

MEDICAL PLURALISM AND TRUST IN HEALTHCARE AMONG THE HADZABE HUNTER-GATHERERS



Sasha Veltri and Eric Shattuck

Background

Medical pluralism can be defined as the utilization of various medical systems such as conventional and complementary and alternative medicine (CAM) to address health conditions. CAM includes heterogeneous therapies not typically taught to or prescribed by conventional medical doctors. This inclusion of various healthcare modalities is not exclusive to any specific culture or society as users of CAM have been documented in modernized western ones as well as traditional indigenous societies such as the Hadzabe (Wade, Christine, et. al., 2008).

The Hadzabe are a group of about 1,000 nomadic hunter-gatherers who live around northern Tanzania, near lake Eyasi in an area of land they call the “Hadzaland”. The majority of them are full-time hunter-gatherers, with almost none of them practicing any form of agriculture. The men typically collect honey and hunt game with bows and arrows while women forage for tubers, fruit and berries. Their active lifestyle means the Hadzabe move camp often due to the availability of resources, and consequentially, they do not always have access to healthcare treatments. Along with their traditional lifestyle, the Hadzabe engage in traditional healing, involving medicinal plants and specific practices (Marlowe, 2010).

Medical pluralism has been documented in both indigenous and western societies, and the study of this topic is important to inform future healthcare delivery to build trust with indigenous populations. Hunter-Gatherers like the Hadzabe offer a unique opportunity to study the intersection of traditional healing systems and biomedical healthcare.

Research Questions

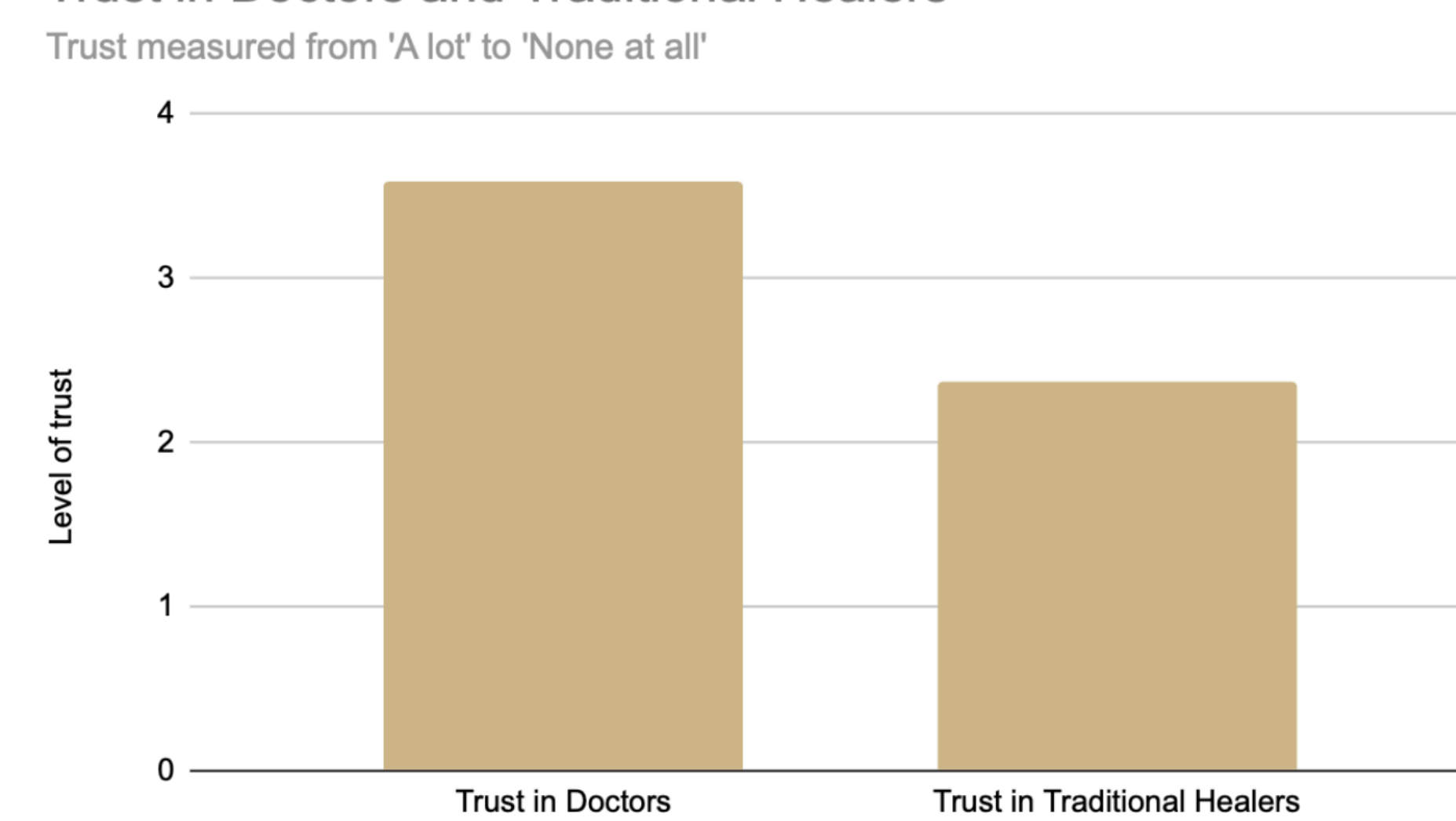
- How much trust do the Hadzabe place in biomedical healthcare workers as compared to traditional healers?
- What are the most commonly reported health concerns among the Hadzabe surveyed?

