
The Cultural Relevance and Continuity of Indigenous Medicine: Beliefs and Practices in Pakistan

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Abstract

Indigenous medicine plays a key role in healthcare across various regions, particularly in communities with limited access to modern healthcare services. It serves as the primary source of medical treatment, fulfilling the health needs of local populations. Traditional healing practices, the use of medicinal plants, and spiritual or religious rituals are often viewed by communities as comprehensive solutions for a range of diseases. This review study highlights the cultural significance of indigenous medicine in disease treatment and emphasizes its longstanding support for communities. The study recommends that both governmental and non-governmental stakeholders should collaborate to create effective policies and strategies for the advancement and preservation of indigenous medicine.

Keywords: Indigenous Medicines, Culture, Beliefs, Religion, Spirituality, Medicinal Plants, Traditional Healers.

Background of the Study

The term "Indigenous medicine," as identified by the World Health Organization (2000:1), "is the sum total of knowledge, skills, and practices based on the theories, beliefs, and experiences Indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, and treatment of physical and mental illness." Humans have been using indigenous medicines for the treatment of various ailments for a long time. In Pakistan, people, especially rural inhabitants, have strong beliefs in indigenous medicines with respect to the treatment of various ailments. The use of medicinal plants and visits to indigenous and spiritual healers for treatment are evident in the country. Additionally, visits to shrines, the use of amulets, rubbing salt and plants on the body, and "Sakhtona" (written script) are common practices for treatment. Local inhabitants have been practicing various techniques for curing numerous ailments, both psychological and physiological. Furthermore, the inclination toward conventional treatment perpetuates such indigenous practices in their respective communities. Therefore, beliefs and practices are regularly transferred from generation to generation due to their beneficial and effective treatment outcomes (Zaman & Khan, 1970). Indigenous medicines play a decisive role in healthcare provision, with more than 75% of the Pakistani population depending on traditional medicines for all or most of their medicinal needs (Sher & Hussain, 2000). People in rural areas

have a close connection and association with indigenous knowledge and practices. It is this strong cultural tie and the culturally constructed realities that motivate people to rely on such treatment methods. Moreover, a large portion of the Pakistani population, especially those living in rural areas, uses plants as medicine due to their easy availability and low cost. Similarly, the presence of traditional healers in rural areas is regarded as a source of healthcare provision for remote communities. Approximately 52,600 registered Unani medical healers practice indigenous treatments in both urban and rural Pakistan (Sheikh & Hatcher, 2005). In Pakistan, people use indigenous therapies by consulting clergymen, ‘Hakeem,’ ‘Pir’ (spiritual healer), homeopaths, etc. In rural areas, such healers are the first point of contact for dealing with diseases such as infertility, epilepsy, psychosomatic disorders, and depression (Sheikh & Hatcher, 2005). Furthermore, superstitious beliefs, such as the use of “Taweez” (amulet), “Sakhtona” (written script), and treatment by a “Pir,” are popular methods of treatment. A “Pir” is believed to cure mentally and physically diseased individuals through spiritual power. In this regard, common-sense knowledge serves as the bedrock of superstitious beliefs. Similarly, common understanding and the intersubjective environment are seen as practical accomplishments continually shaped by people who rely on common-sense reasoning to assemble an ethnographic context for interpretation (Kuper, 1989). Therefore, common-sense reasoning is key to understanding indigenous medicines and their practices.

Objectives of the Study

- To understand cultural contexts influencing the use of indigenous medicines
- To explore indigenous approaches for treating various ailments

Method and Material

This study is based on a secondary analysis of literature regarding the beliefs and practices surrounding indigenous medicine in Pakistan. A systematic review of existing literature was conducted, utilizing various secondary sources such as books, journals, articles, and newspapers. Online research was also carried out to gather relevant material on the subject.

