#### **CHAPTER 5**

# Healing the Body: Etiology, Caregivers, and Prevention

The first time I visited Tanzania, I was struck by the way people greeted one another. In contrast to the United States, where people typically ask only how a person is doing, expecting a cursory response (if any), in Tanzania people took introductory exchanges much more to heart. They usually began by asking if you bring news, and they anticipated an answer. But such openings were only the beginning of welcoming etiquette. I learned that all parties were expected to engage in questioning about how the others' children were doing, how parents and extended family members were, and how life was going, among other subjects. The underlying reasons for such gestures piqued my interest. I wondered if people were simply being polite or displaying good manners, but in time I came to a different understanding about what such exchanges might represent and the purposes they potentially serve.

A timeless concern in Ruvu societies is the maintenance of a state of well-being among their members. Taking time to learn how people and their communities are faring is potentially helpful to all parties, because it allows people to come to an understanding of the state of health or disease within families and communities. The exchange of information conveys something of what a person entering the community can expect to encounter, but just as significantly, it can reveal pressing problems that confront people, so that they can be addressed. After all, only when people exist in a state of vitality can they fulfill their social and moral obligations to their families and society at large. It is healthy communities that can regenerate biologically and sociologically. Salutatory protocol can thus be viewed as a tool of communication that fosters information exchange and establishes networks that can help in maintaining or returning to a place of well-being.

This chapter explores the ways Ruvu-speaking people have understood and addressed health matters. Examining the words they inherited, innovated, and adopted relating to disease etiology, diagnosis, prevention, and intervention, it recovers aspects of their worldview and institutional practice. These understandings and customs show that religious and health matters have been long entwined.<sup>4</sup> When disease—physical, mental, spiritual, and sociocultural—manifested, Ruvu peoples sought to restore "bodies" to a state of equilibrium using biomedicine and religio-ritual reconciliation ceremonies that commonly required involvement from kin, community specialists, and ethereal forces, each of whom wielded relevant knowledge and influence inherited from prior experiences.<sup>5</sup> In their worldviews it

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was understood that collective knowledge was necessary for renewal.<sup>6</sup> In this way Ruvu people brought distinct elements of life's threads together to create meaningful and healthy communities.<sup>7</sup>

#### Disease in the Northeast-Coastal Cultural Zone

On May 1894 in German East Africa, the "keen desire of the WaSaramo [Zaramo] for knowledge" took Church Missionary Society workers by surprise. They reported that their "ambition" to read was impressive. As they described it, "failing other and better literature, they apply themselves to the study of the Koran." South of the Zaramo, in Makonde-speaking areas of southern Tanzania and Mozambique, missionary workers likewise noted that people were voracious learners. They pointed out that local populations were especially eager to know why swarms of locusts were invading their homelands as well as the cause of the disease that was ravaging their cattle. In their words, a "universal questioning as to the sender of the plagues has arisen." At least one theory about their etiology had been proposed: "By one chief already they have been distinctly attributed to the hand of the white man's God."

Some three decades later, between 1924–28, in Tanzania's Masasi and Lindi regions, missionary workers charged with establishing and offering clinical services to African populations reported that, after initial successes treating yaws—an infectious tropical disease that often results in painful, red skin eruptions and joint pain in advanced stages—people gained some confidence in their capacity to heal, and this success led to an increase in patient turnout at their clinics. Because of their growing reputation, missionary workers were later permitted to offer a wider range of care. However, problems began for clinicians when people who believed they had been cured started to have recurring symptoms, an outcome workers blamed on people's failure to return to clinics for follow-up treatment. Soon thereafter, word began to spread that European medicines were not always effective at curing the ailments they treated. The result was that people who had been willing to make long, costly trips to clinics for what had been known briefly as the miraculous *sindano* (needle or injection), stopped coming. In some people's views, European remedies had lost credibility.

These examples draw out important points about the way Bantu-derived epistemology guided the way disease was assessed. People steeped in Bantu epistemology thought along two distinct lines of reasoning about disease. On one hand, Bantu peoples understood that the outward symptoms of illness indicated that something was wrong with the body and that it might be necessary to seek treatment to rid it of immediate incapacitation and suffering. But on the other, they understood that it was essential to know why they were susceptible to the disease, while others were seemingly unaffected under parallel circumstances. This, in their view, was important for preventing disease onset and for preventing recurrences. This

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understanding had a direct influence on how Ruvu people evaluated the efficacy of treatment. In the late nineteenth and twentieth centuries, European missionary workers may have been effective at treating disease symptoms, but from the viewpoint of people who experienced relapses, they provided only temporary fixes. European medicine, from their perspective, had not addressed the underlying reasons for *their susceptibility* to the illness.

Additionally, in the missionary report that an entire region had come to associate plague devastation with a Christian God,<sup>11</sup> we can discern a second Bantu-derived epistemological principle related to suffering. It was understood that ethereal forces, even those of European origin, could be the source of their calamity. This point is important for noting that ethereal forces, too, were included in the paradigms they used to analyze disease etiology.

Ethnography and other data on community and individual experience with illness, suffering, and healing are essential sources.<sup>12</sup> They permit us to home in on recent hypotheses and theories and use them as lenses for reading and questioning, in this case, the linguistic data relating to disease and healing in Ruvu communities. Discovering the methods by which people sought to bring about healing also allows us to glimpse the logics they applied in developing preventative and healing strategies. This approach employs the view that Jean and John Comaroff suggest is important to effectively studying the past. As they see it, "all local worlds have their own *intrinsic* historicity, an internal dialectic of structure and practice that shapes, reproduces and transforms the character of their everyday life within them" and beyond.<sup>13</sup> Borrowing from their observation, I suggest that bringing together and analyzing representations of "local" moments of experienced disease and the methods people used to restore wellness helps us to begin recovering deep-seated Ruvu histories related to health matters in their societies.<sup>14</sup>

# Etiology: Environment, Ethereal Forces, and Witchcraft

Like their Bantu predecessors, Ruvu-speaking communities believed all disease had an underlying cause.<sup>15</sup> In their view, suffering was the result of foreign elements or entities entangling with the body.<sup>16</sup> Of primary concern to them when disease struck was to discern its cause. If they were successful, then effective healing and prevention was possible.<sup>17</sup> In Ruvu history, and among Ruvu descendant communities, the evidence suggests that such theoretical understandings of disease etiology predated the proto-Ruvu era of the middle first millennium CE. In fact, it appears that much of the paradigmatic conceptual framework they

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used to assess disease etiology is rooted as far back as the Bantu era of the third millennium BCE, and some features of the paradigm may be as deep-seated as the early Niger-Congo era of many millennia prior to that.<sup>18</sup>

Disease manifested in many forms. An individual ailment could include malaise, spirit possession, fever, seizure, infertility, miscarriage, depression, or deformity. Widespread calamity, such as drought, famine, crop loss, failed technology, and infirm animals, also belonged to the conceptual category of disease. All disease affected individual and group ability to sustain an optimum level of functioning and reproduction, so that treating people who were ill and seeking help was important to sustaining communities. One way that proto-Ruvu era people likely described the experience of suffering was as being in a state of deprivation or lack, \*utamu. Sick people were \*mtamu. Both words trace back to at least the last millennium BCE. They derive from a Mashariki-era verb that meant "to not do, not be/have." In origin these words imply a view that illness represents a lack of an essential quality or condition.

In the middle of the first millennium CE, proto-Ruvu-speaking people believed that at least three factors could negatively influence personal and community health. First, they knew that environmental pathogens could turn the usual means of nourishment and protection for living beings and animals in directions that resulted in endemic suffering and death. Secondly, ancestral and nature spirits could bring about individual and widespread calamity. Finally, people believed that malevolent or spiteful living people could deploy witchcraft to attack another's health.<sup>20</sup> Lugulu understandings from the middle of the twentieth century, as reported by Mawinza, provide insight into how these views would have operated in earlier times: "The Luguru will try to find out the causes of such evils as illness, death, or calamity, from living human beings, or from the spirits of their ancestors and, if they fail to discover them, then finally from God not as a creator of evil but as a reminder from him on behalf of ancestors for some committed misdeed either personal or within the clan of the sufferer."<sup>21</sup>

Environmental pathogens and the geographic provenance of endemic disease, though perhaps not understood from the sort of empirical perspectives widely accepted today, were recognized causes of illness in early Bantu history. People understood that exposure to particular environmental conditions might result in increased susceptibility to illness for people and animals. For instance, the common understandings that mosquito-induced malaria or tsetse-fly-derived sleeping sickness were more prevalent in some areas than others alerted people to the implications of contact with such environs. In the case of sleeping sickness, this knowledge permitted preventative action through placement of local human settlements in micro-environments without tsetse flies<sup>22</sup> and, for cattle, through the burning of tsetse-sheltering brush.<sup>23</sup> In addition, as Schoenbrun has shown for the cattle keeping societies of the Great Lakes region whose livelihoods depended on them, people learned that

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controlled exposure of their animals to the tsetse fly helped curtail the deleterious effects of sudden contact with them. They accomplished this with a local strategy of creating buffer zones between the areas where cattle were kept and the environs prime for tsetse and also for brown ticks, which carried East Coast fever.<sup>24</sup>

Recovering the specific names for diseases arising from environmental conditions poses some challenges. Aside from the old root \*mtamu identifying a sick person, it is rare to find widespread cognates for an affliction that resulted from environmental causes. This may stem from the variability in climatic conditions and the practice of naming a particular disease as it manifested. Perhaps more significantly, disease terminology tended to name not the collection of symptoms specific to a particular disease, but particular symptoms, such as "fever" or "seizure," that can accompany any number of specific ailments.

Still, the lexical evidence from Ruvu-speaking communities does reveal some continuity in the recognition of certain illness-related conditions, extending back to the proto-Ruvu period. The proto-Ruvu term for one illness, \*chilalu, derived from a proto-Forest-Savanna-Bantu noun \*-dàdù "madness," which itself derived from the verb \*-dàd-, "to be mad." In Ruvu-speaking areas, the term applied to an ailment that presented with rampant screaming and shouting. A second ailment was \*lukwale. This noun derived from an old Southern Cushitic verb that originally meant "to shout." Whether the word was borrowed into early Ruvu as a noun, "shout," or as a verb from which the Ruvu then derived their noun is not yet known. Across a good number of Ruvu languages, it named an illness in which shouts or cries were the primary symptom.

Based on its structure and known presence among only Ruvu descendant speakers, this word was probably incorporated into early Ruvu vocabulary from direct interactions with Southern Cushitic speakers in the middle of the first millennium, when ancestral Ruvu communities began settling the regions between the Wami and Ruvu Rivers. Since the word does not apply to disease manifestation in its known Southern Cushitic cases, it seems likely that proto-Ruvu speakers were the ones to apply the term to this kind of symptom. Because our understanding of this affliction is limited, and also because there is an overall lack of additional medicinal or medical words shared among Ruvu and Southern Cushitic speakers, many questions remain about why such a word might have been borrowed, particularly since \*chilalu, which was already present in Ruvu lexis, previously named a "shouting" affliction. It may be that we are dealing in this instance with words that were originally used synonymously.

The general meanings attached to \*chilalu and \*lukwale could have described the outward signs of illnesses stemming from a variety of more basic causes, such as a severe bout of malaria, epilepsy, or a mental disorder.<sup>27</sup> The early Ruvu likely understood these disorders as

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caused by pathogenic elements of some kind or by sorcery, and not as the work of a spirit source. In all reported examples of these afflictions, at least, etiology was not attributed to spirit forces.<sup>28</sup>

## The Role of Spirit in Disease Etiology

Ruvu peoples believed that ancestors and nature spirits had the power to affect people in the corporeal world.<sup>29</sup> The general belief in spirits as forces with the potential to cause affliction is much older than the proto-Ruvu era of the middle of the first millennium CE. It was a belief that reached back to proto-Bantu eras and perhaps much earlier, into the proto-Niger-Congo period.<sup>30</sup> The role of spirits in Ruvu health history is thus important and enduring.

Ruvu people categorized those spirits into two types. One type included spirits of direct ancestors of the lineage, usually as far back as three or four generations. The second were nature spirits who held influence over known geographic zones. These could be, but were not always, associated with a known ancestor; and if so, usually with one who had lived in the very distant past. This corpus of ethereal forces represented what Janzen calls a "geography" or "ecology" of spirits.<sup>31</sup> The challenge for the living people they afflicted was to discern why they had come forth to create problems in their lives.

Among the most influential, deep-seated spirit entities living people acknowledged were recently departed ancestors, \*mizimu. As we saw in chapter 3, as early as the proto-Bantu period of the early third millennium BCE, the term associated with such forces has had an enduring presence in many Bantu languages. Though there are differences of opinion among historians as to its precise, earliest meaning, there is general agreement that ancestor spirits have maintained an influence on the lives of living people.<sup>32</sup>

Beginning in the Mashariki period of the last millennium CE, and perhaps in even earlier Bantu times, Mashariki-speaking descendants believed that spirits had the capacity to return to the temporal realm as embodied animate creatures.<sup>33</sup> But of particular concern to living people was the spirits' inclination to inflict malady if they were neglected, deserted, or otherwise forgotten by descendants. Indeed, spirits made it clear that their power could negatively affect community sustainability if the community and its members failed to remember their obligation to those ancestors. The land had, after all, belonged much longer to them.<sup>34</sup> At their discretion spirits could, for instance, inhibit female and male fertility or create a state of deprivation in society through the destruction of crops. Living people interpreted affliction caused by spirits as a strong reminder that the balance of power

belonged to those who had previously lived on the land.<sup>35</sup> However, Ruvu people also understood that if they were given proper propitiation, their ancestors bestowed blessings upon them.<sup>36</sup>

Among Ruvu-speaking people an additional spirit type, *isoka*, was believed linked with malaise and community disruptions.<sup>37</sup> It attests across a block distribution of languages from Ruvu to Kilombero, Rufiji-Ruvuma, and Njombe with meanings that often characterize it as having a strong tendency toward ill-will, but as possibly responding positively to supplication. A block distribution in a word's occurrence is usually suggestive of a term diffused by borrowing across neighboring societies. In the case of this word, the presence of regular sound correspondence in the reflexes across these different languages suggests that if it indeed resulted from diffusion, it likely occurred by the late first millennium CE. In which directions it spread across the Ruvu languages and beyond is difficult to say.