Methodology

91 participants were surveyed in-person about sickness behavior, perception, beliefs, and treatment modalities for both themselves and their communities from across 6 Hadzabe bush camps. The participants surveyed consisted of 49 males and 42 females with the average age being 38. Survey questions varied from multiple choice, open ended and yes or no types. The responses were recorded in Swahili, then translated into English and coded to be analyzed.

The data gathered from the Hadzabe was coded to be analyzed based on emergent categories in the data. For example, based on the question asked about what health problems they visit a traditional healer for, the category ‘malaria’ was coded for and included responses which directly mention malaria. However, some other categories had a wider variety of responses, such as the category of ‘bewitchment’, which included mentions of being ‘enchanted’ or ‘bewitched’ general mentions of words such as ‘spirit’ and ‘magic’, and mentions of having a ‘spell’ being cast.

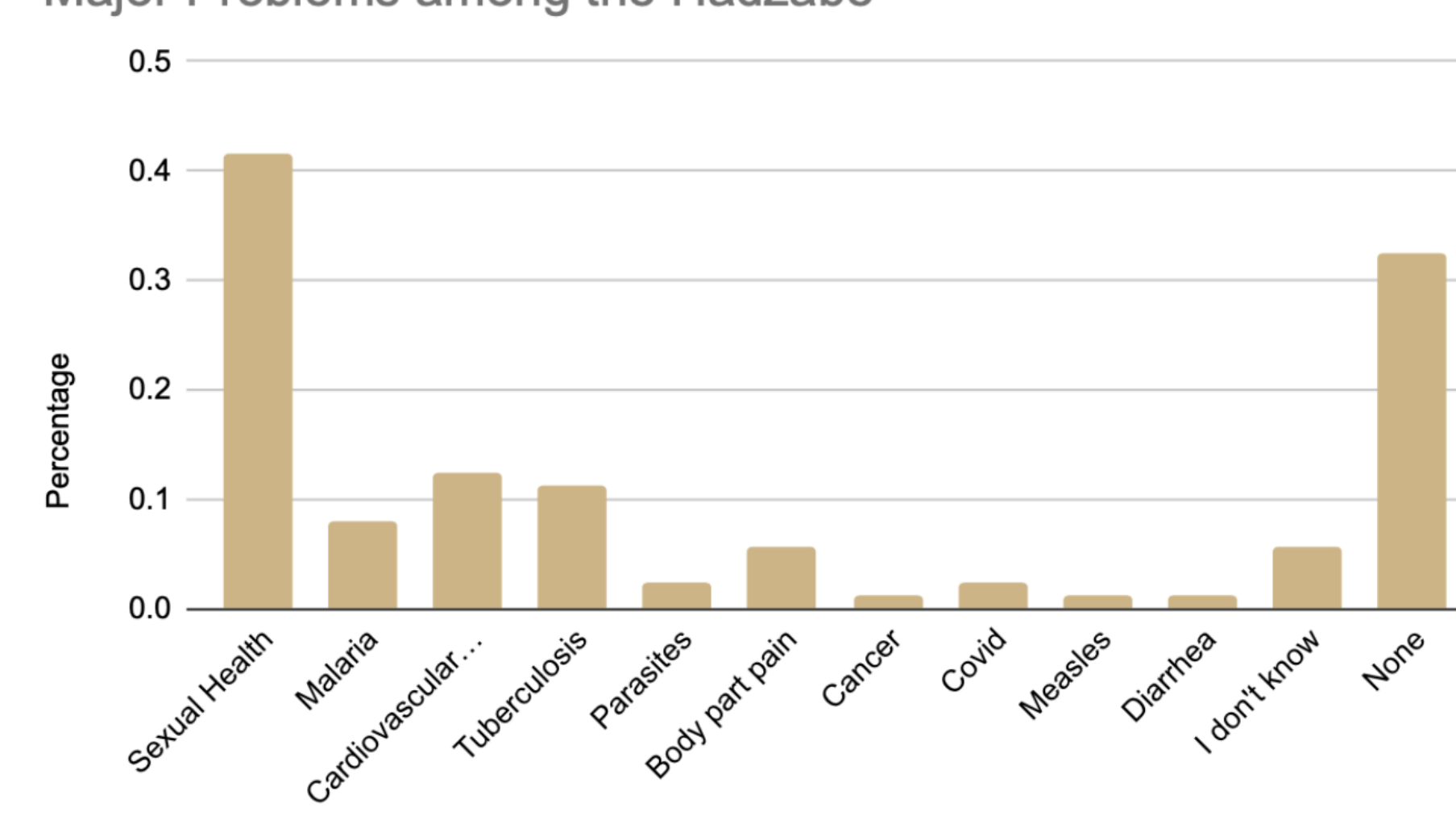
Trust in Doctors and Traditional Healers