Traditional Healer

There is a strong belief system in the rural parts of Pakistan, where people rely heavily on indigenous medicine. About 60% of the population utilizes the prescriptions of traditional healers. There are approximately 40,000 registered practitioners of indigenous medicine in Pakistan, and the majority of the population in rural areas is treated by “Tabibs” (traditional healers) for their health issues (Haq, 1983). Furthermore, traditional healers are respected and recognized within their communities for their important role in healthcare provision. A traditional healer may be defined as: “someone who is recognized by the community in which he lives as competent to provide healthcare by using vegetable, animal, and mineral substances, and certain other methods based on the social, cultural, and religious background, as well as the prevailing knowledge, attitude, and beliefs regarding physical, mental, and social well-being and the causation of disease and disability in the community” (Oyebola, 1986; 3). The skills of traditional healers are not limited to physical treatment; they also address mental and psychological issues. According to the WHO (2000), traditional healers play a crucial role in the pathway to care for those seeking mental health services. In Pakistan, two sectors are responsible for healthcare provision: the public and private sectors. The public sector is government-controlled and is primarily composed of the allopathic healthcare system. The private healthcare sector includes general medical practitioners, homeopaths, Hakeems, traditional or spiritual healers, bonesetters, and quacks. The formal healthcare system has weaknesses, such as a lack of focus on disease prevention, excessive centralization, political interference, weak human resource development, inadequate funding, and insufficient health policies. In contrast, the private sector, despite its weaknesses, has proven

beneficial because it is more accessible, affordable, and supported by strong community trust (Shaikh and Hatcher, 2005). Consequently, the weaknesses of one healthcare system become the strength of another. People use indigenous medicine not only in their traditional geographical communities but also when they travel outside their community or country. In this regard, Rai (2008) refers to Asian traditional healers as the harbingers of South Asia's traditional healing system, where indigenous healing is actively utilized by locals both within and beyond their countries. The practice of traditional healing is not limited to Pakistan; it is practiced worldwide, supported by strong community belief in the holistic nature of traditional medicine, which addresses both the physical and psychosocial aspects of disease. In this context, Pretorius et al. (1991) note that 60 to 80% of South Africa's population uses the services of traditional healers, who are the first point of contact for health advice and treatment. For example, in Tanzania, the majority of the Maasai population visits traditional healers for the treatment of tuberculosis and other diseases. Traditional healers are highly respected within their tribes and communities, and the profession is passed down from father to son through generations. In the Maasai community, traditional healers are consulted first when health problems arise. Patients are only referred to Western clinics, if necessary, otherwise, they are treated using indigenous methods. Traditional healers play a critical role in the Maasai community (Haasnoot et al., 2010). Traditional healers therefore play a vital role for individuals worldwide, in both urban and rural settings. Similarly, in North America, when the first explorers arrived, it is estimated that there were over 2,000 local tribes with more than one million inhabitants, stretching from the Atlantic to the Pacific Ocean. Traditional healers were well-versed in various plant-based medicines and other preventive and therapeutic methods (Lucas, 1969). Supporting this statement, Hutchens (1973) argued that traditional healers were knowledgeable and inspired individuals who prescribed harmless medicines to their patients, typically resulting in rapid recovery. In Pakistan, the practice of traditional healing is not a new phenomenon and can be traced back to time immemorial.

Medicinal Plants

Another important indigenous method approach is the use of medicinal plants for the treatment of moderate and serious illness. Plants are considered an integral component and an important aspect of human life. Human beings, along with other species, depend on plants for multiple purposes. Medicinal plants have remained a cornerstone in primitive societies for the treatment of diseases and continue to hold significant value in today's modern world. All great civilizations have shown great interest in the use of medicinal plants. History reveals that the Assyrians, Babylonians, ancient Hebrews, Greeks, and Chinese extensively used medicinal plants as far back as 5000-4000 BC (Shinwari et al., 2003). The use of medicinal plant is still relevant in today's world and they are being used by people worldwide. In addition to their many beneficial uses, plants are also employed to treat various ailments. Communities in many parts of Pakistan rely heavily on medicinal plants to address health issues, while modern allopathic medicines are disproportionately derived from plants. Hence, the importance of medicinal plants cannot be overlooked anywhere. A majority of the human population uses medicinal plants to maintain good health. According to Muthu (2006), plants have been used as healers since time immemorial. About 80 percent of the world's population in developing countries uses traditional medicines, with medicinal plants playing a major role in this practice. The use of medicinal plants is clearly evident in many countries, especially in Asia, Latin America, and Africa, where locals rely on plant-based medicine to meet their primary healthcare needs (WHO, 2003). Due to the growing popularity of traditional medicines in developing countries, this approach is rapidly spreading to industrialized, developed countries. In China, traditional herbal medicine accounts for 30%-50% of total medical consumption. Similarly, in other developing countries such as Ghana, Mali, Nigeria, and Zambia, the first treatment approach for 60% of children with malaria is the use of

