



## Indigenous beliefs and healing among the Opo community in Gambella, South West Ethiopia.

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## Abstracts

*The Opo refers to a small group of people living in Gambella Regional State. They are one of the least studied communities in Ethiopia. In this study, we aimed to present the community's beliefs about health, and illness as well as their indigenous healing practices. We collected data from February to March 2020 through ethnographic fieldwork using observation, focus group discussion, and key informant interviews. The results of the study show that Opo conceptualizes health and healing its members based on its indigenous beliefs. Healers are engaged in healing practices using the pharmacopeia from the local environment. Moreover, healing in Opo has two layers: one is performed for the safety and well-being of their community while the other is to meet the needs of individual members. In general, the community's understanding of health, illness, and healing is highly embedded in the socio-cultural and ecological context of the community and any intervention aimed at improving the health conditions of this community should take these contexts into account.*

**Keywords:** Gambella, health and illness, healing, indigenous belief, medical anthropology

## 1. BACKGROUND

Beliefs and health-seeking behavior are intricately intertwined to influence healing in any culture. Cross-cultural studies have documented how these beliefs being embedded in the culture of society have shaped peoples' conception of health, illness, and healing (Allen and Wiley, 2021; Lane and Scrimshaw, 2020; Kelienman, 1978; Langdon and Wiik, 2010; Sobo, 2004). The diversity of these beliefs has led to the existence of medical pluralism and at times medical syncretism because "what people do for health depends to a large degree on how they understand the causes of an illness" (Sobo, 2004, p. 6).

In this regard, Young (1980) and Foster (2016) suggested externalizing-internalizing and personalistic-naturalistic explanations respectively although anthropologists warn the dichotomies as too simplistic to capture the nature of medical systems across the world.

On the other hand, others classified healthcare systems as local, regional, and cosmopolitan (Dunn, 1976), as conventional and vernacular medicine (O'Connor, 1995), and as the popular, folk, and professional sectors (Kelienman, 978). These classifications are linked to the above illness etiology-based classifications except Dunn (1976) which attempts to indicate the geographic distribution of a specific healthcare system.

The above explanations about the link between beliefs and health are very visible in Africa where one could observe indigenous beliefs and healings working in tandem with biomedicine (Dejene, 2013). Interestingly, these beliefs and practices do not necessarily mean that they are congruent with the premises of biomedicine regarding disease and appropriate interventions. For instance, Omonzejele (2008, p. 120) argues:

*The African concept of health is embracing; in other words, it cannot be taken in isolation. For the traditional African, health is not just about the proper functioning of bodily organs. Good health for the African consists of mental, physical, spiritual, and emotional stability for oneself, family members, and community...*

Therefore, diagnosis and treatment interventions follow the above line of thought. This makes their treatment holistic. Several cases are reported from different communities in this regard (Omonzejele, 2008, p.122-23). However, Africa is a vast continent, and generalizations often risk misconstruing the particularities found in different communities. For example, there are more than eighty linguistic groups distributed over five ecological zones in Ethiopia alone, a country located in East Africa. Different scholars from various backgrounds investigated indigenous beliefs and healing practices in Ethiopia (Young, 1980; Abera et al., 2005; Kebede et al., 2006; Mekonne, 1991; Endashaw, 2007; Ketema et al, 2013; Mesfine et al, 2019).

However, some of these studies were interested in the phytochemical properties of plants and the situation of medicinal plants, while others analyzed the policy environments under which these healing practices take place. Still, others studied the healing practices in any one of the eighty linguistic groups. Nonetheless, the Opo community is found in Gambella Regional State in different ecology and is relatively one of the farthest communities from the national capital city. Therefore, this study contributes to our understanding of the particularities of indigenous beliefs and healing by drawing on fieldwork conducted at one remote location in Ethiopia. In so doing, we aim to explore the beliefs about health and healing in the Opo community, describe the indigenous healing knowledge acquisition and practices in the community, and investigate the contribution of indigenous healing to the health of the Opo community. In the meantime, we conceptualized health, illness, and healing as socio-culturally and economically

situated rather than the biomedical universalization of these concepts (Parker 2001). This understanding served to frame our questions and was used in making sense of the data.

