

**INFLUENCE OF AFRICAN TRADITIONAL HEALING PRACTICES ON
ENVIRONMENTAL SUSTAINABILITY IN BULAMAGI SUB-COUNTY-
IGANGA DISTRICT**

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**A DISSERTATION SUBMITTED TO THE DIRECTORATE OF RESEARCH AND
GRADUATE TRAINING IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE AWARD OF THE DEGREE OF MASTER OF ARTS IN RELIGIOUS
STUDIES OF KYAMBOGO UNIVERSITY**

NOVEMBER, 2025

DECLARATION

I, Nambuya Alice Masette, hereby declare that this Dissertation titled, “Influence of African Traditional Healing Practices on Environmental Sustainability in Bulamagi Sub-county-Iganga District,” is my original work and has never been presented before for any academic award.

Signed

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APPROVAL

This Dissertation titled, “Influence of African Traditional Healing Practices on Environmental Sustainability in Bulamagi Sub-county-Iganga District,” was developed under our supervision.

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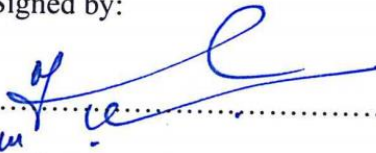
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Date: 2/11/25

DEDICATION

I hereby dedicate this Dissertation to my father, late Yefusa Masette (RIP) who made an initiative to take me to school at a time when most families among the Baamasaaba could not value the education of a girl child!

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ABBREVIATIONS AND ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome
ATHPs	-	African Traditional Healing Practices
ATM	-	African Traditional Medicine
ATMPs	-	African Traditional Medicine Practitioners
BS	-	Bone Setter
DLG	-	District Local Government
D	-	Diviner
Dr.	-	Doctor
DRC	-	Democratic Republic of Congo
FRH	-	Faith Religious Healer
H	-	Herbalist
HIV	-	Human Immune Virus
IKS	-	Indigenous Knowledge Systems
Kyu	-	Kyambogo University
LCs	-	Local Councils
NGO	-	Non Government Organization
Prof.	-	Professor
REC	-	Research Ethics Committee
TBA	-	Traditional Birth Attendant
TS	-	Traditional Surgeon
TCM	-	Traditional Chinese Medicine
WHO	-	World Health Organization

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ABSTRACT

This study explored the influence of African traditional healing practices and environmental sustainability in Bulamagi Sub-county-Iganga District. The researcher was motivated by the rapid increase of traditional religious healers, making healthcare a serious business on the expense of the declining flora and fauna in Bulamagi Sub-county-Iganga District (Ssenku, Okurut & Namuli, 2022). The study was guided by three specific objectives namely; (i). Examine the common Traditional healing practices and sites used in Bulamagi Sub-County- Iganga District. (ii). Discuss the implications associated with the extraction and use of natural resources in traditional religious healing in Bulamagi Sub-County-Iganga District (iii). Explore strategies which enhance the integration of environmental sustainability in traditional religious healing practices in Bulamagi Sub-County-Iganga District. The study was anchored on the interpretivist paradigm which emphasizes understanding the meaning and experiences of individuals within their social context. It adopted a Phenomenology Design with a qualitative research approach, employing in-depth interviews and participant observation as the primary data collection methods. In this study, since the collected data was grouped under themes and subthemes, the thematic analysis technique was adopted in analyzing and reporting the data. The study revealed that traditional medicine played a dual role of preserving cultural heritage and at the same time, contributing toward environmental sustainability if well managed or degradation when mismanaged. The findings highlight that while traditional religious healing practices encourage the sustainable use of natural resources such as sacred groves, wetlands, wild life and forested areas, they are now under threat due to overharvesting, habitat destruction and the declining influence of religious and cultural taboos that once protected the environment. Moving forward, while majority of the participants argued that traditional religious healing practices might offer a pathway to environmental sustainability, the minority thought that the reverse could be true. The study concludes that healing sites are currently treated as sacred dwellings for ancestral spirits and religious healing centers /traditional clinics; however, traditional healing practices have increasingly continued to project negative implications on flora and fauna in the area under study due uncontrolled harvesting. The study recommends to recognize and popularize the traditional religious healing sites as sacred centres (traditional clinics) through mapping and documentation, integrate indigenous knowledge into policies by advocating for environmental and cultural heritage policy, work with Busoga Kingdom (Obwakyabazinga) to sensitize and encourage sustainable harvesting practices, empower and formally involve traditional religious healers as active practitioners in environmental conservation advocacy who preserve cultural religious heritage and practices to promote conservation of environment by partnering with NGOs, e.g., Cultural Survival, Nature Uganda etc. Ultimately, this study positions traditional religious healing not only just as a religious cultural practice, but also as a viable model for sustainable resource use and above all, capable of supporting health, heritage, and environmental flexibility in rural areas across different parts of Uganda and beyond.

CHAPTER ONE

INTRODUCTION AND BACKGROUND TO THE STUDY

1.1 Introduction

Traditional healing practices have long been an integral part of various societies around the world, particularly in Africa, where indigenous knowledge systems continue to play a significant role in addressing community health and environmental sustainability. Historically, animals have played vital roles in traditional religious and healing practices across cultures. In African societies, goats and sheep have long been used in sacrificial rituals and ancestral appeasement, with white or black goats often symbolizing purification or protection, particularly among the Zulu, Yoruba, and Lugbara peoples. Sheep are similarly used in cleansing ceremonies and spiritual healing. Pigeons, associated with divination and communication with the spirit world in Afro-Caribbean and Middle Eastern traditions, are used in rituals for blessings or to absorb negative energy. Squirrels, though less frequently mentioned, have been recorded in Native American and some African traditions for symbolic uses tied to agility, vigilance, or spiritual intermediacy. The selection of these animals is historically rooted in symbolic interpretations of their behavior, color, or rarity, reflecting a deep integration of environmental knowledge and spiritual belief systems within traditional religious healing. These practices, while culturally significant, have varied environmental footprints depending on whether the animals are domesticated (e.g., goats, sheep) or wild-sourced (e.g., squirrels, pigeons), which has implications for sustainability and conservation today.

Similarly in Uganda, traditional religious healing methods also include the use of herbs, animal products, mineral products spiritual practices and rituals. These are deeply embedded in the cultural and social fabric. Bulamagi Sub-county in Iganga District, located in South-Eastern Uganda which offers a unique context for exploring the influence of traditional religious healing

practices and environmental sustainability (Ochieng & Kima, 2020). These practices not only promote health and well-being within the community but also contribute to the preservation and management of natural resources. Given the increasing pressure on Uganda's ecosystems due to deforestation, climate change, and unsustainable agricultural practices, investigating the role of traditional healing practices in promoting environmental sustainability has become crucial.

The motivation behind studying traditional healing practices in the context of environmental sustainability is driven by the need to understand how indigenous knowledge can offer sustainable solutions to contemporary environmental challenges. In Uganda, where rural communities heavily depend on their surrounding natural environment for medicinal plants, animal products and other resources, there is a growing concern about the depletion of biodiversity and the environmental impact of modern development. By focusing on Bulamagi Sub-county, this research seeks to document how traditional healers use locally available natural resources, their impact on the environment, and how these practices might be integrated into modern conservation efforts. The study aims to bridge the gap between indigenous knowledge and formal environmental management systems, offering insights into how traditional practices can complement and enhance efforts toward achieving sustainability in Uganda. This exploration is particularly timely, as Uganda faces increasing environmental degradation, yet still holds vast potential in its indigenous healing and sustainability practices, which could provide a model for broader environmental conservation strategies.

This introductory chapter presents the background to the study, statement of the problem, objectives of the study, research questions, scope of the study, and significance of the study as detailed under the subsequent subheadings.

1.2 Background to the study

This section presents the background of the study, highlighting the historical, contextual, theoretical and conceptual perspectives as explained under the subsequent paragraphs:

1.2.1 Historical Perspective

Traditional religious healing systems are ancient, culturally embedded practices that have been passed down through generations within indigenous and local communities across the globe. Globally, the use of herbal plants, mineral resources and animal products in traditional healing practices has deep historical roots, dating back to ancient civilizations such as Egypt, China and India, where natural remedies were integral to healthcare practices (Bussmann & Sharon, 2006). Those practices involved the utilization of various natural materials, including plants, animal bones, feathers of birds and products of minerals to treat ailments and promote health. For that matter, traditional healers employed natural remedies, spiritual practices and community-based approaches to address the physical, emotional and spiritual well-being of their clients. Traditional healers used herbs, rituals, divination and communication with ancestors to find out what was wrong and treated it. Their holistic system also stressed how people, communities and the environment were all connected (Golooba-Mutebi, 2002).

In Africa, traditional healing is not merely a form of healthcare but a comprehensive cultural system encompassing physical, spiritual and social well-being. Those healing systems have existed for centuries and continue to play a significant role in the lives of many communities, particularly in rural and peri-urban areas. According to Amina (2019), traditional ecological knowledge, especially the sustainable use of plants for health, is integral to those practices, reflecting an intimate understanding of local ecosystems. This knowledge is often orally transmitted, rooted in

lived experience and reflective of a deep relationship between people and their natural environment. African traditional healing practices underscored the interdependent relationship between health, spirituality and the environment. Those practices often involved herbalism, the use of animal products and the spiritual significance of water bodies, hills and forests. Traditional healers sustainably harvested plants for medicinal purposes while preserving biodiversity and ensuring natural regeneration (Khan et al., 2016). Specific animals were used symbolically or for treatment, reflecting an understanding of environmental roles and the need for balanced use. People respected water bodies like rivers and springs for their spiritual and healing properties, often using them as cleansing and healing sites. Those practices encouraged the preservation of aquatic ecosystems (Yiba et al., 2022).

Hills and sacred groves were typically regarded as sites for rituals and healing. Shrines acted as natural hotspots and prevented land degradation. For instance, shrines located deep in forests were protected by cultural taboos, indirectly conserving flora (vegetation) and fauna (wildlife) in those areas (Ormsby & Bhagwat, 2010).

In Uganda, traditional medicine has been an essential aspect of healthcare for centuries, with traditional indigenous healers employing local flora (vegetation products) and fauna (wildlife products) to address a wide range of health issues (Tabuti, 2008). However, while these practices have provided critical healthcare solutions, their impact on environmental sustainability has become a concern. The practice of overharvesting plants, hunting animals for medicinal products and extracting specific mineral products has led to the depletion and disruption of important aspects of the environment, raising critical issues about the balance between traditional medicine and environmental conservation (Hamilton, 2004). This historical exploration reveals the dual role of traditional medicine in providing healthcare while also challenging environmental

sustainability, necessitating the development of strategies to preserve both cultural practices and natural resources; hence the need for this study in the context of the Busoga Region.

1.2.2 Contextual Perspective

In Bulamagi Sub-County, located in the Busoga Region of Uganda, traditional religious healing remains a vital component of community life. The local population often relies on traditional healers due to limited access to modern healthcare services, cultural preferences, and affordability. Traditional healers in this region use an array of locally sourced materials such as medicinal plants, animal products, and minerals to treat various ailments. As highlighted by Kang (2021), ethno-medicine is inherently tied to the natural environment, and its practitioners depend on ecological knowledge to source, prepare, and apply remedies. This reliance on local biodiversity makes traditional healing systems vulnerable to environmental degradation, yet simultaneously places them in a unique position to promote environmental sustainability.

In Bulamagi Sub-county, traditional religious healers rely heavily on environment, utilizing local herbs, plants, animal products, and other natural resources for medicinal purposes. Healers collect herbs and other material products from forests, wetlands, and community-protected areas, which are often considered sacred. Healers use these resources to treat ailments, perform rituals and provide spiritual guidance. In the past, this combination was charged with environmental responsibility because healers used sustainable methods of gathering resources to make sure that future generations could use them as well (Nabukenya et al., 2019). However, increasing modernization and economic pressures pose a growing threat to the sustainability of these practices. Studies indicate a growing shift toward unsustainable resource extraction, driven by rising demand and reduced community engagement in conservation efforts (Kaggwa & Ssempijja, 2020).

African traditional religious healing practices in Bulamagi Sub-county are more than health-related rituals; they represent a holistic system that integrates cultural beliefs, environmental conservation, and community well-being. Efforts to preserve these practices can play a vital role in achieving environmental sustainability while maintaining the region's cultural identity, collaborative approaches involving traditional healers, local governments, and conservationists could help protect the region's natural and cultural heritage.

In recent years, there has been growing interest in the intersection between indigenous knowledge systems and environmental sustainability, particularly in Africa. Traditional healing practices, which have been integral to many African societies for centuries, now being explored for their potential contributions to contemporary environmental sustainability efforts. Bulamagi Sub-county, located in the Busoga region of Uganda, is no exception, where traditional healing practices have long been employed by local communities to address both physical and spiritual health needs. However, there is limited scholarly attention on how these practices intersect with environmental conservation and sustainability in this specific context.

Traditional African religious healing practices are often rooted in the use of natural resources such as plants, herbs, birds, animals and minerals, basing on holistic approaches that emphasize the interconnectedness of human health, the environment, and spiritual well-being. These practices have historically played a significant role in local cultures, with healers serving as custodians of indigenous knowledge passed down through generations. In Bulamagi Sub-county, healing practices involve the sustainable use of local flora and fauna, which have the potential to promote environmental conservation when done responsibly.

However, as modernity, globalization, and commercialization of natural resources continue to reshape the environment, traditional healing practices are under threat. There is an increasing concern that overharvesting of medicinal plants and deforestation, driven by both economic pressures and unregulated practices, could lead to the degradation of local environment. This has led to debates regarding the balance between preserving traditional knowledge and ensuring environmental sustainability. Some argue that traditional healing practices may offer a pathway to environmental sustainability, while others think that the reverse is true.

In the context of Bulamagi Sub-county, this research intends to bridge the gap in understanding how traditional religious healing practices can be aligned with environmental sustainability. Existing literature on African traditional healing has primarily focused on the health and cultural significance of these practices, with little emphasis on their potential environmental impacts. Furthermore, much of the research has been centered more on urban than rural areas, leaving a knowledge gap about specific regions and districts such as Iganga, thence, the need for this study.

The relationship between traditional religious healing practices and environmental sustainability is complex. Traditional religious healers often practice sustainable harvesting methods, guided by customary laws and spiritual beliefs that emphasize respect for nature. In many communities, healers act as custodians of biodiversity, ensuring the conservation of medicinal plant species and sacred natural sites. These practices embody a form of ecological stewardship that predates contemporary environmental conservation frameworks. Kang (2021) asserts that traditional medicine not only supports sustainable health practices but also fosters an ethic of care toward natural resources, which can contribute to broader environmental sustainability goals.

Despite their benefits, traditional healing practices face significant challenges in the modern era. Rapid urbanization, deforestation, climate change, and the commercialization of natural resources threaten the availability of medicinal plants and disrupt the ecosystems that support traditional healing. Additionally, the marginalization of indigenous knowledge systems in policy and scientific discourse often undermines the potential contributions of traditional healers to sustainable development.

Integrating traditional environmental knowledge with modern conservation efforts can enhance healthcare delivery and promote ecological integrity. In the context of Bulamagi Sub-County, acknowledging and supporting traditional healing practices could serve as a bridge between community health and environmental sustainability, ensuring both human and ecological well-being for future generations.

1.2.3 Relevant Environmental Policies relevant to sustainability

Uganda's National Environment Policy (1994 / sometimes cited as "National Environment Management Policy")

This policy's goal is to promote sustainable economic and social development by ensuring environmental quality and long-term resource productivity. It emphasises integration of environmental concerns into development planning and policy at national, district and local levels. Although national in scope, its principles provide a framework relevant for sub-regions and districts, Iganga District in particular in managing wetland, forest and agricultural ecosystems sustainably, thus providing relevance to this current study.

Uganda's National Water Policy (1999)

This policy guides the development and management of water resources in an integrated and sustainable manner, supporting future generations' needs. For regions like Busoga and Iganga District in particular with significant wetlands, lakes and water bodies, this policy is particularly relevant to the sustainability of water resources and ecosystem services, which is a serious concern in this study.

Uganda's National Policy for the Conservation and Management of Wetlands Resources (1995)

This policy focuses specifically on wetlands: their conservation, management, and sustainable use, recognising their ecosystem value and the need for Environmental Implications and Assessments (EIAs) for activities affecting them. In Iganga District which has important wetland ecosystems highlighted in this policy, its relevance is critical in this study.

Uganda's National Forestry Policy (2014)

This policy underscores the ecological and socio-economic importance of forests (water regulation, soils, biodiversity) and guides management of forest reserves, community/private forests, and aims to safeguard forest cover. Given the deforestation pressures in Iganga District (as documented) this policy is of high relevance to this study.

Uganda's National Climate Change Policy (2014)

This policy outlines Uganda's approach to climate change adaptation and mitigation, focusing on resilient development of vulnerable sectors including agriculture, water and environment. For regions like Iganga District facing changing rainfall, deforestation and land use change, this policy

underpins national support for climate-sustainable environmental management, thence projecting high relevance to this study.

Uganda's National Biodiversity Strategy and Action Plan III (2025-2030)

Though more recent and focused on biodiversity, its goals (enhance biodiversity conservation, reduce biodiversity loss, ensure equitable sharing of benefits of genetic resources) are foundational for environmental sustainability. In Iganga District where ecosystem degradation is a concern, this strategy provides a current national framework for biodiversity and ecosystem conservation.

Uganda's National Climate Change (Climate Change Mechanisms) Regulations, 2025

These regulations operationalise parts of climate change policy by establishing mechanisms such as a carbon credit framework, access to climate finance, and sector-specific emission reduction plans. For sustainability in regions like Busoga, mechanisms for carbon credits, forestry/agro-forestry and wetland restoration may be relevant.

Application of the highlighted Policies in the context of Busoga region

Although the policies above are national in scope, many of their provisions apply directly to sub-regions and districts like Iganga. For example;

- i. Wetland and forest degradation issues correspond to the Wetlands policy, Forestry policy, and the national biodiversity strategy.
- ii. The national water policy is relevant in connection with the water bodies, rivers and wetlands in Iganga District.
- iii. The climate change policy and regulations are pertinent to address erratic rainfall, deforestation, land-use changes in Iganga District (which have been documented).

- iv. Furthermore, the regional strategic framework (for example the regional development plan's Pillar 5: Environmental Sustainability) explicitly references interventions in wetlands, tree planting and water bodies across districts, Iganga District inclusive.

1.3 Statement of the Problem

Ideally, it would be good practice to integrate environmental sustainability strategies into traditional religious healing practices. However, at the time this study was conducted, the scope of the problem centered on the exploitation of natural resources such as medicinal plants, sacred groves, animal products, water bodies and minerals that were historically protected through cultural and religious practices thereby promoting stewardship (Ssenku et al.,2022). The nature of the issue lies in the growing number of traditional healers, whose increasing demand for natural resources has diminished environmental stewardship. The weakening of traditional taboos and spiritual beliefs has led to risks including habitat loss, overharvesting and accelerated environmental degradation. In summary, the environmental stewardship which used to be promoted and protected through traditional healing practices, for example, taboos, superstitions, religious beliefs and rituals such as planting a bark-tree (Mugaire) at the burial of a clan leader in Busoga are history (Ssenku et al, 2022). The growing number of herbalists is putting environmental sustainability at risk (Tabuti, 2018). The deteriorating traditional religious laws on environment also pose yet another challenge (Isiko, 2018). In addition, limited research on traditional healing practices in Busoga region also creates a serious gap. Among other risks, the environment is being eroded away; plants and animal species are being destroyed and may become extinct through over-harvesting and other dangers like soil erosion. The study highlights the urgent need to examine environmental impact of traditional religious healing systems, which have remained largely overlooked. Consequently, if this issue remains unaddressed, the community

risks losing both its cultural heritage and the natural balance necessary for sustainable environment. This study is therefore, determined to close the gap between traditional healthcare and environmental sustainability through knowledge dissemination.

1.4 General objective

To explore the influence of African traditional religious healing practices on environmental sustainability in Bulamagi Sub- County-Iganga District.