medicinal plants (Kassaye, 2006). In Pakistan, the use of traditional medical treatment at the household level is common in developing countries. Villagers, owing to their knowledge of medicinal plants, gather them from their surroundings and use them to treat various ailments (Fassil, 2003). In this context, Busia (2005) argues that common ailments such as headaches and coughs are considered naturally occurring diseases, and their symptoms are treated at the household level. Similarly, many communities derive a significant portion of their income from medicinal plants. Shinwari and Shah (1996) studied the ethnobotany of Kharan District in Balochistan and observed that 171 species of angiosperms are used by local people for medicine, food, building materials, fodder, tool handles, axles, wheels, carts, ploughs, and more. The locals depend on wild plants for many aspects of life, including health. Furthermore, in the Swat district, some important medicinal plants are used by locals for the treatment of various ailments (see Table).

Plant Names	Part Used	Treatment
Binafsha/viola	Flowers	The flowers are recommended for epilepsy and nervous disorders.
Ghut ghiskay	Leaves	Leaf decoction is recommended in long-standing malarial fever.
Marwan & sanbalu	Roots	Fresh roots are used as a bandage to relieve pains in the chest and back.
Dambara	Seeds	Seeds are used as condiment, flavoring agent, tonic, and aromatic, used for fever, cholera, and increase saliva secretion.
Baira	Fruits	The fruits are edible and used as blood purifier and cure indigestion.
Elanai	Roots	The roots are used for curing jaundice.
Phulai	Gum	Gum is used as tonic, for curing of dysentery and weakness, as a stimulant and demulcent.
Biranasif & Akirkarra/yarrow, milfoil & devil's nettle	Whole plant	The whole plant is used as a diuretic, a stimulant, for piles, cold and to stop perspiration.
Puthkanda	Root	A root infusion is used for removing stones from kidneys.
Sumbal	Fronds	Fronds are used for curing skin diseases, fever, cough and diabetes.
Kauri booti & neel khanti	Whole plant	Used in internal colic, also used for the treatment of achenes, decoction is useful for curing jaundice, hypertension and sore throats.
Neel kanthi & kharbeni	Whole plant	Used as a tonic, astringent and for curing jaundice. Also used in sore throat problems.
Piyaz/Onion	Leaves	The leaves are a diuretic, aphrodisiac and expectorant.
Lehsan /garlic	Bulbs, leaves	It is diaphoretic, diuretic, expectorant and antiseptic. It is also used in epilepsy. It is

		effective in heart diseases and hypertension.
Spairkai, Gangahai	Dry fruits	Useful in whooping cough and asthma.
Jaukay	Leaves, seeds	Respiratory stimulant, anthelmintic and purgative. Used as cure for earache.
Ansanteen & Kirmala	Leaves	Leaves are anthelmintic. Also useful for curing skin diseases.
Haloon & musli sufaid	Young shoots and roots	Useful for diarrhea and dysentery.
Kachnar & kachnal/Wild ebony & bauhinia	Wood bark	Useful in skin diseases and leprosy.
Kashmal & sumbal/Berberry	Leaves, stem, root, bark, branches.	Used for diarrhea, diuretic. Used in the treatment of internal wounds. Used in piles. Also used for jaundice and other liver disorders.
Zakhm-e- hayat, hemddon/ yeo	Leaves	The leaves are used as a tonic and to relieve muscular pain.
Anjabar and masloon	Shoots, leaves	To cure ulcers.
Sant & itsit/wasao	Roots	The roots are crushed and boiled in milk, then a bandage is made which is used externally for ulcers.
Sarsoon/mustard	Seeds	An oil extracted from the seeds, is used in massage of body and hair, and as an ointment.
Kala zeera/carum	Fruit	Used in curry and pullao; carminative, stomachic and stimulant.
Zair gulae	Leaves and flowers	The leaves and flowers are given to children suffering from scrofula. It is used as a tonic; it is diaphoretic and anthelmintic.
Ak/mudak	Whole plant	Leaves are smoked to cure asthma and coughs. Latex is utilized commonly in skin disorders.
Marchakay	Fruits	It is used against common cold, dyspepsia and diarrhea.
Pamankay	Succulent stem	Used in diabetes and hypertension.
Bathwa sabz & bathu/foot hen plant and goose feet plant	Roots	The roots are used against jaundice and urinary problems.
Skha kharawa	Shoot	The leaves are used for the healing of wounds, also for discharge of pus.
Kasni/chicory	Whole plant	The plant is boiled and the decoction is used for fever and jaundice. Also used as a tonic in asthma. It increases bile secretion and is used to promote digestion.
Suranjan-e-talkh/Meadow saffron	Rhizome	Used as a blood purifier, it is a laxative and an aphrodisiac.
Hiran-khuri/field bindweed	Vegetative part	Purgative, also applied in skin disorders.