## 2. METHODS AND SETTING

### 2.1. The Study Area and Population

The study was carried out in Gambella Peoples' National Regional State (GPNRS), which is one of the eleven federal administrative regions of Ethiopia, a country located in East Africa. The administrative region is situated in South Western parts of the country, 766 kilometers far from Addis Ababa. The region occupies a vast territory of the South Western lowlands of Ethiopia. It has the lowest population density in the country, with nine inhabitants per square kilometer. This study was carried out in the Itang Special district among the Opo community. The district occupies a land area of 2, 188.34 square Kilometers with an altitude ranging from 350 to 480 meters. The district has 23 kebeles<sup>1</sup> of which 22 are rural. Opo community lives in the northern adjacent of the Itang special district, inhabiting two Kebeles known as Wankey and Mera. The population was projected to be 1,161 (CSA, 2013). The community treasures a distinct cultural system of indigenous beliefs and healing practices which has been passed down from generation to generation (Gambella People National Region, 2015). However, this does not mean that there are no healthcare facilities and services in the region. There are four primary hospitals, one general hospital, twenty-nine health centers, and one hundred sixteen health posts in the region. Moreover, there are 70 medical doctors and 3282 nurses in the regional state. Of these, Itang woreda has one primary hospital, four health centers and twelve health posts. However, there is no medical doctor in health facilities in Itang woreda. Instead, one health officer and nine nurses with BSc degrees are acting as medical doctors. The other 103 nurses graduated with diplomas. Of these health facilities and professionals in the woreda, there are two health posts and five nurses at our study site until December 2022.

### 2.2. Study Design, Methods of Data Collection, and Analysis

This study employed ethnographic design to understand the beliefs and worldview held by the community about health and healing practices. Five community elders, five indigenous healers, and seven patients were interviewed. Twelve individuals also participated in focus group discussions (FGD) to further enrich the data. We collected data from these participants from February to May 2020 through observation, focus group discussions, and key informant interviews. Ethically, proper steps had been followed. We obtained an official letter from Jimma University and then presented it to the Culture and Tourism Bureau of Gambella Administrative State and Itang Special district as well as to Wankey and Mera Kebele officials. We also secured the oral consent of the participants. Finally, we transcribed the responses of the participants and looked for major themes for data analysis.

## 3. RESULTS AND DISCUSSION

### 3.1. Mode of Subsistence in the Opo Community

The Opo community subsists on foraging, fishing, and farming. They use human labor in all aspects of their activities. We shall describe briefly how this community makes a living from the three modes of subsistence as follows.

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The lowest administrative structure of the government

### 3.1.1. Foraging

The Opo community relies on wild animals for meat. As people living in the forest, hunting is one of the adorable practices for both young and old men. It serves as one of the sources of their food. Moreover, it is a recreational activity, especially for youngsters. The more they practice, the more famous they become in their community. In the process, however, they take locally known safety measures. For example, one of the informants indicated they consider their safety and security as the prime priority during hunting. The Opo burn certain indigenous medicine for hunting to protect themselves from harm around the bush. One of the protections they use is *Akak*.

The Opo community uses *Akak*, for two different reasons: first by indigenous healers for treatment of abdominal ailments caused by meat from hunting and wild fruits. The second reason is used by Opo men while hunting for their safety and protection. They burn the dry part of its stems (*Akak*) for its smoke as people sleep at night in the bushes. In doing that, they believe that either human or wild animals could not come and attack them in the night due to the power released to the environment from the *Akak*.

Wild fruits are also an important source of food. Opo community practices gathering wild fruits and roots. They collect roots both for food and locally made medicines. They collect and eat some wild fruits in raw form. They believe that plants' roots, stems, leaves, and bark are an important source of medicines (FGD 1 & 2, 2020).

### 3.1.2. Fishing

Opo believes eating fish is good for health. They practice fishing using locally made wooden nets known as *tuka*, *dur*, *mer mer*, and *lek*, instead of fishing nets and fishhooks. In fishing activities, they make sure that people comply with indigenous norms of fishing. Pitching the spear or urinating around the fishing area on one hand and the coming of a woman near or even around that area is prohibited. The fishing area is permitted only for males but they will not pitch a spear or urinate at that point. These norms dictate fishing among the Opo community. The violations of these norms result in punishment. If it happens by mistake, that a woman comes nearby or a man pitches a spear or urinates at the fishing area, the consequence is punishment that both men and women would face the same penalty. They must submerge under the water three times. A strong man holds their necks forcibly and orders them to cross the river in his hands. The Opo explains that this kind of penalty to the bearer helps them regain the ability to catch fish as usual.

