.

fertility rites of passage Mpondomise girls have to undergo, usually at adolescence). After the ritual I had a slight relief from that.

Later on, the same first symptoms, palpitations and headaches came back. That time I also had ringing noises in my ears and saw *imithinzi* (shades passing). At times I had *isiyezi* (blackouts). I continued with periodic medical treatments from *amagqirha* and getting temporal relief from such treatments. All *amagqirha* agreed on that *ndiqajiwe* and that I had to *thwasa*. The last straw was when one night I got so sick that the family thought I was mentally disturbed. I have no recall of what happened that night, except that I recall waking up in my house to find people from the village and *igqirha* amongst them. *Igqirha* beat the drum for me to *xhentsa* (dance). *Ndagula ndancama, ndizinyela nokuzinyela*. (I got so sick that I would soil myself.) That time the in-laws decided to consult with my maiden family and my father suggested that they consulted with *igqirha*. I had to *thwasa*. *Igqirha* told my husband that *imithinzi* I saw were *abantu abadala* (ancestors). *Igqirha* was Matogu in Transkei. Matogu was shown to me putting *intsimbi emhlophe entlokweni yam* (white beads around my head). On arrival at Matogu's residence, she refused to assess me. She said, "Soze ndixilonge *igqirha mna*" (I'll not assess *igqirha*.) She asked me to buy beads and I was beaded and that is how it all started. I stayed with Matogu, who trained me how to assess, diagnose and treat. We (with other *abakhwetha*) went to the forest to pick herbs, dry and pound them and put them into containers. When clients came, we were to assess them. In the beginning I would run away because I was afraid to assess and to make mistakes. But Matogu would look for me and ultimately I got used to it. The training was harsh and difficult. Matogu had a sjambok and it was used.

More often than not we had to make *iintlombe* (séance), learn songs and how to *xhentsa* and *nqula* (dance and sing clan praises). We also ate *ubulawu*, washed, vomited, steamed and had enemas to clean ourselves so that the dreams could be clear. Each of us had a necklace made of different herbs for *sikhafule* (to eat) when we experienced *umbilini* (palpitations). Boniswa is the name Matogu gave me because I saw her. The name means to be shown. My original name is Nohasani Fofolwane née Nobenzu Tshaka."

#### 4.3.1 My comments

Boniswa is also from a family flanked by *amagqirha* from both the maternal and paternal side. However, to trace the genealogy of that gift was very difficult (in fact, in almost all key participants) as in our tradition stories about *ukuthwasa* were not narrated to children, perhaps because of the stigma it carried. Boniswa started in 1970 to present with symptoms

of *intwaso* and after twelve years of periodic sicknesses she began the initiation process. She did not want it, a common characteristic of everyone (see Chapters 1, 3 and 6). She did not attend church. That is important to note because often people have the idea that only educated and Christian people reject *intwaso*. It is traditionally taken for granted that *intwaso yinto yamaqaba* (Dwane, 1998) *neengqola* (is a thing for illiterates and non-Christians) and people do not understand that even amongst illiterate and non-educated people there are some who do not acknowledge, accept or understand it. Boniswa's parents ignored her *intwaso* until she got married. Boniswa and her parents anticipated that *intwaso* would go away. Unfortunately, it never diminished. She then consulted with Matogu who initiated and trained her until she graduated eight years later. Boniswa now emulates the popularity of her trainer Matogu and has six *amakrwala* (fully fledged *amagqirha* under her training) and eight *abakhwetha* with a huge number of grandchildren (her alumni's *abakhwetha*).

#### **4.4 MANDLOVU IN BETWEEN THE TWO WORLDS**

Mama Mandlovu (Mother Mandlovu), as she is well known, started by *intwaso*. Whilst she was *umkhwetha*, she received a dream that took her away from her *igqirha*'s guidance. In her own words:

“When I was in Standard 7 (Grade 9) I became feverish and I consulted with doctors. Doctors could not determine what was wrong and my parents took me to four different *amagqirha*. My life suddenly changed and I preferred to sit on my own; I did not want to talk and was aggressive. At times I lost interest in anything and experienced *umbilini* (palpitations). I would cry for no apparent reason. I had a lot of dreams. The only thing I was interested in was the Bible study group, “*Ndingazi nento esingisele kuyo ndingafuni netshomi ndingumntu nje ozihlalelayo*” (I did not even know what it meant and, I did not have any friends.) *Onke amagqirha athetha into enye athi: “lo mntwana uyabizwa yaye indlela abizwa ngayo, abantu bakowabo bazindidi ezimbini abanye abantu banobuprofethi abanye ngamagqirha entsimbi emhlophe. Abantu bakowabo bayabangisana ngaye yiyo le nto ningamboni ukuba ugula yintoni noogqirha bengayiboni into agula yiyo. Umakhulu kamama wam uNomhi Mgujulwa wayengumthandazeli, woqobo kuba zange abephantsi kwamntu. Kufike utatomkhulu lo wase Rhabe wandinika iBhayibhile esithi, “imbokodo eyakuthi uyisebenzise ukuphilisa isizwe.” Ibhayibhile ifana nobulawu phaya emagqirheni.*<sup>46</sup> *Umntu ogula ngentsimbi emhlophe ozakuba ligqirha nalowo uzakuba ngumthandazeli, iinzima zibabetha bobabini ngokufanayo.* (All *amagqirha* said one thing, “This child is being called and her ancestors are divided into

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<sup>46</sup> This is like *ubulawu* as *amagqirha* do.

two groups. Others are prophets and others are *amagqirha* with white beads. Her ancestors are fighting about her that is why you and the doctors do not see what is wrong with her.” The grandmother of my mother Nomhi Mgujulwa was a faith-healer, self-made healer and had never undergone any training. The one from the Presbyterian Church gave me a Bible and said, “This is a grinding stone [for the herbs] to use to heal the nations. The Bible is like *ubulawu* in divination to a person who aspires to become *igqirha* or a faith-healer, they both experience crises the same way.”)

#### 4.4.1 My comments

Mandlovu supports the fact that *ukuthwasa* is similar to faith-healing. She was taken out of *ukuthwasa* training by her two paternal and maternal grandfathers (in a dream). One of the grandfathers was an elder in the Presbyterian Church of South Africa (he did not believe in ritual ceremonies) and the other was an evangelist in the Free Church of Scotland. He used to be called Ngxowa yemfene<sup>47</sup> and used to use herbs to heal people who were sick in church. He was *ixhwele* (herbalist). After a series of events Mandlovu eventually followed her *ubizo* through the St John’s Apostolic Faith Mission Church under the Reverend Bishop Jikijela in Port Elizabeth. Reverend Bishop Jikijela was a trainee under Archbishop PJ Masango in Germiston, an alumnus of Mother Christina Nku in Evaton. Mandlovu had to bring two chickens, a goat and a sheep for slaughtering and to be cleansed. That was an incarnation with her ancestors. She underwent a series of treatments: vomiting, steaming, body washes and enemas. According to her, all was done to awaken her *umbilini* (intuition) and make her dreams clear.

As much as the church tends to negate the ancestral ties it does acknowledge their existence and power. The sacrifice of a goat to the ancestors is performed as in *ukuthwasa*. However, in *ukuthwasa* the sheep is slaughtered in certain rituals and solely for *ukutyisa ukutya* (to feed the person) after a period of being restricted to certain foods (Chapter 6). In both *ukuthwasa* and *ubuthandazeli* reincarnation with the traditional ancestral ties seems to be a central factor although in *ubuthandazeli* these ancestors have to be begged to accept and respect the Christian dogmas. In a way, because of their strong ties with Christian doctrines, faith-healers try to persuade their dead people to repent. In Mandlovu’s case, she started with *ukuthwasa* and left for *ubuthandazeli* (faith-healing), the opposite of my spiritual journey (Preface and Section 4.1). The use of the Old Testament as the central theme for

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<sup>47</sup> Bag for the baboon – this is a literal translation otherwise the meaning is that the man used to carry a bag made of the baboon’s skin and would carry herbs in it.

healing is the practice of almost all the Independent Churches that I visited. That includes the use of sacrifice, burning on altars and burning of incense in their churches. That is why they also accommodate ancestral sacrifices because if they use the New Testament, Jesus' blood on the Cross is the only representation of sacrifice for our sins. That means that the New Testament has no other life other than a spiritual life through repentance from sins and being born again.

In African lifestyles sacrifices are not perceived as a means of repentance, but a means of cleansing and purifying the physical body to release the spiritual element that seeks spiritual repentance. In fact, Ezekiel's message about dry bones was to preach unity and strength amongst all the nations of Israel, the same theme that Mandlovu endorses: unity and strength between non-Christian and Christian ancestors. Hence in her dream, two grandparents with different Christian and religious beliefs come together. Even when she was presented with a Bible it was called *imbokodo* (grinding stone for herbs). The meaning of her dream resonates well with the message of the prophet Ezekiel, reflecting the interface between the traditional and the Christian world. However, Mandlovu does not really interpret this as such, but believes there is still a difference between the two ways of healing although there is evidence of similarities. She could also not give a clear concise difference either than saying in church they talk about angels instead of *iminyanya* (ancestors) as in *amaXhosa* divination system. That was not unusual to me because that is the reality where differentiation between the two is in terminology more than anything else.

#### **4.5 THE BACKGROUND ABOUT ZANEMVULA**

Zanemvula has not told me much of her story because, according to her, she had to obtain permission from her ancestors. At the time of writing this report her ancestors had not responded. However, from the acquaintances and friendly communiqué with her and working with her, I found that her mother was *igqirha* and her uncles *amaxhwele* (herbalists). She was initiated after experiencing spells of headaches, noises in her ears, withdrawal symptoms and palpitations. She would dream of wearing beads at her joints and at times dancing with *amagqirha*. After consultations with several *amagqirha* her mother took her to Sonkwelo, a male *igqirha* who was apparently popular at the time. That is where she met Matogu. They were both trained by Sonkwelo and Matogu was her senior. She often describes Sonkwelo as a kind but very strict *igqirha* who did not like a dishonest *igqirha* or *umkhwetha*. Gathering from other *amagqirha* from Komanisi, Sonkwelo was one of the senior *amagqirha* and was passionate about *intwaso* (noun of *ukuthwasa*). He would not

hesitate to discipline any *igqirha* who has done something wrong even if it meant sjamboking that *igqirha*.

After training, Zanemvula was taken to Khotso (a popular herbalist) by her mother in order to strengthen her protection against what she always referred to as the serious envy and jealousy amongst *amagqirha*. Her mother sold two horses to pay Khotso. There was often strong talk about the controversial herbalist Khotso amongst other *amagqirha* and how some *amagqirha* use sorcery against one another through sheer envy and jealousy. Zanemvula is now one of the senior *amagqirha* in Komanisi *iphehlo* and has many fully fledged *amagqirha* trained under her as well as many *abakhwetha* (initiates). According to her, Khotso would refuse to give *ukuthwala* powers to *igqirha*; he would give her more strength and protection. She is also a full member of the Dutch Reformed Church and a member of the Financial Committee in her church. She practises her divination at all times. In spite of her higher positions in the church, she is also a popular *igqirha*. Her *isikhahlelo* is Zanemvula because on the day of her graduation, God blessed the community with showers of rain. Rain in instances where a ritual is performed is viewed as luck and blessings from ancestors as well as a sign of acceptance of the ritual. After Matogu's death in 2004, Zanemvula became my mentor.

#### 4.5.1 Reflections

Zanemvula uses a strategy slightly different from others. For example, she does not have trainees staying with her full-time. She prefers trainees to pay regular visits and stay not more than a week because she tries to avoid unnecessary tensions. Again in her case (see Section 6.1.5, p. 194) it is noticed that Zanemvula greeted her clients and talked to them. That is because the clients were well known to her and were not there for assessment but came for a follow-up treatment. Because Zanemvula sought powers from a man whose credibility was often met with ambiguous feelings (Kgotso) her own credibility amongst members of her community and *amagqirha* had the same effect. I observed that even amongst her own trainees others view her as a person capable of causing both harm and good, depending on her mood. To me she appears very much like a person who had the authentic gift of healing as well as a person who likes fame and popularity. Her name must shine over and above others and if not, she was not happy. My observation was confirmed by one of her trainees who warned me that to be in her good books I had to praise whatever she did. That was very difficult for me and I decided to take the risk of not being loved, but surprisingly enough, she would show dissatisfaction about my confrontation of things but at



the same time showed admiration for my brevity. With her additional skills, she is powerful and popular. She is a nice person if in good mood. I observed that she was passionate about *ukuthwasa* and that would come up strongly when we went to the forest to search for herbs. She was very good at educating me on various things when we were on those trips, such as the burning of *impepho*, drinking a 'tot' (small glass) from a bottle of gin, pouring a little bit of gin on the ground and as well as sprinkling snuff on the ground just before entering the forest. We would also first *nqula* (sing clan praises). In the forest, we had to use low tones because our ancestors are there and certain wild animals that we had to respect, such as tigers and lions. On our first trip we saw a tiger but it just looked at us and put its head down. I was afraid but I relaxed when I observed that Zanemvula was calm. She told me that I was a lucky person and it meant that a tiger was my animal totem. I agree because I have many dreams about the tigers. Other issues she taught me are discussed in the daily schedule for *umkhwetha* (see Section 5.4, p. 164).

Zanemvula's attitude when we talked about *ukuthwasa* reinforced that to *amaXhosa* *ukuthwasa* is seen as a gift that one has to respect and honour. For *ukuthwasa* to have been honoured by a man of Kgotso's status gives it more authenticity and realistic epistemological roots. However, again, Kgotso's story and people's attitude towards Zanemvula reveal that the community holds powers of legitimating what is right and wrong. Conversely, her report about Kgotso's strict differentiation of *ukuthwasa* and *ukuthwala* means that, no matter what contradictory negative perspectives there were about Kgotso, there was also another side of goodness in him and respect of what is 'pure' and desire not to want to pollute it with his own materialistic, ambitious powers. Whilst there is a strong belief and evidence of *ukuthwasa* going through familial lineages and genealogies, it seems as if *ukuthwala* is a temporal gift that perishes with its owner. That is suggested by the fact that, according to research conducted, Kgotso's empire perished after his death. A similar incident happened to a famous *ixhwele* (herbalist), Gonondo, in the Eastern Cape after his death everything perished. To *amaXhosa* the reasoning behind that is that bought fame or powers do not survive and *ubugqirha* (divination) have sustained its existence because it is in the blood system of that family and not bought. More research should be done on that aspect in future to get more information about these two practices: *ukuthwasa* and *ukuthwala*.

## CHAPTER 5 THE STAGES OF *UKUTHWASA* – WE BECOME WHO WE ARE BECAUSE OF OUR FOLKS’ INBORN IMPRINTS

This chapter focuses on a detailed description of the process of *ukuthwasa* in various stages. The discussion focuses on the training stages, competences, and professional ethical expectations of *amagqirha*. Reflections are based on *abakhwetha*’s experiential learning as well as that of other *amagqirha*. The reflections also involve general existing perspectives about traditional healing modalities. Such reflections are discussed towards the end of the chapter in order to give more clarity; firstly, on the specifics of *amaXhosa amagqirha* and then to allow for comparisons later on.

*Ukuthwasa* is a unique and individual spiritual journey, which unfolds in diverse forms of *ubizo* (the calling). In addition, the basic principles of the training are described here, and individual variations are not specifically taken into consideration, as this would not be possible. The chronology of stages is described as clearly as possible, based on the information gained through the researcher’s own spiritual journey and that obtained from both the trainers and trainees during fieldwork. Due to the complexity of the diffuse nature of the initiation process, it is difficult to have a clear linear chronological explanation of the stages. Divisions between stages are sometimes diffuse. Again, due to regional variations, the stages are based on Komanisi *iphehlo* training process, however, reference to variations is made where necessary. It is important to note that the training of *ukuthwasa* is long with an average duration of three to eight years. It is not possible therefore to record the entire process. Key aspects in the training process are described as concisely as possible.

### 5.1 PREPARATIONS FOR *UKUTHWASA* INITIATION

Once a prospective *umkhwetha* and her family have confirmed that she has *ubizo* (calling) and has accepted the call, various assessments and check-ups are performed before the initiation process begins. The assessment is primarily based on whether the basic *amasiko* (customs) and key rites of passage were performed for the aspiring candidate (see Chapter 1, Section 3.2, p. 91; Chapter 7; Broster, 1981; Erdtsieck, 2003; Mqotsi, 1957 and Hirst, 2000). For example; the three crucial rites: *imbeleko* (rite of birth), *ukwaluka* (circumcision) and *intonjane*<sup>48</sup> (women’s initiation) have to be undertaken. If not performed, they are performed before an aspiring initiate is admitted in *ukuthwasa* or at the initial stages of the

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<sup>48</sup> Turok & Mlisa (2004).

training. In addition, if they were done but the acceptance of *ukuthwasa* was delayed, a ritual called *ukungxengxeza* has to be conducted (to plead with ancestors for guidance and advice is conducted). In most cases, a ritual, *ukuhlamba umzi* (cleansing of the initiate's homestead) is performed. That is often called for when there have been deaths in the family, accidents, misfortunes or *iinkathazo* (troubles), or what Erdtsieck (2003) refers to as coldness in the family. There are variations as to how these rites of passage and/or rituals are performed as well as stages during which they are carried out (see Chapter 2). Once all the necessary rites have been performed, the person is ready to enter the initiation process. Later, continuous testing of *umkhwetha's umbilini* (intuitive abilities and skills) is done, since *umbilini* is a major skill in divination process as a whole.

Other preparations involve the preparedness of the family. The family is a key component in the process. A family is responsible for guidance and assistance in the process of conducting family rituals. That is not *igqirha's* role. *Igqirha* may assist in leading the rituals but the family directs the process. Even in *ukuthwasa*, the family gives permission to *igqirha* to lead the ritual ceremonies. The family gets involved from the preparatory phases of the initiation to the graduation stage and beyond. The family provides all necessary resources and facilities needed during the process. The family is expected to give moral and emotional support to *umkhwetha* (initiate), and *igqirha* throughout the process. The family is responsible for inviting the community at large and local *amagqirha* to all ritual performances and ceremonies performed during the process. It liaises with *igqirha* and at times with *umkhwetha* on all necessary arrangements involved in the process. If the family fails or hesitates to perform such roles, then the process is hindered in various ways and *umkhwetha* progress may deteriorate or may even stop before completing the full process.

During the preparatory stage, the family often sits with the trainer to discuss the necessary arrangements for each training stage or rituals to be performed (Preface and Chapter 4). In cases where immediate family members do not avail themselves, extended family members or a person who has a similar clan as that of *umkhwetha* (initiate) is requested to stand on behalf of her family.

Furthermore, the preparations include the preparation of *amakhankatha* (special nurses or attendants/chaperones) for *umkhwetha*. Sometimes their selection is conducted during the initiation process. Often, the chosen people are those that *umkhwetha* sees in her dreams. They attend to her during the initiation process and later on in her life. In addition, the family is involved in the negotiations regarding *igqirha's* payment and how the payment will be made and an oral contract is settled. This contract is often revisited until *umkhwetha*

graduates. After those arrangements are finalised, the initiation process begins. Once more, *umkhwetha* submits to an intensive continuous assessment to prove that she is chosen as a healer. She undergoes various assessments under the strict supervision of her trainer. For example, she undertakes a test of looking for hidden and lost property called *unontongwana*. In addition, she conducts regular assessments and diagnoses for *iindwendwe* (clients coming for consultations) and many other methods (see Chapter 6). Once the trainer is satisfied, the training process is initiated. Sometimes some of the assessments are conducted simultaneously with the induction of *umkhwetha* in the initiation; hence it becomes difficult to have strict boundaries between certain stages of the training.

## **5.2 THE TRAINING STAGES OF UKUTHWASA**

The stages of the training are complex. The stages of *ukuthwasa* process are best described in seven stages. As mentioned earlier, the preparatory rituals could also fall within some of the stages especially in the third or fifth stage. Sometimes some stages are conducted simultaneously. For example, on two occasions in the field it was observed that from the fifth up to the second sub-stage of the sixth stage, stages may be combined or run concurrently. The variations make it difficult to have a clear understanding of their sequence; however, the stages are presented as clearly as possible. The description of the stages emanates from own personal experiences, observations during the fieldwork and the fragmentary descriptions given by *amagqirha* during the fieldwork.

### **5.2.1 First stage: Prediction stage of a chosen *igqirha***

The person is chosen as a healer by her ancestors at conception by a process called *ukuqajwa* (to be chosen) and there is no apparent chronology as to which child will be chosen; however, *amagqirha* have suggested that there is a strong possibility that it is often the first-born and last-born that is chosen. However, some of *amagqirha* were neither first-born nor last-born and one fails to notice the connection between the birth status and choosing a child to be a healer. In addition, it unfortunately became difficult to trace the *amagqirha ukuthwasa* family genealogies because of various factors, including a lack of their clear family histories. This will be investigated in future research. This stage is latent and only intuitive actions and behaviours foretell what a person will become. However, to others this is shown at birth (Preface and Chapter 4). Often the parents are aware of the child's projected destination (Chapter 9). However, in all fairness, the child is born with a script consisting of what Carl Jung refers to as the collective unconscious with her folklore information and

experiences (Section 3). Often there are unnoticed behaviours, including slips of the tongue and a bodily sensitivity to environmental cues, whether positive or negative. For example, as the child grows, she starts to show remarkable intuitive skills such as ‘sweeping the floor’ or ‘shaking hands’ to indicate the possibility of the arrival of visitors at her home. *AmaXhosa* refer to a child as a ‘natural *igqirha*’. The rich information at this stage is gradually brought to the fore as the child grows and matures, mostly through dreams, visions and a sensitivity to her environment. At times a child shows an extraordinary sixth sense as she matures (see Preface and Section 4.3, p.130).

### **5.2.2 Second stage: Manifestation of signs to indicate the *ubizo***

The signs of *ukuthwasa* might begin to manifest, but often the person may not be aware that she has to *thwasa*. However, others start the process by seeking counsel with *igqirha* at this stage as the dreams affect them. Quite often people still tend not to believe what they are told, especially when it is related to *ukuthwasa*. Others depend on their families’ responses at this time, which are often not helpful as other families resent and do not want to accept the reality of *ukuthwasa*. About 80% of *amagqirha* in the field confirmed this truth and said, “*Ngubani ofuna ukosulela umntwana wakhe ngoku kugula? Akekho.*” (Who wants to give this sickness to her child? Nobody). Only when troubles intensify for those aspiring to *ukuthwasa*, serious action is undertaken. The prominent manifestations are dreams and other symptomatic characteristics discussed in Chapter 8.

### **5.2.3 Third Stage: The stage of intense afflictions**

This stage is that of crises and/or afflictions. Crises become intense and the family or a person seeks various health alternatives, but nothing seems to help. This stage is often an alarming experience for both the person and family. Participants often start reflecting during this stage, since the intensity of the calling increases only at this stage; hence other researchers count this stage as a sign of *ukuthwasa* (Hammond-Tooke, 1989; Hirst, 2000; Broster, 1981 and Mqotsi, 1957). The researcher disagrees with this perception because in her experience, the person already has the gift at that stage and has done nothing about it. The manifestation of the symptoms presumably takes place to force the person to take action. Once the manifesting characteristics intensify, and both the person and her family seek counsel with *amagqirha* (Preface and Chapter 4). This is when verification and confirmation that a person should *thwasa* are often carried out.

#### 5.2.4 Fourth stage: Confusion, resistance and/or acceptance

It is important to note that all participants counted this fourth stage as another phase that almost all aspiring healers go through. The characteristics manifest in various stages and the stages are diffusely differentiated. The following sequence was apparent as the participants related their stories.

- The first stage of resistance is shock and denial. On confirmation that a person has to *thwasa*, both the aspiring *umkhwetha* (trainee/novice/initiate) and family initially deny the revealed truth. Sometimes parents admit the truth, but the aspiring *umkhwetha* refutes the truth (see Preface and Chapter 4).
- There is anger at self and blaming of the self and others and occasionally of ancestors for choosing her. “*Besazi nje ukuba andinabani ndizakuncedwa ngubani? Bathi ndiyithini?* (They know I do not have anyone. What must I do with it? Who will help me?), remarked one participant.
- After this a person often goes onto a bargaining stage. Questions such as, “Why me? Why my child?” are often asked. Those who ultimately undergo the initiation reach the acceptance stage after a long struggle. It is the manifestations or crisis situations that force them to accept.
- The acceptance stage is the stage of accepting the truth and ultimate giving in of the aspiring *umkhwetha*, and the preparation for the initiation begins.

The point is that no-one wants to *thwasa*. For example, irrespective of this truth, regression and vacillation take place between different stages. The vacillation may continue throughout the training process until a person is fixed in the middle of the training or just before graduation. This means that the full process of this stage or phases is commonly repeated throughout the entire training period. That is why some do not complete the training.

Vacillating feelings are often interchangeable with feelings of hope. Hope may help to inject positive energy that allows *umkhwetha* to proceed to the next step with vigour and enthusiasm. It is clinging to a particular stage that leads to endless problems. To become caught up in one stage delays the process and depletes the energy to continue. *Amagqirha* view that as a punishment by ancestors. While some may resolve their resistance, others do not and remain trapped in a particular stage for life. This may lead to a person accepting,

enduring or rejecting the process, and subsequently she stops without completing the training.

Zanemvula (2006) warned that the resistance stage poses certain dangers to the aspiring *umkhwetha* or the one already in the training if it is not well managed. “*Abantu bayayidelela into yabantu abadala, badlala ngomlilo. Intwaso yona iyaphambanisa, iyabulala, iyingozi ifuna umntu ayivume ayilulamele acele kubantu abadala bamlungiselele.*” (People are disrespectful of ancestors, they play with fire. *Intwaso* makes people mad, it kills, and it is dangerous; it needs a person to accept it, respect it and request her ancestors to prepare for her.) This means that not only the life of the trainee is at stake in such instances but the lives of the entire family.

### **5.2.5 Fifth stage: *Ukuvuma ukufa***

This stage involves a series of activities that could be categorised into sub-stages: the sub-stage of *ukungqawa* (beading) and that of *ukungqwamba* (wearing goatskins), with two ritual activities: cleansing and acceptance during each sub-stage.

#### **5.2.5.1 First sub-stage – *ukungqawa***

The family prepares a small ritual, which involves *intlombe* (séance) with *igqirha* and her initiates and/or few *amagqirha* and family. *Umqombothi*, a bottle of brandy and *imbabhama* (a white chicken) is slaughtered for ancestors. It is a one-day activity that includes a whole-night *intlombe*. During this ritual, *umkhwetha* is beaded with white beads around all the joints including the head, neck, wrists, and ankles (see Figure 5-1). She is given two sticks or a stick and a spear depending on her unique instruction from the ancestors. In addition, she is weaned from her own clothes and wears a uniform until she graduates. The uniform is either *khaki* or white dresses or skirts and shirts. The initiate loses her identity and takes a new identity. She is given a new name from her *igqirha*'s ancestors, *igama lokugula* (the name for her sickness). She begins to use *igqirha*'s surname. She is incorporated into *igqirha*'s family and is perceived as a child of *igqirha* (Chapter 1). The symbolism of being born in *igqirha*'s family is a lifelong perception relieved only in death.



**Figure 5-1 Male *umkhwetha* – dressed during *ukungqawa stage*– standing behind *amagqirha*. Note that male initiates dress like women.**

In turn, *abakhwetha* (plural of *umkhwetha*) are expected to show this submerging into a new family also by means of giving financial as well as social support to *igqirha*, in the same way as *igqirha*'s biological children. They even call her *mama* (mother) (see Chapter 3, Chapter 9 and Erdtsieck, 2003).

In most cases, this stage often takes place simultaneously with the second sub-stage. However, almost all training areas selected for this study implement this sub-stage. The explanation is that this stage is implemented as a primary measure to apply some first-aid treatment and a temporary treatment measure for *umkhwetha* who has to prepare for the second sub-stage. *Igqirha* gives *umkhwetha* two sticks for *umkhwetha*'s protection wherever



she goes. She must never use them to fight others. At this stage a new name is given – *igama lokugula* (sickness name). It is at this stage that Matogu gave the researcher the name Novintsholo, and to Boniswa her name is that of *ukugula*.

#### 5.2.5.2 Second sub-stage – *ukungqwamba*

This stage involves three series of activities: *ukuhlamba* (cleansing), *ukuvuma ukufa* (to accept death/illness *ukuthwasa*) and *ukubekwa ephehlweni* (to be inducted or baptised into *ukuthwasa*) and ultimately the wearing of the goatskins. This stage is known as the stage of *ukungqwamba*. The goat serves as a strong link between the trainee and the ancestors. The goat skins are the symbolism of the acceptance of the new spiritual life by the trainee. The skins are tied across the breast to keep warm and close ties with the ancestors as the heart is in that area. Some are on the legs and wrist to strengthen those parts. The smell from the skins is believed to provide soothing aroma to ancestors when visiting the trainee. Above the head are bloated bladders (gall and urine). The attire also mark the spiritual stage of the trainee.

#### 5.2.5.3 *Ukuhlamba* – cleansing ritual

*Umkhwetha* has to be cleansed by herbs (body wash), vomiting and at times enemas. Her hair (head, armpits and pubic area) is cut and she undergoes *ukuhlolwa*<sup>49</sup> (looking for evil marks on her body). The cleansing ritual is to ward off evil forces and to make sure that *umkhwetha* starts her spiritual journey cleansed of bad omens. The ritual is performed by *igqirha* and a goat is slaughtered outside the kraal as a sacrifice to *iminyanya* to request their intervention to remove *isimnyama* (darkness/bad luck) and bless *umkhwetha* with *ukukhanya* (enlightenment) in her journey (Mabona, 2004). In addition, a chicken is slaughtered for the same purpose and a bottle of brandy, matches, tobacco and sorghum is prepared. All the items are taken to *indlu enkulu* (family house) by a male representative of the family and are placed at *eziko* (fireplace). *Umkhwetha* (initiate/trainee/novice) is placed *entla* (at the far inside of the house) and she sits on *ikhuko* (grass mat). *Amagqirha* are placed in this house or at another house. The family brings the animals for sacrifice to *amagqirha*.

The male spokesperson of the family get up and after clan praises says, “*Camagu magqirha, sizise incamazana; imbabhama namanzi ayo amhlophe/bomvu kunye nebhekile*

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<sup>49</sup> *Ukuhlola* is a ritual that is done away from the homestead where a person is washed with a herb that is too sensitive to the body. After that an *igqirha* takes a razor blade and cut all bad marks (*iintlanga*) that are believed to be result of being bewitched. Such *iintlanga* are believed to interfere with a clear dreaming process.

*yomqombothi ukuhlamba uNovintsholo. Oo Dlomo, Sophitsho ... badedise ubumnyama kuvele ukukhanye simhlamba isimnyama namashwa ngale bhokwe. Siyanicela nimnike amathongo abone apho aya khona. Camagu!* (Camagu! Magqirha, we brought the goat, chicken and its water [meaning drink] white/red [depending on whether brandy/gin] and a billycan of sorghum to cleanse Novintsholo [name of *umkhwetha*]. The Dlomo clan is chasing the darkness away so that light should come in; we cleanse her with this goat. We request that you give her vivid dreams to give her direction. Camagu!) During this period the animals are placed at the doorway facing *umkhwetha*. A spokesperson for *amagqirha*, often a newly graduated *igqirha (ikrwala)* or a senior *umkhwetha*, utters a vote of thanks to the family for supporting the spiritual journey of their child. She always adds words such as, “*Sicela kubantu abadala banongezelele apho nithathe khona ningayeki ukumxhasa uNovintsholo. Camagu!*” (We request ancestors to add where you have taken and that you do not stop to support Novintsholo. Camagu!)

Following this, the trainer or a delegated *igqirha* leads the ritual performance and *amagqirha* give orders that the goat and the chicken must be slaughtered and cooked. They must be slaughtered outside *ubuhlanti (kraal)* and its blood discarded. *Umkhwetha*'s head, armpits and pubic hair is cut and the hair is burned later. She is washed with a specially prepared herb mixture for the occasion outside the yard at a distance from home. A person delegated by the trainer takes the responsibility of making sure that all goes well. Once *umkhwetha* is washed she wears a new uniform. The goat and chicken as well as sorghum are cooked and eaten on that same day. Later that same day, if possible, the second activity begins. That night her colleagues conduct the whole-night *intlombe (séance)*.

Sometimes it is not possible to perform these activities the same day but it is often common practise. Usually *amagqirha* would arrive in the afternoon (15:00) to conduct the first ritual so that, by the afternoon session, the meat is finished and the second ritual may begin. On two occasions it has been observed that the two activities started simultaneously, but that practice was critically refuted by many *amagqirha* and some community members as totally wrong. The critical reason given was that it is not possible to combine *ubumnyama* (darkness) and *ukukhanya* (enlightenment). Again, those against the practice perceived the new practice (as they experienced it) as against *amaXhosa* cultural view in that too much blood shedding at the same time is not permitted by their culture. As a result, an incident of that nature is likely to be perceived as *ukuthwala* (Focus Group, 2006).

#### 5.2.5.4 *Ukuvuma ukufa and ukubekwa ephehlweni*

The two rituals: *ukuvuma ukufa* (accepting *ukuthwasa*) and *ukubekwa ephehlweni* (connecting *umkhwetha* with ancestors – a sort of baptism or induction session) take place simultaneously. *Incamazana* (goat), *imbabhama* (chicken) and a bottle of brandy<sup>50</sup> are used for each ritual. A similar procedure and communiqué (as in the previous ritual) is followed, except that both goats have to be slaughtered *ebuhlanti* (inside the kraal). It is now imperative that both goats *zikhale* (should bleat). At their bleating all should say, *Camagu! Camagu!*, as that is the signal for the blessing, the acceptance, and the thanksgiving gesture from the humble community at large to *iminyanya*.

Before the goat is slaughtered, it is brought to *amagqirha* (see **Figure 5-2**) and after clan praises and speeches *igqirha liphehla ubulawu* (shakes *ubulawu* in the billycan) (see Figure 5.3) and lets the goat eat the foam of *ubulawu* (see **Figure 5-4**), while *igqirha* smears the foam on its body.



**Figure 5-2** A sacrificial goat is shown to the family and *umkhwetha* for clan praising

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<sup>50</sup> This one bottle refers only to brandy given as a gift to ancestors, otherwise for the ceremony a cases of brandy are bought.

The rest of *ubulawu* is used for *umkhwetha*. When she is baptised (*phehlelela*), she wears a short skirt with only a bra – sometimes nothing at the top – and sits next to *iziko* connecting with *iminyanya* while she faces the east. This is a style performed in all ritual ceremonies conducted for her, especially when she has to *phehla ubulawu*. A billycan with *ubulawu* is placed on her head while *igqirha* shakes *ubulawu* and sings the clan praises asking *iminyanya* saying, “*Ndicela uNovintsholo nimvule intloko nombilini akwazi ukucalula iingxaki zabantu abone umhlola. Simbeka ephehlweni namhlanje nimkhanyisele.*” (I request that you [the ancestors] open Novintsholo’s head [brain] and intuition so that she can assess and diagnose people’s problems. Today, we initiate her, please enlighten her.)



**Figure 5-3** *Igqirha liphehla (shakes) ubulawu*

Then the billycan is placed down and *umkhwetha* shakes it herself, saying clan praises and eating the foam and later on smearing it on her body and putting a little inside the nose and ears for sensory stimulation. She stirs *ubulawu* and places the billycan *entla*, and sits there.

She is given a new blanket – *ubonti bhayi* (a dark-brown blanket used by boys). This activity is referred to as *umkhwetha ubekwa ephehlweni*, the same as Broster (1967:87) and Mabona (2004:342) both refer to as *ukufakwa ebhekileni*. The goat, chicken and all gifts are

brought into the house; the family members shows it to her and *amagqirha* and tell them, “We bring these to Novintsholo to make sure her initiation goes well with this goat, chicken, bottle of brandy and billycan of sorghum and snuff. May her journey be guided and blessed by *iminyanya*, darkness to move away and light come.”

Following this, she sits entla (at the far end of the inside). She sits there the whole night while she shakes and eats her *ubulawu*. She washes her body with *ubulawu* at 4:00 the following morning at *enkundleni* (open space in front of the kraal). The two *imbabhama* (chickens) are slaughtered and placed at eqongeni together with a glass of drinks and brandy. These are the gifts to *iminyanya*. A ritual is performed for *ukuxhoma iqonga* (placing of the gift) (see Section 7.1, p. 203).



**Figure 5-4** *Ibhokhwe itya ubulawu (goat eating the foam of ubulawu).*

From the two goats, *umkhwetha* eats *umshwamo*, a piece from the right side of the shoulder blade. That is roasted *eziko* (fireplace) and *umkhwetha* eats it as another binding gesture to her *ubizo* (calling). The eating of this piece of meat is called *ukushwama*. This is done immediately after slaughtering before anybody else eats the meat. The rest of the meat is placed next to *umkhwetha* in a particular way, similar to that of the *incamazana* for *ukubekwa*

*ephehlweni*. *Umrosho* (right shoulder blade, right leg, the head and *injeke* (duodenum) is placed next to the wall closer to *umkhwetha*. *Ithumbu elimhlophe* (white intestine) is cleaned and hung next to her. The following day all the meat is cooked and all the bones from these parts are kept and burnt later on another occasion. Pieces of skin from the two goats are cut, sewn into strips and worn by *umkhwetha* around the joints and across the chest (see **Figure 5-5**). That is called *ukungqwamba* (wearing of the goatskins).



**Figure 5-5** *Umkhwetha* at the stage of *ukungqwamba*

The family gives her a spear to use to slaughter her future goats but never to stab anyone with. In certain families *umkhwetha* gets *imvubu* (sjambok) as a protective measure as well. These tools she carries with her wherever she goes. One member of family once told *umkhwetha* that, “I give you, Nozihlwele, this *imvubu* as a symbol to fight all illnesses and diseases that clients will bring to you. Never assault anyone with it.” Although the researcher has *imvubu*, it was given because of her dream; and as a result she was the only trainee who had it under Matogu. She informed the researcher that at Komanisi that was not the practice. That is contradictory to what they tell *umkhwetha* at the beginning, namely that a trainer follows the dreams of *umkhwetha*.

From the two goats slaughtered (*ukuvuma ukufa* and *ukubekwa ephehlweni*), *inyongo* (bile) and *isinyi* (bladder) are taken. These are carefully opened, emptied and blown up like a balloon; then they are tied and sewn to the head bead. The head bead at this stage is called *uhexa* (loose/hanging) and is broad and covers the forehead (see Figure 5-5).

This is the stage where an intensified training begins. The trainer is entirely convinced that *umkhwetha* has a calling and she has committed to it. She has to demonstrate skills and abilities in the divining system (assessments, diagnosis and preparing treatments for clients). Her exclusion from family life and social life intensifies and new restrictions are introduced. Her food restrictions differ markedly from the previous stage. Restrictions are placed on milk products, potato products and beans. In addition, she is not allowed to eat food from the sea and meat from the lower parts of the animal (goat, sheep and ox). She must also help in mentoring her juniors. Most of the time, *umkhwetha* is expected to work independently, but under the strict guidance of the trainer. She becomes an assistant to her trainer. She can also lead certain procedures and rituals under the guidance of either her trainer or *ikrwala* (newly graduated *igqirha* – an intern). Moreover, she must demonstrate more expertise and knowledge in understanding how various herbs are collected, stored and used.

This stage is often performed for two days and on the morning of the third day, *amagqirha* leave after performing a ritual of *ukothula iingcaza* (see Section 7.1, p.20216). *Inxopo* (special type of grass) is burnt by one of the family members after *amagqirha* have left (see Section 3.2, p.91). *Umkhwetha* leaves with *igqirha*. Her homecoming was only temporary for the ritual performance. If she has not yet been with *igqirha* (in cases where the first sub-stage was not conducted), that becomes the first stage of her separation from her family. She will stay with *igqirha* until she is granted permission to visit her home. In the case of *umkhwetha* who is employed she stays with *igqirha* for an average period of three days (and less at times) and is then granted permission to go. She receives all instructions to remember and practise. She is expected to make regular contact with her *igqirha* and to keep reporting her dreams.

#### **5.2.6 Sixth stage: *ukuphuma***

This is the last stage of the intensive training that prepares *umkhwetha* to be a fully fledged healer. It proceeds to graduation. It consists of four ritual activities: 1) *ukutshotsha* (to be ragged); 2) *ukugongqa* (to retreat); 3) *ukubaleka enkundleni* (to run); and 4) *ukubekwa enkundleni* (to be seated at the open space in front of the kraal). This last activity is the graduation. At this stage *umkhwetha* graduates to become a fully fledged diviner and it is

called *ukuphuma/ukubuya* (getting out/coming back); thereafter, it is *ukuphinda indlela* (to go back to the trainer for advanced training and practice), resembling an internship stage.

#### **5.2.6.1 First sub-stage ritual – *ukutshotsha***

This is a first preparatory ritual towards graduation. The stage marks an intense transition from being a trainee to the preparatory stage of a fully fledged diviner. Consequently, this means that *umkhwetha* receives a short break to be with her family once more. Restrictions at this stage also intensify. *Umkhwetha* is instructed not to have sex, whether married or not, to keep herself pure. She has to respect nature, people, creatures, animals and children. This respect and purity are seen as crucial to showing respect to whole of nature so as to gain blessings and acceptance. Failure to show respect to all these may lead to *umkhwetha* experiencing misfortunes such as dying or going mad in the process. This is viewed as one of the critical and dangerous stages in the process. The stage prepares *umkhwetha* to undertake a journey on her own to dangerous places and sacred places such as caves, big rivers and *engetheni* (forest). Once more, her dreams offer clear directions as to which place to visit. *Umkhwetha* wears *ingxowa edlakadlaka* (a sack cut into rags) (see **Figure 5-6, p. 156**). Sometimes this is decorated by metal bottle tops, beer bottle tops, or small bells and coloured wool rags. This attire makes a noise and attracts everyone's attention. People tend to think that an initiate is mentally disturbed, especially in areas where this is not a normal practice and where the Komanisi *iphehlo* initiates are rare. Children often laugh at the initiate and dogs often bark at her as the attire and the ringing bells attract them. *Umkhwetha* wears this attire until she has prepared everything necessary for the next phase. This usually takes an average of two months.





**Figure 5-6** *Umkhwetha* at the stage of *ukutshotsha*

#### **5.2.6.2 Second sub-stage ritual – *umgongqo***

*Umkhwetha* is excluded from her family and other *abakhwetha* and her contact with the trainer is minimised. During this stage, she is in retreat as she is isolated behind *umdiya-diya* (curtains) and is cared for by her *amakhankatha* (special nurses/attendants/chaperons) and *umaphekana* (cook) chosen by her family. Furthermore, the trainer chooses two or three *amagqirha* to look after *umkhwetha*. They are called *abagongqisi* (special nurses for this ritual). Their role is to prepare the house where the ritual is to take place; wash *umkhwetha* every day as early as 4:00 or 5:00 in the morning; and *gqaba* (smear) *umkhwetha* with a specially prepared soft paste from various herbs and eggs until she is ready to *ukubaleka* (to run). In addition, they also supervise *umaphekana*. She prepares meals, making sure that the food restrictions are maintained. Meals should be served timeously.

On the first day of undertaking *umgongqo*, *umkhwetha* is stripped of all her rags and beads. Her clothes are folded and placed behind the curtain. She wears something light and a white headscarf. The nurses do the same. They are placed behind *umdiya-diya*, *entla* (at the far end of the inside of the house) all the time for the rest of *umgongqo*. The floor is covered by *inxopo*, a special type of grass from the river used for certain rituals such as this. *Imbabhama*

(chicken) is slaughtered for her ancestors and a bottle of brandy is drunk. *Umkhwetha* and *amakhankatha* take a bite on all parts of the cooked chicken and when they have had enough, the remainder is eaten by *abagongqisi*, *igqirha* and *umaphekana*. *Abakhwetha* are not allowed in the house or to see *umkhwetha*. *Umkhwetha* and *amakhankatha* only go out at night and must cover themselves so that no one can see them. *Umkhwetha* should always be in the middle so that she is protected. They are not allowed to speak loudly and no cell phones or contact with the family is allowed, in case family members bring disturbing news. *Umkhwetha* must rest, relax and meditate.

A night before *umkhwetha uyabaleka* (runs) from the forest, one of *abagongqisi* (special nurses) has to *qinisa* (strengthen) *umkhwetha* and her nurses by means of *qaphula* (make small incisions) their bodies. This involves rubbing by *intsizi* (a blackish powder made from a mixture of pounded medicinal roots, bark and leaves) and getting small incisions at all their joints as a means of protection from evil spirits that may try to spoil the smoothness of the process. Then they are ready for the dangerous journey. The duration of *umgongqo* is at least two weeks and depends on the readiness of the family in the preparations for *ukubaleka*, the next activity.

### 5.2.6.3 Third sub-stage ritual – *ukubaleka*

On the day of *ukubaleka* *umkhwetha* leads the journey to *engetheni* (the forest) of her *ithongo* (dream). In fact, she sets out on this journey a night before or very early in the morning at dawn, often at 3:00, accompanied by her *amakhankatha* (special nurses). They take with them a billycan of *umqombothi* (sorghum), snuff and a box of matches. At the entrance of the *ingethe* she makes a fire and burns *impepho*. Once more, she summons her ancestral guides for support. Thereafter, she leaves her *amakhankatha* and proceeds to the deep centre of *ingethe* (forest). What happens in the centre is the secret of *igqirha*.

However, *umkhwetha* comes out in the morning a different person; her appearance has changed. For the first time in the training process, *umkhwetha* has white clay on her body. Her body is covered from head to toe with special leaves known only to *amagqirha* (see **Figure 5-7**). According to Hunter (1979), the Mpondo *igqirha* at this stage wears *udwabe* leaves. Komanisi *amagqirha* do not want to reveal the name of the leaves and it is difficult to know whether it is the same as the Mpondo or not.

Before her arrival, many preparations take place back home. Inxopo is often changed and a new one is placed. *Amagqirha* who are invited to the ceremony keep watching from all sides for the coming of *umkhwetha* from *ingethe* (forest). Her direction is always a secret and no-

one must know it. When she approaches from *ingethe* she runs. Her *amakhankatha* follows her and guards her against anything that falls from her and checks if she is safe. None of the leaves covering her body may fall; if it does, *amakhankatha* must pick it up and place it in the empty billycan that initially had sorghum in. Later on, the leaves (the fallen leaves and those covering her body) are burned on the morning of *ukuphuma* (to get out/graduate).



**Figure 5-7** *Umkhwetha* from the forest (she is not from the Komanisi *iphehlo*)

As she approaches home, other *amagqirha*, the interns in particular, run towards her with their *amatshoba* (oxtail sticks) up and shouting, “*Hala! Hala! Hala! Ubuyile ubuyile!*” (She has come back, she has come back! *Halala!*) The whole community joins this welcome in the same way.

At this stage, other *abakhwetha* are locked into another house and conduct *intlombe*. They are not permitted to leave the house until the running *umkhwetha* has arrived, *incamazane* has been slaughtered and she is back behind *umdiya-diya* (curtain) again. They must not see her or hear the bellowing of the slaughtered animal as that may disturb them emotionally and spiritually.

When the running *umkhwetha* is closer to the home, the first *ikrwala* (intern *igqirha*) to reach her runs to her and strengthens her again. In most instances the first *ikrwala* to meet her is a senior *ikrwala* who has an *intsizi* to smear on *umkhwetha*'s nose and ears. *Ikrwala* also has *iimpondo* (horns in a necklace form) with mixed herbs inside, are placed around her head on

top of the leaves. Once more, *umkhwetha* is strengthened to protect her against any evil spirits and as she runs closer again. *Incamazana* (ox) is taken with other herd of oxen to welcome her. If she had *ithongo* (dream/vision) about it, she would know it and identify it from the others. That is a test to prove whether *umkhwetha* was honest or not. She points it out with her spear. She goes to the kraal with it; sings her clan praises. The men rope it and prepare to slaughter it. Slaughtering of *incamazana* involves another ritual not explained here.



**Figure 5-8** Oxen taken to *umkhwetha* to choose the one she could have dreamt.

The important thing is that *incamazana* must bellow (*ukukhala*) to prove that the ancestors have accepted it as a sacrifice. If not, then family members, especially the men and *umkhwetha*, are given time to *nqula* (offer clan praises) and plead with the ancestors to accept it. Sometimes that works and sometimes it does not. However, even if it did not *khala* (bellow), it is nevertheless slaughtered. However, it leaves unanswered questions, pain and feelings of guilt in everyone (*igqirha*, *umkhwetha* and family). Any misfortunes that could affect *umkhwetha* and family afterwards are often associated with the incident. Such an incident affects the future integrity of the graduating *igqirha*. People tend not to believe that person.

That night, *intlombe* is performed by her former colleagues – *abakhwetha* – in another house the whole night through whilst *amagqirha* also conducts another *intlombe* in the house where *umkhwetha* is resting, stirring *ubulawu* and eating its foam. During *intlombe* clan praises are offered. Clan praises are directed at thanking the ancestors for the blessings and success of the journey. During *intlombe* she also gives her ex-colleagues (other initiates) a case of beer as a gift to thank them for their support. In addition, this gift is viewed as a way of cutting the links with them as she progresses to a higher level. At the same time, *amagqirha* at the other house support her in prayer, thanking her ancestors for her successes so far and praying for the positive progress to the final activities At 4:00 the following morning, *umkhwetha* washes with *ubulawu enkundleni*. She is given a new dress. She is a new person-*ikrwala* and the name *umkhwetha* is discarded. The leaves that she has been covered with and all her old clothes and blankets (those she used when she was an initiate) are collected and taken away from her and are kept safely in a bag. From the ox skin, a piece is cut and beautifully tailored to make *ikhali* (small hand shield) and from its tail *itshoba* is made (see Figure 5-9).