Dhania/coriander	Leaves, seeds	Used for piles; increases secretion of gastric juices; used as Corrigan, fragrance digestive. Seeds stimulate appetite.
Tampasa	Seeds	The seeds are used for various heart diseases, like dyapnoea and hypertrophy, and as a tonic.
Akas bel/dodder	Shoots	Blood purifier, diuretic, purgative, anthelmintic, used in jaundice, paralysis and vomiting. An infusion is used to wash sores and itching areas of the body.
Kalbeer, Bangyala	Roots and leaves	The roots and leaves are used as a diuretic and expectorant. Juice from leaves is applied to relieve headaches.
Dhatura/mangaz	Leaves	Leaves are applied externally to swollen limbs. An extract of the leaves is helpful against toothache, headache and epilepsy.
Male bamboo	Leaves	Leaves are given to horses for curing cough and cold.
Huma and somakalpa/ephedra	Fruits and leaves	The plant is used for curing asthmatic bronchitis and rheumatism.
Warmaga	Whole plant	The decoction and its paste are used for dermatophytes, especially against ringworms. The paste is applied in skin diseases.
Injeer/fig	Fruits	Used in constipation, piles and urinary bladder problems.
Oormal	Wood, leaves	An infusion of the leaves is astringent. Stem latex is applied in piles and diarrhea.
Gentian	Corms, roots	Tonic, stomachic, astringent, antispasmodic, febrifuge; used for fattening of horses.
Shatra/fumikory	Shoot	Medicinally used as a blood purifier; diaphoretic and antipyretic.
Ratan jot	Roots	The roots are used in mouth ulceration.
Ajwain khurasani/henbane	Leaves	The leaves are used as a sedative, narcotic, anodyne and antispasmodic. They are also used in nervous disorders and for asthma and whooping cough.
Petha kadoo/pumokin	Fruit	It is given to patients suffering from jaundice, heart and stomach problems.
Arusa & bhekar/Malabar nut & cassaka	Roots	The roots are used in rheumatism, pneumonia and cough.
Oormaray	Leaves	Leaf decoction is used for skin diseases, especially for ringworms.