### 3.1.3. Farming

Opo does not use animals for farming because they do not have farm animals yet. The people use hand tools such as crude hoes, plows, panga, axes, and machetes for farming-related activities. They work both individually and sometimes in groups on their farms. Everyone has his farm to cultivate among family members. They grow crops such as sorghum, maize groundnuts, sesames, potatoes, yams, and okra. They also rely on root and tuber crops. Women are devotedly doing works such as threshing, seed preparation, sowing or planting, weeding, land clearing, harvesting, processing, and storing cereals in the barns. Other activities such as sowing, protecting farms from

monkeys and birds, gathering harvests, winnowing, and storing and protection are also done by women supported by men. Children also involve in the protection of the garden from birds and monkeys.

#### 3.1.4. Marriage and kinship

Marriage is defined by Opo as *'thiyaa'* which means 'love'. The Opo community values being industrious or hardworking for a man to be a husband. They also forbid marriage between consanguine kins up to seven generations. Therefore, the involvement of parents to trace this kinship is crucial before marriage. Opo, practice different kinds of marriage such as sister exchange, marriage by elopement, and marriage due to impregnation with marital arrangements.

Sister exchange marriage is the oldest practice among the Opo. A young man can marry only by exchanging his sister with another young man's sister. Thus, a young man who has no sister will find it difficult to have a wife in the Opo community although the community devised some coping mechanisms. Marriage by elopement and marriage due to impregnation is considered illegal by the Opo. At times, they cause disputes among community members. But elders perform some rituals to approve the marriages and settle disputes due to these marriages.

### 3.2. Indigenous Beliefs and Community Health

The Opo community believes that illness results from malevolent spirits, seasonal weather changes, and individual misbehavior deviating from community norms. Diagnosis involves physical observation of a patient and asking questions. The healing knowledge and skills are passed on to the next generation in the family where some of the secrets are not open to non-family members. There is widespread use of medicinal plants by healers.

The healers could make preventive or curative interventions. These are locally termed *beeth* and *juum*. The healers are custodians of their community's health. For instance, they engage in two important rituals in this regard. The first is *'beeth'*. The community believes that the out-burst and receding of the flood water result in health problems. Therefore, there is a man that advises the community on how to cope with this problem. Community elders consult him in times of the outbursting and receding of the flood water. He then instructs the entire community to follow certain rules for their well-being. He prescribes for community members an indigenous medicine locally known as *caa<sup>2</sup> tuk*. This is for the prevention and curing of the annual outbreak of illness related to flood (Indigenous healer, February 17, 2020). The second one is *Juum*. This is only practiced for emergency illnesses. This healer helps the community to prevent and cure the outbreak of emergency illness in the Opo community. The healer makes two consecutive rituals in this regard. First, he takes a vessel made of gourd, unused, put water in it, and cut the dog's ear to bleed adding the blood to water because they believe that the blood of the dog can chase the disease away from them. After mixing the water and blood, the healer drinks it signifying prevention and cure of illness among

2 *Caa* means medicine in local language. The Opo uses this prefix to indicate the health problem they are dealing with. For example, *caa Joo* means medicine for snake bite where *caa* refers to medicine while *joo* means snake.

the community. They believe that the healer can predict health problems after the first ritual. Second, the healer will request the community to bring one dog to him and killed to defeat that emergency illness from the community. And finally, he orders the whole community to take bath in river water early in the morning. By performing this, the Opo believe that the emergency illness will be gone by the river (Interview with Community elder, February 2020).