**Figure 5-9** *Itshoba* and skin for *ikhali*

This is part of the regalia worn by a graduate and that distinguishes her unique identity. She proceeds to the next fourth activity or ritual, *ukubekwa enkundleni*.

#### 5.2.6.4 Fourth sub-stage ritual – *ukubekwa enkundleni*

Once the ox is slaughtered, *umkhwetha* goes back to *umdiya-diya* and join her *amakhankatha*. From the slaughtered ox the tail and a piece of skin is taken and placed against the wall outside to be prepared later on for parts of *ikrwala's* regalia. They are welcomed by *amagqirha* and are offered a grilled chicken, a drink and sorghum, and freshly steamed bread prepared that morning. They all eat roasted *umshwamo* that is prepared from the slaughtered ox. The family also brings in a goat, a chicken, a bottle of brandy, a billycan of sorghum and a drink. The same ritual of *ukuxhoma iqonga* is performed (see Section 3.2, p.91 and 8.1, p. 217). *Umkhwetha* also eats *umshwamo* from the slaughtered goat. The goat is also for accepting *abantu abadala* (ancestors) she has brought back from *ingethe* (forest). *Umrosho* is brought from the kraal and placed next to where *umkhwetha* is sitting. Once all that is done, *umkhwetha* and her nurses are permitted to rest and sleep.

In the morning, *ikrwala* wears a full kit worn by *amagqirha*. A tail from *incamazana* (ox) that was slaughtered is prepared and fixed on a stick chosen by her according to her ancestral guides. Usually *umnquma* or *umsimbityi* (stick from an oak tree) is used. After ten in the morning she is taken from *indlu enkulu* (family house) to *enkundleni* to be seen by the community and other family members (see **Figure 5-10**) for the first time after *umgongqo*. This is an important day for all as it means that the journey was a success. This is the graduation day ceremony.



**Figure 5-10** a) *Ikrwala* brought *enkundleni* and b) *Ikrwala* flanked by the two *amakhankatha* and *igqirha*

At this stage *ikrwala* (new graduate) is again introduced to her family ancestors, now as a newly graduate. She and her *igqirha* provide a full feedback (see **Addendum F.1**) on her spiritual journey from the first contact with the trainer to the present day. The critical aspects to mention are: 1) How did she meet the trainer? 2) Why did she consult with her? 3) The

core competencies she has learned during the training; 4) Her state of health up to this point; and lastly, 5) To thank all those who supported her throughout the process.

Thereafter, *igqirha* has to confirm giving evidence (money or incidents) that proved beyond doubt that *ikrwala* is ready to be a fully fledged *igqirha*. This concise summary is accepted as a testimony to the achievement of her journey and evidence that the trainer did her job successfully. Standing and flanked by her *amakhankatha*, humbling herself by looking down and speaking with dignity, *ikrwala* addresses the family and community standing. In return, a male spokesperson for the family welcomes *ikrwala* (the graduate) and thanks the trainer for a good job well done. If the family is dissatisfied this may end badly. After this communiqué, gifts are given to *ikrwala*, *igqirha*; *amakhankatha* (nurses) and *umaphekana* (the cook) by family, friends, other *amagqirha*, relatives and community members (see **Addendum F.2**). In addition, words of wisdom and encouragement are offered to both the *ikrwala* and *igqirha*.

After presentations, *ikrwala* joins *amagqirha* as a new colleague; *umdiya-diya* is removed but still sits in the same position. That night she joins the whole-night *intlombe* with other graduates or junior *amagqirha* for a short period. That is to give her time to thank her ancestors for being with her throughout the journey. She joins the circle of healing again. In addition, it is to thank other initiates and the whole group of *amagqirha* for their tireless support and guidance throughout her training.

*ikrwala* is trained in what to say and often the sequence is important. She would say, “*Ndibulela incamazana ezintathu nembabhama zazo, amanzi okusela ahambe nazo, abantu abadala abandigcinileyo endleleni kude kube lapha. Ndithi makudede ubumnyama kuvele ukukhanya. Camagu!*” (I thank the three goats, the ox and the three chickens, the water [brandy/sorghum] that accompanied them, the ancestors who protected me on the journey to this stage. I say darkness must part and brightness comes. *Camagu!*) All *amagqirha* repeat this statement while also saying the clan praises until the end of *intlombe*.

Before the end of *intlombe*, senior *amagqirha* often join *intlombe*. That is usually at six in the morning. They join the group to welcome the new graduate into *amagqirha* profession. She is given another new name (a second name in the process). This time the name is that of *isikhahlelo* (praise name for *igqirha*). This name is used only during specific activities and during *intlombe* in particular. Otherwise, the name given in the first stage –*igama lokugula* (name for illness) – remains. Often, this name even substitutes the person’s real name for as long as the person remains *igqirha*. The guidance of ancestors also plays a key role in name giving, for example, the researcher’s my new name at that stage was Mavula kuvaliwe. (The one who opens up when it is closed.) Matogu added further details and said,

“*KwaKomanisi kuvulwe kwavulelwa nezidenge.*” (In Komanisi it is opened even for the fools.) Once more, the meaning of the name reflects the strengths that the new *igqirha* has and/or will acquire in future. For instance, the meaning behind the researcher’s initiate name is bravery and the ability to take risks and solve problems no matter how difficult they are. The added information meant that “in Komanisi *iphehlo* services are open to all, including those who are stupid”. In a way, this is true because when training starts one is stupid and walks in the dark with no former background about tradition, relying only on dreams and *umbilini*. In the end, however, Komanisi *iphehlo* opened one’s eyes and gave light and wisdom.

#### 5.2.6.5 Fifth sub-stage ritual – *umrhazo nokuhlwayelela*

On this day, *intlombe* is held. *Ikrwala* and *amakhankatha* are placed on a grass mat in an open space next to *iziko* (fireplace) and *amagqirha* dance to the songs. Senior *amagqirha* take turns to talk to *ikrwala*, giving her words of wisdom, encouragement and key ethical codes and conduct that she has to observe in her practice. The key major aspects revolve around discipline, professionalism, code of dressing, passion, honesty, trustworthiness, responsibility, and accountability at all times. Self-respect is stressed to an extent that *ikrwala* is warned that “*Mhla waphelelwa kukuzithanda isiqu sakho wazi kumhla abantu abadala bemka kuwe nobugqirha babo.*” (The day you lose self-respect you must know that is the day, your ancestors have forsaken you and have taken their divining powers).

After that procession, the trainer smears a mixture of cream made from the mixture of red ochre and various herbs on the face, arms, thighs and feet of *ikrwala* (new graduate). This is smeared in the format of three red dots: one placed on the forehead and then one on each cheek; then one slash on the arms, thighs, legs and feet (see **Figure 5-11**). That is called *umrazo*.

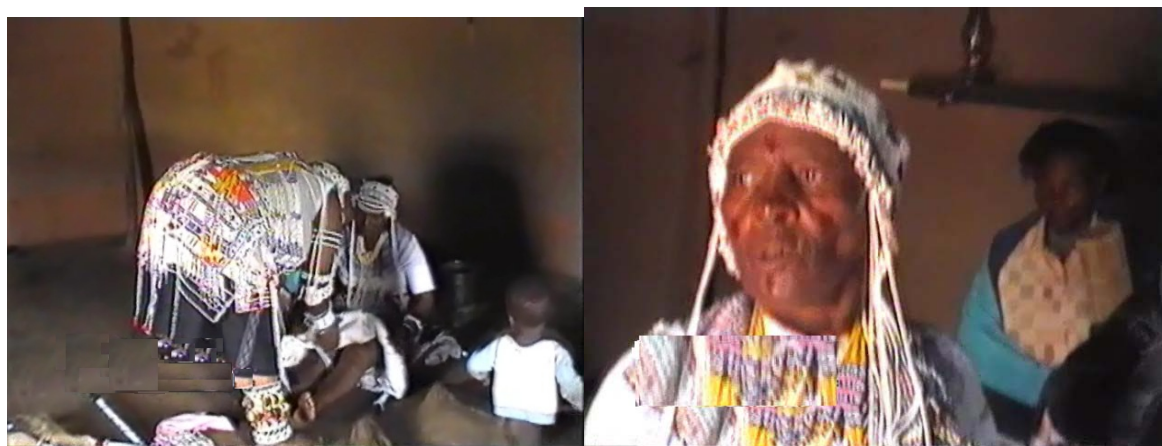


Figure 5-11 Senior *igqirha* prepares *ikrwala* for *umrazo* (left) *ikrwala* after *umrazo* (right)



After that, *amazimba* (maltabella) is placed in a large dish and the trainer or delegated leader of this procession then divides the *amazimba* into plates and gives them to *amagqirha*. They use them for *ukuhlwayelela* (planting, but thrown by hand) (see **Figure 5-12**) around the house, outside, in the kraal and the garden, as if to grow them.



**Figure 5-12** *Amagqirha ayahlwayelela led by senior males representing the family*

After *ukuhlwayelela*, *ukuxhentsa* (dancing) continues *enkundleni amagqirha* enjoying themselves until it is time for meals. After meals, *ikrwala* takes over for the first time in preparing meals and other necessities for *amagqirha*. That night, *amagqirha* count bones of *umrosho* (see Chapter 2 and Hunter, 1979) and put them into a sack for safekeeping to be burned at a certain time for *ukuvulela* (opening) *ikrwala* in her new profession. This is carried out after either six months or a year, depending on her financial means. The burning of the bones is one of the crucial rituals in relation to *ukuthwasa* (see Chapter 2). *Ikrwala* is now *igqirha*. Otherwise, at 4:00 the next day, the bag with *ikrwala*'s old clothes and leaves that she wore from the forest are taken by senior *amakrwala* and are burned in the kraal. *Impepho* and sorghum are also thrown into the fire. Once more, a male family member must be present to witness the ritual. All bones must be burned to ashes and when satisfied, the fire is distinguished by using sorghum. In the morning, the last ritual is performed.

#### **5.2.6.6 Sixth sub-stage ritual – *ukothula lingcaza***

This is the last ritual performed at the end of all activities conducted by *amagqirha* for another *igqirha*. It is the bringing down of the gifts given to the ancestors (see Chapter 2 and Section 8.1, p.216). Before this ritual, the two huts (where *amagqirha* stayed and *indlu*

*enkulu* – family house) are cleaned. *Inxopo* is removed and is placed safely in a place designated by the senior *igqirha* after consultation with *ikrwala* or the family. It is burned after *amagqirha* have left. *Impepho* is mixed with it. *Ikrwala* is not allowed to witness the burning of this *inxopo*. *Ikrwala* also leaves with the senior *igqirha* to sleep over at her home and may only return two days or a week later. At that stage, she has been initiated into the profession; told about how to conduct assessments; mix treatments; the fees that are charged; and about any other important issues that a trainer may deem important to declare. She now has to wear *amadaki* (skirts or dresses) made from German prints, earrings and *isitafu* (Xhosa: *iqhiya* [chiffon]) with *intsimbi* (white beaded) and a necklace around her neck (see **Figure 5-13, below**). In that way, she is brought back to normal life again. Then the person has completed the crucial basic training of a fully fledged *igqirha*. However, in Komanisi *iphehlo* *ikrwala* is expected to *ukuphinda indlela* – to return (to the trainer, *igqirha*) to learn the deep secrets of *ukuthwasisa* (to train those who *thwasa*) only shared with *igqirha*. The duration of the sixth stage, including all the activities, is almost five days.



Figure 5-13 *Ikrwala* in new dress code. This is a male *ikrwala*, dressed like a woman

### **5.2.7 Seventh stage: *ukuphinda indlela***

The last stage is *ukuphinda indlela* (to return), or internship stage. During this stage, *ikrwala* learns about secrets not taught to *abakhwetha* during the training. She also attends and witnesses the performance of ritual ceremonies of those restricted to *abakhwetha*. Many people refuse to do the internship because they feel that the process has lasted long enough and they do not wish to go back again. Zanemvula informed the researcher that the internship requires a three months' stay with the trainer. In Komanisi *iphehlo* is deemed important. During the internship, the trainer prepares *iimpondo* (horns) from all the goats that have been slaughtered during the training. Inside the horns are various mixed pounded herbs used for various reasons including *ukuqinisa umkhwetha* (to strengthen the initiate) when *ikrwala* leads a ceremony for graduation. Most of the herbs used during all the stages from *umgongqo* to graduation day are always treated as a secret. This stage is the time to learn them. That ensures that *ikrwala* is forced to go back to her trainer at some stage. Again, a person is expected to stay a few days during each visit, but the duration depends on the mood and the relationship between *igqirha* and *ikrwala*.

From what has been observed, experienced, and heard from other *amakrwala* (plural of *ikrwala*), new graduates often do not proceed beyond this stage, because promotion to a senior stage depends on a good relationship between the trainer and *ikrwala*. However, because a person has already graduated, nothing really prevents her from practising independently and searching for assistance elsewhere. Consequently, this stage often creates serious tension and friction amongst certain *amagqirha*. This could be related to the separation anxiety that often occurs when a child has to leave the parent to stay or work away from home. Such tensions may or may not be resolved.

However, because *ukuthwasa* is a life-long process, a variety of rituals can still be undertaken by *igqirha* after this stage, depending on what her *amathongo* reveal. For example, the same *igqirha* has to repeat the sixth stage (*ukuphila*) at the home of her maternal grandparents or that of the in-laws. The new graduate is now ready to practise as an independent healer, but may consult with senior practitioners for support whenever necessary.

## **5.3 KEY COMPETENCIES LEARNT DURING THE TRAINING PROCESS**

It is expected that, at the end of the training process, a newly graduated *igqirha* has shown competency with regard to the following:

- Understanding and comprehension of the ethical code of conduct and dress as practised by *amagqirha* and of the Komanisi *iphehlo* in particular. In addition, she identifies and respects the diversity amongst other schools of divining. This includes aspects such as loyalty, humbleness, respectfulness, honesty and perseverance taught from the first stage throughout the process.
- Always maintaining an attitude of self-respect, respect for ancestors, colleagues, family, and community at large. Neatness is also stressed.
- To always stimulate and awaken her *umbilini* (intuition) and to nurture it at all times. That is the core skill/ability in her profession.
- To always keep updated with the use of herbs and to accumulate more knowledge on how to use herbs in a responsible manner.
- To consult with colleagues or seniors *amagqirha* when in need of help and not sure what to do.
- To honour and respect clients at all times. To be honest when assessing, diagnosing and treating clients and to be able to say she does not know. “*Ungoyiki ukuthi umntu awumnikwanga umthumele komnye,*” (Do not be afraid to tell a person that you cannot help her and to refer the person to another *igqirha*.) warned Matogu (2003).
- To observe secrecy and confidentiality about the client’s problems. That is always stressed but in practice it is ignored. The researcher was often surprised with hearing even senior *amagqirha* discussing a client’s problems freely, even mentioning their names. Later on, it became clear that it was a way of marketing themselves without any malicious intentions.
- To nurture her *ubugqirha* (divining) at all times so as to be respected by the community. Some of the participants informed the researcher that at times *amagqirha* want to use bad medicines used by *amaxhwele* (herbalists) and that is against the ancestor’s wishes.
- Learn to *ukunqula* (practise clan praising) by following the right sequence, starting with her own family ancestors (both paternal and maternal side); those from the maternal side (both paternal and maternal); those of the trainer (paternal and maternal including both sides of the in-laws); and those of the Komanisi *iphehlo*, senior *amagqirha* at their senior levels and lineage forms. In all these categories, ancestors are praised from both the paternal and

maternal side and in-laws where applicable. Hence, this becomes a very long process and at times to summarise a person may say, “*Nezo ndingazibizanga izihlwele andizidelanga, ndizifakile.*” (Even those ancestors that I did not mention are not because of a lack of self-respect; they are also included). However, trainees are not allowed this short version of *ukunqula*. *Abakhwetha* are also taught to observe the following ethical code of practice:

- To observe and keep the ways of preserving, pounding and preparing herbs.
- To learn and practise all treatment methods: washing, vomiting, steaming, minor surgeries, fermentation methods and others.
- Observe and learn how to manage initiates at different stages. In addition, the initiate learns how to analyse and interpret dreams and the ability to make close associations between the dreams.
- Learn and understand how to lead ritual ceremonies and how to address family members and the community at different ceremonies.
- Learn and be able to lead different songs for different occasions in their sequence, hence, *intlombe* and *ukuxhoma iingcaza* (see Chapter 3 and 8) and songs are taught to the trainees from the beginning of the training. The two rituals are at the centre of all ritual activities done by *amagqirha* (see Chapter 7).

All these are learned and recorded orally; no written records are kept. The cognitive abilities of an *igqirha* are incredible because no part of syllabus is ever forgotten, as are the clients, their treatments, and follow-ups. They are all in the memory.

#### **5.4 THE AVERAGE DAY SCHEDULE FOR AN UMKHWETHA**

*Umkhwetha* wakes up at 4:00. She lights a candle or paraffin lamp (not electricity, even if available) and folds and packs her grass mat and blankets at a place designated for that. She opens the windows, washes her face with cold water and rinses her mouth. After this she gives water to *igqirha* to rinse her mouth and a container to spit in. She discards this and washes her hands. She beats *igubu* (drum), kneels next to *igqirha*'s bed and narrates her dreams. *Igqirha* listens carefully and may ask questions for clarification here and there. Often the interpretation is done immediately by *igqirha* or *umkhwetha* is informed to wait for the dream to come again if the dream is not clear. In the case of a group of *abakhwetha*, they share the activities. After dancing, they sit one-by-one next to *igqirha* with others waiting in

another room. For them that is a critical stage and also a time for catharsis whereby they relieve themselves of their anxieties and at times fears from their dreams or from stressors in general. By contrast, to others with no dreams, it is time for anxiety and stress because *amagqirha* expect *abakhwetha* to dream in order to get a clear direction of how to manage *umkhwetha*'s training.

After dream interpretation, the routine for the day begins. She goes barefoot. She goes to the river (in the village) or tap outside (if in town), to fetch fresh water, which has to be fetched every morning. Then she prepares tea/coffee for *igqirha*, after which she bathes and dresses her. She makes *igqirha*'s bed and cleans the house. Some of the day's activities include the assessments, diagnosis and treatment of clients and patients. The treatment activities involve the search for herbs, drying of herbs, pounding, the storing and labelling of herbs, learning how they are used, their advantages and side effects, instructing clients, and supervision on how to use their medicines.

The search for herbs is often done in the early hours of the day, preferably at 5:00, depending on how far the homestead is from the place. Matogu informed the researcher that at that time, snakes and other dangerous animals in the forest were still resting. Harvesting of medicines is often done in spring and summer, as in winter, herbs shed their leaves and it becomes difficult to identify them, except those in the form of bark. In the forest *abakhwetha* are taught not to raise their voices and make comments on smells in the forest. They are to observe certain trails, bird songs and other critical issues, which no report was allowed on. These are to warn them of certain dangers and how to protect themselves from it. Before they enter the forest, they make a fire, burn *impepho* and say clan praises. They spill snuff next to the fire and are then ready to go into the forest. That is a sign of respect to the ancestors and a way to request permission to enter the forest.

On arrival back home, all herbs are washed and cleaned, categorised according to their actions, pounded, put into containers and labelled. When drying herbs, those that are taken orally are placed separately from those that are used differently. Some medicines are categorised as being harmful to others and are placed separately from other herbs. All herbs are placed at in the *umrawule* (dispensary) or a separate room. Some herbs take long to dry and these are placed on a grass mat or a sack and are placed in the sun every day. There is always a herb that *umkhwetha* must bring. That is placed amongst the herbs to keep them fresh and protect them from evil spirits. All these activities provide excellent opportunity for the training of *umkhwetha*. However, all is done orally. Matogu allowed time for her written notes.

The day often ends with *intlombe* and eating of *ubulawu*. Sometimes *umkhwetha* prepares her billycan of *ubulawu* immediately after the dream interpretation session or in the afternoon. *Ukuphehla* and eating of *ubulawu* is followed by washing the body outside, often at *enkundleni*, with *ubulawu*. At least once in two weeks *umkhwetha* has to take a purgative or enema to cleanse her body to stimulate, awaken or nurture her dreams. Most of the times, items are hidden and *umkhwetha* has to find them. That is done continuously to test *umkhwetha*'s skills in assessment and diagnosis. Sometimes *igqirha* gives a simulation of the case and wants to know how *umkhwetha* would treat the patient. Sometimes *ukuphehla ubulawu* is done in the afternoon. After washing with *ubulawu*, *umkhwetha* prepares for *ukuchela*, (to cleanse the yard) *ukuqhumisa* (burning of herb concoctions), to wash *igqirha* and prepare the supper. The chores for the day are completed. *Umkhwetha* routine is often interrupted by accompanying *igqirha* to various places as she may visit her clients.

## **5.5 REFLECTIONS ON THE TRAINING STAGES OF UKUTHWASA**

These reflections are broadly based upon the researcher's own experiences, since *amagqirha* could not tell me much about some of the reasons why certain rituals were performed. Reflections touch on the key aspects of a long series of stages of training from those rituals done during the preparatory stage. During the preparatory stages it becomes crucial for a trainer to assess and evaluate the fact that an aspiring person has *ubizo* (calling), for if not, it becomes a dangerous journey and a person could die because she would be proceeding on a journey on which she is not invited. It would be a journey without an objective because it is *umkhwetha* who must provide the content and direction of the journey. Hence Matogu would reprimand us as initiates that "*Xa ningaphuphi ndizakunithini mna? Andikwazi ukuninika eyasekhaya intwaso.*" (If you do not have dreams, what must I do? I cannot give you my family divining gift.) To stimulate the dreaming process and *umbilini*, a vigorous process of cleansing and purification is encouraged which is explained in more detail later on in this chapter. All three trainers in the study gave the assurance, "*Kufuneka wena gqirha ulandele amathongo omkhwetha. Wena usisileyi nje.*" (You as *igqirha* have to follow the dreams of *umkhwetha*. You are just a sledge). Zanemvula and Boniswa often confirmed the same statement in different words, "*Funeka umkhwetha athonge ukuze wazi ukuba mawenze ntoni.*" (The initiate must dream for you to know what to do.) This means that there is no set curriculum for *ukuthwasa* training. The curriculum is flexible and is led by the wisdom and blessings of *iminyanya* (ancestors).

In other words, the ancestral guidance is crucial in this training. This therefore explains why it is crucial that the basic rites of passage are performed so that the aspiring candidate begins the journey with the guidance and protection of her ancestors. Moreover, the cleansing rituals are crucial, as the initiate needs to be a house of dreams.

During the fieldwork, some variations with regard to the preparatory stages could be observed. In Alice (Alice Focus Amagqirha Group, 2005), before *umkhwetha* is initiated, an *imfukamo*<sup>51</sup> is done in which the entire family participates. The initiates and *amagqirha* smear their bodies with white clay. That group informed the researcher that before a person is initiated she is connected with her biological paternal lineage family, especially those born out of marriage. In Komanisi *iphehlo*, these are neglected and maybe performed at a later stage only when complications occur (see Preface and Chapter 4). However, other African cultures seem to consider the biological connections as crucial before a person enters the initiation process (Masoga, 2001).

It is also noticed that *imfukamo* is crucial as a preparatory ritual. During that period, which was one day in the researcher's case versus the three days with the Alice Group, *umkhwetha* calls for her ancestral guidance from her familial lineage (all related clans). Before performing *imfukamo* ritual, the researcher had to drink a special mixture of herbs. There were also food restrictions such as avoiding all fatty foods at least a week before the ceremony. Furthermore, the researcher had to avoid sitting next to the fire after *imfukamo* at least for a day. No reasons were given and it is still not clear why those restrictions were imposed. The researcher also received specific instructions and directions for the journey. For example, during that ritual, her ancestors honoured her with a song *Ndilawulele thongo lam* (Inform me my dream). The researcher had not known it before but had to sing it. The song asks for guidance by *amathongo* (see more in Section 8.2.5, p.270). In addition, at this stage *igqirha* wanted the researcher to smear white clay on her face, but the night before her *imfukamo*, the researcher had *ithongo* that told her to apply *imbola* (red ochre), so she refused to follow *igqirha*'s orders and decided to follow her *ithongo*. The ochre is to mask one's nakedness and to attract blessings from the ancestors. At Komanisi *iphehlo* no white clay is used during the training period. It is only used the day *umkhwetha* comes from the forest for her graduation. It is a sign to note the transmission from one stage of development from life to another. From the Komanisi Group, the researcher is the only *igqirha* who undertook that ritual. That was because it was conducted before she was initiated as *igqirha* (see Chapter 4).

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<sup>51</sup> See Hunter, 1979 and Chapter 3. The ritual means isolating the whole family for certain days, like a retreat.



The Alice Group of *amagqirha* also added two other important rituals during the preparation period, which Komanisi *iphehlo* do not practise. The rituals are *ukubuyisa abadala* (bringing back the ancestors) and *ukothula iqhiya* (to take down a headscarf – for those who are married). The latter ritual is performed to request the permission of the ancestors to permit a married woman not to use a headscarf and to stand *enkundleni* (open space in front of the kraal) or inside the kraal. In the case of *amagqirha* at Cala and the Komanisi *iphehlo*, these activities are automatically performed without undergoing any ritual performances. They are practised by virtue of being *igqirha* (see below and Section 3.2, p.91). Other Basotho and Zulu *isangomas* do not undertake these two rituals.

It should be noted that some of the rituals of this stage are performed later. For example, as a person who grew up in a staunch Christian background, the only ritual prescribed was *imbeleko*. All the other rituals were performed later after becoming *umthandazeli* (a faith-healer) just before entering *ukuthwasa* initiation. This reversal of rituals does affect one's identity and a process of self-actualisation. It delays one's maturation and growth process.

From the experiences of the researcher it was observed that due to delays in certain rituals and *intonjane* in particular, a person would feel like as if there were a missing link, though not sure what it was. At that time a person became sensitive and could not control emotions. The researcher herself could not tolerate the clapping of hands and the ring of the bell at church at that time. She would cry for no reason at all. However, after the two rituals were performed: *intonjane* and *imfukamo*, she experienced a difference. She could control her emotions and felt comfortable with clapping of hands, drums and the ring of a bell. It was as though she was a different person. To her, both rituals connected a missing link or part of her that was lost. She experienced both rituals as spiritual retreat and felt spiritually revived. Even her dreams were clearer and the body was more sensitive to environmental cues than before (see Section 5.3, p.162). She felt well connected with her ancestors and comfortable with the environmental cues around her. That role and value of *intonjane* was also confirmed by Boniswa (2007), Zanemvula (2006) and Matogu (2004). According to them the two rituals are strong connections with ancestors and nature. The connection prepares the body of *igqirha* to be a receptive of environmental and cosmic vibes and awakens *umbilini* and permits *umbilini* to be a natural response.

The training phases convinced the researcher of the fact that the *amaXhosa* traditional view that these rituals are part of a growth and maturing process and enhance the process of identity, an ability to identify the 'self'. This leads to responding to the main question of this study: How are *amagqirha* trained/initiated and how in the process do they construct their

healing identities? The response to this question is reflected in the process followed during the actual initiation/training process.

The training is based on trial and error and the learners (*abakhwetha*) learn through independent participation in constructing their learning knowledge as they practise it (see Chapter 5). The stages reflect how an initiate is groomed and prepared to be a healer. Symbolism, ritualism, and communication strategies symbolise the continuous interrelationships intertwined and reinforced between *iminyanya* and *umkhwetha*. The purity expected from *igqirha* is symbolised by the ingestion of *ubulawu*, shedding of blood<sup>52</sup> and various rituals, which include cleansing and purification, (during each stage from the second stage to graduation).

All *iincamazana* (goats and oxen) slaughtered at different stages have to cry (*ukukhala*). The bleating of the goat and the bellowing of the ox are signs of acceptance from the ancestors. As they die, they give their own fresh blood as a blessing to the new life that has been conceived (an initiate entering the initiation) and request the ancestors to bless its conception and impregnation until it emerges as a new life on graduation day. The cry denotes solidarity bestowed by the animal to *umkhwetha* in sharing the pain and hurt that *umkhwetha* feels as the shadows of confusion and doubt merges her mind. The corpse of an animal symbolises the submerging of herself (*umkhwetha*) and giving herself as a sacrifice to her *iminyanya* and the cultural group at large. It also reveals dying of the old self and transforming to a new person. By saying *Camagu* on the bleating of her goats and an ox, *umkhwetha* seals the contract she is undertaking and makes a promise not to turn back. *Camagu* to her is finality – Amen! It is also affirmation, the fulfillment and ultimately acceptance of *ubizo lwabadala* (calling from ancestors). Everyone present forms a community that witnesses the emerging healer who has struggled, fallen and risen and now becomes a hero and a wounded healer to heal others. Amen from them is to say “*Singamangqina kugqityiwe!*” (We are witnesses, all is completed). The witnessing by the community legitimises the cultural and social healing identity of *igqirha*.

The long processes of seven stages allows a woman trainer to guide, nurture and lead another woman to reclaim her leadership role in nurturing her society in life and death. It is also to give a sense of living and meaning to the life of another woman. The new graduate claims her own healing identity from the day she submitted to accepting *ukuthwasa*. Her weaning, food restrictions, harsh treatment, dress code, including the use of *ubhonti Bhayi* (a blanket that is of inferior quality and is used by boys); Matogu narrated that all these

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<sup>52</sup> The blood at the second stage during the two rituals is cooked and eaten, unlike that of the *ukuhlamba* (cleansing) ritual.

reinforce humbleness, total submission and respect of *umkhwetha* to *iminyanya*. She reinforces her submission and respect as she rises and gives feedback to her family and community, including her God and ancestors *enkundleni* on graduation day. Her voice speaks with authority as she addresses her community on how she has positively changed her challenges to successes and adopted a positive attitude of sustaining the strengths she has acquired throughout the journey (Section 5.2.6.4,p.155). After two to five years of long battles, she is a hero, a leader of the nation. Nature has inflicted, nature has reconciled, and she is now *igqirha*. Through her participation and incarnation in all these rituals she receives a spontaneous skill to connect with the abundant supernatural knowledge and wisdom. On the day of graduation *igqirha* feels a sense of fulfilment. Below are the key competencies (bandages) that she takes with her to the world to heal (bandage) the wounded. However, like in any intimate relationship, the relationships between the trainer and *umkhwetha* are sometimes fraught with difficulties (Hirst, 2005) as explained more in Section 8.1.12, p.257.

## **5.6 CONCLUDING REMARKS**

This chapter focused on the common basic characteristics of *ukuthwasa* and the in-depth description of the training stages of *igqirha*. The description of the process tried to cover the background on the ontology of the episteme of *ukuthwasa* and how the inborn gift of *ukuthwasa* evolves to a fully fledged stage of transforming a gift to a practical service (see Section 5.3, p.161). *Ukuthwasa* is a process of growth, a progression of cultural illness as well as process of maturity. It accords an aspiring *igqirha* with the necessary skills and abilities to heal others. Through the initiation process, a person emerges as a new person in an evolutionary process through various stages. Advancing to a new stage is evidence of growth; the trainee has succeeded in coping and managing a set criterion in the previous stage. However, advancement to the next stage also allows for the strengthening of certain weaknesses that could not be resolved in the previous stages. The trainee is exposed to practical experience that is often managed by trial and error, as the learning process is based on solving clients' problems, which cannot be predetermined, as revealed by case studies in Chapter 6. In that process a person learns more about her strengths and weakness and is therefore aware of her 'self'.

The awareness of self allows a person to identify herself with new healing roles and responsibilities and thus her healing identity is constructed. The healing identity construction of *igqirha* is traced from the first stage of training right through the training process. For instance, the name change, which took place at two stages during the training – the entrance

stage (*igama lokugula* – the name of the illness) and completion stage on graduation (*isikhahlelo* – the praise name) indicates the reclaiming of new identity, role, responsibility and accountability to be a new person. Since the names indicate *igqirha*'s strengths, the names also encourage and motivate the graduate to continue to try and achieve the expected strengths or sustain the identified strengths throughout her professionalism. In that way identity construction becomes a lifelong and dynamic process.

In addition, the dynamic continued processes of healing identity construction is enhanced by various process such as: changing of clothes/uniform in different stages, the rituals performed such as cleansing and purification and by new roles and responsibilities added at each stage. All these processes symbolize the changing of the “old” self to identifying with the “new” self. They all signify and confirm the true transformations that have taken place. In the end, after going through the meticulous process of training, the women are able to reclaim their purpose in life and fulfil their ancestors' wishes and hopes. Reclaiming of the purpose by these women also ensures continuity of that purpose to heal in future generations as they become mentors and trainers of the new aspirants in their communities in future. There is always willing aspirants to accept the purpose and walk in the footprints of their ancestors in that way reclaim an identity to be called guardians of the ancestors legacy.

Also, since name changes are associated with new roles and responsibilities, the leadership identity is formed. The women become leaders of ritual performance and directors and managers of *amagqirha* training profession. In that way, the training also leads to cultural transformations and changes the gender perspective of women from the inferior role to the superior role in their societies as well as the political environment.

Principles taught during the training imply that *amagqirha* can be accorded the status of practitioners using ethical practice standards set by the Health Professionals Council in South Africa (HPCSA). During the training, it became apparent that female *amagqirha* do reclaim their gender healing identities and leadership roles with confidence and authenticity, which demonstrates their gender healing roles. The practice of *amagqirha* is conducted through a process called *ukunyanga* (to assess, diagnose and treat). This is discussed in full in the next chapter on divination processes.

## CHAPTER 6 DIVINATION AND FAITH-HEALING PRACTICES

This chapter describes the divination system as used by *amagqirha* and *abathandazeli* (faith-healers). The purpose of this chapter is to try and clarify the interface between Christianity and traditional religious beliefs and values. Firstly, the key diagnostic skill used by *amagqirha* to divine is explained, namely *umbilini* (intuition). Secondly, the researcher engages in a discussion of faith-healing as another alternative divining system used by *amaXhosa amagqirha* and compares the methods used in both practices. A few case studies are discussed to depict the variations in conducting consultations during their assessment and diagnostic sessions in both practices. Only selected case studies are used. Reflections on each system are given at the end of each discussion and an elaborate explanation on *amaXhosa* divination system is given in the discussion chapter.

*AmaXhosa amagqirha*, unlike their Nguni counterparts, use *umbilini* as their central skill to divining, a process they simply call *ukunyanga/ukuphilisa* (to heal). The use of dreams, visions and *umbilini* by them has a long history amongst the Nguni tribe. These inner senses are used as core aspects of assessing, diagnosing and treating the sick in a process called *ukunyanga* (divining). The process includes three main processes: (1) *ukuxilonga* (individual assessments); (2) *ukuvumisa* (assessment and looking for lost property) and (3) *ukubethelela umzi* (cleansing the homestead).

The use of *umbilini* suggests that *amagqirha*'s bodies become magnetic objects to sense the positive and negative inner worlds of their clients. In that way, they are able to see beyond their clients' bodies and to get involved in the clients' external dimensions: families, work and lost property. In other words: *umbilini* may function like an 'X-ray' or medium for the ancestors to guide them with advice directly from beyond the realm of living. To sustain the intuitive abilities, *amagqirha* have to keep awakening and nurturing their *umbilini* in various ways such as *intlombe*, purgative, and other various ways of cleansing and purification (see Chapter 6; Broster, 1981; Hirst, 2005 and Mabona, 2004).

According to *amagqirha*, *umbilini* is bodily sensations; the inner senses that *igqirha* feels when in contact with an afflicted or disturbed person. Sometimes the feelings/senses come without being in contact with anything or just before contact is made with a person or certain part of the environment. *Amagqirha* describe the feeling as being prominently in the lower part of the body, below the stomach and to run up the spinal cord, through the shoulders, neck and then interpreted at the head (the crown of the head next to the fontanel). The information is readily available and no strategies are involved to access it; the ancestors

provide it. To *amagqirha*, *umbilini* then involves inner-body senses and connecting such senses to the mind, spirit and universe to reveal truths about people's hidden realities. It is seeing beyond what a normal eye can see. *Umbilini* is the reality, the truth and valuable information that have to be trusted and used in *ukunyanga*<sup>53</sup> (healing the *iindwendwe* – clients). *Umbilini* is a gift from *iminyanya*, a spiritual X-ray (as shown in the definition) and a gift from uQamata (God). The information comes spontaneously and *amagqirha* believe to have used all five senses: 1) the sense of smell, as they all believe that *igqirha* must smell *umhlola*; 2) sight, as *igqirha* must have a vision/dream about *umhlola*; 3) touch, as *igqirha* assesses touching on the right track is viewed as *ukubamba umhlola* (to touch the problem); 4) hearing, as *igqirha* receives spontaneous information about the client through *umbilini*; and 5) taste as *igqirha* speaks about it, interprets and translates the information from the supernatural and her transference experiences to the client.

*Amagqirha* use inductive ways, as opposed to the deductive methods of assessments used by Western-trained doctors, as shown in the cases below. Through *umbilini umkhwetha* learns to connect to her bodily spiritual sensations, visual perceptions and sensory perceptions into a meaningful explanation of illness, clients' problems, social life, work problems, family problems and various issues affecting the client and her work, family and political situations. In that sense, *umbilini*<sup>54</sup> provides wide, boundless and timeless information (see Section 5.3, p.161).

The credibility and evidence of a good *igqirha* is assessed by the high turnover of clients and patients. In addition, because *amagqirha* share the same language and most cultural values, 90% of their clientele stand a chance to be served to their satisfaction. Research reveals that *amagqirha* are consulted more than any other profession, and have a high profile in the community (Mabunda, 2001 and Peltzer, 1998). Broster (1981) further confirms the evidence that *amagqirha* are capable of healing and treating conditions that the medical doctors fail to treat (Mlisa, 2007). They also look for lost property, as shown below (see Section 6.1.3, p.180). The effectiveness and the value of *amagqirha* practice is demonstrated by its professional growth and sustainability as it continues to exist and attract interest from even those who never believe in it.

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<sup>53</sup> The term includes three activities *ukuxilonga* (to assess at individual level); *ukuvumisa* (to assess beyond individual level, including to check for hidden property, that is, *unontongwana* (used to train the trainees) and *ukwelapha* (to treat)

<sup>54</sup> See more on *umbilini* and its role in the *amaXhosa* divination system on Mlisa (2007). The dreams, visions and *umbilini*: the sustained traditional techniques of therapy used by *Xhosa amagqirha* in Southern Africa.

## 6.1 CASE STUDIES

This section provides details of four case studies of divinations. These provide a background to the prelude of how *amagqirha* assess, diagnose, and treat their clients using *umbilini* (intuition). Clients consulting with healers come from all social backgrounds, religious backgrounds, cultural and social levels. Sometimes cases indicate the aetiology of *ukuthwasa* and sometimes a type of illness that *amagqirha* treat/cure and how certain cases are managed beyond just treatment with herbs. The cause of the illness is often related to either misfortune, the wrath of the ancestors, witchcraft or natural causes. In each dialogue, the researcher add her own comments and at times include comments based on her discussions with the healers, clients, or at times public members, including the clients' family members. She presents the ethnographic texts with explanations 'in real time' using the present tense. The first case studies reflect on how the researcher's personal spiritual journey was diagnosed and confirmed (see Preface and Chapter 4).

### 6.1.1 Case 1: *Ukuthwasa* is diagnosed

On 20 September 1994, my mother, Zanethongo, requested the company of her sister Ray, my late brother Makabongwe, and my late uncle Vakele, to accompany us to Tyhini Bantu Village in Tsolo to counsel with the senior and popular *igqirha*, the late Matogu Ngqongwa. That was a response to a long series of crises and incidents when I would fall asleep while counselling clients (psychiatric clients in particular). As we approached the homestead, a small, short, young man, probably in his late twenties, came to us. We identified him as *umkhwetha* as he wore white beads around his head, neck and all around his joints. He was dressed in khaki clothing. He had a small *intonga* (stick) in his left hand. He greeted us and kept quiet. I was surprised by this gesture (no shaking of hands or asking how we were). My uncle replied, "*Sizindwendwe mntu omhlophe sifuna iindaba.*" (We are clients, white person,<sup>55</sup> we want news). Without a word, he led us to the middle hut. We were offered an *ikhuko* (a grass mat) to sit on and were told to take off our shoes. He left us.

A few minutes later he came back, followed by a tall strong woman holding *inxili* (a small bag made of floral cloth with her pipe inside). She greeted us and sat entla, and *umkhwetha* kneeled opposite us on the right-hand side of the house. I observed a huge bead around his head, which also covered his forehead. He also had a small tin and took out a match and set light to something in the tin. There was smoke coming out and by the smell of it we realised it

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<sup>55</sup> This is terminology used to denote *igqirha*, as *ukuthwasa* is viewed as a white illness (see Chapter 1 and 2).

was *impepho* (incense). All the time it was quiet and Matogu filled her pipe and started smoking. *Umkhwetha* knelt closer to us but still maintained a gap of about three feet between us. He looked down (his upper part of the face covered by the bead – hexa); he had two sticks and held them upright, touching the ground. He told us he was going to give us *iindaba* (news) and told us to listen carefully. Whenever he kept quiet we had to say whether we agreed with him or not. As he talked we kept replying, ‘*Camagu!*’ Later on, we learnt that his name was Vezikude (hearing from far), that is, his name of *ukugula*. The assessment session went as follows:

**Vezikude:** *Camagu!*

**Us:** *Camagu!*

**Vezikude:** *Nizengomhlola.* (You have come because of trouble.)

**Us:** *Siyavuma!* (Yes!)

**Vezikude:** *Intombi inengxaki. Iyaphupha ngamandla, iyaboniswa!* (The girl has a problem. She dreams profusely. She has visions!)

**Us:** *Siyavuma!*

**Vezikude:** *Ilahlekelwa yimali akaboni iyaphi. Uyaxabana nabantu neetshomi akanazo ncam.* (She loses her money and does not know where it goes. She is at loggerheads with people and friends; she does not have friends.)

**My family:** *Siyavuma!* (This response made me to keep quiet and I was fed-up.)<sup>56</sup>

**Vezikude:** *Niyazazi ezi zinto?* (Do you know these things?)

After a long silence, my uncle said, “*Ewe siyazazi zenziwa yintoni?*” (Yes, we know them. What causes them?)

**Vezikude:** *Unengulo yesiXhosa.* (She has Xhosa sickness, which means *ukuthwasa*.)

**My family:** *Camagu! Siphosa ngasemva.* (*Camagu!* We throw behind. This means it is so.)  
At that stage, I looked at him irritably and angrily.

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<sup>56</sup> That was a feeling I usually got whenever I saw *igqirha*, even on the street. I would feel irritable, angry and fed up. That was without any reason. I always wondered what caused that. It was until I went through the initiation and one day Matogu explained that my feelings were caused by cross-transference of what I was picking up, that I was the same with *amagqirha* but had not done anything about it. So unconsciously, my ignorance about who I was irritated me.



Vezikude kept quiet, still maintaining his position. After a while, Matogu asked if he had finished. He agreed. Matogu then looked at us for the first time, because during Vezikude's consultation she was smoking and looking down. She said:

*"Camagu! Ingxaki kukuba le ngulo isemntwini ofunde kakhulu. Ayimqali ngoku lo mtana le nto. Kudala nihamba yaye akaqondi yena ukuba iingxaki anazo zenziwa yiyo. Intwaso inengxaki, andazi nizakumthini kuba ebefanele amakhosi. Ndinawo kodwa awekho kuba ndisebumnyameni. Kusweleke unyana womntakwethu ngoko ke andivumelekanga ndiwasebenzise de ndibe ndihlanjwe. Ukhona omnye umntu endinganithumela kuye siyasebenzisana mhlawumbi nofika abantu bekhona. Camagu!"* (Camagu! The problem is that this illness is in a highly educated person. It is not something new in this child. You have been consulting but she does not understand that it is the cause of the problems she is experiencing. *Intwaso* (noun of *ukuthwasa*) is a problem, I do not know what you are going to do with her, but she has to be consulted by *amakhosi* (foreign spirits used by some *amaXhosa* healers to help with a diagnosis). I have them but they are not here because I am mourning. My brother's son has passed away and therefore I am not allowed to use them until the cleansing ritual has been performed for me. There is another person I can refer you to. We work together; perhaps you can find people at home.)

**My family:** *Camagu mama! Sokhe sibonisane.* (Camagu! Mother, we will consult amongst ourselves). Matogu and Vezikude left to give us some privacy.

My uncle asked if we wanted to consult that person and my mother was against it. According to her, Vezikude and Matogu had given us the information we needed. She was satisfied. On the other hand, I was not really satisfied. I was of the opinion that he was going to point out all the problems I had, especially the recent ones like sleeping while driving and when consulting with clients. My uncle assured me that it was clear that Vezikude was not a senior *umkhwetha* but he had done his best and told me the cause of those problems. My brother supported them and told me that I had to think seriously about *ukuthwasa*. Vezikude came back and wanted to know about our decision. We informed him and he called Matogu.

On hearing our decision, Matogu asked me to come and make tea for ourselves. Vezikude remembered that we had not paid for the consultation. We were asked to pay a R35 consulting fee. I put it down on the floor in front of him. He knelt down and took it. He performed a strange gesture: He waved the money above his head, under his armpits, around the waist, and around both legs before he put it down. He gave it to Matogu who did the same and gave it back to him. He sprinkled ashes of the burnt incense on it and put it *entla* and left it there.

Matogu told me that she felt sorry for me and if it had been easy to remove that illness, she would have done it for me, but unfortunately she could not. I looked at her and was not sure what to say. Before we left, she gave my mother *ubulawu* plant to grow in her yard. She picked it up on her small *umrawule* (place for herbs) next to the house where we were. My mother thanked her and gave her R2 as *umrumo* (gift). On our way home, we discussed the results of our consultation and what I was supposed to do. I told them I was not going to be *igqirha* and do *into yamaqaba* (a thing of the Red *amaXhosa*). I had to go back to the university in two days' time. For some reason, I was anxious and worried about that *ukuthwasa* process. I was sure there was a mistake because by that time I was already a nurse and a psychologist; what else did my ancestors want from me? I wanted to forget about it, but due to problems I had experienced I was prepared to undergo *ukuthwasa*.

This case revealed the complex nature of *ubizo* (calling) as well as a process that is followed to confirm that a person has the gift to be *igqirha*. The complex nature of the calling is demonstrated by the series of various forms of crises and incidents (see Preface, Chapter 4 and 5) and is only managed by undergoing *ukuthwasa* initiation. The decision to *thwasa* is informed by confirmation of *ubizo* (calling) by an experienced *amagqirha* as indicated above. An elaborate account on the dynamics of the consultation session is given in the discussion chapter.

### 6.1.2 Case 2: Linking sexually transmitted disease with infertility

On 12 September 2005, the researcher went to Tsolo to interview Boniswa. On arrival, Boniswa had visitors. It was a couple. Boniswa asked where the couple came from. Instead of responding to Boniswa's inquiry, the couple said they were *iindwendwe* (clients). Boniswa then asked them to follow her to her *indlu enkulu* (family house). She asked if the researcher would take<sup>57</sup> them and she refused. She then requested *umkhwetha* to come and do an *imvumisa* (assessment).

*Umkhwetha* came dressed in khakis with goatskins around all her joints and across her breast. Her uniform depicted her senior level of training. She prepared herself and took her two sticks and *umkhonto* (a spear). She asked the clients what type of assessment they wanted, and the clients wanted *iindaba ezinkulu* (meaning *imvumisa* – an assessment that includes personal physical ailments as well as social and work-related issues) (see Mlisa, 2007). They were informed that the fee was R50. *iindwendwe* were satisfied with the

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<sup>57</sup> This is another way that means to do assessments.

amount. *Umkhwetha* burned *impepho* on a small plate and she sat a few feet away from *iindwendwe*. *Imvumisa* (assessment) began:

***Umkhwetha:*** *Camagwini!*

***Iindwendwe:*** *Camagu!*

***Umkhwetha:*** *Ingxaki inkulu! Ikumama, umama akafumani abantwana! Ngubani ingxaki?* (There is a big problem! It is with the woman; she does not get children. Who is the problem?) It was silent for some time. *Umkhwetha* shifted from side to side; eyes closed but seemingly searching for something with eyes closed.

After five minutes' silence:

***Umkhwetha:*** *Ingxaki ngutata. Ubudoda bakhe bungcolile. Unehashe. Iingcolisa isibeleko sikamama. Ndigqibile.* (The problem is with the man. His manhood is infected. He has gonorrhoea. It is infecting the womb of the woman. I have finished).

With a confidence I have never seen, *umkhwetha*, after saying that, stood up and went to the table, took a mug and drank water. That was clear evidence that she was sure of her story.

**Boniswa to *umkhwetha:*** *Mkhwethazana,*<sup>58</sup> *ugqibile* (have you finished?).

***Umkhwetha:*** *Ewe, mama.* (Yes, Mother).

She came back and knelt down again. (All this time *iindwendwe* remained silent).

**Boniswa:** Did you ask if *iindwendwe* agrees with you?

***Iindwendwe*** (simultaneously): *Asinambuzo sanele.* (We do not have any questions; we are satisfied). The husband puts his hand in the pocket, takes out the money, and pays *umkhwetha*. In turn, she puts it down and sprinkles ashes from the burnt *impepho*.

**Boniswa:** *Uyayazi ukuba kufuneka wenze ntoni ukuze ufumane umntwana?* (Do you know what to do to get a child?)

***Iindwendwe:*** *Hayi!* (No!)

**Boniswa:** *Kufuneka benze ntoni mkhwethazana?* (What must they do, Trainee?)

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<sup>58</sup> The term *mkhwethazana* is a diminutive of *umkhwetha* as well as indicating the feminine gender. At times it is used when the name of the person is not used.