1.5 Specific Objectives

The specific objectives of the study are to:

- i. Examine the common Traditional religious healing practices and sites used in Bulamagi Sub-County-Iganga District.
- ii. Discuss the implications associated with the extraction and use of natural resources in traditional religious healing in Bulamagi Sub-County-Iganga District.
- iii. Explore strategies which enhance the integration of environmental sustainability in traditional religious healing practices in Bulamagi Sub-County-Iganga District.

1.6 Research Questions

- i. What are the common traditional religious healing practices and sites in Bulamagi Sub-County-Iganga District?
- ii. What are the implications associated with the extraction and use of natural resources in traditional religious healing in Bulamagi Sub-County-Iganga District?
- iii. What strategies enhance integration of environmental sustainability in traditional religious healing practices in Bulamagi Sub-County-Iganga District?

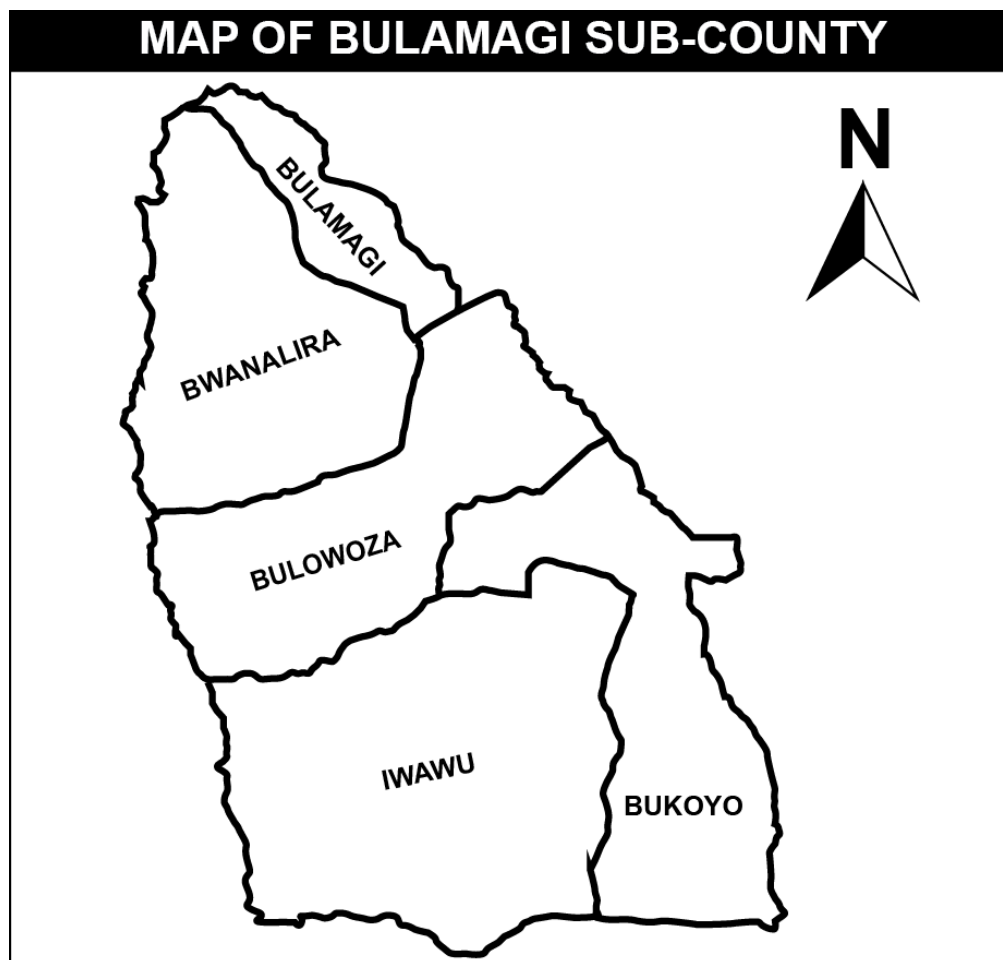
1.7 Scope of the study

This section covers the Geographical, content and time scope as explained under the subsequent subheadings:

1.7.1 Geographical scope

The study was conducted in Bulamagi Sub-County-Iganga District, well known for having many Traditional Religious Healers and sites as evidenced by signposts, radio adverts on IFM, NBS, Bbaabba FM. Existence of Maadhigandere and Walugogo spiritual water-bodies, Nsobani Spiritual Hills in Iwawu, Busu Caves, Okoyo Rock in Bukoyo, Kigulu Hills & Rocks in Bukaye all surrounded with medicinal forested areas (Abbo, Okello, Musisi, & Waako, (2012). Specific locations are the parishes of; Bulowoza, Bukoyo, Iwawu, and Bwanalira, all closely clustered in Bulamagi Sub-County located North-East of Iganga Municipality, 3 kms off Iganga-Kamuli road just after Tembo Steel Works Ltd company. In the whole of Busoga sub-region, this location has witnessed increasing traditional healers, healing sites and herbalists whose activities heavily rely on the local environment. A map of Bulamagi Sub- County was provided in Figure 1.1

Figure 1.1 A Map a showing Bulamagi Sub-county in Iganga District



(Source: Office of District Planer; Iganga District Local Government, 2025)

1.7.2 Content Scope

The content scope of the study focused on the different common traditional healing practices and sites used in Bulamagi Sub-County-Iganga District, implications associated with the extraction and use of natural resources in traditional religious healing in Bulamagi Sub-County-Iganga District and strategies which enhance the integration of environmental sustainability in traditional religious healing practices in Bulamagi Sub-County-Iganga District.

1.7.3 Time Scope

The time scope of the study is the period from 1980 to 2024. This period is associated with the deterioration of the environment in Bulamagi Sub-county. 1980-2024: is a period of drastic change in flora and fauna in the area under study due to increasing Traditional Religious Healers whose activities are heavily dependent on environment in Bulamagi Sub-county-Iganga District, Eastern Uganda (Buyinza, 2019). What used to be a green and attractive natural environment is no longer in existence.

1.8 Significance of the study

The research explores the role of traditional healing practices on sustainable resource use, as well as the potential challenges posed by modern pressures. By examining the unique practices in Bulamagi Sub-county, the study is intended to contribute to the broader discourse on integrating traditional knowledge with modern environmental management strategies. This is considered crucial at a time when Uganda faces loss of biodiversity resulting into calls to adopt more sustainable development pathways.

The findings of this study should significantly influence local policy regarding resource management and conservation practices, ensuring that indigenous healing systems are recognized as valuable contributors to environmental sustainability. Moreover, the research has the potential to guide community-based interventions, fostering an integrated approach to healthcare and environmental preservation. Understanding how traditional healing practices can coexist with or even enhance contemporary conservation efforts may provide a practical solution to the challenges associated with environmental instability in the region.

This research is relevant not only to the academic field of African indigenous knowledge systems but also to practical, real-world challenges in resource management, health, and environmental conservation. By shedding light on the intersection of traditional healing practices and environmental sustainability in Bulamagi Sub-county, this study contributes to preserving both cultural heritage and natural environment, offering insights that could be applied to similar contexts across the region.

In addition, the study findings may be used to document and validate traditional healing practices as a basis for providing recognition, conserving the environment and preserving cultural heritage.

Furthermore, the study findings may be used to reveal other measures for conserving the environment while respecting African traditional healing practices. This might include encouraging sustainable harvesting, promoting alternative medicine, and strengthening regulations to protect the environment. This may further help local traditional medicine practitioners, healers and the public to sustainably harvest medicinal plants and use wildlife products, being cognizant of sustainability strategies of resources for future generations. At the same time, the study may be used to obtain relevant data on how traditional medicine practices impact on environmental sustainability strategies. This would be very beneficial to future researchers by leveraging available written literature.

Above all, schools, forestry department, Environmental NGOs and activists should use the findings to promote sustainable practices that align with traditional practices to enhance conservation efforts. The study, therefore, highlights sustainable practices that ensure the long-term availability of medicinal resources, thus supporting community health and well-being.

All in all, by integrating traditional practices with modern conservation techniques and strategies communities are expected to maintain their cultural identity while protecting their environment.

In summary, the study provides evidence-based recommendations for policies that support sustainable practices in traditional medicine, influencing environmental and health legislation. Local governments are expected to use the findings to promote sustainable development strategies that incorporate indigenous knowledge and practices, ensuring that policies are culturally appropriate and effective. As if that is not enough, the study may contribute to the academic body of knowledge on the intersection between traditional medicine and environmental sustainability, offering new research opportunities.

Finally, researchers are expected to use the study findings as a basis for comparative studies in other regions, or to develop collaborative projects that bridge traditional practices and modern environmental protection, conservation and preservation measures.

In summary, examining the common Traditional healing sites used in Bulamagi Sub-County: provides baseline data on sacred ecological zones, aiding in their conservation and policy recognition. Discussing the environmental impact associated with the extraction of natural resources in traditional religious healing reveals unsustainable practices and their effects, guiding regulation and sustainable resource use.

Summary on Significance of the study findings:

Academic: To add indigenous knowledge and sustainability in terms of literature.

Policy: To guide environmental and healthcare strategies.

Cultural: To preserve heritage and traditional religious practices to align with the social and Cultural Sustainability theory (Gascoigne, 2009).

Community: To promote sustainable resource use and determine environmental sustainability.

1.9 Definition of Key Terms

The following key terms have been identified and explained as used in this dissertation basing on different sources.

i). African Traditional Religious Healing Practices

These are practices which often involve the use of medicinal plants, animal products, spiritual rituals, and other natural resources to promote physical, mental, and spiritual well-being (Kone, & Dadié, 2018).

(ii). Environmental Sustainability

In this context, it refers to the use of natural resources in a way that conserves and prevents environmental harm, particularly through the responsible use of resources (Ndabeni, & Slinger, 2020).

(iii). African Traditional Medicine Practitioner

In this context a practitioner is an individual who possesses specialized knowledge and skills in the use of African traditional healing methods. They include the preparation and administration of herbal remedies, spiritual healing, and the use of other indigenous resources (Ofori & Agyekum, 2017).

(iv). Traditional Plants

These are plant species that have been used by local communities, particularly in African traditional healing practices, for medicinal, nutritional, and cultural purposes (Adu-Bonsaffoh, & Asare, 2019).

(v). Animal Species

These are different species of animals that are either directly used in African traditional healing (through products like bones, blood, skin, or organs) and are valued for their role in local cultural practices or spiritual healing (Mbiti, 2007).

(vi). Mineral Resources

These are Natural resources such as clay, silt, salt, and other minerals that are used in African traditional healing practices for medicinal purposes, either as components of remedies or in rituals (Anyinam, 2016).

In summary, this study operationalized the key terms as follows:

Traditional Healing Practices Categorized into the following:

- | | | | |
|------|--|---|------------------------------|
| i. | Divination | - | Spiritual healing |
| ii. | Herbalists | - | Traditional Pharmacists |
| iii. | Traditional Birth Attendants | - | Traditional Midwives |
| iv. | Circumcisers | - | Traditional Surgeons |
| v. | Born Setters | - | Traditional Physiotherapists |
| vi. | Traditional Healing Sites: | | |
| vii. | Sacred forests, caves, water bodies, jungles, hills etc. | | |

Such sites were regarded sacred traditional clinics, therefore, they were traditionally, protected through: religious cultural beliefs containing a lot of ‘dos’ and ‘don’ts!’ e.g, don’t collect firewood from that spiritual jungle, don’t cut that sacred tree!

CHAPTER TWO

REVIEW OF RELATED LITERATURE

2.1 Introduction

This chapter presents the theoretical perspective as well as a review of related literature of scholars and researchers whose work is related to this study. The literature was reviewed from journals, textbooks, magazines, newspapers, resource persons among other sources. The chapter presents a discussion of the theories that underpin the study namely; the indigenous knowledge systems and the social and cultural sustainability theories. It also entails literature on the different healing sites of African Traditional Medicine Practitioners, common African Traditional healing practices, and the impact of the extraction and use of natural resources in traditional healing on the local environment and relevant theories as presented under the different subsequent subheadings.

2.2 Theoretical Perspective

For purposes of underpinning this study, the researcher anchored it on two theories namely; Indigenous Knowledge System Theory (IKS) by Agrawal Arun (1995) and the Social and Cultural Sustainability Theory by Gascoigne George (2009).

The IKS theory was primarily advanced by scholars such as Agrawal Arun (1995), who explored how indigenous knowledge systems are integral to the sustainable management of resources, and how this knowledge is passed on through community-based practices. More recently, scholars like Ndlovu Phelelani (2007) have expanded on the importance of IKS in areas such as health, agriculture and environmental sustainability.

The theory argues that indigenous knowledge systems provide an alternative to Western scientific approaches, especially in managing environmental and health challenges. These systems are deeply connected to the natural world, fostering practices that promote sustainability. African traditional healing practices, as an example of IKS, align with sustainable environmental management by using local, natural resources in ways that ensure long-term environmental balance.

This theory is directly relevant to the study as it supports the argument that African traditional healing practices are not only a source of medical knowledge but are also inherently aligned with environmental sustainability. Indigenous healing practices are often rooted in the sustainable use of plants, herbs, and other natural resources, which can be key in understanding how traditional healing practices contribute to environmental sustainability. In the study, the theory was used to explore how traditional healers' knowledge of medicinal plants and natural resources promote environmental sustainability and health.

At the same time, the IKS Theory was used to analyze the healing practices in Africa, focusing on how knowledge of medicinal plants, sustainable resource use, and environmental balance are embedded in traditional healing practices. The study investigated how these practices foster an interconnected relationship between health and environmental sustainability. However, since the IKS theory could not exhaustively explore the social and cultural component of this study, the researcher adopted the social and cultural sustainability theory to that effect.

2.2.1 Social and Cultural Sustainability Theory

The Social and Cultural Sustainability Theory focuses on the ability of societies and cultures to maintain their social and cultural practices over time while promoting sustainability. This theory emphasizes that cultural practices, social norms, and traditions must adapt to changing conditions to remain sustainable without depleting resources or harming the environment. It stresses the importance of cultural practices, including traditional healing, as vital for preserving both social unity and environmental sustainability.

Scholars such as Gascoigne George (2009) and others have developed the Social and Cultural Sustainability Theory, focusing on the intersection of culture, sustainability, and social structures. The theory has been expanded in the context of global sustainability, emphasizing the need to integrate cultural preservation into environmental practices (Duxbury & Gillette, 2007).

The central argument of the Social and Cultural Sustainability Theory is that sustainable development cannot be achieved without considering social and cultural factors. For African traditional healing practices, this means that the preservation and continued use of indigenous knowledge in health practices are not only important for cultural identity but also contribute to the sustainable use of environmental resources. The theory argues that these cultural practices should be recognized as key pillars in sustainable development.

This theory is relevant because it underscores how African traditional healing is deeply intertwined with cultural sustainability and how these practices contribute to environmental sustainability. Traditional healing practices are culturally rooted and have long been integral to community health and environmental management. The study examined how the sustainability of these healing

practices affects the environment and how cultural heritage and environmental well-being are interdependent.

In addition, the Social and Cultural Sustainability theory was employed to explore how traditional healing practices contribute to social solidity, cultural preservation, and the sustainable use of natural resources. The study investigated how traditional healers, through their cultural practices, play a role in promoting environmental sustainability while maintaining the social and cultural stuff of African communities.

2.2.2 Theoretical complementarity

The linkage between the Indigenous Knowledge System (IKS) Theory by Agrawal (1995) and the Social and Cultural Sustainability Theory by Gascoigne (2009) lies in their shared emphasis on the interconnectedness between culture, environment, and community well-being. Theoretically, the two complement each other because while IKS Theory foregrounds the epistemological and practical dimensions of indigenous knowledge in promoting sustainable resource use and ecological balance, the Social and Cultural Sustainability Theory expands this lens by situating such practices within broader social and cultural systems that ensure their continuity across generations. The IKS Theory alone explains *how* traditional healers utilize indigenous knowledge to manage natural resources sustainably, but it does not fully capture *why* these practices endure or how they contribute to social cohesion and cultural identity. Thus, integrating the Social and Cultural Sustainability Theory provides a holistic framework that recognizes both the environmental and socio-cultural dimensions of sustainability.

The two theories were necessary because this study aimed to understand not only the ecological benefits of traditional healing practices but also their role in sustaining cultural values and social

structures in Bulamagi Sub-county-Iganga District. Their relevance lies in providing a dual analytical foundation: IKS Theory grounds the study in indigenous ecological wisdom and sustainable health practices, while the Social and Cultural Sustainability Theory explains the adaptive and preservative functions of these practices within the cultural fabric of the community. Together, they form a complementary theoretical framework that captures the full spectrum of how traditional healing contributes to environmental and cultural sustainability.

2.2.3 Weaknesses and Mitigation Measures of the two theories

Alongside the strengths of each of the two theories employed to guide this study, there are some weaknesses associated with each of them. The Indigenous Knowledge Systems (IKS) Theory by Agrawal (1995) is often critiqued for its limited ability to account for dynamic social and cultural transformations, as it tends to present indigenous knowledge as static and homogenous, overlooking internal diversities and evolving contexts within communities. This may lead to oversimplified interpretations of traditional healing practices. To mitigate that, researcher integrated participatory ethnographic methods that highlight intra-community variations and evolving knowledge systems, ensuring a clear application of IKS theory in dynamic cultural contexts (Agrawal, 1995).

Similarly, the Social and Cultural Sustainability Theory by Gascoigne (2009) faces criticism for its abstractness and limited empirical grounding, which can make operationalizing the theory in specific, localized studies challenging. This can hinder its practical application in analyzing the concrete environmental impacts of cultural practices. To address that, researcher combined the theory with localized, context-specific data and frameworks that translate its broad concepts into measurable, community-relevant indicators (Gascoigne, 2009).

2.3 Review of Related Literature

The researcher was able to review related literature relevant to this study as presented under the different themes and subthemes based on the specific objectives.

2.3.1 African Traditional Religious Healing Practices and Sites

African Traditional Religious (ATR) practices are deeply rooted in the cosmological understanding that the natural environment is sacred and interconnected with the spiritual world. Central to many ATR belief systems is the veneration of nature spirits, ancestors, and sacred sites such as forests, rivers, and mountains, which are considered dwelling places of the divine (Mbiti, 1991). These practices often promote environmental sustainability through taboos, rituals, and customary laws that protect biodiversity and prevent the exploitation of natural resources (Onyango, 2019). Sacred groves and shrines, for instance, function as community-managed conservation areas, embodying indigenous knowledge systems that align spiritual obligations with ecological stewardship (Omosa, 2020).

This section is subdivided to take care of the African Traditional Religious Practices and African Traditional Religious Healing Sites as presented under the subsequent subheadings.

2.3.1.1 African Traditional Religious Healing Practices

African traditional healing practices have long been recognized as integral to health systems worldwide, with a significant focus on the use of plant-based remedies, rituals, and spiritual interventions. Scholars like Lambo (2017) and Janzen (2018) discuss the deep roots of these practices, emphasizing their role in preserving both health and environmental sustainability. However, a critical analysis of the literature reveals a tension between the empirical evidence of the effectiveness of these practices and the scientific skepticism that often surrounds them. Lambo

(2017) argues that the indigenous knowledge systems embedded in African healing practices offer sustainable alternatives to modern medicine, especially in areas where access to formal healthcare is limited. Nonetheless, the lack of standardized methods for evaluating these practices poses a challenge to their integration into broader health systems (Jiang et al., 2019). The existing literature also tends to focus on the practices themselves, without sufficient attention to the cultural, social, and environmental contexts in which they occur. This study seeks to address this gap by exploring the environmental sustainability aspects of African healing practices, focusing on their interconnectedness with local ecosystems and sustainable resource management.

In South Africa, traditional healers and ritual specialists make use of a wide array of animal species and animal parts for spiritual, magico-religious and medicinal purposes. For example, among Xhosa and Sotho communities in the Western Cape Province, one study documented use of 71 vertebrate species or morphospecies for traditional healing and ritual purposes.

Although this study did not single out goats (*Capra hircus*), sheep (*Ovis aries*), squirrels or pigeons by species name, the broader trend is highly relevant because domestic livestock and wild fauna are commonly incorporated into traditional healing systems (e.g., via skins, fat, whole carcasses, bones) for both “white-medicinal” (physical ailments) and “black/ancestral/spiritual” (witchcraft, curses, protection, wealth) purposes.