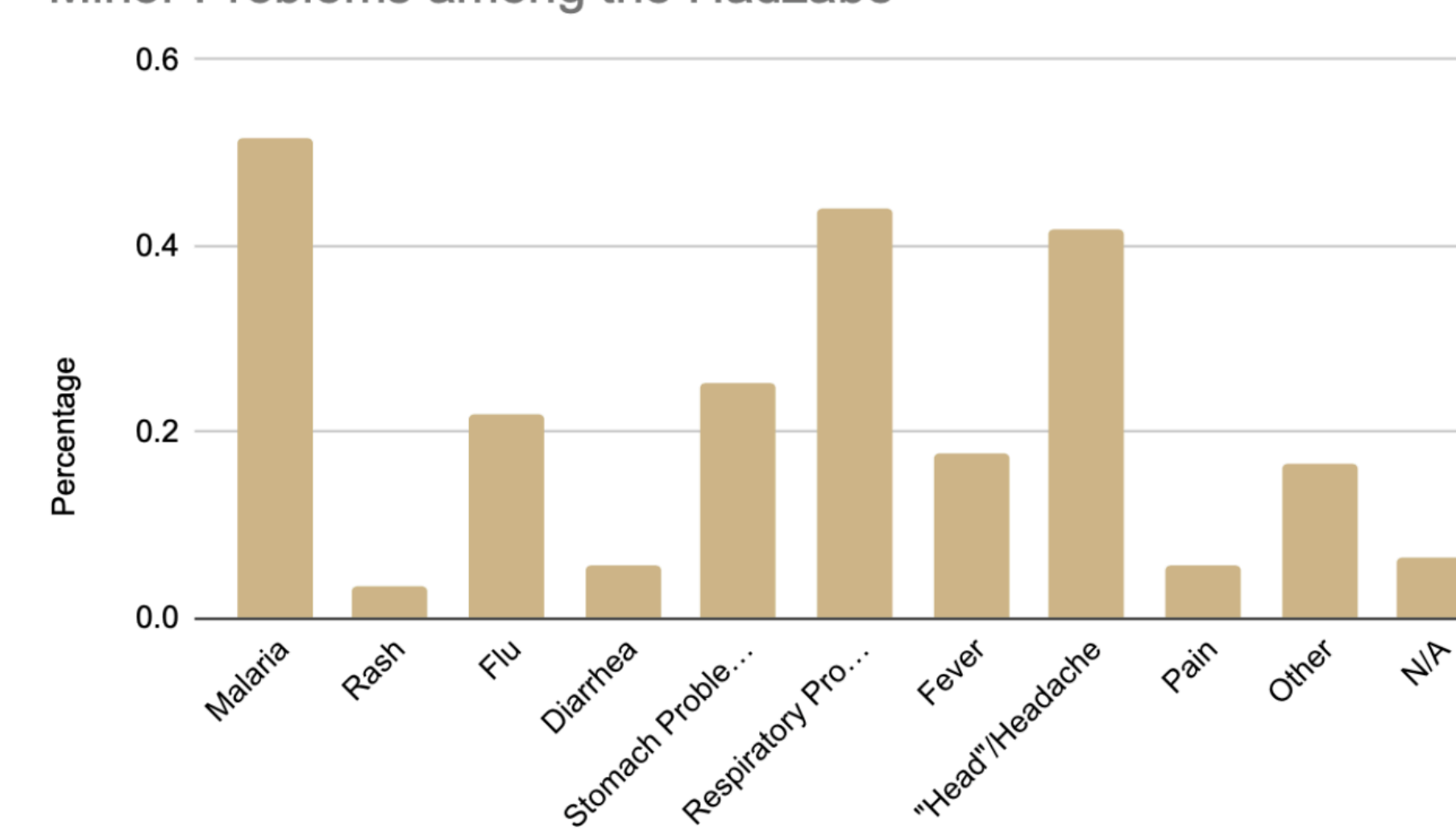
Trust in Healthcare Advice Among the Hadzabe



