


# Marketing Strategies and Herbal Medicine for Mental Health Well Being in Nigeria

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ARTICLE DETAILS	ABSTRACT
<p><b>History</b> <b>Received:</b> <i>November 11, 2024</i> <b>Revised:</b> <i>December 21, 2024</i> <b>Accepted:</b> <i>December 25, 2024</i> <b>Published:</b> <i>January 01, 2025</i></p> <hr/> <p><b>Keywords</b> <i>Agbo</i> <i>Mental health</i> <i>Traditional medical practitioners</i> <i>Advertisement</i> <i>Brand loyalty</i> <i>Legislation</i></p> <hr/> <p>This is an open-access article distributed under the <a href="#">Creative Commons Attribution License4.0</a></p> <div></div>	<p><b>Purpose</b> This paper examines the marketing strategies employed by TMPs in the herbal medicine sector, particularly regarding their impact on consumer behavior and the management of mental health wellness through herbal products.</p> <p><b>Methodology</b> Data for this study were collected from multiple triangulated sources, including oral interviews, advert analysis, news media analysis, and field observations in HM markets across Nigeria. Participants were selected through convenience sampling to provide insights into TMP marketing practices.</p> <p><b>Findings</b> TMPs play a critical role in the management of mental health by offering Indigenous medicine as an alternative to conventional treatments. TMPs utilize diverse marketing strategies such as direct marketing, advertisement, word of mouth (WOM), branding, and brand loyalty. Mass media (TV and radio) are essential in making consumers aware of the alleged medicinal value of HM in treating various ailments, including mental health issues. The increasing demand for HM is attributed to several factors, including the high cost of mental health care at Nigerian neuropsychiatric hospitals and the cultural and spiritual beliefs surrounding HM efficacy. These factors provide TMPs with an opportunity to expand their market by capitalizing on the need for affordable mental health solutions.</p> <p><b>Conclusion</b> TMPs are integral to Nigeria's mental health landscape, leveraging cultural and spiritual beliefs to market herbal medicines as viable alternatives to conventional treatments. The use of mass media and various marketing strategies plays a significant role in raising consumer awareness and influencing purchasing decisions regarding HM.</p>

## 1. Introduction

The significance of marketing strategies, such as advertising, brand loyalty, satisfaction, word of mouth (WOM), and trust in product purchase, is well-documented in the marketing literature (Dick & Basu, 1994; Oliver, 1999; Lovelock & Wright, 2002; Alhulail et al., 2018). Advertising strategies are increasingly being used to attract potential clients in the herbal market sector. The prevalence of herbal medicine (HM), particularly Agbo and its markets, is widespread both globally and in Africa, where many individuals rely on herbs and herbal markets as alternative forms of medicine and treatment for mental well-being (World Health Organization, 2019).

Mental health is a state of well-being in which an individual realizes their abilities, can cope with the daily stresses of life, work productively and fruitfully, and contribute to their community (WHO, 2019). Thus, the use of herbal medicine (HM) for mental health wellness and therapeutic purposes has been documented before the emergence of conventional medicine (Nagel, 2017; Ojonugwa et al., 2021; Rizvi et al., 2022; Tsele-Tebakang et al., 2023).

HM refers to herbs, herbal materials and preparations, and final products containing plants as active ingredients (World Health Organization [WHO], 2019). Over 150 active ingredients may be present in these herbs, potentially causing adverse effects and altering the pharmacokinetics of prescription medications (Mbendana et al., 2019). In countries such as China, herbal medicine is referred to as Chinese herbalism, muthi in South Africa, Agbo in Nigeria, Ayurvedic medicine in India, and Kampo medicine in Japan (Lyle, 2014; Mbendana et al., 2019; Iyiola et al., 2023).

HM includes Ayurveda, Traditional Chinese Medicine, and various herbal methods considered "holistic" approaches to treating illnesses (Mbendana et al., 2019; WHO, 2019; Iyiola et al., 2023). The use of herbal medicine is deeply rooted in Indigenous knowledge (IK) and community experiences. IK refers to knowledge acquired outside formal educational systems and passed down from generation to generation (Tsele-Tebakang et al., 2023). Social, cultural, and spiritual traditions heavily rely on Indigenous knowledge (Mbendana et al., 2019; Tsele-Tebakang et al., 2023).

HM use is prevalent in countries across Latin America, Asia, and Africa, particularly in countries such as South Africa and Nigeria, where it helps meet the primary healthcare needs of the population (Shafiq et al., 2003; Ekor et al., 2010; Okoli, 2015; Mbendana et al., 2019; WHO, 2019). The importance of herbal medicine is highlighted by the fact that 80 percent of the population in developing countries use herbal medicine for primary healthcare and the therapeutic management of diseases (Busari & Mufutau, 2017; WHO, 2019; Tsele-Tebakang et al., 2023).