Goats and sheep are domesticated animals that serve multiple roles: livelihood (meat, hides), ritual slaughter (for ancestors, healing ceremonies, cleansing), and as symbolic offerings. For example, a study of goat utilisation in rural & peri-urban KwaZulu-Natal found that goats contributed to household income in cultural contexts including medico-cultural consultations.

Other literature on indigenous goats in Southern Africa emphasises their adaptability and value but also notes that, like other ruminants, they can contribute to environmental degradation (e.g., vegetation damage) if poorly managed.

Traditional healing literature (e.g., Horsthemke) documents that sheep and goats are sometimes used in ceremonial/ritual healing (e.g., “sheep are used for ceremonial and healing purposes – for instance combating madness with half-cooked fresh sheep’s brains...”).

Squirrels (small mammal fauna) are less explicitly documented in the South African healing-ritual literature; however, the broader ethnozoological survey mentions that wild mammal skins (including small carnivores or other small mammals) were used to signal status, for healing, or ritual uses (e.g., squirrels, wildcats, hyena tails).

While not directly listed in the key studies above, the pattern supports the idea that small mammals (including squirrel-type species) feature in traditional ritual systems.

Furthermore Pigeons (or similar birds) are also rarely singled out in South African academic studies, yet in African indigenous religions more broadly, birds are used in totemic, ritual and healing contexts. For example, a Zambia study among the Ngoni people found that pigeons held special status, and protected water-source areas where pigeons nested were tabooed, thereby contributing to environmental conservation.

Related studies in Rwanda indicate that traditional healing is deeply rooted in the country's cultural heritage, with a strong emphasis on herbal remedies and spiritual healing. Authors such as Mugisha et al. (2019) highlight that Rwandan healing practices often incorporate elements of divination and ritual, which are seen as essential for the diagnosis and treatment of ailments. However, while these practices are widely respected in rural communities, their effectiveness and environmental

sustainability are not often critically examined. The strengths of the existing literature in Rwanda lie in its documentation of these practices, yet there is a notable absence of empirical studies linking these practices to environmental conservation (Mugisha et al., 2019). This gap is important for the current study, which aims to fill this void by investigating how Rwandan traditional healers utilize indigenous plants and practices in a manner that contributes to environmental sustainability.

Relatedly, in the Democratic Republic of Congo (DRC), African traditional healing practices are not only widespread but also crucial to healthcare in rural and underserved regions (Senghor et al., 2020). The DRC's vast biodiversity plays a significant role in the availability of medicinal plants, with many traditional healers relying on forest resources for their remedies. However, the literature presents conflicting viewpoints on the sustainability of these practices. On the one hand, scholars like Mbuyi (2018) argue that traditional healing practices in the DRC promote the preservation of local plant species, aligning with environmental sustainability goals. On the other hand, others (Ngoma et al., 2016) caution that the overharvesting of medicinal plants in the DRC may contribute to deforestation and biodiversity loss. This contradictory evidence presents an opportunity for the current study to examine the environmental impact of medicinal plant use in Uganda's healing practices, considering whether these practices are indeed sustainable or unintentionally harmful to the environment.

Goats and sheep: In Uganda, for example, rural communities use goats (especially particular colours like black or white) in traditional religious healing and ritual sacrifices via traditional healers, offered to gods, ancestors or spirits in response to calamities, illness, infertility or other community disruptions.

Among the Lugbara of Uganda, a sheep is one of the preferred sacrificial animals in rites of purification and illness, whereas goats are more often used for other spirit-related healing.

In southern Africa, among the Zulu people, sheep and goats are used in ancestor-worship and cleansing rituals: a goat's entrails may be used as part of healing, and a black sheep may serve as a "scapegoat" for group purification.

These practices illustrate how domesticated livestock become embedded both in healing and spiritual systems.

From an environmental sustainability perspective: while goats and sheep are domesticated and hence less immediately risky than use of wild fauna, their ritual use still intersects with land-use issues (e.g., grazing, stock numbers, breed choice) and cultural demand. One review from Ethiopia noted that mammals (including goats and sheep) are the most commonly used animals in traditional medicine and that much of this use is wild-sourced, raising concerns about sustainability.

Pigeons: There is less specific literature on pigeons per se in healing-ritual contexts, but one study of the Ngoni people in Zambia found that pigeons had special sacred/ritual status: these birds were tabooed for ordinary use, reserved for chiefs or specific ritual occasions, thereby contributing to their conservation by limiting harvest.

Some available literature shows that ritual or religious value can lead to protective social norms (taboos) that support sustainability.

Squirrels: Specific data on squirrels in traditional healing rituals is scarce in the documented African literature. However, broader ethno-zoological reviews frequently remark that small wild

mammals are part of healing/ritual trade, often less documented than large mammals, and these practices raise conservation concerns due to extraction from the wild. For example, a South African review on wild animal use in traditional healing found many small and medium wild mammals being used, though squirrels were not always singled out. So the gap suggests more research is needed to cover squirrels and similar small fauna.

Still in Uganda, the integration of African traditional healing practices with modern medicine has been a subject of both interest and critique (Mugisha & Makumbi, 2020). Traditional healers in Uganda employ a combination of herbal medicine, spiritual rituals, and community-based healing, which are seen as complementary to conventional healthcare. While the literature documents these practices extensively, scholars have been less forthcoming about their environmental sustainability. A notable strength of Ugandan literature is its attention to the social and cultural relevance of traditional healing (Mugisha & Makumbi, 2020), but a major gap remains in understanding how these practices contribute to environmental sustainability.

Ugandan scholars like Byaruhanga (2017) have touched on the role of indigenous knowledge in preserving the environment, yet they often fail to provide a comprehensive analysis of the ecological balance maintained through these practices. This current study seeks to bridge this gap by critically examining the ways in which Ugandan traditional healers not only treat ailments but also engage in practices that protect and sustain the local environment, particularly in relation to medicinal plant conservation and ethical harvesting practices.

According to Nabukenya, Rubaire-Akiiki, Olila, Ikwap & Höglund (2014), goats, sheep, squirrels and birds such as pigeons are used in African Traditional Religious healing in different parts of Africa. Goats for example, are used in sacrificial rituals by traditional healers to appease ancestors

or local gods when serious misfortunes or illnesses occur (e.g., infertility, mysterious diseases or epidemics or plague). The animal's blood or bones may also be used for divination.

Research findings based on survey report that goats in Uganda are “normally offered as sacrifices by witch-doctors and traditional religious faith healers to appease local gods, the spirits of dead people and ancestors” in cases of misfortune (e.g., infertility, disease, epidemics or plague). In specific practices: goats of particular colours (black or white) are used; goat bones are thrown and patterns read diagnostically. In Ugandan traditional religious healing contexts, goats serve as sacrificial offerings to spirits/ancestors when illness, infertility or mysterious calamity afflicts an individual or community; the animal may also be used in divination (bones) and purification (FAO and Nabukenya et al., 2014).

2.3.1.2 African Traditional Religious Healing Sites

Across the world, healing sites in African traditions are gaining recognition as vital components of environmental sustainability, particularly in their roles in maintaining cultural and environmental balance. According to Lockett (2016), these healing sites, often found in sacred natural landscapes such as forests, rivers, and mountains, are deeply embedded in African cultural practices. Healing traditions are not only seen as a therapeutic practice but as a way of conserving biodiversity. Yet, the scholarly community has been divided on how these practices intersect with environmental conservation. While some studies highlight the significance of these sites in maintaining ecological stability (Berkes, 2018), others, like Schilder (2017), argue that the practices might not be sufficient in addressing the modern threats to environment. There is a critical gap in integrating these traditional healing practices into formal conservation policies. This study will attempt to explore how healing sites can serve as bridges between African traditional knowledge and contemporary environmental sustainability approaches.

Similarly, in Tanzania, healing sites are deeply ingrained in local traditions and serve as crucial spaces for both physical and spiritual healing (Mbise, 2019). These sites are often located within sacred forests or hills that hold both cultural and medicinal significance. Studies like those by Mushi and Mwandosya (2020) underscore the importance of such sites in the promotion of environmental sustainability, linking traditional healing with the preservation of natural ecosystems. However, some scholars have critiqued the lack of formal documentation of these practices and healing sites, leaving the richness of indigenous knowledge at risk of being lost (Moshi et al., 2018). While Mushi (2021) acknowledges the importance of these sites in environmental conservation, they argue that more contemporary ecological perspectives should be incorporated to ensure the sustainability of these spaces. On that note therefore, issues of traditional healing practices and environmental sustainability are by literature continental.

In a related development, Kenyan scholars have also been particularly focused on the relationship between indigenous healing practices and land conservation, recognizing healing sites as integral to both cultural and environmental sustainability (Muthiani, 2017). In areas such as the Kikuyu and Maasai territories, traditional healing sites are often located in places with high ecological value, such as forests and water sources. While some studies like those of Mbaabu (2019) highlight how these sites are preserved as sacred and remain untouched by modern exploitation, others, such as Njenga (2021), emphasize the conflict between modernization and the continued significance of these spaces. The environmental degradation caused by land encroachment and deforestation in Kenya have been identified as a threat to these sacred healing sites (Karani & Ngugi, 2020). A major gap in the existing literature is the lack of a comprehensive understanding of the role of government policies in preserving these healing sites. This study will aim to explore how

governmental and community efforts can work together to protect these spaces from further degradation. This can help researchers in Uganda to learn from the challenges of the neighbors.

In Uganda, healing sites have often been linked to spiritual practices and medicinal traditions of various ethnic groups, including the Baganda and Basoga (Musoke, 2016). According to Tushabe (2018), these healing sites are often located in areas such as forests, caves, and rivers that are believed to possess healing powers. The strength of Ugandan research in this area is its recognition of the deep interconnection between traditional healing practices and environmental conservation (Kigonya, 2019). However, there are significant gaps in how this knowledge is integrated into national environmental policy. While much attention has been given to the value of these spaces for cultural preservation, the potential for their contribution to biodiversity conservation remains underexplored. Additionally, the lack of empirical research on the impacts of modern development on the sustainability of these sacred sites is a significant oversight (Kizito & Tamale, 2021). This study intends to fill this gap by examining the environmental role of healing sites and the barriers to their conservation within the Ugandan context.

2.3.2 Implications associated with the extraction and use of natural resources in traditional religious healing

From the Global perspective, the extraction and use of natural resources in traditional healing systems is a widespread phenomenon, reflecting how communities draw on flora, fauna and mineral resources for spiritually and culturally embedded health practices. For example, the theoretical work by Deopa and Rinaldo (2023) demonstrates that in contexts of traditional religion (here in Benin) adherence to indigenous belief systems corresponded with higher forest cover, suggesting that religious beliefs may influence resource extraction practices and conservation outcomes. This provides an important global vantage: traditional religious practices are not just

health-related, but are embedded in ecological systems of resource extraction and use (Deopa & Rinaldo, 2023). Meanwhile, systematic reviews show that traditional healing systems are widely used globally, particularly where biomedical services are limited: a review of sub-Saharan Africa found traditional healers play a major role in mental health care, though little is said in that review about the sourcing of natural materials. (Brown et al., 2023). This body of work highlights that natural resource extraction and its conservation and sustainability implications are integral to traditional healing. The global literature, however, tends to treat “traditional medicine” as a health-service issue rather than directly focusing on environmental implications of resource extraction, indicating a gap in linking the two domains.

Similarly, turning to Africa, empirical studies reveal more concretely how medicinal plants and other natural resources are harvested for religious/spiritual healing. In South Africa, for instance, a study of the Bapedi traditional religious healers found 95% of healers practiced rituals before plant harvesting (Chavunduka cited in Nanyingi et al., 2011) to secure ancestral blessing for efficacy, but also implicitly manage resource use. The research noted that root and bark harvesting, common in those practices, may threaten species survival given tree-dependence of those parts (Nanyingi et al., 2011). In Nigeria, extensive ethnobotanical research shows that communities harvest large numbers of plant species for traditional healing: one survey documented 183 medicinal plants in Lagos State alone (Omotayo et al., 2025). While these studies focus on medicinal plants, they less often explicitly address the scale of extraction, sustainability pressures, or the religious context of use. Further, an assessment of Nigeria’s regulatory framework for traditional medicine shows that policies are often weak and harvesting rights unclear (Osunyikanmi, 2024), signifying institutional gaps in managing the extraction/use of natural resources in healing contexts. Therefore, in Africa, the literature clearly links resource extraction

for healing, but less explicitly links traditional religious healing, natural-resource extraction, and environmental/health implications.

Relatedly, in East Africa the link between traditional healing, extraction of natural resources, and sustainability appears more prominently in ethnobotanical work. In Kenya, Okello, Nyunja, Netondo & Onyango (2009) documented 107 medicinal plants among the Sabaot of Mt. Elgon used for traditional remedies; critically, they found most species were under threat from over-harvesting, with roots (47.3%) most used, followed by bark (23%) and leaves (22.8%) harvesting roots and bark in particular raises sustainability issues. Similarly in Tanzania, Amri & Kisangau (2012) studied villages around Kimboza Forest Reserve and found 82 medicinal plant species, of which 65.9 % were collected from the wild; roots (29%) and bark (21.7%) were heavily used, raising threat to wild populations. They thus recommended community education on sustainable harvesting and domestication of key species. The study among the Hehe in Iringa (Mkenda et al., 2025) recorded 152 medicinal plant species and found that practices such as “sacred groves”, spiritually guided harvesting and selective harvesting were already used as conservation tools. These illustrate that in East Africa the extraction-use-healing nexus is documented with greater attention to environmental conservation. However, fewer studies explicitly frame the practice within “traditional religious healing” (versus general ethnomedicine) and fewer still focus on institutional or policy implications of extraction linked to sacred healing sites.

In another development, in Uganda, there are several studies documenting medicinal plant use, indigenous healing and associated resource extraction. For example, Ssenku et al. (2022) in Butaleja District (Eastern Uganda) documented considerable medicinal plant use and highlighted unsustainable harvesting and potential extinction risk: Uganda is among the top ten countries with high threat of medicinal-plant extinction. The study pointed out inadequate documentation of

traditional medicinal knowledge (TMK) and major threats in plant harvesting and trade. Similarly, Asiimwe, Namukobe & Byamukama (2021) in communities around Mabira and Mpanga forest reserves documented the medicinal plants used and concluded that forests and indigenous knowledge need preserving. In a more specific healing-practice context, Sekagya et al. (2024) explored how Baganda traditional spiritual healers (Balubaale) train in both spiritual and material (living and non-living) resources, noting that the healers engage the “spiritual powers of non-material and materials such as living and non-living things through rituals” (Sekagya et al., 2024). This illustrates the religious healing dimension—but does not explicitly document the extraction or ecological consequences of the materials used. While there is no specific published study of “Iganga District” that richly links extraction of natural resources, traditional religious healing and implications, the available Ugandan literature clearly shows (a) reliance on medicinal plants in healing systems, (b) use of wild resources often harvested unsustainably, and (c) growing risk to biodiversity and knowledge erosion (Ssenku et al., 2022). This sets the stage for a focused inquiry into Iganga District’s traditional religious healing context, especially given the resource-use and health-service interface.

2.3.2.2 Key summary gaps in the literature for objective two

From this review several key gaps emerge:

First and foremost, there is lack of studies explicitly linking traditional religious healing (rather than general ethnomedicine) with natural-resource extraction. Many studies focus on medicinal plants for health, but fewer engage with religious/traditional spiritual healing systems that draw on natural resources (e.g., sacred groves, ancestral sites, ritual extraction) and their ecological implications.

In addition, there is limited geographic specificity around extraction impact at district/local levels (e.g., Iganga District) especially in Uganda. While Uganda has ethnobotanical studies, few zoom in on the dynamics of extraction-use in traditional religious healing in a specific district context, considering both health and environmental impacts.

Furthermore, there is insufficient attention to sustainability, conservation and ecological outcomes of extraction. Although several East African studies note unsustainable harvesting, they seldom quantify extraction volumes, assess resource depletion over time, or integrate ecological/biodiversity monitoring with healing practice contexts.

At the same time, there is low integration of policy, regulation or governance dimensions of resource extraction in healing systems. The link between traditional healers' resource use, formal regulation (or lack thereof), land/forest governance, and environmental health is under-explored.

More still, there is scarce work on implications for health outcomes, environmental justice and livelihoods. Few studies combine health healing implications with ecological degradation, community livelihoods, and resource rights/justice in a comprehensive way.

Finally, there is knowledge erosion and inter-generational transfer issues. Several studies note that younger generations are less knowledgeable (e.g., Wanjohi et al., 2020 in Kenya), but robust longitudinal studies on how this affects resource extraction, sustainability and healing practices are lacking.

2.3.3 Strategies which enhance the integration of environmental sustainability in traditional religious healing practices

Globally, there is a growing recognition of the intersection between spirituality, religious healing practices, and environmental sustainability. Studies of “ecospirituality” emphasise how indigenous and faith-based religious healing traditions may support sustainable relationships with the natural world: for instance, a systematic review of ecospirituality and health found that indigenous peoples’ worldview linking humans and nature can support environmental stewardship. (de Haro-Giménez, et al., 2023).

Such frameworks provide useful entry points for considering how traditional religious healing often embedded in Indigenous knowledge, use of medicinal plants, sacred groves and rituals could integrate environmental sustainability. For example, the notion that sacred sites, taboos or spiritual rules protect natural resources has been documented (Saj et al., 2006; Mabvurira et al., 2021)

From a strategic standpoint, some proposed global strategies include:

1. Recognising and mapping the environmental-ecological dimensions of traditional healing systems (i.e., documenting how healers use medicinal plants, how sacred groves are maintained, how rituals respect natural cycles).
2. Fostering partnerships between healers/traditional religious actors and conservation/environmental agencies so that traditional healing sites become integrated into biodiversity- or ecosystem-management frameworks.
3. Promoting intergenerational knowledge transfer (so that medicinal plant knowledge and associated sustainable harvesting is maintained).
4. Embedding environmental education in religious/traditional healing settings (so healers and ritual-leaders become stewards of biodiversity).

5. Developing policy frameworks that formally recognise the role of spiritual/traditional healing systems in sustainable natural-resource management (NRM).

These strategies suggest that rather than viewing traditional healing solely as a healthcare issue, one can view it more holistically as a node where health, spirituality and environment meet.

Similarly, in the African context, there is increasing scholarship linking traditional religious healing, spirituality and environmental sustainability. For example, a paper on African indigenous religion and the natural environment notes that many African communities believe ancestral spirits reside in forests, caves, streams, and that taboos protect these sacred natural places (de Haro-Giménez et al., 2023). Thus, at the Pan-African level, we can identify strategic elements: (a) use of sacred groves, totems, taboos as environmental protective devices; (b) integration of healers in conservation; (c) recognition of healing plants and associated knowledge as part of biodiversity; (d) linking ritual practices to ecological ethics (e.g., respect for life, nature, ancestors) (Mabvurira et al., 2021). For example, UNESCO's publication of East African case-studies on living heritage emphasises how intangible cultural heritage including healing rituals can contribute to biodiversity conservation and climate-change mitigation.

On the above note, therefore, strategies in the African context for integrating environmental sustainability with traditional religious healing might include: embedding sacred-nature education in healing rituals; creating collaborative networks between traditional healers and environmental NGOs; documenting and managing medicinal-plant harvesting sustainably; recognising sacred sites of healing as protected areas; training healers in sustainable harvesting, habitat restoration and climate-adapted planting.

Relatedly, in South Africa, research on religious communities and environmental care provides useful insight. For example, Kabongo and Stork (2022) studied African-initiated churches in Limpopo and found that such churches are adapting adaptive practices to climate change, including tree-planting campaigns, water conservation and framing “care for creation” as a Christian mandate. Though not limited to traditional healing per se, it demonstrates how religious organisations are bridging spirituality and sustainability. The strategy here includes mobilising congregational networks for environmental stewardship, and framing theological narratives (“creation care”) to support behaviour change.