**Umkhwethazana:** Both of you must be treated. You need to drink medicine to cleanse the gonorrhoea so that the womb is clean.

**Boniswa:** *Ndifuna ukubuza unkosikazi wakho umbuzo. Abantu bakowenu bakwenzela intambo?* (I want to ask the wife a question. Did your family make *intambo*? (a cultural necklace from the goat's tendon – see Hunter, 1979).

The answer was no. Boniswa suggested that, in addition to the treatment, the wife's family had to perform a ritual for her *intambo*. The benefit of such a ritual is to connect the person with her ancestors and to ensure that her fertility is stimulated. After that *umkhwethazana*, Boniswa and the researcher performed the usual ritual with money and it was placed in *umrawule* (dispensary) The participants sat down to discuss the herbs to be given to the couple to treat the problem. Thereafter *umkhwetha* informed the couple about the full treatment regime and how payment should be handled. She started with *imvula tasi* (a deposit), which was R700 and *inkomo* (full payment for the treatment – R2500) and the payment procedures. The deposit was included in the full amount and the balance could be paid in small instalments (as a client could afford) and the last payment was to be done after the birth of the child. The couple paid the deposit and were given their medication and the instructions how to use it. After the money ritual performance, all relaxed and Boniswa asked for their personal details, after which they requested to leave.

During that session, *umkhwetha* demonstrated her experience and expertise as a senior *umkhwetha* in assessment and diagnosis. No time was wasted. It was impressive to observe how the physiological link was made between the man's illness and its implication for the wife's reproductive system. When Boniswa revealed that *umkhwetha* had not attended school further than Standard 6 (Grade 8), it was even more striking to watch her ability to link the two matters (gonorrhoea and infertility). Again, the illness was solely biological and no mention of witchcraft was made. That indicated a shift from the traditional way of divining when divination focused more on witchcraft than any other cause. Boniswa explained that *inkomo* (full fee) would be paid once the woman has conceived or after delivery. In other words, Boniswa would like to see the full results before accepting payment for her services. That session confirmed what Peltz (1998) claims, namely that *amagqirha* treated almost all illnesses.

Boniswa's fees were higher than the standard rates. She justified the raising of her prices of *inkomo* (from R1 500) because of the inflation rate. According to Boniswa, the fees had to be increased to relate to market prices, as the inflation rate also affected *amagqirha*. This also revealed the flexibility of *amagqirha* in making independent decisions regarding their fees.

Furthermore, it clearly depicted a lack of legal control and management in the profession, as compared to their counterparts whose professions are regulated by centralised, professional guidelines and regulations. In such professions, bench-marked prices are used.

Boniswa's reasons for *amagqirha* using market-related prices are valid. According to her, *amagqirha* use money to travel to forests far away from home to procure herbs. The other challenge is the increasing lack of herbs at local places because of the increased utilisation of herbs by many people other than *amagqirha*, for example, those who sell medicine on the streets. Moreover, at times *amagqirha* also combine herbs with certain pharmaceutical products, which are purchased at higher prices.

The case revealed the power of *umbilini* as the central skill used by *amagqirha* in assessment. For instance, in the case of Western medical doctors, a history would have been obtained from the client and urine specimens and gynaecological tests undertaken to diagnose the fertility status of the woman and to reach a final diagnosis. At a certain stage *umkhwetha* demonstrated similar techniques used in Western assessment methods, namely the therapeutic use of silence. She was silent while she was listening to her bodily senses. She also used her listening skills to hear what her ancestral guides were telling her. That mirrors what Matogu (2004) would say, "*Intloko funeka ivuleke ucinge kamsinya.*" (The head must be clear and you must think quickly.)

*Umkhwetha* (trainee) learns by doing. As she progresses, she learns to be confident and to trust her intuitive abilities. That is exactly what is needed. According to Boniswa, once *umkhwetha* or *igqirha* does not believe in her senses, she can never *vumisa* (assess or diagnose). This is contrary to what the Western philosophy suggests, namely that intuition is a hunch and needs to be tested. According to *amagqirha*, *umbilini* allows the transference of the client's problem to *igqirha/umkhwetha*'s body. In this case, no referral is made to a Western doctor because *igqirha* knows what to do and more so, the relevant referral is to the family to perform the fertility ritual to enable the woman to conceive. Boniswa supervises and guides *umkhwetha* throughout the session. She also makes sure that she offers a last word.

The treatment is not individualised but meant for both partners. The couple was given herbs to make a mixture to drink; others were for vomiting, steam inhalation and enemas. The main purpose of these treatments is to cleanse the reproductive system.

Unfortunately, no feedback of the outcome of that session is available. However, according to Boniswa, once gonorrhoea is cleared and a woman has performed her infertility rituals, the treatment of infertility becomes simple. Other evidence, however, suggests an opposite

picture when patients may give up after numerous consultations with doctors as well as *amagqirha*. At the same time, validated information as to the actual prevalence rate and/or statistics on the prognosis of infertility versus fertility when treated by *amagqirha* is not readily available. From personal observation the researcher can attest to the fact that *amagqirha* sometimes perform better than medical doctors. A nurse friend of the researcher had problems maintaining her pregnancy for nine months. Every time, after three or four month's pregnancy, she would have a miscarriage. After consulting with a popular *igqirha*, she conceived, carried her child full term, and she now has three children.

### 6.1.3 Case 3: The missing *invubu*

In 1998, when I avoided *ukuthwasa* and decided to do *ubuthandazeli* (faith-healing), I had numerous problems with noises in my ears. One day, Lady Bishop Malman of the St John's Apostolic Faith Mission Church at Mdantsane Township, advised me to have *imfukamo* ritual. She referred me to *igqirha* who could undertake the procedure. Initially, I had problems with the intervention, as I was under the impression that the St John's Apostolic Faith Mission Church was against traditional ritual ceremonies such as *ukuthwasa*. According to the Church's dogmas, *ukuthwasa* is acknowledged as a gift from God if the person accepts it as *umthandazeli* (faith-healer). If the person accepts it as *igqirha*, it is considered a pagan practice.

On 22 May 1997, after having been convinced that that was the route to follow, I sought counsel with *igqirha*, MaMtshawe. *Igqirha* lived in another village outside Mdantsane, about 45 km away from East London, near Gulu Village. She suggested that I underwent *imfukamo*<sup>59</sup> because the noise in my ears was due to *abantu abadala*<sup>60</sup> (ancestors speaking to me). A date was set for me to visit her again so that we could go through the preparations for *imfukamo*. Two weeks later, I visited Mamtshawe. After reflecting on all my dreams, including that of my childhood, we went through all the necessary arrangements. I had to avoid fatty foods and meat of all kinds and had to drink a herbal mixture she had prepared for me. In addition, I was to *vuma* (accept) *intwaso* (verb of *ukuthwasa*) temporarily since I could not do *imfukamo* ritual before *ukuvuma ukufa* (see Preface and Chapter 4). Furthermore, I had to brew *utywala* (sorghum) and buy six bottles of brandy. I was also going to be placed in *ithonto* (small round hut made of grass) for at least two days. She also instructed me to

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<sup>59</sup> See Chapter 3.

<sup>60</sup> Ventriloquism.

invite the local *amagqirha* and community to the ritual and charged me R500 for *inkomo yeqqirha*.<sup>61</sup>

On 10 June 1997, when the preparations had been made, I had to fetch *igqirha* and her colleague (as *igqirha* cannot come on her own). We arrived in my village, Tsengiwe, at sunset. *Igqirha* met with my family and again explained the procedure. My family and I had questions to ask. The main question was about the temporal acceptance of *intwaso* when I was actually *umthandazeli*. *Igqirha* suggested that I undertook it or else the ritual of *imfukamo* would be postponed. With all the preparations made, the family had to accept the conditions. All went as planned and on the morning of departure, as I was serving tea, a colleague of Mamtshawe asked us (another trainee and myself) to look for a missing *imvubu* (sjambok).

I inquired how it was mislaid because I had taken all their belongings with them to the house. She was not perturbed but insisted that we looked for the sjambok. As we left the house, I asked my colleague if she had any idea where it could be and she had none. I suddenly had the feeling that I should go behind another house nearby where *amagqirha* stayed. As I sat down, I looked next to me and I saw the sjambok. I could not believe it and excitedly I cried out loudly, “*Ndiyifumene!*” (I have found it!). My family was confused as to what had excited me and what I had done. I told them the story of the lost sjambok and that we had to look for it. My mother laughed and said, “*Uwinile*” (You have won), and excitedly started to sing our clan praises. I was rather shocked about her reaction but ignored it and went to *amagqirha* to give them the sjambok. The other *umkhwetha* was still looking around and she stopped. Mamtshawe’s colleague said, “Nomfundo may not know the customs, but I think she will make a good *umkhwetha* and should be close to *igqirha*.” Mamtshawe did not respond. Her colleague’s statement did not make sense to me until later on.

The case revealed another important and specialised skill practised only by traditional healers; that of the search for lost property using *umbilini*. The ability to search for lost property is not a basic skill that all *amagqirha* have, yet it is imposed upon all who undergo *ukuthwasa* training. *Amagqirha* use it as a sign of assessing the sensitivity and sharpness of the trainee’s intuitive skills.

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<sup>61</sup> An ox for *igqirha* is a metaphor used for fees charged by *igqirha*.

#### 6.1.4 Case 4: Two women are initiated as faith-healers

During the fieldwork, many Apostolic Churches were visited to observe the interface between the ancestral and Christian beliefs. Reverend Mrwetyana of the Ntselamanzi Village near Alice was interviewed (see Section 4). She is well known as Mandlovu. The two students involved in the project were invited to at least two ritual performances where two women were incarnated with *izingelosi* (angels) and ancestors. The two women did not want to *thwasa* (verb of *ukuthwasa*) and wanted to be *abathandazeli* (faith-healers). Mandlovu believes in ancestors but has a different way of soothing them. As a faith-healer of the St John's Apostolic Faith Mission she follows her trainees' needs and does not impose the Church's dogmas on them.

On both occasions, all preparations had already been made, including the buying of two goats and two sheep. According to Mandlovu, the goats were for those ancestors who believed in the traditional ways of healing and the sheep were for those who preferred Christian lifestyles. The goats were slaughtered and roasted while the sheep were slaughtered and grilled. She explained to us that the goats were to request those ancestors who believe in *ukuthwasa* to allow the two women to be initiated as faith-healers and not *amagqirha*. That would forge positive ancestral ties between the two sets of ancestors (traditional and Christian) so that they both could work together in harmony. In other words, "*Iyabadibanisa bazokudibana naba becawe basebenzisane bonke, siyixhela apha ecaweni ukuze xa bemfuna bafike enuka ibhokhwe bangamfulatheli and naxa bemhambela apha ecaweni bangamkhathazi basebenzisane naye. Kaloku lamathambo amhlophe ngala umprofethi Ezekiel athi, 'mathambo ndithi liveni ilizwi likaThixo'.*" (Ezekiel 37:4). (It incorporates the ancestral ties with Christian ties, we slaughter them (goats) here in church so that when they want [ancestors] her<sup>62</sup> they should find her smelling it [goat] and should not forsake her. When they visit her in church, they must not disturb her instead they must support her. You will recall that the white bones are those that the prophet Ezekiel spoke about and said, 'Dry bones, hear the word of the Lord') (Mandlovu, 2006).

Mandlovu continued to explain that the roasted goat was specifically for the ancestors and for some people from the community who had come to witness the ritual ceremony. It was important that the initiate and the other Apostolic Church members did not eat the meat of the goat. No sorghum was brewed during that ceremony. She also explained that the reason for not eating the meat of the goat was out of respect for Christian values.

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<sup>62</sup> 'Her' in this sense means each one of the initiates.



An initiate is washed by a portion of blood mixed with *umswane* (contents of the colon) taken from the sheep and the goat. In addition to oats and sheep, two white chickens were slaughtered for each initiate. Mandlovu explained that it was a rule that, for seven days after the ritual, the initiates could not have a full body wash. However, they are allowed to wipe the important parts. Initiates have to smell *umswane* and bile so that when the ancestors come, they can smell them. Certain other parts are taken from the slaughtered animals: kidneys and *umhlelo* (fat). These are burnt as gifts to ancestors on a special altar; and the ritual is called *isitshiso* (burning of the sacrifice) (see **Figure 6-1** below). In that church, animals for sacrifices are not slaughtered by *intlabi* (the family member nominated to slaughter sacrificial animals by his clan) but by a church member nominated and blessed to do so. The head of the church, in this case Mandlovu, burns the parts on the altar. She clarified it as follows: “This is in the Bible, Leviticus 1:3-17. The sacrifices are done in the presence of the eminent God and the aromas from the sheep please the Lord, while those of the goats please the initiate’s ancestors.”



**Figure 6-1** *Isitshiso* – burning of the sacrifice

During the sacrifice, Mandlovu prays and talks to her own and the person’s ancestors, but also to the angels and God of all the previous prophets who are seniors to her and who have trained her. This ritual, which is often conducted on a Saturday, is followed by *imvuselelo*

(church prayer and singing) throughout the night. The initiates are introduced to the church congregation. At the church service, between 11:00 to 15:00 (with intervals in between) the following day, they are welcomed and given a blue skirt with a white blouse and jacket as a uniform. At that stage, they serve as *izigulana* (patients) while being trained to become *abathandazeli*. They learn to *ukuhlaluba* (to assess and diagnose), to hold certain church services and how to perform during such services.

At a certain stage they buy new Bibles and put them under their pillows. After seven days, they bring their Bibles to the Head of the Church. The Bible must not be opened until the Head of the church has prayed for them. On the day of the prayer, *isigulane* (initiate) opens it for the first time in front of the Head of the Church and the page she opens is at is taken as the verse to lead *isigulane's* spiritual path. The Head of the Church reads and prays together with *isigulane* for three days. She helps her interpret what the verse and writer of that verse says. After that, the Bible is used by *isigulane* solely for *ukuhlaluba* (to assess and diagnose). *Isigulane* is now an *umhlahlubi* (assessor) until she reaches a level where the Head of the Church promotes her to a higher level. That takes an indefinite time because the training process is not specific, as it depends on *umoya* (spirit). It may take six months or a year. The two women did not give permission to use their photos – a request respected here. However, illustrations demonstrating certain key aspects of the rituals with Mandlovu leading them are shown (see **Figure 6-2**).



**Figure 6-2** Other ritual scenarios at church: Mandlovu sanctifies water (left) and she and other women bless food for the sacrifice (right).

This case demonstrated the close connections between *amaXhosa amagqirha* and *abathandazeli* (faith-healers). It depicted common characteristics in the nature of *ubizo* and differences in the initiation processes of *ukuthwasa* and *ubuthandazeli* (faith-healing). A further point of interest is that faith-healing is often perceived by *amaXhosa* as a Western-

related practice because of its association with Christian religious spirituality, yet in this case, it is given to Mandlovu as a 'best choice' by her ancestors (see Chapter 4). Other important elements raised in this case are two Biblical instances where the connection of the ancestral ties and burning of sacrifices are closely linked with the ritual activities described in the Old Testament. The case confirmed the researcher's experiential spiritual journey (see Preface and Chapter 4), but in a different scenario, since Mandlovu did not complete *ukuthwasa* initiation. In addition, the case proved the fact that the 'gift of healing' is inherited and is beyond an individual's choice – it is determined by ancestors and God.

### 6.1.5 Case 5: The use of a placebo when death is close

On 23 February 2006, the researcher visited Zanemvula, a senior *igqirha* living in Ugie Township. On arrival, all sat in the kitchen and she enquired about the researcher's *impilo* (wellbeing). There was a knock at the door and two young women came in and greeted us. The two women reported that their father was critically ill and begged Zanemvula for help, "*Sincede mama sisafuna aphile utata yaye uyazifihla,*" (Help us, *mama*, we still want our father alive, he hides the seriousness of ill health) they said. Zanemvula smiled and looked at them and said, "*Siyazama ubomi bobenkosi kodwa senza konke esinako uphi yena ngoku?*" (We try, life is in the Lord's hand, but we do all we can, where is he now?). Simultaneously, both women said, "In the car outside."

Zanemvula invited the researcher to accompany her to the car. There was a white 4 x 4 vehicle outside her yard. On the driver's seat was a middle-aged man. Judging by his looks he was around 55 years old. There was an old woman next to him, one in the seat behind him and three children in the back seat. Zanemvula asked *impilo* (how they were). The driver was calm and quiet. I was more attracted to him than to the rest. As I looked at him I felt very tired, my throat felt blocked but not painful and I had a very funny feeling like a cold shiver throughout my body. It was just a quick feeling from head to toes and then it was gone. That amazed me because it was a sign I experienced whenever news and death took place. I must have looked at him intently without realising it because he also looked at me in a strange way. I felt embarrassed. I made a noise with my throat trying to unblock it, and I looked away, yet the sensations remained.

I was released from the uncomfortable situation by Zanemvula's voice, "*Novintsholo kha uze, lindani apha nina noba aningenanga sizakunilungiselela ndizakunibiza xa sigqibile. Ndicingela wena ke, ungazixhamli ngokuhamba.*" (Novintsholo, come, wait here all of you. You do not have to come inside. We are going to attend to you and we shall call you when

we have finished. I am thinking about you; do not worry yourself about walking.)<sup>63</sup> We went into the house.

In the house, we stood in the middle of the kitchen and looked at each other. She said, "What is wrong with him?" I said, "I think it is cancer, his throat is blocked." I kept quiet. She was quiet too still looking at me. I continued, "He is dying because I had a cold shiver and usually I have that when I hear bad news or death. I am worried about him. Tell me, is he a healer? I think he has a strong healing gift but I did not have time to think about that because he looked at me in a strange way. I may have looked at him for a long time. I was embarrassed. He also made me feel weak and tired. I think he is dying. What do you think?"

Zanemvula walked to the inside room where she keeps her herbs. She talked as we walked. She said, "Yes, he will die, but it is not throat cancer, he has a bad *idliso* (poison)." I disagreed and said, "I am sure he has cancer because my throat felt blocked in a strange and terrible way but it was not painful. To me his cancer is in the last stages." Zanemvula looked at me and was silent. She then said, "*lithini iyeza?*" (What is the medication?) I said, "Nothing, he goes to hospital and has surgery. We cannot treat cancer at this stage, but you are my senior, you decide." She said, "*Alikho iyeza* (There is no medicine), but let me give him something." She took a carton with medical treatment and I observed that it was for throat lozenges. I looked at her in surprise. As if she knew that I was querying what she was doing, she told me that the man was a medical doctor and that was why I sensed the healing gift. I questioned her about giving the medical doctor lozenges, which he must have in his surgery. She then took *iqwili* (herb) and asked me to grind a little bit.

We went to the car with the little powder from the herb and lozenges. At the car she gave the lozenges as well instructions on how to use the powder. I could not believe my ears when an *igqirha* told *ugqirha* (medical doctor) how to use the medication she had obtained from a doctor. The doctor was still sitting in the same way, cool and quiet and he listened at Zanemvula as she talked. The last words from Zanemvula were, "I do not have enough stock of the medicine. Please send the children to come and fetch more after a week. Novintsholo and I are going to pick more medicine tomorrow. I am going away for a week and will prepare your medicine on my return. I wish you good luck. Be positive, and pray!" There was brief silence in the car and then we all exchanged goodbyes. The car left and we waved to them and went back to the house.

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<sup>63</sup> She was referring to the driver.

In the house, I wanted Zanemvula to explain her actions. She smiled and sat down. She informed me that the man would die very soon and so there was no need to waste their time and prepare medicine that was not going to help anyway. She was hopeful that the throat lozenges and the powder at least would reflect some of her respect for them instead of them going home with nothing. The next time I saw Zanemvula she told me that the doctor died within one week after his visit.

The case showed the use of a placebo as an alternative route to put the client at ease during times of difficulties beyond the powers of *igqirha*. It showed that *amagqirha* use a client-centred approach and that it was important to put their clients at ease at the most critical times. The use of a placebo is also an alternative that medical doctors use as well. The case revealed how powerful the intuitive skills of *igqirha* could be – as imminent death was diagnosed.

The five cases presented confirmed the power of *umbilini* as an assessment and diagnostic skill used by *amagqirha* in their divination system. All five cases indicated that *amagqirha* use an inductive approach, since they provide the client with information that culminate in a diagnosis that is followed by treatment. The cases also showed the evolutionary and transformative processes involved in *ukuthwasa* as a practice. For example, in the second case (Section 6.1.2, p.176) where the treatment of sexually transmitted disease and infertility is related to the Western medical model of syndromatic (combining different syndromes in one treatment) treatment of disease and includes the partner. An elaborated reflection on the divination system practice system is discussed in the discussion chapter.

## **6.2 TRADITIONAL DIVINATION AND FAITH-HEALING PRACTICE**

This section briefly discusses *amaXhosa* perspectives on the interrelationships between the traditional healing practices, Christianity and how each or both are practised. In that way, the focus is only on how the practitioners involved in this study view, experience and practise it. The discussion correlates and elaborates on the descriptions of the case studies (Section 6.1 ,p.171) and narratives (Chapter 4) discussed previously. The central argument is the interface between the ancestral and the Christian world.

The interface between the ancestral world and the Christian world reveals that Africans do not separate the two (Buhrmann, 1984; Pauw, 1975b; Hirst, 2005 and Mbiti, 2000).

### 6.2.1 AmaXhosa and the image of God: Christianity versus *ukuthwasa*

*Amagqirha* in the field also mentioned that the tradition carried down from previous generations through narratives by *amagqirha* before them reveal that *amagqirha* were accorded better status by the community before the colonisation era. Matogu (2004) compared the current status of *amagqirha* and that before *umlungu afike* (the arrival of white persons) by saying:

*“Kudala phaya, igqirha eli beli xatyisiwe, ingumntu ontloni. Nalo ke phofu belizixabisile. Hayi le nto ndiyibona namhlanje. He! Masishiye apho. Bekukho intlonipho, ukugula kwesiXhosa kuxatyisiwe, ingeyonto yakudlala. Igqirha beliphantse lifane nenkosi. Igqirha belisisandla senkosi. Bekusithi yakuxakeka inkosi kubizwe igqirha gxebe usiyazi okanye umhlekazi. Kaloku ebebizwa njalo amagqirha.”* (In the past, *igqirha* was respected, was a royal person. In turn, *igqirha* had self-respect. Not what I observe nowadays. There was respect; *ukuthwasa* acquired high esteem; it was not something to play around with. *Igqirha* was accorded a similar status to that of the chiefs and only God was above *igqirha*. *Igqirha* was a chief’s assistant. If the chief was in trouble, he would call *igqirha*; I mean the one who knows senior and wise *igqirha* (*usiyazi*) or chief [*umhlekazi*]. That was how *amagqirha* were called).

She continued further: *“Umntu ebesiza egqirheni lona lithethe neminyanya yalo nezomntu lowo, zona zixelele igqirha imeko yomntu lowo. Igqirha ke lona lixhelelwa ngumdali wento zonke nazizinyanya. Owegqirha uThixo use ndalweni owenu magqoboka usecaweni. Nantso ke indlela endayixelelwa ngayo nam ngabangaphambi kwam. Zange ke mna ndibuze imibuzo emininzi nje ngawe kwelam igqirha kuba thina sasixelelwa simamele qha. Phofu nam ndibona njalo. Kodwa ke abangazinto nabathanda ukunyemba bebongohluli phakathi kwegqirha negqwirha.”* (A person would seek counsel with *igqirha*. *Igqirha* mediates with her ancestors and those of the person, and then they tell *igqirha* the message. *Igqirha* is also informed or given intuitive information by the Creator of all things and ancestors. The God of *igqirha* is in nature and that of Christians are in church. That is what I was told by my predecessors. I never asked my *igqirha* many questions like you do because we were told to *listen, that is all. In fact, I also see it that way. However, those who are ignorant and hate amagqirha* cannot differentiate between *igqirha* and a witch).

Matogu’s statement is loaded with very important information, but for the moment the focus will be upon the reflections she gave on the status of *igqirha*. Her statement is discussed in many instances in the following chapters. The discussion will show that her statement provides contradictory understandings of the status of *amagqirha*. History reveals that

*amagqirha* were mostly perceived as witch-smellers and purveyors of sorcery. Yet, Matogu (in 2004 already 104 years old and having been *igqirha* from the age of fifteen), supports the report by Soga (1931 & 1989) that the status of *amagqirha* was high. She reported that their status was undermined by the arrival of whites. That may explain why African political power relations after independence seemed to want to transform and reclaim the 'original and authentic' healing identity and professional identity of *amagqirha*. Her statement also refers to an important factor, that of *ubugqirha* (divining/healing) *nobugqwirha* (witchcraft). The fact that the two terms are close makes it easy to confuse them. Both are placed at opposing ends. In the middle are common characteristics such as use of myths, ritual, magic and herbs, the nature of their abstractness and the intuitive ways of knowing.

Matogu's report on *amagqirha*'s God being in nature and the fact that to them God is *umdali*, portrays the epistemological premises of the *amaXhosa*'s religious belief value systems already mentioned. That is also Mbiti's (2000) focus that daily African activities portray spirituality and that Africans have one God and share monotheistic religious beliefs, as opposed to the animism and polytheism religious value system proposed by the earlier anthropologists (for example, Evans-Pritchard, 1937 and Brownlee, 1896). The complexity of understanding *ukuthwasa* can also be blamed on linguistic issues, as various terms are closely associated yet with a different meaning to *ukuthwasa* (read more in Section 2.2, p. 61).

Furthermore, Matogu's statement confirms the fact that even those *amagqirha* who are not Christians or attend church services have a belief in God as a Creator. In Genesis (1:1 and 11:9) God created humans in His image, irrespective of what career path they would follow. Hence that means that *amagqirha* are also God's creation and equally share the blessings of His creation with any human being and that includes their inborn gift. *Amagqirha* may be supported in their understanding that the gift of *ubizo* (calling) is closely related to that of the prophets in the Old Testament as well as that of the disciples in the New Testament. For example, the books on the Gospel in the New Testament reveal and explain the many hardships, crisis, and incidents that were experienced by disciples through their spiritual journeys. That is a belief that *amagqirha* share. The potential of humankind is great because of their closeness to the image of God; so is that of *amagqirha*. Humankind was given responsibility and wisdom to take care of His creation and universe. *Amagqirha* have always cherished this, as proven by the results of this study. To them the spiritual crises and hardships of *ukuthwasa* are God's plan and that of ancestors who are mediators between people and God; to train the aspiring *igqirha* to understand the crises as well as the ability to manage them is a means to empowering them with relevant skills to heal others.

The beliefs of *amagqirha* and Matogu's statement show the close connections between the status, position, role and traditional cultural values of *amagqirha* and that of God's creation. Subsequently, the gift of using *umbilini* (intuition) and the ability to see beyond what the normal eye can see is always attributed to the closeness of *igqirha* to God's creation. This goes further to the fact that in *ukuthwasa*, magic and use of supernatural powers are perceived to position *amagqirha* closely to God; therefore they were socially positioned to the level of chiefs. According to them, this elevated position was changed by the political situation when the Western-European Christian culture was introduced with the arrival of the Europeans in this country. Then *amagqirha* were perceived as witch-smellers and *ukuthwasa* as heathenism and paganism. This shows that interrelationships between the two traditions were strained by the introduction of the new spiritual dimension of the Western religious thinking that brought Christian baptism, conversion and repentance and the Western, Christian religious values as the only acknowledged social ways of living.

From personal experience and observation between the two practices, support may be rendered to the fact that there are not many differences between the two except the people's perceptions based on their socialised lifestyle values. For example, the ritual structure in both the church and *ukuthwasa* is similar; ritual performance and shedding of blood. Both use the same animals: goats, sheep, chickens and oxen. The differences are based on the social orientation of an individual. For example, those *amagqirha* who go to church always begin their ritual performances with a prayer, whereas those who do not go to church although they do believe in God do not use prayer. For instance, during the researcher's instances of training and during *ukuphehla* (shake/stir) *ubulawu*, the Lord's Prayer was recited. That was an automatic response but to other *amagqirha* it was not the time for prayer. Matogu would then defend the researcher's action. It was evident to the researcher that *ukunqula* (clan praising) predominantly used in *ukuthwasa* is not different to prayer for respect to both the ancestors and Creator is shown. The negative attitude to prayer of some *amagqirha* was a contradicting issue, since on the one hand they believed in God as a Creator and being everywhere, yet on the other hand, they did not believe in prayer during the ritual performance.

*Amagqirha's* attitude towards the reality on the interface between Christianity and *ukuthwasa* is always affected by various factors rather than just the upbringing of a person. For example, Boniswa believed in prayer and in the lighting of the candles, but would do this ritual at the end of the ritual performance. She would give each person in the house a candle and use different colours. One candle would be lit and everybody else would light from one another. Her idea was to make a chain of peace, solidarity and encouraging *ubuntu* and



support for one another. After that she would instruct people to pray simultaneously and the door would be opened. The reason given was that she wanted God to be present as if He would not if the door was closed. This reasoning differs from the researcher's understanding that God is everywhere and that closing the door is a sign of respect and to dedicate that special moment to God and to avoid any unnecessary disturbances during that moment. In that way, variations in perceptions are also directed by our own experiences not only by that of our cultural values per se.

*Amagqirha* use animals for sacrifices in the sacred places, which they relate to appealing to their ancestors' needs, being thirsty and hungry at times. Conversely, *abathandazeli* (faith-healers) use of sacrifices in the form of meals, chickens, and animals is based on the book of Leviticus 1 and 2. During fieldwork it became clear that the practice of *amagqirha* is predominantly based on the Old Testament and at times cross-cut through the New Testament, for example, baptism with water and full immersion in water. Zamevula is *igqirha* but also holds a higher position at church. According to her, there is no tension at all because it is God who gave her the skill to heal. She then would quote Ephesians 4 where it describes that God has given people different gifts, including that of healing others. To her there is no difference between the two practices except *ukucalula kwabantu* – differentiations made by people.

In the Preface and Chapter 4, the personal narrative also indicated that in the rituals conducted and in all those performed, prayer both at the beginning and at the end of a ritual played a key role. In addition, during graduation the late Bishop Dwane anointed the researcher as a healer in Christ. In that way, the skills, traditional healing and faith-healing skills were integrated into one. This interface cannot be forsaken because during the colonial period and afterwards many of our family members were converted to Christianity and those connections cannot be ignored. *Amagqirha*, whether Christian or not (as Boniswa reflects in her story) have to respect all *iminyanya* or *umzi* (ancestors of the homestead) without any discrimination. The acknowledgement of the powers of the supernatural by *amaXhosa* is not only on ancestral respect and acknowledgement but also that of accommodating the Christian values, and instead of forsaking their own, the traditional and the Christian religious values. Ntsikana's response to conversion is further supportive evidence. The fact that he saw a need to wash the red ochre from his body but refused to be baptised because according to his views, he had already done so in 'his own way', reveals the fact that all that we believe in is based and influenced also by our own experiences and meanings an interpretations we attach to incidents or the world around us.

The church seems to observe the same sacred places as *amagqirha*: rivers and the significance of water and the kraal. Both the traditional and Christian practice view *ukuphehlelela* (baptism) as a symbol of repentance, purification and transformation, changing old habits to new. Both view water as the central symbol of life and healing. Its use is associated with blood. Considering that in the Old Testament when God wanted to save the firstborn of the Israelites when they were captives under Pharaoh, the sign of protection was blood from the lambs placed on the doorposts of each household. Shedding blood may also be associated with Jesus' miracles and his last days in particular. When He was stabbed in His heart, water poured out and later on blood. To most Christians, that was a great sign of Jesus giving the abundant life and health to all. The shedding of blood during rituals is not a sign of dying but of giving life to someone needy – a trainee or *igqirha* (see more in Exodus 12:21-27; John 19:34 and 6:53-58) – is an idea that those *amagqirha* who believe in God also share. Blood is a symbol of life and good health.

Other common characteristics observed were:

- It seems that St John's Church mainly relies on the on the Old Testament, which is predominantly about rituals, customs, and laws; hence even Mandlovu's examples are from the Old Testament.
- The same procedures used by *amagqirha* to cleanse and purify a trainee: washing the body; shedding of blood as a sacrifice; the communiqué by a family member and a trainer; including submission of the trainee to the initiation; are used by faith-healers.
- Both begin with clan praises and conclude by requesting the mercy, protection and guidance of the Almighty, the Creator – *Usifuba-sibanzi* (God) to relieve them of their pains and struggles and to bless their divination practice in order to heal their clients. In both practices, the trainer is guided by the trainees' dreams and visions (see Preface, Chapter 4 and Chapter 9). The New Testament testifies to the fact that God has given a variety of skills to all (Ephesians 4) and Jesus' prophecy is fulfilled that women, men and children would receive the Holy Spirit and would all prophesy (Acts 2).
- There is myth involved in both systems that makes it difficult to explain reasons in normal terms why things are happening as they do. For example how do Christians explain the reality of miracles performed by our Lord Jesus Christ? How does a person walk on water? What does our science and principle of source of gravity apply

to this incident? However, by faith we believe in its truth and *amagqirha* use the same principle of faith. For example, one cannot describe in normal language the sacredness and miraculous creation of an insightful and clear intuition experienced by all those who had undergone *intonjane* initiation.

A variety of differences have been identified, such as: 1) the use of the Bible by *abathandazeli* as a tool for assessment and diagnosis versus reliance on *umbilini* alone in the case of *amagqirha*. The Bible is blessed and a certain ritual is followed. While *abathandazeli* use *iziwasho* (ash from burned herbs or medicine products bought in pharmacies), *amagqirha* predominantly use herbs. *Amagqirha* query the use of ashes from herbs because in the end it does not change the product or the ingredients of the herb. Personal experience would explain this rather as a matter of wanting to do things differently, than just using a fresh herb as it is. The other difference is that the training stages of *ubuthandazeli* are not as clearly defined as that of *amagqirha* (see Chapter 4 and Section 5.3, p.161).

Both *amagqirha* and *abathandazeli* use the same ways to treat clients (see Section 2.1.2, p.43, Section 2.1.3, p.52 and Chapter 5). The difference is that, instead of *amayeza* (herbs), *iziwasho* are used. *Iziwasho* is a mixture of medicinal products from the chemist such as vinegar; Vicks, Vaseline and many others, including ashes from burned herbs. The most predominant way of healing is by the laying on of hands, drinking blessed water, and full immersion in water, especially in deep parts of the rivers and in the sea through a ritual called *isiwasho* (cleansing) or *intlambululo* (purification). A person is immersed seven times in the river. The full immersion in water is crucial and is seen as the only baptismal and purification method (see Chapter 9). This ritual is closely associated with the baptism of Jesus by John the Baptist in the river Jordan (Luke 3:21-37). In addition, the cleansing and purification is associated with the command given to Naaman by Elisha (2 Kings 5:1-7) in the river Jordan to cleanse his leprosy by washing his body seven times through immersion. What is interesting is that when *abathandazeli* arrive at such places which they also view as sacred places (as *amagqirha* do), they sing clan praises to ancestors and to a list of angels of various faith-healers who trained them. For example, they often utter, "I thank the angels of *Mama* ... (Mlisa and a whole list of all faith-healers she met with in her spiritual journey) who washed me and saved me from my ailments," in all the healing sessions or church services, including cleansing ceremonies. They then sing, light candles, pray and read the Bible before they engage with water. In addition, they put money in the water. These rituals show respect to the ancestors and angels in the water, as in the case with *amagqirha*. What

is different then? All sing praises to people whom they believe have made a difference in their lives, whether dead or still alive or called angels or ancestors.

The difference between the two is in the mind as one may gauge from Mandlovu's and the researcher's narratives. *Abathandazeli* have adapted *ukuthandazela* to accommodate the Christian principles. Because the church is the most acceptable spiritual institution, most prefer *ukuthandazela* (praying for others) to *ubugqirha* (divining). *Amagqirha* solely use *umbilini* to assess, diagnose and heal, while *abathandazeli* use the Bible to *ukuhlhluba* (assess). However, even then *umbilini* plays a key role. *Ukuhlhluba* is a Zulu and Sesotho term, not Xhosa. Evidence suggests that the Zionist Churches originated from the Basotho and came down to the Eastern Cape. It then explains why the independent churches in the Eastern Cape and St John's Apostolic Church in particular are influenced by Sesotho terms, rituals and songs. In addition, other authors such as Mqotsi (1957) believes that the basic origins of the Zionist and the Pentecostal Churches are American based (Comaroff & Comaroff, 1990 & 1991).

In the personal experiences of the researcher at the beginning of the training as an *umthandazeli* (faith-healer), there was no clear indication as to how to use the Bible to assess clients and preference was given to *umbilini* (intuition). As a matter of fact, even after that training and up to today, the intuitive skills cannot be excluded from the process. This is also supported by Dr Serote (2007) and Cumes (2004) who confirm that whether a person throws bones or use the Bible, the use of *umbilini* cannot be excluded. Dr Serote further explains that bones help him to contextualise the clients' problem and *umbilini* gives more details and helps to locate issues accordingly. Therefore, in this context, the Bible works closely with the ancestral guidance and there is integration of cultural world, Christian world and human interaction.

In conclusion it may be stated that to *amaXhosa* there is only one world perceived in various cultural ways. The interface between the traditional healing and Christian spiritual healing is inevitable and natural (read more in Section 5.4, p.164).

## **6.2.2 Reflections on the Divination Sytem**

The reflections include three areas: assessment; diagnosis and treatment as well as differences between the practice of *amagqirha* and their Western-trained practitioners (psychotherapists) and *abathandazeli*. The discussion concentrates only on the key factors involved. They are:

**The *igqirha*'s orientation:** *Igqirha* receives ancestral guidance as to the probability of obtaining *iindwendwe*, either intuitively or through dreams. *Igqirha* bases her divination on the cause-effect of all the factors surrounding her clients. *Igqirha* shares a similar view of life than the clients. In the case of the psychotherapist, orientation involves theory based on all learned philosophical and biological therapeutic models and theories learnt at school. Intuition is viewed as guess work or gut feeling and unreliable information that need to be tested. Premonitions involved in psychotherapy are not perceived as real information but viewed as hypotheses. However, the Preface and Chapter 4, provides a personal account of how the problems of clients before seeing or meeting them are sensed by *amagqirha*. There is no clear picture of what was happening in *amaXhosa* divination before but the training as a psychologist does not give preference to positive use of intuition as endorsed in the training of *amagqirha*.

**The setting for the session:** In a traditional practice, sessions are not pre-booked and they do not follow a fixed rigid format of filling forms and other activities undertaken by psychotherapists, but are flexible. They work on a first-come-first-served basis. The priority is on assessment before too much interaction and physical contact take place. This is crucial, because too much interaction before the session can begin to contaminate the results. Biographic information is collected at the end (see Section 4.1.2, p.116). Both practices structure the beginning more or less the same. A contract between the client and the healer is set up and the fee structure is agreed upon. The rules of the consultation session are explained. The difference is a matter of length or the duration of the session. The sessions often last as long as it takes for the clients and the healer to exhaust the assessment and diagnosis (traditional), contrary to that of the psychotherapists where there are fixed time schedules at a fixed cost. While psychotherapists make clients pay for missed appointments if not cancelled before a specified time, *amagqirha* practise on a flexi-time basis. They are available 24 hours a day with no charges for after-hours' services as a psychotherapist would do. Moreover, *igqirha* can sleep over at a client's *umzi* at no extra cost for days. Privacy is observed by all.

**The burning of *impepho*** is crucial. That is not practised by psychotherapists. However, some Indian psychotherapists do burn incense in their offices (Indian sticks/lucky sticks). The burning of incense invites the presence of *iminyanya*, as mediums between people and God. That is not important to psychotherapists whose practice, as Buhrmann (1982) rightly says, is guided by their learned psychotherapy theories, not spirits.

**Positioning and distance:** That is crucial. Close contact is avoided until at end of the session. Often that is not even negotiated with the client. There must be a distance between *igqirha* and *iindwendwe* (clients). In certain cases that may be the case with psychotherapists but often positioning is negotiated with the client.

**Inquiry:** Inquiry in the case of traditional healers involves a person's life cycle: social, personal, physical, work, relationships and many other factors, including the possibility of the influence of witchcraft and sorcery. Psychotherapists have a pre-planned, fixed format. The psychotherapist concentrates solely on biomedical cause and effect.

**The presence of witchcraft:** In the African cosmology of illness, witchcraft, magic and mythology are often implied whether as a cause of the problem in relation to the illness, or as part of the resolution. Psychotherapists do not correlate the cause and effect of illness to supernatural powers.

**Client participation:** Traditional therapists use a client-centred approach but a little different from the approach used by Western-trained therapists. At the beginning the expected participation of the client is that of partial passiveness (clapping hands and saying *siyavuma* and *camagu*), and at the end, full participation is accepted: reflecting on the assessment process and information given and clarification needed on certain issues. This portion includes a more detailed history of the biographical information. With psychotherapists the consultation session becomes solely client-centred with full participation of the client from the beginning to the end of the session. Psychotherapists require an active participation of the client to be responsible in solving her problems, whereas *amagqirha* take that responsibility and a client only has a passive responsibility. In essence, most clients enjoy the passive role they play and thus *igqirha* can easily be perceived as a better therapist than a psychotherapist.

**Fees for consultation:** The fees are not viewed as payment for services but as an *isipholumrumo* (gift) to *iminyanya* (ancestors). Payment takes various forms: sheep, chicken, cloth, or any other token a person may offer as a means of appreciation. Psychotherapists charge fees and not payment in the form of gifts. In addition, no rituals are conducted by psychotherapists on receipt of payment as demonstrated in Cases 1 and 2 (Chapter 6). *Amagqirha*, like psychotherapists have benchmarked fees. However, flexibility is allowed accordingly to make individual preferences. With *amagqirha*, there are no legal or fixed criteria used to determine the prices. Benchmarking of prices is not adhered to, even if it exists, whereas psychotherapists have to consider professional, benchmarked prices for their services.

**The drama during the session:** The clapping of hands and the responses, including *igqirha*'s change of tone or pitch of voice at times create a drama that stimulates both *igqirha*'s intuition and *iindwendwes*' excitement, which in turn elevate their hopes for good results. None of these apply in psychotherapy.

**Treatment:** Unlike their counterparts, *amagqirha* treat spiritual, political, financial, work-related issues and cleanse their clients' environments, homes and work environment. Therefore their treatment is holistic in the true sense versus that of their counterparts, which claim to be holistic, yet fail to cleanse and strengthen (*ukubethelela*), their clients' homes. To *amagqirha*, their philosophy is that a client cannot be cleansed if *umzi* is excluded, as that would defeat the goal of protecting the clients from evil spirits. The treatment is based on natural herbs, although at times pharmaceutical products are also used. Because of the use of *umbilini*, the whole treatment plan is based predominantly on inductive ways of healing versus the deductive ways used by psychotherapists. Other similarities and differences can be found in Oosthuizen, 1989 and Buhrmann, 1977, 1979 & 1982 and Schweitzer & Buhrmann, 1978).

**Referral:** *Amagqirha* do refer to one another as well as to psychotherapists but psychotherapists have not yet reached this level as yet. No information exists of any client who was referred to *igqirha* by any of the psychotherapists.

**Umbilini as an inborn gift:** To *amagqirha*, unlike psychotherapists, *umbilini* is the reality, the truth and valuable information that has to be trusted and used in *ukunyanga*<sup>64</sup> (healing) *iindwendwe* (clients). *Amagqirha* perceive *umbilini* as a subjective ability that is cognitively processed and interpreted in the head. That means that information from the client's world is sensed by the lower part of the stomach, transmitted through the spine and up to the fontanelles (top of the head) where it is interpreted. In addition, dreams and visions also enhance the functioning powers of *umbilini* (intuition). Thus, *amagqirha* can be said to be functioning in a holistic manner. As their bodies become the magnetic agents to feel, sense, smell, touch and hear the environmental and body cues of their clients, the information is interpreted in the left and right hemispheres of their brains (Mlisa, 2009 a & b).

Some clarity on brain functioning was gained from the anatomy classes during the training course of the researcher as a nurse. The left-brain hemisphere concentrates on information

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<sup>64</sup> The term includes three activities: *ukuxilonga* (to assess at individual level); *ukuvumisa* (to assess beyond individual level, including to check for hidden property that is); *unontongwana* (used to train the trainees); and *ukwelapha* (to treat).

brought to it by the right-brain hemisphere. The information comes through intuition, feelings, senses and images through visions and dreams (the information from the collective unconsciousness), all functions of the right-brain hemisphere. This means that the information from the inner senses of the lower part of the abdomen is transferred to the right hemisphere and the left hemispheres of the brain (because these parts function in an integrated manner). That information is quickly processed step-by-step in the left hemisphere and analysed into meaningful information. The fact that *amagqirha* use intuition as the instrumental skill in their practice means that they are right-brain-dominant. That is why they are intuitive and creative and produce information that an ordinary person cannot. Their inborn gift and intense cultural incarnation create this network automatically and allows it to work in this way.

***Umbilini* as a diagnostic tool:** Psychotherapists use a variety of objective and medical tests in addition to a full history, and as well as the Revised Diagnostic Statistical Manual (DSM-1V-R) to arrive at a diagnosis. For instance, in Case 2, for the confirmation of infertility and a sexually transmitted disease (which Boniswa's trainer diagnosed through *umbilini*), medical doctors would have conducted a series of urine tests and diagnostic procedures. In addition, their finding would have been through a biographical data session and a series of questions to the client to describe her problem. Furthermore, that information would have been recorded in files. Yet, with Boniswa, all that information is recorded mentally and will not be forgotten.

To the above list, some general similarities between the two practices may be added. These are:

- All undergo training, within a specified curriculum, supervision under a trained and qualified trainer and all graduate at end of the training. However, one is formal while the other is informal (traditional). The duration of the training is more or less the same – five years and more.
- In both practices practitioners dispense medication (except those not legally registered to do so). *Amagqirha* keep their medicine at their *umrawule* (Mabona, 2004 and Mndende, 2004) while psychotherapies have pharmacies. Both use similar methods to treat their clients such as vomiting, steam inhalations, enemas, baths, fomentations, minor surgeries and incisions and counselling.
- Both use preventive and curative methods in treating their clients, *amagqirha* in addition use herbs, rituals, rites of passage, *ukuqubula* (minor incisions to remove poisons or



unwanted elements from the body) etc. All use education awareness and campaigns, including family therapeutic therapy.

- *Amagqirha*, like their counterparts, share a professional relationship with their clients. Respect lies at the centre of their relationship (demonstrated by all cases in Chapter 5). 80% of the participants in the study (115 participants) enumerated various reasons why *amagqirha* win the respect of their clients. Some include the easy accessibility and availability of *amagqirha* at no extra cost to the clients (Mlisa, 2007). One other reason was that *amagqirha* never let the clients leave their consulting rooms without medication. That is revealed by the case study on placebo (see Section 6.1.5., p.185). It has been observed that, if clients consult any type of psychotherapist, the expectation is that they take medicine home and if not, they do not believe in that psychotherapist. To them drug use is the key factor in healing. Giving medicine, even if it is a placebo (in the case of Zanamvula) to their patients that is a sign of respecting them as patients and that gives *igqirha* some credibility as patients/clients believe in medicines. Even certain medical doctors are buying in on that and would give vitamins instead of letting a patient leave her surgery with nothing. This attitude is influenced by patients' and clients' belief in medicine. Often during consultations clients would ask for pain tablets and that shows how much clients believe in the use and power of medicines.

However, about 20% of the participants in the research were not in favour of *amagqirha* because they were not sure if they could be trusted. Other issues about *amagqirha* were that: 1) they are expensive; 2) they drink too much and make mistakes when conducting rituals; 3) they like to relate issues to witchcraft and can cause tension between families or neighbours; 4) they have a low level of integrity because at times they do not practise confidentiality; 5) there is a stigma associated with consulting *amagqirha*, especially if a person is a Christian and/or well educated. Sometimes *amagqirha* get it all wrong and some do not take people's money but some still charge people, irrespective of wrong assessment. It is such unprofessional conduct that discredits the integrity of certain *amagqirha* and sometimes other people generalise such behaviours to all *amagqirha*.

As much as there seems to be contradictory views on the effectiveness and/or popularity of *amagqirha*, however, the community still needs them. Once all other methods fail, they still seem to be the choice of the people. The results from a survey conducted by Mabunda (2001:13-14) to check whether traditional healers were still needed in modern society revealed that 89% of university students gave a positive response, 62% of those in churches gave positive responses and 71% of those in hospitals. Again, in the same survey, 64% of

university students were positive about the use of both practices; as were 60% of hospital patients and 41% of church people. These results suggest that *amagqirha* still play a valuable role in our society and across the social status and educational boundaries. With the new political development *amagqirha* do have a positive future to become a legal and well-controlled profession (see Chapter 3). Looking at the rate at which *amagqirha* have been used since the pre-colonial era to date, I can say with confidence that *umbilini* is an effective skill in healing their clients.

*Amagqirha* gain credibility and win clients in the sessions once they zoom to the reason(s) why clients have consulted with them, hence it is crucial to use an inductive method.

### **6.3 CONCLUDING REMARKS**

The focus of this chapter was on describing various divination traditional healing practices by *amagqirha* and also in describing the interface between *ukuthwasa* and Christian values. Five cases were used to demonstrate the client and *igqirha* relationships during the assessment and diagnostic sessions. The dynamics of the sessions and the various approaches used by *amagqirha* to manage the world-views of their clients were discussed. The cases also brought up various issues or client problems, their causes, and how clients experience them. On the other hand, the role played by *abakhwetha* (novices/trainees) during the assessment and diagnostic sessions was highlighted, as well as the ritual activities carried out. The role of supervision played by *amagqirha* highlighted their leadership skills as supervisors and overall case managers.

