

The Use Of African Medicines In The Treatment Of *Dorobo* (Gonerrhoea), Among Female Youth

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Abstract

The aim of this study was to explore the use of African medicines in the treatment of *dorobo* (Gonerrhoea), among female youth. Sexually transmitted infections are a major problem in South Africa. The Department of Health shows that most cases of sexual transmitted disease are reported each year. Currently there is lack of documentation to substantiate assertions regarding indigenous health care methods of the African communities relating to sexually transmitted infections. The objectives of the study were as follows; to explore the use of African indigenous medicine in the treatment of *dorobo*, the study adopted an African Healing Theories. The study used a qualitative research design and was exploratory in nature. Data was generated using semi-structured interviews as data collection instruments and analysed thematically. Purposive sampling was employed to select participants. The study discovered that most of the people uses African indigenous medicine for their daily health care needs in the treatment of *dorobo* in rural society. Moreso, African indigenous medicine is used by many people as primary health care since it is cheap and easily accessible, but it is said that it has some difficulties since it does not conform to the health standards of the country.

Keywords: *African indigenous medicine, Culture, Indigenous Knowledge, Morden medicine, Primary Health, Traditional Health Care*

INTRODUCTION

Africa has a history with the application of plants for medicinal purposes and most people use herbal medicine for main healthcare . The use of indigenous medicine in primary healthcare continues to be widespread in many Africans countries and it contributes to treating various illness . The World Health Organization (WHO,

2012) estimates that most people in developing countries rely on indigenous medicine, mostly of plant origin, to meet their primary healthcare needs. (Abdullahi (2011) illustrates that indigenous practitioner play an important role in primary healthcare systems, particularly in rural communities, where they treat and support people who have little access to hospitals and health center and cannot afford the cost of modern medicine. The development of indigenous medicine constitutes an important public health issue worldwide because of its ubiquity and traditional practitioners are often the only source of health care in most African rural areas (Floyed et al. 2023). In 2015, the 56th World Health Assembly of the WHO resolved in its global strategy for alternative medicine, that its member states needed to ensure that their health care systems promoted and supported the provision of training and, if necessary, retraining of traditional health practitioners, and that there was a system for the qualification and accreditation or licensing of traditional practitioners (Abdullahi, 2011).

According to Thipanyane, (2022) in South Africa, majority of black people are estimated to make use of traditional practitioners' services in both rural and urban areas. In South Africa, traditional practitioners tend to be the first 'professionals' consulted by people with a sexually transmitted disease, including Human Immunodeficiency Virus (HIV). These practitioners are more easily accessible geographically and provide a culturally accepted treatment . They have credibility, acceptance, and respect among the population they serve, and thus form a critical part of the health-care delivery system (World Health Organization, 2020).

Literature Review

This section presents the literature review of the study.

The literature review informed the researcher about other studies that are similar and relevant towards this study. After the research outcomes have been studied and understood, they can be linked to the current knowledge in the literature about the phenomenon under study (Polit & Hungler, 2014).

Theoretical Framework

This section discusses the theoretical framework and its application to this study.

Theories are developed to explain, forecast, and comprehend phenomena as well as, frequently, to question and broaden existing knowledge within the parameters of critical boundary claims. The African Theory by Mothibe, & Sibanda (2019) emphasizes the importance of understanding African view on illness. Truter (2007) states that traditional practitioner use African Healing Theory to help people with personal and health problems. African Healing Theory takes the view that diseases and illnesses are supernatural phenomena which are governed by a hierarchy of vital powers with the most powerful deity at its apex, followed by lesser spiritual entities, ancestral spirits, living persons, animals, plants, and finally inanimate objects (Kleinma, 2010).