In a similar situation, in Zambia, Kanene (2016) studied the Tonga community of southern Zambia and identified indigenous practices of environmental sustainability: selective harvesting, totemism, taboos, and sacredness of water sources, organic farming and crop rotation among the Tonga people. Separately, Chibuye & Buitendag (2020) looked at the Lamba people in the Copperbelt and proposed an indigenised eco-theology which blends African traditional religion with Christian eco-theology, emphasising regard for “Mother Earth” and revived traditional environmental ethics. Strategies emerging from these studies include: engaging traditional authorities (chiefs, elders) in environmental governance; codifying taboos and totems as part of formal conservation policy; training healers/herbalists in sustainable harvesting; integrating indigenous worldview (sacred nature) into eco-theological frameworks.

Furthermore, in Nigeria, research shows how religious and traditional healing worldviews affect environmental behaviours. For instance, Obiwulu et al. (2023) found that among Southeast Nigeria, traditional religious worldviews seeing ailments as spiritual/cosmic imbalances shape healing practices. At the same time, Oguche, Ogunkolu & Ohuwa (2025) found in Dekina LGA, Kogi State that religious teachings (Christian, Muslim, Igala traditional) strongly correlate with

tree-planting, sacred-grove preservation and water conservation rituals. In Nigeria, the strategy emphasises leveraging faith-leaders and religious institutions as agents of environmental conservation, integrating environmental ethics into religious teaching and rituals, and revitalising traditional ecological knowledge within faith/traditional healing contexts.

In another development, in Kenya, Mamati (2018/2020) studied the Sengwer traditional religion and environment in Embobut Forest, and found that youth awareness of environmental change is mediated through religious/traditional worldview: “Environment is not apart from the spiritual world.” Moreover, Ng’ang’a et al. (2025) studied cultural and religious healing practices in western Kenya and found that traditional and religious healers are often first port of call for communities, and that their practices influence vulnerability to infectious disease (largely through animal-use, rituals). While the latter focuses more on health-risks, it suggests that healers are key actors in community practice and could be mobilised for environmental/health integration. Strategies in Kenya might involve training healers in safe sustainable resource use (e.g., medicinal herbs harvesting), integrating healers into public health/environmental outreach, and using sacred-site narratives to preserve forest/plant resources.

Similarly, in Uganda, Sekagya et al. (2024) explored becoming a traditional spiritual healer among the Baganda, showing how ancestral-spirit engagement and medicinal knowledge are central in healing practices. Lee et al. (2025) studied perspectives of traditional healers, faith healers and biomedical providers in rural Uganda on mental illness, indicating rich pluralistic healing systems co-existing. Though neither study focuses directly on environmental sustainability, they highlight the centrality of healers/traditional religious actors in Uganda’s health systems. From these insights, strategies for Uganda would include: embedding environmental-sustainability modules in healer training curricula, mapping and protecting medicinal-plant resources used by healers,

preserving sacred groves associated with healing rituals, and forging partnerships between healers, conservation agencies and health ministries.

In addition, while Uganda lacks a large number of published studies that directly examine environmental sustainability in traditional religious healing, the studies above (Sekagya et al., 2024; Lee et al., 2025) indicate the potential for such integration. The fact that traditional spiritual healers (TSHs) among the Baganda engage ancestral spirits and manage medicinal-plant knowledge suggests a latent environmental dimension (Sekagya et al., 2024). Therefore, strategies in Uganda could be developed as follows: (1) Conduct situational mapping of traditional healing practices and their environmental linkages (e.g., medicinal-plant use, sacred forests, taboos on harvesting). (2) Develop sustainable-harvesting guidelines for medicinal plants used in healing, in collaboration with healers/traditional religious leaders. (3) Recognise and protect sacred groves or natural sites tied to healing rituals (with legal or community-based protection) and link them to biodiversity conservation programmes. (4) Engage healers in environmental education and advocacy positioning them as community stewards of nature as well as health. (5) Build a cross-sectoral network: health system + traditional healing sector + environment/conservation sector; including monitoring of natural-resource use in healing practices, training of healers in environmental sustainability, and inclusion of healers in national policy frameworks on biodiversity and health.

2.4 Summary of key gaps in the literature review

From this literature review several key gaps in scholarship emerge:

First and foremost, there is lack of direct empirical studies that explicitly examine environmental sustainability integration in traditional religious healing contexts (most studies focus either on

health/healing or on environment/sacred nature, but rarely the nexus of traditional healing practices plus ecological sustainability).

In addition, there is limited country-specific work in East-Africa; particularly Uganda explores both healing practices and sustainable natural-resource use in detail.

At the same time, there are insufficient longitudinal or intervention studies: many works are descriptive or cross-sectional; few evaluate strategies or programmes that integrate healers in environmental management or assess outcomes (e.g., biodiversity metrics, sustainable harvesting practices).

More still, there is scarcity of policy-oriented analysis: few studies examine how traditional healing systems can be formally incorporated into national environmental and health policies, or the institutional challenges thereof.

Furthermore, there is an issues of weak documentation of medicinal-plant harvesting practices linked to traditional healing and how this can be sustainably managed across generations and ecosystems, including neglect of monitoring and accountability mechanisms for environmental impacts of healing practices (e.g., overharvesting of medicinal plants, destruction of sacred groves for ritual materials).

Finally, there are Cultural change pressures, where many studies note that taboos and traditional environmental ethics are declining under modernisation and religious change; there is limited research on how to revitalise or adapt those norms for contemporary contexts.

On the above note, therefore, addressing these gaps would strengthen the evidence base for effective strategies to integrate environmental sustainability in traditional religious healing practices.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter presents how the research was conducted. It describes the research paradigm, design, research approach, study population, sample size, data collection methods, quality control, data collection procedures, data analysis techniques and ethical considerations as explained under the subsequent subheadings.

3.2 Research Paradigm

This study was anchored on the Interpretivist Paradigm which is a qualitative research paradigm that emphasises understanding the meaning and experiences of individuals within their social context (Schwandt, 2007). This paradigm is particularly suitable for exploring social phenomena as it allows researchers to gain deep insights into the local beliefs, values and practices. It therefore, has a close connection with traditional healing practices and environmental sustainability as observed by some researchers and scholars (Cohen, Manion, & Morrison, 2018 & Bryman, 2016). Interpretivism provides for qualitative methods such as in-depth interviews, focus groups and participant observations which in this case allowed the researcher to interpret the meaning that community members under the area of study attach to their healing practices and environmental implications (Silverman, 2017).

For that matter, Phenomenology Design as one of the intellectual positions of Interpretivism was adopted to underpin this study. Phenomenology looks at the way in which individuals make sense of the world around them (Van Manen, 2014). Phenomenologists maintain that human action is meaningful and that people, therefore, ascribe meaning to both their own and other people's

actions. By adopting phenomenology, the task of the researcher was to interpret and gain an understanding of human actions and then describe them from the point of view of the person or group being studied as rightly asserted by (Silverman, 2017).

3.3 Research Design

A phenomenological research design was employed to guide this study. This Design was considered appropriate for this study because it sought to explore and interpret the lived experiences, beliefs, and perceptions of traditional religious healers and community members regarding how their healing practices contribute to environmental sustainability in Bulamagi Sub-county. Phenomenology allows for deep, contextual understanding of indigenous knowledge systems and the meanings attached to natural resource use, conservation, and spiritual practices (Creswell & Poth, 2018). Since the study focused on capturing objective experiences and cultural interpretations rather than testing hypotheses or measuring variables, a phenomenological approach was most suited to uncover the essence of these lived realities.

3.4 Research Approach

The study adopted a qualitative research approach to enable the researcher describe the situation as it existed under the area of study. The participants were individuals from Bulamagi Sub-county who were practitioners and recipients of traditional religious healing services, as well as community elders and local environmental conservationists. These participants were able to share their experiences, beliefs, opinions and knowledge about how traditional religious healing practices influenced environmental sustainability. On that note, therefore, the research followed the steps outlined by Moustakas (1994) in phenomenological research, including bracketing (removing the researcher's preconceptions) and focusing on participants' descriptions of their

experiences. On that note, the researcher chose to analyze data through thematic analysis to identify recurring patterns and themes related to the connection between traditional religious healing and environmental sustainability. At the same time, since African Traditional Healing Practices are shaped by historical, cultural, and social influence, it was important to use a research design that emphasizes the subjective and lived aspects of these practices. In this case, phenomenology provided a platform for understanding how practitioners and community members perceived their relationship with the environment, and how traditional healing practices contributed to or hindered sustainability.

3.5 Target Population

The population comprised of Diviners (spiritual healers), Herbalists (Traditional Pharmacists), Traditional Birth Attendants (TBAs), Traditional Surgeons, Faith Healers, Witch-Doctors (Protective Healers), and Bone Setters within the sub-county under study. Each of these categories had a very significant contribution in informing this study. The different categories of participants as highlighted informed the study through their experiences and aspirations in the service of traditional religious healing practices. At the same time, all the selected participants were knowledgeable about the various herbal medicines in their environment, which they harvested and used in their traditional healing practices; and therefore, they had a serious stake to play in the continuity of the traditional religious heritage and environmental degradation and conservation as well. The researcher knew that the wealth of knowledge, skills, expertise and vast experience would facilitate the entire exercise of obtaining the required information as reflected in the research objectives and questions as indicated in chapter one of this dissertation.

3.5.1 Sample Size

Upon the researcher realizing that the participants constituted a wide range of categories, it was important to select a specific sample in order to conveniently manage the exercise of data collection and this was based on the level of experience of participants as indicated in Table 3.1 and also in consideration of the available time including other important resources required for the exercise.

Table 3.1: A Summary of Population, Sample Size, Sampling Technique and Tool

Category	Total	Sample	Sampling Technique	Data Collection Method	Data Collection Tool
Diviners (Spiritual Religious Healers)	11	08	Purposive	Observation & Interview	Checklist & Interview Guide
Herbalists (Traditional Pharmacists)	07	04	Purposive	Interview	Interview Guide
Traditional Birth Attendants	08	04	Purposive	Interview	Interview Guide
Traditional Surgeons	04	04	Purposive	Interview	Interview Guide
Faith Traditional Religious Healers	09	08	Purposive	Observation & Interview	Checklist & Interview Guide
Witch-Doctors (Protective Healers)	08	08	Purposive	Interview	Interview Guide
Traditional Bone Setters (Traditional Religious Physical Therapists)	06	04	Purposive	Interview	Interview Guide
Grand Total	54	40			

(Source: *Primary data, May 2025*)

A sample size of forty (40) participants was selected and recruited for the study. Since most traditional healers under the area of study had signposts to provide direction and contacts, at the same time, some of them always announced their business over the local radio stations, e.g, IFM (Eriso ly'e ghanga), Bbaabba FM, NBS etc., they were therefore, easily reached by the researcher. A case in point: *Habbib Mpanga omusawo ow'ekirugavu omukugu ayagaanibwa ku Luguudo olw'e Mpanga e Bunhiiro, akola ku ndwaire dhonadhona, nga ni kwotaire n'amaani eg'ekisaadha, yeranga buli lwa Saasira, esaawa ibiri edh'obwire (8.30 PM) ku NBS, 89.4.*

3.6 Sampling Technique

This study being qualitative in nature, non-probability sampling techniques (Purposive and Expert sampling) were adopted to recruit the participants. These techniques were adopted for intentional selection of participants with specific knowledge, experiences, expertise or roles related to healing practices and environmental sustainability, ensuring rich, relevant and reliable data. They ensured opportunities for in-depth understanding of the phenomenon under investigation.

Eight (08) Diviners (Spiritual Healers), four (04) Herbalists (Traditional Pharmacists), four (04) Traditional Birth Attendants (TBAs), four (04) Traditional Surgeons, eight (08) Faith Healers, eight (08) Witch Doctors (Protective Healers) and four (04) Bone Setters (Physical Therapists) totaling to forty (40) participants were selected and recruited for the study. This was the most basic form of non-probability sampling. Purposive sampling was considered appropriate because it enabled the researcher to deliberately select participants who possessed specific characteristics and experiences relevant to the subject of interest thereby ensuring rich, in-depth and meaningful data as asserted by (Palinkas et al., 2015).

Still with the help of purposive sampling, one (01) Chairperson of herbalists in every parish was recruited using expert sampling technique to make a total of four (04) participants. Since this study required participants with specialized knowledge to provide in-depth insights about the problem under investigation, the 4 Chairpersons were recruited based on their recognized expertise on the topic under study. The overall total of participants was 40.

3.7 Data Collection Procedure

The data collection procedure began with obtaining an introductory letter from the Directorate of Research and Graduate Training (DRGT) of Kyambogo University, which authorized the researcher to conduct fieldwork. This letter was presented to the Chief Administrative Officer (CAO) of Iganga District to gain official permission to access the study area. Upon approval, the researcher proceeded to Bulamagi Sub-county, where data collection was carried out.

3.8 Data Collection Methods and tools

The methods of data collection were purely qualitative in nature since the major intention was to describe a situation as it existed without manipulating any results. The methods, therefore, included participant observation and in-depth informant interviews.

3.8.1 Participant Observation

The researcher directly participated in observing participants' activities, rituals, Traditional Medicine, healing sites and practices in order to obtain firsthand information. This method was helpful in enabling the researcher to gain a deep understanding of the practices, ideas, perceptions, opinions and cultural context of the participants. Direct observation using a checklist (*See Appendix II*) was suitable for this study because it facilitated the researcher to systematically

capture detailed, context-specific behaviors, interactions, and practices in natural settings, ensuring validity as observed by earlier researchers and scholars (Creswell & Poth, 2018). In addition, Observation provided in-depth insights and helped the researcher in building rapport with the participants.

3.8.2 In-depth Interviews

The Researcher conducted unstructured interviews with participants to explore their ideas, beliefs, perceptions, practices, experiences and views. An interview guide comprising of open-ended questions was used to obtain a detailed understanding of the participants' perspectives. In-depth Interviews (*see Appendix I*) were considered appropriate for exploring African Traditional Healing Practices and their role in environmental sustainability in Bulamagi Sub-county because they enabled the researcher to obtain in-depth insights and culturally rooted perspectives.

On that note, therefore, field Notes were taken by the researcher during and immediately after the observation. These notes were captured on behaviors, interactions, contexts, and any non-verbal body language. In addition, Audio-visual tools on the consent of participants were used to capture real-time events and interactions as they occurred in their natural settings. The reason was that such records would always be reviewed and retrieved later during the researcher's ample time. In addition, observation checklists were developed and employed with a focus on Traditional, healing practices, healing sites, traditional medicine, environmental sustainability strategies etc. ensuring that key elements could not be missed out. Finally, Photography was also employed to ensure that relevant images were taken to capture the settings, key moments, or relevant artifacts in the environment. This was done in order to complement the field notes and provide a visual context. All those were done with the consent of the participants.

3.9 Data Quality Control

For purposes of authenticity of results, the researcher was able to address the four major components: credibility, transferability, dependability and conformability accordingly. Credibility was ensured through strategies such as member checking, prolonged engagement, and triangulation to confirm findings as observed by (Lincoln & Guba, 1985). In order to ensure Transferability the researcher provided rich, detailed descriptions of the research context, participants, and processes so that others may determine if the findings could be applicable to similar settings (Patton, 2015). Dependability was maintained by keeping a detailed audit trail of data collection and analysis procedures, and by conducting peer debriefing to confirm consistency of findings (Schwandt, 2014, Lincoln & Guba, 1985). In order to ensure conformability, an initiative was made to maintain a clear audit track by documenting all research decisions, data sources, and analysis steps to show that findings were shaped by the data and not researcher bias as observed by (Lincoln & Guba, 1985).

3.10 Data presentation and Analysis

The research data is presented interpretatively and descriptively. In interpretative presentation, the researcher applied only meaningful insights from the participants and document analysis that were related to particular research objectives and questions. In some areas, the data was presented descriptively, especially related to data generated from observations and interviews. This is made in forms of story narratives and direct quotations from participants and description of some pictures.

3.11 Ethical Considerations

As stated earlier, the researcher obtained a letter of introduction from the Directorate of Research and Graduate Training (DRGT) introducing her to the relevant authorities, right from the District authorities of Iganga District down to the local authorities of the villages under study in Bulamagi Sub-county, Kigulu County down to the Parish Chiefs and Local Council one Chairpersons (*see appendices iii & iv*).

The researcher took care of ethical considerations and approvals in this research to ensure the protection of participants' rights, welfare, image and dignity while maintaining the integrity and credibility of the research process as asserted by experienced researchers and scholars (American Psychological Association, 2020). Obtaining a letter of introduction to relevant authorities (*see appendices iii & iv*), also contributed to the ethical considerations. In addition, anonymity was highly observed since some participants were comfortable to have their identities revealed but others were not comfortable. The researcher decided to employ Pseudonyms as indicated in Table

Table 3.2: A summary of categories of participants with specific Pseudonyms

Category	Pseudonyms	Sample Size	Range
Diviners (Spiritual Religious Healers)	D	08	D1-D8
Herbalists (Traditional Pharmacists)	H	04	H1-H4
Traditional Birth Attendants	TBA	04	TBA1-TBA4
Traditional Surgeons	TS	04	TS1-TS4
Faith Religious Healers	FTRH	08	FTRH1-FTRH8
Witch-Doctors (Protective Healers)	WD	08	WD1-WD8
Traditional Bone Setters (Traditional Physical Therapists)	TBS	04	TBS1-BS4
Grand Total		40	

(Source: *Primary data, May 2025*)

3.11.1 Informed Consent

An Informed consent form that clearly elaborates on the goal and purpose of this study was filled by all those who participated in the research. That arrangement enhanced confidentiality of the research which increased their involvement and participation. The participants were also informed that participation in the study was voluntary and they had a right to accept or decline to participate or withdraw from the study exercise anytime. The researcher gave a thorough explanation about the purpose of the study and their right to either accept or decline to participate was made very clear.

3.11.2 Participants' Confidentiality

In trying to protect participants' confidentiality, each participant's record was given a unique ID number. The researcher requested the participants to sign the consent forms to show their

willingness to participate in the exercise. The principle of anonymity was also strictly followed. The identity of the healing sites and participants were not disclosed. Pseudonyms were used to disguise the participants' identities and the sites under the study areas.

Confidentiality was put into account so as to protect respondent's image since some of the issues handled pertained to the security of their work. Respect and dignity were accorded while setting the interview guide. Thus, all respondents were given equal treatment to enable each of them participating willingly. The researcher made an effort to ensure that participants voluntarily consent to take part, with full awareness that their involvement was not mandatory. Their anonymity ought to be assured, with any personal identifiers removed to maintain privacy. Additionally, the study was designed to minimize any potential harm or discomfort, ensuring participants' well-being throughout the research process.

3.11.3 Intellectual Property Rights

For lack of an appropriate phrase in the context of this research, the intellectual property rights in this work was not used in a legalistic form but in the functional form as protecting information related to the use of herbal medicines. This arose from the interactions with some of the traditional healers and herbalists. It was observed that some participants withheld information about certain herbal plants and their uses. It was clear that they were keen to protecting the knowledge about the medicines as known to them from being accessed or known by other people in ways they did not approve. There were cases when herbalists did not reveal to the researcher what particular plants or animal parts were used for or the disease they are meant to heal. The researcher safeguarded the participants' interests by limiting attention to the objectives of the study and not asking specific questions that are related to the use of medicines, and limiting the mention of specific information related to the use of certain medicines in this study.

3.12 Limitations and Delimitations of the study

This sub-section presents the limitations and delimitations of the study as indicated under the subsequent subheadings.

3.12.1 Limitations

- (i) Some participants had been suspected to be too busy, therefore, lacking time for interacting with the researcher.
- (ii) The research project had been anticipated to be for a money generation venture, leading some participants to expect some financial package at the end of the interaction with the researcher.
- (iii) Some participants had been anticipated to fear to provide specific information thinking that the researcher was on a spying mission!
- (iv) Lack of enough time to carry out the research exercise, the researcher being a full time employee.

3.12.2 Mitigation Measures

For purposes of making the research process and exercise possible, the following strategies were employed: delimitation

- (i) Prior planning was done and the meeting time with the participants was arranged to their convenience.
- (ii) Right from the beginning, the researcher made it very clear to the participants that the research project was for purely academic purposes and it had nothing to do with financial

venture. This was clear in the minds of participants who would otherwise expect payments in turn.