Tori/loofah & bath sponge	Fruits	It is good for stomach and ulcer problems.
Dhrek & bakain/Persian lilac	Whole tree	The seeds are antirheumatic and also to control blood pressure. The ripened fruits are used against diabetes.
Jangli podina/horse mint	Whole plant	It is used in diarrhea, dysentery and for various other gastric problems.
Kaner/oleander	Leaves	Decoction of leaves in paste form is applied externally on the skin to cure certain skin diseases.
Zaitoon & kahu/olive	Leaves	The leaves are used for toothache and sore throats.
Manzakay tarookay	Leaves	Used for stomach problems, fever, and dysentery.
Mammekh/peony rose Himalayan	Roots	Roots and rhizomes are used to cure backache, dropsy and epilepsy.
Ispand and harmal/ Syrian rue	Stem and leaves	Narcotic, emetic, anodyne, hypnotic, antilice and fumigated by ladies during smallpox.
Ispaghol	Leaves	Extract of leaves is applied to sores, wounds and inflamed surfaces.
Kulfa and kurfa//Indian purslane	Vegetative portion	Used for kidney, liver, urinary bladder and lung problems.
Jungli anar and darune/pomegranate	Leaves	The leaves are used for skin diseases and against dysentery.
Barungi /moru	Woods, nuts(acorns)	They are used for diarrhea, indigestion and asthma.
Karwara	Leaves	The leaves are used for diarrhea, coughs, fevers.
Tukhm-e-kanocha	Leaves	Leaf poultice is used for healing wounds.
Ladan	Leaves, flowers	Used as a laxative and a blood purifier and for relieve in muscular pain.
Banu and ner	Leaves	Used in curing smallpox.
Kandiali, kandiyari, mokri and mamoli	Whole plant	The plant is used for stomachache, cough and fever pains in the chest.
Dandelion	Young shoots, flowers	Its decoction is used as a tonic, diuretic and for jaundice. Also used for curing constipation.
Burmi/Himalayan yew	Leaves	Leaves are used for bronchitis, whooping cough and asthma. It is also used for indigestion and epilepsy.
Piarang	Leaves	The leaves are bitter and expectorant. A decoction of the leaves is used for curing soar throats.
Meadow rue	Rhizomes	Used for several eye disorders such as ophthalmia.
Tirkundi and bhakhra	Fruits, roots	The fruits and roots are given for urinary disorders and chronic cystitis.

Maithray and methi	Seeds	The seed are used as a tonic are carminative, aphrodisiac and stimulant.
Gilo	Roots, leaves	Root and leaf decoction is used for jaundice. The dried leaves are emetic, diaphoretic and blood purifiers.

Medicinal plants of Paksitan (Shinwari, Gilani & Rehaman, 2003).

The use of medicinal plants is widespread in rural areas of Pakistan. Goodman and Ghafoor (1992) argue that 114 plant species are utilized for medicinal purposes in the Balochistan province. Similarly, Haq (1993) concludes that in the Mansehra District, 53 wild and 17 cultivated medicinal plant species are used. These plants are either used in their entirety or specific parts are harvested to treat various ailments. Furthermore, Shinwari et al. (1996) report that 26 species of medicinal plants are employed by local villagers in the Kaghan Valley for medicinal purposes. When used, these plants exhibit harmony and synergy with the human body, as the combination of chemical components they contain works together to facilitate the progressive healing of tissues (Shinwari et al., 2003). These studies depict the positive outcomes that perpetuate the use of medicinal plants in rural communities.

Spirituality and Religion

Spirituality is a crucial component of human health, defined as the paths people take in their efforts to discover, preserve, and transform the sacred in their lives. There has been increasing interest in mainstream Western medicine regarding the potential impact of religion and spirituality on the healing process (Zinnbauer et al., 1999). Similarly, Cohen (2002) suggests that spiritual individuals may experience satisfaction, find themselves closer to God, and perceive the world with a heightened aesthetic sense. Spirituality provides them with purpose and comfort in life. In this context, Miller (2003) argues that resources confirm a beneficial relationship between spirituality and well-being. Nasar (1987) explains that spiritual healing is connected to the entire universe, with its core doctrine asserting that all levels of reality are interconnected. Cultural variability, in relation to culturally constructed reality, observes subtle differences in the philosophy of spirituality. Due to advancements in the field of spirituality, physicians can no longer ignore its significance when dealing with patients and their diseases (Koenig, 2004). In Pakistan, the importance of spirituality in healthcare cannot be overlooked. The emphasis on holistic treatment underscores the need for an inclusive approach to care (Paudopoulis, 1999). Infertile couples, especially women, often turn to spiritual healing to address their infertility. Various push and pull factors motivate them to engage in spiritual practices. The sociocultural context is crucial here, as infertility is often considered a stigma in Pakistani society. Couples seek spiritual healing in numerous forms to overcome infertility. The use of amulets (Tawiz) is a common practice, with the amulets containing verses from the Holy Quran. These amulets are worn around the neck or dissolved in water for drinking. People believe that these amulets provide protection against evil spirits. In rural Punjab, people often knot a piece of cloth or thread with the hope of overcoming infertility. Additionally, they drink water, taste salt, give alms, and distribute food at shrine premises (Shoab, Khan & Abid, 2001). In Pakistan, health-seeking behavior is diverse, particularly when dealing with childhood diseases. Congenital conditions such as cleft lips and cleft palates are believed to be caused by the negative effects of lunar and solar eclipses. Spina bifida and meningomyelocele are often attributed to evil deeds committed by close family members, especially parents. Other conditions, such as seizures, ambiguous genitalia, and communicable diseases, are thought to result from witchcraft. Due to these beliefs in supernatural powers, people often turn to the folk sector for treatment and rely heavily on folk knowledge or folk wisdom to address these issues (Hirani, 2008).