This can be attributed to factors such as affordability, accessibility, cultural beliefs, patient dissatisfaction with Western medicine, cultural beliefs, advertising, the high cost of medical consultations at neuroscience hospitals, and issues related to prescription safety (WHO, 2019; Mbendana et al., 2019; Tsele-Tebakang et al., 2023). Additionally, traditional medical practitioners (TMP) employ marketing strategies, utilizing mass media and advertising to raise awareness of HM products (Ahaiwe, 2019). The literature asserts that herbal medicines are used to treat fever, malaria, and other ailments, including chronic conditions such as diabetes, asthma, epilepsy, hypertension, and mental health disorders (Okoli, 2015; Oyewo et al., 2017; Mbendana et al., 2019; Tsele-Tebakang et al., 2023). A

2019 survey on mental health in Nigeria, conducted by the Africa Polling Institute (API) and EpiAFRIC, found that most Nigerians experience mental health disorders caused by drug abuse, demonic possession, and illness. It is estimated that 1.86 million people in Nigeria suffer from schizophrenia and mental illness, characterized by impairments in the perception of reality (Oyeweso, 2024).

The prevalence of psychiatric problems among adults and adolescents has increased recently, sparking interest in the use of herbal medicine to address issues such as drug misuse, hemp smoking, teenage delinquency, marital infidelity, youth jilting, astral body movement, moon madness, witchcraft, and other sociocultural factors resulting from ethnic disputes (Nwosu, 1998). Herbal medicines are used to treat mental illness, known as *Ala* in Igbo and *were* in Yoruba in Nigeria (Nwosu, 1998). Despite the perceived benefits of HM, concerns regarding its safety and the need for regulations have been raised. In response, the marketing of herbal medicines and products in Nigeria is regulated under national legislation. The South African Government has established a legislative and policy environment that supports the care of patients with mental disorders, including the Traditional Health Practitioners Bill (25 of 2004). This bill encourages mental healthcare providers to develop a deeper understanding of traditional medicine, as many patients use it to improve their mental health.

In Nigeria, herbal products manufactured in large quantities, whether imported or locally produced, must be registered, and advertisements must be approved by NAFDAC (National Agency for Food Drug Administration and Control) before marketing (Osuide, 2002; Ojonugwa et al., 2021; Tata et al., 2023). This raises the question of how legislation impacts the marketing strategy of herbal medicine.

## **2. Literature Review**

### **2.1. Herbal Medicine Marketing Strategy**

Herbal medicine is frequently marketed and promoted through various channels, including the Internet, radio, television, newspapers, pamphlets, and social networks (Mbendana et al., 2019; Ahaiwe, 2019). Brand loyalty forms the foundation for attaining a competitive edge in a company's marketing efforts. Loyalty refers to the relationship between customers' attitudes and their continuous use of a particular brand (Dick & Basu, 1994; Oliver, 1999; Lovelock & Wright, 2002).

Branding is one of the leading marketing strategies, significantly impacting a consumer's decision to choose a product. A brand represents a consumer's mental association, which adds to the perceived value of a product or service (Kansra, 2014). Oliver (1999, p. 34) explained loyalty as "a strong desire to repeatedly purchase the same brand or the same set of brand products or services in the future, even though situational influences and marketing campaigns may cause switching behavior." Oliver (1999) identified four phases in the formation of loyalty: action, conative, affective, and cognitive. As a result, customers first develop cognitive loyalty, followed by emotive and conative loyalty, and finally, action or behavioral loyalty. Affective loyalty focuses on the consumer's preference for the brand, whereas cognitive loyalty emphasizes the brand's choice based on its performance. Furthermore, action loyalty demonstrates a commitment to repurchase, while conative loyalty underscores the aspiration to repurchase. Strong brand loyalty among consumers can lead to a willingness to pay more, growth in market share and sales volume, and a

barrier to entry for new businesses, plans to repurchase, and favorable word-of-mouth (Aaker, 1991).

Brand loyalty refers to customers' willingness to remain loyal to a company over time, particularly in a one-on-one basis, and to recommend the company's product to others (Lovelock & Wirtz, 2016). Lovelock and Wirtz (2016) stated that loyalty encompasses actions, preferences, likes, and plans. In marketing and consumer behavior, brand loyalty describes a customer's enduring positive feelings toward an established brand and their determination to continually purchase its products and services, despite defects, competition, or changes in the market. The relationship between loyalty and word-of-mouth is a subject of numerous studies, particularly in the services literature, and is linked to customer relationship management, where customer lifetime value models now include referral value (Aaker, 1991).