Moreover, the Opo perform seasonal rituals related to health during harvest. The community elders take three pieces of a crop either maize or any other type, then throw one of them to the bush and the other one to the river or lake to push away ill health, and the last one is given to the youngest child in the family. They believe that major ailments in Opo could be defeated through that ritual. A notable village woman remarked:

*When Hithpotow (peace, being healthy) prevails in the community, we adults get time to train youngsters in marriage, cultivation, fishing, and hunting activities or overall day-to-day activities. Going out in the morning and coming home in the evening by running the entire task assigned to an individual is all about hithpotow (being healthy) to us. All those activities mean health is enormous in our community (FGD 1, February 2020).*

As part of this socialization, taking or stealing others' property is taboo. It is believed that stealing brings long-term misfortune for that individual as well as his/her family. This belief discourages an individual's involvement in crime and obviously, brings peace and healthy living to the entire community.

### **3.3. Meeting Individual Healing Demands**

In previous paragraphs, we have described how the healers try to ensure community health through different rituals. However, the healers could also work to meet the healing needs of individual community members whenever they face ill health. The following are some of the cases in point. The Opo uses the prefix *caa-to* to refer to the trees or plants used for treatment, while the suffix indicates the ailment or illness. The participants of focus group discussion and key informant interviews reported that the community experiences different kinds of illness or *Hithaaw* in the area. They listed bone fracture, snake bite, malaria, hydrocele, cough, burns, trachoma, infertility, hepatitis, incest taboo, etc. which they said they diagnose by physical observation and asking a patient about his/her feelings (FGD one, FGD two, and Key informant interviews). Below we shall briefly describe how this community deals with these health problems in their local contexts.

#### **3.3.1. Healing Bone Fracture (Caa thiet)**

The Opo people use Caa-thiet for treating bone fractures. This medicine is known only by one family in the entire Opo community. In the incident of fracture, a selected member of the family will rush to the forest to bring the medicine. The healer then slightly cuts the fractured area with a small knife. He then chops the medicine into pieces and applies it to the fractured part and wraps it with a bark of a tree. In addition to that, hot water is applied every day until the fracture is healed. The healer explained:

*The healer can stay with the client to make sure that he/she is properly following the advice of the healer. The treatment could last for a month depending on the seriousness of the fracture. Further medicine cannot be taken without the permission of the healer (Key informant interview, February 2020).*

The healer also reported that about 1,500 Birr is paid for treatment. This was done in kind in the past. Interestingly, this charge is paid only after the patient is fully recovered. If an individual cannot pay, he /she will not be forced to pay. Instead, the healing service is considered a gift to that person by the healer's family and the entire community.

In this regard, a patient narrated his experience:

*I had my leg broken while hunting with my friends for antelopes. We encounter elephants in the process and I fell into a hole while running away. My friends took me immediately to a healer. The healer has a secluded place in the backyard to treat his patients and he put me there. It was only me and the healer at the back of the house. He observed and touched my leg and then told me to stretch my leg. He stabbed the fractured part with a small knife and applied hot water. Then, he prepared the medicine called "thiet", put it on stabbed place, and tied my leg with straw made mat. I stayed with him. After that, only hot water was poured onto the wound. He changed the straw mat after a week. It took me three months to get healed (cured) (Interview with the patient, March 2020).*

### **3.3.2. Healing Snake Bite (Caa joo)**

The Opo community lives in a hot environment and dense forest where the threat of snake bites is common. Hence, they use indigenous medicine for snake bites. *Caa Joo* is a local name for medicine treating snakebite (*caa* as medicine, *joo* as snake).

Oral tradition has it that before they discovered the current indigenous medicine, they used to take and swallow just ordinary soil to prevent death. The assumption was that when a victim swallows the soil, he/s will vomit the poison. But it did not help them. Eventually, a family member incidentally discovered the current indigenous medicine in use from the bush to treat his family member who had been bitten by a snake. (FGD 1 & 2, February 2020). The healer further reported "I am the only appointed person in our family. When the incident happens, the person is brought to my home, and then I chewed the medicine, and release the drops into the affected part or wound. The person stays for almost two hours with me and finally sends me home fully recovered." (Key informant interview March 2020).

### **3.3.3. Healing for violation of Incest Taboo (Caa cuula)**

Opo strongly believes in incest and its implication for the health and well-being of its community. It is customarily prohibited to marry from the Consanguine kinships. However, whenever it occurs, the families of those who committed incest to consult an indigenous healer to "clean" them of the potential health problem resulting from incest. The healer gives indigenous medicine prepared from a root of a plant to both to chew for some days. Then, he declares that they are free and healthy from incest and its consequences. On the other hand, the Opo believe that it may cause illness and even death to both involved if they conceal the case of incest.