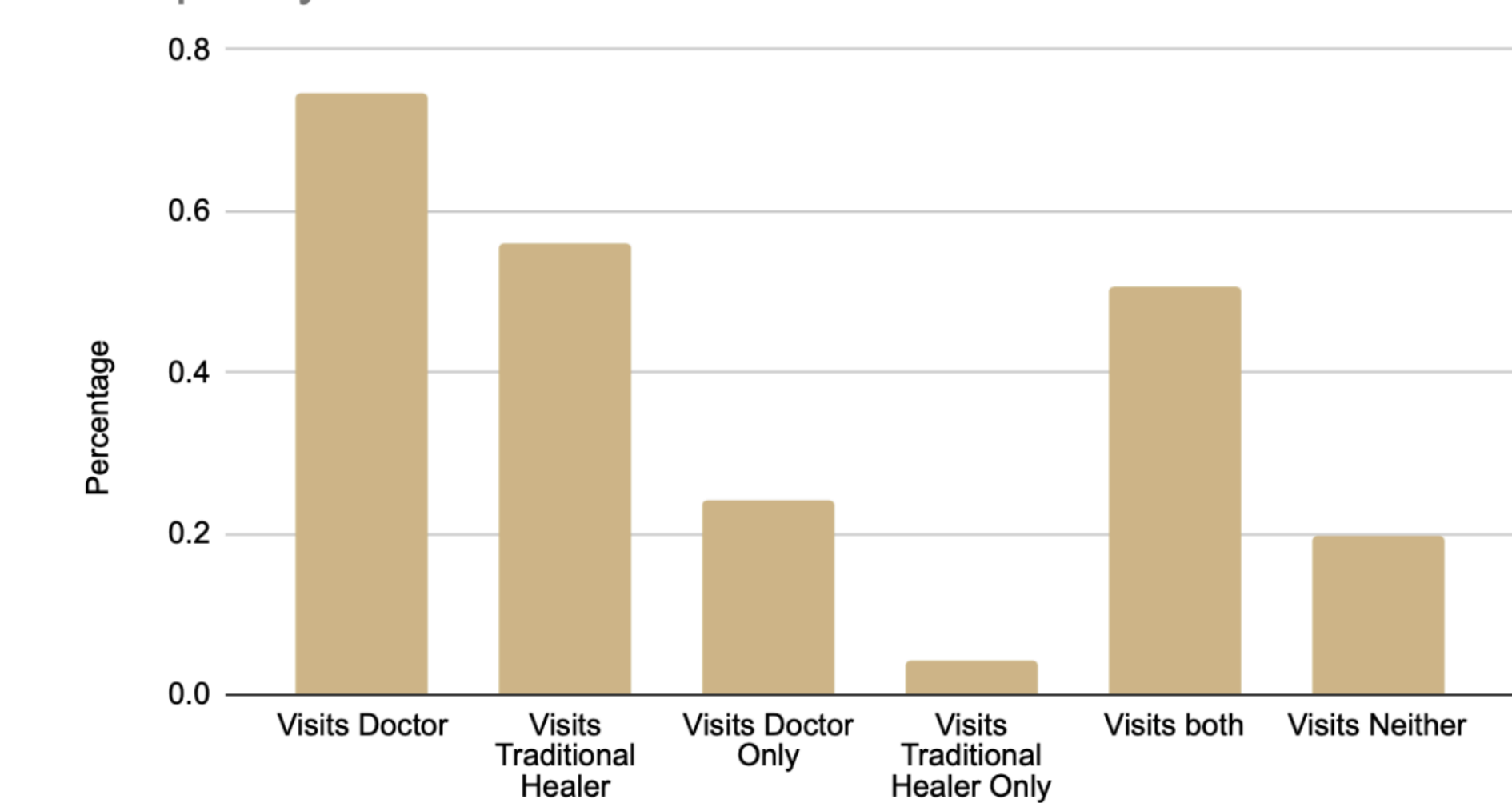
Major Problems among the Hadzabe



Minor Problems among the Hadzabe



Frequency of Visits to Doctors and Traditional Healers



Results

Most Hadzabe report consulting doctors (74.7%) and traditional healers (56.0%), while 19.8% visit neither. Half (50.6%) report visiting both, indicating a high degree of medical pluralism. Participants showed a low trust in traditional healers (2.37/4) while they showed a high level of trust in healthcare workers (3.58/4). When asked who they “trust the most” for medical healthcare advice, the Hadzabe most frequently responded “doctor or nurse”, and the second most common response was “family and friends”. The third most frequent response was “traditional healer”. The most common ailment participants visited traditional healers for was bewitchment (55.0%), while malaria (60.3%) was the most common for doctors. The Hadzabe also reported that malaria was the most common minor problem, while the most frequently reported major problems were related to sexual health, such as gonorrhea, syphilis, AIDS, STDs, and UTIs.

Conclusion

The Hadzabe, like many other indigenous groups and western societies, practice medical pluralism. In our sample, the results indicate that traditional medicine is important, despite low levels of trust. For biomedical healthcare workers, it is important to remain cognizant of medical pluralism among the Hadzabe and demonstrate sensitivity and cultural understanding to continue to uphold trust.