The skills to manage a particular treatment case revealed the healing integrated approach used by *amagqirha* as shown by the case of the treatment of a sexually transmitted disease and infertility and that of the use of a placebo. In addition, their approach during consultation sessions revealed that they use an inductive approach, since they inform their clients about their problems, as opposed to the deductive approach used by the Western medical model, where doctors ask information from their clients. The client management during the sessions highlighted diverse methods used to approach clients as well as diverse social issues that force people to consult with *amagqirha*.

The consultations revealed a client-centred approach because all questions and assessments basically revolved around the client, even if an assessor sometimes went beyond the personal boundaries of the client to touch on the members of the family members or partners, as shown in the treatment of the sexually transmitted diseases and infertility (see

Section 4.3., p. 129). In addition, the interface between the traditional healing and faith-healing practices was investigated. Similarities in practices were identified as well as differences in terminology used, interpretation, perceptions and views on diverse issues involved. In fact, it was found that *amaXhosa*, like other Africans, perceive the world as one universe, created by God and interpret it according to diverse cultural perceptions based also on human experience and cultural socialisation.

In all, it became clear that the spirituality involved and assumed in the process of diagnosis and treatment by *amagqirha* reminds strongly of what Victor Turner (1969) describes as “ascending ritual symbolism”. *Umbilini* (intuition) is informed by ancestor spiritual presence and the body of the healer becomes a physical barometer of that spiritual presence as well as the positive or negative energies of the patient. It is almost as if everything is experienced from below- from the sense that the spacial content becomes pregnant with energy to which intuitive feeling is the natural response. *Umbilini* is not “tapped” from a cognitive belief that the ancestors would assist with knowledge from the above. *Umbilini* is immediate and directly informed by the bodily presence manifested in *igqirha*. From the ritual space or the sacred space of healing when ancestors are invoked, “ascends” the awareness in the bodies present. That is why *amagqirha* are able to inform a client of her problems without questioning the client.

## CHAPTER 7 CENTRAL MUSICAL RITUALS IN *UKUTHWASA*

In this chapter the two musical rituals central to all the ritual ceremonies performed by *amagqirha* are selected for description. These are *ukuxhoma iqonga* (placing the gifts) and *intlombe* (séance). The description focuses on the structure of the two rituals, the rules governing them and the role of *abakhwetha* in both rituals. Both are key elements in the training curriculum of *abakhwetha*. A comparison of the different perceptions pertaining to the role of *intlombe* amongst the *amaXhosa* and local cultures is made. *Ngoma* (songs) are central to all *amaXhosa* activities as a way of expressing their feelings, sadness, excitement, views, and perception on their illness and all diverse situations of their social life. The two *ngoma* discussed in this chapter are central to an *igqirha's* life cycle and are conducted in all rituals performed. The description will be done from an angle of personal experience and exposure to the rituals by the researcher.

*Ngoma* (song/s) amongst *amaXhosa* form part of their daily lives. It is part of their daily and normal communication. Through *ngoma* *amaXhosa* can share and express their feelings towards one another. *Ngoma* are used in different contexts: comedy, love, painful moments, the story of one's life, political, social and economic life situations, during rites, ritual performances and ordinary social ceremonies. More often than not, there are specific related *ngoma* for each situation, although at times certain *iingoma* (songs) fit into various contexts.

Anthropologists and ethnographers view the issue of *ngoma* therapeutics as critical in African healing systems. Janzen (1992:85-109) associates *ngoma* with ritual therapeutics and entertainment and advocates that the concept *ngoma* focuses on the ritual and musical drumming. *Ngoma* and drumming relates to rites of passage; the invitation of spirits for healing the afflictions or illnesses of the clients, and to the healing of the healer herself, that is, the transformation of a healer from a sufferer to a self-projecting healer. Other works are those of Turner (1968) on the drums of afflictions and *ngoma* (cults of afflictions); therapeutics among the Ndembu of Zambia; Erdtsieck (2003) on the therapeutic value of songs amongst Tanzanian healers; and Friedson (1996) amongst the Vimbuza of the Timbuka.

## 7.1 UKUXHOMA IQONGA

One of the crucial issues in *ukuthwasa* is the invoking of ancestors and the awakening, stimulation and nurturing of *umbilini*. *Intlombe* is one of the strategies used to awaken *umbilini*. On 25 September 1998, I visited Matogu (my trainer) at Site C, Khayelitsha, Cape Town and as a way of welcoming, an *intlombe* was planned for me. Matogu requested that I prepare for the experience of *intlombe* that night. Without much knowledge of what that entailed I responded by saying I would not mind. However, I told her I could not sing their songs and *xhentsa* (dance). She assured me that it was the norm to be welcomed by *intlombe* and as such, I had to learn the songs and how *intlombe* is conducted. "It is a must that you learn it, even if you write songs down, because you must know them," she said. Matogu gave me a few ideas about the preparations for *intlombe*. I had to buy a bottle of brandy, a bottle of Oros crush, snuff, a box of matches and sugar, all for the *abahlekazi* (ancestors). I also bought a case of beer for the *abakhwetha* for the whole-night *intlombe*. I was accompanied to a nearby shopping area to buy the necessities. Before *intlombe*, another musical ritual was performed just shortly after my return from the shopping area. That was *ukuxhoma iqonga* (to place gifts for the ancestors).

On our return from the shopping area, Matogu instructed us to prepare for *ukuxhoma*. She instructed me to get a book and write down all that was going to happen so that I could read it and learn it by heart. Her instruction raised an issue with her trainees, "She must write?" Matogu said, "Yes, she needs to because she is not staying with us and she lives far away. That is the only way she can remember some of these things." I think that explained it, as there were no further queries. I watched each and every move and the following happened: (1) a junior *umkhwetha* (recognised by the uniform)<sup>65</sup> was summoned to bring *igubu* (drum). (2) Anele went to the wall and picked up a head bead necklace called *icamagu* and wore it. (3) *Igubu* was brought in with sticks to beat it. (4) The other *umkhwetha* brought the things I had bought and placed the plastic in the centre of the room. The beer was not brought in. (5) *Umkwetha* who brought *igubu* brought in a small jug and dish full of clean water and a spoon. (6) Anele, who had been standing and waiting next to the hanging curtain, asked the junior *umkhwetha* to *vuma* (sing). (7) *Umkwetha* started singing an *ngoma* called *vumelani isangoma* (singing for the *sangoma*). It goes like:

*ho! vumelani sangoma x2*

*ho! Sithule asithethi isangoma*

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<sup>65</sup> She wore khakis with no beads at all around her joints.

*ho! vumelani isangoma*

*(ho! sing for the sangoma x2*

*ho! The sangoma is silent and does not speak*

*ho! Sing for the sangoma)*

*Anibonina ukuba usisangoma*

*Ho! vumelani isangoma*

*uMatogu sisangoma*

*Vumelani sangoma*

*(Can't you see that she is a sangoma?*

*Ho! Sing for the sangoma.*

*Matogu is a sangoma*

*Ho! Sing for the sangoma)*

*Thule uthe tu uLangwana*

*Ho! vumelani isangoma*

*Khanisivumele isangoma*

*Vumelani isangoma.*

*(Langwana is silent*

*Ho! Sing for the sangoma*

*Sing for the sangoma x 2).*

After the first verse Anele said “*Camagu!* I ask permission to go to *iqonga* (place to put the gifts). The others responded, *Camagu!* (9) *Ingoma* (song) continued and in the meantime Anele moved the curtain aside and for the first time I could see the contents behind. There was a wooden plate placed longitudinally against the wall on two long nails bored on the wall. A white, decorated cloth covered it. Anele brought back a small tray with two glasses on it, a

dish cloth and a small tin of snuff (black with a yellow top) on it. There was also a box of matches. There were other contents left behind and not placed on the small tray – a small, decorated grass basket and a small glass jug. (10) After placing the tray down, Anele interrupted the singing by saying, *Camagu!* All responded, *Camagu!* (11) Anele said, “I am back from *iqonga* and the ancestors did not blind me.” The audience responded, *Camagu!* (12) While the singing continued, Anele, rinsed the two glasses and poured water into the jug and were just about to mix it with Oros crush when (13) Matogu interrupted, “*Chosi Camagu!*” We all said, “*Camagu!*” She continued, “Novintsholo must first talk and introduce herself to the *abahlekazi* (ancestors) and tell them that she is giving them a present. She has to talk after me and must remember the sequence of doing this.”

I followed after her in the following sequence.<sup>66</sup> “*Camagu!*” and sung my clan praises, starting from my father’s clan; my mother, grandfather’s side; grandmother’s side, her clan’s (Matogu as my *igqirha* – following the same sequence); the Komanisi senior *amagqirha* clans: Mbaru, Nakisa, Gungu, and so on; then I explained the reason for my visit and had to count all the gifts I brought one by one. I asked for blessings from the *abahlekazi* and that they should guide me and lead my spiritual journey. To finish, I said “*Camagu!*” All responded, “*Camagu!*” (14) The singing began and Anele mixed the Oros crush, poured it into one glass and opened the bottle of brandy. He poured it at the doorway first, and then into a second glass and joined the singing and danced. He then interrupted again, “*Camagu!* I request permission to go and place the gifts for the ancestors on the *iqonga*.” (15) That time I saw one of the *abakhwetha* who was singing, standing and clapping her hands, moving closer to Anele. She stood behind him and when Anele was closer to *iqonga* he interrupted the singing and said, “*Camagu!*” and we all responded. (16) He raised his head and looked up at the *iqonga* and said, “*Camagu, bahlekazi*, I bring gifts from Novintsholo, please bless her and guide her in her journey and let her succeed in her *ukuthwasa*. Please drink and we will share what you have left for us.” After that he gave the tray to *umkhwetha* behind him. (17) The singing began and Anele continued to place the gifts one by one, taking them from the tray, which was lifted high by *umkhwetha* behind him. When all the gifts were placed on the *iqonga*, Anele drew the curtain to cover the *iqonga* and they both returned and joined the music.

They danced a bit and Anele got in, “*Camagusha!*” Response: *Camagu!* (18) He addressed us again, “I have come back from placing gifts on the *iqonga*, I placed the gifts from Novintsholo and the ancestors did not blind me.” We all said, “*Camagu!*” (19) The singing

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<sup>66</sup> This is a very long and tedious sequence and full information is provided by video as well as full paper describing the structure of the ritual still on draft.

adjourned and *igubu* (drum) was placed on its place at the corner of the outside room and Anele started serving all of us with what remained from the gifts. (20) The first to be served was brandy. A full glass was given to me and I refused, but was told to drink it all, even though I did not drink. That was difficult but I managed to do so. Then it went to Matogu, Anele, *umkhwetha* who helped Anele, and lastly to the junior *umkhwetha*. The cool drink was next and the same serving procedure was followed. Every time Anele served a person, he would say, “*Camagu*” as he gave the person the glass of brandy or drink and the recipient would also respond likewise. The remaining brandy was then left for Matogu and others to drink but was to be taken in their leisure time.

On the morning of the following day, the same procedure was followed to bring the gifts down. A mini *intlombe* was performed with *vumelani isangoma* the main *ingoma*. Again Anele requested to take the gifts down and after coming back from placing them on the *iqonga*, he informed us that the gifts had been used and ancestors had left something for us. I was shocked to see that the two glasses full of brandy and drink were three-quarters full. If I had not been there all the time I would have been convinced that somebody had drunk them.

On many occasions afterwards I observed the same thing except on one occasion where no drink had been touched. That occasion led to Matogu and the *abakhwetha* remaining silent after Anele had reported that the ancestors had not used the drink. After a while Matogu informed us that the person who had offered the gifts had not done so whole-heartedly. I then had a strong belief in the ritual. The remaining drinks were used and the dishes washed and placed on *iqonga* again. The ritual was then completed. *Intlombe* was scheduled for that evening.

## **7.2 INTLOMBE**

The *intlombe* is blessed by provocative, vocal communication strategies dominated by singing, clapping hands, clan praises, dancing, and tin belts and iron ring anklets, all comprising a wonderful shared sense of humour. *lingoma* (songs) reflect the historical, contemporary, political, religious, emotional and socio-economic *amaXhosa* lifestyles and existential experiences.



### 7.2.1 The structure, rules and norms of *intlombe*

The diviners always form a circle, or what Carl Jung would describe as the mandala. The circle (if danced inside the house) would be around *iziko* (fireplace) in the middle of the house. That is a sacred place for *amaXhosa* where the ancestors live. It is also a place where *amaXhosa*, in particular those who observe traditional religious and social practices, make a fire and cook food (see Chapter 3). The circle also resembles the form of a full moon, a symbol of completeness and togetherness. In fact, diviners form a linked chain in dancing around *iziko*. The circle has three cycles: the small inner circle formed by *iziko*; the middle cycle formed by *amagqirha* and the large circle formed by the audience as they sit, following the shape of the house.

Everything is in a prescribed sequence. There is a beginning (*ukungena*), middle and end (*ukuvala intlombe*). There are also prescribed songs to mark each phase. Between the songs, all the diviners in the circle have to take turns to say clan praises. All *iminyanya* present must be acknowledged, respected, invited and welcomed to stay harmoniously together. Sometimes there is a specific dress code according to the ritual or ceremony. Standing positions are taken according to the seniority of *amagqirha* and *abakhwetha*. The most senior person stands in front of them all and the most junior at the back. The hierarchy is taken seriously. *Amagqirha* are not allowed to *xhentsa* (dance) simultaneously with *abakhwetha*. Each group takes its turn to dance while the other support the audience in singing and clapping hands in order to emphasise the importance of respect and loyalty.

*lingoma* are selected according to the ritual/ceremony. The harmony of the singing is controlled mainly by the beat of the drum, followed by the clapping of hands and the systematic pattern of feet pounding. Around the feet, *amagqirha* often wear various objects such as tin belts and ankle belts that make a noise when pounding their feet on the ground. The dancing skill demands art, vision and quick action in order to master the technique. Some achieve skills without training but others like me have to practise. Once mastered, a person learns to form her own styles or variations. Singing is accompanied by the clapping of hands, mostly the duty of the audience and the group of *amagqirha/abakhwetha* not participating in the dance. To *amaXhosa*, the beauty of these dances lies in the performance and variations in the songs and dancing styles.

The clapping of hands that accompanies the singing is also enhanced by the rhythmic stamping of feet on the earth, thus claiming their rebirth, connectedness and re-interconnectedness with Mother Nature. *Intlombe* can be called off once the clapping

weakens. That is to safeguard and protect the emotional and spiritual trauma the diviners go through. Sometimes the audience is severely threatened, especially by senior diviners. If they do not clap their hands they will be asked to leave the house or will not be offered sorghum during the entertainment time. Such threats often play a major role and as a result a heated and vibrant *intlombe* is experienced.

In addition, certain strict rules are imposed on all. For example, people in the house are not allowed to wear shoes, are not allowed to talk to one another (not loudly at least) and must not go out or enter while the dancing is in progress. However, between the singing sessions, when diviners sing clan praises and talk, people can move in and out, although that is not recommended. Boniswa explained the reason. Control of movement during the singing session is necessary since movement affects the communication with ancestors and displaces the diviners' capacity to see visions.

Matogu explained the role of the clan praises between the songs as a means of evoking ancestral spirits to open up links with them. *Intlombe* embraces the presence of the ancestors and encourages the vibration of *amagqirha's* spiritual mythical and cultural presence and those around. That cannot be observed when *amagqirha* dance; once the harmony of their music starts spreading, even the members of the audience/spectators start to become excited and dance or shake their bodies. Music therefore does not just open lines of communication between diviners but also forms a critical link between diviners, ancestors and their spectators. Songs are therefore part of incarnating the initiates or diviners more with Mother Earth and their ancestors. In that way too, transformation and spiritual revival often occur. Very often, some diviners would experience a trance. This experience resonates well with Van Baal & Van Beek's (1985:242) findings that music and myth have a mysterious power over man. These both affect a listener emotionally and strongly stir her/his feelings.

### **7.2.2 The sequence of *intlombe***

*Intlombe* (see Addendum F.3) has different phases, each with specific activities and songs sung and a particular sequence of communicative activities. For example, the initial phase includes the singing of the first two *iingoma*. The first *ingoma* (song) is dedicated to the ancestors themselves and invites their presence. Then the senior *umkhwetha* or *ikrwala*<sup>67</sup> (new graduates) leads the *intlombe*. She makes a request to the ancestors, "*Sicela ukuvula intlombe.*" (We request to open *intlombe*.) The *ingoma* is sung for the last time. During that

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<sup>67</sup> *Ikrwala* leads *intlombe* to orientate or teach *abakhwetha* the sequence followed. In general terms: *intlombe* is lead by a senior *umkhwetha*.

phase the following songs are sung: the second *ingoma* – *ithamsanqa* (luck) follows in which the leader explains the reason for the *intlombe*. The second *ingoma* is sung for the last time. The *intlombe* is then declared open.

The next phase opens the floor to the participation of *amagqirha* or *abakhwetha* (trainees), depending on the goal of the *intlombe*. For most of the time *abakhwetha* is the first group to be involved at that stage and later on *amagqirha* follow. Then all *amagqirha/abakhwetha* take turns – each *igqirha/umkhwetha* sings her own song and once her turn finishes another takes over to sing their *iingoma* (songs) and say clan praises after each *ingoma*, including repeating what *intlombe* is all about. That phase can be long or short, depending on the type of *intlombe*. For a whole-night *intlombe*, that is the longest part because each dancer repeats her *ingoma* many times before the turn of the next person. Again, at certain periods, they take breaks to relax and drink their sorghum or beer and to allow the audience time to relax and drink. The third phase is the closure of *intlombe*. Specific *iingoma* (songs) are sung to indicate closure. The first *ingoma* requests that the leader of *intlombe* says clan praises for the home where the ritual is performed as well as requesting the ancestors of *umzi* (homestead) to allow *amagqirha* to close *intlombe*.

Thereafter, clan praising is devoted to the senior *amagqirha* of Komanisi group, the forerunners of this *iphehlo*. It is led by *ikrwala*; then a song about *abakhwetha* who roam around the world carrying their clothes in search of healing.

After this, the *abakhwetha* wash their hands. The fourth *ingoma* is *hlalani ngendawo zenu* (sit according to your places). That *ingoma* allows both *amagqirha* and *abakhwetha* to take their rank positions and stand in two separate rows with *iziko* (fireplace) in the middle. As they sing they stand in their ranks of seniority. *Abakhwetha* kneel down and put their sticks and spears in front of them and lift their upper bodies up and clap hands. Once *amagqirha* with their *imitshoba* (ox-tail sticks) are in their ranks of seniority, the most junior *igqirha/ikrwala* starts shouting, “*Thulani bantwana bakamama.*”<sup>68</sup> (Keep quiet, my mother’s children.) *Abakhwetha* respond to this by praising each *igqirha* (in turns) by calling them by their *izihlonipho* (respectful names) given the day *umkhwetha* graduated to a fully fledged *igqirha*. For example, to me they would respond by saying “*Mavula kuvaliwe*” – the one who opens when it is closed (Chapter 4).

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<sup>68</sup> This is a term referring to trainees as children and *mama* refers to the trainer. A junior *igqirha* says this if some of the trainees belong to her. It is to pay respect to the senior *amagqirha*. This is linked to *amaXhosa* cultural principle that when a woman who is not married and gives birth to a child, that child is perceived as her mother’s, not hers.

Thereafter *abakhwetha* offer praises to *izikhahlelo* for the most senior *amagqirha* of the Komanisi *iphehlo*, some of whom have passed away. That part is led by the most senior *igqirha* on their behalf. That is the only time when those names are used. Once the list is exhausted, *intlombe* is finished. *Abakhwetha* have to learn, practise and remember all their seniors' names. Sometimes seniors are lenient and often remind *abakhwetha* of their names are before they respond. In that way, it makes life easy but when they want to be difficult, *abakhwetha* are punished if they forget *izikhahlelo*.

The general practice is that, once rules are broken, sanctions apply. A diviner is fined a certain amount of money or is expected to buy a bottle of brandy or soft drink. The payments are requested to plead with *iminyanya*, who are given a share too. That is done by first dripping a little of the brandy/cool drink either on *eziko* or *umnyango* (at the door steps). The dripping of brandy at the doorway/fireplace (*eziko*) is done as a gift for *iminyanya*. It should be emphasised that it is becoming more common to see new changes being implemented by senior *amagqirha* in ritual ceremonies and performances.

During *intlombe* it was easy to observe the audience being invited indirectly by the mythical and magical voices of the singers, the clapping of hands and the stepping of feet on the ground as if reclaiming their connections. The magical rhythm seemed to infiltrate almost the whole house and affect the audience in different ways. Through regular participation in *intlombe* one soon found it easy to free one's body and mind to allow the mythical universe to be infiltrated in its boundless and timeless magical boundaries, allowing my breathing to cease and my heart to stop pounding. A profound feeling of 'finding oneself' and forgetting about others then takes over – at times an ecstatic feeling of liberation (see Chapter 4). That experience heightens the spiritual plane and stimulates the sharpness of intuitive abilities. It is also a relaxing exercise.

### **7.2.3 The themes of the songs**

The themes of the African *iingoma* often contain the ontology of their humanness, religiosity, cosmology, and pedagogical, social and psychological principles guiding the sense and sensibility of a group. According to participants, their *iingoma* retell their stories, about themselves, life, God, ancestors and creation surrounding them, through which they feel incarnated, fused and connected with their world-view and experience. Africans experience themselves bound by collectiveness, group sharing, community solidarity and a strong sense of cohesiveness and hence clan praises play a major role in their social lives and in *ukuthwasa* in particular. During *intlombe*, *amagqirha* and the audience have specific

moments where *umoya unyuka* (they lose themselves) to the presence of the collective unconsciousness of their *iminyanya*.

According to *amagqirha*, *iingoma* (songs) clan praises, clapping of hands, drumming and dance are central in *ukuthwasa* and play a mythical or magical role of invoking the supernatural powers and ancestral spirits in particular. The Africans walk on their ancestors' footprints as they sing their songs. In that way they feel transcended. Thus themes of song narrate the women's journeys, pain, triumphs and success. They tell a story about who they are. *Amagqirha* believe that they sing together with and to their ancestors as they dance around the mandala of *iziko*.

### **7.3 REFLECTIONS**

The themes of the African *iingoma* often contain the ontology of their humanness, religiosity, cosmology, and pedagogical, social and psychological principles guiding the sense and sensibility of a group. According to the participants, their *iingoma* retell their stories, about themselves, life, God, ancestors and creation surrounding them, through which they feel incarnated, fused and connected with their world-view and experience. Africans experience themselves bound by collectiveness, group sharing, community solidarity and a strong sense of cohesiveness and hence clan praises play a major role in their social lives and in *ukuthwasa* in particular. During *intlombe*, *amagqirha* and the audience have specific moments where *umoya unyuka* (they lose themselves) to the presence of the collective unconsciousness of their *iminyanya*.

The role of songs is discussed as part of *amaXhosa*s's daily lives as well as part of normal communication. Equally, songs form part of spiritual healing and are central to stimulating *umbilini*, which is a central healing skill/ability of *amagqirha*. In addition, songs form part of the social identity as well as healing identity, since *igqirha* is given a special song by ancestors during *ukuthwasa*. That song corresponds with *ukuthwasa* journey that *igqirha* undertakes and as such forms part of *igqirha*'s healing identity. To exclude songs in this study would mean that part of the social, cultural and spiritual identity aspect is missing. Equally, including the therapeutic role of songs in the thesis, demonstrates how *umbilini* is stimulated and nurtured so that *igqirha* is in a better position to perform her healing successfully. More importantly, all rituals involved during the process of training involve certain special songs that are not sung anywhere except during the performance of that ritual. Therefore songs also form part of communicating, pleading and requesting blessings from ancestors who have to bless the whole process of *ukuthwasa*. The resonance of

*igqirha*'s spiritual calmness, which indicates that *igqirha* is spiritually sound and is able to manage her tensions, is observed in *igqirha*'s sound conduct and performance during *intlombe*.

According to *amagqirha*, *iingoma* (songs) clan praises, clapping of hands, drumming and dance are central in *ukuthwasa* and play a mythical or magical role of invoking the supernatural powers and ancestral spirits in particular. The Africans walk on their ancestors' footprints as they sing their songs. In that way they feel transcended. Thus themes of song narrate the women's journeys, pain, triumphs and success. They tell a story about who they are. *Amagqirha* believe that they sing together with and to their ancestors as they dance around the mandala of *iziko*.

This chapter reveals that *ukuxhoma/ukothula* is a respected ritual so that even if *abakhwetha* and some *amagqirha* are busy elsewhere, all are expected to get together and show some respect. *Amagqirha* have to wear their head beads called *icamagu*; junior *amagqirha* get up as, well as *abakhwetha*. *Amagqirha* stand with their *amatshoba* (ox-tail sticks) at hand. All the family members are called as the gifts are also offered to their ancestors. Women take off their head scarves as a sign of respect to the ancestors. Shoes are taken off and no-one is allowed to talk until the end of the ritual. The ritual reflects how *amaXhosa* view ancestors. They are not spirits but living dead as they have physical attributes (see Chapter 2). They can drink and eat. The ritual is also performed at all times when *amagqirha* are together and in all rituals and ceremonies except when the ritual is conducted for the ritual of *ukuhlamba* (cleansing). The drinks are not placed at an *iqonga* because the ritual is for cleansing and are thus not clean. *Amagqirha* are critical in differentiating procedures followed when conducting rituals for purification and cleansing and those for healing. *Abakhwetha* have to observe and note those at all times. Again, breaking rules in those rituals leads to severe sanctions and/or punishment. *Abakhwetha* have to remember the sequence because they in turn are responsible for the preparations, and senior *abakhwetha* for socialising with the juniors.

These performances allude to the seriousness with which people connect to their symbolism and ritualism with their affectionate interrelationships with ancestors and how important that relationship is to them. The serious attitude, humbleness and splendid respect they showed throughout was magnificent and touching. To the outsider-insider researcher the performance raised ambivalent feelings: on the one hand, a feeling of being a stranger within the own cultural group, but on the other hand, a feeling of assurance that participation would ease the road towards a career as a healer.

Reflections on *intlombe* showed that *intlombe* is a ritual within a ritual since it can be performed independently on its own as well as form part of all other main rituals in *ukuthwasa*. It is never performed in a haphazard manner. There must always be a reason for its performance; whenever it is conducted, the ancestors are definitely around. To show respect to them they must be informed about what is happening. A diviner's independence is very limited in the sense that whatever move or step a diviner takes, she has to report to the *iminyanya* first. That is a sign of respect. *Intlombe* does not just connect them with the family's *iminyanya* but also with those of their clients where they act as mediums (being in the circle) between the family, its *iminyanya* and those of the invited community members.

There is a sharing of interconnectedness amongst everybody present and as such cohesiveness is expected. Each diviner connects her ancestors with *umzi's iminyanya* (homestead where *intlombe* is conducted). This again supports the results of Van Baal & Van Beek (1985:243) that when listening to a myth or music man receives a message about her. This interconnectedness of myth in the themes/wording of the songs accompanied by stamping of the feet on the ground, drumming and clapping of hands, as well as the presence of ancestors (as these dances are often carried on identified sacred places) gives a link to the arousing of the unconsciousness, Jung identifies with the mandala in a person (Jung, 1990). The experiencing of trance during dancing or singing explains the mythological effect of the myth in music and it is not only the message in words and themes that arouses the unconsciousness of a person; hence a person gets this arousal even if she does not understand the language, but the rhythm is enough to interpret that message. This again reflects on Turner's (1969) idea of an ascending ritual symbolism as discussed in Section (6.3. p.201).

During *intlombe* as Gasa (2004) also explains, when one dances, she feels that connection with her ancestors and feels like dancing with them. *Iziko* (fireplace) and creation of a circle around it when dancing are all factors that strengthen that connectedness with ancestors and each other even with the audience around the circle. The vibration starts in the circle and circulates mysteriously around and ultimately feels the whole house. There is a sharing of whatever reasons brought the singers and spectators/audience together. For example, if *intlombe* is for entertainment, they all share in that joy, pain, healing, or welcoming another diviner, and so forth. That is why *intlombe*, like other rituals, plays a major role in strengthening family ties, community solidarity and *ubuntu* (more on the therapeutic value of *intlombe* in Buhrmann, 1981).

## 7.4 CONCLUSION

In this chapter, two basic musical rituals in *ukuthwasa*: *ukuxhoma iqonga* (the placing of gifts and taking them down) and *intlombe* (séance) received attention. A description is provided of the structure, rules and norms of each musical ritual and the dynamics involved. The discussion included the themes and meaning of the songs and the diverse roles they play in the lives of the *amagqirha*. The diagnostic and therapeutic value of the songs and value are discussed in the discussion chapter.

The *ingoma* therefore is part of both rituals and a way of *ukuthetha* (talk) and *amagqirha* also not only use it to express their feelings on *ukuthwasa*, but also their political, economical and social status (personal and family relationships). Sometimes it is used as a weapon to fight one another in a subtle manner and to respond to one another. In the rituals of *ukuxhoma iqonga* (the placing of gifts) and *intlombe* there is a combination of *ukuthetha* (to talk), singing and dancing. That means that there are strong linguistic communicative gestures, including nonverbal communication through body language. Rules guiding the singing, dancing and conduct are important to observe and *abakhwetha* (trainees) are forced to observe, acknowledge and practise them. For example, it is mentioned earlier on (see Chapter 2) that there is a difference between *ukuvuma* and *ukucula*. *Ukuvuma* (singing) is associated with *ukuxhentsa* (dance) as in *intlombe*, and *ukucula* (singing) with singing in church. Dancing styles in both contexts are different; *ukucula* (singing) is more of a Western style, not in traditional *ukuxhentsa*. These acknowledgements are critical in *amaXhosa* African style. When training, all these characteristics are emphasised.

*Intlombe* allows *amagqirha* to observe that nature has boundless and limitless ways of stimulating and shaking our inward senses to respond to its calls. In conclusion, *intlombe* is a ritual that encourages transformation of the trainees, it encourages their intuitive development, spiritual growth, while healing their afflictions and preparing them to be healers. In that way, it encourages identity construction as a healer and the ability to sense the 'self' through the trance. Through songs *amagqirha* devote themselves to the universe freely.



## PART THREE DISCUSSION AND CONCLUSIONS

## CHAPTER 8 DISCUSSION ON *UKUTHWASA* AND GENDER CONSTRUCTION

This study looked at the epistemology of *ukuthwasa* as an inborn gift and *ubizo* (calling) that runs in families. The focus was on Xhosa female *amagqirha* in the Eastern Cape Province who underwent an intensive long-term training at *igqirha iphehlo* (training school) called Komanisi. In addition, the study explored how these women constructed their diverse identities, including the gender and healing identities throughout their spiritual journey of *ukuthwasa*. To provide an in-depth understanding and authentic knowledge of the practitioners of *ukuthwasa*, life histories of four *amagqirha* were used as the basis for opening a discursive dialogue on *ukuthwasa* initiation training and how *amaXhosa amagqirha* practise their healing. The researcher's personal story depicting the spiritual journey of *ukuthwasa* and the interface between *ukuthwasa* and Christianity were included to permit reflections on various elements and issues related to *ukuthwasa*.

Most of *amagqirha* in the study used both traditional and Christian ways of healing, which allowed an examination of correlations between *ukuthwasa* and Christianity. In addition, a study was presented on one woman who is an *umthandazeli* (faith-healer) and the life histories of the practitioners in Chapter 4 enabled them to reflect on their experiences in their spiritual journeys as well as on self-reflection. Chapter 1 addressed the background to *ukuthwasa*, the main question asked in the study as well as objectives of the study. Chapter 2 dealt with the historical perspectives providing an evolutionary structure of *ukuthwasa* and the political as well as socio-cultural challenges that confronted it. Chapter 3 focused on the triangulated approach of (1) the feminist approach, (2) the narrative approach and (3) the Jungian psychoanalytical approach, which was used to give a theoretical background to the understanding of *ukuthwasa*. In addition, the chapter discussed grounded methods as a method of choice used to collect, transcribe and analyse data. The polymorphism of *ukuthwasa* demanded the use of a triangulation approach in order to address its various aspects. Furthermore, a need arose to add another question that was not defined before going into the field: do *amaXhosa* react to *ukuthwasa* or is *ukuthwasa* a ritual for reshaping its own members? The question was asked because most of the participants identified the stage of afflictions as a first stage that indicated the presence of *ubizo*. However, on reflection of their life histories, it became apparent that that was not the case, as discussed in Chapter 5.

Chapter 4 elaborated the spiritual journey of the researcher and gave brief and critical information on the life stories of other key *amagqirha* participants in this study. Chapter 5 provided in-depth information on the chronological stages of *ukuthwasa* and competencies the trainees receive on completion of their training. In addition, a trainee's schedule was added as to give an understanding of what her daily schedule was during the tedious journey. Chapter 6 focused on the structure, process and procedures practised in *amaXhosa* divination system called *ukunyangwa* (divining, healing). Certain cases were cited to describe and give understanding background on how *amagqirha* assess, diagnose and treat their clients. Chapter 7 described the structure, practice, and themes of songs used in the two central musical rituals of *ukuxhoma iqonga* and *intlombe* in *ukuthwasa* process and practice. This chapter consists of the main findings on *ukuthwasa* training process and identity construction during *ukuthwasa* process and practice. Finally, a discussion of the interface between traditional and Christian practices as expressed by participants in this study is added.

Having given a concise outline of the previous chapters, it is attempted here to answer the main question of the study: How do Xhosa-speaking (aspirant/novice healers or trained) healers experience and perceive *ukuthwasa* and the construction of their spiritual/healing identities during their training as *amagqirha*? To obtain an answer to the question, nine areas of concern relating to *ukuthwasa* epistemological and existential issues are addressed (see Section 1.2.3, p. 11). A number of sub-questions are raised to explore the whole process of *ukuthwasa* initiation, the manifestation of *ukuthwasa* characteristics, gender and healing identity construction, the role of crises in the process, the interface between *ukuthwasa* and Christianity, and the context of divining and how clients are managed and healed. Since the major focus of the study is based on life histories of five key participants (four *amagqirha* and one *umthandazeli*), observations are derived from their life histories and interactions with their trainees and clients (see Preface, Chapter 4 and 6).

The discussion involves the following broader themes: (1) *ukuthwasa* as a process and (2) a practice within *amaXhosa* cultural groups, including the therapeutic role of the rituals and songs in *ukuthwasa*; (3) *ukuthwasa* and gender construction; (4) interface between *ukuthwasa* and Christianity; (5) variations in practices and the transfer of skills amongst the healers, locally and worldwide. Lastly, the future prospects of *amagqirha* are discussed. The study closes with Chapter 9 that deals with general conclusions and Chapter 10 with recommendations with regard to future research studies about *ukuthwasa*. In the discussion certain themes are discussed together in order to try and provide a clearer understanding to the various themes.

It is important to note that the results of this study are filtered in all chapters, from the Preface of this study up to the final chapter. The second part of this study on descriptive data is basically data collected in the field and thus forms part of the results. This chapter deals with key areas and integrates all other information already given by participants from the previous chapters. This chapter therefore has to be read in conjunction with various sections discussed in previous chapters and Part Two in particular, including the Preface. This approach has been enhanced by the use of a grounded approach, which allowed for the analysis and interpretation of data as they were collected. In that way, voices, ideas and experiences of the participants were integrated in the product of this study from its initial stages up to its completion.

### **8.1 UKUTHWASA AS A PROCESS**

According to *amagqirha*, three critical characteristics indicate a person who has an authentic *ubizo*, namely an inborn gift, hereditary traits and evidence of family genealogy (maternal, paternal or both). All three characteristics are important and have to be identified to verify whether the person has *ubizo* or not. The three characteristics authenticate and verify the key finding of this study, namely that *ukuthwasa* is a reality and an inborn calling. It is a tedious process that has to be accepted since, if it is rejected, it can lead to complicated life struggles and even death. *Ukuthwasa* is also a transformative and growth process. The crises experienced during the process enhance that growth and development. Indeed, those who undergo the process learn to understand their 'self' better. According to *amagqirha*, there is a thin line between *ubugqirha* (divination) and *ubuthandazeli* (faith-healing). All these aspects are discussed in detail later on.

The reality of *ukuthwasa* is that it has existed from times immemorial and has continued to evolve from the pre-colonial era (Mabona, 2004), as it is still doing. Similarly, participants in the field revealed this truth in many ways: *uzalwa nayo* (you are born with it); *uphuma nayo kunyoko* (you get out of your mother's womb with it); *uyayinikwa ungekazolwa* (you are imbued with it before birth); *soze ube nayo ingazange ibekho kowenu* (you would never have it without its history in your family genealogy). The family with *intwaso* is called *abantu begazi* (a royal family), hence *amagqirha* are also called *abahlekazi* or *abantu abamhlophe*. Therefore these families are able to observe at birth whom of their children will be *amagqirha* (Somana, 2003). *Amagqirha* confirmed that the gift of *ukuthwasa* is not only inherited from female ancestors but also from male ancestors from both the maternal and paternal families. In the end, accepting the gift and going through the initiation is perceived as a sign of loyalty,

humbleness and respect to the family. The child who has been identified by ancestors to be a healer is born with certain characteristics that denote her to be a special child (Chapter 5). That child is termed *uqajjwe*, meaning that she has been elected a healer at birth. When the person later on accepts her calling from the ancestors and undergoes *ukuthwasa* initiation, she then signifies the authenticity of the calling. In addition, she takes up the commitment and responsibility to honour the wishes and demands of her ancestors and her community that she would take care of in future. As the child grows, the family watches her with interest, as has been indicated in the Preface, and parents are aware of her future identity. The characteristics she displays as she grows up (see Preface and Chapter 4) are already building stones to construct her identity.

Reverend Somana (2003) suggests that, as the child grows, her distinct characteristics start to show. However, there is nothing that parents can do until the child is mature enough to explain her dreams (see Chapter 1). Broster (1981:22) acknowledges that occasionally parents may recognise the tendency in a child, particularly in the case of exaggerated sensitivity and imagination, but the strong symptom of *ukuthwasa* may come at any age (although they are more prevalent at adolescence and menopause). That is also confirmed by the life stories of Matogu, Boniswa, Mandlovu and Zanemvula (see Chapter 4), who manifested the characteristics of having *ubizo* at adolescence, but only underwent the initiation during their early adult years. In the researcher's case it started showing at the age of seven and continued into initiation at the age of 46 (see Preface). In fact, parents were forced to respond positively to *ubizo* calling because of persistent afflictions of their 'called' children.

According to *amagqirha*, it was traditionally common to see a young girl of fourteen years being initiated into *ukuthwasa* and having to leave school. Some of the participants reported that they had to leave school because they could not see on the chalkboard because of *intwaso*. In fact, they hardly had any formal education. Numerous similar stories were encountered during the fieldwork. That is why *ukuthwasa* has always been perceived as *into yamaqaba* (the thing of the illiterate). Such a view is now challenged by the many educated people joining *ukuthwasa*. Whether educated or not, a person can still *thwasa*. What is true, is that a person's family background and socialisation have an influence on the person's identity traits, including how a person perceives and interprets the world around her. The perception that participants had that *ukuthwasa* was a cause for them to leave school and thus for them to be uneducated could also be related to the historical background and the times in which they grew up. In most instances in rural areas in the Eastern Cape, parents did not promote education for their children. Dwane (1998) confirms these perceptions when

he observes that Christians and the educated are gradually reclaiming their cultural roots by joining *ukuthwasa*. Table 8.1 indicates low levels of education in the Eastern Cape and in one of the areas where this research was conducted. The table below shows that most children/people leave school after Grade 12/Standard 10. This is understandable because there is often no means to take children to a tertiary institution.

**Table 8-1 Levels of education in the study area Eastern Cape (from Census 2001)**

	<b>Tsolo</b>	<b>Eastern Cape</b>
No schooling	20488	1042617
Grade 1/Sub A (completed or in process)	9477	450094
Grade 2/Sub B	5721	287884
Grade 3/Standard 1	6878	340897
Grade 4/Standard 2	6750	364784
Grade 5/Standard 3	6421	348522
Grade 6/Standard 4	6229	373751
Grade 7/Standard 5	6644	425786
Grade 8/Standard 6/Form 1	6560	448157
Grade 9/Standard 7/Form 2	5050	347158
Grade 10/Standard 8/Form 3/NTC I	3959	367235
Grade 11/Standard 9/Form 4/NTC II	3421	256937
Grade 12/Standard 10/Form 5/Matric/NTC III	3603	499947
Certificate with less than Grade 12	100	8804
Diploma with less than Grade 12	91	8343
Certificate with Grade 12	429	38533
Diploma with grade 12	1043	109100
Bachelor's degree	199	29550
Bachelor's degree and diploma	92	14027
Honour's degree	45	8440
Higher degree (Master's or Doctorate)	33	8084
Not applicable	12159	658111
<b>Total</b>	<b>105395</b>	<b>6436758</b>

Observation in the field points to the fact that the participants' world view was influenced by their cultural background, that is, their Christian and at times their educational background. Some regard *ukuthwasa* as a sin and thus regard *amaqaba* as the only people often trapped in their culture. That is not true. As shown in the Preface, not all *amaqaba* believe in *ukuthwasa*. They may be family members without education and non-Christian but still reject

*ukuthwasa*. *Ukuthwasa* has nothing to do with a person's belief or aspirations to *thwasa*; results show that it is a calling bestowed upon a person, irrespective of her wishes or will. As revealed in the stories of *amagqirha* in Chapter 4 of this study as well as that of other respondents, *ukuthwasa* is not a sin but a gift of healing from God and its presence is channelled through the ancestors who are believed to be mediums between God and the people. The gift of *ukuthwasa* therefore determines what the person's future path will be, even if a person tries hard not to accept it. For example, Boniswa did not want it, and in the researcher's case her uncle gave her a mixture of herbs just before going to secondary school, trying to stop it without success. *Ukuthwasa* cannot be perceived as a sin by all means. It is a gift. Today many Christians and white people embark on this journey and it would be erroneous to perceive them as being trapped in culture. Whose culture? The results revealed that *ukuthwasa* cuts across all cultures and knows no boundaries (Chapter 1).

Participants in the field suggested various reasons why parents ignore or pretend and at times wish the symptoms of *ukuthwasa* away from their children. Some of the reasons are: (1) parents hope that a person may not ultimately *thwasa* (a false impression, since *ukuthwasa* does not depend on personal choice) (see Chapter 4); (2) *ukuthwasa* is very expensive (see Section 2.2.3 p. 63); (3) due to disbelief; and sometimes (4) education and Christianity. When parents do not believe in ancestors, they refuse to be told about *ukuthwasa*, no matter whether they come from royal families (that is, families with the gift of *ukuthwasa*). That attitude could reflect the story of the researcher's mother who nearly died because her grandfather refused to accept that she had to *thwasa*, repeating what his parents did to his own mother and who ended up going to the forest and was never seen again (see Preface). What participants found difficult to answer was: What makes some people reject *ukuthwasa* even if they have concrete evidence of the implications of rejecting it? The influence of the parents/family may play a role in this regard.

Acceptance of the *ubizo* (calling) depends on various reasons. For instance, with Zanemvula and Matogu (Chapter 4), once their *ukuthwasa* had been confirmed by a senior *amagqirha*, they accepted it. However, Boniswa and the researcher tried to resist. In Boniswa's case she was the one who refused to accept it while the family was eager to support her (Chapter 4). The researcher resisted to *thwasa* because she was not sure it was something for her. The critical issue is that parents do not sit with their children and inform them about *ukuthwasa*, even when a parent is aware of the possibilities that a child may have to *thwasa*. Those with a Christian-educated background are often brainwashed by the teachings of that

background, which perceives *ukuthwasa* as an act of paganism, therefore rejecting *ukuthwasa*.

Another finding closely associated with the above-mentioned parental attitude is the entrenched custom in traditional African cultures where children are not involved in discussions and family decision making, as children nowadays demand. Thus *amagqirha* fail to explain some of the reasons why certain procedures are followed when performing rituals, for example, the ritual used in Komanisi by trainees and *amagqirha* when accepting fees from their clients or before the chicken is slaughtered. They never asked their seniors or, if they asked, they were never told. It is unfortunate to observe that such an attitude still persists because one wonders how much information will still be lost in future generations. On the other hand, experience and observation show that at times it is a matter of a personal and selfish attitude when *igqirha* keeps the information to herself.

The attitude of “not questioning much” was revealed by Matogu’s (1999) response to continuous questioning during training. She would say, “*Hayi ke mna andizange ndiyibuze lo nto kuba ndandixelelwa ukuba ndenze kanje. Wena ke ubuza yonke into ngokwase sikolweni.*” (No, I never asked that because I was shown how to do this. You ask me everything as if at school.) That attitude caused animosity between *amagqirha* and *abakhwetha* with different enquiring minds. Too many questions were often seen as a source of ignorance and disrespect for culture. Questioning is often discouraged with remarks like, “*Zange sibe ngono khontoni.*”<sup>69</sup> During the training trainees are not told what to do, as they have to learn by observation. As *amagqirha* keep no records, most of the information on *ukuthwasa* is lost. The study also revealed that *ukuthwasa* process involves critical issues on various aspects, as discussed below.

### **8.1.1 Dreams and their role in *ukuthwasa***

From the results it transpires that dreams and visions are central to *ukuthwasa*. Unlike in formal education, where dreams are perceived as something a person thought of during the day, or a guess and hypothesis, dreams in *ukuthwasa* set expected outcomes and play a key role in setting the curriculum for *ukuthwasa* training. All *amagqirha* stated that dreams could not lie; it is only the interpretation of a dream that can be wrong but not the content, because

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<sup>69</sup> This phrase cannot be translated into proper English as it does not demonstrate proper Xhosa. It just means that children of that time did not confront or ask many questions from their parents on what would happen if something was done in a certain way or why something happened.



the body does not lie. That is why dreams are so important to them. In addition, it is not just any dream, but what they term *amathongo* (clear dreams with a clear message in them). *Amathongo* are clearly differentiated from any other dream because a person never forgets that dream; it remains in her consciousness for a long time. This makes *ukuthwasa* training a unique activity performed according to the individual trainee's visions. The critical issue about dreams is that during training *umkhwetha* has to relate her dreams to her trainer. Traditionally, this was done in groups; however, *amagqirha* stopped the group sessions because some *abakhwetha* would steal<sup>70</sup> dreams of others by repeating what they had heard from others. As Lake (2001:11) clearly puts it, no one can just wake up and say, "I want to be a healer". According to *amaXhosa*, it is only for *iminyanya* (ancestors) to make that decision.

Jung (1990) explains that dreams reveal the secrets or information from the collective unconsciousness, which forms part of the reservoir for folk wisdom (elders and ancestors) and primitive archaic wisdom (see Section 3.1.3, p. 77). The researcher supports both Broster (1981:23) and Jung's views who state that ancestral guides can be accepted as living symbols from the collective subconscious and thus are able to influence an individual's life. In that way, the daily dream analysis and interpretation process between *umkhwetha* and trainer can be seen as a form of dialogue between the conscious and subconscious minds of both. Thus, communication between the ancestors and *umkhwetha* is simultaneously shared and the trainer accompanies *umkhwetha* on her journey as a spiritual guide, leader, illuminator, mentor and mediator. In that way, *ukuthwasa* is transmitted from generation to generation through inheritance. Dreams are important communication skills and basic ingredients for allowing the passing on of information and wisdom from ancestors. The question that remains is: How much information from the dream is received in an accurate form and do mistakes happen while interpreting dreams?

When talking in groups of *amagqirha* during the fieldwork, it could be noticed how certain aspects of dreams had different meanings for different people. For example, Boniswa shared a similar understanding with Zanethongo on the issue of having luck when they dreamt about

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<sup>70</sup> All *amagqirha* defined *stealing of dreams* to mean that, at times, some *abakhwetha* use dreams they hear from other *abakhwetha*. What happens is that those who do not dream or whose dreams are not clear when dreams are being told in group discussions get an opportunity to retell their blurred dreams by imitating what others have said. In addition, Matogu and Boniswa confirmed that if an *umkhwetha* did not have clear dreams, it meant a delay in her training since dreams were used in defining *umkhwetha* spiritual journey. In cases where dreams are not clear, there is no direction for both the trainer and *umkhwetha*. In such moments there is often a question of the authenticity of *umkhwetha's ukuthwasa*. To test the authenticity *amagqirha* put *umkhwetha* in a rigid and stressful cleansing and purification process using skin irritating mixtures made from different herbs called *intelezi* (as a way to exclude any witchcraft possibilities that could cause unclear or blurred dreams). That is why those *abakhwetha* who do not have clear or blurred dreams would then try and use other *abakhwethas'* dreams (stealing what is not theirs) to avoid the stressful cleansing and purification process and, in their views, to try not to delay their training periods.

money, whether coins or notes. Although Zanethongo is the researcher's mother, dreams with coins or notes mean different things to the researcher. For instance, for the researcher coins are an indication of an illness of a friend, relative, or someone close to her. The sign of notes indicates death. This therefore creates a challenge when one has to interpret another person's dreams and needs critical sensitivity as well as an understanding of the dreamer's worldview and inculcated symbolic views of objects.