- (iii) The researcher-built confidence in the participants on the utmost concealment and high confidentiality of information obtained during the research process and also provided mechanisms of anonymities, with an assurance that no participant's name would be mentioned anywhere.
- (iv) To overcome limitation of time, the researcher delegated some of her duties to the colleagues and dedicated every free time to the research project.

CHAPTER FOUR

TRADITIONAL RELIGIOUS HEALING PRACTICES AND SITES

4.1 Introduction

Starting with chapter four and the subsequent ones, results were presented, analyzed and interpreted accordingly following the major themes indicated in chapter by chapter based on the specific objectives. This chapter explores the traditional religious healing practices among the Basoga of Bulamagi sub-county. It addresses questions related to the specific objectives, which are concerned with the exploration of traditional healing practices. Various traditional healing practices are explained and reasons for particular sites being associated with traditional healing practices are also highlighted. It recognizes the fact that traditional healing forms among the Basoga are interrelated, given the spiritual dimensions they take. In this chapter, focus is on majorly three forms, which include herbal medicine, spiritual healing and divination. Like elsewhere in Sub-Saharan African, traditional healing goes hand in hand with African spirituality and it is almost hard to conceptualize traditional healing independent of the African traditional religion (Gumede, 1990). The spiritual phenomenon of African traditional healers is largely determined by the African philosophy of disease, which views all forms of illnesses as resultant from a spiritual imbalance and source; traditional healers in many traditions, also serve as religious leaders. The two offices of traditional healing and priestly or prophetic roles are intertwined and embodied in an individual; and lastly traditional healing takes a form of communication with the spiritual world, between the healer, victim and the domain of ancestral spirits and deities (Mokgobi, 2014). The common healing practices in Bulamagi were herbal medicines, which involved the use of plant, animal products and mineral resources; divination and spiritual healing. These healing practices were in most cases intertwined because of the spiritualities attached to

African traditional medical practices. The common healing sites in Bulamagi, as explained in the subsequent paragraphs were forested areas, river banks, jungles and rocks.

4.2 Traditional Religious Healing Practices

The traditional healing practices in Bulamagi are integral and encompass spiritual and natural forms, which take nature of practices like herbal medicine, divination and spiritual healing as explained under the subsequent subheadings.

4.2.1 Herbal Medicine

Herbal medicine emerged as the most dominant form of traditional healing practice, based on both majority of participants' responses, revelations from the traditional healers and direct observation by the researcher. It was the cornerstone of traditional medicine. Although the English use the word *herbal* medicine which presupposes plant materials, African Herbal medicines include minerals and animal parts as well (Ozioma & Chinwe, 2019). Words for herbal medicine in many African languages suggest the idea of 'black medicine', African medicine, traditional medicine to denote the ancestral or cultural idea that relates to the origin or knowledge of the medicine.

Herbel medicine among the Basoga of Bulamagi is a convenient form of medication, readily available in the natural pharmacy. One respondent noted as quoted:

...herbs are what we touch, see and prepare directly. They are around us all the time and form the basis of our healing. At the same time, herbs can psychologically prepare the mind of the patient, most especially, those that are bitter, are easily associated with reaching the affected areas of the patient and immediately felt. Above all, herbs are also easy to replace, nurture, transplant and care for... (Interview session with H1, May 2025)

These findings align with studies by Tabuti (2007), who emphasized the centrality of herbal practices in rural Uganda due to the ecological accessibility of medicinal plants and the cultural familiarity of their use. In this natural environment, almost everything in nature is medicine, which

can either treat or cause disease. For example, while sap of the blackjack-*bukaala* (Lusoga) can be used as painkiller, sap from the milk bush plant is poisonous and can cause severe pain.

4.2.2 Common herbal medicines used

Among the Basoga of Bulamagi, like other Africans elsewhere in the continent, human beings are supposed to live an optimized life. Life is understood in a unitary sense to encompass other members of the family and society. A successful human being is supposed to be healthy and wealthy, with a balanced life between the spiritual and natural realms. Health is conceptualized to include physical, social, spiritual and emotional wellness and not just absence of disease (Ajima & Ubana, 2018; Omonzejele, 2008). Given the unitary essence of life, society wellbeing is prioritized and idealized in many societies, other than individualism. This is why; a sick relative or family member would make the entire family sad and uneasy.

Challenges or illnesses take different forms, apart from the common physical illnesses. The people of Bulamagi believe in holistic wellness and being, which include emotional, relational, social, spiritual as well as physical being. In this way, there are herbs which are used to restore balance in all these spheres of life. This is to say that, there are herbal medicines to treat and prevent emotional pains, restore social relationships, create spiritual harmony as well as treating physical illnesses like malaria, colds and flu, physical injuries (insect and snake bites, cuts etc.). At the same time, there are herbal medicines for love, marriage and sexual relationships, herbs for winning contests like elections or court-cases, herbs which bring luck and favor and prevent misfortunes; herbs which calm storm spirits and restore calmness and spiritual steadiness, and so many others. Given their holistic nature, herbal uses and practices regulate the social, economic and even political existence and co-existence of the people of Bulamagi, it is prudent to evoke the words of

Alexander Paul Isiko, “herbal healing practices are...an ‘institution’ upon which society’s everyday activities are based” among the people of Busoga (Isiko, 2019b, p. 71).

In the course of this study, the researcher visited various homes of traditional healers. It was observed that where traditional healers lived had so many plants, which seemed to be planted in small but organized courtyard and backyard gardens. Some of the homes were located in isolated places, only with distant neighborhoods. On appointment, the researcher arrived at a traditional healer’s home in Bulowoza village at 11am. The appointment was to be 12:00 noon, but the researcher chose to arrive earlier to beat any eventuality. Her house (traditional healer) was made of mud and wattle, with rusted iron-sheets. Inside her house was a sitting room, where she offered treatment and consultative services to people from various places. By the time the researcher arrived, there was a line of about five people, 4 women and 1 man seated on the outside bench, waiting for their turn for treatment. The treatment and consultations happened so fast that almost every patient was handled within 10 minutes. The homestead had innumerable pigeons around, and the entire environment buzzed with pigeon sounds and flap of their wings.

By 12:00 noon, the traditional healer changed her attire and started to attend to me. She explained that her work starts very early in the morning, and sometimes she works at night depending on matters at hand. She boasted of how effective her treatment was, so much that her services draw clients from distant places like Kenya, including *Bazungu* from Europe. She was a relatively young woman, well-built bodied, estimated to be in her late 40s with a chocolate skin complexion. She spoke Lusoga language, but also could occasionally speak some words in English language.

What was amazing was the fact that she knew my name, my late father’s name and my husband’s details! This, freaking as it was, in some way was helpful because my intention had already been

introduced to the participant, which granted me ease of entry and positionality in my interactions with the traditional healer. She took me around her house and showed me various articles used in traditional treatments. She also took me around her home and gardens and showed me various medicinal plants. She revealed that, every plant and tree had its own medicinal value. When I (researcher) asked her about the function of the many pigeons in her compound, she informed me that they were her messengers in delivering medicines to various patients around the world; suggesting that those birds (pigeons) worked like drones to deliver medical cargo to various clients.

What was clearly observable was that the traditional healer did not reveal details of the herbal medicines in relation to the illnesses they treated. This was also observed in other cases where participants largely restrained themselves from mentioning what particular herbs treated. She showed me a tree, which in Lusoga is called *muyirigiti* (*Erythrina abyssinica*) (see figure 3 in appendix). The tree blossomed with brilliant red flowers, rough and thorny bark with visible evidence of debarking. About a few meters near her house was also another twinning plant known in Lusoga language as *ekirama* (*Kigelia Africana* or sausage tree) (see figure 2). She stated that, its fruits (which she called breasts), mixed with another tree, which she showed to me, called *Musambamaadhi* (*Entada Abyssinica*) (see figure 4) are important for women related issues (but without revealing the exact diseases they treat). *Musambamaadhi* is a tree like a plant that is leguminous and produces beanlike seeds. Other plants included *muti gw'abakazi* and *Kayaala* (*Lusoga*) among others.

Most herbs mentioned were the common ones for common sicknesses like malaria, flu and cough and related symptoms. For instance, for malaria-like symptoms, *Omululuza* also called *olubiriizi* (see fig. 1 in the appendix) was the prevalent herbal medicine. A herb known as *Vernonia amygdalina* in English, is a shrub commonly used in the treatment of malaria fever, not only in

Busoga, but also in many other traditions like Buganda and Bugisu. Almost every part of the shrub is useful namely leaves, roots, and bark. The leaves have a rich green texture and appearance, with bitter sap. While the leaves sap can be squeezed in water and taken orally, its stem, bark and roots can be boiled in water and taken orally as well. In young children, the leaves are used for bathing those believed to be having malaria symptoms (Interview session with Participant, May 2025).

Another herb for treatment of malaria was wild cucumber (scientific name *Momordica foetida*) and locally called *Eibombo*. (See fig.5 in appendix). It is a common herb known for its values in the treatment of malaria. The sap extracts from the leaves are mixed with water and taken orally at some intervals or administered to people believed to have malaria. This plant is also used for bathing to deter fowl body smells (odors) especially among youthful people. The participant hailed its power in treating body odors that is associated with puberty growth in young boys and girls.

Another common herb was Aloe-vera, locally called with various names as *Omusubati*, *Akanzironziro* or *Ekikaka*. This is used for the treatment of various illnesses ranging from Malaria to diabetes. Its leaves are boiled in water in order to effect the extraction of the bitter properties which are helpful in the treatment. It is a herb which is grown in many homes. It can grow naturally at any point in a home and doesn't require much care. The extracts can be taken as they are or mixed with natural honey.

Another common herb in Bulamagi was *Omujaaja* (*omudyadya*), known as African Basil in English. Together with other common herbs like ginger, garlic and lemons were mentioned by many respondents as common herbs used in the treatment of various diseases. Where-as this shrub-like plant (*omujaaja*) commonly grows in the wild, it was widely seen planted in people's compounds and tendered, with visible evidence of use. *Omujaaja* leaves can be boiled or used

directly in the treatment of various illnesses. It is used directly as an inhalant for the treatment of flu symptoms like blocked nose and headaches. It is also boiled and used in the treatment of stomach or digestive problems in adults and children. In young babies, small drops of boiled leaves are used to treat heartburn related symptoms.

Another common herb was called *Lusansa*, which in English is called Christmas candlestick or Klip dagga or lion's tail. *Lusansa* has so many values in the treatment of various diseases, especially related to infections and open injuries. Its leaves, flowers, and roots are all useful in the treatment of various diseases.

Worth noting is also the prevalence of herbal medicines that boost sexual libido and functions in both men and women. Almost all participants both herbalists and users seemed to know about certain herbs which address particular sexual functions. Among men, the problem of erectile dysfunction was believed to be treated using certain herbs like *Omulondo* (*Mondia whitei*). This is hawked and also sold by stationed herbal clinics and kiosks especially in townships. One respondent, a herbal medicine seller, who identified himself only as H3 (*pseudonym*) reported that *Omulondo* was a root gotten from underground. That it grows largely along river banks and places with many stones. It treats male sexual impotence by giving men urge for sex and can also help to reduce on premature ejaculations. For it to be more strong in its treatment, it is mixed with other roots, and can be either chewed directly or boiled and taken as tea. Participant (H2, May 2025) (*Pseudonym*) informed that *Omulondo* and other related roots were on high demand especially by young men like boda-boda riders. That on average, he could sell 50 kilograms per day to the users and also other people who hawked them in big towns like Iganga, Jinja and Kampala.

While men are consumers and users of herbs which enhance their *libido*, women on the other hand used several herbs that were believed to increase both libido and sexual fluid, for example, *kaanuunu* for libido, *okra*, *mutere* and *raw cassava* for fluid to avoid vaginal dryness during sexual intercourse. There were also other investments in herbal medicines reported to treat yeast infections and protect reproductive health. Plants like *omugugu* (*Silybum marianum*, and in English called milk thistle). It is worth noting that, while in the case of men, the *Omulondo* is common herbal root, other herbal medicines related to human sexuality remained a secret by the herbalists. They could not mention them by names.

There were other herbal medicines which included animal parts. Information about the animals and how they were attained remained elusive as participants like the herbalists declined to reveal. For instance, in herbal stall of participant (H3, May 2025), there was evidence of bird features, small animal skins, porcupine spines and an assortment of bones and teeth. There were rolls of dry clay, locally called *emumbwa*, which is a mixture of minerals and some herbs. There were also piles grinded/powdered herbs, which the participants gladly explained their values as quoted;

...these are a mixture of tree barks, stems and roots used for the treatment of all sorts of infections. It is to be boiled in water and taken independently, or mix with tea. It helps to cleanse the body, fallopian tubes, uterus, urinary tracts, kidneys and blood. Patients have to take it after food, because it is very strong. It is also good for men who don't perform well in bedroom matters to satisfy a woman... (H4, May, 2025)



Figure 4.1 Emumbwa, and Mirondo

Discussion: The herbal medicines and their use among the people of Busoga is an old practice and are as old as Busoga itself. The proximity of other African neighbours like the Baganda and Lango has also enriched the use of herbal medicines due to cultural interactions with these neighbours (Isiko, 2019b). Herbal in Bulamagi cannot be conceptualized in isolation from the wider Busoga community. Whereas the people of Bulamagi may not border natural features like big lakes and rivers as other people of Busoga like in Jinja and Mayuge, their idea of traditional healing and herbal use is largely the same. What the traditional healer in Bulamagi may lack, can be attained from other traditional healers within the tribe or across to other tribes.

Traditional herbal medication practices are also very spiritual among the Basoga. It is a way of spiritualizing nature as the domain for the spirits, and acknowledging that humans alone cannot achieve sustainable health leaving without the power of the invisible realities. Unfortunately, as we shall see later, this realization in the spiritual power of nature is being destroyed by the very humans either knowingly or unknowingly, hence causing environmental damage and a spiritual instability with nature.

As observed above, there was a lot of secrecy or retention of information about certain herbal uses. Whereas this can be understood in contemporary terms as protection of knowledge and information, it clearly informs this study of how capitalism and money economy have permeated the African traditional layer. It was my observation that retention of information about the medicinal values of certain plants and trees was meant to enhance monopoly of knowledge for financial gains. Obviously, revealing information about the medicinal details of certain plants in nature would be giving out knowledge for free. It is no wonder that in some parts of African, knowledge in herbal medicine goes through training, where the trainees pay relevant costs in order to be educated in the field of herbal medicine (Abet, 2024; Mokgobi, 2014).

However, through a lot of prompts, the researcher engaged some of the herbalists, faith healers and witch-doctors and managed to reveal a few of the herbal medicines and their uses with reservations of detailed information as indicated in table 4.2.2.1.

Table 4.1: Summary of some common herbal medicines and what they treat as discovered during data collection in Bulamagi Sub-county: the Lusoga name, the ailment and the English translation.

Eriina ly'ekimera oba ekisolo/ekinhonhi	Ekikozesebwa / Obulwaire bwekiidhandaba (Lusoga)	English Translation (What it treats)
Ekikaka (Aloe-vera)	Okwidhandhaba ekirwaire eky'olukuku, omusuudha n'e ky'okulumwa mu nda n'amabwa.	Treats skin rashes, reduces fever, and soothes stomach pain and fresh wounds.
Omulondo (roots)	Okwidhandhaba Obufwirwa oba amaani g'ekisaadha amatono	Treats malfunction/ boosts libido mainly among men.
Akanuunu (amakoola)	Okwidhandhaba Obufwirwa oba abwetaavu obutono mu bakazi. Era okuyimbula amaaadhi agaziya okalabuka.	Treats malfunction/ boosts libido mainly among women. To boost fluid inducement in the woman during sexual intercourse.
Engoma y'enkoko	Eraga obukulu n'ekitiisa eky'omugeni	Symbolizes the dignity of the visitor who caused the chicken to be slaughtered.
Omujaaja(amakoola)	Amakoola gafumbibwa, gaanhweebwa okuwonia amabwa ag'omunda nkani alusa.	The leaves are boiled to generate local syrup to treat peptic ulcers.
Obuviiri bwa Akadaada (squirrel's fur)	Obuviiri bwokyebwamu oluvululu lukozesebwa okwawula abagonzania	When the fur of a squirrel is burnt, the smell causes hatred among loved ones, e.g., couples.
Amasavu g'omukira ogw'entaama (Fats from a sheep's tail)	Amasavu agava mu mukira ogw'entaama gaidhandhaba olunkusense.	Fats from a sheep's tail treat measles.

Eriina ly'ekimera oba ekisolo/ekinhonhi	Ekikozesebwa / Obulwaire bwekiidhandaba (Lusoga)	English Translation (What it treats)
Amasavu ga Ziryamirye (Fats of python)	Amasavu g'aziryamirye gawonia amabwa ga kokolo	Fats of Python treat cancerous wounds.
Olubiriizi (Sodom apple- Solanum incanum)	Okulwanisa omusuudha, akafuba n'ekidumusi	Treats tuberculosis and diarrhea
Engiibwa (Omutima) (Pigeon's heart)	Omutima ogw'engibwa gukozezebwa okunhweeza omukago ogw'abagonzania	A Pigeon's heart cements the relationship of lovers.
Embuzi endheru (Omusaaayi) The blood of a white goat (without any spot) is used to cleanse incest	Omusaaayi ogw'embuzi endheru bwe pye gukozezebwa okunaaza ekitalo.	The blood of a white goat (without any spot) is used to cleanse incest

(Source: Primary Data from participants – herbalists, faith healers and witch-doctors in Bulamagi Sub-county, May 2025)

Basing on information in Table 4.2.2.1, findings reveal a rich integration of medicinal, spiritual, and symbolic practices in traditional healing and cultural rituals within Bulamagi Sub-county. Several plant and animal-based materials are used to address both physical ailments and social or spiritual conditions. For instance, Ekikaka (Aloe vera) and Omujaaja leaves are applied to treat common health problems such as skin rashes, ulcers, fever, and stomach pain, reflecting the community's reliance on natural pharmacology. Other remedies, such as Omulondo and Akanuunu, are used to enhance sexual vitality among men and women respectively, emphasizing the importance of reproductive health in traditional medicine. Animal products also play significant cultural and therapeutic roles: fats from a sheep's tail and python are used to treat measles and cancerous wounds, while the heart of a pigeon and the blood of a spotless white goat are employed in rituals to strengthen relationships and cleanse incest, respectively. These results

demonstrate a holistic healing system where environmental resources plants, animals, and their by-products serve intertwined physical, emotional, and spiritual purposes, highlighting the need for sustainable management of biodiversity to ensure the continuity of these culturally embedded healing practices.

4.3 Divination and Religious Spiritual Healing

Divination is a phenomenon in many civilizations, involving the practice, art and science of determining the hidden significance or cause and course of events. The idea behind divination is that the cause and course of the situation at hand is mysterious, and there are no known facts about it. In the context of traditional healing, ignorance about the cause and the direction of the event is itself an illness. The diviner therefore, reveals to the person concerned, the information, which demystifies the event or situation, and consequently determines the next course of action. Many African traditional societies have diviners. The diviner in many of those societies is known and respected with many elevating titles as the wise ones, the eye of the society, the mouthpiece, the elder etc. because they operate as mediators between the human and spiritual realms. They see into the spiritual world and communicate to the human world, they have the art of speaking into the spirit world and also speak to the human society, and they are endowed with intuition and knowledge which ordinary people do not have.

In the context of this study, it is difficult to speak about divination in Bulamagi in isolation from the rest of Busoga and beyond. Like all African tribes, to the Basoga people in Bulamagi and beyond, experience lack of intelligible information about the occurrence of events which constitutes a psychological illness that needs treatment. First of all, the people seek to have information, which is revealed to them by the diviner through divination. The diviners, upon

revealing the cause and course of events would thereafter, prescribe the medicinal approaches that have to be engaged. In this case, divination serves as a mechanism of diagnosing the illness before prescribing the medications. This study, especially this chapter has benefited very much from the study carried out by Isiko Alexander Paul on the subject of divine healing in Busoga. In Busoga, diviners are known by different names, which describe their work and the esteem with which their practice is held. They are *baswezi*, *balaguzi*, *mandwa*, *baganga* etc (Isiko, 2018). Diviners operate from *amasabo*, which are shrines. These shrines operate as healing centers. Isiko's work documents several divination methods, some of which the researcher did not encounter or hear of in Bulamagi sub-county, like water or bird divination. The most prevalent form of divination was spirit divination. The diviner reveals the cause and course of sickness through divination, when possessed by a divining spirit (Isiko, 2018). Diviners use spiritual resources to identify the cause of the sickness. Such spiritual resources are embodied in physical objects, which may be called fetishes like *amaghembe amatembe*, cowrie shells (*ensimbi*) (Isiko, 2018).