Traditional healing has at its base, and a deep belief in the interaction between spiritual and physical wellbeing. Accordingly, African healing theory holds that before traditional practitioner can provide treatment to their patients, they need to study the patients, both as a single entity and in the context of his or her family, as traditional practitioner believe that sickness diseases are related to the family as whole, and that if treatment is deemed necessary, ritual treatment needs to be given to the whole family. An understanding of African Healing Theory helped the researcher to evaluate the approaches that were employed by the traditional practitioners in the treatment of *dorobo*. The researcher selected this theory because it is centered on the traditional healing base and deep belief in the interaction of physical well-being. The holistic ontology implies that health is physical, mental, or societal, and refers to a state of wholeness and integration, while ill health refers to a state of fragmentation and disintegration (Meyer, et al. 2019).

Sexual transmitted infections

Sexually transmitted infections are illnesses that are spread from one person to another by intercourse, including anal, oral, and vaginal contact with an infected individual (Kejela & Saboka,2015). Additionally, they said that the term "sexually transmitted infection" has a wider definition because an individual may be infected and able to spread the sickness to others even in the absence of symptoms. Rahman, Kabir, and Shahidullah (2009) point out that the presence of other STIs increases the risk of HIV transmission and can have serious health consequences, including infertility, life-threatening ectopic pregnancies, and chronic lower abdominal pain. This risk is further increased when people lack adequate knowledge about STIs. According to Kejela and Saboka (2015), teenage students are particularly vulnerable to the spread of sexually transmitted infections because they lack the necessary knowledge and, for cultural or religious reasons, do not address STIs with their parents. According to WHO (2017), there are two types of sexually transmitted infections, namely, those that can be healed and those that cannot be healed. Of the former group, young individuals accounted for at least one-third of the instances of cured STIs.

The demand of African indigenous medicine

states that because traditional ways of life are more prevalent in South Africa's rural areas, traditional healing used to be heavily concentrated there. The scenario has evolved in the twenty-first century; traditional health services are now required not only in South Africa's rural areas but also in its cities. According to WHO (2020), this assertion is supported by the fact that the need for traditional African medicine is influenced by the fast urbanization process, HIV/AIDS, high unemployment rates, and other issues. It is likely more in demand now than it has ever been for indigenous medicine. People in South Africa visit traditional healers for a variety of reasons, including general well-being, serious medical ailments, and pandemics like HIV and AIDS. Such pandemics are financially advantageous to well-known traditional practitioners, who can draw clients from as far away as the neighbouring nations demonstrates this by stating that people who live in urban regions also rely on indigenous medicine for their everyday well-being, in addition to those who live in rural areas. This demonstrates that incorporation of traditional health care system in modern health care system was benefit not only people in rural areas but those in urban areas too”.

Research methodology

This study employed a qualitative and explorative research approach, utilizing semi-structured interviews to collect data (Bryman & Bell 2020). The choice of semi-structured interviews allowed for an in-depth exploration of the research questions, without adhering to a rigid set of questions (Cresswell & Plano Clark 2022). The qualitative research design aimed to focus the use of African medicines in the treatment of *Ɔorobo* (Gonorrhoea), among female youth. This approach was suitable for the study, as it enabled the researcher to gain a deeper understanding of the social world and how it is perceived, experienced, and constructed by the participants (Polit & Beck 2022). By using semi-structured interviews, the researcher was able to capture the emotions and attitudes. The study involved a research team comprising 3 registered traditional practitioners, 3 medicinal practitioners, and female youth from *Sendedza*, who collaborated to establish new data on the selected topic (Stanley & Anderson 2020).

The use of African medicines in the treatment of *Ɔorobo*

This section of the study looked at the use of African indigenous medicines in the treatment of *Ɔorobo* at *Sendedza* village. The researcher discovered that the method of treating *Ɔorobo* has a strong relationship with the uses of medicinal plants and it requires traditional practitioner guidance from the ancestors. There is no conceptual distinction between natural and supernatural phenomena in African indigenous medicine (Ehler, 2000). It is also described as the entirety of the knowledge, abilities, and practices derived from indigenous theories, beliefs, and experiences in various cultures, whether they can be explained, and applied to the preservation of health as well as the diagnosis, enhancement, or treatment of physical and mental illness (WHO, 2012).