Christian and political influences may be reflected by certain incidences when dreams are interpreted. For instance, *amagqirha* had consensus about the historical understanding of the meaning of dreams about a 'white person', which indicated bad luck and is nowadays perceived as luck. That understanding has changed after Independence in South Africa, where there is a positive change amongst the different cultures. Many people are trying their best to acknowledge, respect and understand the heterogenic, culturally diversified nation and terms such as South Africa being seen as a rainbow nation are beginning to make sense to most people. The researcher found *amagqirha* to be amongst those who have identified white people as human beings sharing similar human characteristics like them. All the trainers informed the researcher that white people are water people and therefore associated with water spirits. By contrast, when the researcher grew up, dreams of white people were seen as bad luck, or *impundulu*. Whites were associated with witches because of their technological skills, which overwhelmed *amaXhosa* (Matogu 2004). In addition, because of the oppression caused by them, white people were perceived as bad people (Zanemvula, 2006). The researcher was astonished to hear such a political situational analysis from this group. This means that after 1994 (the year of South African independence), *amagqirha* also changed their views about white people. The interpreting of dreams therefore becomes a delicate process. In that way the traditional view of managing the dream interpretation is similar to that of the Western view. For instance, the Freudian and Jungian psychoanalytic approaches endorse the fact that when psychotherapists interpret a person's dreams, the person's context, culture and understanding of that dream has to be taken into consideration. That is what complicates the dream analysis process.

It thus became evident that dreams and dream interpretation formed a critical part of *ukuthwasa*. Historical events such as that of Nongqause would be mentioned now and again but caution has to be advocated when dreams are related, as it is equally important that honesty and patience prevail. Overall, the trainers shared the following consensus:

- Not all dreams are important; it is only *amathongo* (prominent dreams with directions) that are significant.

- Dream interpretation is very difficult and needs *igqirha* with experience, patience and good listening skills. That is why the guidance and expertise of a trainer on this part is often needed. Sometimes both the trainer and *umkhwetha* have to wait for a clearer, second dream and then request their ancestors to reveal the dream to the trainer as well.
- It also transpired that it is at this stage of dream analysis and interpretation that envy/jealousy by a trainer can be used to jeopardise the trainee's progress. All participants confirmed that if a trainer were jealous or envied the gift of *umkhwetha*, she could misinterpret the trainee's *amathongo* deliberately so that the interpretation of those dreams did not provide a clear and relevant path to follow. In that way, a trainee's journey is distorted and she never reaches her correct designation. The end result of such attitudes is to *ukuvala umkhwetha* (to close the dream of the *umkhwetha* and to obstruct her progress).
- Conversely, the trainers accused *abakhwetha* of being able to twist their *amathongo*, especially when they wanted to finish the training quickly.
- Dreams have to be linked to one another to give a clear direction; hence patience is needed. This may also explain why *ukuthwasa* is a long and tedious journey.
- When a problem arises and there is no consensus, support in the form of assessment is sought from a neutral *igqirha*. This means that *igqirha* may request another *igqirha* to assess *umkhwetha*.
- *Amagqirha* revealed that a person can dream even when she is awake or walking. That was difficult to understand but on analysis of their statements such as: *uba notyaba* (you just have an imagination/idea) *into isuke ithi tha uhleli* or *uhamba* (you just have a mental picture of something whether you are sitting or walking); *lento ihleli kuwe engqondweni ingasuki* (something that occupies your mind and does not disappear); or *umbilini ongafuni kohlukana nawe* (persistent intuition); made the researcher understand that a vision or intuition about something is also a dream. This is called *umbono* (a vision).

It has become evident during the researcher's training and observations in the field that the preferred time for *amagqirha* to learn about the trainees' dreams is in the early hours of the morning, around 3:00 or 4:00, when the dream is still clear, and which is also the best time for ancestors to visit (see Section 5.4, p. 164). The trainers emphasised the importance of

dream analysis as part of the continuous assessment of the progress in the training of *umkhwetha*. If the dreams of *umkhwetha* are not clear, she is to follow a rigorous cleansing ritual and spend more time in *intlombe* sessions (see Chapter 7).

### **8.1.2 Dreams and *umbilini***

In thesaurus an intuition is defined an instinct, sixth sense, gut feeling, insight, etc. In that sense it is knowledge or information that is experienced naturally but has to be tested to be taken seriously. During fieldwork it was apparent that *amagqirha* view *amathongo* and *umbilini* (intuition) as closely associated and complementary to one another as key skills in divination. The use of *umbilini* is a historical gift to *amaXhosa amagqirha* as no historical evidence exists even in the pre-colonial period that *amagqirha* had ever used any method of assessment and diagnoses other than *umbilini* (see Chapter 6). However, a focus group of *amagqirha* in Tsolo revealed that *umbilini*, in conjunction with a sense of touch and smell, is also used to assess a person who is absent by holding and sniffing a piece of a person's clothing.<sup>71</sup> Broster also confirms this type of divination (1981:90-91). This type of assessment amongst *amagqirha* has, however, not been noticed. According to *amagqirha*, once a person touches and sniffs the body smell on the cloth, that smell immediately triggers one's intuitive senses and *igqirha* or *umkhwetha* is able to spiritually make contact with the person's worldview. This was observed amongst *abathandazeli* (faith-healers). According to *amagqirha*, *umbilini* is not just a subjective feeling but a critical skill in assessing clients and thus provides *igqirha* with valuable information. How *umbilini* works is discussed in Chapters 4 and 6 and Mlisa (2009 a&b).

### **8.1.3 The role of family in *ukuthwasa***

Results of this study revealed that the family plays a crucial role in the form of support in the whole process of *ukuthwasa* initiation and in the life cycle of the aspiring member. Full family support is needed from the day of identification of *ukuthwasa* symptoms up to the death of *igqirha*. The family is the provider of all the assistance *umkhwetha* needs until graduation and beyond. More importantly, it provides emotional, spiritual, financial and social support, including the necessary resource materials needed. In a few cases it has happened that *umkhwetha* did not receive the support of her family, which created long-term friction between *umkhwetha* and her family. It also retards the progress of *umkhwetha* and others

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<sup>71</sup> This means that a family member may bring the person's piece of clothing to *igqirha*.

sometimes stop the training. This is not a recommended action as it creates more problems for *umkhwetha*.

For example, in the case of Anele (Matogu's male trainee), he performed his ritual for the fourth stage of his training *kwazwedala*<sup>72</sup> (where the homestead was originally built) because his family did not want to support him and denied him any space to perform his ritual at their homestead. He has no parents and no immediate family home. He had to go to the old location where his parents used to live and where nobody lived any more. He and those accompanying him had to stay in tents. Again, his graduation was performed at another home, namely that of a distant clan family because Matogu had negotiated with that family. Matogu supported his graduation ceremony by paying all costs. This example shows the supportive role of clanships as discussed in Chapter 2).

It needs to be clarified that the support given to Anele by his trainer Matogu is rare and does not occur automatically; certain factors are to be taken into consideration. For instance, the service of *umkhwetha* to *igqirha* (Anele served under Matogu for more than six years); the attitude of *umkhwetha* towards the trainer (Anele cooked, cared for her and was Matogu's right hand in almost all rituals that she had to perform for her *abakhwetha*), and the real proof of family support lacking. It also depends on whether the trainer has the means to pay for the training. This is a type of labour exchange, which is a common feature in other countries (Erdtsieck, 2003). Sometimes *umkhwetha* is given support by *igqirha* with a promise to pay back. Zanemvula confirmed this practice as she had experienced it. Her trainer Sonkwelo (male *igqirha*) gave her an ox to slaughter at her graduation, which she in turn repaid at a later stage.

#### **8.1.4 The main characteristics of *ukuthwasa***

Family support to *umkhwetha* (novice/trainee) begins from the time the person aspires to be *igqirha*. The manifestation of the characteristics is complex and varies from one person to another. It is always important to verify and confirm that a person has the calling. This is often the family's role (Preface, Chapter 4 and Case 1 in Chapter 6) to seek counsel with an experienced *igqirha* (Soga, 1936). Research reveals that the aspiring person shows certain signs and symptoms to show that she has to undergo the training of *ukuthwasa*. The main characteristics are summarised as follows: more profuse *amathongo*, which include

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<sup>72</sup> This means a place of original settlement. The term is used to explain that a homestead has been relocated to a new place. The original place is referred to as *zwedala*, meaning a place of a former homestead.

deceased and living relatives, sacred animals and places (rivers, seas, forest, mountains and caves) and *amayeza* (medicine). *Amathongo* are very important because they set the curriculum and direction for the training (see Chapter 5). Sometimes *amathongo* are blurred. At such times the prospective *umkhwetha* (trainee/initiate) is helped by undergoing a variety of cleansing treatments to sharpen her visual and intuitive abilities. In addition to *amathongo*, other characteristics include crisis, emotional instability, general body malaise, headaches and palpitations, and various behavioural, spiritual and physical symptomatic ailments. Other signs are feelings of isolation and withdrawal from others, increased sensitivity, bouts of crying, headaches, mood swings and hallucinations, and many others as described by various authors (Mabona, 2004:322-328; Callaway 1970:260; Lamla, 1975:45-65 and Broster, 1981:25-45).

In other cases, some behavioural problems occur, such as promiscuity in girls, excessive consumption of alcohol, delinquency and other types of behaviour not normally accepted by a person's culture. All these characteristics are unique in their occurrence, severity and duration. Diagnosis and confirmation of *ukuthwasa* has to be carried out by a senior *igqirha* who should be related to *amathongo* of the prospective *umkhwetha*. All participants in this study agreed that the only solution to heal them (those who have *ubizo*) is to enter the healing cycle by accepting initiation as *igqirha*. Rejecting the initiation was perceived a dangerous decision since a person could run mad, die or experience some or other life crisis.

It is the complexity of the main characteristics that delays the acceptance of *ukuthwasa* for many. It is because the characteristics closely resemble other medically related illnesses such as psychiatric-related illnesses (hallucinations, mood swings, hysteric attitudes, etc.) and physiological illnesses such as depressive syndromes and behavioural disorders. That is why other authors who perceive *ukuthwasa* from an outsider's perspective view *ukuthwasa* as a neurotic syndrome and not as an inherited gift (Lamla, 1975; Mqotsi, 1957 and Soul, 1974). Results reveal that once a person accepts *ukuthwasa* and goes through the training stages, she is healed. Although *amaXhosa* view *intwaso* (the noun of *ukuthwasa*) as an inborn gift, because of the affliction they also have a tendency to label a person who *thwasa umntu ogulayo* (a sick person). However, the trainers explained that 'sickness' in this sense does not mean an invasion of the body by a virus or bacteria as in the case of the Western medical model, but refers to sickness in a sense that a person becomes vulnerable and thus needs more care and support. That explains why medical treatment does not cure the characteristic symptoms of *ukuthwasa*.

After graduation, a person is free to practise independently with regular or periodic consultations with her trainer or any senior *igqirha* when performing certain rituals (Broster, 1981; Mabona, 2004 and Hirst 2000). All participants and families of *amagqirha* confirmed that it is only after graduation that a person rejoices and feels good about *ukuthwasa*. That is because *ukuthwasa* is fraught with crises and afflictions which make the journey dangerous (Chapter 5). In the end, to graduate ensures spiritual and emotional growth as well as the strength to overcome difficulties. To the graduate it is the fulfilment of the calling, responsibility and commitment bestowed on the person. The person has gradually learnt about herself and has thus constructed her multi-faceted identity, one of which is a healing identity. She is now *igqirha* and can divine as explained in Chapter 5 and Chapter 6. The graduation of a person is the reassurance that she has been in line with her identity bestowed upon her even before her conception. It is the ultimate achievement of a healing vacation and assurance of being in connection with her ancestors. The joy on the graduation day may be related to having achieved the prophecy and the meaning of the dreams and *umbilini* always experienced since earlier days. Somehow it installs confidence and self-assurance. That confidence was built throughout the rough patches of the journeys. Boniswa recounted that it was to her like a day that would never come and she looked forward to taking care of her future trainees. She had already begun to brainstorm on strategies she would use. That also indicates confidence, passion, willingness and the intrinsic motivation to carry out critical duties to protect her people.

According to *amagqirha*, *ukuthwasa* is not a fully completed process. Even when *igqirha* is relieved from further ritual performance by death, the family is left with the responsibility to continue performing certain rituals<sup>73</sup> such as: *ukukhapha* (to accompany), *ukuguqula* (to turn), *ukuhlamba abakhwetha* (cleansing of the trainees) and *ukuchitha iintsimbi* (to throw the beads) (see more about rituals in Section 2.2.2, p. 63). There could be others but all *amagqirha* participants counted these as essential.

### **8.1.5 The *ukuthwasa* process and identity construction**

*Amagqirha*, due to their experiencing of various crisis incidents and family struggles during their training, regard *ukuthwasa* as a dangerous and tedious spiritual journey that is characterised by emotional, socio-economic and psychosomatic turmoil. As explained in 8.1.4 above, the main characteristics vary. They are experienced spontaneously and completely unexpectedly. As the characteristics include dreams that set the specific route a

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<sup>73</sup> These rituals are fully described in Soga (1936), *The Xhosa amasiko and values*, Hunter (1936 & 1979).

person has to follow, the process becomes a natural way to provide useful personal orientation for a specific career path once it is well understood and managed. From observations and personal experience the challenge relates to the fact that it is not a readily known or easily identifiable route, as indicated by the fact that most of these characteristics start appearing during adolescence, although most of the participants accepted it in adulthood, middle age, or even later on in life. Most of the time was spent seeking help from medical doctors (see Preface and Chapter 4).

Many authors have come to understand the value of acknowledging spirituality as an important process to explore, acknowledge and understand. For example, the view of transpersonal psychologists such as Roberto Assagioli (1989) is supported, who emphasises the role of spirituality in human life and acknowledges that the role of spiritual emergency is responsible for self-realisation. This view supports the views of the psychoanalytic psychologists (see Section 3.1.3, p.80) who also predict that the confusion, chaos and crises experienced by *amagqirha* in *ukuthwasa* is a normal process as they occur in the developmental stages. Assagioli further suggests that crisis experiences could be seen as evolutionary, transformative, part of growth, self-fulfilling and a dramatic realisation of the self, as well as dramatic self-healing. All these aspects help *igqirha* to understand 'herself' better as she manages and copes with crises along her journey. *Amagqirha* support Assagioli fully as they all view the spiritual journey as a stormy search for the self. Crisis is viewed as a simulating reality of clients that *igqirha* would meet and have to assist. It is an accepted learning strategy.

According to Jung, there is an explanation for experiencing confusion during the training. Jung (1990:5) is correct in his view that confusion is the surfacing of the unconscious material that leads to the 'between and betwixt' that Turner (1968) refers to, which causes the mood swings, as the information can be scary. The fear creates doubts on how safe the person could be. The reality of the unknown circumstances ahead makes a person feel at risk. The evidence of this research with *amagqirha* and trainees suggests that the confusion is also created by the fact that no information is provided by either the trainer or family about what challenges a trainee should expect along the journey. It is a self-finding and uncertain path. For example, when the researcher was young she would sometimes hug a person and experience the person's negative vibrations that caused her to feel sick. That information entered her collective unconsciousness and because she was not well-socialised, mentored or supported enough to know what was happening, she became afraid of hugging other children. What was scary was the fact that not all children she hugged made her feel ill and it was difficult for her to know which ones she should not hug and also why hugging others



made her ill. The researcher needed her grandmother's support that was not there. Instead, she thought that something was wrong with her. If there had been proper mentoring as Jung suggested the researcher is sure that the journey would be less scary and a trainee would follow it more with curiosity than fear. What the researcher found out was that *amagqirha* were merely repeating and following the training strategies used by their former trainers without critically reviewing them. Their training is still based on hidden information rather than allowing their trainees to access more information on *ukuthwasa* during their training. There is little innovation to this regard.

This means that *amagqirha*'s experiences of crises in the process cannot be seen as symptoms of disease in the medical sense but crises of evolution of consciousness. It could explain the inability to cope with the exposure of that information that was saved in the person's unconsciousness from her ancestors and not knowing how to use it. A person could not be in a position to have firsthand knowledge and understanding that she needs to learn new actions, behaviours and transform to be a new person, a healer. In that way, crises serve as a means of helping women construe their healing identities during their training. Hence psychoanalysts call them 'wounded healers' and *amaXhosa* call them *amagqirha* – doctors to heal others.

While Western medicine is reluctant to integrate the principle of the wounded healer and stresses the technological manipulation of the patient (Grof & Grof, 1989:80), *ukuthwasa* allows *umkhwetha* to enter an intensified exchange with reality, thereby transcending the material demarcations between objects and people. Nature conceives the illness of *ukuthwasa* and heals it. Nature renders *ukuthwasa* a chaotic, undefined illness that troubles not only those who *thwasa* but their significant others and relatives; yet in the end the reconciliation of opposites takes place and a matured and transformed person with a highly increased state of awareness emerges. The sacredness of the world has given her power and thereby has chosen her, more often against her will. That is the journey women healers undertake beyond their willingness or choices.

The experiences on the journey clearly identified that the growth happens in an estranged environment for *umkhwetha*. It happens as *umkhwetha* is separated from her family and stays with *igqirha* who enhances the continued performance of rituals and certain rites of passage throughout the training. The rites of birth, adolescence and fertility are complemented by growth rituals undertaken during the training (see Chapters 1, 2 and 6). This continued repetition of incarnation with nature and introduction to the insight and wisdom of *amaXhosa* culture and its significance is a means to allowing self-preservation

and continued experience of finding herself. The rites of passage marking the developmental phases and maturity levels are experienced as authentic cultural grounding that connects the child with ancestors and wisdom of the supernatural world. It is a time-bound process that signifies a historical transcendence of finding “oneself” from conception, as *amaXhosa* believe that the child’s destination is marked during her mother’s conception. This is clearly demonstrated by *amagqirha* when they describe the value and role of the very first ritual performed to connect a wife and a husband.

According to *amaXhosa*, there is a ritual called *utsiki*. This ritual binds and reincarnates the woman who is going to be a legitimate bearer of the offspring for the new family with the child’s biological ancestors. In fact, the first is payment of *ilobola* because this is not a market price but a ritual with a critical meaning. The meaning of *ilobola* connects the two families and there are sacrifices that are made during that process. *Amagqirha* then stress *utsiki* as a fundamental ritual for any child that is conceived from that womb already has an identity. That is why a child born out of wedlock does not have a biological identity of her father unless a certain form of payment by the father’s family is made.

Over and above this, a further connection is made, namely *igqirha* (a rite of birth) to incarnate the child with her biological ancestors. If this ritual does not take place, a child may present with endless problems such as bedwetting, loss of weight and appetite, and always ill for no apparent medical reason. However, once this ritual has taken place, all goes well. The ancestral power to connect people’s identities can be proven beyond doubt on this scenario. Sometimes parents make reckless mistakes and give children born out of wedlock their maternal rites, but in most cases they still have to go back later on, swallow their pride and search for the biological clans (if the immediate family is difficult to contact or is not cooperative) to request that family to represent her/his biological family. Often, children who always give problems are those who later on often display characteristics of *ukuthwasa* (Preface and Masoga, 2001). *Igqirha* then is valuable for the holistic health aspect of the child: cognitive development, sound emotions, and spiritual and social life. Most of all, it is the basis of the child’s identity with her immediate biological family, her ancestors and even her future career. Sometimes her gender identity is defined by the gender of the animal for the sacrifice, for example, *inkabi* (ram) is used for male children and *imazi* (ewe) for female children. Thus, as early as during childhood, a child has multifaceted identities, which are all enhanced by the child’s ritual symbols, position in the family and the child’s behavioural actions, emotions and sensitivity to vibrations around her.

As the child progresses to her full cycle of development, many more rituals are conducted. The rituals mark different liminal (differential status positioning) periods in her development stages as well as her maturity. A woman is socialised to be a nurturing, calm, humble, submissive person and one who keeps her cool, that is, manages her crises well, strives for life under any circumstances, and takes care of her husband, child, extended family and community at large. This endorses caring for life, taking responsibility and commitment to fulfil this responsible role for her cultural group and hence the healing role is more closely associated with a woman's role than that of men. This also explains why male *amagqirha* wear dresses like women during their training and after graduation when performing certain rituals. The dressing symbolises the role they are trained for. They are men but are groomed in a motherly, nurturing profession and have to identify with its characteristics. The healing skill is contextualised and realised in their cognitive as well as social appearance. A woman then continues with her inherited gifts from her mother's womb and the patterns of socialisation of her culture. The training process enhances and sustains this growth and identity.

The partial identity construction at graduation signifies that the initiate has positively and successfully internalised and assimilated all the fragmentary images she had experienced from her dreams, vision and other symbols from childhood to graduation. She can now have a clear picture of who she is, as well as a sense of fulfilment and achievement. She has fulfilled the calling of her ancestors.

Results show that others do not manage to go through, due to variety of reasons, or just decide to reject *ukuthwasa*. As much as the rejection of the new and unknown is a standard human response, results prove that rejection and delays to enter *ukuthwasa* lead to crises and traumatic experiences. Female *amagqirha* support Kalweit's (1989:90-91) suggestion that traumatic experiences provide a fertile ground for entering a state of consciousness. According to them, crises, afflictions and traumatic experiences are normal pains to make *igqirha* strong, increase her knowledge, and give her wisdom to know how to treat her patients. They are the best teaching experiences. Cumes (2004:15) endorses the view that the wounds caused by afflictions are the key in the wounded-healer archetype. According to him, the wound turns the healer inward. Hjelle & Ziegler (1976) and Meyer (1989) also support their views as they suggest that the process of development is a struggle and thus each stage of development has a crisis to be resolved. The conflict serves as a turning point, which is a transformational curve. This conflict is centred on either developing a psychological quality or failing to develop that quality. *Amagqirha* also believe that at such times or periods the potential for personal growth is high, but so is the potential for failure

(see Section 3.1.3, p. 80 and Grinberg, 1990:110-111). That is where the nurturing and supportive role of a trainer as well as that of other trainees and family members is most needed.

In that way female healers experience afflictions as transformative growth, maturing processes and life-skill orientation processes (problem solving, healing skills, leadership skills, coping, adaptive mechanisms, and an enacting process) through which they are able to identify, compare themselves to one another and form a contrast to other environmental factors influencing them. Through the crises, women identify their personal strengths (ego development) and the nurturing resources and support of the family and community members (superego; sacred places) who, after all, legitimise their new social status as healers, heroines and leaders of the healing rituals of their society. Seeing them going through these struggles and managing them well instil trust and confidence in the community as witnesses that they should entrust their lives to those future healers who have taken care of their own wounds in a mature way. That is why *amagqirha* who train under *umndawu* for six months are not afforded the same respect as those trained by *amaXhosa* in most areas in the Eastern Cape. It is the duration of their training that people do not trust to be long enough to give them enough experience.

The Komanisi *Amagqirha* Focus Group (2005) responded as follows when asked: Why do *amagqirha* have to be sick? Instead of an immediate response, rhetorical questions were raised, for example, “*Uzokuba ligqirha njani ungagulanga?*” (How are you going to be an *igqirha* if you did not get sick?); “*Uzokwazi njani ukwelapha ungavanga buhlungu?*” (How are you going to heal if you have not experienced pain?); “*Fanele ugule uzokuphila ukwazi ukuphilisa abanye*” (You have to be sick to know how to heal others); “*Xa ugula uyakhula womelele*” (When you are sick, you grow and in turn get strong). The statements also reveal that *ukuthwasa* is viewed by these women as an illness, but an illness that is only treated by cultural and ritual performances. This could be a reason why others view *ukuthwasa* as caused by afflictions rather than inheritance.

Matogu claimed that as *umkhwetha* goes through the training stages she learns different skills and strengthens her abilities with the help of those skills already learned during previous stages. That means she goes from strength to strength. This is in accordance with the developmental theories such as that of Meyer (1989:53). Female *amagqirha* proceed from the stage of acceptance and submission, stages of conviction, accepting the burdens of the calling, and then graduation. During each stage throughout that process they accomplish certain competencies and break through the chains of *inkathazo* (trouble) to become healers

of other sick patients. They also learn to identify their leadership skills, management and controlling skills as they lead the ritual performances and ceremonies. Progression from one stage to another allows separation from one role or status before being incorporated into a new one. From the initiation status, *igqirha* grows to a fully fledged healer who keeps growing from experience as she practises.

#### **8.1.6 Culture role reversals and identity construction**

To some women, leadership skills are often hidden or suppressed by the patriarchal structures of their communities, which do not perceive women as public leaders. This occurs more amongst women from rural areas where traditional customs still apply. The researcher could see how different she was from her group because in most cases she did not have a headscarf or scarf around her waist. All these are signs to show that a woman is married and a sign of respect to the in-laws and ancestors. Boniswa (2008) asked the researcher, “Novintsholo, are you married? I have observed that ever since I have met you, you seldom wear a headscarf or one around your waist. When do you show respect to your ancestors?” The researcher was tempted to ask if her ancestors had shown signs of rejection, but she decided to be polite and just borrowed a headscarf from Boniswa.

That clearly showed that differences in background also influence how women view themselves and which identities they adopt or construct in their daily experiences. While *amagqirha* have their freedom to lead rituals and step in sacred places, which are not permitted for an ordinary married woman, they still carry their old identities (married women). This therefore suggests that their leadership role and the power to take control of rituals are situational. They do so only when in performance; after that they return to the chains of inferior positions set by traditional customary rules and entrenched by patriarchal dominance.

It is easy to observe such behaviours. For example, when a female *igqirha* receives her *inkomo* (name for fees charged by *igqirha*), if married and from a traditional background, the husband and/or brother-in-law accepts such payment on her behalf. In the case of Matogu (103 years old in 2000), her brother-in-law and his nephew received her payment at the researcher’s graduation ceremony. Conversely, Boniswa’s and Nombidiyane’s (both widows) *iinkomo* were received by their *amakrwala* but they insisted that one of the male *amakrwala* be present. One would think that with *abathandazeli*, because they attend church activities, it would be different. However, that is where patriarchy, female submission and abuse are rife. Mandlovu is the head of her church, but according to the doctrines, she cannot perform certain rituals; only men are allowed to. Sometimes those men are not even spiritually gifted

but because they are husbands or male members, they have the power to take control over and above the gifted woman.

Women often experience ambiguous life situations during their existence. In *ukuthwasa* too, women have stages when they are considered to be impure. When *igqirha* is menstruating, she is not allowed to go to *umrawule* (dispensary) or collect or pound herbs. It is the same with *ubuthandazeli*; a woman does not prepare *iziwasho* or prepare a sacrament when menstruating. In addition, such a woman cannot have *isiwasho* (full immersion in the river). That is associated with the Old Testament teachings in Leviticus 22. A person can also not wash her body with *ubulawu* at this stage.

On the other hand, the female *amagqirha* receive better cultural treatment than any other woman once they experience occurrences of death. *Igqirha* (irrespective of gender) is not allowed to *zila* (mourn for a long time). In general, *amaXhosa* women mourn for more than a year and wear all black as a sign of *ukuzila* (mourning) and *ubumnyama* (darkness). Soga (1936) associates this with the influence of the Jewish value systems, which seem to influence most of *amaXhosa* cultural values. There are variations on that. In other families, when a female *igqirha* loses her husband, she is only allowed to mourn in black for three to six months. In other families she may not even mourn or, if mourning, she would wear a different colour but not black. In African cultures only women mourn, not husbands, which denotes the inferior status of women to men.

Under normal circumstances, the colour black is considered a sign of darkness and *igqirha* and *umthandazeli* are not expected to be clad all in black. During mourning, though, *igqirha* again is not expected to treat patients (see Section 6.1.1, p. 173). That is the reason why the mourning period should be short. In fact, one would expect that emotionally the person follows a normal mourning process. Before *igqirha* treats patients after mourning, a cleansing ritual *ukuhlamba* is performed to purify her and remove any *isithinzi/ubumnyama* (darkness/shadow of sorrow). That is the same even during the training. If *umkhwetha* has a death in her family, she has to be cleansed. However, due to costs, there is another transformation of that ritual; instead of a goat, a chicken is slaughtered. The main principle is the shedding of blood. *Intlombe* is always conducted and *igqirha/umkhwetha* is washed with a mixture of mixed herbs, including *intelezi*, to cleanse and purify her.

On the death of *igqirha* or *umkhwetha* in training, the burial procedure and after-death rituals differ from those of ordinary women. Many rituals are performed, namely *ukukhatshwa*; *ukuhlamba amagqirha*; *ukuchitha iintsimbi*, and *ukubuyisa/ukuguqula*. In all these rituals, goats, chickens and an ox are slaughtered. Again, all these rituals are led by a senior *igqirha*

and *intlombe* is performed. This means that, in the end, a woman *igqirha* acquires a social identity equal to that of a man through her death. After life, she is able to transmit her skills to future generations. She becomes an ancestor. Her identity recycles to new generations and is not time bound. This confirms Boddy's (1988:1) suggestion that "practices like spirit possession (and *ukuthwasa* in this case) are not merely reactions to problems-symptoms, indices, calculated strategies, etc., but culturally shaped, meaningful acts and idioms that provide the space for kinds of predication and reflection evoked in the training process of *igqirha* and her entire life".<sup>74</sup> During the entire training of *ukuthwasa*, women move in culture-bound spaces like respecting and conforming but also traversing the traditional culturally entrenched boundaries. Above all, the South African Constitution gives women a legal and constitutional right to fight for their rights and female *amagqirha* have to make a choice to stand up and speak out to upgrade their professional rights.

#### **8.1.7 Reflections on the seven stages of training**

During the fieldwork it became evident that *ukuthwasa* journey throughout the seven stages of training (Chapter 5) is not easy. *Umkhwetha* in this journey is often confronted by the 'betwixt and between' that Turner (1968 & 1969) talks about. During every stage of the training, *umkhwetha* is often confronted by the fears of the unknown as each stage has secret information that is not readily shared with anyone until a person has reached that stage. There are often questions like "What happens next? Will I manage?" All participants share similar feelings and all are happy during the last stage of *ukuphuma* and especially on the graduation day. It is such feelings that Meyer (1989) refers to as a crisis for each stage which is necessary and needs positive resolution as a sign of growth and maturity.

During each stage, *umkhwetha* often reflects on whether to move forward or stop and leave. The feelings of ambiguity add to the problem of coping with afflictions and interrelationships amongst the trainer and colleagues as well as a lack of support from the family at the same time. It is such reflexivity that allows *umkhwetha* to make sense of her life and to manage and cope with life while also identifying herself. The arrival of graduation day for an initiate is indeed a sign of strength, patience, humbleness, and submission to the calling. Graduation is the sign of achievement that only a person who has undergone a spiritual journey would understand. It gives an Aha! expression. It becomes a social public drama that reflects strength and self-achievement. The status of leadership and independent functioning as a

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<sup>74</sup> The researcher's addition.

qualified *igqirha* is demonstrated by the achievement of competencies and skills gained during the years of training (see Section 5.3, p.1161).

All the trainers interviewed shared the same sentiments about the profound experiences of affliction and turmoil during the process of training. In spite of the experiences of *amagqirha*, they often sympathetically reflected on those who did not complete the process. Those who fell out along on the way were labelled in various ways like '*ebengenayo intwaso*' (she did not have *intwaso* (the calling)); '*zange ayihoye*' (she neglected it); '*khange abenamntu wokuyihoya*' (she never had a person to support her); '*khange anyamezele*' (she did not have patience); or '*khange ayihloniphe intwaso ifuna uhloniphe ululame*' (she was not respectful to *intwaso*, *intwaso* wants respect and humbleness). All these statements indicate certain qualities expected from the initiates in order to accomplish the healing identity in the end (see Section 5.3, p. 161), why others do not complete *ukuthwasa* and why others reject it (see Section 5.2.3, p. 139). The statements also show how important support is during the process as well as full submission of *umkhwetha*. Some statements blame those who do not complete the training. Again, reflections on those statements show the complications that *ukuthwasa* embodies and why *amagqirha* only value the initiation on completion of the training. Reflections on the stages of training (see Section 5.5, p. 166) also explain how complex the phenomenon of *ukuthwasa* is. The hidden factor in these reflections about those who do not complete is the attitude of their families towards *ukuthwasa* and at times those of their churches. Both these factors play a crucial part in why others do not complete the training and need to be properly investigated and managed. In the end, the lives of those who do not complete are often in a mess and they experience endless crises in their lives. That is why feminists such as Oduyoye (1995); Fabella & Oduyoye (1988); Hodgson (1997) and Landman (2000) stress the need for mentors and their invaluable support to the trainees during their spiritual journey. Without this support and mentoring healing is not possible.

Historical traces of the implications of the divide-and-rule policy created by the apartheid regime can still be traced back to how *amagqirha* kept referring to the researcher as an *igqoboka/isifundiswa* (Christian/educated one) (see Section 2.1, p. 29). Such references often made the researcher aware of how different she was within that group and she never felt entirely accepted as a full team member. Perhaps that is why even today she often realizes how different she is from the others in the group. The references made to her strengthened the 'digital divide' of 'otherness' and 'us' to such an extent that she constructed a separate identity though she had much in common with them in the form of the manifestation of *ukuthwasa* and healing powers.



*Ukuthwasa* cannot just be viewed as just an ‘illness to be cured’, but should be perceived beyond just ‘illnesses’. It is also not simply a cultural product with the exclusion of biological and socio-cultural factors. It should be seen towards its end goal of being transformative, through transition from a status of illness to that of healing. All cultures recognise some kind of transition like that of the Ndembu (Turner, 1968), Tanzanian (Erdsieck, 2003), Lungu (Willis, 1999) and the bar mitzvah (which marks the transition for boys in the Jewish culture) rituals. Through *ukuthwasa amaXhosa* women reclaim elements of the lost ethnic identity and emulate *ukuthwasa* to achieve that ethnic identity (Beckett, 2002 and Brooke, 1990).

Research results may influence a change in the perception of those who fail to see *ukuthwasa* as a reality, as well as those who have to *thwasa* and delay the initiation or reject it, since the results show that failure to respond leads to more illness. Ancestors are not aggressive but encourage peace in society. They are reasonable and, if approached respectfully, may relent (Cumes, 2004:11). This means that afflictions in the process are not a punishment as such but motivating strategies to make a person aware that she needs to do something. Reflections on the results show clearly that as *ukuthwasa* evolved against the rigid political structures across the decades, it infiltrated Western social structures and continues to influence the search for meaning and the construction of socio-cultural and healing identities across cultures on the entire continent (Van Binsbergen, 2002 & 2003).

#### **8.1.8 Transformations observed in the *ukuthwasa* process**

The research findings further revealed that changes affecting the training of *amagqirha* are not that different from the challenges confronting parents, schools and work situations today. These are factors such as increasing low morale, irresponsibility, and a lack of accountability amongst both *amagqirha* and their *abakhwetha*. Observations during the field work also raised serious concerns and reservations on how the integrity and professionalism of *ubugqirha* (divination) are affected. It should be stated that, as much as senior *amagqirha* may blame the confrontational attitude of *abakhwetha* and their lack of respect to President Mandela’s Human Rights Code and Constitutional Rights, most of them were not good role models for their *abakhwetha*. Conversely, those who tried were labelled by their colleagues and *abakhwetha* (especially those who shun being disciplined) as harsh, cruel and difficult. What was of concern was that sorcery and witchcraft amongst both *amagqirha* and *abakhwetha* were the talk of the day, but in undertones.

The researcher also experienced two incidents (2006 and 2007) that nearly had fatal consequences. The last one in 2007 led to her admission into hospital as a result of sorcery from a Shangaan sangoma in Johannesburg.

Zanemvula (2006) reported that she was given poisoned food when attending a graduation ceremony in Tsolo and she had to leave before it ended. Matogu had a similar experience and Boniswa is often frightened for her life because she seems to be popular. Three other senior *amagqirha* in Komanisi are reported to have died of food poisoning at *amagqirha intlombe* without being sick. This has led to other *amagqirha* not eating at ceremonies. For their protection *amagqirha* often use a person of their choice amongst them to cook for them. The family also provides groceries. In certain instances the families were alleged to have bewitched *amagqirha*, especially if there were serious allegations of ill-treatment of their children (*abakhwetha*) during the training. That makes the journey dangerous during training and across the full-time life cycle of *igqirha* (Van Binsbergen, 2003 and Willis, 1999). In addition, interrelationships also extend to the family and community at large (due to extended family relationships).

Mandlovu and some of her patients confirmed the same allegations and fears. One of her patients informed the researcher and her assistants, "*Umama akaphekela nangubani, bangambulala kaloku*". (Mother's food is not prepared by just anyone; they can kill her – meaning poison her.) She also has a special person chosen by her to cook for her.

In the end, the relationship between the trainer and *umkhwetha* is fundamental to shaping *umkhwetha* (neophyte) to become a wise and knowledgeable healer. The social orientation provided by *igqirha* enables *umkhwetha* to socially construct her healing identity and leadership identity throughout the guidance, punishment and disciplinary measures; she learns to manage the role of *igqirha* in future. She is prepared like art, like clay, which is moulded in the artist's hand and baked to make it strong.

In conclusion, due to political and socio-economic changes, the training process has been transformed; that is, its structure, procedures and control measures. The introduction of constitutional rights has made *abakhwetha* aware of their human rights and that forces *amagqirha*, whether they like it or not, to respect that. As in all professions, *amagqirha* are faced with managerial issues to sustain rigid strategies in disciplinary measures, which seemed to have worked before. The length of the training has changed from eight years to two, three or five years. The fee structure has been affected and has increased to accommodate inflation rates (Chapters 4 and 6). *Abakhwetha* no longer stay with *amagqirha* for many months on end; most of the time they work and stay at home, or work and pay visits

to *amagqirha* at various times when rituals have to take place. *Amagqirha* are not at all happy about that arrangement and fear that that type of *abakhwetha* will not make good future practitioners. With new developments and changes in their profession, the transfer of skills amongst various Nguni and African cultures continues to influence the status and originality of *ukuthwasa*. Furthermore, the escalating fees are posing a serious challenge.

The training is based more on experiential learning than on a structured curriculum. It is cognitively based. However, the issue is: how do *amagqirha* balance the issue of costs to the reality of unemployment? Fees are benchmarked in regional scales but an independent *igqirha* may charge her own fees for *inkomo* (ox as part of her fees). For example, in 1998 when the researcher started training, assessment costed R20-R30 and *inkomo* at graduation was R1 200. Apparently such fees have now doubled, with only assessment fees above R50. These fees apply to the Eastern Cape and certain regions. In cities there is an alarming abuse of clients under the banner of the Traditional Healers Practitioner's Association where R50 is charged for bone throwing and R750 just for a cleansing ritual, excluding additional requirements such as a chicken, peanuts and other necessities. In addition, R3 000 is charged for cleansing of *umzi* (homestead), whereas in rural areas *amagqirha* charge R800. This means that traditional healing help is sought more by those living in cities and hence the fees are high due to the increased demand for the services. That is why Matogu lived in Khayelitsha in Cape Town. She had a practice there and would come to Tsolo only in December for Christmas. If the legitimising of *amagqirha* practice and registration process were successfully managed and controlled by the government, such practices would be under control. For example, the fees of doctors and psychologists are benchmarked because of the control by their respective professional councils and there is control over how much they must charge for various activities, irrespective of the location of their clients.

It is hoped that if the registration process and legalisation of the profession succeed, it may lead to a professionally controlled practice with benchmarked fees. All the trainers were concerned about certain transformations in *ukuthwasa*. *Abakhwetha* no longer stay with the *amagqirha* for long periods as was the case in the past. With changing family structures from extended families to nuclear families, cohabitation and single families, there is nobody to finance the expensive training if a person does not work. This challenges *amagqirha* to look at how they should construct and compile their curriculum, and to provide continuous assessment and evaluation to accommodate the changing needs of their trainees. Nowadays *abakhwetha* work. This transformation has a similar link to that of the dreams about white persons. Tradition informs us that a person who *thwasa* was said not to like *umlungu* (a white person). In fact, it was believed that ancestors did not like white persons. That was based on

the arrival of the whites and according inferior status to the ancestors, but now that the concept of ancestors and *ukuthwasa* is acknowledged and accepted by white people, *umkhwetha* can work. A two-way change of attitudes has taken place here. *AmaXhosa* tradition informs us that a person who *thwasa* could not interrelate with whites, as that caused the wrath of the ancestors and a trainee or *igqirha* would have endless tension at work. After independence and democracy, white and African ancestors seem to have reconciled their differences (see Preface).

However, another problem seems to have been created by the working status of *abakhwetha*. *Amagqirha* gave contradicting views about this. Some felt that as much as *abakhwetha* have to work to earn money to pay for their training, they are also inconvenienced in some ways. The key issue was that *abakhwetha* who were employed missed out a lot in their training on activities like learning how to assess, diagnose and treat clients. Most *amagqirha* verbalised their feelings with regard to that clearly and stated, “*Asoze bazi nto amagqirha aziyo ayaphela*” (They will learn nothing, knowledgeable healers are diminishing.) From personal experience, it may be agreed with *amagqirha* on the fact that *abakhwetha* miss a lot of experience during the day if employed, but knowledge is not only gained by being there every day but also by being responsible, committed and passionate about what one does. As long as *umkhwetha* showed interest and commitment she could learn a lot during the short period of time spent with *igqirha*.

The researcher, for example, was employed full-time and would spend a week or two with Matogu, but nevertheless graduated before all the other trainees who had been with Matogu. The point of how much time *umkhwetha* should spend with *igqirha* is debatable and needs to be explored further to be clear about many factors that could be involved. It may be stated that the reaction of *amagqirha* is caused by the fact that in the past trainees were not allowed to work and all *amagqirha* who were trained then found it difficult to accept the need for some of the transformations that needed to take place. However, Boniswa supports the fact that *abakhwetha* must work because she understands that *abakhwetha* have to pay *amagqirha* for services rendered to them.

### **8.1.9 Variations in *ukuthwasa* initiation process locally and globally**

#### **8.1.9.1 *AmaXhosa* cultural groups**

Field excursions and the attendance of various rituals at other training schools allowed exposure to a wide range of variations within *amaXhosa* cultural groups. As already

explained in Chapter 3, variations occur because of the various cultural groups within *amaXhosa* at local, regional and provincial levels. Again, variations occur because individuals are unique and have individual ways of perceiving things. However, at times perceptions are influenced by cultural socialisation. Variations observed during contact with the groups and those that were articulated during meetings at ritual events, are listed below.

Variations within *amaXhosa* groups are mainly with regard to the dress code of *abakhwetha* (see **Error! Not a valid bookmark self-reference.**) and *amagqirha* (see **Figure 8-2**) (style, colour and beadwork), terminology used for herbs, certain rituals and styles of *ukuxhentsa* (traditional dances) and in procedures when conducting rituals.



**Figure 8-1** *Abakhwetha* from (left) Alice and (right) Komanisi *iphehlo*



**Figure 8-2** *Amagqirha* from Alice (left). Note the white clay covering the eye area. Komanisi *iphehlo* (right).

However, there are more similarities than differences in many rituals. A frequent borrowing of customs with minor differences in procedures was observed. The transfer of skills from one region to another and across cultures is becoming a great challenge and has local implications in legitimating certain imported skills.

Although *amaXhosa* share the same sentiments of *ukuthwasa* as an inborn and inherited *ubizo*, certain groups have additional perceptions about *ukuthwasa*, for example, during a visit to Bizana in 2006 to attend *ukuhlamba igqirha* (cleansing ritual) after a person had lost her husband. Here *amagqirha* group wore red and white beads, as opposed to Komanisi *iphehlo* who wore predominantly white with sky-blue/powder-blue beads with very few red beads. In addition, *abakhwetha* had different uniforms, especially with regard to the beadwork and shape of *iinyongo* (gall bladders) and *izinyi* (urine bladders) of their sacrificed animals (see Chapter 5). There are various differences in dress code, dance, rhythm, pitch of voice and style between the various areas (see Addendum F), where research was conducted.

One of the group informants stated that their *intwaso* (the noun of *ukuthwasa*) was from *amakhosi*. *Amakhosi*, according to them, were classified into two categories: *amandiki* and *amandawu*. She diagnosed by making use of bone throwing and in that process was helped by *amakhosi*. These types of healers are called ventriloquists (Mandaba, 2006). *AmaXhosa* have the same *amagqirha*, but the ventriloquist healer is accepted in certain regions and by certain senior *amagqirha* in the Komanisi *iphehlo*.

*AmaXhosa amagqirha* with *imilozi* are viewed as having gone through *ukuthwala* (power for wealth), not *ukuthwasa*. These *amagqirha* are trained by Basotho, *amaSwati*, Shangaan or Zulus and have undergone *umndawu* spirit training. Some of *amaXhosa* view *amakhosi* as a product of powder from pounded ants from the graves and mixed with certain herbs. All *amaXhosa amagqirha* in this study were unanimous in their view that there was no difference between *umndawu* and *amakhosi/umndiki*. Contrary to this view, the healers at the Badimong Valley (Mautse) in Free State have a different view. When visiting the valley on 13 and 14 February 2008, an entirely different perspective of *umndawu* and *amakhosi* spiritual worldview was encountered. According to Monica, an apparently powerful *isangoma* and *umthandazeli* (faith-healer) in the valley, there is a difference between these spirits. According to her, there is Mnguni, *umndawu* and *umndiki/amakhosi*. *Umndawu* is a spirit of dead people who died in wars or accidents and her/his spirit wanders in space because the family does not know where the person has died. In other words, the spirit wanders in space because it was not properly buried and the relevant burial rituals were not carried out. The spirit then troubles one of the family members and causes a series of afflictions until the person is treated. The spirit troubles the person because it wants the person to bring the spirit back home.

*Umndiki* are man-made spirits used as a means of sorcery by bad people or as love charms. It also leads to afflictions and when treated is changed from being dangerous to a healing medium – *imilozi* by the healed victim. Matogu had *amakhosi* and called them *abahlekazi* as *amaXhosa* also refer to them (see Section 4.2, p. 126). It was always alleged by her colleagues that Matogu had received them from KwaZulu-Natal but she would refute such stories and has never actually revealed their origins. Because of *imilozi* she could *mbulula* (look for stolen articles) due to sorcery. After talking to Monica (2008), a *sangoma* in the Badimong Valley, she confirmed that *umndawu* is a water spirit and a ventriloquist. That was further supported by a psychologist (Khumalo, 2008) who widely researched the Zulu *sangoma*'s training on *umndawu*. According to him, all Nguni cultures, including *amaXhosa*, are supposed to have *umndawu* because all these cultural groups have people who died in wars or accidents. According to Monica, *umndawu* is a spirit of a family member who died

and has never been buried. The spirit then seeks to rest in peace and troubles someone in the family to take care of it.

All four key participants were totally against *umndawu* perspective and view and perceived it as *ukuthwala* (power for wealth). In fact, one of them, Boniswa, was hesitant to entirely disagree as she was of the opinion that *amaXhosa* could not deny their alleged historical blood relationships with *abathwa* (Bushmen-San) who drank raw blood for health and energy and whom *amaXhosa* viewed as ancestors of *umndawu*. It may be consciously stated that *amaXhosa* in general often conduct burial rituals for those who die anywhere, whether in wars or in accidents, but for those who die in accidents the accident place is visited and a communiqué ritual takes place in order to bring the person's spirit home. Afterwards a ritual called *ukubuyisa izihlwele* (bringing back of ancestors) is performed.

The ritual is performed in a particular manner. *Amagqirha* and family visit the sacred places. A white goat is taken along. In all those sacred places: big rivers, forests and caves, the spirits of all those who died long before and went missing and were never buried, are called and a place in the forest is made where they are laid to rest. It is often a place that cannot easily be invaded by either people or animals. Thus the spirit is given a place to rest in peace. All those burial rituals take place to make peace with those who have died tragically. That is exactly the same ritual the researcher underwent in 2007 (Preface and Chapter 4). That also took place to give her senior grandmother's spirit (who was last seen going into the forest) a place to rest. It was like burying her in peace.

Contrary to this view is the information received from the Amathole Museum in King William's Town in 2007. On the information billboard there is a photograph of *iingqawule* (bones for divination) and a script below indicates that the bones belonged to a Fingo (one of the Xhosa cultural groups) *igqirha* in the Eastern Cape who had used them to divine. That was in the 1800s. It indicated that some of *amaXhosa* could be asked by their ancestors to undergo the training of *umndawu* because during the colonisation period in the Eastern Cape *amaXhosa* mixed with other groups such as the Khoi-San. The influence of the Zulus can also not be underestimated. Fingos are a group that came to the Eastern Cape searching for land and fleeing Tshaka's reign in KwaZulu-Natal (Giliomee & Mabenga, 2007). Therefore *amaXhosa*, due to intermarriages afterwards, cannot deny the fact that they now have ancestors from all those groups who believe in *umndawu*.

It has also become evident that, because most of *amaXhosa amagqirha* are in search of power, that is the reason why they are attracted to the use of *umndawu* or *imilozi* for *ukumbulula* (search for lost property or stolen property). After their training they visit a special



*isangoma* to undergo training on *umndawu*. Others who *thwasa* opt for *sangoma* training because of its short duration – six to eighteen months – versus the two to five years (average period) of *amaXhosa* training. Others train under *umndawu* because they do not necessarily have to have a calling to undergo *umndawu* training (Cumes, 2004).

Other characteristics that differentiate the training of *ukuthwasa* are the variations observed in terminology and the interpretation of the same issues. For example, statements such as *idlozi liyaphuma* (the ancestors get out – as sangomas often say); ‘spirits have names’; and ‘spirits talk in a person by different voice’ (as in Willis, 1999 and Erdtsieck, 2003); are not used by *amagqirha* and imply a different meaning to people outside these cultures. In addition, the fact that in other cultures trance is used as a major criterion to qualify the status of being a *sangoma* (as in Van Binsbergen, 2003) or that a healer has to be in a trance to diagnose clients/patients are again not familiar to *amaXhosa amagqirha* since they do not need to experience a trance to diagnose their clients/patients. Furthermore, the fact that a *sangoma* digest a certain herb to have a trance (Erdtsieck, 2003 and Lewis, 2003), means that those healers cannot diagnose without being in a trance. This is contradictory to the practice of *amagqirha* who use *umbilini* and getting into a trance or digesting herbs is not necessary. These scenarios differentiate the practices of different healers in different cultures.