As to its origins, an old Bantu verb going back to at least proto-Forest-Savanna Bantu was the apparent source of the noun isoka.38 Semantically related forms, with regular sound correspondences, are present widely across Bantu-speaking societies. It is proposed here that the underlying verb root \*-sok- originally would have meant "to cause harm," probably through sorcery or intentional evil treatment of others. Some examples drawn from languages that retain different nouns derived from this verb help to elucidate why this meaning is proposed. In the Western-Equatorial, Bantu languages spoken around the lower and lowermiddle Congo River, for example, Kongo nsoki and Bobangi ncoki, conveyed the notion of "sin" or "transgression." These meanings show a Christian influence in their translation, but prior to taking on that subtlety, the words' earlier meaning in Kongo and Bobangi would have referenced acts involving transgressions against established cultural prohibitions. In other words, the underlying verb would not originally have implied "sin" in the sense of breaking moral law, but instead wrongdoing in the sense of violating the ritual or social prohibitions of one's community. The link to the transmission of harm instigated by spirit forces is noted in attestations outside of these languages. For example, in the Nyanja language the root attests as nouns for both "apparition" and "malice or evil intent." Its meanings intimate a probable Kaskazi-era usage and meaning, that is, a spirit wielding evil intent. In Bemba, the same root is the source of the noun for murder, an act commonly linked to the infliction of sorcery.

If we return to the Ruvu and neighboring communities, an examination of published sources provides a sense of the way these communities conceptualized such spirits. Beidelman's description of Kaguru understandings is succinct, but it captures an overall sense that Ruvuspeaking people communicated to me. He describes them as zombies who work for witches. Among the Pogoro, who live in areas just south of the Ruvu peoples, Green notes that the \*-soka (Pogoro mahoka) are "both spirits of the dead and territorial spirits. . . . " But she then makes the point that their domain "is defined in opposition to where the living are. The dead

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stay in the forest while the living are at home, but come into their own at night while the living sleep." Green's description of the spirit parallels Beidelman's. Though she makes no explicit reference to their association with ill-doing, she implies it in her description of their traveling about after dark, which is more widely the province of witches in Bantu-speaking communities. My reading of the ethnographic descriptions, when coupled with the range of meanings of the underlying root verb across languages, suggests that this spirit force has long been connected, or at least is thought connected, to witchcraft. What we may be noting here is a long-standing connection between a narrowly conceptualized spirit who was blamed for malaise in which both witchcraft and spirits were implicated.<sup>39</sup>

Spirits associated with unsettled land, lands commonly characterized as forested or untamed, bush-laden zones, constituted another potential source of affliction for people and communities. In chapter 3, we introduced one such spirit, the proto-Ruvu era \*mulungu, as a potentially harmful spirit that dwelled in wild or untamed zones and demanded propitiation when people moved into its territory. An Ruvu people described as sick or hot the areas in which \*mulungu resided. Zones in which \*mulungu was remembered to have previously inflicted devastating disease and death were long remembered as places in which to exercise caution when entering.

In recent times additional nuances in meaning and experience have stirred up some variations in the way \*milungu spirits afflicted Ruvu communities. Archival and published records as well as my consultants noted a variety in both the way these spirits inflicted harm and they way they interacted with the realm of living people. For example, colonial era documents concerning Vidunda people characterize \*mulunqu as an ailment that required medical intervention.<sup>41</sup> A subtle distinction in how it afflicted people was that the spirit did it by leaving its usual province of wild and untamed zones; it moved into existing communities. In essence it sought out its victims rather than waiting for trespassers in its territory. Rigby notes that Gogo used \*milungu spirits to create ties between people of distinct kinship lines, for example, through marriage. An additional nuance included the permissibility of slaves to "adopt" \*milungu that were linked with their slave owners. This practice ensured that the children of slaves were "assimilated" to the families who owned the land.<sup>42</sup> This tie presumably limited their future suffering on the land because they could make legitimate claims about their rights to it. Mabilia reports that \*milungu were the spirits of deceased people, but not those of named ancestors.<sup>43</sup> They were distant, as nature spirits typically are. East-Ruvu-speaking people spoke of an additional nuance. In their experience \*mulunqu used individual people as spirit mediums. In their understanding, the spirit chose them, coming from afar to use them as conduits through which to communicate with living people and communities. Those chosen were imbued with the power of healing associated with the spirit.44

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Amidst all the variation these examples highlight, \*milungu spirits remained broadly conceptualized as being linked with nature, whether with specific land tracts or with areas removed from the immediate community. Even in the cases, such as those described by Gogo, where they were associated with kinship and slaves' opportunity to claim historical rights to local land, they were never described as familial ancestor forces of the \*mizimu sort.

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Several things are striking about the added associations that the Gogo gave to the \*milungu. The first is the social understanding that incorporation into societies was possible when these spirits were "adopted" as one's own. But this practice was fitting as a predominant and useful precept in Gogo societies since, as we have noted previously, they have long incorporated new populations of people into their lands. For newcomers to Gogo areas, the established practice that permitted opportunities for them to officially connect themselves with the powerful spirit forces that "owned" those lands helped them legitimize their presence on it, and it opened up ways for them to access the beneficial powers those spirits wielded. Additionally, as we noted in chapter 3, the adoption of spirits that preceded the arrival of newer populations has precedent in early Bantu history. By honoring and propitiating those spirits, Gogo newcomers acknowledged their precedence. With this relationship established, they could tap the spirits' powers in times with they needed healing and prosperity. In so doing, the Gogo continued an institution that Klieman suggests reflects an enduring Niger-Congo epistemology, which mandated that people submit to first owners of the land. 46

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Additionally, in each of these cases, the broad characterization of \*milungu as spirits that tended toward destructive ill-will if not acknowledged as predominant or propitiated in desired ways harkens to their original characterization in early Kaskazi and Ruvu belief. Another change is that these spirits, who appeared to have originally inhabited the marginal areas of Ruvu societies, in forested or bush zones, developed over the course of Ruvu history an increased tendency to move into settled areas to make demands and wreak havoc. But true to their original disposition, that of "potentially evil," the \*milungu retained a power that people could use to their benefit, even if it had negative consequences for others, if they submitted to them. In this way, in Ruvu communities, and among neighboring societies, \*milungu upheld its enduring reputation for being somewhat unpredictable in nature.<sup>47</sup>

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Another development among Ruvu peoples over the last millennium has been the growth in complexity of the spirit world distinct from the \*milungu. Two familiar nature-spirits in the Northeast-Coastal region were kinyamkela and mwenembago. Kinyamkela was commonly associated with "woodland areas." Kami, Kutu, Zaramo, Lugulu, Kwere, and Kagulu speakers of the East Ruvu group were familiar with it. Outside of Ruvu, two neighboring Kaskazi societies, the Ndamba speakers of the Kilombero group, far inland from the Indian Ocean coast, and the Zigua speakers of the Seuta branch of Northeast-Coastal Bantu recognized it. Beyond Seuta and Ruvu languages, it was also found in Swahili with the meaning "evil spirit

associated with the wind and whirlwinds," known for its meddlesome, tormenting, and intimidating nature. Our most informative ethnographic report on *kinyamkela* comes from Marja-Liisa Swantz, who notes that among Zaramo speakers *kinyamkela* was a femalegendered spirit characterized as "the mother of all spirits." She was helpful to *waganga* in providing information on cures for myriad afflictions. In contrast, Swantz notes that the *mwenembago* spirit is male, and is known for its great physical strength and for having a malicious character.<sup>48</sup>

Though not known as widely as *kinyamkera*, the *mwenembago* spirit is likely a historically recent innovation as well. Its construction rests on compounding two words: *mwene*, "owner/chief," and *mbago*, "forest." The masculine gendering of *mwenembago* may suggest that *mwenembago* was conceived as the male counterpart of an already existing female *kinyamkela*, both of which were associated with wooded zones. The gendered nature of the two spirits supports the likelihood that they were relatively recent developments, probably of the past 500–700 years or less. This is because there are no apparent indications that in ancient Niger-Congo or Bantu societies gendered identities linked to nature spirits or to spirits at all.<sup>49</sup>

These two spirits may thus reflect recent growth in the complexity of the realm of spirit, something that has probably ebbed and flowed over the long course of Bantu history. At the same time, it must be noted that, as fluid as the contemporary understandings of such sprits are, they remain tied in clear ways to the enduring Niger-Congo frameworks. *Kinyamkera*, for instance, is conceptualized as the generalized mother of the spirit world and remains vital to healing, a precept that is also of ancient origins, that is, the importance of the role of spirit in healing.

To be sure, the *kinyamkela* domain pushed the common boundaries of the nature spirit in that, as Marja-Liisa Swantz indicates, she represents a unified figure of nature. She bridged the gaps resulting from distinctions made among nature spirits in Zaramo beliefs. It could be that she represented the way to heal social ailments that afflicted a wide population in society in recent times. Though we cannot say with certainty in which direction the name for this spirit-type spread, it is worth noting that the zone it covers, from central Tanzania to the Ndamba of the Kilombero Mountains, is suggestive of a diffusion that occurred in recent times across this integrated cultural and commercial zone.

In Ruvu communities, as well as other Bantu-speaking communities, it was common for spirits to be recognized for founding their communities and for being the original settlers of the land.<sup>50</sup> Such spirits were usually associated with mountainsides, caves, groves, rocks, bodies of water, and waterfalls.<sup>51</sup> In times of need some people propitiated them for blessings. The Niger-Congo worldview that the world of spirits could bring about affliction endured in

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Ruvu communities and in the larger Northeast-Coastal-Bantu Culture Zone generally. The origins of the variety of spirit forces were complex, and the institutions associated with them were dynamic, but the underlying structure of belief remained consistent. The spirits, if not honored in a way that appealed to them, could inflict disease in the community.

## "Witchcraft": A Physical Threat to Well-Being

"Witchcraft," unlike the two prior causes of disease, resulted from works done by people living in the corporeal world. In the history of Bantu societies the understanding that malicious intent lay at the root of malaise stemming from witchcraft is ancient. Historians Isichei and Vansina argue that a discourse of inequality, commonly expressed in the wishing, consciously or not, of ill-will on others, underpins the experience of witchcraft.<sup>52</sup> One might say that witchcraft was the least predictable and least controllable cause of disease and suffering in early Ruvu communities. In Kaguru communities, for instance, people often conceived of witchcraft's effects as the antithesis of what was desirable in society because it broke down the community's fundamental working order.<sup>53</sup>

To understand this worldview, it is helpful to assess the meaning and conceptual nuances of the root word that derived witchcraft in the NECB societies and other Bantu-speaking societies. In the proto-Ruvu era witchcraft was \*uhawi. This word derives from an old Bantu root, \*-cab-, which early on meant "to heat or boil up." This noun was coined in the early Kaskazi period, and it explicitly employed an already existing, powerful metaphor of witchcraft as the infliction of "heat." The metaphor of illness as a heated condition goes far back in the history of Bantu-speaking peoples. "Heat" expressed a state of imbalance or lack of neutrality, taking individuals and society out of a state of optimal functioning. Healing and right functioning, in contrast, were metaphorically expressed as being cool.

Since the proto-Ruvu eras, too, there has been in use a distinct verb, \*-dog-, at the core of witchcraft. It conveyed the meaning "to bewitch." It named the act of placing witchcraft on another being. This word attests in an equivalent meaning throughout the Northeast-Coastal Culture Zone and beyond. Its prevalence is not the result of a recent word transfer or innovation, but reflects the preservation of an ancient verb root of persistent meaning that dates back to the proto-Bantu period of the early third millennium BCE. In other words, the idea of bewitchment has retained its current meaning and linguistic form for at least 5,000 years. It is through this word's history that we access the conceptual reasoning behind the widespread understanding in Bantu societies that witchcraft could be actively placed on another body. Because all people had potential access to the means of bewitching, either

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through their own skill set or that of known practitioners, witchcraft was and is widely feared. Long-term knowledge of and experience with witchcraft in Ruvu societies has made it one of the most acknowledged and expected root causes of illness and suffering.

The custom of identifying a body in the state of illness as having an imbalance in what might be called a core temperature, whether due to witchcraft or some other cause, prevailed in all the descendant societies of the proto-Ruvu.<sup>57</sup> A sick person, regardless of cause or symptoms, was made well, \*kupona, 58 by cooling, \*kupola, 59 the body. Cooling potentially deactivated bad medicine and neutralized illness.60 For Ruvu-speaking people and the wider Northeast-Coastal zone, a common verb, \*kupunga, described the particular means by which an underlying cause of illness was expunged from a patient. It involved sustained physical fanning and shaking and the creation of fluttering movements that pushed air through and around the body. This method of cooling has been widely associated, for example, with the practice of expelling a malicious spirit force from the body, but it also applied to other senses of cooling bodies, including those that suffered from elevated body temperatures. Hence, an effective winnowing or fanning of the body could either disengage or arouse that which adhered to it, such as a spirit, or it could cool the body heated, for example, by fever.<sup>61</sup> Outside of Northeast-Coastal Bantu, in other Mashariki descendant languages, the word's original meaning "to winnow, or fan," is widely retained, allowing us to see how this semantic development came about and to recognize its importance in healing afflictions stemming from any number of causes.