The process of divination is performative, involving music and burning of herbs and sometimes offering of sacrifices, which may include money or material things. Where the diviner uses *amatembe* and cowrie shells, the “diviner takes ten to twelve cowrie shells and puts them together with a similar number of *amatembe*. He takes them in his right hand, shakes them and throws them on a bark cloth or animal skin” (Isiko, 2018, p. 117). After the objects have scattered, the diviner “reads” them and then reveals the cause and course of the problem to the patient; and thereafter, prescribes or administers the medicine.

4.4 Traditional Religious Healing Sites

By the help of an interview guide, participants revealed that among the common traditional healing sites were forests, hills, river banks, caves, valleys and jungles. In terms of majority, simple forests dominated and the minority happened to fall under riverbanks. It is possible that for simple forests to dominate, it was easy for the traditional healing practitioners to establish them since much of their activities were associated with plants, rearing of unique animals, birds and insects which were regarded as medicine. In the process of the verbal interaction between the researcher and one of the participants (Traditional Healer), the following was shared as quoted:

... different herbal plants are many around this homestead as you see because my healing work is deeply dependent on them. Without those trees or herbs you are seeing around, my work cannot survive! As I harvest, I also keep planting because if I don't do so, it becomes very expensive to travel long distances looking for such medicine and yet, the worst challenge is that restrictions are increasing on the harvest of medicine given the ongoing competition regarding traditional healing... (Informant Interview session with a Traditional Healer FRH1-in Buyubu, May, 2025)

Among the most salient ideas the participant shared with the researcher was the practice of continuous planting of trees in the name of traditional herbal medicine in an attempt to guard against scarcity since his work was heavily dependent on plants. The interpretation was that without plants, the traditional healer's work could be threatened! In addition, the practitioner revealed that the competition was increasingly growing, an impression that at the same time, the number of those planting herbal medicine was increasing.

Consequently, the researcher wanted to establish the main reasons those traditional sites were considered significant and sacred for healing practices. In one of the interactions between the researcher and a participant, the following were shared as quoted:

...a traditional healing site is not merely identified and chosen according to own desire or likes, it takes a lot of spiritual guidance based on ancestral background to do so. A vivid example is how this particular healing site was identified, chosen and made sacred for the work I do. It started with important elders of the clan both immediate and distant falling into dreams which directed them to one, identifying me as a potential person to do this work and two, identifying this site as the right sacred place for the work. That is enough to prove to you that the place is actually sacred because thereafter, serious arrangements were taken to secure the place by negotiating with the owner, buying it and organizing it to the standard you have found it and you can also imagine the effort it takes to maintain it...! (Interview session with a Diviner D1 in Bulowoza, May 2025)

Following the verbatim statement of the participant, including the views the rest of the traditional healers under the area of study shared with the researcher, the interpretation was that the traditional healing sites were considered sacred, therefore, leading to their serious protection and preservation of the plants, animals, birds and insects that existed in there.

Worth noting is the fact that the idea which underlay the remote location of traditional healing sites is not limited to Bulamagi. There is a deeper theological worldview which permeates these locations especially in African traditional thoughts. As evident in the narrative above, there is a dominant belief that spiritual forces who are behind traditional healing reside in forests, water bodies, rocks and jungles. Some of these places like forests are believed to be sacred and therefore, have restricted access by ordinary people. Access to these places call for certain ritual activities to maintain their sanctity. The reasons for the choice of such places as healing sites may be obvious and mystical as well.

Forests, rocks, water bodies and jungles are preferred because they create a natural protection away from human encroachment. Humans who visit such places do so on purpose as patients seeking for healing. Places like water banks and Islands have a natural protection of the waters, while rocks by their nature may be less interesting for other human activities. Such places have limited or complete lack of other human disturbances. African traditional healing is also associated with

primitive African beliefs and practices. In the context of globalization and modernity, where African is now infiltrated with western values and ideologies, such places offer some sort of protection from external influence. The practice does not only protect the medicine practitioners, but also patients who visit these places from the ideological contamination of the modern society. A study carried by Annet Nadunga on divination practices in modern societies has revealed that Africans who seek the services of traditional healers do so in secrecy. They visit the healers clandestinely, to suggest that they visit either at night or away from the eye-view of those who know them (Nadunga, 2019).

Some traditional healing practices are performative, and need to be done away from the general public. Certain rituals can be done during the day, while others at night (Sekagya et al., 2024). For such to take place, such isolated locations are important in order for the participants not to infringe on other peoples' rights or to be mistaken by the contemporary laws and law enforcers. For instance, for the rituals which happen during day, the participants can operate effectively away from the public view. It cannot happen in a busy environment without causing public uproar or indignation. A traditional healer in Bulowoza village who the researcher interacted with reported as quoted:

...my work of healing people is not scripted that we follow a certain documented rule. It is spiritual and the trend treatment takes sometimes is determined by the spirits. Some of our healing activities may require ritually washing or bathing a patient from a particular place or spot. This cannot be done during day with full view of the public. There are some rituals which can only be done in secrecy, for them to be effective in their purpose or at-least to protect the integrity of the participants... (WD1, May 2025)

The observation in the foregoing quotation informed the ideological and legal challenges which infiltrate the modern society, where modernity and civility are the frameworks for viewing traditional African practices. It would indeed be problematic in the contemporary society for

certain traditional healing practices to happen without contravening the constitutional and other civil laws which protect decency and public order. For instance, if a person or group of people were to perform a cleaning ritual on somebody in the township, it may attract police intervention or at least attract public criticism. In the late 2024, the images of a woman that went viral on social media, showing her taking a ritual bath along Entebbe Road clearly illustrates this point, where society hates traditional practices (<https://ugandatoday.co.ug/bizarre-rituals-on-ugandan-streets-when-tradition-confronts-public-space/>).

Moreover, according to Isiko, traditional healers are in competition with new religious ideologies, Christianity in particular, which are seen as fashionable ways of living than African cultural practices including medicine (Isiko, 2019a). Because, some of the people who seek traditional healing are people of high profile in society who include business people, academic, politics, and even religious personnel like pastors, it attracts social criticisms if these people were seen openly visiting traditional healers and witchdoctors. In a recent study carried by a team of scholars from Kampala International University, witchcraft practices were prevalent in higher institutions of learning, as office bearers visit traditional healers for lucky charms to help them at work (Vincent & Patience, 2025). Politicians, especially the popularly known Honorable Members of Parliaments constitute a significant percentage of clients in these healing sites (Adolfsson et al., 2024; Ashforth, 1998; Mango, 2006). In 2016, the then former Speaker of Parliament was sited emerging from a shrine at Nhendha Hill in Iganga (Bukonya, 2016; Nadunga, 2019). Nhendha hill used to be a remote location, but the fact that the photographer was able to capture the Speaker of Parliament at the shrine; it clearly describes how modernization has infiltrated the Africa. Religious Healing sites in this perspective therefore, restrict social access, thereby, ensuring the natural protection from encroachments and psychosocial protection in ensuring the patient's privacy from the

scrutiny of the social surroundings. People don't see what happens because healing and its associated events and processes are done secretly. This further enhances customer security and confidence and in turn wins customers' loyalty to a particular healing site.

Another reason for the location of healing sites is related to the African mysticism and religious beliefs: healing is intertwined with African traditional Religious beliefs (Isiko, 2019a). Water bodies, rocks, forests and jungles are spiritual sites, believed to be inhabited by spiritual forces. Such places therefore create a sense of awe, fear and worship among the devotees. Among the Basoga, as also other African cultures, Water bodies are associated with connections to the spiritual world, linking humans to the spiritual realities. The water bodies are not only homes of spirits, but some water bodies are also believed to have been born by the primal ancestors. Among the Baganda, there is a belief that Rivers; Kira and Ssezibwa were born and therefore have mystical powers (Wabyanga, 2023). Among the Akan of Ghana, water bodies like Tano, Bea, and the Lake Bosomtwe were born by the Supreme Being and hence they are spiritual entities (Hagan, 1978).

Although Iganga district does not neighbor any big water bodies like River Nile and Lake Victoria, its ethno-geographical location in Busoga sub-region, among the Basoga people connect Iganga to the wider Busoga which is home to Lake Victoria and flow line of River Nile. Within this ethno-geographical setting, water spirits are believed in. At the site of River Nile is the seat of Budhaagali, including the renowned Nabamba Budhaagali, a traditional diviner and oracle believed to be the embodiment of the Nile Falls spirits, and locally known as Mandwa Budhaagali, meaning "the one on whose is possessed by the spirits" (<https://ennono.org/nabamba-budhaagali-brought-by-spirits-frustrated-by-man-called-by-god/>). Nevertheless, Iganga lies within the larger Lake Kyoga basin, with water bodies like Lake Kyoga, Lake Kwania, Lake Opeti and Lake Bisina (Hesslerová & Pokorný, 2011; Kayendeke, 2018). Within Bulamagi sub-county, there are wetlands like Bugingo

Wetland, and streams like Lumbuye stream, which play a significant role in the healing and spiritual activities.

Water is used in various ways in African traditional medicine and healing practices. Water, (especially large and running waters) is perceived to possess spiritual and life-giving properties (Rinne, 2001). African healing practices sometimes takes a ritual bath in running waters. In doing so, it is believed that all bad omens and evil spiritual powers are washed down by the waters. This feature is commonly associated with African spiritual heritage. In examining the significance of Vaal River to the surrounding communities of South Africa, TJ Mboweni elaborately illustrates how the communities' beliefs, which include healing and wellness are influenced by the river, and how the disequilibrium in their spiritual ecology is being impacted by modern industrialization (Mboweni & De Crom, 2016). In general terms, the concerned communities use waters from River Vaal for ritual sprinkling and baths, healing, divination and other cultural activities (Hagan, 1978; Mboweni & De Crom, 2016). This same view is attested too among the Akan of Ghana (Hagan, 1978), Mpangu people of Congo (Kitewo, 1998) and among various tribes in the Great Lakes regions of East Africa (Kikooma et al., 2024; Orodho et al., 2014; Sekagya et al., 2024). Activities in Bulamagi sub-county at Lumbuye stream (which pours its waters into Lake Kyoga, fall within the same spiritual and cultural healing heritage. The connection to Lake Kyoga which in turn is interconnected with other big water bodies like River Nile and global big water bodies completes the communication line between the sub-county and the rest of the spiritual water bodies.

Further to the above, traditional healers are believed to be spiritual people, or at least operating between the realm of the spirit and the natural realm. They live a humble and not a materialistic life. They mainly live in shanty houses often grass thatched in desolate places like jungles and forests. They invest their minds and time into the spiritual matters, and often become socially

withdrawn from societies around them. This offers them time and space for meditation and revelations and communication with the spiritual world. A traditional healer at Bukoyo interacted with in the course of this research informed that she gets visions about the kind of medicines she is to administer for particular illnesses. To achieve this, sufficient time has to be invested in devotion and communication with the spirits. To achieve proper interaction, she adds, the healers very limited human interference.

Another reason associated with the location of the healing sites is availability of the articles used in the healing process. Although in the preceding paragraph, the spiritual value of water is mentioned, water is important in the physical usage of African traditional healing as medicine itself or ingredients in the medicine. In an interview with one of the Faith Traditional Religious Healers, he reported as quoted:

...River water fetched at particular hours is very effective in treating certain illnesses, especially mental health issues. It requires me to wake-up very early in the morning with the patient and dip him or her in that stream. This has to happen before sunrise or, depending on the nature of the illness, before the river is polluted with human activities, at the time the stream is calm and pure... (FTRH, May, 2025)

This assentation suggests that, in terms of the location, depending on what nature of illnesses can be treated by a particular traditional healer, proximity to the water body is very important. Water as a healing article determines the location of the practitioners. In most African beliefs, mental illness is caused by ancestral spirits. According to the study carried by Yahya Sekagya, some ancestral spirits are water related, and in Luganda language, called *Misambwa Emirunyanja* (Sekagya et al., 2024). In dealing with these spiritual realities, and their healing values depend on the water source such as springs, wells, rain, rivers, lakes, or sea/ocean and the associated cleansing and healing rituals (Sekagya et al., 2024). This reality, properly explains why much of the

traditional healers in many parts of Africa are located near water banks, shores and Islands in order to use the healing properties of the waters (Hagan, 1978). Apart from water itself, water bodies are home to some medicinal objects like plants and other creatures like snakes, snails and stones. Water or aquatic plants may be located only on water banks, or the sickness may require treatment specifically with herbs from the waters. In some tribes, spiritual realities associated with healing are located in particular waters. For instance, deified natural creatures like snakes and other water creatures (Bernard, 2003; Bernard, 2013; Joseph, 2021).

At the same time, forests and jungles were reported as being rich in terms of plants and other related items that were used by medicine practitioners in the area of study. Forests are also homes to other articles/items and creatures are located in such places e.g snakes, tortoises, birds etc. which are hard to domesticate. Furthermore, forests and trees play a significant function in African traditional religious worldview. They provide the links between the sky and earth. The sky symbolizes the spiritual world of ancestors while the earth is the realm of people. In some incidences, some trees and forests have mystical and mythical associations, which help to sustain their sanctity. For example, the Nakayima tree in Mubende is associated with the myths of Ndahura and Nyakayima, the traditional demi-gods associated with the Bachwezi spiritual heritage (Batte, 2012; Nangobi, 2023). Ntiamoa-Baidu (1987) describes a forest in Ghana which is believed to be home for ancestors. That villagers' ancestors were saved from enemies when they hid in the forest; and the forest became sacred as the home for the community spirits and ancestors (Ntiamoa-Baidu, 1987).

Forests also offer varieties of plant and animal materials which are essential in herbal medicine, hence forming a natural pharmacy. The collection of herbal medicines involves proper planning, in which the practitioners map the ingredients and their amounts. Forests offer a variety of plants,

shrubs, moss, flowers, fruits, seeds; tree backs etc. as well as other ingredients like wild honey, as and dew collections which are essential for herbal medicines. In the contexts of modernization and urbanization and reduced biodiversity, there is increasing pressure on land, especially natural forested land. The desired natural plants and animal resources were reported to be disappearing due to agricultural expansions and human settlement-related activities.

Furthermore, the researcher was able to interact with a total of four Traditional Birth Attendants (TBAs) in the area of study. Through both informant interview sessions and direct observation, those women lived in places which were surrounded by forested areas full of traditional medicines and other natural remedies which treat gynecological related conditions. In one of the direct interactions between the researcher and a TBA, the following was quoted:

...In matters of gynecology, I am a very experienced traditional midwife. Sometimes, officers in medical facilities including referral hospitals who find challenges with expectant mothers finally refer them to us for support. What makes a big difference is that even complicated cases like breech which is a fetal mal-presentation and in most cases hard to handle medically, is a walkover when Traditional Birth Attendants are given a chance to handle. In fact, such cases including normal birth deliveries are always successfully handled by us by the help of the strong traditional medicines like *Emumbwa*... (Interview with TBA2, May 2025).

Discussion: Basing on the statement of the TBA in the quotation, findings from the interview revealed that Traditional Birth Attendants (TBAs) in Bulamagi Sub-county play a crucial role in managing both normal and complicated deliveries, including breech presentations. This perspective underscores the perceived competence and confidence of TBAs in managing complex obstetric situations using indigenous knowledge and herbal medicines such as *Emumbwa*. Similar findings have been reported in other studies across sub-Saharan Africa, where TBAs are recognized for their experiential skills, community trust and use of traditional remedies in ensuring safe deliveries (Banda et al., 2020; Okeke et al., 2019). However, literature also emphasizes the

need for collaboration between TBAs and biomedical practitioners to enhance maternal outcomes and ensure safety (World Health Organization [WHO], 2023). The implication of these findings still make emphasis on the fact that the TBAs also like other Traditional Religious healers depend on the local environment for their activities.

In a related development, another category of participants was that of the Traditional Surgeons (TS). They specialized in tooth extraction, tattooing the body for initiation and beautification, therapeutic scarification, management of scalp lipomas, cancerous wounds and circumcision including medicinal scarification. During one of the interview sessions with a Traditional Surgeon, the following was quoted:

...given the experience and knowledge of traditional medicine that I use in doing my work as a traditional surgeon, no medical personnel can compete with me! For example, if you brought two young men for circumcision, you give one to me to circumcise and you take one to a medical facility, even a big hospital for the same, basing on the traditional religious remedies I apply, the one I circumcise traditionally would heal a month earlier before his counterpart who was handled medically...(Interview with TS3, May 2025)

Discussion: Traditional practitioners often express strong confidence in the efficacy of their indigenous healing methods compared to biomedical procedures. As one traditional surgeon asserted, his experiential knowledge and application of traditional religious remedies yield faster postoperative recovery than hospital-based circumcisions (Interview with TS3, May 2025). Such perceptions align with findings from ethnomedical studies indicating that traditional healers derive authority from experiential learning, spiritual beliefs, and community validation rather than formal biomedical training (Abdullahi, 2011; Green, 2015). Research in African ethnomedicine further reveals that many traditional surgeons attribute superior healing outcomes to the synergistic use of herbal preparations and ritual elements believed to enhance tissue regeneration and ward off infection (Okeke et al., 2016; Tapsoba & Deschamps, 2019). Although empirical biomedical

comparisons remain limited, these perspectives underscore the enduring trust communities place in traditional surgical practices, which blend spiritual efficacy with practical therapeutic techniques (World Health Organization [WHO], 2013).

Another unique category of traditional religious healer was the category of Traditional Bone-setters. The researcher was able to interact with a total of four at different interview schedules during the data collection exercise under the area of study. The researcher's focus was to establish if their work had any connection with the environment. During one of the face-to-face interaction in an interview, one of them shared lived experience as quoted;

...being a true traditional Bone-Setter is not by choice, accident or on grounds of looking for survival. It is by luck and initiation which requires a lot of steps and religious rituals. In addition, it also involves a lot of knowledge of traditional remedies to facilitate the healing process of the client. It takes an effort to learn the skeletal system in terms of the type and connectivity of bones. Those traditional bone-setters who are advanced in their skills, knowledge and experience like me, may meet the client only once and the subsequent treatment may be on remote! What happens would be to provide some local natural remedies to work as pain-killer. In comparison with biomedical treatment and efficacy, we are more effective than one may imagine...! (Interview session with TBS1, May 2025)

Discussion: Based on the interview findings, the traditional bone-setting (TBS) practice is revealed as a culturally rooted and spiritually guided healing system rather than a profession chosen by interest or necessity. The participant emphasized that becoming a true bone-setter involves divine selection and initiation through a series of rituals, symbolizing the sacred nature of indigenous medical knowledge. This aligns with existing literature suggesting that TBS practices in many African contexts are inherited through lineage and guided by ancestral or spiritual forces (Ezeome & Anarado, 2018; OlaOlorun et al., 2021). The healer's account highlights the extensive experiential knowledge of anatomy and herbal pharmacology required to facilitate musculoskeletal healing—skills often acquired through long-term apprenticeship (Nwankwo et al., 2019).

Furthermore, the assertion of comparable or superior efficacy to biomedical care resonates with studies reporting high patient satisfaction with TBS due to accessibility, affordability, and perceived effectiveness (Thanni, 2011). Notably, the claim of remote follow-up treatment underscores the adaptability and confidence in indigenous therapeutic processes, despite limited integration with orthodox medicine. Overall, the findings reaffirm the enduring relevance of traditional bone-setting as a culturally legitimate, knowledge-intensive, and spiritually embedded healthcare practice in contemporary society.

CHAPTER FIVE

IMPLICATIONS ASSOCIATED WITH EXTRACTION AND USE OF NATURAL RESOURCES IN TRADITIONAL RELIGIOUS HEALING

5.1 Introduction

This chapter focuses on the environment implications of traditional religious healing practices. It addresses the question raised in response to research question two, which sought to assess the environmental implications of traditional religious healing practices in Bulamagi Sub-county-Iganga District.