All these statements are perceived in negative ways by *amagqirha* since they interpret them differently. For example, *idlozi liyaphuma* has no relevant meaning to *amagqirha* because ancestors are not perceived to be spirits and in those ways, living in people’s bodies, as *sangomas* believe. To use a term ‘spirit’ amongst *amagqirha* is to refer to foreign/evil spirits and a person possessed by spirits has to be treated and cleansed of the evil spirits first before she *thwasa*. *AmaXhosa* perceive such spirits as *amafufunyana* (see Chapter 2). Yet, Monica, the *sangoma*, differentiates between *amafufunyana* and *umndiki*, which she describes as evil and *umndawu*, which is not an evil spirit. According to Monica, even the *amafufunyana* and *umndiki* could be treated and changed from their harmful state to become healing agents through a rigorous herbal treatment.

To call ancestors ‘spirits’ amongst *amaXhosa* is to rebuke or undermine the living dead who are attributed living characteristics such as being cold, hungry, thirsty and other human attributes in order to prove their living existence (Buhrmann, 1982). They are not dead spiritually, just physically. That shows how Nguni cultural groups perceive one ‘shared universe’ through a different lens, even though they all believe in ancestors. These differences do not make one culture superior to another but provide clarity and

understanding that command respect for one another's cultural belief systems, interpretations, meaning and values. Other variations in terminology are, for example, in the manner in which a trainee is called. For instance, in other cultures a trainee is called *ithwasa*, not *umkhwetha*; and *igqirha a gobela*, as in the Basotho and Shangaan cultures. Many other variations amongst *amaXhosa* and other Nguni cultures are clearly articulated in Broster (1981), Hunter (1936), Gumede (1989 & 1990), Erdtsieck (2003), Willis (1999), Turner (1968 & 1969), Lewis (2003) and Nettleton (2006).

This study reveals that variations are closely associated with a specific culture, with people's belief systems and how they have been socialised with regard to their lifestyles and religious beliefs. Another finding is that *amaXhosa*'s religious belief systems are not so well articulated in books and articles consulted. Many factors could be attributed to the loss of this rich data. For example, even the recent book by Mabona (2004) in which he claims that he has discussed the training of *igqirha*, that information does not capture the phenomenological Xhosa cultural perspective; it is a mixture of Xhosa and Zulu cultures. In that way, Mabona's book is confusing and could be misleading for those who are not *amaXhosa*. The book states very little about *ukuthwasa* per se and about the training process. It refers a lot to examples written previously by other authors who were not *amaXhosa*. The dearth of rich evidence about *amaXhosa* could be attributed to the fact that *amaXhosa* were secretive about their culture and whatever was written about their culture was mostly by other people. According to Giliomee & Mangena (2007), the Eastern Cape is said to be the province that experienced the brunt of colonisation more than any other provinces in South Africa. This could have led to them losing their own culture and taking up more aspects of Christianity and Western lifestyles. Another observation that could lead to diversity on that aspect is that colonisation led to an influx into cities and thus enculturation could have led to diffusing their culture. Consequently, *amaXhosa* could never catch up again on that valuable information as that information is still lost.

Matogu died without having time to tell her trainees (including Boniswa) her deepest secrets and even general wisdoms about *ukuthwasa*. Who then in her *iphehlo* (training school) would continue to transmit the wisdom she had in *ukuthwasa*? The researcher still recalls a night when three *amakrwala* (graduated trainees) confronted Matogu about when she was giving them what they termed *ubugqi be ntwaso* (the science/art/wisdom of *ukuthwasa*). She blamed them for not returning to come and stay with her after graduation in what is called an *ukuphinda indlela* (internship stage), as discussed in Chapter 5. That was not fair because all had done so at different times. Later that night, Matogu shared her view that she was not ready yet. That admittance came as a shock, for it was believed that such wisdom should be

shared with her trainees. That attitude may also be indicative why the wisdom gets lost because, while a senior *igqirha* is still contemplating on who shall succeed her on her death, she dies. Why *igqirha* does not give this knowledge to all her trainees remains a riddle. An *amagqirha*'s response to that is always "*Ndijonge umntu ozakuyiphatha kakuhle*" (I am looking for someone who is going to nurture it.) That is always confusing but that is one of the topics that are rather not discussed at length due to serious tension created during the interview.

Competition amongst *amagqirha* is another factor that contributes both to variations and the loss of rich information. There was ample evidence of competition pertaining to clients amongst *amagqirha*. That explains why *amagqirha* have a tendency to hold onto their wisdom because fame must be accorded to their schools and they die without imparting the knowledge. Sometimes senior *amagqirha* express their competitive attitudes by statements such as, "*Bafuna ubugqi bam? Buphi obakowabo?*" (They want my wisdom/artistic skills? Where is their family wisdom?) There is an element of selfishness in these statements because their wisdom is a result of the unselfishness of their trainers who had unselfishly passed the information on to them. In the end, the whole cultural group suffers as wisdom continuously gets lost. On the positive side, the *igqirha* knowledge or expertise leads her to bring about new innovations at her school. For example, in Boniswa and Zanemvula's training schools some variations could be noticed in that Boniswa lighted candles and conducted a prayer session at the end of all her ritual ceremonies whereas Zanemvula performed *ukugongqa* at the initiate's household; yet, they are both from the same training school (Chapter 4). Other variations could be found in Broster (1981:66-67).

Lastly, variations could be seen as a normal situation since *amaXhosa* groups are diverse, not just in language, but also geographically and culturally. That is why there are variations within their cultural group, as shown by differences in areas where this study was conducted. With the Alice *amagqirha* the influence of Christianity is more evident as even their songs during the rituals are mostly religious hymns. In the end, there is no cultural group that can claim to be right or wrong; it is all a matter of consensus within that group and acknowledging what is different in another and respecting it. In that way, what this study managed to do was to observe variations as confirming people's cultural identities as construed by them.

#### **8.1.9.2 National and global variations**

It is worth noting that similarities seem to occur amongst the various African cultures across the continent as well as amongst Western cultures. For example, all cultures believe in a

supernatural power and the presence of evil forces. Variations occur in how people perceive and interpret the worldview. The basic principle of the existence of ancestors, the use of symbols, ritual, myth, and the magic in healing is prevalent wherever there are human species (Grof & Grof, 1989:80 and Section 2.2, p. 55). The other feature is the intertwined relationship between man, nature, animal and God. Many cultural groups acknowledge this relationship and believe it similar to what the *amaXhosa* do. It is believed that every species in creation, be it the earth, moon, stars, reptiles, birds, animals (in particular wild animals) rivers and seas, caves, mountains, and the flora and fauna are part of both traditional and spiritual healing. That means that in both traditional and spiritual healing there is an understanding of associating these elements with a specific sacredness, for instance, stars being related to the foretelling of the future and a person's destiny.

While *amaXhosa* view the gift of *ukuthwasa* as not just a simple gift that can be inherited by anyone, Kalweit (1989:14) explains shamanism as a simple matter, "a skill or trade anyone is capable of acquiring if he trains himself". This statement suggests that anyone can just wake up one day and says she wants to be a healer. According to *amaXhosa*, nobody has the power of choice, the ancestors determine it.

*AmaXhosa* use various ochre powders to smear their bodies. Certain *abaThembu* use white ochre to smear their entire bodies during their training and even after graduation. The *Komanisi* group use white ochre only once *umkhwetha* is in her last stage of graduating when she visits the sea/river or forest; yet in other schools they use it from the start of training up to graduation. The use of white ochre in all schools marks the liminal phase that indicates the ultimate separation from an ordinary person through initiation to gradually becoming a new person with a new social status and role that will never be changed again. That status is similar to that of boys undergoing circumcision. While *amagqirha* from other cultural groups do not use red ochre during the initiation process, certain *amaXhosa* groups use it during the birth ritual and *intonjane*. *Komanisi amagqirha* use it during the ritual called *umrazo* (rubber-stamping the finality of transformation) and being anointed as *igqirha* (see Section 5.2.6.5, p. 158). That is just a symbol for that particular moment because it is washed off the following day. Similarly, *amakrwala* (boys from the bush) also smear their faces and bodies with red ochre and butter for a month (this is currently done for two weeks only).

The smearing of the body with ochre is also to give *ikrwala* (used for both boys from the bush and *igqirha* graduate) *intlantla* (luck.) The use of red ochre on the bodies comes from the culture of the Khoi-San who would call themselves 'Redman'. The smearing of this ochre can

be related to the transitional stage of the liminal phase (Turner, Blodgett, Kahona & Benwa, 1976:416). *Igqirha* has now *thwasa* – emerged into a new person like a moon. Finally, the healing identity is confirmed and nothing will ever change it, not even death. Bell (1983) also regards the smearing of red ochre by women on their bodies as a sign of reclaiming their social identities and nationality as well as their roles as nurturers of the country (ibid.:182). While Turner (1968) views the masking function (smearing of ochre) as a removal of identity, *amagqirha* use it as protection (hiding a person's identity) in order to preserve one's luck and blessings from ancestors.

In Zimbabwe the researcher found that *izangoma* (plural of *isangoma*) conceptualise the concept and philosophy of *ukuthwasa* around the snake as a symbol of ancestors. If a person dreams about snakes, that person believes that she is visualising her ancestors. It is the same scenario in Botswana again, where the dreams of snakes represent the Balimo (ancestors) (Last, 1986:58-59). Amongst *amaXhosa*, the Majola clan are the only people who have a snake called majola that is believed to have human characteristics and would never injure anybody. With regard to all those *amaXhosa* who are part of the Majola clan group and their relatives, when they see that snake even in real life they perceive it to symbolise luck and blessings and they respect it. They do not kill it but would sing clan praises. In the field interesting stories were encountered relating to the visit of the snake, even instances of a new-born baby where the snake would visit and coil itself up next to the baby's head. Money or tobacco as gifts would be placed next to the child with songs of praises. When it leaves, the gifts are left behind. At least the symbolism and sign of respect were shown. No other form of snake narrative that is closely associated with *ukuthwasa* was found amongst *amaXhosa* .

The symbol of a snake representing ancestors could be understood if the symbolism of the snake is considered. For instance, in the Bible, Genesis (3:1-24) gives a crafty revelation of how a snake can be cunning and dangerous. The evil, fall and suffering of humankind were brought to earth through the evil nature of a snake. However, another contrasting, crafty characteristic of a snake is revealed in Exodus when Moses uses a snake to protect and heal the sufferers on the Israelites' journey to Canaan. Against the venomous snakes that were sent to kill the Israelites by God, he in turn sent a bronze snake to heal them in response to their plea for forgiveness and protection. *Isangoma* interviewed in Zimbabwe by the researcher failed to articulate the meaning behind that symbolism because it is something understood in their culture but it perhaps may symbolise the healing and protection that were brought about by the bronze snake. The ancestors also look after their people, protect and heal them, and at times afflict them when they fail to obey, listen and conform to their pleas.

The general belief amongst *amaXhosa* on dreams of snakes, except for the majola snake, is closely associated with *ukuthwala* (see Section 2.2, p. 61).

Common knowledge has it that, amongst the Shangaan and the Basotho, *umkhwetha* drinks the blood of the sacrificed goat raw and an exchange of gifts also takes place between the trainees during the graduation ceremony. That is not the case with *amaXhosa* except in the case of those trained by other cultural Nguni. During the graduation ceremony, the trainees may present one another. This has not been observed amongst the Komanisi group, except for the community members, family, and relatives who give presents. In addition, *amaXhosa* do not believe in drinking raw blood so much as there is an assumption that they have learnt that from the Bushmen (Giliomee & Mbenga, 2007). Instead, *amaXhosa* mix the blood from sacrificed animals with *umhlelo* (fat), cook and eat it. To *amaXhosa* the drinking of raw blood is associated with *ukuthwala* (buying foreign powers/wealth).

Similarities as well as mild differences can be related to *amaXhosa* training process in Chapter 5, the divination system in Chapter 6 and the therapeutic role of songs in Chapter 7. There also seem to be similarities in how *amagqirha* perceive *umbilini* and how the *kundalini* energy is perceived in other cultures. For example, Sannella (1989) defines *Kundalini* as the purification and balancing energy that moves from the lower body (the feet) to the throat and ends in the abdomen. This explanation is similar to that of *umbilini* (Mlisa, 2007, and in Section 8.1.2, p.222).

Lastly, the Western philosophy has to acknowledge and respect the existence and reality of the ancestral spiritual world and the fact that it cannot be tested objectively and in laboratory formats, but by listening to the personal stories of those who understand that world. The ancestral world will remain a powerful, subjective world that will remain to haunt and manipulate the conscious and subconscious minds of both the ordinary and most intelligent on the African continent. Laing (1989:49-62) can be supported in his approach to combine a comparative critique of Western society with an innovative psychological understanding and treatment when he blames the failure of Western science to objectify the traditional spirituality on its weakness of ignoring the 'soul' and the 'spirit' aspect of a person. The person must be seen as a whole.

That understanding is also congruent with Jung's (1990) suggestion that if the spirit or 'soul' is neglected, a person is not treated in totality and such neglect can lead to failure of the therapeutic treatment, as the person can also not make sense of her life because of the spiritual problems she has (see Section 3.1.3, p. 80). To support these views, Torrey (1972) suggests the integration of both traditional and Western therapeutic treatments so that they

can complement each other. Laing (1989:49) may also be supported when he suggests that the sane are not really sane and the psychotic are not as mad as they appear to be. He further suggests that they are viewed as such because modern society is founded on denial of the self and of experience. That means that, to continue to deny the reality of traditional spirituality and to treat spiritual emergency as possession and primarily as a psychological phenomenon, is to underestimate its significance as cultural text and cultural discourse (Lambek, 1993 and Mageo (1996:61). Often the Western-trained psychiatrists, whether African or white, treat *ukuthwasa* characteristics as a mental disturbance and neglect to assess the cultural aspect thereof. The blame could be attributed to their training, but what about the individual proactive innovation? The accusation is often that *ukuthwasa* relates to witchcraft or hysteria or a characteristic of depressed women. From a Western Education and philosophy point of view spiritual experiences such as intuition and psychic experiences are labelled as either a 'myth', guess work, hypothetic information (Liebermann, 2000) and just hunch or simple six-sense ( that could not be viewed objectively and admitted seriously).

Laing (1989) views such diagnosis and treatment in psychiatric rituals and ceremonies as invalidating the clients as human beings. In addition, it interferes with the healing potential of their process, whereas in traditionalists' views experiences emerging from the unconscious are seen as valid, important and meaningful. Accepting and respecting transcendental wisdom facilitate communication and is conducive to healing. In other words, traditional healing models provide special spaces where people receive the support and sympathetic understanding that facilitate the healing process and clients are respected. In addition, Lutke (1993) reports that rituals allow women who undergo them to meet with other women who then become role models and nurturers, and who support their trainees to identify with their spiritual talents and demands. The role modelling and mentoring offer the women trainees a golden opportunity to identify and acknowledge their spiritual 'secrets'. In turn, the cycle revolves as the graduates become nurturers of new generations and in that way, rituals and their significant value in the community are not lost.

Again, while Western psychotherapists around the world use deductive methods and objective tests in their therapeutic treatment models, traditionalists use *umbilini*; even those throwing bones, as an element of *umbilini*, cannot be excluded. Cumes (2001:11-14) a medical doctor and a surgeon, had to humble himself and seek the traditional healing skills of *umndawu*. He supports the powers of such skill and says, "Ancestors can provide information that is not confined to space-time continuum, can heal anything since healers have capacity to access the universal healing energy." He further suggests that, together with bone-setting, *umbilini* helps to provide information. This could suggest that even those *izangoma* who use

mechanistic ways to divine do so also with the support of *umbilini*. A similar case occurs with *abathandazeli* who use the Bible for *ukuhlahluba* (assessment and diagnosis).

#### 8.1.10 The linguistic issues in *ukuthwasa*

Language forms part of ethical and professional standards as well as part of identity construction. In most instances the language a person speaks reflects who she is and thus identifies her with her traditional healing profession as *igqirha*. This view may be supported because during the training period, a person has to learn and understand the terminology used. For example, the first term to be learnt is *Camagu!* *Camagu* is used in many ways, for example, *Camagu* is like a greeting gesture. When greeting *igqirha* a person says, “*Camagu*” and *igqirha* respond likewise. In some instances it is used as ‘Yes’ or ‘I understand, and it is okay’. Every time when speaking to *igqirha*, the response is *Camagu!* In rituals *Camagu* means prayer, a pleading gesture and humbleness to *iminyanya*. When said in that context, one can see the seriousness in facial expressions and tone of voices (in a dignified manner) of those who say it.

The slaughtering of an animal for sacrifice is an important moment. Everybody becomes attentive and *Camagu* is rendered a special meaning. If any animal is slaughtered, its cry invites a higher level of hope and excitement amongst the family, *umkhwetha* and *igqirha*. Even the tone of voice changes and becomes more respectful. The cry brings out joy and happiness, the tone of voice is high and broad smiles and the shaking of the body like an impromptu dance may be performed. The cry of *incamazana* (see Chapter 6) denotes an acceptance of the sacrifice by the ancestors and a sign that the ritual is blessed. The *Camagu* in this context, even to *umkhwetha*, is a sign of hope, satisfaction, and a motivating force. For example, all *abakhwetha*, *amagqirha* and families feel relieved because the community members as witnesses and legitimators are present to assess and evaluate whether the ritual is accepted. For instance, if the sacrificed animal does not ‘cry’, everybody becomes embarrassed and that is a moment of turmoil to *umkhwetha* and *igqirha*. *Igqirha* may be injured at that stage due to anger from families and relatives. At such moments, the blame is always assigned to her.

Again, *Camagu* is used during assessment and diagnosis sessions to show that *igqirha* is on the right track and to encourage ancestors to show more enlightenment to *igqirha*. That is the only context where *Camagu* is accompanied by the clapping of hands. It is the sound of the clapping that keeps *igqirha/umkhwetha* more alert. The light sounds and low tones of *Camagu* and *siyavuma* denote that the assessor has lost track. The strong claps and high



tones of *siyavuma* indicate that *igqirha* is on the right path. *Umkhwetha* is also taught to observe all those verbal as well as nonverbal cues: high tones, facial expressions, body language and signs of excitement.

In some of the Apostolic Faith Churches *Camagu* and *Amen* are used interchangeably. Most churches do not use *Camagu* as they associate it with *amagqirha* because they perceive *ubugqirha* (divining) as paganism. Only those churches that have positive perceptions of *amagqirha* use *Camagu*, such as in the Order of the Ethiopian Church led by the late Bishop Siggibo Dwane.

*Ukuhlonipha* (respect) causes other linguistic problems because those terms are self-created or group/professionally created. For example, a lawyer is identified by the terminology he/she uses and so on. That is why women *amagqirha* are identified by their language rather than their dress code alone. Language forms part of socially constructed identities by the community of such professionals or members. It is also legitimated by those members. Mabona deals with many other linguistic issues related to the language of *amaXhosa* in depth (2004:165 & 180 and Soga, 1936).

In other ways, language acts as a unifying force. That offers shared ways of making sense of experience within a specific group or culture sharing a common understanding of ritualism and symbolism in their culture. Localised or regionalised discourses reflect subcultures within that culture or single institution/organisation as reflected by *amagqirha* in various regions in the Eastern Cape. That does not exclude them from their culture but depicts their unique and regional identities through those variations. If variations could be looked at positively they also show talent, innovation and artistic features that demonstrate evolution in their practice more than just 'being different' from another person. Consequently, that means that traditional healers are not copies of one another, as they have different ways of construing their experiences through their language to represent and share such varied experience worldwide (Jankowicz, 2005:148).

*Ukuthwasa* is a process and practice that is predominantly based on communicative strategies. As Mndende (2004) suggests, it is a process of *ukuthetha* (to speak) as it involves singing and dancing as well as *ukunqula* in almost on daily basis; therefore understanding the variations involved is important to be able to maintain insight into activities conducted. In addition, Jankowicz (2005:146-152) may be supported in his view that language is a system for representing experience. That is revealed by how *amagqirha* in this study expressed their feelings and experiences in various communicative strategies such as songs, gestures, metaphoric speeches and many other ways. Therefore, as much as linguistic issues pose

some risks, it also expands one's insight into other people's cultures and cultural interpretations and meaning involved in their rituals and how they use language to express their identities.

#### **8.1.11 Concluding remarks on *ukuthwasa* as a process**

In conclusion, full agreement may be expressed for Kalweit's (1989:18) view that for a woman *igqirha* life is always connected by periods of inner purification to progress to new and unburdened existence from the day she accepted her *ubizo* (calling) throughout her training period until death. One is able to understand female experiences through their narratives, which allow women to make reflections that enable them to remember memories of the past experiences and turning them up into new memories (unconscious level). The incorporation, assimilation and automation of these memories open up the way for the process of learning and recognition of a woman's identity in the course of time. The capacity to remember oneself in the past and imagine oneself in the future is what convinces a woman of who she was yesterday and will still be tomorrow. For example, when Boniswa reflected on her spiritual journey, she saw her struggles converging into a bright future with skills (popularity and wisdom) similar to that of her trainer, Matogu (see Section 4.2, p. 126).

Lastly, it needs to be mentioned that the above discussion also indicates another important feature in the training and identity construction of women *amagqirha*, namely the issue of role reversal. In this regard, one may strongly support Mbiti's (2005) suggestion that a woman's image is portrayed through the proverbs that cultures create about them. For example, while in *amaXhosa* culture a girl is a flower of the home, in Ghana a woman is a flower in a garden (Mbiti, 2005:1). Mbiti further reminds us that proverbs are expression of wisdom acquired through reflection, experience, observation and general knowledge (ibid.:1). One needs to consider what humankind has taught one about a woman, being a nurturer and a pillar of the nation as well as the fact that most religious myths depict their goddess to be coming from a female creation. All these proverbs depict a woman to be closely associated with nature, hence expressions like 'Mother Earth' abound. It is no wonder then why *amaXhosa* relates *ukuthwasa* more to women than men to an extent that even men who enters the initiation have to dress like women.

Role reversals are seen as a reflection of social symmetry to articulate the symmetry or equality between the two sexes. For example, under normal circumstances, married women are not allowed to get into the kraal or stand *enkundleni* since those are perceived as sacred places and should be respected by them. Conversely, during training and after graduation,

whenever rituals are performed, men wear dresses like women and are responsible for all household chores. Therefore cross-dressing and role-play reversal between the sexes allow *umkhwetha* a chance to experience the usually repressed other male (in cases of women) and female half (in the case of male initiates). Accordingly, as revealed by the individuation process, *umkhwetha* can then become the incarnation of totality and in that way is able to reach perfection and thus construct the fullness of self. This process complements and finalises the reconciliation process needed for sense-making on reflexivity.

In the end, the identity of women is the result of identifying unique traits compared with others – whether different or similar – and understanding exactly that uniqueness and difference (see Chapter 1), which later on culminates into ‘me’ and ‘others’. She acknowledges those traits as characteristics that have made her to be who she is; that is, the ritual symbolism during the training made her transform the old self and to recover the newly created confident and experienced wounded healer to heal others. Without that confidence, experience and strength, she fails and runs a risk of not completing her training. The women’s multi-faceted identities are then shaped by not only rituals, rites of passage, crises and nurturing environments but also by large measure of others around them and their families.

#### **8.1.12 The trainers and *abakhwetha* interrelationships**

*Amagqirha* perceived the training of *ukuthwasa* to be harsh in order to be effective and successful in producing good quality of *abakhwetha* (trainees/novices/initiates). The expected outcomes of *ukuthwasa* training, therefore, is the production of well-disciplined *abakhwetha* who are humble, loyal and diligent as well as strong-willed practitioners (more in Section 5.3, p. 162). There are strict ethical codes of conduct which are currently viewed in negative terms by *abakhwetha* even if they were accepted by other *abakhwetha* in the past. For example, *umkhwetha* (trainee) has to walk barefoot even long distances and do all the household chores for *igqirha*, including looking after the patients and bathing *igqirha*. In the Komanisi *iphehlo* one other aspect that creates some tension is the code of conduct where, for example, *umkhwetha* is not supposed to dance in the dancing circle with *igqirha* or vice versa. That is a very strong ethical code that touches more on respect. Some *abakhwetha* refute that and other *amagqirha* do not keep to the code. That attitude from *amagqirha* confuses issues of maintaining respect standards across the school. Other *amagqirha* look down on *abakhwetha* because of their junior status and accord them an inferior status.

However, there are those trainers who treat their trainees in respectful ways, but they are few.

The stressing of the submissive position and attitude of the trainee are not much different from other rigid training contexts. What was noticeable in the training schools, is the practice that *umkhwetha* have to kneel down with the buttocks up when eating. Other actions of inferiorising the trainee, such as shouting at, washing *igqirha*, etc., meet to emphasize distance and respect.

What makes *abakhwetha* perceive what others accepted in the past? It was not difficult to find out since tensions were always demonstrated during ritual ceremonies when *abakhwetha* or *amagqirha* addressed one another and at times when there were just *amagqirha* meetings to address other social issues. In fact, from working with *amagqirha* and *abakhwetha* it has become evident that both groups share similar abusive characteristics, whether it was *abakhwetha* against *amagqirha* and vice versa or amongst themselves within their respective groups. Frictions and tensions were either from personality attitudes related to the training, queries about one another's honesty or integrity and at times from mere competitive issues such as when *umkhwetha* leaves her *iphehlo* to join another *iphehlo* (training school). Those are factors that create tension within *amagqirha* group. There is concealment of abusive behaviour, which at times is conducted in a subtle manner, at times covert actions of bullying and often bluntly overt inferiorising.

Simultaneously, immediate family members and relatives as well as community members of both groups expected a totally different relationship between *amagqirha* and *abakhwetha*. For example, *amagqirha*, because of their expertise, are expected to understand the trainees; to know how to manage their emotions and behaviour, since they are sick and undergoing a spiritual crisis. Statements like, "*Bayagula abazenzisi; intwaso yenza ingcwangu; basafuna ukutatanyiswa abanangqondo,*" (They are sick and are not doing it purposely; *intwaso* causes aggression; they still need mentoring; they do not have brains) demonstrate that families expect *amagqirha* to offer *abakhwetha* a safe, secure, non-threatening, warm and friendly environment. *Amagqirha* are aware of these expectations but at times it becomes difficult to achieve all or most of them because they are overwhelmed by the number of their trainees or they blame the trainee's behaviour too much. One *igqirha* states, "*Andiso sibhedlela abaguli ngengqondo bayathwasa.*" (I am not a hospital, they are not mentally disturbed, and they are here to thwasa.) There are also contradictions as some members of the families and community view *ukuthwasa* as an illness that tends to stimulate aggression that affects a person's mind and that *igqirha* has a different perception. There are

also some *amagqirha* who have a similar perception from that of the families about *ukuthwasa* as an illness.

*Abakhwetha* are expected by their families to be humble, submissive, loyal, committed and obey all the instructions of *igqirha* with respect. *Amagqirha* expect the same. This respect, however, should depend on conditions or circumstances deemed right to accord that respect and loyalty by groups, *amagqirha* and *abakhwetha*. A further complicating factor is the interpretation of the human rights granted by the Constitution on how the claim and actions to enforce respect clash with those rights. Allegations or abusive or unfair practices transcend gender boundaries. All sexes were equally blamed, even when sexual abuse was mentioned. For example, female trainers were accused of ill-treating or threatening to fail male trainees if they refused to have sexual relationships with them. The same happened to women training under male trainers. It should be stressed upfront that sexual relationships amongst trainees of the same *iphehlo* and especially those under one trainer are not permissible or encouraged unless those were initiated before the initiation. The principle is that trainees of one school are a family of brothers and sisters. That is also to avoid friction and tension in the school. That was confirmed by both trainees and trainers.

Other tensions between *abakhwetha* and *amagqirha* were created by attitudes demonstrating disrespect to one another such as drinking habits and what *amagqirha* called attitudes and behaviours of the 21<sup>st</sup> century *abakhwetha*. That refers more to the attitude of *abakhwetha* towards *amagqirha*. *Amagqirha* gave this generation nicknames such as 'chicken lagoons' and '*amaqanda ophukayo*' (fragile eggs) who are not learning anything because no harsh discipline can be applied to them. Other common statements were '*kaloku ngabakhwetha bedemokrasi kaMandela* (they are trainees of Mandela's democracy); *angeke ubenze nto kuba bane* rights (there is nothing you can do because they have rights); or *intwaso soze bayazi kuba bayachamza* (they will not know *intwaso* because they are free)'. This shows that while *amagqirha* wish to maintain a harsh and strict discipline in the training of *abakhwetha*, that it is gradually transforming from a harsh treatment to a respectful relationship. Other critical behaviours were:

- A high level of alcohol consumption: brandy, and beer in particular. All the ritual ceremonies seem to be dominated by this behaviour. They drink too much, to the extent that they even forget to perform their duties and that critically affects the integrity of *amagqirha* across the borders of South Africa (Van Binsbergen, 2003:216-220). The issue is complicated further when senior *amagqirha* drink with their *abakhwetha*. That affects disciplinary measures as it becomes difficult for seniors to

discipline their juniors. Apparently, tradition informs one that drinking, sex, stealing, and criminal behaviour (to mention a few) are totally forbidden, especially during the training period (Broster, 1981:28). Drunken incidents of *amagqirha* shouting at one another, sexual harassment and other abusive behaviours are observed, experienced and reported.

- Sexual advances and at times apparent abuse between *amagqirha* and initiates (irrespective of gender) and/or within groups. At all training schools, sexual relationships amongst the initiates are not allowed as initiates are socially oriented to view one another as family members, brothers and sisters. However, the power of love always breaks those valuable disciplinary codes. Others are lured into such relationships with promises of favours. That often happens between the trainers and students and between senior students and junior students. More so, to have sex before or during a ritual invites severe punishment and often payment of a white goat to cleanse the perpetrator. That is a sign of *umlaza* (ritual impurity). This rule applies to both *abakhwetha* and *amagqirha*.
- Hunger amongst *abakhwetha*. Many *amagqirha* are mean regarding food and their trainees suffer whilst staying with them. All three *amagqirha* trainers interviewed depended on their old-age social grants. All were generous in feeding the initiates but visitation to other schools revealed a different story. At one school (another satellite of Komanisi *iphehlo*), although *igqirha* had the means to feed her *abakhwetha*, it was apparent that she was not interested in providing for the trainees. Even pellagra was observed there.

Negligent behaviour towards the trainees sends out a strong message about the treatment of *abakhwetha* at that school. Community members there also shared information that *abakhwetha* at that school are often absconded and then admitted to the local hospital for either TB or pellagra. Yet all *abakhwetha* are charged monthly fees for their stay. That behaviour of the trainers lead to bad publicity for them and affect their role in the society, hence *amagqirha* are no longer as respected as they used to be in those communities.

This was, however, not common practice at the Komanisi *iphehlo*. *Umkhwetha* would not be charged money for food while staying with the trainer during the training period, but would be charged *inkomo* (ox – *igqirha* tuition fees) to cover the training fees at graduation. The researcher was the exception for *umkhwetha* to bring food. The fact that only some food is required may lead to unfair practice and the exploitation of some *umkhwetha*.

Abusive treatment also exists within *abakhwetha* group. Issues of envy and jealousy are more common whenever there are more than three *abakhwetha*. Zanemvula and Matogu exchanged their first trainers because of the ill-treatment they had received from their *abakhwetha* colleagues. Mandlovu stated that she had left her first trainer because he had been jealous of her and would not assist her. Those issues are critical since they lead to bad publicity for *amagqirha*, even those who are not practising them, as well as affect the integrity of the profession of *amagqirha*.

However, not all harsh talk or discipline could be seen as abusive. To maintain professional and ethical standards, disciplinary measures have to be practised at all times, but others often perceive those standards as a means of exploitation. For example, when rules are broken during a ritual, a harsh and hard talk is given. That happens even to qualified *amagqirha*. Rituals are much respected and breaking a 'small' rule or principle becomes a huge crime and it was noticed with appreciation that all *amagqirha* uphold standards. It is an expected norm and even the aggressor would acknowledge the punishment (Section 2.2, p. 61). Such self-introspection, acknowledgement and accepting discipline are all signs of maturity, a commitment to uphold professional standards and ethics and thus enhance a person's identity with her profession. It grooms a person to be identified as a professional leader as well. *Amagqirha* also identify themselves as role models in such moments. One can tell that by the expression of remorse by those who are punished and the sense of humour of those who identified the mistake or discrepancy.

The statements above on *abakhwetha* of the 21<sup>st</sup> century clearly demonstrate the transformations experienced in the training of *amagqirha* and they are all blamed on the new political era. Since 1994, after the formulation and implementation of the Constitution, people became aware of their democratic rights, including *abakhwetha*. The statements also reveal the apparent loss of control and failure to sustain disciplinary measures among *abakhwetha*, especially after 1994. It also reveals the traditional atrocities in the practice of *amagqirha*, which were reconciled by the implementation of the Constitution. The ill-treatment and abuse of *abakhwetha* have long been there but it was always taken as a normal way of treating them and now with the advent of the Constitutional and Human Rights' awareness, all social institutions are being challenged.

## **8.2 UKUTHWASA AS A PRACTICE**

The lesson learnt from the results is that *ukuthwasa* is indeed a reality and a practice that the *amaXhosa* still believe in and which has evolved through historical decades. Historically the

only role that was associated with the role of *amagqirha* was the role of witch-smelling and sorcery, hence they were called witchdoctors. Little was known about their healing role and other roles (see Chapter 1). In the 1900s many authors tried their best to bring out more about the practice of *ukuthwasa* and how it evolved. For example, authors such Soga (1931); Hammond-Tooke (1989) and Pauw (1975a) wrote about *ukuthwasa* and related the practice to *amaXhosa* culture but few authors changed the name of 'witchdoctor', which was indeed a misnomer and incorrect identity to accord to *amagqirha*. In addition, none of all these authors give an in-depth explanation or discussion on the training stages, dynamics and rituals involved in the training of *igqirha* and about identity construction as dealt with in this study.

The common factor amongst them all is that *ukuthwasa* is either seen as a psychological or mental disturbance. Others even define it as a psychiatric syndrome (Mqotsi, 1957 and Lamla, 1975), and that is why Kruger (1981) decided to apply a psychological assessment to compare *amagqirha* and psychiatric patients in order to understand a Xhosa diviner. Kruger's assessment is taking it too far. Being influenced by studies like those of Mqotsi and Lamla, who still refer to *ukuthwasa* as a neurotic syndrome, despite the fact that they are *amaXhosa*, may have left Kruger with no choice but to compare *amagqirha* with psychiatric patients. However, his results revealed that *amagqirha* could not be attributed psychiatric symptoms. The fact that afflictions or crises are part of *ukuthwasa* cannot be disputed, but at the same time they do not meet the criteria used by the DSM-IV Manual to specify them as mental disturbances or pathology. That is why those who are presenting with *ukuthwasa* characteristics when diagnosed in Western medical terms, do not respond positively to the treatment given to cure those afflictions. That is why rigorous research is still needed on how to identify and differentiate these characteristics from the pathological symptoms as well as acknowledging that *ukuthwasa* is a reality that cannot be changed.

Instead, more research has been done on the medical plant use and even with those who have recently tried to write about *ukuthwasa*, the focus is more on the role of *igqirha* and the integration of traditional healing with Western therapeutic models. These areas of research are valuable, but there is also a need to know how these practitioners are trained and what the outcomes-based competencies of their training are. In that way, a comparison can be made on a fair basis. Practices of *amagqirha* should be contextualised historically to ascertain why this practice is still continuing and why it is still accorded an inferior status. What best practices does it give to the community and in what way does it contribute negatively? What is the social status and position of the practitioners and how do they view their position and roles in comparison with related professions like nursing, social work, psychologists and medical doctors?



*Amagqirha* have been flexible to accommodate and adapt to various challenges posed by socio-economic, political and cultural changes, and their future is gradually changing, but still they are facing continuing challenges, though in different ways than before (see Section 2.1.4, p. 55). Research results in this study reveal that the practice of *ukuthwasa* is dynamic and keeps evolving from one historical phase to another. There is a strong belief amongst *amagqirha* that certain features shall not change, especially the role and value of rituals in *ukuthwasa*. In addition, the practice of *amagqirha* is based on *amaXhosa* cosmology of illness and the socio-cultural and political structure of their intervention strategies.

### 8.2.1 Socio-cultural perspective and practice

The results show that during the life cycle of *igqirha*, four rituals form an indelible part in her practice. These are: *intlombe* (séance), which is central to everything that *igqirha* does, and *ukuhlamba* (cleansing), which plays a pivotal role in all ritual ceremonies and is of crucial importance to *igqirha* herself. For example, after every death of a family member and close relative, *igqirha* has to be cleansed before participating in her healing ritual. Before performing any purification rituals, *igqirha* has to be cleansed first. Cleansing includes cutting the hair of the head and the pubic area. Purity in *ukuthwasa* is the key principle. *Ukuxhoma iingcaza* (see Section 7.1, p. 202) is another central ritual. That entails placing liquor, drink, tea, meat, tobacco and any other gifts for ancestors on *iqonga*. That is one of the most respected rituals and moments of *amagqirha*. Any mistakes performed at that stage often result in serious punishment. *Ukutshisa amathambo* (burning the bones) is another important ritual, especially during the last phase of the training (graduation) (Broster, 1981 and Hunter, 1936). These bones are taken from *umrosho* (certain selected parts in the slaughtered animal (Hunter, 1936). The bones are counted, placed in a sack and placed on top of the inside of the roof in a safe and secure manner. After some time – a minimum of six months – *amagqirha* return to make *intlombe* to burn them. They are counted again. This burning of the bones ritual is called *ukuvulela* (to open). That ritual opens a clear road for the new graduate's future prospects. The belief is that, if it is not well done, or *igqirha* envies or is jealous of the graduate, *igqirha* can use a bad omen to *vala* (shut/close or inhibit), the healing abilities of the new graduate.

There are ground rules for preparing the rituals, which can be seen as ecological, spiritual interconnections with the whole universe. To *amaXhosa* that is a strong belief; hence during the ritual performance ceremonies, *inxopo* (special grass found along the banks of the river) is often spread on the floor for the whole duration of the ritual and is often changed at times.

The connection with nature is priceless in *ukuthwasa*. Again, in all rituals, sorghum is prepared and sacrificial animals (goat sheep, ox and two chickens) are always slaughtered. In addition, *igqirha* has to *shwama* (to eat alone first before anyone else eats) the small piece from the right front leg of the animal called *umshwamo* (Hunter, 1936). This piece is cut immediately after slaughtering. That is cut and roasted in the hut where she is sitting with other *amagqirha*. The piece of meat is carried by a wooden stick, not a fork and placed on a grass tablemat. No salt is added and she eats it together with her *amakhankatha* (special nurses/attendants/chaperons). If the meat is not finished, it is shared with other *amagqirha*. That is the critical part of *isiko* (custom) and is critically observed. The environment is created to be as natural and close to nature as possible. *Umrosho* (the bigger portion from which the meat was cut) is placed near *umkhwetha* (initiate) and is cooked the following day. After the meat is cooked, she is the first to eat. She eats it with her *amakhankatha*. That is to claim the unique rights to own the sacrificed animal as hers and the blessings of the ancestors.

As clearly demonstrated by the number of the important rituals mentioned, a person can imagine how costly the process of *ukuthwasa* is. In addition, the symbolism of all these rituals is to identify the person to be unique and different from others and to link her with her *ubizo* (calling). The ritual symbolises the liminal phase or separation phase of the trainee from the rest of her family and confirms her new identity, *umkhwetha* (novice/trainee) or *igqirha*. The rituals help to define the role, status and positioning of *amagqirha* in the society.

### **8.2.2 The role of *amagqirha***

The role played by *amagqirha* in their communities is explained in Chapters 4 and 6 and Chapter 7 later on provides various practical examples of how *amagqirha* practise their healing profession. Lastly, through reflections from the historical era to the chapter on the stages of *ukuthwasa*, the researcher wants to add a role that transpired during the fieldwork, namely the role of forging biological ties with those whose identities have been disintegrated by cultural mistakes such as illegitimacy. That role is critical to ensuring that the social and biological ties of the cultural groups are not severed and children do not lose their identities because of their parents' mistakes. Their priceless role is to transmit the knowledge of *iminyanya* through generations by providing training, guidance and support to those who aspire and are called to be healers. More information on the role of *amagqirha* is discussed extensively in Mabona (2004), Mndende (2004), Hirst (2000), Broster (1981), Hirst (2005) and Mqotsi (1957).

It was also identified that *amagqirha* gain their credibility and trust from clients by being honest in their practice. During consultation sessions the integrity and credibility of *igqirha* is elevated by her accuracy in straightforwardly pinpointing the specific reason why a client sought the consultation. One client confirmed that by saying, “*Ndifuna igqirha litsho le nto ndizengayo hayi izivubeko zomzimba.*” (*Igqirha* must say what brought me to the session not ailments of the body.) This is called *ukuvumisa*, that is, an assessment beyond personal issues and which involves family and work-related challenges. In that way clients believe *amagqirha* who use an inductive way of assessment and zoom to the major challenge, rather than those who start by general bodily ailments. In addition, many clients agree that they prefer *amagqirha* to medical doctors because of the inductive approach versus the deductive approach used by medical doctors.

Most members of the public made it clear that the role played by *amagqirha* is huge, as much as there are those who are not good. The best *amagqirha* help to sustain the good name of *amagqirha*. The acknowledgement of *amagqirha* has also posed some critical problems for them. The shifting of the stigma has caused flexibility to many who aspire to be *amagqirha* to be *amagqirha* by night. For example, *amaxhwele* (herbalists) are now also claiming that their knowledge of herbs is an inborn gift. It is no longer knowledge gained or acquired by working closely with *igqirha* or *another ixhwele*. These views created heated debates amongst *amagqirha*. One herbalist in Tsolo was adamant that he had not learnt his skill of medicinal knowledge and use but had been born with it and stated that he would never train as *igqirha*. Another professor at the researcher’s institution admitted that he was *itola*, which he explained as being a self-made *igqirha*. This statement confuses issues because in the past, *amatola* (plural of *itola* – a certain type of *igqirha*) were war witchdoctors (Soga, 1931). There are no wars in the Eastern Cape and the professor works at the university; therefore the use of this name is debatable. However, his task is the production of medicinal products to manage HIV/AIDS as he is a botanist. It could be argued, therefore, that instead of calling himself *itola igqirha*, he can call himself a herbalist, since he seems to have knowledge on the medicinal use of plants. This indicates how people try and engage in a profession once it is acknowledged. In the past, a professor would not want to be known as *igqirha* or be related to *igqirha* as an educated person since that traditional healing role was seen as a thing of the illiterate (Dwane, 1998:5).

One teacher confirmed that *amagqirha* have a role to play in the community because no medical doctor can reveal the needs of ancestors to the patients. There was overwhelming consensus on the fact that there are conditions that doctors cannot cure but *amagqirha* can, and vice versa. Almost all of the 115 participants interviewed agreed on that. It can also be

accepted that the public understand that even those who aspired to be *amagqirha* had all been taken to doctors first before it was identified that the only cure was *ukuthwasa*. While *amagqirha* are able to identify physical ailments of clients without being told by clients, doctors need the information from clients. That is what attracts clients to *amagqirha*. Sometimes both doctors and *amagqirha* are used to complement each other, not that the one is better than the other, but often because of specialisation areas. There is a strong possibility that the the role of *amagqirha* in society is priceless.

### **8.2.3 Cosmology of illness and therapeutic interventions**

Western philosophy, culture, and medicine view illness as bad, something to get rid of as quickly as possible. It is seen as something invasive: a virus, bacillus, etc., are regarded as an alien process that incapacitates, paralyses and destroys the body internally. It is viewed as an unnatural state of affairs that should be suppressed by every conceivable means (Laing, 1989:79-81). On the other hand, Asian and tribal cultures view illness and suffering as processes of physical and psychic transformation (Laing, 1989:80). They perceive it as psychic and physical suffering intended to alter consciousness and as forces and mechanisms of transformation and self-healing. Death is perceived as a way of regenerating and recovering from one's earthly existence. Research on this study reveals a different perspective to that of Western thought but concurs with Asian philosophy. According to *amagqirha*, they perceive and experience *ukuthwasa* as a cultural illness that is caused by the gift imbued by ancestors upon the person who is called. Hence, *ukuthwasa* is called *ingulo* (a sickness), is treated by cultural rituals and herbs and does not respond positively to Western methods of treatment. *Amagqirha* also differentiate *ukuthwasa* practice from other cultural practices such as witchcraft and *ukuthwala* (buying foreign powers).

### **8.2.4 Witchcraft, *ukuthwala* and *ukuthwasa***

The fieldwork experience, observation and personal involvement in the divination system reveal that in the African culture disease is often attributed to both natural and supernatural forces: misfortunes, natural factors, accidents, witchcraft and the wrath of the ancestors (Mabunda, 2001 and Van Rensburg, 2004). *AmaXhosa*, like other African cultures, ascribe afflictions of the body, mind and spirit to supernatural powers, witchcraft and ancestors. These beliefs determine the kind of treatment as well as type of healer to use. When diseases are blamed upon supernatural causes, many people resort to traditional healers who are familiar with supernatural methods. *Amagqirha* are known to use a holistic model of

healing and claim to have powers to heal all diseases, using herbs as well as magical means. They, like their counterparts, provide remedial and protective medicines in their healing practices (Peltzer, 1998; Mabunda, 2001 and Van Rensburg, 2004). Medicinal plants are as safe and as effective as pharmaceutical products if taken according to the correct prescription. For that matter, even pharmaceutical products could be dangerous if the necessary precautions when taking them are not considered.

The divination system of traditional healers is complex. Central to it and inclusive in their cosmology is their mythology. There is much doubt as to whether myths are valid or not. In terms of the focus of this study, it is unwarranted to dwell on this point in depth, except to describe mythology briefly as perceived and understood by *amaXhosa*. Smart (1994:18) may be supported when he states that it is not about whether myths are true or false but rather about what is believed. In addition, Scheidemann (1981:2) warns not to regard myths as an effective system of communication but as a code for conveying shared feelings, images, memories and desires. Furthermore, the researcher concurs with Leach that myth should not be perceived in negative terms but could be viewed as a sacred tale. Leach (1980:1) further suggests that, "all stories that occur in the Bible are myths for the devout Christians whether they correspond to historical fact or not. All human societies have myths in this sense, and normally the myths to which greatest importance is attached are those which are least probable". The same can be said about *ukuthwasa*; hence those who are not involved find it difficult to comprehend the mythological or miraculous experiences in it. This attitude makes it easy to perceive *ukuthwasa* as paganism, satanic, heathenism and whatever negative label (s) people could apply to *ukuthwasa*.

Fieldwork experience, visitation to sacred places used by Basotho and a literature review confirm diverse perceptions on the cosmology of illness as well as similarities. For example, Grof & Grof (1989:80) argue that mythology, folklore, and the art of cultures are widely distributed not only across the globe, but also throughout the history of humanity. There is definitely a collective unconscious and conscious supernatural worldview shared by all of mankind. To support this view within *amaXhosa* cultural views, it became clear that amongst the Mpondo, Bhaca, Bomvane and other cultural groups, *ukuthwala* (power for health) is perceived as part of the divination system. However, in the *amaXhosa* group interviewed, the Mpondomise and Eastern Cape *amaXhosa*, *ukuthwala* is perceived as quite different from *ukuthwasa* and healing per se. *Ukuthwala* is viewed in negative terms as foreign powers brought from other Nguni cultures, including the Basotho, Venda and Shangaan cultural groups and others.

All people who need to *thwala* (acquire wealth) are understood to buy such powers as they are not inborn gifts. It is also associated with evil forces and specifically an evil snake (*ugqoloma*), which is used as a means of sustaining such wealth. Contrary to common opinion that the snake ensures wealth, *amagqirha* claimed that the snake occasionally has to be fed by human blood and therefore a member of the family is often used as sacrifice. In that way, it cannot be viewed as a part of the healing divination system. However, some *amagqirha* secretly use it for more power. *Ukuthwala* as a whole is conducted secretly and not in public as *ukuthwasa* is performed. Moreover, one inherits *ukuthwasa*, whereas a person is trained to acquire the skill of *ukuthwala* (see Woods & Lewis, 2007 and Section 2.2.4, p. 66) as revealed in the life story on the most popular herbalist who lived in the Eastern Cape, Khotso Sethunsa.

The critical issue is that the closeness of the terms *ukuthwasa*, *ukuthwala*, *ubugqi* (magic), *ubugqirha* (divination) and *ubugqwirha* (witchcraft) causes problems, as most people often use them interchangeably. Again, all these phenomena are surrounded by mythology and magic. It is not clear how a snake can provide a person with wealth as well as how sorcery in the case of witchcraft is conducted. Again, the use of animals as mediums of activity occurs in all these phenomena. For example, it was mentioned that a certain type of huge mouse as well as baboons were used to provide wealth. Therefore, in all these forms, *ukuthwasa* remains an inborn gift while *ubugqwirha* (witchcraft) and *ukuthwala* (power for wealth) are believed to be taught after birth. A child is trained to be a witch, not born as one. All can have similar characteristics: headaches, palpitations, auditory hallucinations and others. However, if those signs do not indicate *ukuthwasa*, *amagqirha* and community members reveal that they cannot be cured by *ukuthwasa* initiation, and instead they become worse. In that case, a person could become mad or die. The problems in the differentiation of these processes can be closely associated with that of linguistic issues and ignorance. Also, these terms are defined in abstract forms and cannot be evidenced in concrete forms as people would prefer.