### 3.3.4. *Healing Hydrocele (Caa thuuma)*

Hydrocele is one of the health problems in the Opo community. In this illness, water or liquid accumulates in the scrotum of a male child or young man. This causes the swelling of the whole genital organ making it too painful and too heavy to carry. They treat this health problem by isolating a patient for some days. After a few days, the community calls a ritual process whereby people worship their creator (god) which they think brought the problem. It is believed that it is a god who chooses that person to bear the pain on behalf of the community. Recently, modern medical intervention is accessible. It is the only illness that they mentioned the necessity for medical intervention to treat among all the illnesses they encounter in their daily experiences.

### 3.3.5. *Healing Malaria (Caa tith, Caa kutuu Caa kopcuro)*

Malaria is common in Opo Community. They use *Caa tith*, for malaria treatment. It is prepared from the root of certain grass. When the community observes the malaria-like signs -symptoms, they recommend that root as the only medicine for the treatment of malaria. The medicine is known to all members of the Opo community. There is no special kind of skill needed. It is applied to all patients by anybody willing to help the patient.

In addition, the patient is ordered to chew some roots for headache (*Kopcuro*) and cough (*Kutuu*), for some days, until the signs and symptoms of malaria such as fever, headache, joint pain, and dizziness are over. Then, the family declares that the patient is fully recovered and may go back to work.

### 3.3.6. *Healing Burn (Caa laango)*

The Opo community uses two different kinds of medicine to treat burns. The medicine is known to all community members but they take advice from the healer on how to take the medicine. It is prepared from the ash of the leaves or bark of a tree. Family members add little water to the ash and apply it on the surface of the burned area. The other one is made of the fur of an Aardwolf. The furs of that animal are to be plugged and put at the surface of the wound and dry until the cure of the wound.

### 3.3.7. *Healing Infertility(Caa puuth)*

The treatment of this health problem is carried out by a healer with medicine he only knows in the community. In the process of healing, the two patients (husband and wife) are ordered to stay in-door a couple of times. The healer provides them with medicine, food, and other necessities while they stay inside the house until they are fully healed. The healing process is said to be complete only if the wife conceives which indicates the return of fertility. The patient is supposed to pay only for the medicine and other services are given for free.

### 3.3.8. *Healing Hepatitis (Caa ajangakiw)*

Hepatitis is one of the major health problems in the Opo community. The indigenous healer diagnoses the problem by observing a patient's eyes, legs, and feet. The healer



ordered the medicine prepared from the roots of a plant. The treatment takes weeks until the healer declares the patient free from hepatitis.

### 3.3.9. Healing Trachoma (*Caa putinah*)

Trachoma is a common health problem not only in the Opo community but also in Gambella Administrative Region. It affects the eyes of both children and adults. The healer in Opo prepares medicine from the leaves of a certain tree. The healer prepares the drug in the morning and applies it to the patient's eye in the evening. This healer is the only person who can do the job. He/she chops the leaves into pieces, adds little water, and applies it to the affected eyes once a day for less than two weeks. The healer may follow up with the patient until he/she is fully recovered.

In general, the healers in Opo engage in meeting the individual and community healing demands by approaching these problems from local contexts. Some of the health problems and the medicine they use to heal their patients are summarized in the following table.