Conclusion

Indigenous medicine plays a vital role in the provision of healthcare services in rural areas of Pakistan and around the world. People's use of indigenous medicines is influenced by a strong community belief in their effectiveness. Ethnomethodology plays a significant role in shaping these beliefs and practices, influencing individuals to seek healing through indigenous methods. In addition to cultural beliefs and practices, factors such as affordability, easy accessibility, and availability, in comparison to modern, material-based scientific medicines, also contribute to the widespread use of indigenous medicines. The ethnomethodology of beliefs and practices is central to the positive outcomes observed in the treatment of various diseases. Indigenous medicines provide valuable support for people facing health issues, especially in communities that lack modern healthcare facilities. It is important to note, however, that indigenous medicines remain significant even where modern healthcare facilities are present, alongside contemporary treatment methodologies and medicines. Although some indigenous practices can be harmful and dangerous, for example, the practice of beating a patient to expel evil spirits such practices should be discouraged through awareness and capacity-building efforts for traditional healers. Traditional healers serve as a crucial source of healthcare in rural areas where modern medical facilities are lacking. These healers are often the first point of contact for treatment and use a combination of plant, animal, and mineral-based substances, along with methods informed by the social, cultural, and religious contexts of their communities. A large portion of the global population heavily relies on medicinal plants to address health issues, while many modern allopathic medicines are derived from these plants. This illustrates that the importance of medicinal plants cannot be overlooked worldwide. Historically, medicinal plants have been a cornerstone in the treatment of diseases and continue to hold significant value in today's modern world. Religion and spirituality also play a key role in healthcare provision. Holistic treatment, which integrates spiritual and religious practices, is possible through the influence of these factors. In today's technologically advanced world, the importance of spirituality in healthcare cannot be underestimated. There has been a rise in the practice of spirituality as part of treatment methods across the globe. In many religious communities, healing is considered a spiritual act, with the belief that God not only causes illness but also provides the cure for every disease. Due to such beliefs, great importance is placed on the supernatural aspects of treatment, and people find satisfaction and healing through the practice of spirituality and religious activities. Indigenous medicines play a crucial role in the treatment of many diseases; therefore, their development should be prioritized. In this regard, it is essential to train traditional healers to enhance their skills and treatment methods. This is not only important for their personal development but also for the preservation of indigenous medicines. Information sharing and the establishment of networks between traditional healers and Western-trained health professionals are equally important. A platform should be created where all healthcare sector stakeholders can exchange expertise and ideas for the development and improvement of indigenous medicines. This could be achieved through local, national, and international conferences or seminars. The government, with the help of local community experts, should develop appropriate policies for the conservation and improvement of indigenous knowledge regarding traditional treatments. There is a pressing need to develop ethical guidelines for indigenous medicines. Communities may face challenges in establishing culturally-based ethical boards or committees. These communities should be supported in addressing these issues. Legal matters related to medical malpractice by traditional healers, including spirituality, healing, and associated ceremonies, should be discussed with local healers and community members to achieve effective results. Identifying gaps in indigenous medicine practices is also crucial for improving treatment outcomes. Programs aimed at building the capacity of traditional healers should be initiated. Establishing training institutes for the development of local healers could be highly beneficial. This organizational effort must focus on creating a comprehensive plan that includes

the development of training programs, the issuance of safety and efficacy regulations, and guidelines for the clinical trial of traditional medicines. The beneficial uses of medicinal plants should be promoted to the public through local media. This will help protect valuable medicinal plants in the community.

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