The study discovered that Africa has a history with the application of plants for medicinal purposes and most of the population use herbal medicine for main healthcare (Kayombo (2007). The use of indigenous medicine in primary healthcare continues to be widespread in many Africans countries and it contributes to treating various illness (Ndhlangambi, 2019). Traditional medicine was the main source of healthcare for millions of Africans prior to the arrival of European settlers and the establishment of evidence-based medicine. This marked a major turning point in the evolution of this practice and culture (Abduai, 2011).

The participants were asked to elaborate their understanding of African indigenous medicine in treatment of sexual transmitted infection. This was done for the researcher to be able to gain deeper and better understanding on the perception of African indigenous medicine in the treatment of sexual transmitted infection. They mentioned that traditional health practitioners have been using plants before the arrival of Western health care to fight any type of infection and have a strong relationship with their environment. The researcher learnt from the participants that the medicine which is utilized at *Sendedza* village is not definite but the only ones that the study has discovered. Others were not revealed, this means that they are not common and of a secretive nature.

The above discussion shows that African indigenous medicine in the treatment of sexual transmitted infection it based on the use of indigenous herbs that are dug from the soil. They further indicated that the treatment of sexual transmitted infection in African indigenous medicine also requires instruction on how to treat people and what will be needed during the treatment. The study discovered that African indigenous medicine has the long history in the application of herbs in the treatment of sexual transmitted infection and they have utilized indigenous medicine before the arrival of the European settlers in the African continent.

Use of medicinal plants

Herbal medicine is generally used as primary healthcare by many people in Africa (Fawzi, 2013). Medicinal plants are essential in most African nations practicing traditional medicine. The earliest method of healing in the medical system is the application of traditional medicine. People still take traditional healers' recommendations for medicinal plants seriously in rural areas of Africa because they are easily accessible and reasonably priced health supplies. The researcher learnt from the traditional practitioners that medicinal plants are administered in different ways and intention, showing that traditional practitioner have strong understanding in the use of medicinal plants in the cure of *Ƨorobo*. As mentioned by Ndlovu (2010) that traditional healing procedures go beyond physical health. To add, it follows different approaches to treat sexual transmitted infection which involves the use of medicinal plants.

The study discovered that the use of medicinal plants among Vhavenda in Sendedza village is guided by philosophy behind the naming of all trees and plants that are used for medicine or food purposes. Furthermore, philosophy is constructed on a belief system, random experience and divine bones. In the relevancy with the study in question what is used to treat *Ƨorobo* using African indigenous medicine. Participants mentioned various indigenous medicinal plants that are commonly used to treat *Ƨorobo*. The researcher only managed to get insight on *muƧanzwa* and *musalamarubini*.

(a) *MuƧanzwa* (*Ocotea bullata*)

The *ocotea bullata* are plants species native to South Africa, commonly found in the Vhembe district and called as *muƧanzwa* in Tshivenda. *MuƧanzwa* is also known as *ximenia caffra* and has been used in some African cultures to treat various ailments including sexual transmitted infections. The fruits, leaves and bark of the tree are believed to have antimicrobial and anti-inflammatory properties, which may help to combat sexual transmitted infections such gonorrhea, syphilis, chlamydia and herpes. *MuƧanzwa* is named with a stern perception that it is a force to be reckoned with when it comes to wiping all infection or cleansing which translated in Tshivenda as “*u tanzwa*” (cleaning).

The researcher wanted to know the understanding of participate on the application of *muƧanzwa* medicinal plants in the treatment of *Ƨorobo*. This was significant for the researcher to gain a deeper and better understanding on the application of the African indigenous medicine in treating *Ƨorobo*. In this regard, the participants mentioned that *muƧanzwa* is a medicinal plant from which both bark and fruits are utilized through excretion in female youth. Thus, traditional practitioners grind the bark and boiled for a patient, and they drink it when it is warmer enough for them to get well within a week. However, when it comes to *muƧanzwa* fruit, it contains a seed which is graded and boiled with water and drunk for purpose of cleaning human body through excretion. One of the participants also mentioned that *muƧanzwa* is very effective in the treatment of *Ƨorobo* through *tshipoiti* method. This process requires boiled water mixed with *muƧanzwa* to be infused through a patient anus for a purpose of cleaning infection through excretion. Participants emphasized that this process is effective because patients remove waste immediately after being infused with the medicine.