Although the etiological factors of environment, types of witchcraft, and spirit forces displayed regional variation, they were familiar to most regions inhabited by Bantu-speaking people. All three possibilities reflect aspects of an ancient Bantu worldview, which stipulated that people had to consciously create and maintain opportunities for a state of balanced wellness; health was not guaranteed.<sup>62</sup> These conceptual understandings, it must be made clear, did not necessarily determine the precise catalyst of suffering, but they did create a general framework of understanding that guided people's decisions about appropriate intervention.

#### **Health Practitioners**

Ruvu people likely did not call on health practitioners every time they dealt with an illness or less than optimal health. The decision to seek the attention of people with special abilities to bring on or elicit the conditions for healing and improving the physical or social body likely depended on the limitations of the inherited and experientially-derived knowledge "fund" of the afflicted people.<sup>63</sup> Like societies the world over, when an individual's or community's own knowledge cache is inefficient to remedy the problem at hand, or the etiology of disease is

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unclear, experts are called upon. Related to matters of health, we can identify at least three types of health practitioners that have played important roles in Ruvu-speaking communities since the middle of the first millennium CE.

Health practitioners whose specialties included divining and healing—diviner-doctors—were widely known in Ruvu communities.<sup>64</sup> When a person or community decided there was a need to see a medical practitioner, this was the person they likely turned to. These \*-ganga, diviner-doctors, were not a proto-Ruvu or proto-Northeast-Coastal Bantu innovation. In all likelihood, these health practitioners have been important since as early as the Niger-Congo period.<sup>65</sup> Their continuing predominance in Ruvu-speaking communities, and across Bantu-speaking societies more generally, may thus reflect continuity in community health specialists that is over ten thousand years old. Diviner-doctors were skilled in the practical remedies required to cure people and society. Many of their cures derived from plant sources. But diviner-doctors also relied on their abilities to tap the knowledge of the spirit world to determine disease etiology.

A closer look at \*-qanga's etymology sheds further light on their work and how their skills were conceptualized in Mashariki-descended language communities. The word derives from a proto-Bantu verb that meant originally to "to tie up." In very early Bantu eras it named a "doctor."66 The underlying meaning it carried, that of tying up, reveals epistemological understandings about what caused and cured illness. Schoenbrun suggests that the state of being bewitched, and therefore ill, can be interpreted as having been "bound" by witchcraft.<sup>67</sup> Similarly, Lloyd Swantz notes that Zaramo communities took it for granted that "herbs and roots alone are not sufficient [for healing], they must be accompanied by the proper words and rituals and only then do they become what we call traditional medicine."68 The client and \*-qanga understood that "the cure is not dependent on the medicating properties of the dawa [medicine], but also on the power and skills of the mganga as she counteracts the supernatural forces which caused the illness." The counteracting effect involved defeating or "untying" the source of affliction. Similar to what Schoenbrun describes, when it came to witchcraft treatments, people believed that \*waqanqa could provide effective countermedicines. Their remedies freed the afflicted person from witchcraft's negative effect. In essence, being bound by good medicine could cure the unwanted result of being bound by evil medicine because strong, good medicine neutralized evil medicine's power. \*waqanga were known to have access to and knowledge about good and evil medicine, including negative spirit forces, they were commonly revered and feared in their communities.

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Examining the divining aspect of the \*-ganga's skills allows a clearer understanding of the nuances contained within its meaning and history. In the Mashariki-Bantu era of the early last millennium BCE, it seems that a new degree of emphasis on a diviner-doctor's ability to discern the cause of illness came to the forefront. This possibility is suggested by the innovation of a new independent verb for the act of divination.

The act of divining, \*-lagula, is practiced widely across Mashariki-descended languages. The word's origins lie in the proto-Forest-Savanna-Bantu verb stem, \*-dàg-, "to show." People who had the ability to divine, in other words, were skilled at "revealing" the cause of illness. The act of divination rested on the active participation of diviner and spirit. It was incumbent upon the diviner to probe the realm of spirit; but, at the same time, the ability to "see" depended on the spirit "showing" the cause to the diviner. Diviners had to receive knowledge and messages sent from the ethereal realm.<sup>73</sup>

Divining disease etiology was the essential avenue toward restoring health, but it came to fruition only if the spirit chose to reveal the cause.<sup>74</sup> Healing thus depended on a cooperative relationship between corporeal and ethereal beings. It was only after the ethereal force responded in visions, insights, oral messages, dreams, etc., that diviners could tell clients whether they were dealing with discontented or malicious ancestors, or if they were under the influence of an evil person's acts, or if the affliction sprang from environmental causes.<sup>75</sup> Deriving effective remedies depended on cause, not symptoms.<sup>76</sup> The spirit was expected to reveal the necessary course of treatment. The use of divination and remedies as a primary approach in healing thus rested in an understanding that the dialectic between metaphysical and corporeal was fundamental to healing.<sup>77</sup>

The people who played a part in the physical, social, and mental health of Ruvu communities included at least two additional health practitioners. They were birth attendants/midwives and circumcisers. Unlike the diviner-doctor, their specialties do not have etymologies traceable to the very earliest periods of Bantu history. Still we can argue that they must have been instrumental in sustaining Ruvu communities. We saw in chapter 4 that each of these specialists played a role in guiding youth through recognized life stages in their communities.<sup>79</sup>

Birth attendants, for instance, played a central role in such important matters as educating pregnant women on proper nutrition and healthy comportment through their pregnancies. And they also played a role in delivery and post-birth practices. Among their important work were religio-ritual ceremonies that protected mothers and infants. But it was not only a birth attendant's job to guide a woman toward a full-term pregnancy; she also oversaw the birthing process in what we might today deem medical terms. Like today, birthing was not without

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potential physical complications that could threaten the soon-to-be mother and unborn child. Knowledge of proper procedures to ensure safe delivery and recovery were certainly part of the expertise of the birth attendant.

While we do not as yet know exactly what their knowledge comprised in early Ruvu history, we can be fairly certain that within their communities birth attendants played an ongoing and vital role in successful birthing and recovery. Marja-Liisa Swantz found that the Zaramo viewed childbirth as a potentially threatening transformation both for the child and for those people in close proximity to the process. Because birth attendants were the first people to deal with the passage of newborn children into the corporeal world, they had to be properly prepared:

Childbirth is likened to smithery by the Zaramo, as by many other ethnic groups. When the smith works, he sits on the ground with a pair of bellows made of animal skin. A clay or metal pipe channels the air to the coals, turning them from black to red-hot to white. The iron is heated and then formed with a hammer or an anvil. The heat of the iron work is likened to the heat of the mother and child in the process of childbirth. As the iron is still hot after it is hammered into shape, so the child, when it comes out to the ground from the mother, is formed as a person but still full of the heat of its making. Those who have assisted in the birth of the child have the heat of childbirth on them, a danger that can cause blindness. Smiths have herbs with which they prepare medicinal water to wash themselves [of] jalalani to remove the heat of their work. In the same way, the birth assistants use this medicinal water to wash away the heat of childbirth jalalani.<sup>80</sup>

In providing a context for this passage, Swantz notes that jalalani was viewed as a site of "dirt and decay, as well as great power." The potency of its presence could bring about both positive and negative results. In the case of childbirth, jalalani manifested as heat. As we noted earlier in the chapter, in Ruvu and other Bantu societies, heat was associated with illness and suffering when it came into contact with or enmeshed with a body. Because it was full of potentially negative power in childbirth, birthing was viewed in this case as a threat to those in physical proximity to it. In order to neutralize the potential negative effect that the heat posed, Zaramo, and as Swantz intimates, other people, used medicinal water to counter its anticipated harmful consequences. As she suggests, birth assistants used water prepared with herbs to cool the heat of childbirth. The medicinal water, which she tells us was made by iron smiths in the course of their work, was in all likelihood prepared by birth attendants in Zaramo societies. It was they who would have held knowledge about the medicinal property of herbs effective in safe childbirth. Property of the safe childbirth is a safe childbirth.

This Zaramo example permits us to see that although birth attendants may not have been health practitioners of a general sort, their specific knowledge and experience was of great importance. Because childbirth was among one of the most joyous and guarded occasions in the lives of young women and their lineages in Ruvu societies, it may go without saying that one's preferred birth attendant would have been one who had demonstrated success in delivery. The Zaramo example, when coupled with the centrality of children in preserving the kin community, opens up an avenue for imagining how significant the long-standing role of birth attendants must have been in the early Ruvu societies.

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Like birth attendants, circumcisers have also played significant and enduring health related roles in Ruvu social history.<sup>83</sup> In the previous chapter it was shown that, in Ruvu history, circumcision was but one feature of a much older sociocultural institution of Bantu-speaking peoples, modified in a number of ways by the early Ruvu peoples, whose purpose was socializing and physically preparing emergent men to fulfill adult responsibilities in their communities. Having established that circumcisers were central to the physical preparation of men into fully-fledged adults, we now examine them as health practitioners in Ruvu communities.

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Circumcisers in effect performed a type of surgery, and surgery always can be potentially lifethreatening. Although circumcisers were not doctors in the same sense as diviner-doctors, their work was recognized as that of a specialist. The comparative ethnographic evidence suggests that this understanding goes far back in time. In Zaramo communities of the twentieth century, Lloyd Swantz says, "in a very real sense they perform a medical function among the Zaramo."84 According to his consultants, the circumcisers' specialty was very limited. Unlike the \*-qanqa who treated a range of conditions and only rarely conducted surgical procedures, except sometimes a superficial cut of the skin to apply medication, circumcisers only performed circumcisions. They could be called to perform these in boys' initiation camps, as appears to have been the tradition going back to the proto-Mashariki period, or, with the later spread of Islam, they might be called to perform them in private homes. On the question of whether or not they considered themselves medical practitioners, circumcisers "stated that they were not waganga but that they knew several types of medicine connected with [their] work."85 In addition to the medicines directly connected to the surgery, circumcisers also used medicines that protected their clients from witchcraft, caused by rivalries that could develop during initiation camp instruction. Hence, effective circumcisers had to have "knowledge of medicines for protection."86

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Medical practitioners have clearly played necessary and functional roles in maintaining the overall health and reproductive potential of Ruvu societies.<sup>87</sup> It was in their recognized and combined abilities to discern illness, to heal, and to transform individuals, either by circumcision or by ensuring the proper birth of children that they contributed to sustaining

societies capable of physical and social regeneration.<sup>88</sup> While the diviners-doctor specialist has been the most closely examined in the history of Bantu societies up to this point, other specialists have been exceedingly important as well.<sup>89</sup> After all, while many people and societies may have experienced illness to the point of needing to seek the help of diviner-doctors, presumably every person in Ruvu society needed the expertise of birth attendants at some point. Likewise, the widespread practice of circumcising boys in Ruvu societies guaranteed that somewhere in the range of fifty percent of the population relied on the circumcisers' knowledge and skills at one point in their lives. The continuity of some of these specialties in both name and responsibility since early times reminds us of the stability and flux in their roles. We are also reminded that emphasis on the social and medical roles of \*-ganga may have led thus far to some unevenness in our examination of early health practitioners in Bantu communities.

#### Religio-Ritual Medicine

The use of spoken or sung words accompanied by music and dance in Africa has often drawn the attention of outsiders. For some people, these "performances" have represented an archetypal example of African "primitive" expressions. And in instances when medicine and religion purposes were perceived as part of their purposes, they commonly have been deemed "superstition" or "witchcraft." O The \*-ganga I worked with were well aware that many people characterized their practices as ineffective. They also recognized that people sometimes associated their work with evil-doing. And they were clear that the nature of their work was complex and difficult for many people to understand fully. They forthrightly acknowledged that medicine had the power to heal and to hurt, and that that fact made people suspicious of them. But when it came to the question of what made their medicines efficacious, they again and again reminded me of the importance of words communicated to the ethereal realm during religio-ritual ceremonies as the thing that imbued their remedies with the power to heal and prompted spirits to respond.

Religio-ritual healing ceremonies have been instrumental in health and healing in Ruvu as well as in other Bantu-speaking areas. Collective social participation was often an important characteristic of such ceremonies. As Marja-Liisa Swantz notes, "problems that most Westerners would feel are individual problems, whether of a psychic, spiritual, or physical nature, are accepted by most Africans as social problems." It was therefore expected that community members might be needed for the successful healing of certain individual or community problems. When people participated in such ceremonies, it was clear to all where they stood in the social fabric. In other words, one's presence in healing efforts was an indication of support for the healing effort. Participation was important for creating the

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potential for equilibrium that insured personal and social health.<sup>94</sup> Ceremonies, whether local, private, family affairs or public, community-wide events, "function[ed] as visible representations of the invisible" forces of healing.<sup>95</sup>

The two-fold nature of religio-ritual ceremonies also rested on an understood confidence in the power of ethereal forces to restore or maintain well-being. An essential element of Ruvu religio-ritual ceremonies was termed \*-tambiko. In those ceremonies, community members and ethereal forces communicated to bring about healing and prosperity. Religio-ritual \*tambiko have been an aspect of religio-ritual practice since the proto-Ruvu period. The roots of \*-tambiko beyond the Ruvu trace to the proto-Mashariki period of the early part of the last millennium BCE. It was in those early speech communities that people innovated the noun from a Savanna-Bantu era verb that meant "to offer" and attached to it the more specific sense of offering or sacrificing in order to heal.<sup>96</sup> Although they were expressed in diverse ways, \*-tambiko embodied the fundamental act of spirit propitiation. As concerned healing, people believed that without \*-tambiko the potential for healing might be undermined. Through their offerings, early Mashariki people and their Ruvu descendants trusted that spirits would heed their pleas. In times of hardship they gave offerings as acts of reconciliation with the spirits.<sup>97</sup> This is why in times of blessings and prosperity \*-tambiko were commonly given as acts of gratitude. 98 In the worldviews of these communities, a world without \*tambiko was a world in which suffering was imminent.