5.2 Negative implications

Traditional healing practices pose implications on the environment as largely associated with the methods used in obtaining the herbal materials. The participants in this study affirmed that the key major means of obtaining the medicines were: uprooting plants in order to extract the medicinal roots, picking leaves, cutting or nibbling tree barks from tree trunks, hunting or trapping some animals due to their medicinal tissues, bones and skins, trapping or killing certain bird species (pigeon) to attain medicine, feathers, claws, peaks and mining natural substances from the underground.

5.2.1 Uprooting of plants

Uprooting of the plants to attain their roots is probably the most destructive act on the environment. Most of the participants acknowledged that roots were often considered the most potent (powerful) part of the plant in healing formulations. In all the herbal medicines observed by the researcher, there are root particles. It is methodologically not helpful to present all the medicinal roots and the associated plants in this chapter. The chapter shall just illustrate with few examples the destructive

nature of plant root mining. Root extractions literally kill the plant and also leave the ground bare. Scientifically, roots are a vein through which soil nutrients like water and natural minerals nourish plants. Roots firm-up plants in the soil, and give plant its ecological space within the earth. Using the example of *Omulondo*, as revealed by Tigawalana-Pseudonym (the traditional hear) in the previous chapter, *omulondo* root business is one of the most lucrative businesses because of its sensational association with sexual power. it is enjoyed both in village and urban centers. *Omulondo* is a root, dug from the ground. There is already a growing concern raised by scholars elsewhere in Uganda and beyond that the popularity and rapid extraction of *Omulondo* is leading the plant to extinction (Agea et al., 2008; Aremu et al., 2011). *Omulondo*, as an example of medicinal roots, plays a significant role in biodiversity within the cycle of ecosystem. It provides shelter and food to some insects and animals. Insects like leaf beetles and grasshoppers eat the *omulondo* leaves, and the extinction of *omulondo* may have resulted into these insects dying or resorting to attacking and devastating human plantations. Creatures like snakes, chameleons etc. hide and camouflage in the *omulondo* plants and hence survive from human detection and other predators.

Plant root extraction has resulted into other environmental challenges related to the depletion of plant species and soil loss. Traditional medicinal practices inevitably make humans active agents of soil erosion. Evidence from the field showed a significant extraction of roots from plants like *olubirizi*, *musita* (Sodom apples) *omulondo*, etc. with the remaining parts of the root left bare; while some plants like *Lusansa* were totally uprooted, their roots taken away and the remaining plants left to dry! The exposure of the ground deprives plants like *lubiriizi* ability to keep moisture from underground, and also does not benefit from the rich nutrients of top soils. It was observed

that along River Lumbuye, several plants have been uprooted. This subjects the ground to erosion whenever the river floods.

5.2.2 Debarking of trees

Nibbling of the tree barks, also called debarking of trees was another common method used by traditional herbalists in Busoga and Bulamagi sub-county in particular. This involved removing the outer layer of the tree, in order to use the tree bark for medicine. In Bulamagi, several tree species have suffered debarking and its associated dangers. These include indigenous mango trees (*emiyembe*), guava trees (*emipeera*), eucalyptus (locally called *kalitunsi*), and other indigenous tree species like munalisa (African flame tree, also called *Spathodea Campanulata*), *musita* tree (*albizia coriaria*)), *kifabakazi* (*prunus Africana*, also called murama), *muyirikiti* tree and many others. Perhaps the most affected were the *munalisa* and *muyirikiti*, because most of them showed signs of debarking.



Figure 5.1: Musita tree showing signs of debarking.

(The picture was taken from one of the villages of Bulamagi sub-county under the area of study, May 2025)



Figure 5.2: Munalisa tree showing signs of debarking.

*This picture was taken from one of the villages of Bulamagi sub-county under the area of study,
May 2025*



Figure 5.3: showing the tree with a drying stem due to debarking

(The picture was taken from Bulamagi sub-county under the area of study, May 2025).

Whereas the traditional herbalists concealed information about the diseases which most affected trees like *munalisa* and *muyirikiti* treated, the severity with which these trees have suffered through debarking mandated the researcher to understand why. Information from other sources revealed that the bark of *omunalisa* is used elsewhere in the treatment of malaria and diabetes (Boakye et al., 2023; Padhy, 2021). The *muyirikiti* in the same way, is used in the treatment of diseases like treating bacterial and fungal infections, malaria, STDs, diarrhea, and skin infections, urinary tract

infections and diabetes (Kirika et al., 2015; Obakiro et al., 2021). Interestingly, according to the ministry of Health reports, in 2023, Iganga district was ranked second after Yumbe District in malaria infections weekly at the rate of 3,056 people. These are cases that were reported to the health facilities including those in Bulamagi sub-county. The unreported cases that may have resorted to herbal medicines may have made the statistics significantly higher. Other studies reveal that a significant number of residents of Iganga district generally are prone to diabetes (Aramo et al., 2019; Rutebemberwa et al., 2019) and bacterial infections especially UTIs (Turyatunga, 2021) recorded. This being the situation, coupled with poverty levels where residents cannot afford biomedical facilities, the trees and other plants in the area have to suffer the blades as residents search for healing.

The tree bark is used as storage for food, and it is used to protect the inner tissues of the tree from various infections. This is probably why most of the tree barks are rough, to offer a protective and security layer to the plants. Scientifically, debarking of trees affects trees in various ways: the nutrient transportation from the roots upstream to other vital parts of the tree is cut off (Nndwammbi et al., 2018; Wohlleben, 2016). The removal of the bark leaves the tree naked, hence susceptible to pests and diseases (Nndwammbi et al., 2018). This eventually leads to the rooting of some parts of the trees, which affect the trees' strength to withstand strong storms and winds.

In a related development, although there is no locally documented massive human activities and impact of debarking trees known (at least in Uganda), studies on tree debarking are largely associated with animals (especially rodents) with devastating results. In Argentina, for instance, key tree species were damaged by squirrels through debarking (Pedreira et al., 2023). This raises fears that, with the increased demand and use of herbal medicines where tree barks are components, Bulamagi and entire Iganga and Busoga region will slowly kill all the trees in the

area through debarking. Besides, because debarking impairs the flow of nutrients from the soil, it has affected fruit plants especially indigenous mango species and guavas. Bulamagi sub-county is part of the mango growing herb, given its location as part of Lake Victoria crescent, with dependable rainfall and fertile soils. Common mango varieties are Kakule, Kikoogwe, dodo, bire, and other improved varieties like alphonso, apple mangoes and kent (Ddamulira et al., 2019). Guavas are another fruit tree grown in the sub-region, and in Bulamagi sub-county, guava trees are in homesteads and jungles. Debarking can significantly affect the trees' ability to produce fruits, and affect fruit quality. Trees like mangoes which have been affected by debarking have produced poor quality fruits, small in size and also infested with worms because the protective layer of the plant that helps it to fight pest and diseases has been removed by the herbalists (Nacoulma et al., 2017). This danger, in turn affects other creatures like birds, primates and also human beings who depend on such fruits for food survival and also income. Mango and guava barks are part of the plant parts used in the formulation of herbal medicines that treat respiratory tract infections like coughs and colds.

5.2.3 Plucking of plant leaves

Plucking of plant leaves is the common practice in traditional medicinal practices. Leaves are the visible green and essential parts of all plants. Leaves constitute small pores called stomata, through which plants breathe. Plants breathe in carbon dioxide and out-oxygen through the leaves. The green coloring matter in the leaves is chlorophyll, which is essential in photosynthesis the processes by which plants manufacture their own food from the sunlight. Leaves act as the tracts through which plants absorb air, light, water and all other nutrients relevant for survival. The leaves' chlorophyll and other properties is an essential component in traditional herbal medicines.

Much of the traditional herbs in Busoga involve the green leaves. These are used in self-medications and preventive practices on daily basis. Given the spiritual consciousness of the people within Busoga (Isiko, 2019a, 2019b), there is a dominant belief in spiritual involvements in shaping human life and destiny. The use of certain herbs, therefore, either enhances the spiritual luck or protects individuals from harmful spiritual interferences. In this environment, it is not unusual that both men and women would use herbs for bathing and protecting their families. The regular use of these herbs, therefore impact on the ecological system by leading to their extinction in certain places. Such plants may include *ituirala* or *kaibo kabakyala* (centella Asiatica), sleeping weed locally called *entengotengo* (chickweed) etc. They are also used in rituals of life at birth, naming, initiation, marriage and death accompanied with other ritual activities. Leaves also play an important role in divination practices among the Basoga people. In harvesting herbal medicines, leaves have to be picked from healthy plants or the whole plant has to be harvested especially for small plants. Evidence from the field revealed that the most potent part of the leaves which were harvested were the tender shoots and leaves, because of the high concentration of medicinal properties. For example, in harvesting *omujaaja* (African basil), most visibly plucked leaves are the tender shoots. This was also evident in the harvest of mango leaves, *Omuyembe* and Bitter Leaf (*Vernonia amygdalina*) *olubirizi* leaves to mention but a few. Besides the leaves, the plant flowers and pods are also harvested. This deters the plant from developing seeds for eventual propagation, since the plant's abilities to transform flowers into fruits and seed are impaired.

5.2.4 Animals, birds and insects' usage

Apart from plants, African people in Busoga also used products of animals, birds and insects in traditional healing practices. As mentioned in the previous chapter, it was observed that herbalists used animal tissues, bones, skins, birds' feathers and other parts in their treatment. Information

about how those organs were removed from the creatures was not easy to attain, but it was obvious that those items were obtained by killing the relevant creatures. It was hard to skin a monitor lizard for example, and remove its skin without killing it. The same was to happen if one was to obtain an eagle's claws or obtaining animal bones and other relevant parts and tissues. Some of the herbal medicinal items like pangolin shells were classified among the critically endangered animals. In fact, animals like the African pangolins and porcupines were classified among the endangered classes (Segawa, 2016).

5.2.5 Mineral extraction

Lastly, herbal medicine involves extraction of minerals from the ground or extraction from plant materials like burning dried plant and animal products. Whereas, the latter may not have significant impact on the environment because burning does not emit much carbon into the atmosphere, the former which involves mining of minerals from the ground exposes the earth to weathering and erosion. It also involves killing some microorganisms in the soil, either to be part of the mineral extracts or to deny them habitats. These organisms may include earth worms, ants and other microorganisms. For instance, in the formation of the herbal substance called *emumbwa* (mined clay bar), either clay extracted from swamps or anti-hill soils were used (Kiguba et al., 2016; Nakibuuka & Mugabi, 2022). This involves digging to open the ground so as to extract the relevant soil. In digging anti hills, it is obvious that the ecological system is disturbed and, in the process, killed.

5.3 Positive implications

On the other hand, traditional healing practices have had a very positive contribution to the environment. This is more so when relevant plants are protected by the practitioners because of

their potency in medicinal value. For instance, the traditional healer I visited at Bulowoza had cultivated many of the plants and also domesticated many pigeons for medicinal values. She had planted plants and trees which transformed her environment into a green belt, and according to her, every plant near her home was medicinal.

In addition, it was also discovered that traditional healing practices equally led to the protection of some cultural sites. There were numerous cultural sites in Bulamagi sub-county villages like Ngangali Village in Bulowoza Parish, Nakirulwe Village in Magogo Parish, and Namalemba Village in Iwawu Parish where the study was conducted. There were trees, rocks, water bodies and specific jungles within Bulamagi sub-county which were either healing sites or culturally venerated (sacred) areas as cultural and ancestral sites. This practice saved those features from being exploited or destroyed for economic gains.

On the other hand, herbal medicine harvests and use also helped in controlling some of the weeds which disturbed farms and gardens under the area of study. Uprooting some plants for medicinal use was reported to be an environment friendly approach in dealing with weeds. It was a mechanical and biological approach, said to be environmentally friendly rather than use of chemicals. Some medicinal plants like lantana camara, black jack- *kapanga*, wandering Jew, goat-weed, Sodom apple, Amaranthus (*dodo*), galinsoga (*mwamuna aligone*) etc. propagate very fast and were categorized as dangerous to crop farming. Herbal medicine use, therefore, was argued to have put the propagation of those plants on check and control.

5.4 Results Obtained using Direct Observation in the Field



Figure 5.4: Sacred sites and forested area in one of the places under study in Bulamagi-Sub-county

On establishing how shrines are treated as sacred traditional religious clinics and healing centres, the researcher ventured into entering one them under the areas of study.

After seeking permission, the researcher was only restricted not to photograph the Diviner but allowed to take pictures of the shrines and conduct a face-to-face interaction with the Diviner in the main traditional shrine. This dialogue captured the tone, setting, and some common fieldwork challenges, especially around cultural sensitivity, gaining trust, and understanding sacred practices and sites in the context of environmental sustainability in the area under study.

Using direct observation, the researcher saw and entered a sacred shrine in a rural village. Birds chirped softly. The air smelt of herbs and wood smoke. The researcher, dressed respectfully, entered the shaded compound of the shrine where the diviner, an elderly man wearing traditional robes and beads, sat on a wooden stool surrounded by calabashes, herbs, and carved figurines.



Figure 5.6: Some items inside the sacred shrine

Researcher: (Bowing respectfully) Good afternoon, Baba. Thank you for agreeing to speak with me.

Diviner: (Nods slowly, studying the researcher) Good afternoon, child. You are welcome. What brings you to this sacred place?

Researcher: I'm here as part of my fieldwork. I'm studying traditional shrines and their role in healing and preserving the environment. I hope to learn from you, if you're willing to share.

Diviner: (Pauses, eyes narrowing slightly) Hmmm. Many have come before you... some with honest hearts, others just to mock. What do you seek, truly?

Researcher: I mean no disrespect, Baba. I want to understand how shrines like this work not just spiritually but in terms of how they care for people and nature. I've read that shrines are like healing centers even clinics in a way. Is that true?

Diviner: (Chuckles lightly) Clinic? You people like to use your own words. But yes, we heal. Not only the body, but the spirit. And when the spirit is at peace, the land is at peace too.

Researcher: Can you explain how this healing works, especially how it relates to the environment?

Diviner: (Gestures around the grove) You see these trees? No one cuts them. They are sacred. The gods live among them. The herbs we use to treat people... they grow wild, but we take only what we need. No more. If the forest dies, the spirits will not speak.

Researcher: That's fascinating. So the shrine helps preserve the forest?

Diviner: More than preserve. It protects. The fear of the gods keeps people from destroying this place. No farming here, no firewood collection, no building. Even hunters avoid this land. The shrine teaches respect for the land and all life.

Researcher: That's a powerful system of conservation... but how do you explain that to outsiders, like government officials or scientists?

Diviner: (Leans in) We don't. They don't listen. They want papers, measurements. But the forest listens. The spirits listen. Our work is for those who believe.

Researcher: Have you had any problems sharing this knowledge? Sometimes it's hard for me to ask questions without feeling like I'm crossing a line...

Diviner: That is your challenge. Not every question must be asked. Some things are for us alone. But if you listen not just with ears you will understand more than I say.

Researcher: Thank you, Baba. I'll try to learn with respect.

Diviner: Then the land will teach you. You may return again... but come with kola next time.

Researcher: (Smiling, taking note) I will, Baba. Thank you again.

5.5 Implications on the Researcher's Fieldwork experience

Trust Building: The diviner was initially wary of the researcher's intentions a common challenge in fieldwork.

Cultural Sensitivity: The researcher was careful not to impose academic frameworks like "clinic" or 'sustainability' too strongly.

Restricted Knowledge: Not all information is open for sharing; sacred knowledge is guarded.

Language and Concepts: Translation of traditional practices into modern terms (e.g., healing, conservation) must be done carefully.

Exchange: The mention of bringing kola nuts next time highlights the importance of local customs and respectful exchange.

CHAPTER SIX

STRATEGIES THAT ENHANCE INTEGRATION OF ENVIRONMENTAL SUSTAINABILITY IN TRADITIONAL RELIGIOUS HEALING PRACTICES

6.1 Introduction

This chapter examines the strategies that can be used in the Integration of Environmental Sustainability in Traditional Religious Healing Practices. It was in response to one of the questions in this study (*see interview protocol*): What strategies can be adopted to integrate environmental sustainability into traditional religious healing practices in the area? This chapter reckons with the fact that nature is a resource, and traditional medicines have been part of human civilization. It is the natural pharmacy which pre-existed the pharmacological medicines. It was created by God, protected and revealed by the spirits to humanity, including the people of Bulamagi in Iganga District. In the contexts of increased demand for herbal medicine, questions related to fair use were very important. This relates to uses which were environmentally friendly and spiritual sensitivity, given that to Africans, the natural environment is a spiritual domain. Therefore, the strategies adopted to integrate herbal medicine use and environment protection were discussed under the subsequent subheadings:

6.2 Planting of herbal trees and other plants

There has to be a deliberate action to plant trees, especially the medicinal tree plants like *musita* and *muyirikiti* in order to reduce pressure on the existing few trees which have remained. Tree planting should be part of family consciousness to ensure that the environment retains its green belt despite the medicinal harvests. Some of the participants in the study expressed that most of the trees used in the herbal medicines had naturally grown and not planted by individuals. This

revelation suggests that there is no sense of ownership and responsibility to some of the tree varieties by individuals who harvest herbal medicines. This results into unfair use, greed and selfish exploitations which end up endangering trees. This idea is not new or peculiar to only Bulamagi, but has been deliberately done elsewhere as an effort to combat climate change. For instance, in 2019 the Kira division authorities in Wakiso district took a deliberate decision to plant medicinal trees like *Prunus Africana* (<https://www.newvision.co.ug/news/1502155/kira-municipality-embraces-tree-planting-campaign>). Given other damaging factors like deforestation and changes in land use, it is suggested in many scholarly works that deliberate medicinal tree planting is a step towards conservation and eventual environmental protection (Kipkore et al., 2014; Owuor et al., 2006; Stangeland et al., 2011). Some other trees like neem tree, guava-*mapeera*, mango-*muyembe*, citrus (oranges-*mikyungwa*, lemons-*nnimu* and tangerines), avocado-*fakedo* and moringa tree can be planted in people's compounds at a domestic level, on the private or communal land (Lusweti et al., 2020).

Together with tree planting is the deliberate cultivation of certain plants at a domestic level in Bulamagi. During the study, it was observed that some homes have planted herbal medicines like *omujaaja*, which is useful in many ways. Unfortunately, this effort is not widely done, and it is mainly being done by the elderly people, as the young and affluent families apparently rely on pharmacological medicines. By planting these crops at family levels, it ensures ease of access, controlled and fair use away from abuses. The home of the traditional healer at Bulowoza suggests the idea and importance of medicinal gardens. Since herbal medicine has become a booming business, it would not be wrong to have controlled herbal medicinal gardens, where herbs are grown as a cash crop. This will save certain plant species from being extinct, and it will also encourage responsible and proper use.

6.3 Education to the local people and herbalists

For proper conservation, education to the local traditional medicine practitioners is important. This would be a training on environmental issues aimed at integrating traditional knowledge with scientific conservation efforts in addressing problems of environmental degradation and climate change. The training would further promote sustainable resource management and ensure dependable supply of herbal medicines. This can be through organized and specialized programs on the environment and herbal use. Evidence from the study area indicated that most of the traditional healers are people with no or very little levels of formal education. According to some studies, it is revealed that Education level significantly impacts environment management practices among traditional healers (Simbwa et al.). Educating traditional healers on good use of the environment shall instill a sense of responsibility for the environment. This education can be through seminars and workshops, informal education and radio or televised shows that create a consciousness about basic knowledge on possibility and dangers of extinction of some natural species due to overuse and wastage, and how to protect soils. The “hands-on training programs in sustainable harvesting techniques would teach community members how to collect plants without damaging populations or ecosystems” (Nkusi, 2025). These training will also equip the practitioners with knowledge about national and international policy issues related to the management of the environment. Such efforts have been done elsewhere in Africa. In 2017, a training took place in Durban, South Africa to train traditional healers on the basics of restoration of forests, environmental management and biodiversity with significant policy outputs. The training targeted participants from Southern, Central and Eastern Africa (<https://naturaljustice.org/kukula-traditional-health-practitioners-present-forest-restoration-workshop-support-aichi-biodiversity-targets/>). In Kenya, Kenya Forestry Research Institute

(KEFRI) and the Kakamega Environmental Education Programme (KEEP) have engaged in community training programs in an effort to protect and conserve the *Omulondo* plant from extinction (Jacob Godfrey Agea et al., 2008). In the context of Bulamagi sub-county, such efforts by local and national authorities say Uganda National Forestry Authority (NFA), Uganda Wildlife Authority (UWA), and organisations like Uganda *nne ddagala lya yo* are paramount in promoting environment related education to the traditional healers. These efforts have not taken place in Bulamagi yet, and the time is now.