In Nigeria, herbal medicines (HM) are offered as homemade remedies or through herbal markets and traditional health practitioners (THPs), known as *elewe omo*. Nigeria has implemented several programs to promote the safety, effectiveness, labeling, and traditional use of HM. However, most traditional medicines (TM) undergo quality control testing and registration with NAFDAC (National Agency for Food and Drug Administration and Control) before marketing (Osude, 2002; Ojonugwa et al., 2021).

### 3. Methodology

The research adopts a qualitative approach and is situated within the interpretative paradigm. The interpretative paradigm focuses on the meanings people ascribe to phenomena, while qualitative research seeks to explain social phenomena (Creswell, 2014; Nowell et al., 2017). When a problem is poorly understood, qualitative study aims to explore and identify it within its natural setting (Yin, 2018).

The interpretative paradigm employs flexible tools to analyze and record the meanings embedded in human interactions (Keetse, 2018; Yin, 2018). It seeks to understand everyday occurrences, lived experiences, and the values people attribute to various phenomena (Austin & Sutton, 2014; Creswell, 2014; Daher, 2017; Yin, 2018). This paradigm supports open-ended research questions, allowing participants to share their experiences while enabling researchers to explore the interpretations they ascribe to social situations (Austin & Sutton, 2014; Babbie, 2014; Daher, 2017; Yin, 2018).

Data were obtained from multiple sources, including oral interviews, herbal medicine advertisement analyses, news media analyses, and field observations at herbal medicine markets in Nigeria. The four participants included traditional medical practitioners (TMPs) and sellers of herbal medicine products in capsule and powdery forms, operating from kiosks and shops. TMPs in Nigeria are known as *'elewe omo'* and *'tradomedico practitioners,'* providing traditional health consultation services alongside selling herbal medicines. The participants were assigned pseudonyms as Participants 1–4 (P1–P4).

The sample size was justified based on the qualitative research agenda, which prioritizes depth of insight over breadth of data, emphasizing the participants' detailed views and experiences. The data were analyzed using thematic analysis, a method that categorizes data into themes and sub-themes to identify patterns of meaning in the interviews (Creswell, 2014; Yin, 2018). Thematic analysis highlights contextually meaningful themes that reflect various aspects of the phenomenon under study (Nowell et al., 2017).

## 4. Results

The thematic themes derived from the study are: 1) the role of mass media as a mediator in raising awareness about Herbal Medicine; 2) reasons customers patronize Traditional Medical Practitioners (TMPs) and consume Herbal Medicine (HM), which include: a) the high cost of mental health treatment at neuropsychiatric hospitals in Nigeria, and b) cultural and personal beliefs as triggers for HM usage; and 3) legislation and regulatory requirements regarding HM advertising, usage, and validity claims.

### 4.1. Theme 1: Mass Media as A Mediating Role in Awareness of Herbal Medicine

Results indicate that Traditional Medical Practitioners (TMPs) raise awareness of Herbal Medicine (HM) through direct marketing and advertisements on TV and radio stations. In addition to using billboards, fliers, posters, social media, and public address systems, TMPs can also be seen in large parking lots and on commercial buses. Advertisement analysis (radio and TV) by TMPs reveals that mass media portray HM as 'the holy grail' for its alleged medicinal value in treating diverse ailments and improving mental health. Other marketing strategies such as direct marketing, word of mouth (WOM), branding, brand loyalty, and listening to TMPs' advertisements on TV and radio stations are also significant.

The study's findings suggest that HM is also purchased as an over-the-counter drug at local HM shops through direct marketing. Innovation in herbal medicine packaging in Nigeria has resulted in rebranding herbal products such as tablets, capsules, ointments, mixes, and powders in pharmacies, over-the-counter drug stores, and herbal shops. Before such innovation, herbal medicine was sold in concoction form and had a bitter taste, which dissuaded consumers from buying HM. A critical aspect of marketing is the use of visually appealing and informative packaging for promoted herbal products to distinguish them from one another, as well as raising awareness about specific herbal medicines to influence consumers' purchasing decisions. Marketers have employed advertisements to sway consumers' purchasing decisions. Customers' perceptions of herbal products are partly shaped by their brand preferences; these two factors—brand preference and brand loyalty—work together to significantly affect consumers' purchasing decisions. As evidenced by the study's findings, TMPs use diverse strategies to market HM. Due to their positive correlation, both brand preference and brand loyalty encourage customers to purchase a particular product.