The epistemological underpinnings for holding \*-tambiko have been steadfast over a few millennia, but the way they have been expressed changed continuously. This exemplifies the way people remain fluid and flexible as a way of maintaining "the integrity of their worlds in transitional circumstances." The principle was constant even when their expressions were continuously interpreted to meet immediate ethereal demands.

#### Religio-Ritual Ceremonies and Health

Across Mashariki Bantu communities, \*-tambiko have shared common characteristics through time. Nevertheless, the unique demands of community, environment, and spirits intersected to create the potential for varied expression. One element such ceremonies shared was that they were always directed to spirit forces. In their most stripped down form they may have included a material object of offering accompanied by words shared with the spirit force being called upon. Such offerings may have taken only minutes to carry out. But in elaborate ceremonies any number of healing specialists and community members—both extended family members and neighbors—thought important in achieving a desired outcome were called upon to participate. Complicated ceremonies might extend over a number of days.

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What mattered most in the expression of offering was appeasing the spirit forces believed important in health restoration and the bringing of prosperity. One element of their success depended on where these moments of religio-ritual communication were carried out. In the ethnographic record we are told that some ancestral spirits preferred the holding of the \*-tambiko at their original gravesites, while others were satisfied with their being held at the base of a sacred tree or grove, at human-made shrines, or at altars. In contrast, important nature spirits often took their propitiation at the site of caves, streams, and mountainsides. <sup>101</sup> The variability of manner and place in which these ceremonies were carried out was anchored in an understanding that spirits were not static in expectation or temperament and that people and communities had to show some effort in their efforts to appease them. <sup>102</sup> Improperly propitiated spirits did not respond favorably. Thus, communities had to be prepared to modify \*-tambiko to accommodate spirit appetite. If spirits did not respond favorably, observances were modified and repeated.

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There were no prescribed times for holding \*-tambiko, although some may have followed some correlation with seasonal changes. Cyclic ceremonies, for instance, may have preceded the sowing of seeds to bring about abundant harvests and healthy rains. Similarly, offerings could have been made at the time of first fruits as an act of gratitude. As a plea, people may have made offerings for safety and fortune when travel was imminent. In other cases, families and clans held veneration ceremonies as acts of ongoing reconciliation with their lineal ancestors. The most likely times for spontaneous offerings would have been when calamity struck or in times of good fortune. These acts were continuously encouraged by a shared worldview in which spirits forces could sway things toward better or worse. 103

## Clan-Led Propitiation

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Clan prosperity rested on reconciliation with recognized clan ancestors. According to traditional testimony, the primary way reconciliation came about was through the giving of \*-tambiko, the responsibility of which commonly fell upon the eldest living lineal ancestor. In more recent eras it was also common for them to be the charge of people holding positions of political and/or politico-ritual authority. 104 It may be, too, that this custom was a much older pattern than tradition now admits. It could also be that "oldest" in the context of a whole community may have meant not the literally oldest person, but the most senior person in social or political standing in the clan or lineage. Among Gogo communities, for example, the *mutemi*, the clan ritual chief, is a centuries old institution, which may have spread into the region from westerly lying populations during the early or middle part of the second millennium. 105

Religio-ritual and political leaders who were responsible for religio-ritual ceremonies held access to power sources influential in community health, healing, prevention of suffering, and more. They were the effective "guardians of the land" who, in part, gained their knowledge and power of important medicine from spirits forces. <sup>106</sup> It was necessary for these leaders to adapt religio-ritual ceremonies to contemporary conditions, to specific incidences, and to unique spirit demand, and it was understood that withholding \*-tambiko was detrimental to community sustainability. <sup>107</sup>

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From colonial-era documents, we learn, for example, that Vidunda-speaking people, the most southwesterly positioned of Ruvu descendents, held \*-tambiko ceremonies at the gravesites of their \*ikunquqo founding ancestors. What is telling in the details is the careful attention given to their preparation and orchestration. It is clear that care was taken to appease spirits in customary fashion. Vidunda people knew that grains used in beer making as well as those used in direct offerings were only effective when they were from the ancestor's land of origin. The acquisition of these grains almost certainly guaranteed that they would be near the site of the important spirit's gravesite, the very place the religio-ritual offering had to be made. The grains, once pounded into flour, were then placed in a "native" dish. It was then set at the head of the ancestor's grave, which was marked by an upright stone. After the pounded grains were properly positioned, clan members waited until a web was spun over the dish before they offered a pot of beer and the blood of a slaughtered animal. They interpreted the spun web as an indication that the spirit approved of the undertakings they had initiated. After the communication was received, the eldest clan member dipped her fingers into the flour and rubbed it into her own chest and back. After that, other descendants, in descending order of age, did the same. Then each person poured a bit of beer on the ancestor's grave. This offering was given three pours to the left and right, after which they swallowed a mouthful themselves. After everyone had completed this, the heart and lung of the offered animal were placed on the grave, followed by a prayer from the eldest clan member. The prayer asked that the ancestor "who had many children" refrain from distressing them through the killing of livestock and illness. 108 It was their plea for healing and prosperity.

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Descriptions of similar ceremonies were recorded earlier in the colonial era. In 1888, Wood noted many instances of "superstitious" prayers being given along with offerings of flour and liquids in Sagala communities. He also noted that spirits often had shrines erected in their honor, which commonly stood on the outer boundaries of villages. In one example, he reported that a stone inside of a "hut" was the understood guardian of the village. Though he provided no further detail, what he described was likely a place that housed the spirit of a clan founder to whom \*-tambiko was given. 109 Among Gogo-speaking people, Cole provides two parallel examples. In times of illness thought caused by ancestors, people gave offerings in their honor at their gravesite. Additionally, Cole points out that in agricultural matters "chiefs" (that is, the watemi) led the way, usually offering meat to the spirits. They would then

wait for a day to pass, and if the next morning the meat remained it was interpreted as the spirit being displeased. As was customary, the chief had to adjust and reattempt offerings until the spirits were satisfied.<sup>110</sup>

Similar \*-tambiko were likely carried out across Ruvu societies and wider Northeast-Coastal Bantu communities.<sup>111</sup> One point of note is that clan propitiatory ceremonies apparently did not call for a diviner-doctor's presence unless there was a need to discern the cause of calamity and precisely what the spirits called for. But there does appear to have been one matter in which specialists were more commonly needed, and that was in matters linked to rain. The power to bring beneficial rain was an old feature of belief and religious practice in Ruvu communities and throughout the Northeast-Coastal Cultural Zone generally.

## Nature Spirits and Rainmaking

Of likely ancient provenance in the Northeast-Coastal Zone are nature spirits who wielded the power to control rain. 112 Similar understandings are expressed in diverse institutions in far-flung Bantu societies. Rainmaking religio-ritual ceremonies have long been a personal and political matter in Bantu descendant communities. Of course, inclement weather, particularly the lack of rain, had profound harmful consequences for all communities. Insufficient rain had compound deleterious effects, ranging from the inability to produce food for immediate consumption and the depletion of food stores, to sanitation problems and human and animal death. 113 Lack of rain, unlike individual suffering, could bring on widespread public health crises.

Lack of rain was sometimes interpreted as a sign that sociopolitical affairs were being handled inadequately. Times of drought, for instance, could be interpreted as evidence of a particular leader's having fallen out of favor with ethereal forces or, alternatively, that the leader lacked legitimacy. Leaders who dealt with matters of inadequate rain took counsel with diviners to determine the underpinning causes of drought. Even though we suspect rainmaking and the institutional care given to matters of rain likely have deep roots because of its prevalence, there is as yet no reconstructed lexical data to determine its antiquity. However, we do know that \*-tambiko have been a main feature of successful rainmaking practices.

Though we cannot reconstruct a proto-Ruvu word for rainmaking ceremonies, knowledge of its prevalence and dominion in every Ruvu-speaking community intimates a common belief in the importance of such ceremonies. However, according to many informants, people really do not pay much attention to carrying them out these days. As they explained it, propitiating nature spirits who controlled rain used to involve visiting the site believed to be their domain. There, they would encounter a spirit medium at the site, who was either possessed by said

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spirit or serving as physical gatekeeper of local access to the spirit's site. The medium played an important role as a communicator of messages between the spirit realm and the corporeal visitors. Occasionally, representative leaders, either by lineage affiliation or by political authority, were charged with carrying out \*-tambiko to rain spirits.

According to memory and ethnography there was a time when many Ruvu peoples made pilgrimages to the Ulugulu Mountains to carry out \*-tambiko at the Kolelo spirit shrine. Marja-Liisa Swantz notes that the Zaramo of Bunju had not, according to the memory of the extant population, made a communal effort to send anyone to such traditional places, but that individuals had gone there to make offerings. In Kutu-speaking areas Swantz spoke with people who had organized a three-village delegation to visit Kolelo to inquire about rain. 115 Kwere speakers, Zaramo neighbors, noted that no rainmaker specialists lived in their communities. However, if matters concerning rain arose, a contingent of Kwere representatives could be sent to the well-known rainmaker in the Uluguru Mountains. 116 Lugulu speakers claimed that they and Zaramo, Kaguru, and Doe speakers have propitiated at Kolelo for rain and for support in recently fought battles. Complicating a clear historical understanding of its location, it is worth noting some people have alternatively reported that the Kolelo shrine resided in the Ngulu Mountains while others reported it was in the Uluguru Mountains. 117 This inconsistency may reflect that Doe and Lugulu, who knew they had ancestral ties to areas in the Ngulu Mountains and the Rufiji zones, visited both areas for propitiatory purposes in times of difficulty. 118

In Kaguru, oral traditions make the point that each first settler "owned" the land and that that clan's head held control over rituals of purification, fertility, and rainmaking. Like many other Ruvu communities, they believed the most powerful rainmakers were associated with mountains. The specific connection Kaguru made of clan heads to rainmaking may reflect the earliest practice in Ruvu societies. Similar to Kaguru, rainmaking in Gogo regions was highly guarded because of the power it embodied. In their communities, ritual leaders of recent times invoked the name of clan founders in \*-tambiko. Their influence could bring on the desired rain in far-flung areas, and the ability to bring adequate rain to a region constituted one of the primary ways Gogo distinguished between ritual areas and clan boundaries.

#### Spirits, Possession, and Mediums

At the heart of many medicinal practices and the role of ceremony in them is an institution that anthropologists have termed *ngoma*. This word, which is of ancient Bantu origins, has diverse meanings in far-flung Bantu societies, but its primary meaning was "drum." In anthropological literature, the word *ngoma* has been used as a way to name a diverse and

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fluid set of ceremonies that commonly involve drums, other musical instruments, songs, dance, and spoken word/prayer. *Ngomas* were commonly carried out in times of conflict in the lives of an individual or a community. In a majority of *ngoma* studies the matter of spirit possession and mediumship stands at the center of analyses.<sup>122</sup>

The goal of *ngoma* was to determine, by calling up the spirit force, what was being demanded, because it was believed that the underlying reason for malaise was related to spirit discontent. Sometimes it was thought that a spirit simply wanted propitiation from lineage or community members. At other times, a spirit desired to use the person as a medium of communication with living people. Because investigations centered on *ngoma* often tend to give disproportionate attention to "possession," the important role of \*-tambiko is occasionally marginal in the discussion. Because of this, investigations inadvertently fall short of conveying the underlying epistemological rationale for *ngoma* persistence and transformation over time. 123

Spirit possession, in which spirits manifest themselves using human agents as mediums to communicate their messages, may represent a relatively new development in Bantu societies. <sup>124</sup> In the Lakes region, Schoenbrun maintains that such spirits seem to arise in response to "new risks" in the face of challenging frontier encounters. Sometimes possessing spirits represent departed persons of stature who by their stature in life lend legitimacy to people seeking political power. <sup>125</sup> Other scholars examining the increasing prevalence of spirit possession have argued that these manifestations serve as sites of agency for disempowered people in society. <sup>126</sup> In recent times, there does seem to exist a correlation between the extent of political stratification and socioeconomic differentiation in society and the increased prevalence of spirit possession and mediumship, which support these theses. In the Great Lakes region, the growth of significant socioeconomic differentiation and political stratification, and the evidence for possession, goes back to the first half of the second millennium, if not earlier. But in Ruvu societies the emergence of sharp socioeconomic differentiation seems a development unlikely to have been present before the era of greatly increased commercial enterprise in the last three centuries. <sup>127</sup>

In recent Ruvu communities, instances of spirit possession were recognized by disease onset or extraordinary behavior believed caused by a named spirit force. A look at modern examples of possession in Ruvu and elsewhere indicate that healing, or at minimum curtailing, the negative effects of possession required a \*-tambiko ceremony that invited the spirit into the afflicted body to reconcile the grievance. The invitation was carried out by bringing about a trance-like state that is sometimes metaphorically described as bringing the spirit into the head of the troubled person. These religio-ritual processes were often referenced by phrases that began with *kuhunga*, which we have previously shown meant "to winnow, flap, or to blow." The different kinds of possession included the *kuhunga madogoli*, *kuhunga lungu*,

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*kuhunga kinyamkela*, and *kuhunga mwenembago*. As we saw earlier in the chapter, the act of blowing or airing the body was a common strategy in healing. It also was common that a \*-ganga already known for having been empowered by the same spirit as the afflicted person presided over \*kuhunga undertakings.