6.4 Integration of traditional medicines with professional treatment

Integrate traditional treatment with hospital treatment. Integrating traditional medicines with professional medications goes hand in hand with appreciation and recognition of the traditional healers by the government and religious bodies, as phenomenal players in the local health sector in Iganga district and beyond. Traditional healers like traditional birth attendants, bone and marrow specialists and others should be appreciated, and drawn closer to professional bodies like hospitals. This will not only save the environment, but more so lives of people, who are otherwise treated in hiding, and in some cases through gambling means. Integrating traditional and modern medicines is being encouraged by the WHO (<https://www.who.int/southeastasia/news/feature-stories/detail/integrating-traditional-medicine>) and recent medical scholarly research (Ikhoyameh et al., 2024; Mwaura, 2024; Nanda, 2023) practiced internationally in countries like China, India, Korea, South Africa (Dong, 2013; Fan et al., 2014; Kendi, 2024; Krishna, 2024). This has huge advantages, and with specific reference to the environment, it saves the natural environment from over exploitation by herbal users.

Encouraging people to seek professional medical care for illnesses like malaria, coughs and common colds helps to save plant species like *olubirizi*, etc. This idea is also to call for

governments (local and national) to put in place, and equip medical facilities like hospitals and dispensaries with pharmaceutical medicines to treat common diseases at free or affordable fees. At the moment, the main medical facility in Bulamagi Sub County is Bulamagi Health Centre III, village health teams (VHTs) and center 1 facilities, providing outpatient services and community-based preventive and promote health services to the local people. However, these medical facilities are not enough and so often patients are required to buy drugs from clinics nearby. Coupled with the biting poverty, the local patients would resort to herbal medicines like *olubirizi* and *Omujaaja* among other herbal plants, for treatment hence exerting pressure on the green environment.

CHAPTER SEVEN

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

7.1 Introduction

This chapter presents the summary, conclusion and recommendations based on the specific objectives of this study as indicated under the subsequent subheadings.

7.2 Summary

The summary is based on the research objectives. The study concluded that herbal medicine was the most prevalent traditional healing practice among practitioners in Bulamagi Sub-county. Its dominance stems from the accessibility, tangibility, and versatility of herbal materials, which are deeply integrated into both the physical and psychological healing processes of patients. The practice is supported by longstanding cultural knowledge and aligns with findings by Tabuti (2007), who emphasized the environmental availability and cultural significance of herbs in rural Uganda. Traditional healers in Bulamagi Sub-county utilized multiple methods to collect medicinal materials, with uprooting roots being the most preferred. This preference was rooted in the belief that roots held the most potent healing properties, a view supported by Kambizi and Afolayan (2001). However, the practice, if not regulated, poses a serious threat to plant survival and environmental balance.

Harvesting of medicinal plants is governed by spiritual and ancestral rituals, which are considered essential for the efficacy of the medicine. These guidelines reflect a deep spiritual cosmology, reinforcing traditional African beliefs that healing extends beyond the physical to the metaphysical. The ceremonial aspects also indicate a built-in ethical structure guiding resource use.

This study further concluded that traditional healing takes place at certain sites. In Bulamagi Sub-county, these sites play a critical role in the delivery of African traditional medicine. The predominance of simple forests as preferred healing sites reflects both their environmental richness and spiritual value. In some places these healing sites have been sustained by replanting of herbal plants and trees; and domestication of certain animal and bird species, which directly contributes to the environmental protection. Furthermore, the identification and preservation of these sites are deeply embedded in ancestral spiritual guidance, indicating that they function as sacred spaces essential to community heritage and well-being. These findings affirm that traditional healers serve as both medical practitioners and custodians of biocultural landscapes, thus positioning traditional healing practices as central to the discourse on sustainable health systems and environmental stewardship.

The study consequently set out to examine the impact of traditional healing practices on environmental sustainability in Bulamagi Sub-county, Iganga District, within the Busoga region. The findings revealed that traditional healing practices possess dual dimensions significant potential to promote environmental sustainability and notable challenges that may contribute to environmental degradation.

On the positive side, three major practices were found to support environmental conservation namely; the protection of sacred natural sites, the preservation of specific environmental features, and the use of sustainable harvesting techniques. These practices, deeply rooted in cultural and spiritual beliefs, have led to the conservation of forests, sacred trees, springs, rocks and rare medicinal species. Sacred sites, in particular, function as informal conservation zones, while indigenous harvesting norms promote the regeneration of natural resources.

However, the study also identified several negative impacts, the most critical being overharvesting due to commercialization and unregulated exploitation by self-proclaimed healers. This has led to pressure on environment, habitat destruction, and the risk of species extinction. The rise of pseudo-healers, driven by economic hardship, has undermined both environmental balance and cultural authenticity.

In response, community-based interventions have emerged, including sensitization programs, controlled harvesting, and the revival of traditional taboos. Traditional beliefs and taboos continue to play a vital role in regulating environmental behavior, reinforcing indigenous norms that promote conservation.

Overall, the findings suggest that while traditional healing practices hold valuable conservation potential, contemporary threats and economic pressures require an integrated, modern-traditional approach to sustainability.

7.3 Conclusions

Herbal medicine in terms of plants was the most dominant traditional healing practice in Bulamagi Sub-county, largely due to its accessibility and cultural significance as compared to use of animal parts. Healing is conducted at sacred natural sites such as forests and springs which hold both medicinal and spiritual value, positioning healers as custodians of culturally significant landscapes.

While traditional healing practices contribute to environmental conservation through the protection of sacred sites and sustainable harvesting rituals, unregulated practices particularly root uprooting and overharvesting driven by commercialization pose serious threats to biodiversity and ecological balance.

Enhancing environmental sustainability within traditional healing requires empowering healers through inclusion in conservation efforts, community sensitization, revival of traditional taboos, and promotion of sustainable harvesting methods ensuring a balanced integration of cultural heritage with modern environmental management.

7.3.1 Summary of Conclusions

The following is the Summary of Conclusions:

Specific Objective 1: Healing sites are sacred dwellings for ancestral spirits and healing centers /traditional clinics.

Specific Objective 2: Traditional healing practices have increasingly impacted negatively on flora and fauna in the area under study due uncontrolled harvesting.

Specific Objective 3: Traditional Religious Healing strategies, e.g, taboos, traditional religious beliefs and superstitions which used to protect and promote environmental stewardship have been weakened.

7.4 Recommendations

Basing on the findings and discussion made in the previous chapter, it is recommended that local government authorities and conservation agencies formally recognize traditional healing sites as cultural and environmental conservation zones. Collaborative frameworks should be developed to support traditional healers in their dual roles, providing them with resources such as herbal plant nurseries, protected land access, and training in sustainable harvesting techniques. This recognition would not only strengthen indigenous health systems but also reinforce environmental protection

efforts rooted in local strategies and spiritual practice. Such integration would promote a more inclusive and sustainable approach to public health and environmental conservation in the region.

Local health and cultural institutions should formally document and promote herbal medicine practices as part of community health strategies. Efforts should be made to integrate safe herbal practices into primary healthcare policies, while encouraging the preservation of indigenous knowledge through education and collaboration with traditional healers.

Stakeholders in environmental conservation and traditional medicine should develop community-led guidelines for sustainable harvesting. These could include training on rotational harvesting, root division techniques, and the cultivation of high-demand species to prevent the extinction of medicinal plants.

Cultural heritage organizations and local governments should recognize and protect these spiritual practices as intangible cultural heritage. Traditional knowledge systems should be preserved through intergenerational transfer programs and supported with respect in any initiatives involving traditional medicine or environmental use.

Government agencies, NGOs and local leaders should collaborate to institutionalize traditional conservation practices into national and regional environmental policies. Programmes that offer technical support, seedlings, and land-use education can further reinforce the custodial role of traditional healers and safeguard medicinal plant resources for future generations.

Traditional healers should be formally recognized as environmental stakeholders. Local governments and environmental bodies should incorporate their knowledge and practices into community conservation plans, as this can bridge the gap between indigenous knowledge/strategies and modern environmental science. There is a need to provide continuous

training for traditional healers and community members on sustainable harvesting methods, deliberate cultivation of medicinal plants, and environmental protection. This can be done through partnerships with NGOs, cultural institutions, and environmental experts.

Sacred sites should be legally recognized and protected through local bylaws or district ordinances. These areas can serve as community-managed conservation zones, with rules derived from both traditional and formal governance structures. To reduce pressure on wild resources, local authorities and development partners should support the creation of community-managed herbal gardens. These gardens would not only conserve medicinal plant species but also support local livelihoods and health systems.

Local councils, in collaboration with traditional leaders, should enforce controlled harvesting practices. Community-based resource management committees can monitor harvesting activities and ensure adherence to sustainable practices.

Awareness campaigns, dialogues, and cultural events can be used to sensitize communities about the importance of environmental sustainability and the need to preserve traditional environmental values.

Finally, a hybrid conservation model that respects cultural values while integrating scientific approaches offers the most promising path forward. By reinforcing traditional environmental knowledge/strategies and addressing contemporary environmental challenges, Bulamagi Sub-county can harness the full potential of its cultural heritage to support long-term environmental sustainability.

7.4.1 Summary of Recommendations

Specific Objective 1: To recognize and popularize the traditional religious healing sites as sacred centres through mapping and documentation.

Specific Objective 2: To Integrate indigenous knowledge into policies by advocating for environmental and cultural heritage policy.

Specific Objective 3: To work with Busoga Kingdom (Obwakyabazinga) to sensitize and encourage sustainable harvesting practices, empower and involve traditional religious healers as active practitioners in environmental conservation advocacy and preserve cultural religious heritage and practices which promote conservation of environment by partnering with NGOs, e.g., Cultural Survival, Nature Uganda etc.

7.4.2 Dissemination Strategies

The study findings shall be disseminated through various strategies as indicated:

- (i) Submission of the final Dissertation to the DRGT.
- (ii) Joint Publication of Articles with my Supervisors.
- (iii) Workshops, Seminars, Conferences, talk-shows and Symposia
- (iv) Continuous Professional Development (CPD) courses.

7.5 Areas for Further Study

- (i) A Comparative Study on the impact of Traditional Religious and Scientific Strategies of Environmental Sustainability.
- (ii) Empowerment of Traditional Religious Healers on Environmental Conservation.

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APPENDICES

Appendix I: PICTURES



Picture of Momordica foetida (Eibombo)



A Picture of Naibeere



Traditional Healing at Nsobani Hills (restricted forested area)



Restricted Busu Traditional Religious Healing Caves guided by a Spiritual Leopard

Appendix II: Interview Guide

Informant Interview Data Collection Guide for Traditional Religious Healers, Herbalists' Chairpersons, Community Leaders and Local Environmental Conservationists on: African Traditional Healing Practices and Environmental Sustainability in Bulamagi Sub-County in Busoga Region

Overview:

This tool is structured to capture qualitative data on African Traditional Religious Healing Practices and their relationship to environmental sustainability. It consists of a mix of structured and semi-structured items organized under key subthemes.

Introduction

My name is Nambuya Alice Masette, a student of Kyambogo University undertaking Master of Arts Degree in Religious Studies. I am conducting an informant interview session on African Traditional Healing Practices and Environmental Sustainability in Bulamagi Sub-County in Busoga as part of the requirement for the award of a Master's degree.

The purpose of this letter, therefore, is to request you spare some time to interface with me in this interview session regarding my research. The information collected will be used strictly for academic purpose and always kept with maximum confidentiality. In case of any hesitation, you will be at liberty to withdraw from this exercise at any time you deem necessary. Thank you very much in advance. **(The interview session will last approximately 30-40 minutes).**

Please feel free to share your honest views. All information provided will remain confidential, and no name will be used in the final report.

Section 1: General Information

Age Group (*Tick as appropriate*)

- A. 18–30
- B. 31–50
- C. 51–70
- D. 71 and above

Sex: (*Optional*)

- A. Male
- B. Female
- C. Others (*to specify*):

D. Village Name:

E. Role in the Community:

Category of Participant

- A. Traditional Healer
- B. Community Leader
- C. Herbalists' Chairperson
- D. Local Environmental Conservationists
- E. Others (*to specify specify*):

Section 2: African Traditional Religious Healing Sites and Environmental Sustainability

2.1 Can you describe the specific sites where healing practices are performed?

(Examples: simple forests, hills, riverbanks, caves, valleys, simple jungles, etc.)

2.2 What are the main reasons these sites are considered significant and sacred for healing practices?

2.3 How are these sites managed or preserved by your community?

- A. Restricted access
- B. Rituals for protection
- C. Maintenance by traditional authorities
- D. Other (*to specify*)

2.4 Have there been changes in the availability or conditions of these sites over the years?

If yes, what are the main causes of these changes?

2.5 In your opinion, how do these healing sites contribute to environmental conservation or degradation?

Section 3: African Traditional Religious Healing Practices

3.1 What types of healing practices are commonly used in your tradition?

- A. Herbal medicine
- B. Spiritual healing
- C. Divination
- D. Others (*to specify*):

3.2 Can you describe the process of sourcing materials for traditional medicine?

(e.g, by uprooting, picking leaves, animal bones, plucking feathers of birds, mining etc.)

3.3 Are there any rituals or guidelines for harvesting medicinal resources?

3.4 How do you ensure the sustainability of resources used for traditional medicine?

- A. Replanting/replenishment
- B. Controlled harvesting
- C. Sacred rules
- D. Other (*to specify*):

3.5 Are there alternative or modern methods being used to complement or replace traditional practice?

If yes, what are they?

Section 4: Implications on Environmental Sustainability

4.1 In what ways do traditional healing practices positively affect the environment?

- A. Preservation of specific features in the environment
- B. Protection of sacred natural sites
- C. Sustainable harvesting practices
- D. Other (*to specify*):

4.2 Are there any negative impacts of traditional healing practices on the environment?

- A. Over harvesting of resources
- B. Habitat destruction
- C. Pollution (ritual waste, etc.)
- D. Other (*to specify*):

4.3 How does the community address these negative impacts?

4.4 What role do traditional beliefs and taboos play in promoting environmental sustainability?

4.5 What recommendations would you make to ensure both the survival of traditional healing practices and environmental conservation?

Section 5: Additional Comments

Please share any additional insights or experiences you think are important for understanding the link between African traditional healing practices and environmental sustainability.

Researcher's Additional Notes:

- i. Observations during the interview on (body language, emotional tone, environmental setting, etc.)
- ii. Challenges faced during the interview:
- iii. Suggestions for follow-up interviews or further research

Appendix III: Observation Checklist

Summary of Direct Observation Checklist on African Traditional Religious Healing

Practices and their impact on environmental sustainability:

Observation Theme	Indicator	Yes/No/Not Applicable/Specify	Description / Criteria	Evidence/Notes
1. Healing Sites in the Parishes of Bulamagi Sub-county				
Name of place and location	Where is the site located; in a forest, near a water source, a rock, valley, or urban area?		Specify the type of natural environment.	
Habitat Integrity	Does the site appear undisturbed or degraded by human activity?		Look for visible signs of environmental damage or protection efforts.	
Resource Use	Are local plants, water, or soil resources actively used in the site?		Conduct an Observation on magnitude and sustainability of resource use.	
Conservation Practices	Are there efforts to conserve or regenerate natural resources at the site?		Check for indicators like tree planting, protected areas, etc.	
Cultural Preservation	Are there traditional cultural norms limiting environmental degradation?		Document cultural practices or taboos that help preserve nature.	
2. Healing Practices and Materials Used	Indicator	Yes/No/Not Applicable	Description / Criteria	Evidence/Notes
Plant-Based Medicines	Are medicinal plants sourced sustainably?		Assess if plants are harvested in a way that allows regeneration.	
Animal-Based Practices	Are animal products or by-products used, and are they sustainably sourced?		Note any evidence of overharvesting or protection of animal species.	
Ritual Practices	Do rituals involve materials that impact the environment (e.g., firewood)?		Consider the frequency and scale of resource use during rituals.	

Observation Theme	Indicator	Yes/No/Not Applicable/Specify	Description / Criteria	Evidence/Notes
1. Healing Sites in the Parishes of Bulamagi Sub-county				
Waste Management	Are waste materials from healing practices disposed of sustainably?		Check for evidence of waste disposal practices.	
Use of Sacred Sites	Are sacred sites managed in ways that prevent environmental damage?		Observe if sacred sites are degraded or preserved.	
3. Impact on Environmental Sustainability	Indicator	Yes/No/Not Applicable	Description / Criteria	Evidence/Notes
Biodiversity Preservation	Does the practice promote biodiversity (e.g., preserving rare plants)?		Look for evidence of rare species conservation or knowledge.	
Conservation of water and soil	Are there practices that prevent soil erosion or protect water sources?		Check for physical features like terraces, planting near rivers, etc.	
Community Education	Are practitioners educating communities on sustainable environmental practices?		Document any educational outreach or informal guidance provided.	
Degradation of the Environmental	Are the practices causing visible environmental degradation?		Look for pollution, habitat loss, or overharvesting.	
Transfer of Traditional Knowledge	Is traditional environmental knowledge being passed to younger generations?		Note environmental knowledge transfer practices.	

Appendix IV: Permission Letter from CAO



THE REPUBLIC OF UGANDA

Iganga District Local Government

Office of the Chief Administrative Officer,
P.O Box 358,
IGANGA.

Our Ref. CR/121/4

Date: 8th April, 2025

Your Ref:.....

The Director
Directorate of Research and Graduate Training
Kyambogo University

RE: PERMISSION TO CARRY OUT RESEARCH IN BULAMAGI SUB-COUNTY

Reference is made to yours dated 1/4/2025 seeking for permission to allow **Nambuya Alice Masette** pursuing Master of Arts in Religious Studies to carry out research on **"African Traditional Healing Practices on Environmental Sustainability in Bulamagi Sub-County, Busoga Region"**.

This is to formally communicate our acceptance for Nambuya Alice Masette to carry out research in the area about the above topic.

By copy of this letter the Senior Assistant Chief Administrative Officer Bulamagi Sub-county is required to accord Nambuya Alice the necessary assistance.



Onyait Silver Ochan

FOR: CHIEF ADMINISTRATIVE OFFICER/IGANGA DISTRICT

Copied to: Senior Chief Administrative Officer/**Bulamagi Sub-county**
Nambuya Alice Masette/**Student**

Appendix V: Permission Letter from the Department



P. O. BOX 1 KYAMBOGO

Tel: 041 - 4286792 Fax: 256-41-220464

Website :www.kyu.ac.ug Email: drgt@kyu.ac.ug

Directorate of Research and Graduate Training

Office of the Director

APPENDIX 8: INTRODUCTORY LETTER

Date: 1/4/2025

The Chief Administrative Officer,
Iganga District

Dear Sir/Madam,

RE: NAMBUYA ALICE MASETTE

permission granted.
SECRET
FOR CHIEF ADMINISTRATIVE OFFIC
IGANGA DISTRICT
8/4/25

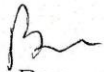
This is to introduce to you the above-named student Reg: No **23/U/GMARS/1056/PE** pursuing Master of Arts in Religious Studies, Department of Religious Studies and Philosophy, Kyambogo University.

She intends to carry out research on **"African Traditional Healing Practices on Environmental Sustainability in Bulamagi Sub - County, Busoga Region"** in partial fulfillment of the requirements of the award of Master of Arts in Religious Studies of Kyambogo University.

The purpose of this letter therefore is to request you to grant her permission to carry out her study in your institution.

Any assistance rendered to her will be highly appreciated.

Yours sincerely,


Prof. Bosco Bua
AG. DIRECTOR