(b) *Musalamarubini* (devil claws)

Musalamarubini is a Tshivenda name of devil claws species native to South Africa. It is a plant that is associated with Vhavenda ethnic group from Southern Africa. *Musalamarubini* is a local name or term used specifically by Vhavenda people in Sendedza village, which may not be widely recognized or documented in scientific and academic sources, because traditional plants are facing extinction challenges. The participants mentioned that *musalamarubini*, is a Vhavenda medicinal plant which treat various health challenge and is also effective in treating *Ƨorobo*. The plant has been named with stern perception for its resilience. Furthermore, *musalamarubini* translates to something that constantly remains even when everything or everyone has left the place of abode. The study also discovered that Vhavenda people studied the life of a plant to conclude in the naming of it. This is also the perception that conceived a belief in them that led to making experiment in using those plants for medicine. One of the participants also mentioned that it is believed that *musalamarubini* contains properties such as antioxidant which help to combat *Ƨorobo*.

The researcher also wanted to know the understanding of the participants on the application of *musalamarubini* medicinal plant in the treatment of *Ƨorobo*. In this regard, the participate mentioned that *musalamarubini* is a medical plant in which the whole plant is grinded until it becomes *luvhandu* (smooth crushed medicine), Thus practitioner take *luvhandu* and use the leave to measure the amount of medicine to prescribe for patient to swallow for purpose of treating *Ƨorobo* in female. The participants also mentioned that the use of *musalamarubini* requires more precaution and accurate dosage because excessive consumption can lead to death. One of the participants mentioned that the use of *musalamarubini* in treating *Ƨorobo* needs a brave person as the process of treating is more painful because few minutes after taking the medication, the patient releases dirty blood with urine at the same time.

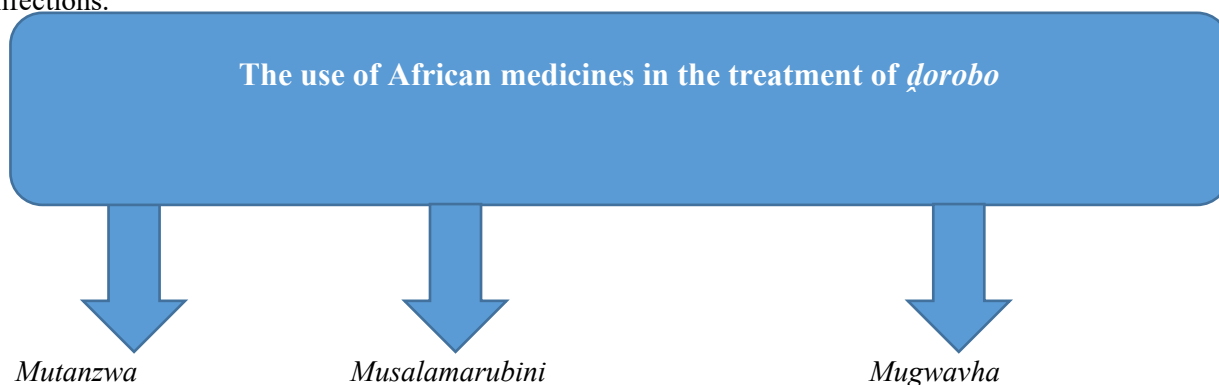
The use of indigenized trees

Indigenized trees hold deep cultural and spiritual significance for indigenous African communities. They feature in traditional health, stories and rituals. This discussion explores the significance of indigenized tree, highlighting their contribution and benefits in treating *Ƨorobo* among female youth. The researcher only managed to get insight into *mugwavha* (*psidium guajava*)

Mugwavha (*Psidium guajava*)