Upon being "possessed," the spirit manifested as a personality and took over the ailing person's physical body. At that point the spirit made its desires known to the community; it used the person as a conduit for the message it wanted to share. Communities often learned that the spirit wanted a particular offering made. In other cases the spirit might demand to take up residence within the afflicted person. When this happened, it was believed that the spirits chose that person to be a \*-qanga imbued with the spirit's power. Once the desires of the spirit were known, they were then carried out. If, for instance, the spirit wanted an offering or an altar built in its honor, then that was what people did. When a spirit wanted to take up residence within a person, and the afflicted agreed, s/he could then be called upon when the spirit's power was needed in the community. In an altruistic act of \*-tambiko, one might say that the formerly "possessed" person offered his or her body to the spirit. 131 The prevalence of such interventions within the somewhat limited coastal and immediate hinterland zones of the Ruvu, Kutu, Kwere, and Zaramo speech communities makes it likely that possessing spirits turned up in their communities no earlier than the proto-Central-East-Ruvu period of about five or six hundred years ago. It is equally possible that they appeared as recently as the period of divergence of the Zaramo and Kutu from their common linguistic ancestor, about the early eighteenth century, and then later spread to nearby neighboring Ruvu communities.

Religio-ritual observances of earlier ages, before the new kinds of spirit possession spread among East Ruvu groups, nevertheless communicated between people and spirits. The wide-ranging similarities across \*-tambiko ceremonies in Ruvu societies reveal their core purpose as reconciliation with the spirit world and the restoration of health. Moreover, it seems that these religio-ritual ceremonies were among the most important medicinal interventions across much of the Mashariki world. But \*-tambiko also comprised a fundamental component of an overall religious outlook. It was where spirits and health matters intersected in the temporal world. With this understanding, it is obvious that attempts to detach health matters from religious matters deliver an incomplete history. It is thus productive for us to view medicine as a medico-religious matter in Ruvu history. The intersection of these elements has long been present in the history of Bantu-speaking societies and likely reflects an enduring aspect of still more ancient Niger-Congo religious understandings. 132

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#### Curative and Preventative Medicine

While \*-tambiko were important for healing, Ruvu communities held much more in their repertoire of curative and preventative medicine. Medicinal remedies known to Ruvu communities seem almost countless. They took such forms as roots, teas, powders, creams, charms, leaves, stones, and pictures. Spoken words, too, though intangible, were unequivocally among the most important elements in creating effective medicine. Indeed, a mainstay premise held that when tangible medicinal substances were coupled with the right words the words unleashed its full healing power. When activated by the right procedures, Ruvu people, like other Bantu descendant societies, knew they became "substances with transformative potential." In some applications, medicinal remedies that the \*-ganga prepared and disseminated brought about physical and social cures; at other times, they provided protection against affliction. Their composition and dispensation were never entirely symbolic, as some doubtful people, usually those without familiarity of their true efficacy and transmission, have claimed. An examination of some distinct medicinal trappings highlights some of the diversity and innovation in medicinal forms in Ruvu history, as well as the epistemology that underpinned their effectiveness.

A common implement in healing practices was the widely familiar \*msinga<sup>136</sup> or muse.<sup>137</sup> This was a ceremonial whisk-like wand fashioned from an animal's tail. Moved in a sweeping motion over an ailing person's body, they performed the action evocative of purification, fumigation, fanning, blowing, and the like previously identified as important to "cooling" and healing the body.<sup>138</sup> As consultants explained it, a sweeping motion provoked the needed spirit when it was accompanied with singing, dancing, and food and beer offerings, all of which were rudimentary to \*-tambiko.

Additional proto-Ruvu-era doctors' implements were \*-tunguli. 139 These were gourd containers in which doctors and other health practitioners placed medicinal powders, liquids, seeds, and the like. 140 These remedies ranged from ingestible liquids, tinctures, and skin emollients to wearable medicinal charms, and more. 141 In addition to their function as medicinal containers, the gourds had a role in divination. Based on its distribution across Mashariki-Bantu communities, the existence of \*-tunguli as "medicine gourd/divining instrument" likely traces back to the proto-Mashariki period. Evidence of the probable verb root from which \*-tunguli derives is found in the language descendants of proto-Kilombero, where \*kutunga names a "divination technique." 142

Some medicinal implements were worn or placed on property as a defensive against physical intrusion, disease, or attempts to harm. Some of these medicines had specific uses, while others applied to many situations. Among those that appear narrowly applied were those designated for protecting newborn infants. There were at least two reasons such protection

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was necessary. In Ruvu communities, the newly born were susceptible to attacks from ethereal forces and environment. People had to protect newborns from ancestral spirits that attempted to return the child's spirit to the realm of the ethereal.<sup>143</sup> They also took precaution against environmental factors that might compromise the infant's health.

In Ruvu communities we can identify two medicines used to protect babies. Fungo was familiar to coastal-dwelling Zaramo and Doe speakers. Its limited occurrence in the East Ruvu subgroup may indicate it represents a recent medicine that emerged during the last few centuries or one that has become less prevalent in recent time. In these communities, the medicine was usually strung around an infant's waist. Its underlying verb meant "to tie up" in the proto-Savanna-Bantu era. By proto-Mashariki times, this verb took on an added meaning "to protect." Early Mashariki-speaking societies may have coined the original noun as a word for a type of medicine worn for protection. 144 A second medicinal charm used to protect Ruvu children was pingu. In contrast to fungo it was widely familiar in Ruyu-speaking societies and may thus reflect its proto-Ruvu-era usage as medicine for children. We know that in the early Forest-Savanna-Bantu period, \*-pinqu already named medicinal amulets more generally. In Nyanja, for instance, the term named a medicine that was carried on a string around a person's neck. 145 Its application as a specific protection for children may reveal a proto-Ruvu narrowing in meaning. In each of these words we see, again, the reference to "binding" discussed earlier in this chapter. In these cases, being bound by good medicine served as a screen that protected children from suffering the deleterious effects of spirit and environment.

An additional protective medicine of Ruvu people \*-kinga derived its name from an ancient verb, \*-king-, "to protect by charm or medicine." The verb still occurs widely in the Northeast-Coastal Culture Zone and in far-flung Bantu-speaking communities. It is commonly associated in descendant languages of proto-Kaskazi, including Ruvu languages, with the idea of protecting with amulet medicine that created a defensive barrier against ill-intended sorcery or physical incursion. <sup>146</sup> In the colonial period, \*-kinga medicine was instrumental in protecting Zaramo people from witchcraft. In fact, Zaramo made it a primary means of preventing affliction under European occupation because, once in power, colonial authorities deemed illegal the ordeals with which diviner-doctors had long weeded out witchcraft. An emphasis on taking preventative measures to curtail witchcraft thus developed. <sup>147</sup>

An additional proto-Ruvu era medicine, \*-kago, primarily protected land and property. This type of medicine, as the reconstructed root word indicates, traces back to the proto-Savanna-Bantu era and, specifically, protected gardens and cultivated fields. Ruvu communities retained this word and this meaning right down to recent times, but also applied it in a

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general sense to many types of property.<sup>148</sup> Lloyd Swantz notes, for example, that Zaramo speakers used it to protect their homes from witchcraft.<sup>149</sup> Similar in application, and likely of proto-Kaskazi provenance, was \*-zindiko medicine.<sup>150</sup>

Ruvu communities used an additional amulet medicine, *hirizi*. An important distinction with regard to it is that unlike the aforementioned, *hirizi* entered the interior via East African exchanges with coastal Arabs. Based on its distribution pattern, it likely transferred first to Swahili speakers and then spread to such inland groups as the Ruvu and other Northeast-Coastal descendant communities, as well as to the Upper Pokomo and Nyika of the Sabaki subgroup of NECB.<sup>151</sup>

Similar in use were \*-tego medicines. They "trapped" potential sources of danger before they inflicted suffering on bodies and property. The underlying source of this noun is an ancient Bantu verb that in fact meant "to trap." The derived noun is traceable well back in Bantu history as a word to name a hunting trap, but it seems that its medicinal meanings may have emerged in the proto-Kaskazi period of the later part of the last millennium BCE. 152 Among the Zaramo, for instance, it was a trap placed on farmed land. If a person came to steal or harm crops where such traps were in place, he or she would become sickly, perhaps even deathly so. 153 In another example, Zaramo used matego as personal medicine. According to them, it gave people the ability to "jump traps," that is, avoid attempts to deploy sorcery on them. 154 This reminds us of the ways counter-witchcraft strategies may have proliferated under restrictive European occupation and law. Somewhat distinctly, in East Ruyu languages. \*-tego named a particular type of fertility medicine. It named a \*mwali initiate's bed. The bed required that the initiate sleep in a fetal position, because it was intentionally short. According to informants, both the bed and her position were important in securing her future fertility. 155 Of separate derivation, but from the same root verb, was the \*-tega medicine Gogo practitioners used in divination. 156

In a few East Ruvu communities, an additional medicine functioned in female initiation instruction. In the past this category of medicine has been described by outside observers as "fertility dolls." The initiate fed, bathed, clothed, carried, oiled, and slept with it on her bed. Outsiders viewed it as a role-playing instrument, but it was not merely a plaything. In East Ruvu communities *mwana nya nhiti* and *mwana sesele* were medicinal implements worn and tended to by \**mwali* initiates during seclusion instruction. While they may have had the outward form of a doll-like figure, they were much more than a doll. As we saw in the previous chapter, some Zaramo described them as a portable ancestral charm kept within families. In times past, people would have made trips to the site where the person of significance had been buried in order to propitiate their spirit, but for people who lived far from their homelands and important spirits, it was permissible for families and \**mwali* to use the figurine to "demonstrate" to the spirit that she was ready for motherhood. The \**mwali* initiate showed

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her readiness by watching and caring for the *mwana nya nhiti* or *mwana sesele*. This is why she fed, bathed, clothed, carried, oiled, and slept with it. If after her exit from seclusion and marriage, she failed to become pregnant within a reasonable period, she was obliged to repeat the cycle of caring for the "fertility medicine," because her failure to become pregnant was interpreted as a sign that she had not convinced the spirit of her readiness for motherhood. 158

The term *mwana nya nhiti*, when translated, means something to the effect of "child of wood." This may say more about what its underlying epistemological function was than meets the eye. Indeed, these figures are often carved of wood, but they may also be made of clay and still be called by the same name. The unifying explanation is that the actual meaning was "child of medicine." Medicines are commonly made from plant sources, and the words for "medicine" in Mashariki Bantu languages, in any case, are commonly the same as, or based on the same root word as, the words for "wood" or "tree."

The second term, *mwana sesele*, is the name of a fertility medicine constructed from a gourd. Its etymology opens up another set of possibilities for understanding approaches taken to ensure fertility at the start of menses. As in the first case, *mwana* means "child." But its second part, *sesele*, stems from a verb root in use as early as the Mashariki-Bantu era that meant "to pour, to menstruate." Whether its use among Ruvu speakers is a recent innovation or a relict retention is not yet known for certain. Getting to the answer would involve further research in communities with such dolls or ways of denoting menses. But we can at least suggest here that, among East Ruvu speakers, the doll's name derives from a word that meant to menstruate. What is more is that the use of the gourd itself, as a container for the figurine reminds of the common use of gourds as a cradle of medicines.

The *mwana sesele* and *mwana nya nhiti* "dolls" and the medicinal powers they embodied played powerful roles in conveying fertility and thus reproducing and sustaining these Ruvu communities. The tendency for the names to carry metaphorical connotations suggests that the numinous potency of these items may have led to frequent development of new terms.

The protective medicines discussed here constitute only a small percentage of those known in Ruvu communities, and yet they are instructive as a beginning to our increased understanding of the intertwined history of health, healing, medicine, and religion in Ruvu and, more widely, in other Bantu communities. Ruvu peoples took diverse measures to remedy diseases that they knew stemmed from distinct etiologies. Additionally, with a full understanding of risks associated with disease, Ruvu people, like their earlier Bantu ancestors, took preventive measures to stave off the presence of affliction in their communities. We can suggest they

practiced preventative health care. With the aid of their health practitioners, they continually innovated and honed new medicinal remedies and other protective strategies, which in most cases appear to have depended on the support of ethereal forces.

## Summing Up

One of the ongoing challenges to our effective recovery of medicinal history in Bantu societies has been the notion that what African people called medicine was in fact nothing more than witchcraft or superstition, and that there was no rational basis for the ways they explained, diagnosed, and treated disease. But there is a chance that this mindset may shift. Recently, African knowledge and indigenous pharmacopoeia have begun to catch the attention of corporations and product developers.