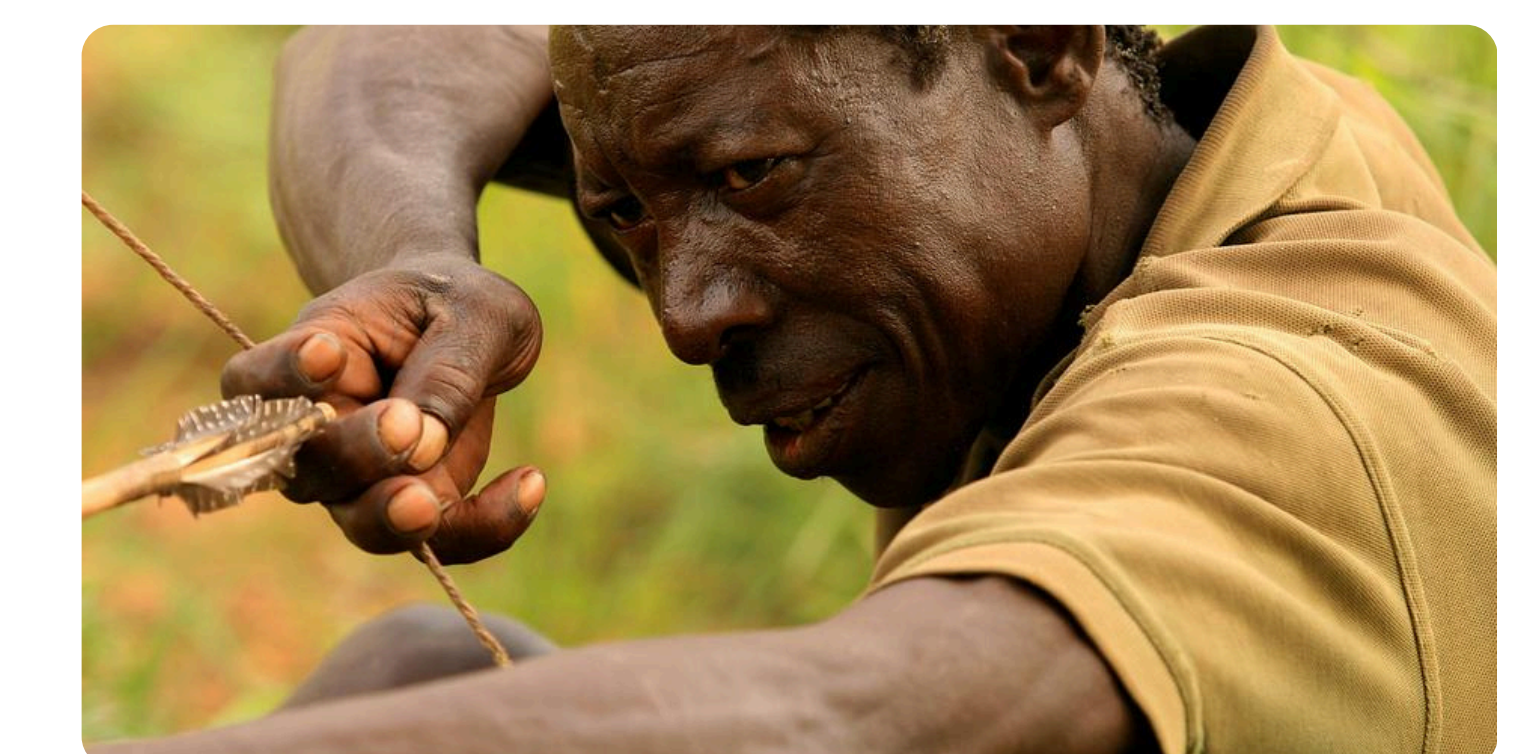


Image Credit: Survival International, <https://www.survivalinternational.org/galleries/hadza>

Works Cited:

- Marlowe, Frank. The Hadza: Hunter-Gatherers of Tanzania. University of California Press, 2010.
- Pollom, Trevor, et al. “Changes in Juvenile Foraging Behavior among the Hadza of Tanzania during Early Transition to a Mixed-Subsistence Economy.” Human Nature (Hawthorne, N.Y.), U.S. National Library of Medicine, June 2020, pubmed.ncbi.nlm.nih.gov/32458359/.
- Wade C;Chao M;Kronenberg F;Cushman L;Kalmuss D; “Medical Pluralism among American Women: Results of a National Survey.” Journal of Women’s Health (2002), U.S. National Library of Medicine, pubmed.ncbi.nlm.nih.gov/18537484/. Accessed 12 Mar. 2026.