Mugwavha is commonly known as guava tree and is not part of African indigenous plants. However, since culture is dynamic, most African traditional practitioners had adopted and used *mugwavha* in the treatment of *Ƨorobo* because they are currently found in some African rural communities, and they have properties which treat *Ƨorobo*. Moreover, *mugwavha* also serve as fruits in many African rural communities. *Mugwavha* is also known as *psidium guajava* and it is a type of traditional steam therapy adopted and used in some African cultures, particularly in Southern Africa (Morris, 2015). The plant is believed that it contains properties such as anti-inflammatory, which helps to reduce inflammation and alleviate symptoms such as itching, burning, discharge and exhibiting antimicrobial activity against *Ƨorobo* infection.

The researcher deemed it fit to probe on the application and the purpose of using guava leaves in the treatment of *Ƨorobo* to get better and deeper understanding on how *Ƨorobo* is treated using guava. The response given by the participant indicated that the process involves using steam from boiling water infused with guava leaves. Thus, a patient is expected to sit unclothed from the waist down over a pot of hot water for a purpose of killing *Ƨorobo* infections.



The results of the study showed that traditional health was the main source of healthcare for millions of Africans prior to the arrival of European settlers and the establishment of evidence-based medicine. This marked a significant turning point in the development of this practice and culture. The study also showed that traditional health is associated with ancestors because most practitioners are trained by their ancestors to provide suitable medicinal plants that can be used to cure diseases.

The study finding indicates that many Africans generally rely on herbal medicine as their main source of treatment. Most indigenous medicine practitioners in Africa rely on medicinal herbs. Within the healthcare system, the oldest method of healing is the use of indigenous medicine. Traditional healers' prescriptions of medicinal plants are still taken into consideration in rural areas of Africa, since they are readily available and reasonably priced medical resources. The study found out that that *mutanzwa* is an indigenous medicinal plant commonly used to treat *Ƨorobo* in female youth at Sendedza village. The study also found out that *mutanzwa* is named with a stern perception that it is a force to be reckoned with when it comes to wiping all infection or cleansing which translated in Tshivenda as u *mutanzwa* (cleaning). The study finding also present that *musalamarubini* is a medicinal plant which treat various health challenge and effective in treating *Ƨorobo*. The plant has been named with stern perception for its resilience. The response given by the participants indicated that *musalamarubini* translate to something that constantly remains even when everything or everyone has left the place of abode.

CONCLUSION

The study outlined the traditional health care system of South Africa, which was the primary health care for the indigenous people, and mostly undermined by various religious groups, the youth, and the scientific institutions and majority of youth are living with STIs in African communities. Most patients are afraid to seek relief from traditional healing which provides measures for the treatments of the disease. The above problem informed the aim of the study, which was to focus on the use of African medicine in the treatment of *Ƨorobo*, among the female youth in Sendedza village. This study noted that through the years traditional health care system is used by many indigenous people as primary health care since it is cheap and easily accessible, and most of African communities depends on traditional health care for their daily health care needs. The study also found that

many plants that are utilized to treat *dorobo* in Vhembe district emphasized the importance medicinal plants can have in primary health care system in Sendedza village.

RECOMMENDATIONS

Based on the findings, this study recommends the following:

Awareness campaigns and education programs on the use of African indigenous medicine in the treatment of sexual transmitted infection

The study recommends that nurses and traditional health practitioners launch awareness campaigns in their communities to inform people about *dorobo*, primarily the younger generation. Community people and *dorobo* patients who are unaware of the infection may also regard *dorobo* differently because of this. Furthermore, this information promotes healthy living among young people generally and can help overcome the unfavourable attitude that people have regarding the use of African indigenous medicine in the treatment of *dorobo*.

Future research on the African indigenous medicine in the treatment of sexual transmitted infection

The study also discovered that there are many sexual transmitted infections which can be treated using African indigenous medicine. This study recommends that future studies be conducted on indigenous approach medicine in the treatment of sexual transmitted infection, thus can contribute to the advancement of rural livelihoods

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