*Amagqirha* have conflicting perceptions on whether those who are witches can *thwasa*. Nofamily (2006) and Matogu (2004) agreed that the possibility did exist and those *amagqirha* are said to *thwasa ngempundulu*.<sup>75</sup> Others totally refuted this but some of the community members confirmed it. Again, that is not a topic a person can easily talk about because of its secretive and having a social stigma attached to it. It is only when visiting Iowa in 2004 and England in 2007 that a different definition of a witch was encountered. The perception was that women who are psychic are often called witches. They are known as such to public and

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<sup>75</sup> It is an evil spirit symbolised as a snake, or bird, or even a very beautiful woman. It is believed to change its structure into anything.

can heal people. In the South African context, a witch is a bad person that uses sorcery to cause pain, injury or death and nobody claims such powers in public.

Observations and experience in working and engaging in certain rituals with *amagqirha* is that naughtiness and at times teasing happens. For example, one *igqirha* at one *intlombe* whispered privately and said, “*Ndizokhe ndimmoshe lo*” (I am going to tease this one) – referring to another *igqirha* joining the group. Within a matter of a few minutes that *igqirha* was restless, sneezing and hysterical. The other one (the teaser) was enjoying himself, laughing and said, “*Uyagula na? Hayi wethu phila.*” (Are you sick? No, get well.) All of a sudden, the hysterical *igqirha* was fine as if nothing had happened. There was silence and a quick exchange of gazes between *amagqirha* and one senior *igqirha* broke the silence to talk about something else. *Ubugqirha* (divination) appears to be a dangerous zone. Sometimes such jokes are played on *abakhwetha* who are often vulnerable and not strong enough as yet to withstand it. Sometimes those jokes turn into bad news and allegations of *abakhwetha* who became mad or died in the process are always shared.

Van Binsbergen (2003) is correct in his assessment that *amagqirha/sangomas* have many skills to manipulate the supernatural world, more than the scientists may ever know. That is why Matogu always insisted on *ukuqinisa* (to make strong) *umkhwetha* or *ikwala* (newly graduated *igqirha*). To others, such naughtiness is explained as witchcraft or sorcery. It also appeared that anything that is not according to *amaXhosa* cultural background is termed foreign and closely associated with evil spirits and/or *ukuthwala* or witchcraft. This means that anything that people do not understand is perceived in negative terms, hence *amagqirha* were once called witchdoctors.

Historical perspectives show that witch-smelling was not just a pre-colonial practice; it continued throughout history and was practised not only by *amaXhosa*, but was widely spread amongst all Nguni cultures, including Western cultures (Booth, 1992:253-275). It often carried a lawsuit if reported. However, it is debatable whether if all that was practised was indeed witchcraft. Matogu states, “*Asibazi ubuthi bufihliwe akekho onokuthi nabu.*” (We do not know witchcraft, nobody can bring it and say, here it is.) Vakele says, “*Masingathethi tu ngobuthi yinqaba yenqaba leyo.*” (Let us not talk about witchcraft; it is a mystery of mysteries.) Such statements clearly indicate that witchcraft shares the magic and mythological powers such as *ukuthwasa* and Christianity and thus it is difficult to explain it in concrete, understandable ways. It is also part of the supernatural worldview. For instance, how do Christians explain the fact that Maria conceived Jesus without sexual contact with Joseph? How did Jesus walk on the sea without falling and drowning? If responses to these

questions are not drawn from magic or myth or supernatural powers then the possibility is that it simply evolves from faith. The same applies to *ukuthwasa* and witchcraft; there are no clear-cut answers for everything. It depends more on understanding the practices and ability to differentiate between the two practices.

### **8.2.5 The role of ritualism, symbolism, and songs in *ukuthwasa***

The results show that the *amaXhosa*, like all African cultures, use ritualism as a transformative strategy in search of meaning, growth, reclaiming identity, and a dynamic of life processes. Cumes (2004:10) rightly supports this view as he explains that through rituals *igqirha/sangoma* intercedes between the living and the dead to make restitution (see Section 2.2.1, p. 61 – 2.2.2, p. 63 and Chapter 6). Rituals can also be seen as a strong connecting link that binds the broken biological ties as in illegitimacy (Masoga, 2001). Animal sacrifices are a means of ultimate atonement not only to African cultures, but also to those who believe in the Bible. In rituals are included here rites of passage, certain rituals performed during the process of training, as well as songs and cultural dancing by means of *intlombe* (séance).

Rites of passage are a category of rituals that mark the passage of a person through the life circle; from one stage to another over time; from one role or social position to another; integrating the human cultural experience with biological destiny: birth, maturity, fertility and death. They play a part in allowing a person to reflect on her 'self' and 'value'. They allow the interplay of biology and culture is at the heart of all rites of passage. The struggle between these two spheres asserts an essential paradox of our mortal heritage. According to Grof & Grof (1989), Turner (1968 & 69) and Eliade (2007), it is through these rites of passage that people are able to contemplate, to formulate and reformulate the ambivalent condition of animal and human. While Turner (1968) specifically focuses on the rites' function to transform individuals, in an article edited by Eliade (2007), Edith Turner, Meyerhoff and Camino include the calendrical rites and the relevance of the biological human aspect. Eliade stresses that biology dictates the fundamentals of one's experience; yet the ways in which one manipulates and modifies these imperatives through cultural means are endless. The training process as well as rituals in the life cycle of *igqirha* clearly define the turbulent spiritual journey, which culminates in the reconciliation of the ambivalent condition of the animal and human, unconscious and conscious, through rites of passage and ritual ceremonies to a fully integrated grown up and emotionally balanced *igqirha*.

Rites of passage represent transformative passages through which *umkhwetha* in training must pass through. They are a prerequisite to the training and if not done, have to be



performed during the earlier stages of *ukuthwasa*. The question is, is *ukuthwasa* a rite of passage? According to Arnold Genep (1960 & 1980) and Turner (1968 & 1969), rites of passage are rituals conducted to mark the transition or change of social position, place, state, age and special annual events. The rites of passage are categorised in three phases and time phases: separation, marginalisation and incorporation; pre-liminal, liminal and post-liminal. Thus, rites of passage are classified as rites of separation, rites of transition and rites of incorporation.

*Ukuthwasa*, in turn, has all these elements. However, the difference is that in *ukuthwasa* the three stages with clearly defined boundaries are part of the whole process. For example, the rites of separation involve the first stage of training to graduation. From the first stage of training *umkhwetha* is separated from the family. She is different in many respects, for example, her code of dressing, which is white and/or khaki and is beaded. The uniform affords a different status to *umkhwetha* and differentiates her from other family members. Moreover, she is excluded from her family and lives with her trainer. She also has dietary restrictions and additional variations in dress code to distinguish her level of training. She temporarily becomes absorbed into the family of the trainer and is given a new name (Chapter 5). Yet she is not totally excluded for the whole five-year training period as is the case for a rite of passage for boys undergoing circumcision. She periodically visits her home. There is no ultimate time where she is totally on her own for more than a day. However, separation allows her to learn a new routine, regulations and norms of *ukuthwasa*. She is socialised to healing and professional identities. She also identifies with her spiritual journey and fulfils the cultural needs of her ancestors.

Another way of separation is the new name that gives her a two-fold identity. The identity changes at the very beginning of the initiation stage. This can be also attributed to the 'betwixt and between' of Victor Turner (1969). *Umkhwetha* is between the families and *igqirha* and has an identity crisis. The continued separation at different levels identifies progress in her training and thus notes her transition from one status to another. It is difficult to incorporate the tripartite (separation, transition, and incorporation) stages inherent in all rites of passage in *ukuthwasa* since it is not a rite of passage with a linear direction but a ritual process incorporating cycles of rites of passage. However, the tripartite concepts can be used to explain certain stages. Moreover, *ukuthwasa* can be seen as a transformative initiation that involves a cycle (birth, maturity, incarnation, cleansing and burial) of rites of passage, and in that way may be perceived to share elements of rites of passage, since it marks the transition of a person from various transitory stages and a change of social status (Bates & Elliot, 2003). It is argued that, because *ukuthwasa* is a ritual that demands the

performance of diverse rites of passage, it carries the same quality those rites bear. It is an important channel or vehicle to transmit the knowledge system inherent in the rites that helps us to know who we are and to anticipate our becoming. As a rite has an end goal, *ukuthwasa* as a ritual has a continuous role and it never ends; it revolves beyond death itself.

Edith Turner et al. (1976) added a further stage of liminal transmission, building on Van Gennep's concept. They extended liminality from its original sense of an intermediate or marginal ritual phase to an autonomous or sometimes enduring category of people who are 'betwixt and between'. *Amagqirha* represent liminal beings, because they are out of place and are different from the public at large. With their intuitive skills they threaten the orderly conceptualisation of society. Because they are mysterious, powerful, and liminal beings as Turner suggests, they can be sources of renewal, innovation and creativity.

This is proven beyond doubt by the status of *ukuthwasa* training, which has adapted and accommodated changes from the colonial era to the present. However, there is also an anti-structure (to use Turner's concept): those outside the social norms share oneness, unity and solidarity. The evolutionary nature of *ukuthwasa* and its future, which is still gradually unfolding as Turner et al. (1976) suggests, show that historical periods can be liminal and transitional times. That is so because the past of *ukuthwasa* has changed from being perceived by the Church as a pagan or heathen practice to be considered a reality that is acknowledged and believed to be better than in the past; however, the future has not yet taken definite shape since even the new development around *ukuthwasa* is still unfolding.

The rituals in each stage therefore form part of resolving the conflict situation created by afflictions, separation anxiety, identity crisis and a continued feeling of ambiguity – the 'betwixt and between'. As *umkhwetha* resolves such situations through the reconciliation process, she becomes stronger during each stage and in that way builds new skills of adaptation and problem solving. In that way she becomes mature and aware of herself. In fact, her name of *umkhwetha* starts changing after a visit to a sacred place like a forest/river to *ikrwala*, indicating the shedding of the old self or death of the old person to a new person. The rituals performed at graduation and the symbolism of *ukuhlamba*, *ukuhlwayelela* and *umrazo* rubber stamp the emerging new person from *umkhwetha* to a healer (Chapter 5). Accordingly, the transition phase is during the various stages when *umkhwetha* has undertaken *ukuthwasa* initiation to the stage of *umgongqo* before graduation. At this stage, *umkhwetha* learns to appropriate core competencies of being *igqirha*.

The final stage is the ultimate incorporation of *ikrwala* with the family of origin. That is during the graduation stage. In fact, the identity with *igqirha* remains, as *ikrwala* becomes a child of

*igqirha* for life (a claim that is often made with pride by the trainer). Such an identity is also sealed by the continued use of the name of *ukugula* as well as a new name that the trainer gives to *ikrwala* upon graduation. To the researcher the naming process (twice) seems to give a trainer more power and authority over *umkhwetha* in addition to the rights of the family.

However, due to socio-economic issues, part of the practice seems to carry much of the financial burden. The ritual performances and dances demand the use of alcohol and it became clear during fieldwork that the buying and consumption of alcohol were becoming a huge problem. For example, one of the headmen in one village where a ritual was attended commented very critically about this. He said, “*Amagqirha funeka akhe ayiqwalasele indaba yotywala besilungu. Ngubani owayesela obutywala kobawomkhulu bethu? Alingeqhubeki mhlawumbi isiko ngaphandle kwabo? Umqombothi sikhula ibobona tywala bamakhaya ibhulanti le izizinwe xa unako ukufikelela hayi le nto siyibonayo namhlanje. Masitshintshe bahlekazi.*” (*Amagqirha* have to consider the use of brandy carefully. Who drank this liquor from amongst our ancestors? Does it mean that the ritual cannot be conducted without it? We grew up knowing that the sorghum is the liquor of our ancestors and brandy being just an additional gift from those who can manage to have it. This is not what we observe today. Let us change chiefs.)

The clapping of hands and murmurs from the audience explained support for his comments. It became clear that the consumption of alcohol by *amagqirha* who in turn become drunk and misbehave is becoming an unacceptable form of behaviour. What is clear is that the consumption of brandy by many African people today is alarming (see also Van Binsbergen, 2002:216-220). That behaviour threatens the integrity of *amagqirha* and as well the acceptance of *ukuthwasa* by those who are unemployed or cannot manage to buy alcohol. Yet the role of rituals cannot be overlooked as the ritual symbolism enshrines the *thwasa* person. After graduation, *igqirha* becomes an independent practitioner to implement and apply all core competencies and skills acquired during the first two phases.

### **8.2.6 The therapeutic value of songs and dance in *ukuthwasa***

As far as songs are concerned, they are as much a means of identity construction as they are a means of communicating *amagqirha*'s feelings, ideas and understanding of their 'self'. *Amagqirha* experience song as playing a role in stimulating their *umbilini* (intuition), relaxation and exercise. Since *umbilini* is the central skill in their divination system, songs then play a therapeutic role.

Whilst Evans-Pritchard (1937:148-182) in an early anthropological treatise argued that the Azande 'witchdoctors' eat special divinatory medicines activated by drumming, singing and dancing, Xhosa diviners do not have to activate their talent by the ingestion of any herbs. Singing and dancing is basically part of a Xhosa diviner's ordinary lifestyle. Many variations are therefore identified in how *amaXhosa amagqirha* use *intlombe* as a therapeutic tool for themselves in awakening and stimulating their *umbilini* (intuition), spiritual development and growth, and as a physical energiser to release body stress. They use it to free the body and mind, thus detoxifying *igqirha*'s body. It is not used for assessment, diagnostic, or therapeutic means unless a person's illness is geared towards *ukuthwasa* (Chapter 7).

Many differences are identified amongst the vast cultures such as the Azande diviners where music appears to be a healing, central, burning fire. According to Friedson, the Azande "dance the question" and diagnose the ills and misfortunes of those who seek their help (Friedson, 1996:xii). In the case of the Hansa of Northern Nigeria, the sounds of the *garaya* (two-stringed, plucked lute) and *buta* (gourd rattle) call the "divine horsemen" of the sacred city of Jangare to descend into the heads of Bori adepts, thus healing the very people they have made sick (Besmer, 1983). Conversely, the various *orisha* (Barber, 1981 and Bascom, 1944) and *vodu* (Herskovits, 1938) spirits off the Coast of Guinea, called by their particular drum motto, mount their horses to possess their devotees.

The resultant spirit-possession dance, though religious in nature is, in the first instance, often therapeutic for those afflicted by the same spirits. Again, spiritual affliction is healed through music and dance in Ethiopia and Sudan wherever *zar* cults occur (Boddy, 1989 and Lewis, 1971). In the Central, Southern, and parts of Equatorial Africa the *ngoma* (Jansen, 1992 and Turner, 1968) places music central to curative rites (*ngoma* means drumming, amongst many other things). In North Africa, members of the *Hamadsha* brotherhood obtain the healing power of *Baraka* by a dance of self-mutilation, which itself is a meditation on Allah (Crapanzano, 1973). At the other end of the continent, using perhaps one of the oldest forms of music and healing in Africa, Kung Bushmen dance to boil their *num*, the source of a spiritual energy that heals both the individual and the group (Katz, 1982 and Marshall, 1969).

The patients participate in dancing for therapeutic purposes, for example, in Azande trance dancing, which is a cooling therapy, for it is a means of transforming a disease into a vocation, and for healers it is the source of an energising heat that fuels the divination trance. That is undertaken through the *vimbuza* spirits. The same is practised by *amaXhosa* for the initiates and those aspiring to *ukuthwasa* as in the ritual symbolism that enshrines the *thwasa*

person. She is now an independent practitioner to implement and apply all core competencies and skills acquired in the first two phases.

However, amongst *amaXhosa* that is rarely used to heal clients but mostly by *amagqirha* for therapeutic purposes. The therapeutic value of that dance is supported by Friedson himself when expressing his personal experiences as a research participant in a *vimbuza* dance. He says, "I sat down in the chair exhausted, drenched in sweat, but feeling a calmness that I had never felt before. Dancing in *vimbuza* was an intense, cathartic experience that had left me physically and emotionally drained." (Friedson, 1996:19)

That means that the power of the songs (*ngoma*) has an influence across cultures even if a person may not understand the meaning of the song. There is a magical influence of the theme of the song on the person. As in most African religions, *intlombe* forms part of dancing prophets, singing patients and drumming spirits (Friedson, 1996). Africans are ecologically oriented, since nature and spirit form a holistic part of their ordinary daily lives, especially those who embrace traditional cultural ways of living. *lingoma* (songs) to them are not just for amusement and entertainment but also serve as storage for their wealth sacredness, mechanisms of communicating their secrets, and humour. They can also be used as a way of passing sarcastic messages, especially where there is friction between the diviners. *lingoma* can be seen as a well-crafted communication technology amongst Africans to express themselves in various ways. In the modern world they can be taped, visualised and replayed on a journey by train, bus and so forth. In that way regional and provisional sharing of *iingoma* is possible.

As much as this statement could open up debatable issues surrounding ethical and therapeutic values of certain *iingoma* played by people who may not understand them, or at places not significantly related to them, for the purpose of this study, only the themes not the words of the songs are presented. Diviners are able to express their hurt, pains and sorrows through *iingoma*. As Robins (2005:ix) claims, "*Sangoma* teachings are ... ritual access to the spirit world and are stored and transmitted in sacred songs." This explains how valuable the role of songs is in the life of an African, dominated by sacred religious lifestyles, the same as that of a diviner. She also explains that, from all-night divination sessions, music gives form to a sacred clinical reality (Robins, 2005:ix). *Ingoma* heal the wounds and pain of afflictions to *amagqirha*. *Ingoma* and *xhentsa* (song and dance) help *amagqirha* to transform into healers to heal others. As Carl Jung would agree, it heals their wounds so that they can be 'healing' wounded healers. It socialises them into knowing how to release pain, relax and be

calm in order to listen to the universe's strong magical healing powers and to visualise the clients' problems.

Friedson's (1996) argument may be underscored that throughout Africa, traditional diagnostics and therapeutic strategies are saturated with musical phenomena. It was observed that *amagqirha* requested *ingoma* and dance performance before their assessment sessions. Although it is an action not often done; when it is performed, it creates a drama where *igqirha* loses herself to the song and dance and many claim that in that state they come into contact with either their ancestors or with the clients' ancestors. Initially, *igqirha* would pretend not to enjoy the song, but as the clapping of hands intensifies along with the singing, coupled with the tinkling noise of the tin belts, *igqirha* loses herself and allows her whole body to be captured by the mythological spirit of the presence of ancestors who, in turn, take full control of her. In that ecstasy or frenzy the ancestral guides take control and let *igqirha* see visions with a soul eye and in that manner she sees beyond what a normal eye can see. That is a dangerous stage for *igqirha* as well as the audience; if she cannot exercise control she can cause chaos.

By contrast, the stage of a trance with other cultures allows *igqirha* to diagnose as she experiences it and moves into the spiritual world of those around her (Van Binsbergen, 2003; Friedman, 1986; Willis, 1999; Winkelman & Peek, 2004 and Peek, 1991). To *amaXhosa amagqirha*, *intlombe* is directed more at the therapeutic value of *igqirha* than that of a patient. However, amongst *amaXhosa igqirha* must retain all that information and reflect on it in her relaxation time. Diagnostic sessions are no longer conducted publicly in South Africa as that could be contrary to human rights' respect and protection. If that is contravened, it can lead to lawsuits. During an episode of a trance, *igqirha* may start manhandling someone and her colleagues must come to her rescue.

*Abakhwetha* are trained very early on how to control themselves during that stage, a commitment difficult to make because it happens naturally and it is not under any person's control. That happens only with practice and experience. However, amongst *amaXhosa amagqirha* that is not common practice. Sometimes *igqirha* can have an impromptu *ingoma* and follow it. That often leads to singing, usually a theme or special meaning or a message that *igqirha* links with the assessment of a client. That means that the use of songs as therapy is a common practice across cultures.

The researcher disagrees with Friedson's claims that Western music does not play any therapeutic role. As a Western-trained clinician and a psychiatric nurse, the insistence on the use of either modern or traditional music amongst patients for therapeutic reasons has been

part of the researcher's basic training and part of her practice. Dr Geri Augusto, in her work with IKSSA's project to establish a healer-centred research centre on traditional medicine at the former killing fields of Vlakplaas, called attention to some of the newer insights and practices in Western biomedicine, which has in itself begun to a better understanding of music as healing. She also mentions other important notions of music as healing and music as the carrier of social messages encoded for members of a group, from the broader African peoples' experiences, e.g. an important interview with the great South African musician Abdullah Ibrahim on his music as healing, as well as the African American gospel songs with their invocation to flee slavery for freedom. Music has a soothing and calming effect on depressed and traumatised patients.

From practical and clinical experience it is evident that people are often moved by a hymn, even though they do not understand the words. Afterwards, once they understand the meaning of the words, they have an insight into why the tune and rhythm of the song affected them (the tune and rhythm often reflect or carry the effect of the power of the words). Songs are for balancing or reconciling the energetic power in the body of *umkhwetha*, which is viewed as *ukrwada* (raw) at the beginning of the process or *upholile* (calm, matured, well controlled) as she learns how to control herself. In songs, women have time to express their feelings and, emotions and reclaim their dignity. Songs form part of constructing their self-image and to understand who they are. Others are able to identify their gifts as singers as well as poets because some songs are constructed spontaneously (Chapter 7).

### **8.3 INTERCONNECTEDNESS OF AMAGQIRHA AND FAITH-HEALERS**

The interface between traditional healing and Christianity began with the arrival of the missionaries on the African continent. In the Eastern Province it can be traced from the time of Nongqause, Ntsikana, Mgijima, Nontetha and many others (see Section 2.1.2, p. 43). Pauw (1975b) suggests that, although the *amaXhosa* repented and converted to Christianity, they never forsook their cultural values. They embraced both, although perhaps with a few transformations. For instance, others introduced transformations to the ritual performances and/or gave new names to the rites of passage. For example, *imbeleko* (a rite of birth) would be performed the day the child had to be baptised. An animal sacrifice was made but would not be named as being sacrificed to ancestors; it would be just for dinner. *Imbeleko* was even called *idinala* (dinner) since the Christians would accept that name (*ibid.*). That led to other aspects of the ritual being ignored such as smearing red ochre on the face and wearing a

bead necklace (as done at other homes). Thus, the colonial period could be seen as the era that led to numerous evolutions in *amaXhosa* cultural styles and rituals including *ukuthwasa*.

As Staugard (1986) clearly indicates, *ubuthandazeli* (faith-healing) was not the practice of *amaXhosa*. *Abathandazeli* included Basotho rituals such as *karolo* (Chapter 1) in their ritual performances and *amaXhosa* are believed to have inherited faith-healing from them. The view of the researcher is that second generations after the colonisation era may be granted the right to claim the gift of faith-healing from their grandparents who were church recruits. Because of such influences, it is common to observe some *amagqirha* integrating their *intwaso* with Christianity, as is also evident from the researcher's *ukuthwasa* journey (see Chapter 1). That also means that faith-healing and prophets are new concepts amongst the Nguni and are a product of the influence of Islam and Christianity (Comaroff & Comaroff, 1990).

Many of the participants confessed that God was the Creator; all people had different gifts from Him, and He was responsible for all creation (Genesis 1 and Ephesians 4). Faith-healing and *ukuthwasa* may be practised by the same healer. Many healers in Africa practise this interface; hence Mbiti (2000), Bediako (1995) and Buhrmann (1981) suggest that Africans share one universe; and do not categorize it into different parts. In addition these authors view traditional religions as counterparts to the Western religions and more so, Africans to be living a daily religious life. There are similarities as well as differences between both. Matogu, the researcher's trainer, advised that a healer should *thwasa* before going back to faith-healing because *ukuthwasa* is a grass-roots foundation for faith-healing. Many people who started in faith-healing have to go back to *ukuthwasa* and came back again. Some of those who started in *ukuthwasa* ended up in faith-healing and practise both. That is also revealed in the case of a woman who rejected shamanism, irrespective of her dreams and illness, and decided to be cured and healed through ceremonies and rites of the Apostolic Church. Eventually the woman began shamanic training in a dramatic event (Kalweit, 1989:92). For example, Boniswa is not a Christian and does not go to church but she lights candles at the end of each ritual ceremony she conducts to thank God and also invites His everlasting blessing, *asikelele umsebenzi owenziweyo ubeneziqhamo* (to bless the ritual performed to be fruitful). Similar concrete evidence is experienced by the *amaXhosa* as revealed by stories of all key participants in the study (Chapters 4 and 6). More debates on the interface between the two religions can be accessed from various sources (Kirwen, 1987; Pauw, 1975b and Miller, 2005).



The women dominate *ukuthwasa* initiation process (Hirst, 2005) as well as Christian faith-healing domains (Table 2-2). However, in both the status of women is lower than that of men. In fact, abuse of women often seems to be practised in churches. That was revealed during the fieldwork when women *abathandazeli* informed the researcher that as much as they are founders of their independent churches, the control and management of those churches were the duty of men. In most mainline churches, although women can now be ordained as pastors or ministers of religion, their contributions in most meetings are not supported as that of men would be. Discrimination against women may transpire in different forms: deliberate strategies to silence women as well as actions of discrimination and exclusion.

Whether women *amagqirha* attend a church or not, they have a monotheistic view of God and ancestors do not share an equal status with Him, but are just mediators between Him and the people. However, in other cultures some faith-healers view themselves as God and no longer only agents for Him. In that way there seems to be biased perceptions amongst various groups. Even those who pretend not to share beliefs on ancestors still define their misfortunes along the lines of witchcraft and when crises occur would consult with *amagqirha* or faith-healers.

Other studies offer different views about similarities and differences from different cultures between from the traditional and modern medicine. Few examples are about universalism and particularism in the beliefs of Xhosa-speaking Christians (Pauw, 1975b); Afro-Christian Religion in South Africa (Oosthuizen *et al.*, 1989), Christ in African folk theology (Schoffeleers, 1988), Dogon restudied (Van Beek, 1991) and African religion and Mormon doctrine (Thomson, 1985: 189-190). For example, mainline churches had a tendency to call independent churches *ovuke ngceni*, meaning 'churches mushrooming overnight from the grass'. Now those churches are gradually including the same activities they initially denounced. In the end, all share a common plan of action, respecting both views and collaborating between the two. In the end, *amaXhosa*, no matter whether they attend a church or not, share a belief that God is the Creator and is God for all, irrespective of gender, race, social status or career path and He recognises all His people as His own creation and image (Genesis xii:3).

#### **8.4 THE EVOLUTION OF UKUTHWASA AND FUTURE PROSPECTS OF AMAGQIRHA**

This section is not just about future prospects but also about how the image of *amagqirha* has changed after 1994. The efforts made after 1994 were to mainstream the healing

practice and *amagqirha* also seized the opportunity to transform their healing identities and social position. *Ukuthwasa* evolves from the historical suppression of its practitioners to a professional recognition by the government in the 1994. Reflections on the World Health Organization (WHO) indicate that traditional health practitioners in South Africa only began to gain recognition in the 1990s and the inclusion of traditional health practitioners in formal health-care systems was endorsed by the international community in the late 1970s. In 1978, 1989 and 1995 the WHO looked at the upgrading of *amagqirha* in various ways: promoting the development of training and research in traditional systems of medicine. The utilisation of indigenous practitioners in government-sponsored health-care systems was passed at an international conference on Primary Health Care held in Alma-Ata in 1978. A goal was set at that conference 28 years ago: to provide primary health care to all by 2000 (Pretorius, 2004:545).

In many instances, the relationship between traditional and Western health practitioners is one of co-existence rather than collaboration. The South African government has accepted the existence of institutions of traditional health practitioners; however, this acceptance manifests itself in allowing traditional health practitioners to co-exist in a pluralist health-care system rather than incorporating traditional practitioners in the official national health-care system (Pillsbury, 1982:1828). The integration of traditional and Western medicine with a view to suppress *amagqirha* again receives more interest. Yet, their Intellectual Property Rights are benefiting the academic, scientific and government sector (Alice *Amagqirha* Focus Group, 2007). It is partly such attitudes that have caused delays in finalising the processes formed in the registration of *amagqirha*. Many are reluctant; there is mistrust as the government continues to delay the formulation of clear and practical plans to benefit *amagqirha* and those in rural areas in particular.

*Amagqirha* feel marginalised by their cultural members who are educated and practise in metropolitan areas. They do so in the name of being representatives of *amagqirha* and some are apparently self-nominated. No transparency and proper feedback are apparently given to *amagqirha*. Statements such as these reveal that truth, “*Zange ndive nto ngantlanganiso*” (I never heard anything about the meeting); “*Urhulumente ufuna ukubulala intwaso yethu*” (The government wants to destroy our *intwaso*); and “*Sithengiswa ngabafundileyo nabasezidolophini.*” (We are sold out by the educated ones and those in towns). Summerton (2005:124-6) confirms that many traditional health practitioners and Western health practitioners welcomed the legislation, but the Act is viewed as progressive only if it is designed to promote and support traditional practitioners rather than to restrict and oppress them. There are still grey areas of concern in the Act, such as insufficient knowledge,

inconsistency between one stipulation of the Act and the role that practitioners believe they play in combating illness (Summerton, 2005:159-162). For example, according to the Act, traditional unregistered health practitioners will not be permitted to diagnose, treat, or prescribe any form of treatment for prescribed terminal illness such as cancer and HIV/AIDS. Anyone found guilty will face a fine or imprisonment of up to twelve months (Traditional Health Practitioners Act, 2004; Ndaki, 2004 and Matomela, 2004).

This reveals that problems not only exist on the part of the government but also regarding *amagqirha*. For example, heterogeneity and a lack of organisation among traditional health practitioners make it difficult for the government to collaborate with them, thus retarding quality enhancement in traditional health care (World Bank, 2006). Despite all the inconsistencies, some *amagqirha* revealed positive attitudes towards the new developments. In most rural areas *amagqirha* are not registered and a sense of withdrawal prevails. It is still uncertain as to what benefits *amagqirha* would receive after their long, tedious training, which carries no bursaries and/or subsidy from the government compared to the government support given to formal education. This is critical in the sense that results have revealed that if a person has to *thwasa* she has to do so and who will support those who cannot undergo the training due to financial constraints?

Through awareness campaigns organised by the researcher in the identified research sites, *amagqirha* have learnt about the transformation processes and many showed much interest and participated. Few are participating in the registration process with relevant associations. For example, in 2006 Boniswa registered with the Eastern Cape Traditional Health Practitioners' Association and was proud to have a card although she is unaware of any benefits as well as conditions for registration. Other *amagqirha* were reluctant to have any close relationships with the Association for fear of, "*Sizolahlekelwa yintwaso yethu. Kutheni sekufuneka sixelele urhulumente ngayo? Sithetha njani ngento efihlakele nexabiseke kangaka?*" (We are going to lose our *intwaso*. Why do we have to tell the government? How do we speak with such a confidential and sacred thing?), asked Nonkqubela (one of the senior *amagqirha*) with a serious look on her face and appearing concerned.

Whilst those not trained as *amagqirha* have seized the opportunity to sell herbs on the streets, some of the trained *amagqirha* both in urban and rural areas are hesitant to accept the deal with open and honest hearts. The reflections of betrayals proven by the previous historical periods where marketing relationships between blacks and whites were estranged by hidden agendas are not yet forgotten. The process continues with promising future prospects, if *amagqirha* are willing to look at various options for resolving the challenges.

In rural areas, socio-economic pressures as well as weak administrative and consultative processes continue to cause serious delays. *Amagqirha* in Tsengiwe Village reported that attending meetings in town was very expensive, as they had to take a taxi to town (18 km each way, costing R14 return). Occasionally, meetings are postponed at the last minute and are usually held during the afternoon to accommodate people who work. Zanethongo and Mamzima asked the researcher, “*lo rhulumente kutheni ngathi ngowabantu basedolophini? Sibuya ngantoni thina?*” (Why does this government seem to favour those living in town? How do we come back?) Apparently, none of *amagqirha* in this village is able to attend meetings because of the alleged ‘selfishness’ of the representative and others staying in town who are not concerned about the people in the rural areas. That again reflects the digital divide between rural and urban residents.

Other factors that tend to increase the level of mistrust and encourage lack of participation amongst *amagqirha* are:

- Lack of proper planning and of accommodating the diverse needs of the key stakeholders.
- Lack of financial support from the government to support the easy access for all stakeholders to venues where meetings are held.
- Introduction of certain fees at associations with no financial statements and/or reports to verify the need for payments.
- No benefits are accrued by *amagqirha*.
- There are no strict legal procedures set to protect the Intellectual Property Rights for *amagqirha*. *Amagqirha* make allegations that certain people (Africans and Whites), unidentifiable agents from the government, come to meetings and ask *amagqirha* to “*senze amayeza, siwabhale ukuba asetyenziswa njani, then, siwafake ekhabodini azakuthengiswa sifumane imali*” (to prepare medicine, write their prescriptions and pack them in a cupboard, they will be sold and people get money), as reported by a focus group in Ugie. Yet, no full particulars or contact details are provided by such people. They never see these people again.
- There are often no clear strategies about roles and responsibilities from the government on who is supposed to do what.

Mrs Mtyeku herself could not support any of these incidents, as she was not aware of them. It becomes clearer that as much as this era could be the most promising era for *amagqirha* to reclaim their independence, it is still one that also carries similar risk factors imposed before. History could be revealing itself in new ways of marginalisation and colonising *amagqirha* to lose what they have.

Pretorius (2004:545-555) describes the current situation of traditional healing in South Africa as that of hope to its practitioners as well as that of mixed feelings to some of the healer's counterparts. The ambiguity in the attitudes of other professionals towards *amagqirha* still provokes heated debate and a concern for the government, *amagqirha* and society. The basis of the attitudes is multi-fold and revolves around the training of the practitioners, the competence as well as efficacy of their treatment of diseases. For instance, Pretorius (2004:548), Friedson (1970:232) and Ashton (1943:14) reveal the different attitudes of the medical practitioners and other professionals towards *amagqirha*. However, some of *amagqirha* reveal that they are co-opted into certain medical treatment programmes such as HIV/AIDS training programmes, cancer programmes and others. Investigating possible solutions to this problem could be beneficial in transforming and fostering registration and legitimising the practice of *amagqirha*.

Many developments are taking place in cities. As a result *amagqirha* are flocking to cities where better benefits flourish. That is understandable because most citizens from rural areas and small towns flock to the cities with the hope of better opportunities and employment opportunities in particular. However, on arrival in the cities they encounter different experiences and are frustrated. Long queues of clients consulting with either *amagqirha* or *abathandazeli* in the cities have been observed. In rural areas more clients consult faith-healers rather than *amagqirha*. However, there is a promising future for *amagqirha* in the new Act for Traditional Health Practitioners and as well as in many documents dealing with this aspect (see Summerton, 2005 and Van Rensburg, 2004). The only weakness is that this information is not well disseminated amongst *amagqirha* and those in rural areas in particular and the Act has not yet been approved by the Constitutional Court due to reasons already mentioned in this session.

To conclude, the historical periodical review makes a simple comment that, no matter what baggage and struggles *amagqirha* still have to face, they have tried to stand firm for their healing identities. They have emerged and integrated the diverse possibilities (*amaqaba/amagqoboka*; Christianity/*ukuthwasa*) and have made drastic changes from their social identities as witchdoctors to the sought-after healing profession of

*amagqirha/izangoma*, even by the very Western world that termed it paganism and heathenism. The efforts made after 1994 were to mainstream the healing practice and also market the practice sought out by even the very Western world that termed it paganism and heathenism.

## **8.5 CONCLUDING REMARKS**

The results in this chapter show that *ukuthwasa* is an inspirational calling inspired by ancestors through dreams and visions to those they nominate to be healers. *Ubizo* (calling) in turn manifests in diverse emotional, physical, spiritual, social and behavioural illnesses or various forms of accidents or mishaps. The calling runs in families and a person with *ubizo* is to undergo a five-year *ukuthwasa* initiation training under a senior *igqirha*. The crisis experienced during the initiation teaches the initiates the value of religious and spiritual healing strategies. The healing of the initiations is two-fold. It starts before initiation in the form of rites of passage and during the initiation through a variety of rituals, symbolism, songs and dance. The fundamental reasons for that treatment are to incarnate the initiate with her family blood ties and to treat the physical, emotional, spiritual, behavioural and social aspects disturbing their lifestyles. They, in turn, learn to be healers of their families and communities.

*Umbilini* (intuition) becomes the major skill used to assess, diagnose and treat clients. The divination system is holistic and involves searching for lost property, assessment, diagnosis, treatment and cleansing of the home or workplace. That means that accepting *ubizo* is promoting good health, growth, maturity and powerful status with high wisdom to see beyond what a normal person may not see. The training has empowered *amagqirha* with the wisdom and skill to be specialists in understanding the sources of being and the ability to reflect on the African understanding of the cosmos as well as cosmology of African illness and its relationship with the universe. To some authors, the source of being is a point of contact between the profane and the sacred world (see Ngubane, 1977:86; Sundkler, 1961:114 and Fernandez, 1973:35). That view resonates with the results of this study. When certain circumstances arise that expand our awareness and our senses, it is only because the source of being forms an essential part of our nature (Erdsieck, 2003:380). This knowledge has given *amagqirha* an increased sense to know with which herbs to treat the various conditions of their clients (Chapter 5).

The training is open to both men and women, but female healers seem to dominate the training. The healing skill in most African traditions has been perceived as a female role

since women are perceived as nurturers. That makes it easy to understand why women dominate the practice. During the rituals, singing and dancing, the women were not just healed of their afflictions but they also experienced more insight about who they were. In that way, they understood their 'self' and were able to identify themselves as healers. Crises experienced during the training have transformed *amagqirha* into new persons and increased their understanding of how illness is manifested and how to manage it. They become leaders of rituals; powerful individuals with a high calibre of knowledge and wisdom, and heal the problems of their societies. They acquire the identity of wounded healers as their wounds or afflictions close up or are healed in the healing process. Their families and community members participate and witness all rituals performed and ceremonies conducted. It is the witnessing of all those ritual performances that sensitises the community to legitimate the integrity of *igqirha* and the practice. Thus, *amagqirha* acquire social identities as healers and protectors of the community. The graduation ceremony provides final closure and certifies the healing identity. In this way, afflictions have transformed into healing and a vocation to heal. *Ukuthwasa* is in turn passed on through generations by a fertilised egg of the healing woman, the nurturer, and care-giver to the nation.

Also, women have identified with their leadership role and have experienced an equal status to their male counterparts. That experience is demonstrated by role reversals during the process. However, results have revealed that that leadership role is situational and contextual in a sense that once women are outside the context of ritual leadership and back in their own households, they revert to the same patriarchal system, forcing them to be followers and subservient to their husbands.

As much as *ukuthwasa* is dynamic and transforming, there seems to be cultural elements that will never change its original value, even if the form and structure change. Therefore it will never perish. For example, the use of rituals, symbolism, rites of passage, the role of sacred places and clan praises will never change. Instead, *ukuthwasa* is penetrating the steel walls of Western philosophy, Christianity and education. Its route challenges the permeability of the rigid Western scientific structures that have previously closed its doors to any new ideas, views and knowledge based on subjective strategies and approaches that look at subjective information, as in the case of *ukuthwasa*. *Ukuthwasa* is, like other rituals, performed by other cultures for maturity reasons. Above all, results differentiated between *ukuthwasa*, *ukuthwala* and *ukuthakatha* (see also Section 2.2.4, p. 66) and also dealt with the implications of linguistic problems that we need to be aware of to be able to have a clear understanding of *ukuthwasa* and those other scenarios.

On the basis of the results, evolutionary aspects of *ukuthwasa* were revealed by the explanation of transformations taking place in *ukuthwasa*. Some of those can be associated with historical perspectives such as colonisation and apartheid systems that led to the practice of *ukuthwasa* and the status of *amagqirha* to be inferior to the extent of being marginalised. However, after 1994, *ukuthwasa* has experienced some evolutionary changes, such as the acknowledgement of *amagqirha* by the government and their inclusion in the Health Care System. There is a positive move by the government to upgrade the status of *amagqirha* though this transition is still facing numerous challenges. Another evolutionary change observed is the on-going interface between traditional healing and Christianity. That has led to the mushrooming of independent churches and a group of healers called *abathandazeli* (faith-healers), as well as healers who practise both types of healing. *Amagqirha* share common and different practice skills with other healers around the globe. Differences have led to the transfer and borrowing of the art of healing skills, methods and variations in medicinal plant use across the borders of South Africa and vice versa. In addition, other factors that have been identified to have contributed to transformational changes in *ukuthwasa* practices are the political and socio-economic status. However, some of these positive changes have brought about new challenges for *amagqirha*, which led to difficulties for others to accept *ubizo*, for example, high inflation and high unemployment rates (see Section 2.2.3, p. 65).

In conclusion, it is stated that *ukuthwasa* has broken down the pride of the Christians and educationalists who ridiculed it as *into yamaqaba* (a thing of the 'illiterate') and pagans, as it traverses through the Christian dogmas and neutralises them with the African cultural flavour. In the past, the researcher would not have stood up and said, "I am *igqirha*". She would have been regarded as insane but today she is proud as a Xhosa woman to stand in the circle of healing heroines and claim her Xhosa and healing identity bestowed upon her by her *iminyanya* with pride. *Camagu! Bantu abadala!*

## **CHAPTER 9 GENERAL CONCLUSIONS AND LIMITATIONS**

In this final chapter, general conclusions based on reflections and critical analyses of key elements in the study are provided. Comments on the productiveness of the data collected and the limitations of the study are added as well. Recommendations for possible future studies and implementation strategies are suggested.



## 9.1 GENERAL CONCLUSIONS

The complexity of the phenomenon explored in this study challenged the selection research methods appropriate for the provision of a broader and clearer insight into *ukuthwasa*. In addition, methods are selected that would bring out the voices of women *amagqirha* as practitioners and authentic owners of such knowledge. A grounded theory approach was an ideal approach for this purpose (Chapters 3 and 4). The approach also influenced the methodology and techniques applied in collecting, transcribing and analysing the data, as well as the presentation of the findings. An analysis of the data was aligned with how it was collected: observations, full participation, leading rituals, ceremonies, and the presentation of findings in a systematic and inclusive manner from the beginning of the study to the end. The use of a triangulated approach led to the collection of abundant data, which in turn allowed the selection of essential information without losing the practitioner's experiences, ideas and thoughts, which all contributed to the rich data collected in this study. The researcher's personal participation was the key aspect. At the beginning of the study time was spent struggling to strike a balance between how to distance one and when to be involved. In the end the researcher's limited knowledge on the cultural traditions of *amaXhosa* and *ukuthwasa* in particular prompted a continuation with the exploration in order to learn and gain more insight into the matter. On the other hand, the use of the life histories of the other four healers assisted the researcher in distancing herself and listening to others.

This study endeavoured to balance the exploration of the genesis of *ukuthwasa* in both the process and the structure of the process and rituals involved. Turner (1992:6) criticises the dominant paradigm of the positivism and structured functionalism to have limitations in evaluating the negotiations, conflicts, rights of redress, transitions, and limitations in the Ndembu culture as they looked primarily at the process and the structure became secondary. Turner is supported in his view of ritual and the necessity to observe both the process and structure; hence, in Part Two of this study the attention shifts towards the structure of the training process and its dynamics. *Ukuthwasa* is a ritual-laden environment and the focus should be more on how it is structured and the role of that structure and its significance and value to allow and enrich the dynamics of the processes within the structure. This study gives a broad descriptive body data before it comes to the nuances involved and how the processes relate to the structure as explained in Part Three. In addition, the structure of *ukuthwasa* was defined more in theoretical frameworks using the psycho-analytic approach, and the processes including experiences of *amagqirha*, were explained through the use of the feminist approach that allowed women to raise their voices and reclaim their freedom through narratives (Chapter 3).

The information about Komanisi group of *amagqirha* has added more insight into the fact that the territorial (geographic) and cultural (ethnic) factors differ considerably among them to an extent that strongly influence their practice in their divination systems. In addition, the differences have enhanced the different identities construed from those differences. It was important to note that the differences were not just about territorial and ethnic aspects but were also personalised by the mere fact that *ukuthwasa* is a unique gift. This uniqueness was demonstrated even within Komanisi group where *amagqirha* trainers had different practices, yet were trained together (see Chapter 4). This was more attributed to the role of *amathongo* (dreams) which set the curriculum. For instance, if a trainer were shown in a different way how to perform a certain ritual, she would follow her vision more than what she was taught by her trainer. This uniqueness and powerful role of dreams could also be seen as influential to certain transformations observed in the process and practice of *ukuthwasa*. In that way, *ukuthwasa* should be seen not as a static practice but a dynamic and evolutionary practice.

The question to be raised is whether *ukuthwasa* shall lose its cultural identity and features and be absorbed in other practices, for example, Christianity. From *amagqirha*'s experiences and beliefs, nothing will ever erase or stop *ukuthwasa* except the Creator. For instance, Zanemvula says, "*Umntu omnyama unikwe bonke ubulumko yinkosi yaye obentwaso bona akukho bani ongabuthathayo. Naba abelungu ngoku uThixo ubazise kuthi sibafundise le nto babeyigxeka. Intwaso isondele ebuThixweni.*" (An African person is given all treasures of wisdom by the Lord and that of *ukuthwasa* – no-one can take it away. God has just brought whites to us [Africans] so that we teach them about what they refuted. *Intwaso* [verb of *ukuthwasa*] is closer to God.) Zanemvula is supported in her views. There is no doubt that, whatever transformations *ukuthwasa* practice may experience, *amaXhosa* will always believe in the role played by their rituals and in that way Xhosa rituals shall always be part of *ukuthwasa*. As shown in this study, even if *amagqirha* did not go to church, they still used certain activities associated with Christian values – prayers and candle lighting in their services and integrating such activities with their traditional cultural values. As much as that does not seem to be common practice in other countries, Milingo (1984), for example, refuted his culture and was stuck in his Christian ministry. As Erdtsieck (2003) suggests, she has never encountered the existence of Christian saints within the realm of spirit healing in Tanzania, although in South Africa it is common practice (Sundkler, 1961).

During fieldwork it transpired that, for the first time in their lives, *amagqirha* were talking seriously and were being confronted by questions they had never asked themselves before. They were challenged to engage in rigorous reflections about their spiritual journeys and who

they were. It is such experiences that make the future of *ukuthwasa* more meaningful to them. At the beginning of the training trainees were all frightened and not sure what the destinations would be, but by sharing experiences so many years after graduation was like reliving their lives. The insights and wisdom gained from reflections instilled an insight into the participants own experiences, successes and challenges confronting. It was revealing that the personal narratives reflected aspects of own identities, which were more influenced by personal local construction of the personhood (Errante, 2004:430). Although there are still those who had some pains and certain challenges not resolved as yet, all participants felt happy to have had time to reflect. All found new ways of looking at how to reconcile the unfinished business of their journeys.

Oduyoye's (1995) and Hesse-Biber & Yaiser's (2004) views are supported that women can only liberate themselves when allowed to be subjects of research not just 'objects' in research. In that way they are given time to express their own feelings and ideologies and are able to conceptualize their own phenomenological existential experiences. In that way they get to know and understand themselves better. For instance, towards the end of the study, a change of attitude from the participants towards the researcher could be observed. There was more trust and revealing of personal issues than at the beginning of the research in 2003. In the end all were more pleased to have listened to the ancestors and succeeded in accomplishing their calling. The personal narratives became strengths and brought hope to the trainees who at times listened attentively during focus groups. Some confirmed their strengths because they were not aware of some of the difficulties, harsh treatment and literal abuse some went through to be where they are today. It was loyalty, humbleness, resilience and patience that pulled all of them through. In fact, all these qualities are expected from anyone who undergoes the training and practice of *ukuthwasa*.

Through narratives to future generations and written literature, it is hoped that this study will encourage *ukuthwasa* never to perish. To lose *ukuthwasa* process and practice would be to lose *amaXhosa* healer identity and cultural prestige and one of its protective and growth mechanisms. Accommodating new innovations is part and parcel of growth and development and must not be seen as end to a means but vice versa. In fact, in my view, with the advent of mainline churches, Christians and educated people joining the circles of *ukuthwasa* process mean that this practice will be more enriched, acknowledged and recognised. The historical past is gone and the time is now here for *amagqirha* to construct not only their identities but their future democracy. It is up to them to roll up their sleeves and continue the struggle to disband the atrocities of colonisation and apartheid and reclaim their socio-political rights.

Lastly, the researcher fully agrees with Blakely & Van Beek, 1985); Van Binsbergen (2003); Peek (1991) and Winkelman & Peek (2004) that *amagqirha* divination system is dynamic, because Africans shower new problems and options with fresh meaning, firmly tying emergent orders into the previous ones. *Amagqirha* have transformed their practice from the pre-colonial era. Their religion has proven to be flexible, universal, pluralistic, non-dogmatic and action-oriented, and combines ideological ambiguity with a 'bricolage' of old elements into new patterns. Such characteristics allow a basis for permutations and combinations. In essence, the variations noted in their practice indicate the evolving and dynamic nature of *ukuthwasa*. It was influenced by Western religion and gradually signs of reversal are demonstrated by the interface between traditional and Christian belief systems. There is also a transfer of skills and techniques between the mainline and independent churches.