The findings suggest that Nigeria's diverse ethnic groups and TMPs incorporate herbs and concoctions that reflect their cultural beliefs in the treatment of mental health and well-being. Herbal medicine, for instance, has a long history among the Yoruba people of southwest Nigeria. Practitioners known as "Babalawos" or "Ifa priests" are experts in divination and herbal medicines drawn from the Ifa oracle. Their services and products are often promoted through word of mouth by previous consumers.

Participant 1 (P1) stated, "In Yoruba culture, the traditional medical practitioner works with family members and occasionally collaborates, contributing their skills because the well-being of their patients is what matters. The first step is to look into the underlying cause of the mental health issue. Traditional medical practitioners achieve this by having conversations with the family members of the mentally ill patient, tracing the family history, and closely monitoring the patient."

Many participants attribute mental illness and disorders to drug abuse, hereditary factors, and spiritual attacks. Other major causes include possession by demonic spirits and sickness of the mind and brain.

Regarding the treatment of mental health disorders, Participant 3 (P3) also expressed that a significant number of her clients prefer to take their family members suffering from mental health disorders to either a place of worship or a traditional healer, as they commonly believe that mental health issues are spiritual in nature. Therefore, traditional or faith-based healers are often their first choice.

Participant 2 (P2) mentioned that the cases of mental health he once treated were usually triggered by three factors: spiritual attack, self-harm (such as using illegal drugs), and heredity. Mental illness may also be viewed as a punishment for wrongdoing. *To treat mental illness as punishment for wrongdoing, herbal remedies are used. A sequence of actions follows, including the slaughter of an animal, such as a goat, for sacrifice (referred to as 'ètùtù' in Yoruba parlance) in a key area of the street to please the gods.*

## **4.2. Theme 2: Reasons customers patronize TMPs and consume HM**

### **4.2.1. High Cost of Mental Health Treatment at Neuropsychiatric Hospitals in Nigeria**

The paper found that the high cost of mental health care encourages consumers to consult and use Herbal Medicine (HM). Participant 4 (P4) succinctly stated,

“The neuropsychiatric hospital in Aro, Ogun State, demanded a registration and deposit fee of 150,000 Nigerian naira (about \$345), which one of my client mothers could not pay. She then decided to bring her mentally ill daughter to me. There was no other support. We decided to go traditional for that reason. It is more affordable and available. You simply have to act when your client is in dire need of assistance, and they have already tried other medicines that they considered ineffective.”

Results also indicate that customers, especially those from low socio-economic status, buy HM because they believe it is more affordable (P3). The participants also expressed that their clients purchase HM based on previous customer referrals, advertisements, and testimonials. Participant 2 (P2) mentioned that her client bought HM products such as ‘Ajidewe’ and ‘Ogun Isoye’ because of their anti-aging and memory-boosting properties.

Analysis of HM advertisements reveals that most herbal medicine ads on the radio claim that a single herbal mixture can cure a wide range of illnesses, such as diabetes, gonorrhea, pneumonia, typhoid, malaria, memory loss, and infertility issues. Unchecked, such statements in marketing have become a common occurrence. Even more concerning is that authorized radio and television stations are used to advertise herbal medicines. These stations are supposed to review these commercials before publication and broadcast to the public. They may wish to defend this behavior to generate revenue, ensuring that the media can continue to operate and remain sustainable. However, the broadcasting authority regulates the operations of these radio and television stations.

#### **4.2.2. Cultural and Personal Beliefs as Trigger for HM Usage**

One of the motivations for using Herbal Medicine (HM) is word-of-mouth recommendations from family and colleagues. This is shaped by the belief that HM has faster efficacy compared to conventional medicines, based on its natural composition. Spiritual beliefs and invocations, according to religious practices, are also considered necessary for herbs to be effective. Cultural and personal beliefs play a significant role in the use of HM among consumers, particularly among postgraduate students, who believe in the ability of herbal medicines to cure various illnesses. This is reflected in the perception of participants who, during their childhood, were accustomed to drinking herbs called 'Igbo' (in the Igbo language) to treat fever. As a result, they believed that herbs were more effective and faster-acting than 'Western medicine.' Similarly, the participants also stated that before the formal branding of HM, there were locally prepared concoctions such as 'agbo' and 'agbojedi' (a concoction for treating piles).