Fortunately, awareness of this trend has sparked needed debate concerning the rights to and implications of patenting indigenous knowledge, as well as the potential costs to African health practitioners in both formal and informal economic sectors. A recently published World Health Organization (WHO) Bulletin focused on the Western presumption that knowledge is owned either by individuals or corporate institutions. Specifically, the discussion focused on asking what implications such a perspective held for African people and economies. In the words of the bulletin, "Intellectual property rights are often regarded as incompatible with traditional [African] knowledge because patents are based on innovations of discoveries and held exclusively, while traditional knowledge is collectively owned and based on prior use." 159

In saying this, the bulletin illuminates the point that ways of conceptualizing knowledge and property are epistemological matters. Communities construct, define, and redefine knowledge over time. In the case of specialized knowledge—particularly knowledge that is highly guarded—no solitary person can claim to be the "owner" of an idea if it is part of a corpus of inherited and collectively used information that is typically anchored deeply in history. In a Bantu sociocultural context, issues concerning matters of such inbuilt complexity cannot be solved by signing a contract built on the model of acquiring individual knowledge through monetary exchange as if, for instance, it were the equivalent of a real-estate transaction. On the other hand, this contemporary dilemma forces us to consider the importance of understanding the history of knowledge and healing in society, if both investors and African therapeutic specialists are to take into full consideration the social, economic, political, and religious interconnections and implications tied to the history of effective healing in Africa. In so doing, people will have the tools to make fully informed assessments of the potential ramifications of such business transactions and, importantly, the likelihood that those healing methods will be as efficacious in other milieus.

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By centering our attention on indigenous worldviews, we can see that there has long been a dialectical tension between the metaphysical and physical spheres of the universe. Early Bantu people and their Ruvu descendants believed that the potential origin of problems manifested in either the ethereal or corporeal realms. In the development of their rationale and remedy for worldly suffering, Ruvu peoples drew upon their inherited worldview to devise remedies and means of protection. At the core was their belief that spirits had influence over corporeal well-being. To exclude or ignore spirit forces, in their views, would have been the equivalent of building their communities on a bed of sand. Additionally, like their Bantu ancestors, Ruvu people were certain about the presence of both benevolent and malevolent living people who played a role in the etiology of illness. They lived fully cognizant of the possibility that witchcraft could be put upon them. Finally, they knew that what people and animals were exposed to in nature could result in illness. These epistemological assumptions informed the measures they took to protect and restore personal and community health.

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As we have seen, a variety of health practitioners played important roles in the early Ruvu communities. Diviner-doctors, birth attendants, circumcisers, and possibly others helped keep people healthy in their societies. Similar to twenty-first century health practitioners, Ruvu care providers were responsible for diagnoses that relied on analysis and experienced judgment. Since early Bantu times, methods of diagnosis and divination likely involved a combination of physical examination as well as other diagnostic tests. <sup>160</sup> Through a cautious and balanced approach that drew upon inherited knowledge, the power of the spirit world, and worldly experience, Ruvu people retained, refined, and innovated medicines to meet new needs and challenges that lay before them.

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In this chapter, we have only begun to tap into the history of the medicinal repertoire, comprising the ideas and actions that have been part of the sociocultural landscape of Ruvu people and the work of their medical practitioners. If there is one generalization that can be put forth about Ruvu-speaking people and their Bantu ancestors, it is that they have always considered it imperative to understand the way bodies are connected to environments, communities, and the world of spirits. In their views it took that sort of understanding to maintain an optimum level of social and personal functioning. This integrated, complex understanding is what mattered most to a community's ability to self-sustain and regenerate.

#### **Notes**

**Note 1:** Maurice Bloch and Jonathan Perry, eds., *Death and the Regeneration of Life* (Cambridge, New York: Cambridge University Press, 1982), 7; A. Dopamu, "Health and Healing within the Traditional African Religious Context," *Orita* 17 (1985): 66; M. Swantz, *Blood, Milk, and Death*, 85.

**Note 2:** John M. Janzen, "Ngoma: Discourses of Healing in Central and Southern Africa," in *Comparative Studies of Health Systems and Medical Care* (Berkeley: University of California Press, 1992), 2.

Note 3: Clifford Geertz, The Interpretation of Cultures (New York: Basic Books, 1973), 168.

**Note 4:** Wyatt MacGaffey, "African Ideology and Belief: A Survey," *African Studies Review* 24, no. 2/3 (1981): 227.

**Note 5:** Booth, *African Religions: A Symposium*, 7; Comaroff and Comaroff, *Ethnography and the Historical Imagination*, 87–9; Fernandez, *Bwiti*, 594.

**Note 6:** For examples of this principle in West-Central Africa, see Fernandez, *Bwiti*, 568; Vansina, *How Societies Are Born*, 2.

Note 7: Janzen, "'Doing Ngoma," 291.

**Note 8:** "Church Missionary Intelligencer: A Monthly Journal of Missionary Information," *The Church Missionary Review* XLV and XIX (1894): 362.

**Note 9:** Terence O. Ranger, "Godly Medicine: The Ambiguities of Medical Mission in Southeast Tanzania, 1900–1945," in *The Social Basis of Health and Healing in Africa*, ed. Steve Feierman and John M. Jansen (1992), 267.

**Note 10:** The complexity, as well as the warp and woof, of relationships between colonial medical practitioners and Tanzanian populations is covered well in "Godly Medicine," 256–282.

**Note 11:** We have no direct way of knowing the pre-translation version of this communication; however, the God they referred to likely referenced a God associated with "white" people. As the writer points out, the Zaramo were well informed about the Quran (and presumably the idea of a Muslim God). "Church Missionary Intelligencer: A Monthly Journal of Missionary Information," 362. Comaroff and Comaroff, *Ethnography and the Historical Imagination*, 215–16.

**Note 12:** Comaroff and Comaroff, *Ethnography and the Historical Imagination*, xi; Manthia Diawara, "Reading African through Foucault: V. Y. Mudimbe's Reaffirmation of the Subject," *October* 5, Winter 1990 (1990): 79.

Note 13: Comaroff and Comaroff, Ethnography and the Historical Imagination, 97.

Note 14: Ibid., 20.

Note 15: Vansina, Paths in the Rainforest, 98.

**Note 16:** See, for example, M. Swantz, *Ritual and Symbol*, 128; Gloria M. Waite, *A History of Traditional Medicine and Health Care in Pre-Colonial East Central Africa* (Lewiston: The Edwin Mellen Press, 1992), 13.

Note 17: M. Swantz, Ritual and Symbol, 116.

**Note 18:** For additional views on Niger-Congo and Bantu worldviews, see Ehret, *Civilizations of Africa*, 50; Vansina, *Paths in the Rainforest*, 97–8.

**Note 19:** Proto-Mashariki \*-tamu "to be unwell/weak/deprived"; e.g., Makua ramwa "to be deprived"; Buku rama "to stay behind" or "to be left" (in both of these languages the Bantu \*t regularly shifts to /r/); Rufiji-Ruvuma \*-tama- "to sit or stay"; Zigua utamu "sickness"; Shambaa mtamu "invalid," utamu/ntamu "illness, disease," kupata utamu "to get a disease." In colonial

records "tama" was characterized as witchcraft but that view likely emerged as a result of stereotyping African remedies trusted in treating disease generally. See, for example, Beidelman, Cool Knife, 126; Koritschoner, "Puberty Rites, Secret Association Rites, Rites Observed in the Healing of the Sick," in Native Affairs (Dar es Salaam: Tanzania National Archive, no date); Mawinza, "The Human Soul," 111.

**Note 20:** Gloria Waite divides pre-colonial understandings of disease causation into five categories: High God, ancestral spirits, sorcery, breaking of taboos, and sexually-transmitted disease (after World War I). My view subsumes all of these but is distinct in that it recognizes them as rooted in three possible origins. Gloria Waite, "Public Health in Precolonial East Africa," in *The Social Basis of Health and Healing in Africa*, ed. Steven Feierman and John M. Janzen (Los Angeles: University of California Press, 1992), 214.

Note 21: Mawinza, "Human Soul," 32.

**Note 22:** Maryinez Lyons, *The Colonial Disease: A Social History of Sleeping Sickness in Northern Zaire*, 1900–1940 (New York: Cambridge University Press, 1992). Lyons has demonstrated this in the history of the northeastern Congo Basin. See chapter 7.

**Note 23:** Helge Kjekshus, *Ecology Control and Economic Development in East African History: The Case of Tanganyika 1850–1950* (Athens: Ohio University Press, 1996), shows the historical importance of this knowledge and practice for Tanzanian peoples in the nineteenth century and earlier.

Note 24: Schoenbrun, A Green Place, A Good Place, 75.

**Note 25:** CS 453 and 461; Proto-Forest-Savanna Bantu \*-dad- "to be mad," \*-dadu "madness"; e.g., Shambaa ukilalu "madness (mental disorder)." Schoenbrun, *The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary*, 206.

**Note 26:** Proto-Southern Cushitic \*-kw'ala?- "to shout." Ehret, The Historical Reconstruction of Southern Cushitic, 268.

**Note 27:** In a more recent study such descriptions highlight the point I am suggesting here. These researchers found that the symptoms manifested and believed tied to epilepsy were sometimes evidence of other etiological diseases. See Mainen Moshi, Godleliver A. B. Kagashe, and Zakaria H. Mbwambo, "Plants Used to Treat Epilepsy by Tanzanian Traditional Healers," *Journal of Ethno-Pharmacology* 97 (2005): 327–36.

Note 28: Author interviews, Tanzania, 1998–1999.

**Note 29:** Igor Kopytoff, "Ancestors as Elders in Africa," *Africa: Journal of the International African Institute* 41, no. 2 (1971): 129.

Note 30: Klieman, "The Pygmies Were Our Compass," 85.

Note 31: Janzen, "Ngoma: Discourses of Healing in Central and Southern Africa," 94-96.

**Note 32:** Schoenbrun, *A Green Place, A Good Place*, 197. For a discussion of this word's etymology, see Chapter Three.

**Note 33:** Beidelman, *The Kaguru*, 33; M. Swantz, *Blood, Milk, and Death*, 139. For Lakes region, see Schoenbrun, *A Green Place, A Good Place*, 197. For Western Bantu, see Vansina, *Paths in the Rainforest*, 95.

**Note 34:** T. O. Beidelman, "Chiefship in Ukaguru: The Invention of Ethnicity and Tradition in Kaguru Colonial History," *The International Journal of African Historical Studies* 11, no. 2 (1978): 230; Pelt, *Bantu Customs in Mainland Tanzania*, 33–37; Bloch and Perry, eds., *Death and the Regeneration of Life*, 211. Among Zaramo and Luguru it was said that the owner of trees is the owner of the land. Trees were often considered sacred zones and were commonly used as places for

propitiating ancestors. See, for example, Fadhili Safieli Mshana, "Art and Identity among the Zaramo of Tanzania" (Ph.D. thesis, State University of New York at Binghamton, 1999), 170; Young and Fosbrooke, *Smoke in the Hills*, 69.

**Note 35:** Klieman has suggested that in Bantu thinking neglect of ancestral spirits/spirits of the terrain caused calamity that could destroy entire communities. See Klieman, "The Pygmies Were Our Compass," 74, 81.

**Note 36:** For examples of the centrality and power of ancestors in early Bantu history in other regions of Africa, see Klieman, "The Pygmies Were Our Compass," 74, 82; Schoenbrun, A Green Place, A Good Place, 197–199; Vansina, Paths in the Rainforest, 95.

Note 37: Author interviews, Tanzania, 1998-1999.

**Note 38:** Ancient verb root \*-sok- has been not given previous formal reconstruction. Proto-Ruvu \*isoka "evil spirit," "spirit apparition," "dead spirit." Proposed Southern Kaskazi areal gloss "a discontented, potentially harm-bringing spirit." Ancient origins of root supported by \*-soki noun prevalence with related meanings in Kongo (nsoki) and Bobangi (ncoki) for "sin"; Hehe isoka "ghost"; Yao lisoka "spirit," "man's soul"; Swahili mahoka "spirit of the ancestors, delusion, madness, evil spirit"; Pogolo lihoka (ma-) "spirits of dead and territorial spirits"; Nyanja masoka, (i-, ma-) "apparitions"; usokolo (u-, ma-) "malice, evil intent"; tsoka (li-, ma-) "misfortune"; Bemba misoka n. pl. of musoka "murder"; Nyanja msoka "misfortune"; Zigua usoka "tedious," sokeza ku- "to annoy."

**Note 39:** Beidelman, *Moral Imagination in Kaguru Modes of Thought*, 142; Maia Green, *Priests, Witches and Power: Popular Christianity after Mission in Southern Tanzania*, (New York: Cambridge University Press, 2003), 69, 129–30. For additional examples of the way this spirit is conceptualized, see Waite, *A History of Traditional Medicine and Health Care in Pre-Colonial East Central Africa*, 43,115; G. C. K. Gwassa, "Kinjikitile and the Ideology of Maji Maji," in *The Historical Study of African Religion*, ed. T. O. Ranger and I. N. Kimambo (Berkeley: University of California Press, 1972), 208–09; Edward Alpers, "Towards a History of the Expansion of Islam in East Africa: The Matrilineal Peoples of the Southern Interior," in *The Historical Study of African Religion*, ed. T. O. Ranger and I. N. Kimambo (Berkeley: University of California Press, 1972), 172–176.

**Note 40:** Klieman discusses a spirit similarly conceptualized in west-central Africa. See Klieman, "The Pygmies Were Our Compass," 82.

Note 41: "Kilosa Station, Vidunda Tribe."

Note 42: Rigby, Cattle and Kinship, 72-78.

**Note 43:** Mabilia, Breast Feeding and Sexuality: Behavior, Beliefs, and Taboos among Gogo Mothers in Tanzania, 28.

Note 44: Mawinza, "Human Soul," 18.