**Table: 1** Summary of health problems and the indigenous medicines used by the Opo community

S/N	Local Name of Medicine	English name	Health problem	Prepared from
1.	Caa thiet	Medicine for Bone fracture	Bone fracture	Plant root
2.	Caa joo/caa moti joo	Medicine for snakebite	Snakebite	Plant root & leave
3.	Caa cuula	Medicine for Incest	Incest	Plant root
4.	Caa thuuma	Medicine for Hydrocele	Hydrocele	Plant leave & root
5.	Caa tiith	Medicine for Malaria	Malaria	Plant root
6.	Caa kuthuu	Medicine for Malaria	Malaria	Plant leave
7.	Caa kopcuro	Medicine for Malaria	Malaria	Plant root leave & stem
8.	Caa laango	Medicine for Burn/injury	Burn	Plant leave
9.	Caa nyaroo	Medicine for Burn/injury	Burn	Fur
10.	Caa puuth	Medicine for Infertility	Infertility	Plant root
11.	Caa jangakiw	Medicine for Hepatitis	Hepatitis	Plant root
12.	Caa putinah	Medicinefor Trachoma	Trachoma	Plant leave
13.	Caa math	Medicine for "lack of love"	To be loved by a female	Plant root & stem
14.	Caa gier	Medicine for Evil eye	Evil eye	Plant stem & root
15.	Caa tuuk	Emergency illness	Emergency illness	Plant roots

Source: Fieldwork by Domach, May 2020

### 3.4. Being and Becoming a Healer

The medical knowledge possessed by the healers is not uniform. It varies from one to the other. According to key informant interviews and FGD 1 & 2, there is a tendency to keep medical knowledge and skill secret. Moreover, healers are initiated into this service usually in their families. For instance, a healer known for his expertise in treating bone fractures explained:

*As my father passed away last year, I am the only person that has acquired the healing knowledge and skills from my father. I have four brothers. However, my father made some assessments I fulfilled the criteria to become a healer. The*

*healing is partly spiritual and partly secular. Young people are not permitted to come to place of healing because it will cause infertility to them (Key informant interview, February 2020).*

However, a healer may refer cases to other healers living in the Opo community whenever he feels he could not deal with the illness. Regarding this, one of the healers said:

*I can treat illness like trachoma (Caa putinah), hepatitis (caa ajangakiw) and infertility (caa puuth). However, when cases like burn (caa laango), malaria (caa tith, kuutu, kopcuro), hydrocele (caa thuuma), incest taboo (caa cuula), snake bite (caa joo) and bone fracture (caa thiet) come to me, I usually refer them to the other specialist( Key informant interview, February 2020).*

#### 4. DISCUSSION

Health, illness, and healing are among the concepts that drew much attention from scholars in social and medical sciences. However, the tendency to reduce them to objectively measurable or verifiable indicators is a common departure between them. The results from Opo indicate that they approach these concepts in such a way that it contradicts biomedicine while they use the inputs (herbs) that could be verified to have medicinal value. For instance, scholars who studied the phytochemical properties of extracts used by different people (Workineh et al., 2006; Tolossa et al., 2013) confirmed the effects of the extracts against stated health problems. However, the people situate the sources of community and individual health problems in their local beliefs. For Opo, illness results when malevolent spirits attack the victim, or when individuals misbehave by deviating from the community's norm or it may result from changes in seasonal weather conditions. In this regard, our study substantiates Omonzejele's (2008) fieldwork report from Nigeria where he indicated the holistic nature of African traditional medicine. The power of beliefs in dictating health-seeking is documented even in economically advanced countries where access to biomedicine is not a concern. This could be noted from the work on Haredi Jews where they are not compliant with biomedicine due to cultural beliefs (Kasstan, 2020:4). This could be further explained with the works of Hodes (1997) entitled "Cross-cultural Medicine and Diverse Health Beliefs: Ethiopians Abroad." Our study also agrees with the "interactions of culture and healing" (Ezuma et al., 2017) and the importance of situating these issues in their specific contexts (Parker, 2001). To this end, our study agrees with (Konadu, 2008) on the necessity to closely understand the African perspectives regarding health, illness, and healing.

#### 5. CONCLUSION

In this study, we tried to explore indigenous beliefs and healing among the Opocommunity living in Gambela Regional State, Southwest Ethiopia. They are a community of fewer than 2500 people living in two rural *kebeles* of Itang *woreda* in the region. Healing in the community is practiced in line with their indigenous beliefs regarding the causes of illnesses. They use locally available material medicine to deliver their healing services to the community and its members for health problems that biomedicine approaches from different perspectives. The study concludes that health, illness, and healing are deeply embedded in the socio-cultural ecological context of the

Opo community that attempts to make any intervention by public health professionals should take these realities into account.

## 6. ACKNOWLEDGMENT

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## 7. CONFLICT OF INTEREST STATEMENT

No conflict of interest was reported.

## 8. FUNDING INFORMATION

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