Since mainline churches have always looked down on the independent churches, claiming that they have no order, the question is: have they now become chaotic as well? Three pastors from the respective churches stated that they had revised their 'thinking' and had realised that they were losing many members to the independent churches and, after all, mainline churches were also allowed to perform the same activities – laying on of hands and blessing water, as Jesus healed in various ways. The interface between the two institutions should be regarded as a dual or a two-way process, which should enhance strong bonds between the two, rather than enmity and competition. On the other hand, it means that *amaXhosa* will continue to perform their cultures with adaptations to accommodate their Christian demands. Consequently, tensions and competition between the two traditions should be seen as inevitable, and people should always explore ways of resolving those as they arise.

The historic events clearly show how *amagqirha* divinatory practices have evolved from the time of witch-smelling to the current age where traditional herbs or medicinal plants are integrated with Western medicine. The evidence is provided by various workshops, colloquiums, institutional niche areas and individual research done on medicinal plant use and traditional medicine in Africa (e.g. Rukangira, 1998 and Nel, 2005) and globally. It is clear that the transference of skills such as Matogu and Zanemvula's multiple skills were practised before even if not from local cultural values. However, it is clear that the introduction of imported skills by healers anywhere in the world would always be perceived in ambiguous and biased ways by the local members (Luedke & West, 2006) and may not be acceptable to others. This is not a new experience, because in life a change is a threat to others and people take time to adapt to new situations. However, the transfer of skills and the crossing of borders empower all healers and make healing possible through various

strategies. New methods and skills are learnt and healers work in mutually interdependent, (and at times independent) and constitutive acts (Luedke & West, 2006:6; Rasmussen, 2001 and Simmons, 2006). Moreover, by exchanging skills, the healers also market their products, skills, therapy and practice in other countries.

Even at the level of the local village this results in multiple options for the individual: the various missionary and African Christian groups, semi-secret societies and healing associations are created as in other cultures (Blakely & Van Beek, 1985). In that way, the borrowing and transfer of skills are possible (Rasmussen, 2001; Van Binsbergen, 2003 and Luedke & West, 2006). It has transpired from the results of this study that not only *amagqirha* are able to participate in the brokering and transfer of skills but also those who still aspire to be trained as *amagqirha*, as well as patients. People move round to seek different ways of healing and new techniques to upgrade their skills. In that way, it becomes difficult to refer to any authenticity as far as the healing processes are concerned, but to integrated team healing processes with unique cultural structures and procedures. That is why no culture can be superior to another, as all cultures seek to advance themselves by learning different techniques from others. Further, the results of this study challenges all who still have doubts and reservations on believing that African religions are about the people's reality and are a true reflection of those community belief value systems. Chinweizu's (1987:73) suggestion towards resolving African problems may be supported when he states: " Shift intellectual gear from what Europe has done to us (how colonization brainwashed us about our culture), to what we are doing to ourselves (how we undermine our own roots and identities by looking down on our culture), and to what we must do for ourselves in order to get out of our condition (how we may reclaim our own traditional cultural values, embrace them and reclaim our authentic identities).<sup>76</sup>

## **9.2 LIMITATIONS OF THE STUDY**

Some of the aspects related to this study, for example, the medicinal use of the herbs that *amagqirha* use during the training stages, as well as some of their names are not included. This is done on purpose, because herbs used during those stages are not made public in order to prevent the abuse of the initiation process by those who are not qualified to do so. This could be taken up once the practice of *amagqirha* is formalised and legalised to the extent that it will be easier to identify the entry levels or characteristics of those who aspire to be *amagqirha* without wasting time, as shown by the life histories of the trainers. The study

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<sup>76</sup> Statements in brackets are that of the researcher.

was too broad and has focused on the training, identity construction and the interface between Christianity and traditional healing. Even then special attention should be geared towards those aspects that specifically relate to women and their identities.

The linguistic issues of writing this study in English posed limitations to accurate explanations and a clear understanding. Translating certain original terminologies to English affected the cultural meaning of the terms. For example, it is questionable whether the English translation of *umbilini* as 'intuition' captures the real Xhosa meaning. Correct words for terms like *enkundleni*, *iqongqa* (Chapters 5 and 7) and other terminologies indicating various rituals during the training process are also lacking. If the study had been written in Xhosa, it would have had a significant impact on *amaXhosa*. The researcher's experiences resonates with what Mudimbe (1988:135-186) questions, namely the use of non-African languages in expressing African modalities. He questions whether the use of those languages does not distort the reality of African modalities. Therefore the intention is to translate this thesis and transform it into a book after completion of the study. Again, if the thesis had only been in Xhosa, it would not reach the broader scientific world and *ukuthwasa* would lose representation in such critical scientific dialogues. Thus, though these could be seen as limitations, on the other hand there are options that were used to accommodate them.

The other main limitation is a dearth of written historical records providing broader information on the epistemology of *ukuthwasa*. That is beyond anyone's control. There was material on traditional healing but much more about the role of traditional healers and medicinal plant use, as shown in the main text. A few studies were on the training of *amagqirha* but the approach differed from the African approach and the inclusion of practitioners' voices as presented in this study. This strengthens the belief that more descriptive information had to be obtained from the practitioners than from available literature. At times some of the literature was based more on the researcher's biased understanding as some even perceived *ukuthwasa* as a neurotic syndrome. None of the available literature describes *amaXhosa* training stages of *ukuthwasa* and how the identities are constructed as comprehensively as this study has tried. Therefore this study could be seen as one of those that tried to provide insight to the phenomenon of *ukuthwasa*, which is not well comprehended as yet.

It should be noted that this study does not include all Xhosa *amagqirha* in the Eastern Cape, as only one training school was used – Komanisi *iphehlo*; however, many *amagqirha* and various healers from other cultures and countries participated in the interviews and results show that there are more similarities than differences between *amagqirha* groups in this

province. This means that the basic concept of *ukuthwasa* and the process followed are similar with variations in terminology and procedure followed in certain ritual performances. About 40% of the participants were from other schools of training. Thus, the findings provide a broader picture on the training of women *amaXhosa amagqirha* in the province.

Lastly, the recording of this study is a valuable contribution to *amagqirha* of Komanisi *iphehlo* and to *amaXhosa*, as no study has explored so deeply in the training of *amagqirha* and construction of their multifaceted identities before. The issue of the dearth of records on *ukuthwasa* and that of *amaXhosa* in particular has been greatly improved by this study. Individual biographic monographs to be recorded later should add more value to the recorded information and transmission of information to future generations.

It is also important to note that results reveal that, to study *amagqirha* in their unique schools is the correct procedure to follow, because trying to group *amagqirha* under one sector misrepresents the variety of skills in the diverse practices of *amagqirha* and affect their unique identities. This does not underestimate the elements that are common amongst them all, but it is the differences that need to be acknowledged, since they form part of their different identities.

Studying an oral tradition of which the information is often lost is always a challenge. In consequence, one had to rely on the life histories and narratives from the practitioners of traditional healing as well as those of the community members as recipients and legitimates of those services. In fact, that approach did not resolve all the complications of oral tradition as *amagqirha* could not explain the reasons for certain rituals, because they had never discussed them with their previous seniors. That supports the fact that most of the rich, African tradition and belief systems and values are lost through death. A similar attitude from the participants could be observed. For example, one of the participants stated that she was still debating who of her trainees should be entrusted with some secrets on *ukuthwasa*. If she dies before she has identified a trusted (as she says) trainee, then the information is lost. The dearth of written documents on the original history and origins of *ukuthwasa* has influenced the methodology of this study. Consequently, this study has tried to improve the recording and storage of traditional knowledge.

The study also explored faith-healing by using a case study to follow processes involved in faith-healing. That was a way of delimiting the study, since an exploration on faith-healing would have been a full thesis on its own and much ground has been explored on the interface between the two. Mandlovu's story; Boniswa's inclusion of certain parts of Christian activities in her divination practice; as well the researcher's spiritual journey and *ukuthwasa*

initiation were used as ways to reveal the interface between the two religions. There is prolific research on that aspect, to such an extent that some research results advocate the need to acknowledge the existence of the interface between the two religions and the fact that Africans see the universe as one (Mudimbe, 1988). All that is needed now is to acknowledge and respect people's religious beliefs as they are. That challenges the positive use of research methodologies and approaches such as narratives or stories and allowing personal phenomenological narratives to be able to get to the fundamental understanding of existential hermeneutic life experiences. The methodology supported what Mudimbe suggests as the best strategy to resolve the long-standing debate of the interface between the two religions. He advocates that research should consider the condition of the existence of African *gnosis* and of its best sign, anthropology, as both a challenge and a promise. Perhaps the *gnosis* will make sense if seen as a result of two processes: first, a permanent re-evaluation of the limits of anthropology's knowledge in order to transform it into more credible *anthropou-logos*, that is a discourse on a human being; and second, an examination of its own historicity (Mudimbe, 1988:186).

Notwithstanding the mentioned limitations, the study has provided a good foundation to continue with the critical evaluation of the training of *amagqirha* and the process followed towards formalising their training and/or integrating it into similar formalised training processes in the healing professions.



## CHAPTER 10 RECOMMENDATIONS AND A LAST WORD

In this chapter various recommendations for future research studies are made. Such recommendations are based on the findings of this study. In addition, a final word based on the researcher's own experiences through the spiritual journey she undertook as well as her full participation as both a healer and a researcher in this study are also added.

### 10.1 RECOMMENDATIONS

Western scientists are still hesitant to give traditional religion the equal status it deserves, and continue to look down on the traditional methods of healing and *ukuthwasa* as a reality. The findings are based on the research results of recommendations that were made as far back as the 18<sup>th</sup> century, suggesting the integration of the two systems should be seriously considered as an urgent matter, for example, those of psychoanalysts like Carl Jung (1990) (see Section 3.1.3, p. 80), Torrey (1972), Staugard (1986) and many others. Results of the recent documents are also overlooked, perhaps on purpose, as one can no longer attribute any lack of knowledge to ignorance. It may be viewed simply as resistance on the part of the government and relevant structures.

Abundant material could be found relating to medicinal plant and it is evident that researchers are mostly interested in this aspect, perhaps because the focus is more on curative than preventative and rehabilitation services. More research and dialogues in scientific realms are needed on the nature of spiritual powers and the successes and weaknesses of this knowledge. Adogbo (2005) is supported in his view that researchers should try and change their methods of research about these phenomenological issues such as *ukuthwasa*. He comes up with a macro-theory he suggests could be used by those interested in exploring religious beliefs or value systems of other cultures (read more in Adogbo, 2005:81-82). He suggests that research could concentrate more on an integrative approach methodology which includes various aspects as: 1) A thematic approach which focuses on the concepts held by that particular ethnic group on spirits, spirits being and spirit forces, rituals and ritual symbolism; 2) A descriptive approach which gives an exposition of the spirit being, noting inter alia their names, concepts, etc., with all those being discussed within the context of the people's cosmologies and practices; 3) A historical contextualisation of symbolic forms noting its evolution or transformation over years; and finally 4) Research to focus on beliefs and practices of the people with a view to establishing a general religious character as expression of sacred realities or otherwise. His suggestions are based on

weaknesses already based on previous findings and what Mbiti (2000) had earlier on advocated that generalisations cannot be applied to all the different African peoples as certain concepts differ from one culture to another. This study attempts a similar approach by using the life histories and using the personal narratives of the practitioners themselves so that they can unveil the reality of *ukuthwasa* as is practised by them.

In addition, the full integration of traditional health care is overdue. The government has not done enough to monitor the progress and the preparation of *amagqirha* for the new status. For instance, there was no proper consultation when the Bill of Traditional Health Care Practitioners was formulated (Mabaco, 2007) as also confirmed by participants in the field. Moreover, a Bill or Act that is written in English when, as a matter of fact, most of the *amagqirha* are not well educated and cannot read and understand the Bill, will not really help *amagqirha*, would it? *Amagqirha* in this study complained that men are at the forefront of this change and yet this practice is dominated by women. It should be considered that women *amagqirha* lead this transformation. They need not reinvent the wheel but have to engage in rigorous campaigns. They should reclaim their own liberation and take responsibility to make sure they receive it.

*Amagqirha* in this study verbalised their needs from the government such as:

- Being subsidised for in-patients, like all other health-care organisations that the government subsidises. The government should encourage wellness centres in the communities to allow a group of *amagqirha* to treat their patients there and provide those centres with the necessary infrastructure.
- To get partnerships with their counterparts. It is hoped that the government will enforce partnerships between Western-trained psychotherapists and *amagqirha*, as both types of practitioners may learn from each other. *Amagqirha* do refer to psychotherapists but the latter are still reluctant to do the same; yet they fail to understand manifestations of certain illnesses beyond their control, causing patients to die who could have been saved by a traditional healer.
- *Amagqirha* need subsidies for their training. More research should also concentrate on strategies to formalise the training of *amagqirha* and work out a curriculum according to the requirements of the Higher Education Act. Thus, the training could be accredited by the South African Qualifications Association and National Qualification Forum. In that way, the professional registration of *amagqirha* can be

acceptable to their Western-trained counterparts, even if *amagqirha* could practise at the same level with them.

*Amagqirha* themselves need to consider the following challenges:

- They need to change their negative behaviour, such as indulging in alcohol, since that lowers their integrity and causes bad publicity.
- They have to consider creating a welcoming and non-threatening training model for their trainees and avoid abusive and harsh treatments. In the end, harsh treatment does not make a good *igqirha*; it is the gift and skill of the trainee, proper mentoring and support from *igqirha* and family that make a good *igqirha*.
- *Amagqirha* are to consider their fees as well as changing their structure in the training to accommodate even the poorest of them all. In that way all those who aspire to be *amagqirha* but have no means to do so could also benefit from the training.
- Senior *amagqirha* should learn to share their wisdom with their trainees to avoid any further losses of rich information about the ritual of *ukuthwasa*.

This study should stimulate more scientific debates around *ukuthwasa* on those aspects excluded in this study, as well as those questions that arose in the field and were not addressed. For example, in-depth descriptions of various rituals and rites of passage such as *intonjane* and *imfukamo* (see Section 2.2.2, p. 63) have to be explained in detail, because of the role they play in *ukuthwasa*.

Other suggestions relating to policy issues are:

The government could support the formalisation of the training of *amagqirha* and provide subsidies to build training schools and colleges for *amagqirha* training institutes.

- The government should encourage and support the integration between the schools of medicines and traditional training schools. These could be called comprehensive medical institutes in metropolitan areas and rural areas.
- The government should form committees that are financed to compile a combined curriculum at different levels for *amagqirha*. *Amagqirha* are to participate from the planning stage, including *amagqirha* from rural areas.

- Community Wellness Comprehensive Centres should be opened and the National Research Foundation, together with the Department of Science and Technology, should provide financial, social, and academic support for their sustainability. In such centres *amagqirha* should form a major component of multi-service health-care delivery in collaboration with Western-trained psychotherapists and caregivers: medical doctors, psychologists, nurses, social workers, and other professions.
- *Intwaso* is real and *ukuthwasa* should be accorded the respect it needs by all.
- The South African Government is to complete the legal processes of formalising and controlling the practice of *amagqirha*. This will change the social and professional status of *amagqirha* and would promote the protection of *amagqirha*'s Intellectual Property Rights, which are grossly neglected, a topic that still needs a radical approach to change the current status quo.
- Aggressive strategies to pilot programmes at Institutions of Higher Learning and hospitals where traditional healing strategies are integrated with Western methods of healing. The move made by the KwaZulu-Natal University in the Department of Student Affairs may be supported, as they have kick-started the programme and have employed a *sangoma* in the unit. As this is a pilot strategy, results of its monitored stage should provide a learning curve for other institutions to follow that brave example.
- The Department of Health should form partnerships with the Department of Statistics in South Africa and they should keep a proper, updated database on the statistics and qualifications of *amagqirha* and their specialties at regional, provincial and national level.
- Further research still has to be done on various rites of passage and rituals not explored by this study. Rites of passage help one to know who one is and to anticipate one's becoming oneself – who one is must therefore be explored in depth.
- To involve *amagqirha* in small-scale projects directed towards the preservation and storage of information on *intwaso*, preservation and cultivation of medicinal plants. Some of these have started but only in cities, not in rural areas

## 10.2 THE LAST WORD

This research has been influenced by the study of Doctor Erdtsieck amongst the Tanzanian spirit healers (see Section 1.5, p. 24) and her general conclusions are:

*No matter what science does to prove the existence or non-existence of the spirits, one thing is undeniable, namely that for many people across the nations and cultures iminyanya (ancestors) are a reality that must be reckoned with, whether it is clear, blurred, or confused reality. The belief in ancestors and the nature of spiritual powers, demands and deserves academic attention because it is not a means to safeguard the knowledge of traditional medicine and healing, it is also a means to enhance the cross of boundaries between the conscious and the unconscious, the living and the dead, the present and the past, the old and the new and the known and the unknown. Ignoring these healers is to ignore their cultural identities.* (Erdtsieck, 2003:386).

Dr Erdtsieck's conclusion concurs with Mbiti's (1981:25) words of wisdom that, "No matter what science does to prove the existence or non-existence of the spirits, one thing is undeniable, namely that for many people the spirits are a reality and a reality that must be reckoned with, whether it is clear, blurred, or confused reality". Most researchers have a tendency to think that all Africans have the same beliefs and values. There is a great difference in perceiving one thing as the 'same' and being 'similar'. No matter how vague or unimportant the differences can be in the eyes of the researcher, to the owners of those beliefs/values differences cause a huge and critical distortion to the meaning and interpretation they have on their values. Researchers need to be very sensitive or cautious when applying certain concepts and meanings or interpretations to individual people or regions. For example, the simple issue of referring to *iminyanya* as spirits to *amaXhosa* is demeaning to their culture, as explained in this study; for instance, for some *amagqirha* to be called *sangoma* is a sign of disrespect because the meaning attached to *isangoma* carries a lot of differences as to how the two are trained. To an outsider such differences could be perceived as just petty nuisances.

*Ukuthwasa* is not a socially recognised way of escape from an impossible situation in a family as Mqotsi (1957:185) suggests; it is not a ritual to gain prestige and a profession of technicians as Mqotsi (*ibid.*:190) declares. It is not possible that Mohammed's spiritual power and influence would outlaw Xhosa beliefs. There is also no need for the Westernisation of

Africans as Mqotsi (*ibid.*:194) suggests; all what is needed is acknowledgement, understanding and respect from all believers and non-believers that *ukuthwasa*, as demonstrated by the life histories and narratives of *amagqirha* in this study, is an inborn gift. Nothing will ever change that. Hence Van Binsbergen (2003:183) claims, "For I am under no obligation whatsoever to treat my *sangoma* expertise as a secret."

Growth in *ukuthwasa* is perceived as a new beginning that gives a new understanding of who a person is. When the researcher looks back into her past, at the existential experiences of the webs and ebbs of all crises and marriage problems she has experienced due to *intwaso*, It is difficult to admit to the mistakes of the Western culture that ridiculed the researcher's self (as in the Xhosa culture), and made her a different person (educated and Christian) to the extent of losing her ethnic identity as Xhosa woman. However, having gone through this journey has opened the researcher's eyes and her Xhosa culture is now perceived as a rich culture, full of wisdom, which injected new life, hope, strength after strength and vision. Exposure to and participation in this study has expanded horizons of growth beyond personal growth, both cognitively and spiritually. Much was also learnt about the rich information on various cultures and the researcher looks forward to drink from the waters of those abundant immortal spiritual information and experiences out there, waiting to quench her spiritual and cognitive curiosity. Kelly's (1996:39) views are underwritten when he says, "for any bold venture into human understanding leaves the wreckage of sacred ideas in its wake."

In conclusion, the confusion created in my personal life come to fruition I returned to where I started (faith-healing). In September 2006, I founded a Church to fulfil the prophecy made by *tata* Mtini and Siyobi in 1996 as well as my own dream on 17 May 2001 (see Preface and Chapter 4). The move signifies Matogu's prophecy and the late Bishop Dwane's vision that I have to nurture God's Creation using both the traditional and Christian skills. I feel a complete, well-balanced and actualised person.

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**See other interviewees,** dates and places where interviews took place in **Addendum B**.

## LIST OF ADDENDUMS

CO-ORDINATING COMMITTEE FOR  
TRADITIONAL HEALTH PARCTITIONERS  
OF SOUTH AFRICA

Name : Nomfundo Lily-Rose  
Mlisa

Branch: Nkonkobe

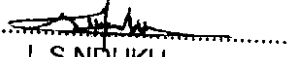
Reg. No. EC 10092

"Unity is Strength and Power"



CO-ORDINATING COMMITTEE FOR  
TRADITIONAL HEALTH PARCTITIONERS  
OF SOUTH AFRICA

This certifies that the name of  
Nomfundo Lily-Rose Mlisa 5202220699083  
appears in the register for the Health Practitioners  
of S.A., with effect from 29/03/2005

  
L.S. NDUKU  
General Secretary

**Addendum B List of participants and interviews**

<b>Name</b>	<b>Date of interview</b>	<b>Place</b>	<b>Age at initiation</b>	<b>Age at graduation</b>	<b>Current status</b>
1. Matogu	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Tsolo/ Kayelitsha	12 yrs	22 yrs	Rest in peace – 12/12/04
2. Zanemvula	27/04/2000; 03/04/05; 03/10/05; 11-13 November 05	Ugie	25 yrs	35 yrs	Igqirha and Dutch Reformed Church (DRC) member
3. Boniswa	03/05/04; 02/06/04; 6/07/04; 03/03/05/07/11/06; 13/09/07	Tsolo	19 yrs	30 yrs	Igqirha. Does not attend church but uses candles and prayer in rituals
4. Mandlovu	27/07/03; 01/11/2004; 03-04/02/07; 31/01/08; 03/02/08.	Alice	21 yrs	30 yrs	Umthandazeli/faith healer St Johns' Apostolic Church
5. Nonkqubela	02/06/04; 6/07/04; 03/03/05/07/11/06; 13/09/07	Tsolo	40 yrs	47 yrs	Igqirha
6. Nojkeleza	6/07/04; 03/03/05/07/11/06; 13/09/07	Tsolo	32 yrs	40 yrs	Igqirha
7. Cingolendaba	6/07/04; 03/03/05/07/11/06; 13/09/07	Tsolo	31 yrs	50 yrs	Igqirha – graduated July 2008
8. Vezikude	6/07/04; 03/03/05/07/11/06; 13/09/07	Maclear / Tsolo	21 yrs	32 yrs	Igqirha
9. Nomfundiso	10/03/03; 13/09/1999; 27/04/2000	Ugie/Tsolo	25 yrs	35 yrs	Igqirha
10. Mabhengu	10/03/03; 13/09/1999; 27/04/2000	Tsolo	22 yrs	30 yrs	Igqirha
11. Mamvulane	27/04/2000; 03/04/05; 03/10/05	Ugie	n/a	n/a	Community member
12. Nombulelo	03/02/2006	Tsengiwe	26 yrs	35 yrs	Igqirha
13. Nomfundo.	18/02/2000	Alice	21 yrs	n/a	Umkhwetha
15. Nomapha	03/02/2006	Tsengiwe	n/a	n/a	Community member/church
16. Noziphiwo	03/02/2006	Tsengiwe	n/a	n/a	Rev Presbyterian Church
17. Nomfundiso	18/02/2005	Alice	19 yrs	n/a	Umkhwetha
18. Nozihlwele	18/02/2005	Alice	36 yrs	n/a	Umkhwetha
19. Mama Duma	12/08/2006	Port Elizabeth	n/a	n/a	Leader Women Manyano United Methodist Church



20. Mamzima	27/04/200;12/06/2004; 12/09/2007	Tsengiwe	24 yrs	34 yrs	<i>Igqirha</i> /DRC member
21. Matisa	27/04/200;12/06/2004; 12/09/2007	Tsengiwe	22 yrs	n/a	<i>Umkhwetha</i>
22. Mzwamadoda	27/04/200;12/06/2004/15/09/2005	Tsengiwe	25 yrs	36 yrs	<i>Igqirha</i> – Rest in Peace – 2006
23. Zinkosini	10/03/03; 13/09/1999; 27/04/2000	Tsolo	n/a	n/a	Matogu family member – Rest in Peace – June 2004.
24. Anele	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Tsolo	26 yrs	39 yrs	<i>Igqirha</i>
25. Nokulunga	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Tsolo	23 yrs	n/a	<i>Umkhwetha</i>
26. Nozibele	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Tsolo	21 yrs	n/a	<i>Umkhwetha</i>
27. Zihlwele	02/06/04; 6/07/04; 03/03/05;07/11/06; 13/09/07	Tsolo	32 yrs	43 yrs	<i>Igqirha</i>
28. Mandaveyisi	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Tsolo	n/a	n/a	Matogu family member
29. Hlabumhlola	10/03/03; 13/09/1999; 27/04/2000; 03/06/04;	Baziya	18 yrs	29 yrs	<i>Igqirha</i> – Rest in Peace – March 2004.
30. Bishop Dwane:Order of Ethiopia	27/03/2000; 13/02/2005;	Alice	n/a	n/a	Rest In Peace – July 2007.
31. Rev Koni	27/04/2000	Tsengiwe	n/a	n/a	Rev Order of Ethiopia
32. Mr Macholi	27/04/2000	Tsengiwe	n/a	n/a	Member Order of Ethiopia
33. Rev Dr Panduva	27/03/2003; 04/02/2007	Alice	32 yrs	35 yrs	Rev St John's Apostolic Church/ <i>Umthandazeli</i>
34. Bella	02/08/2004; 10/03/2005; 24/08/2006	Evaton	27 yrs	29 yrs	Rev St John's Apostolic Church- <i>Umthandazeli</i>
35. Madlomo	27/04/200;12/06/2004; 12/09/2007	Tsengiwe	n/a	n/a	Family member of an <i>igqirha</i>
36. Mamaya	27/04/200;12/06/2004; 12/09/2007	Tsengiwe	30 yrs	42 yrs	<i>Igqirha</i>

37 Zola	23/05/2003; 05/07/2003	King Williamston	28 yrs	36 yrs	<i>Igqirha</i> /teacher
38. Hoyana	27/03/2003; 04/02/2007	Alice	30 yrs		<i>Umkhwetha</i>
39. Mrs Mtyeku	10/02/2000; 15/03/2005	Bisho	36 yrs	51 yrs	<i>Igqirha</i> /Dept. of Health, Bisho
40. Mr Dweba	10/02/2000	Bisho	n/a	n/a	Coordinator: Traditional Healers Association, Bisho
41. Rev September	27/03/2003; 04/02/2007	Alice	n/a	n/a	Rev African Independent Church
42. <i>tata</i> Siyobi	05/01/1998; 22/05/2005; 14/09/2007	Queenstown	39 yrs	42 yrs	Rev St John's Apostolic Church
43. Zanethongo	23/02/2003; 16/02/2004; 25/05/2004; 17/09/2007	Tsengiwe	45 yrs	61 yrs	<i>Igqirha</i> , pensioned; teacher/elderly Methodist Church
44. Mabhengu	23/06/2006	Maclear	20 yrs	38 yrs	<i>Igqirha</i>
45. Ntombizodwa	10/03/03; 13/09/1999	Ugie	28 yrs	n/a	<i>Umkhwetha</i>
46. Thobani	10/03/03; 13/09/1999; /04/2000; 03/06/04;	Tsolo	22 yrs	35 yrs	Rest in Peace – 2006 (2 years after graduating as an <i>igqirha</i> ).
47. Zukiswa	10/02/06; 23/06/2006	Alice	n/a	n/a	Social worker/family member of an <i>igqirha</i>
48. Nozanemvula	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>Umkhwetha</i>
49. Flora	10/02/06; 23/06/2006	Tsengiwe	n/a	n/a	Family Member of an <i>igqirha</i>
50.. Madlomo	22/02/2003; 24/06/2004	Tsengiwe	n/a	n/a	Family member of an <i>igqirha</i>
51. Nonkuthalo	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>igqirha</i>
52. Mamthembu	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>umkhwetha</i>
53. Matshonyane	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>igqirha</i>
54. Nomathongo	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>umkhwetha</i>
55. Nondiza	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>igqirha</i>
57. Nondabalithongo	10/02/06; 23/06/2006	Alice	n/a	n/a	
58. Nontsikelelo	10/02/06; 23/06/2006	Alice	n/a	n/a	
59. Nomagqirha	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>umkhwetha</i>
60. Ndabaziyalingana	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>igqirha</i>

61. Khathazile	10/02/06; 23/06/2006	Alice	n/a	n/a	
62. Cengindawo	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>igqirha</i>
63. zanemvula	10/02/06; 23/06/2006	Alice	n/a	n/a	Herbalist
64. Nonkuthazo	10/02/06; 23/06/2006	Alice	n/a	n/a	<i>umkhwetha</i>
65. Valerie	2003/11/04;	Iowa	n/a	n/a	Alternative healer
66. Frank	2003/11/04;	Iowa	n/a	n/a	Alternative healer
67. Joanne	2003/11/04;	Iowa	n/a	n/a	Alternative healer
68. Thongolakhe	2002/06/04;	Tsolo	30yrs	33yrs	<i>Igqirha</i>
69. Rev Mbetsu	2008/01/07;	Alice	n/a	n/a	Rev St John's Apostolic Faith Mission
70. mamaMbetsu	2007/01/18;	Alice	32yrs	35yrs	<i>Umthandazeli</i> – St John's Apostolic Faith Mission
71. Monica	13/02/2008;25 -30/08/2008	Picksburg	30yrs	34yrs	<i>Igqirha and mthandazeli</i>
72. Bathobele	2002/06/04;	Tsolo	29yrs	n/a	<i>Umkhwetha</i>
73. Nomfuneko	2002/06/04;	Tsolo	48 yrs	n/a	<i>Umkhwetha</i>
74. Nozanezihlwele	2002/06/04;	Tsolo	32 YRS	n/a	<i>Umkhwetha</i>
75. Daniso	2002/06/04;	Tsolo	38yrs	46yrs	<i>Igqirha</i>
76. Noluvoto	2002/06/04;	Tsolo	28yrs	38yrs	<i>Igqirha</i>
77. Eric	2002/06/04;	Tsolo	n/a	n/a	Not an <i>igqirha</i> or herbalist but <i>umzami</i> (a person who tries).
78. Klaas	13/09/2006; 12/02/2007	Pretoria	n/a	n/a	IKKSA
79. Dr W Serote	08/03/2007	Johannesburg	Did not ask	Not asked (10 months' training)	CEO Freedom Park Trust; is a <i>sangoma</i>
80. Bapethuxolo	2002/09/07;	Tsengiwe	n/a	n/a	Family member of an <i>igqirha</i>
81. Malusi	2002/09/07;	Tsengiwe	n/a	n/a	Family member of an <i>igqirha</i>
82. Thobeka	2004/02/07;	Alice	n/a	n/a	Daughter of <i>umthandazeli</i>

83. Focus Group of St John's Apostolic Church women (8)	04/02/2007;	Alice	n/a	n/a	Members of the Women's Manyano
84. Focus group of United Methodist Church (9)	06/06/2007	Fort Beaufort	n/a	n/a	Members of the Women's Manyano.
85. Cleophas	16/02/2005; 18/11/2006	Zimbabwe	Not asked	Not asked	Secretary Mbare Retail Market (ZINATHA).
86. Wonder	16/02/2005; 18/11/2006	Zimbabwe	n/a	n/a	Secretary Mbare – Harare, ZINATHA , Herbalist
87. James	16/02/2005; 18/11/2006	Zimbabwe	n/a	n/a	Traditional healer
88. Tambaya	16/02/2005; 18/11/2006	Zimbabwe	n/a	n/a	Secretary for the ZINATHA Administration
89. Prof Chavunduka	16/02/2005; 17&18/11/2006	Zimbabwe	n/a	n/a	Founder and ? Life President ZINATHA
90. Ndumiso	16/02/2005; 18/11/2006	Zimbabwe	n/a	n/a	Gatekeeper and family friend who introduced me to Prof Chavunduka
91. Dr Mlilo	18/11/2006	Zimbabwe	Not asked	Not asked	Healer
92. Leticia	18/11/2006	Zimbabwe	Not asked	Not asked	Healer
93. Gloria	18/11/2006	Zimbabwe	Not asked	Not asked	healer
94. John	18/11/2006	Zimbabwe	Not asked	Not asked	healer
95. Bavulele (white)	23/08/2004; 13/05/2005; 19/04/2006	Alice & East London	39yrs	n/a	Fell away at the first stage – <i>ukungqawa</i>
96. Dr Hirst	03/07/2007	King Williams Town	n/a	n/a	Manager Amathole Museum. Close associate of a well-known <i>igqirha</i> in Grahamstown
97. Nolist	23/08/2004; 13/05/2005; 19/04/2006	Ncembu/Tsolo	25 yrs	40yrs	<i>Igqirha</i>
98. Vuyisile	23/08/2004; 13/05/2005; 19/04/2006	Ncembu/Tsolo	36yrs	n/a	<i>umkhwetha</i>
99. Pindile	30/09/2003	melani/Alice		Not asked	<i>Igqirha</i>
100. Mrs Booi	30/09/2003	Melani/Alice		not asked	parent of an <i>igqirha</i>
101. Nolinethi	2003/01/10;	melani/Alice		Not asked	<i>umkhwetha</i>
102. Notozamile	2003/03/10;	Mac Fairlane/Alice		not asked	<i>umkhwetha</i>

103. Nofezile	31/10/03	Mac Fairlane/Alice		Not asked	<i>umkhwetha</i>
104. Nonkuthalo	2003/11/10;	Lower Gqumashe/Alice		Not asked	<i>igqirha</i>
105. Nomagqirha	18/10/03 and 25/10/03	Lower Gqumashe/Alice		Not asked	<i>umkhwetha</i>
107. Notiti	27/07/03	Ngqele/Alice		Not asked	<i>igqirha</i>
108. Nozihlewele	27/07/03	Ngqele/Alice		Not asked	<i>umkhwetha</i>
109. Nokwandiso	18/10/03	Caku-Caku-Alice		Not asked	<i>umkhwetha</i>
110. Nomfundo	18/10/03	Caku-Caku-Alice		Not asked	<i>umkhwetha</i>
111. Rev. Ntozini	27/07/03 and 04/02/07	Ntselamanzi/Alice		Not Asked	St. John's Apostolic Church
111. John	10/11/04; 15/11/04; 22/11/04; 1/12/04	Iowa State University		not asked	newly initiated healer
112. Nofamily	18/06/06 and 11/11/06	Port Elizabeth	34yrs	35 yrs	<i>igqirha</i>
113. Mr Kubukeli	2004/03/06;	Cape Town	n/a	n/a	<i>igqirha</i>
114. Mandaba	17/10/06	Bizana	n/a	n/a	<i>igqirha</i>
115. Khumalo	13/02/08	Badimong Valley	n/a	n/a	<i>psychologist</i>



## **Addendum C Research questionnaire**

Dear Participant/Qabane elithandekayo

Request for your participation: Isicelo sentsebenziswano

I am a researcher and also an igqirha. I am from the University of Fort Hare. I request that I spend few moments with you, probably an hour, depending on how quick we can finish our talk. I am exploring many aspects relating to ukuthwasa as an initiation process undertaken by amaXhosa women and men. However, my focus is solely on women. The reason for this research is that there are few documents written on ukuthwasa; many people do not understand the phenomenon of ukuthwasa and there are also those who have to thwasa but are afraid because they do not understand how the journey is or probable whether ukuthwasa is actually a reality.

Ndingumphandi ndaye ndikwalilo negqirha. Ndiphuma kwidyunivesti yakwa Nokholeji eAlice. Ndicela ndihlale nawe sincokole, mhlawumbi incoko yethu ingathatha nje imizuzwana embalwa okanye iyure. Ndiphengulula imiba ethile ngentwaso okanye ukuthwasa njenge siko elithi lilandelwe ngomama notata. Kodwa okwangoku nje ndisenomdla komama. Izizathu zoluphando kukuba zimbawwa iincwadi ezibhaliweyo ngentwaso; abantu abaninzi abakawuqondisisi umba wokuthwasa yaye kukho abo kufaneleke ukuba bathwase kodwa bayoyika. Kuba abanalwazi luphangaleleyo ngendlela yentwaso mhlawumbi abaqondi nokuba ukuthwasa oku yinto ekhoyo ngempela.

The information collected in this study will be recorded in books that may be placed in various libraries worldwide and will be accessible to people of other countries. If you are an igqirha, and also a trainer, I may ask personal information about your training or journey. In that case, I request your permission to participate in this study at voluntary basis and where necessary to give me permission to use the first name of your choice. The surnames will not be recorded but the first name of your choice will be recorded. I shall ensure by all means that your name and information is managed with respect and is safely secured and used in a responsible manner.

Ulwazi oluyakuthi luqokelelwe luyakushicilelwa ezincwadini ezinokuti zibekwe kuluhlu lwencwadi eziselitheni lolwazi kwilize liphela zaye ziyakufundwa ngabantu ngabantu. Ukuba uligqirha, and ungumqeqeshi, ndingabanako ukwenza isicelo sokufumana ingxelo ephangaleleyo ngawe nendlela oyihambileyo phantsi koqeqesho lobugqirha. Ukuba kunjalo, ndicela imvume yokuba ungenele ukusebenzisana nam kolu phando ngokuthanda kwakho,

apho kukho imfuneko khona undinike imvume yokusebenzisa igama lakho lokuqala, elo lithandwe nguwe. Ifani ayizukusetyenziswa. Ndiyakuqinisekisa ukuba igama lakho nolwazi osinike lona ukuba luyakuphathwa ngendlela ehloniphekileyo and nekhuselekileyo.

You are free to ask me any questions during our working relationship in this study and I shall do my best to answer it. You are permitted to stop your participation any time you feel so and we shall respect that.

Uvumelekile ukuba ubuze nawuphina umbuzo ngethuba lwentsebenziswano yethu ndaye ndiyakwenza konke okusemandleni am ukuphendula. Unalo ilungelo lokuyeka naninina ufuna yaye ndiyakuyithobela lo meko.

During the study I together with students from the university who would accompany me from time to time, may wish to take the photos and videos of the ritual ceremonies conducted. At all times we shall introduce ourselves and give a brief introduction as to what we would need to do so that we shall respect whatever condition or rules given to us. The questions will be the same to everyone, as we are looking for more or less information from all of you but we may have to restructure them now and again.

Ngexesha lophando mna nabafundi abavela kwanokholeji nabayakuthi ngamathuba athile bamane bendipheleka, singathanda ukuba sithathe izithombe nomabona kude bemicimbi eniyakuthi niyenze. Ngalo lonke ixesha siyakuhlala sizazisa sixele nokuba siqwenala ukuqhuba njanina ukuze sikwazi ukuhlonipha nayiphina imithetho esiyakuthi sidibane nayo. Siyakubuza imibuzo efanayo kuye wonke ubani ngenjongo zokufumana iinkcukacha ezifanayo nakubeni kungafuneka siyijika-jike phaya naphaya.

With your permission and respect to you and the ancestors around you, I wish all of us a bright and successful journey. At this stage I am not sure how long this study will take, but I shall update you as we work together. Thank you so much for your cooperation and your contribution in this study is priceless. After our interview session, you are invited to discuss or enquire about any other topic relating to amagqirha you think we did not ask or discussed in depth.

Ngemvume nangembeko yakho neminyanya ekungqongileyo, ndinqwenelela thina sonke indlela emhlophe nenempumelelo. Ngeli xesha, andinangqiniseko ukuba lizobalide kangakanani ithuba loluphando, kodwa ndakuhlala ndiphefumlelana nawe njengoko siphathisene ngomsebenzi. Ndiyabulela kakhulu ngentsebenziswano yakho negalelo lakho endingenakubeka xabiso kulo ngangobukhulu balo kolu phando. Emva kwemibuzo yethu



uvumelekile ukuba ubuze okanye uncokole nangawuphina umcimbi omalunga namagqirha ocinga ukub akhange siwuchukumise okanye asixoxanga ngokwaneleyo ngawo.

Thank you! Camagu!

#### Questions/Imibuzo

- What is *intwaso* (verb of *ukuthwasa*)? *Ungathi yintoni intwaso okanye ukuthwasa?*
- What are the characteristics that confirm that a person has to be initiated? *Umbona ngantoni umntu othwasayo okanye ofaneleke ukuba athwase?*
- How does the process unfold to identity healing maturity?
- *Iqala kanjani into yokuba umntu abe unokuthi ungumphilisi or angakwazi ukuphilisa abantu?*
- How do *amagqirha* and families experience and perceive the crises involved?
- *Xa uligqirha/umkwetha ungabalisa uthi weva njani entwaseni? Xa umntu wakho ethwasa ungayichaza uthi kubanjani kuwe?*
- How are crises managed and their role?
- *Ilmeko nobunzima zasentwaseni zibonelelwa kanjani ngumntu ozivayo? Uthini ngazo?*
- What makes some complete the process and others fail?
- *Yintoni eyenza abanye bayigqibe intwaso abanye boyisakale esithubeni?*
- What are the competencies of the trainees on completion of the training?
- *Bafunda zinto zini abakhwetha xa bephantsi koqeqesho lobugqirha?*
- How do women view their social role in the process?
- *Xa umfazi eligqirha uyibona iyintoni umsebenzi wakhe ngokwasekuhlaleni nanjenge gqirha?*
- How are the trainees tested and evaluated?
- *Abakhwetha balandelelwa njani ukuze kuqinisekисwe ukuba banento abayifundileyo?*
- How does *intwaso* relate to Christianity?

- *Ingaba intwaso izalana okanye idibana njani nobukristu?*
- Why is *intwaso* not documented? What would be the best way to document it?
- *Yintoni eyanza ukuba intwaso ibe ayibhalwanga ezincwadini? Ucinga ukuba inokubhalwa njani? Uluvo lwakho luthini ngokubhalwa ngentwaso?*

#### Questions for trainers

- How did you know that you have a calling?
- *Wazi njani ukuba unobizo?*
- What happened or lead to you to acknowledge it?
- *Kwenzeka ntoni okanye wathi ukuze uyamkele?*
- How did you manage your personal crises?
- *Wathini ukuze ukwazi ukumelana nenxwaleko zale ndlela?*
- How would you explain your feelings, pain/hurt, failures and successes in your journey?
- *Ungayicacisa uthini intlungu, uvuyo, intlupheko, kunye neziphumo owathi wazifumana kule ndlela?*
- How do *amagqirha* treat or take care of their trainees, clients and patients?
- *Amagqirha abakhathalela njani abaguli babo?*
- What supportive means are provided by the government towards *amagqirha*?
- *Ingaba urhulumente unagalelo lithini ekuncedeni emagqirha?*
- How do *amagqirha* expect the government to help them?
- *Ingaba amagqirha anqwenela ukuba urhulumente angawanceda kanjani?*

I thank you for your time! Camagu! Ndiyabulela ngexesha lakho. Camagu!

The above questions were used based on the themes and were asked in various ways depending on the responses from the participants.

**Addendum D Other Local/National and world-wide variations**

<b>Variations</b>	<b>Komanisi</b>	<b>Alice</b>	<b>National (other cultures)</b>	<b>World-wide</b>
<b>Stages of training</b>	7 stages of training (Chapter 5)	Diffuse 6 stages: 4 observable stages  <b>1<sup>st</sup> stage:</b> <i>intatha bhekile</i> an initiate called <i>Unoqala kundla</i>  <b>2<sup>nd</sup> stage:</b> <i>Imfukamo- isiphuthumo</i> . An initiate is called: <i>Unosiphutumo</i>  <b>3<sup>rd</sup> stage:</b> <i>imvuma kufa</i>  <b>4<sup>th</sup> stage:</b> <i>Umgqabazo</i>  <b>5<sup>th</sup> stage:</b> <i>ulugxa</i>  <b>6<sup>th</sup> stage:</b> <i>Ukugoduswa</i>	3 stages and ( <i>umndawu</i> training by the Zulu, Tshangaan, <i>amaSwati</i> and Basotho) not clearly defined.	Not specific and clearly defined as in Komanisi and Alice.
<b>Duration</b>	Average 2-5 years	Average of 5 years	6-18 months	6-18 months
<b>Dress code:</b> trainee  Junior trainee	White and Khaki  No white ochre  White beads, powdered blue and sparingly red Huge head bead called <i>Hexa</i>	White with napkins as head scarf (Alice only)  White ochre on their bodies  Predominantly white and powdered blue beads	Red skirts and coloured materials  Coloured head scarves; braided hair and dyed with red ochre  Red and white necklaces, wrist and legs (all joints).	Normal dress; birds curls (Indians) as head dress.  Dots of red ochre on the face; special costumes  Variety of beads and at times no uniform.

Senior trainee	<p>On top of the above; goat strip skins: across the breast; elbow joint, wrist joint and lower part of the leg.</p> <p>The full-blown gall bladders and bile sewn to head</p> <p>Bead – <i>hexa</i></p>	<p>Flat gall bladders and urine bladders sewn to head bead band (Chapter 5).</p> <p>Dress from Xhosa material – <i>umbhaco</i></p> <p>Apron like on top of the skirt – <i>umbhaco</i>. In Alice, on top of this, a small apron – blue on top and <i>incebeta</i>. The skirt is decorated by pieces of goat skins sewn sporadically on it.</p>	<p>Still as above. Mixture of flat and full-blown bladders or none.</p> <p>Dress still the same but with goat skins broad at the back and strips in front across the chest.</p>	<p>Animal skins and headbands from feathers as in American Healers</p> <p>Colourful dresses and huge tin belts or leg belts made from wood <i>sangomas</i> from other African cultures.</p>
Graduated <i>igqirha</i>	<p>Wears an <i>isidlokolo</i> (distinctive hat); Head bead called <i>iCamagu</i> – with three layers hanging similar to <i>Hexa</i> and <i>unonkciyane</i> a head necklace with beads like</p>	<p>Others wear <i>isidlokolo</i> or traditional cloths with bead necklaces. They use different <i>itshoba</i> not made from oxtail.</p>		

	small purses hanging above both ears and has an <i>itshoba</i> (ox tail fixed to a long stick – <i>umnquma</i> )			
<b>Songs and dance</b>	Mostly cultural songs with few church songs during rituals. Dance step and rhythm unique to this group	Predominantly church hymns/chorus with few Xhosa songs Other groups blow whistles Dance step and rhythm different to that of the Komanisi	Mostly cultural songs with throat noises Step and rhythm unique to locals but differ from Komanisi, Alice and Tsengiwe.	Use of culturally made harps and modern instruments Again step and rhythm different amongst all. Diverse cultural variations are observed.
<b>Sacred sites</b>	House, <i>inkundla</i> and kraal, forest, rivers, caves and seas	Mostly <i>inkundla</i> , forests and rivers, kraals.	Mostly rivers; others mostly caves (Basotho), mountains, certain types of soils	Not very clear
<b>Sacred animals used for ritual killings</b>	Prefer white goat and chicken; an ox preferable any colour but not black; often a male ( <i>inkabi</i> ).	Prefer the same but mostly female types of the sacrificial animals.	Mostly chickens; goats and oxen; colour not an issue. However, others prefer black for <i>ukufemba</i> (cleansing ritual) others use white chickens; doves used at certain	Others use same animals; others none, others snake and other wild animals including pigs.

			times.	
<b>Divination</b>	Use <i>umbilini</i> as central skill for diagnosis; herbs and pharmaceutical products, few use <i>amakhosi</i> ; faith-healing sparingly and others combine herbs and prayer ( <i>abathandazeli</i> - faith healers).	Same; certain areas use <i>imilozi</i> , bone throwing, herbs, pharmaceutical products, faith-healing predominantly.	Trance, spirit possession; bone throwing	Variety of alternative healing; trance; ingestion of certain roots to be able to diagnose and see which plants to use to heal; certain ceremonies and drinking of herbs; us of peanuts and wolves; use of spider webs; use of colours and many others mechanistic methods

### **Addendum E Statement of declaration by the researcher**

**This is to certify that I, Lily-Rose Nomfundo Mlisa, have conducted research on the *Ukuthwasa* initiation of *amagqirha* in four regional areas in the Eastern Cape Province: 1) Tsolo at the following villages: Mbinja Village and Mba waBathwa Village; 2) Ugie at the Old Location; 3) Cala at Tsengiwe Village; and 4) Alice at Ntselamanzi Location. Four key participants were involved: Boniswa and Matogu from Tsolo; Zanemvula from Ugie; and Mandlovu from Alice. Photographs of the key participants, at times including those of their families and trainees, were taken during the field work. Some of these are in DVD format and others are included in the thesis. Others will be included in a book envisaged to be written once the thesis is finalised and accepted.**

This is to confirm that participants' full verbal permission and consensus were obtained prior to the inception of research and it was agreed that the following would be implemented:

1. Participants are free to exclude whatever information causes embarrassment to their identities as well as their practices in general.
2. Participants' request that the researcher do not the record any ritual or exercise that need not be made public **(See 3.2.5–3.2.7, p.96 and 3.2.8.5 & 9, p. 103 of the thesis).**
3. The researcher shall accept ultimate responsibility and accountability to use the information and videos taken during fieldwork in a respectful and discreet way to protect the Intellectual Property Rights of participants **(See 3.2.14, p.111 of the thesis). As such DVDs included in the thesis are mainly from rituals that were conducted for the researcher during her training and permission was received from participants for digital photos used .**
4. The thesis has to be translated into Xhosa in future.
5. Key participants will receive their photos as well.
6. The researcher shall read the finalised document in collaboration with respective key participants before submitting her thesis.
7. Key participants will receive a copy once the thesis is finalised and accepted.

The above-mentioned consensus was reached because all participants agreed that the *ukuthwasa* process of the *amaXhosa* is not well documented and a need exists to do so.

All participants anticipated that documenting *ukuthwasa* would ensure that the valuable information on *ukuthwasa* is transmitted throughout all generations.

I confirm that the above-mentioned consensus is binding and I shall adhere to it.

**Signature:** .....

**Place:** University of Fort Hare, Alice.

**Date:** 22 July 2009