**Note 45:** See, for example, Klieman, "The Pygmies Were Our Compass," 154–56; Schoenbrun, A Green Place, A Good Place, 97–98.

Note 46: Klieman, "The Pygmies Were Our Compass," 76, 85.

**Note 47:** For accounts of the complex nature of the \*-lungu spirit, the way it was revered and feared, and its role in experienced mediumship/possession in the early twentieth century, see Gwassa, "Kinjikitile and the Ideology of Maji Maji," 204–207. See also, Alpers, "Towards a History of the Expansion of Islam in East Africa," 173–75. The complexity of the \*-lungu spirit as mentioned in various twentieth century accounts paints a fairly complicated picture of its nature and impact on communities of living people. Among some communities in recent times, it was broadly conceptualized as the land where the dead dwelled. There was no indication, however, that they thought of \*-lungu as ancestors of the \*-zimu sort. The understood distance between \*-lungu spirits and living people suggests that these spirits continued to be connected to land and untamed space,

retaining what we suspect is the way they were conceptualized in the earliest communities that recognized them. In recent accounts, too, there remains a sort of reverence based in uncertainty of the unpredictability of \*-lungu that also reminds of their having retained a quality of potential ill-will that could lead to suffering among people.

**Note 48:** East Ruvu *kinyamkera* "evil spirit entity, apparition" (origin uncertain); e.g., Zigua *kinyamkila* "whirlwind"; Swahili *kinyamkera,vi-*, "evil spirit propitiated at crossroads, wind spirit, storm that causes a whirlwind." The presence of /r/ shows this to be a borrowing into Swahili from some other source language. For example, see M. Swantz, *Blood, Milk, and Death*, 99. *Kinyamkela* was also found among Mbunga speakers. They claim that Zaramo speakers, who were brought into their communities as slaves, brought this form of spirit possession with them. For the Mbunga case, see Green, *Priests, Witches and Power: Popular Christianity after Mission in Southern Tanzania*, 74.

**Note 49:** For the development of female spirit mediumship in the Lakes region, see Schoenbrun, *A Green Place, A Good Place,* 233–35.

Note 50: Schoenbrun, A Green Place, A Good Place, 200.

**Note 51:** See, for example, Beidelman, *Moral Imagination*, 112–13; Mshana, "Art and Identity among the Zaramo of Tanzania," 176. In the last 200–300 years along the coasts of Tanzania there appears to have developed a dichotomy between land and water spirits. For examples of this recent change, see Janzen, "Ngoma: Discourses of Healing in Central and Southern Africa," 96; Linda L. Giles, "Possession Cults on the Swahili Coast: A Re-Examination of Theories of Marginality," *Africa* 57, no. 2 (1987): 234–58; Linda L. Giles, "Spirit Possession and the Symbolic Construction of Swahili Society," in *Spirit Possession and Modernity*, ed. Heike Behrend and Ute Luig (Madison: University of Wisconsin Press, 1999), 142–164.

Note 52: Isichei, The Religious Traditions of Africa, 314; Vansina, Paths in the Rainforest, 96.

Note 53: Beidelman, Moral Imagination, 138.

**Note 54:** See chapter 3 for a discussion of this word's etymology.

**Note 55:** CS 644, 647; Proto-Bantu \*-dog- "to bewitch." PR \*kuloga "to bewitch"; e.g., Rundi kuroga "bewitch, poison"; Bemba -lowa (lowele) v.t. "to bewitch, cast a spell over"; lowe fyela "to make incantation so that the iron ore smelts successfully"; -lowana "to bewitch one another"; Runyankore/Rukiga abarogi n. "witchdoctors"; oburogo "witchcraft"; Nkoya ulothi "witchcraft"; Zigua loga ku-"bewitch"; Kikuyu rogora v.t. "unbewitch"; Zigua loga ku- "to bewitch"; Lenje v.t. lowa "to bewitch, put a spell upon, hurt or destroy by magic (spell, poison, etc.)." Nurse and Hinnebusch, Swahili and Sabaki, 598. See also Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 220.

**Note 56:** For histories of witchcraft in early Bantu history see, among others, Vansina, *How Societies*, 268–9; Vansina, *Paths in the Rainforest*, 96–98.

**Note 57:** In Muslim societies, for instance, therapeutic theory, which is representative of a larger and deeper history, also employed such explanation. As in Bantu history, we see that in the Muslim cultural sphere there was a schism between theory and applied medicine wherein most locally trained healers attached the deepest levels of affliction to ethereal forces. For a discussion on how the ideas of Muslims and medical practitioners in Hausaland played out, see Ismail H. Abdalla, "Diffusion of Islamic Medicine into Hausaland," in *The Social Basis of Health and Healing in Africa*, ed. Steven Feierman and John M. Janzen (Los Angeles: University of California Press, 1992), 177–94.

**Note 58:** CS 1577, 1578; PNECB \*-hon- "to get well"; Zigua hona, ku- "to get well, to become safe." See Nurse and Hinnebusch, *Swahili and Sabaki*, 605.

**Note 59:** CS 1564, 1565; the presence of both \*n and \*l in different reflexes of this root (see footnote 58 this chapter) derives from a sound change in early Mashariki Bantu that created a free alternance between \*l and \*n when the first consonant in the root was \*p. Proto-Bantu \*-pód-"to become cold, or to cool down"; Proto-Savanna Bantu \*-hola, ku-"to become cured, to get well"; Proto-Ruvu \*-hol-"to heal, to cool"; e.g., Nyanja pola, ku- v.i. "get well, get cool," kupolecha "cure, make cool"; Rundi gu-hoza "to cause to cool, appease, console, comfort, reassure"; Tsonga hola, ku- v. "be cool, to grow cold, to heal"; Makua u-wólà v. "cool (off); heal; be healed; grow"; Zigua hola, ku- "to become cool, to become well." For Sabaki \*-pol-, see Nurse and Hinnebusch, 605. For Lakes, see Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 219.

Note 60: Schoenbrun, A Green Place, A Good Place, 111.

**Note 61:** CS 1601; Proto-Mashariki \*-pung- "to winnow, to fan"; PNECB \*-pung "to winnow, to fan, to exorcise"; e.g., Zigua hunga ku- "to exorcise, to expel an evil spirit." Ehret, African Classical Age, 315; Nurse and Hinnebusch, Swahili and Sabaki, 605.

**Note 62:** Feierman provides a well-argued example of the way theories of healing are embedded in social knowledge. Feierman, *Peasant Intellectuals*, 8–10, 30–31.

**Note 63:** Mabilia, Breast Feeding and Sexuality: Behavior, Beliefs, and Taboos among Gogo Mothers in Tanzania, 75; M. Swantz, Blood, Milk, and Death, 112.

Note 64: M. Swantz, Blood, Milk, and Death, 85.

Note 65: Ehret, Civilizations of Africa, 160.

**Note 66:** CS 785, 786; Proto-Bantu \*-ganga "religious expert/healer." Nurse and Hinnebusch, Swahili and Sabaki, 616; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 186–7; Vansina, Paths in the Rainforest, 96, 141, 298. Vansina glosses the \*-ganga "religious expert" but acknowledges their healing role in society. He thus captures the intertwined relationship between religion and medicine. See also Schoenbrun, A Green Place, A Good Place, 108.

Note 67: Schoenbrun, A Green Place, A Good Place, 111.

Note 68: L. Swantz, Medicine Man, 30.

Note 69: Ibid.

Note 70: Parrinder, African Traditional Religion, 22; M. Swantz, Blood, Milk, and Death, 577.

Note 71: Schoenbrun, A Green Place, A Good Place, 111.

**Note 72:** For a discussion of the role of *mganga*'s in Zaramo communities, see L. Swantz, *Medicine Man*. It is worth mentioning here that across the Bantu-speaking world, the \*-gang- stem attests widely in a myriad of medicinal senses that range from types of medicinal charms that either were medicine themselves and/or contained medicine within them, to roots (from which medicine is commonly derived), to types of toxins usable in witchcraft. For a discussion of this root's presence in words for charms and the sort of protections they afforded in Equatorial Africa, see Vansina, *Paths in the Rainforest*, 96.

**Note 73:** CS 471, CS 464, 465; Proto-Mashariki \*-dagud- "to divine." Derives from proto-Forest-Savanna Bantu \*-dag- "to show, teach" by addition of \*-ud- extension; e.g., Nyanja lagula mutu, ku-v.t. "remove curse"; Rundi ku-lagula "divine"; kulagurura "to divine at, for"; ku-laguza "to have witch doctor divine, find who did, bewitch another"; Runyankore/Rukiga oburaguzi n. "divination, prophecy"; kuragura v. "prophecy"; kuragurira (-ragúriire) v. "treat medically"; kuraguza (-ragwîze) v. "consult"; Kikuyu mũragũri "foreteller"; Zigua lagula- ku "to treat medically." Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 207. Nurse and Hinnebusch, Swahili and Sabaki, 595. See chapter 3 in L. Swantz, Medicine Man. While Swantz centers his work on Zaramo communities, similar descriptions of divining across Ruvu communities were shared with me throughout my interviewing experience in Tanzania between 1998 and 1999. For

more discussion on the history of this verb as it is expressed in the Lakes region, see Schoenbrun, *A Green Place, A Good Place*, 111. For a discussion of a diviner's ability to "see" the supernatural, see Vansina, *Paths in the Rainforest*, 197. While divining has always been an aspect of the work \*-ganga did, the introduction of a new word for divining draws emphasis to this specific aspect of the \*-ganga's work.

Note 74: M. Swantz, Blood, Milk, and Death, 85.

**Note 75:** Janzen, "Ngoma: Discourses of healing in Central and Southern Africa," 68. For Equatorial Africa, see Vansina, *Paths in the Rainforest*, 97.

Note 76: M. Swantz, Blood, Milk, and Death, 88.

**Note 77:** It was understood that \*-ganga or other diviners were not always "shown" the cause of disease. If this happened, it was expected that a reputable \*-ganga would give up the case in order to let another intervene. For example, see Cole, "Notes on the Wagogo of German East Africa," 324–25.

**Note 78:** In my view there were probably other practitioners important in the long run of Bantu history. The discussion of only three in this book is a reflection of what was illuminated by my data sets.

**Note 79:** For a discussion of the language data covering their presence in Ruvu communities, see chapter 4.

**Note 80:** M. Swantz, *Blood, Milk, and Death*, 74. Jalalani was not a word that I encountered in my interviews. In my view, it is likely a word adopted into Zaramo. That said, the way it is explained and managed stays well within the epistemological frameworks of Ruvu society. It thus seems that Zaramo communities have accommodated it into their well-established understanding of disease etiology. For an example of birthing related processes in Gogo communities, see Cole, "Notes on the Wagogo of German East Africa," 307. For Kwere, see Vuorela, *The Women's Question*, 99–102.

Note 81: M. Swantz, Blood, Milk, and Death, 74.

**Note 82:** An interesting point to consider is that even though in M. Swantz's passage birth attendant medicinal knowledge is likened to that of iron smiths, who were customarily male, the imparting of knowledge about how to neutralize the heat related to birthing iron likely flowed from women to men. This is suggested because, as we discussed in chapter 3, research on pottery making in Bantu societies has suggested that many of the technologies used in manufacturing pots, which were far older a technology, was likely transmitted to iron making technologies. Related to this, both iron and pottery making have been metaphorically likened to childbirth. It is thus intriguing to imagine how foundational knowledge in birthing may have informed the medicinal knowledge needed in potting and iron technologies.

**Note 83:** For the etymological histories of the words used to name circumcisers whose work centered on male bodies in Ruvu communities, see chapter 4.

Note 84: L. Swantz, Medicine Man, 59.

Note 85: Ibid., 60.

Note 86: Ibid.

Note 87: Vansina makes a similar point, see Vansina, How Societies, 222-23.

**Note 88:** Herbert, *Iron, Gender, and Power*, 2.

**Note 89:** Schoenbrun makes a point about the importance of midwife expertise in the Lakes region, see Schoenbrun, *A Green Place, A Good Place*, 110.

Note 90: Dopamu, "Health and Healing within the Traditional African Religious Context," 75.

**Note 91:** They had in large part learned these were the prevailing attitudes of colonial officials. See, for instance, Waite, "Public Health in Precolonial East Africa," 229.

Note 92: M. Swantz, Blood, Milk, and Death, 81.

**Note 93:** Klieman, "The Pygmies Were Our Compass," 195. Similar to the point Klieman makes, Ruvu informants often explained that if a person did not show up for important ceremonies they could be suspected of being witchcraft practitioners or people who used the services of such practitioners.

Note 94: Schoenbrun, A Green Place, A Good Place, 116.

Note 95: Dopamu, "Health and Healing within the Traditional African Religious Context," 67-69.

**Note 96:** CS 1655, 1656; Proto-Forest-Savanna Bantu \*-tamb- "to offer"; Proto-Mashariki: \*-támb- or \*-támbik- "offer, sacrifice (by slaughtering or killing) in order to heal sick"; Shambaa tambiko, ma- "sacrifice," kutambika "to sacrifice"; proto-Ruvu \*-tambik- "ritual veneration for healing or prosperity"; e.g., Bemba -tambika (tambike) v.t. "to offer, hand out to"; -tambikisha "to call from afar"; Runyankore/Rukiga abatâmbi n. "healers"; eitambiro n. "place of offering." Nurse and Hinnebusch, Swahili and Sabaki, 608; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 239–240.

**Note 97:** Mawinza, "Human Soul," 18; Pels, "Kizungu Rhythms: Luguru Christianity as Ngoma," 168–69.

Note 98: Booth, African Religions, 8.

Note 99: Mawinza, "Human Soul," 18.

**Note 100:** James W. Fernandez, "African Religious Movements," *Annual Review of Anthropology* 7 (1978): 230.

Note 101: Pelt, Bantu Customs in Mainland Tanzania, 43.

**Note 102:** During interviews, I was commonly told that it was not acceptable to just give anything to the spirits. In fact, informants suggested that offering spirit forces what amounted to "junk" or unwanted or unvalued items was offensive to them.

Note 103: Vansina, Paths in the Rainforest, 97-98.

Note 104: Rigby, Cattle and Kinship, 106.

**Note 105:** See Roland Oliver and Mathew Gervase, *The History of East Africa*, Vol. 1 (Oxford: Oxford University Press, 1963).

Note 106: Waite, "Public Health in Precolonial East Africa," 216.

Note 107: Pels, "Kizungu Rhythms," 169.

Note 108: "Kilosa Station, Vidunda Tribe."

Note 109: "Itinerating in Usagara, 1888," 27.

Note 110: Cole, "Notes on the Wagogo of German East Africa," 319.

**Note 111:** See, among others, Beidelman, "Three Tales of the Living and the Dead: The Ideology of Kaguru Ancestral Propitiation," 109–37; Beidelman, "Myth, Legend, and Oral History: A Kaguru Traditional Text," 74–97; L. Swantz, *Medicine Man*, 51–55; M. Swantz, *Blood, Milk, and Death*, 88; M. Swantz, *Ritual and Symbol*, 180–181.

**Note 112:** Feierman, *Peasant Intellectuals: Anthropology and History in Tanzania*, 69, 79; Rigby, Cattle and Kinship, 34, 75; Young and Fosbrooke, Smoke in the Hills: Political Tension in the Morogoro District of Tanganyika, 17, 41, 75.

Note 113: Waite, "Public Health in Pre-Colonial East Central Africa," 197-208.

**Note 114:** Author interviews, Tanzania, 1998–1999. For the Lakes region, Schoenbrun discusses the ancient presence and role of the medium and associated *babándwa* spirits who were propitiated for healing purposes. See chapter 3 in Schoenbrun, *A Green Place*, *A Good Place*.

**Note 115:** M. Swantz, *Ritual and Symbol*, 151–8. A variety of ceremonies tied to land are given. For similar understandings of the importance and distinction among ancestral and nature spirits in East Africa, see Waite, "Public Health in Precolonial East Africa," 214–15.

**Note 116:** Brain, "The Kwere of the Eastern Province," 817–838; Vuorela, *The Women's Question and the Modes of Human Reproduction*, 90.

Note 117: Ranger and Kimambo, eds., *Historical Study of African*, 205–08; L. Swantz, *Medicine Man*, 150; M. Swantz, *Blood, Milk, and Death*, 86, 129.

Note 118: Ranger and Kimambo, eds., Historical Study of African, 205-08.

**Note 119:** Beidelman, "Chiefship in Ukaguru," 230. For an example outside of Ruvu, see Vansina, *How Societies*, 167.

**Note 120:** Author interviews, Tanzania, 1998–1999. Beidelman, "Myth, Legend, and Oral History: A Kaguru Traditional Text," 82.

**Note 121:** Cole, "Notes on the Wagogo of German East Africa, 338"; Rigby, *Cattle and Kinship*, 34, 72–75.

**Note 122:** See, for instance, Giles, "Possession Cults on the Swahili Coast: A Re-Examination of Theories of Marginality," 245–46; Giles, "Spirit Possession," 150; Janzen, "'Doing Ngoma," 290–308; Pels, "Kizungu Rhythms," 163–201. For an example of an ngoma unrelated to possession, see Vuorela, *The Women's Question and the Modes of Human Reproduction: An Analysis of a Tanzanian Village*, 99, 166. She highlights the celebratory ngoma of a woman's first pregnancy and of a young woman upon exiting initiation seclusion.

**Note 123:** Janzen, "'Doing Ngoma," 291. Janzen has offered a critique of the tendency to focus on spirit possession in *ngoma* analyses at the cost of ignoring other elements, though he does not claim any element is more essential than any other. My argument differs slightly in that I view \*-tambiko as the most essential element.

**Note 124:** The claim that possession is at work is commonly understood when an *mganga* determines that a spirit is to blame for affliction. Mediumship describes a situation in which the spirit takes up residence within the human agent, working through them for an indefinite period, sometimes for the life of the person.

Note 125: Schoenbrun, A Green Place, A Good Place, 234–246.

**Note 126:** See, among others, Iris Berger, Revealing Prophets: Prophecy in Eastern African History (Athens: Ohio University Press, 1995); Jean Comaroff, Body of Power Spirit of Resistance: The Culture and History of a South African People (Chicago: University of Chicago Press, 1985); Heike Behrend and Ute Luig, Spirit Possession: Modernity and Power in Africa (Madison: University of Wisconsin Press, 1999).

**Note 127:** For the Swahili coast, Giles provides strong analyses of the provenance and complexity of possession. See Giles "Possession Cults on the Swahili Coast," 234–258; Giles, "Spirit Possession," 142–164.

Note 128: See earlier discussion in this chapter.

**Note 129:** CS 646,647; Proto-Bantu \*-dog- "to bewitch"; East Ruvu *kuhunga madogoli* "ceremony to call up a spirit" (Kutu, Kwere, Zaramo) *ndogoli* "type of drum used in calling spirits"; Swahili [borrowed] *idogori/madogori*. The occurrence of /d/ instead of the expected Ruvu \*l, appears because this noun had a class 9 prefix. The \*i-/ma- prefix was later substituted for the \*n- prefix.

**Note 130:** Proto-Northeast-Coastal \*-pung- "winnow, flap, blow." \*-hunga is appended to spirit types to connote exorcise, to extract evil effects on body"; e.g., Swahili -punga pepo, -toa pepo, -lema pepo; Zaramo kuhunga madogoli.

Note 131: Author interviews, Tanzania, 1998–1999. See, for example, L. Swantz, *Medicine Man*, 119; M. Swantz, *Blood, Milk, and Death*, 102, 7, 92, 99, 101–02; M. Swantz, *Ritual and Symbol*,119; Waite, "Public Health in Precolonial East Africa," 16.

Note 132: Klieman, "The Pygmies Were Our Compass," 82.

Note 133: Schoenbrun, A Green Place, A Good Place, 111.

**Note 134:** Green, "Medicines and the Embodiment of Substances among Pogoro Catholics, Southern Tanzania." 488.

**Note 135:** I am referring to biases that devalue and disregard, often without any underpinning research, the efficacy of "African traditional medicine." Views of African indigenous medicine are often judged with the same sort of discriminatory doubt that surfaces in discussions of "African traditional religions." As in the latter, those doubts are often entrenched in views that deem Africa and Africans incapable of a having a history of science and technology that derives from an efficacious body of knowledge. For a discussion of parallel biases in studies centered on religion in Africa, see the Introduction.

**Note 136:** CS 359; Kaskazi \*-cing- "string; (hair)"; PNECB \*-sing- "string; (hair); proto-Ruvu \*msinga "ceremonial/ritual whisk." For the use of a similar instrument in the Lakes region, but derived from another root, see Schoenbrun, *The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary*, 200.

Note 137: Attests in Kagulu for "ritual tail" and similarly in Shona mwise and Kamba mwethe.

**Note 138:** Beidelman, "Three Tales of the Living and the Dead: The Ideology of Kaguru Ancestral Propitiation," 118; Dopamu, "Health and Healing within the Traditional African Religious Context," 72.

**Note 139:** For example, see Beidelman, "Myth, Legend, and Oral History: A Kaguru Traditional Text," 85; L. Swantz, *Medicine Man*, 32.

**Note 140:** Beidelman, "Myth, Legend, and Oral History: A Kaguru Traditional Text," 85. Many people used gourds as containers, but it seems that it was only the medicinal gourds handled by doctors that were referred to by this term. Other gourds were named for their contents or the purposes they served.

Note 141: Pelt, Bantu Customs in Mainland Tanzania, 38.

**Note 142:** Proto-Mashariki \*-tunguli "gourd medicine/divining instrument." Probably derives from Proto-Mashariki root \*-tung- associated with protecting, make safe, rich, etc"; e.g., \*proto-Kilombero \*kutunga "divination technique"; Tsonga (Kusi) citungulu "medicine to treat inflammatory conditions"; Swahili tunguri "small gourd for mganga medicine." The Swahili case reflects a loan because of the appearance /r/. Waite reports that there were different forms of kutunga. They could involve an ordeal that used boiling water, fire, or needles. See Waite, A History of Traditional Medicine and Health Care in Pre-Colonial East Central Africa, 44.

**Note 143:** For a Kaguru example of an ancestor missing infants from the ethereal world and attempting to pull them back, see Beidelman, *Moral Imagination*, 113.

**Note 144:** CS1877; Proto-Savanna Bantu \*-tÚng- "tie up"; proto-Mashariki \*-tÚng- "to protect"; e.g., Nyanja fungo "protective medicine for hunters."

**Note 145:** CS 1534; Proto-Forest-Savanna Bantu \*-pingu "fetish, charm, omen"; e.g., Yao mpingu, mpingusi "protective medicine"; Zigua mpingu "medicine"; Nyanja, mpingu, mi- "charm worn at throat to ward off illness"; mpingusi, mi- "calamity, event of ill omen, shadow of coming evil." Nurse and Hinnebusch, Swahili and Sabaki, 638; Vansina, Paths in the Rainforest, 298. Vansina suggests there is a chance it may trace to the PB period.

**Note 146:** CS 1068; This is a widespread term applied to medicinal uses and other areas of supernatural powers. Its innovation as a particular protective charm may be of proto-Kaskazi derivation \*-king- "to protect by charm/medicine"; proto-Ruvu \*-kinga "protective charm"; e.g., Nyanja chinga, ku- v.t. "stop, hinder, guard, compass, give another something to drink"; chingiliza, ku- v.t. "to guard by interposition"; Rundi gu-kinga "shield, protect, shelter." Nurse and Hinnebusch, Swahili and Sabaki, 641; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 201.

Note 147: L. Swantz, Medicine Man, 48.

Note 148: CS 990; \*Proto-Savanna Bantu \*-kàg- "specialized screen used to protect gardens"; PNCEB \*-kago "protective (property) charm/medicine"; proto-Sabaki \*-kag- "protect garden by medicine"; e.g., Zigua (Seuta) kago "medicine to guard property." Nurse and Hinnebusch, Swahili and Sabaki, 590; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 198–9. For an example in a neighboring region, see Dr. Reuss, "Notes on Zeguha, Pangani," in Native Law and Custom (Dar es Salaam: Tanzania National Archive, no date).

Note 149: L. Swantz, Medicine Man, 58.

**Note 150:** Proto-Kaskazi \*-dInd- or \*-gInd- "to attack or protect"; e.g., attests in Njombe, Rukwa, and in at least one of the languages in Kilombero group, Mbunga, and in Great Lakes, Haya; Runyankore kuzinda v. "attack"; kuzindara v. "be blocked." Nurse and Hinnebusch, Swahili and Sabaki, 664; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 176.

**Note 151:** Swahili *hirizi* "(amulet) small leather case containing a sentence from the Qur'an used as medicine worn on the person"; also translated as "talisman, charm"; e.g., Zigua *hilizi*, "a charm"; Shambaa *hilizi*, *ma*-; Nyika *hirisi*; Upper Pokomo *hiriz*. Swantz reports that in Zaramo communities *hirizi* and *kinga* amulets were often used synonymously. Among them, *mganga* also relied on *hirizi* for the divination aspect of their work. See L. Swantz, *Medicine Man*, 36, 149.

**Note 152:** CS 1698 and 1699; Proto-Kaskazi \*-teg- "to trap, medicine"; PR \*-tego "fertility medicine, medicine trap; to trap"; PER \*-tego "fertility medicine, trap, initiate's bed"; e.g., Zigua mtego, mitego "trap." Nurse and Hinnebusch, Swahili and Sabaki, 608–9, 621; Schoenbrun, The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 164, 241–2, 257.

Note 153: Author interviews, Tanzania, 1998-1999.

Note 154: L. Swantz, Medicine Man, 53, 58; L. Swantz, "Zaramo of Tanzania," 61.

**Note 155:** For the Lakes region, see Schoenbrun's entry 395 \*-tege "energy, force." Especially interesting in light of the sleeping position that East Ruvu girls had to assume to guarantee fertility is his discussion of -tege "bent knees or legs, crouch" and the "potential energy contained in a crouch." The Historical Reconstruction of Great Lakes Bantu Cultural Vocabulary, 257.

Note 156: Cole, "Notes on the Wagogo of German East Africa," 326-27.

**Note 157:** See chapter 4 for a discussion of their etymology. For example, see Brain, "Symbolic Rebirth"; J. R. Harding, "'Mwali' Dolls of the Wazaramo," *Man* 61 (1961): 72–73; Mshana, "Art and Identity among the Zaramo of Tanzania."

**Note 158:** L. Swantz, "Zaramo of Tanzania," 43. For an engaging discussion of the role of spirits and their relationship to human embryos, as well as their role as guardians of children, see Vansina, *Paths in the Rainforest*, 141.

**Note 159:** "Protecting Traditional Knowledge: The San and Hoodia," *Bulletin of the World Health Organization* 84, no. 5 (2006): 345.

**Note 160:** Divination was used in early times in the Western-Equatorial areas of Africa, but it derives of a distinct verb. For this, see Vansina, *Paths in the Rainforest*, 300.