#### **4.3. Theme 3: Legislation and Regulatory Requirements on HM Advert, Usage and Validity Claims**

Analysis of herbal medicine (HM) advertisements reveals that most radio ads claim a single herbal mixture can cure a wide range of illnesses, including diabetes, gonorrhea, pneumonia, typhoid, malaria, memory loss, and infertility. If unchecked, such claims have become a common occurrence. Even worse, authorized radio and television stations are used to advertise these herbal products through legally mandated advertising channels, which are supposed to review these commercials prior to publication and broadcast. These stations may defend this behavior as a means of generating revenue to sustain the media. However, broadcasting authorities, such as the Nigerian Broadcasting Organization (BON), regulate the operations of these radio and television stations.

Findings reveal that precautions should be exercised when using HM. Despite the perceived benefits, HM also has the potential to cause adverse side effects if misused or consumed excessively. When there is indiscriminate, careless, or unregulated use, and when standards are inadequate, the likelihood of negative effects increases (P1). HM should not be taken by children without supervision, nor by pregnant or nursing women. However, dosage remains a significant concern. Findings also indicate that complications could arise from overdosing on HM. "It should not exceed the recommended dosage. You should always consult a doctor before using herbs" (P3).

It is important to follow the instructions on the herbal medicine leaflet and to use the medicine in moderation to prevent abuse, as excessive intake can cause irreversible damage to the internal system (P3).

In light of these challenges, quality assurance, marketing practices, and the adulteration of HM have been highlighted. NAFDAC (National Agency for Food and Drug Administration and Control) has warned against purchasing herbal mixtures from street vendors or public buses due to inadequate preservation standards and potential adulteration. The Nigerian government has authorized NAFDAC under Sections 5 and 29 of the NAFDAC Act 1993 to regulate HM advertising and consumption. The Complementary and Alternative Medical Council of Nigeria is another important regulatory body that works to oversee and control the use of herbal medicine. Although the Council's primary focus under the enabling law is alternative and complementary medicine, which often overlaps with traditional medicine, examining this organization

within the regulatory framework is pertinent, as in certain countries, complementary and alternative medicine and traditional medicine are used interchangeably.

#### **4.4. Discussion**

This paper examines the marketing strategies employed in the herbal medicine (HM) sector. Marketing has long been a tool used to influence the purchasing behaviors of consumers, especially those seeking herbal products for mental health wellness. The widespread use of HM in Nigeria has led to the growth of marketing efforts by Traditional Medical Practitioners (TMPs) to promote their herbal products. TMPs employ a variety of marketing strategies to raise awareness of HM, including direct marketing, advertisements, word of mouth (WOM), branding, brand loyalty, and the use of radio and TV station advertisements.

The paper highlights the important role mass media play in mediating awareness about herbal medicine. Previous studies, such as Agbasimelo (2024), have examined how customers respond to herbal product advertisements using unconventional marketing communication techniques. Agbasimelo identified three effective unconventional marketing techniques: trade-instrumental, trade-demonstrative, and trade-iconographic advertisements. These approaches stand in contrast to conventional marketing channels, such as print media (magazines and newspapers), broadcast media (television and radio), and digital media. Despite these established methods, TMPs are increasingly turning to culturally inclusive approaches to market herbal products. This shift is due to the unique nature of herbal goods, which often require government regulation and clinical research to validate their claims.

Promoting herbal medicine within cultural contexts necessitates the development of innovative marketing strategies. TMPs play a crucial role in Nigeria's HM market, not only through their diverse marketing strategies but also in contributing to mental health and well-being, both directly and indirectly. Outside traditional contexts, some TMPs have begun to commercialize their expertise by offering consultation services to their clients. The growth of the HM sector is driven by factors such as the high cost of mental health treatment at neuropsychiatric hospitals, cultural and personal beliefs, and limited coherent mental health policies in Nigeria.

Nigeria's mental health legislation, the Lunacy Ordinance, was first enacted in 1916 and was later amended as the Lunacy Act of 1958. This legislation empowers magistrates and medical practitioners to detain individuals suffering from mental illness (Lancet Global Health, 2020). Although the Nigerian National Assembly passed bills in 2003 and 2013 to address mental health issues, these bills have not yet been signed into law. The Mental and Substance Abuse Bill, which aims to improve funding and recovery programs for mental health and substance use disorders, was discussed in a 2019 public hearing (The Lancet Global Health, 2020).

Despite the lack of comprehensive legislation, the study found that traditional medical practitioners are vital in mental health management and play an essential role in raising awareness about mental health. Over the years, innovations in HM packaging have helped grow the sector. TMPs continue to provide significant mental health care in Nigeria, especially as many people in low-income countries have limited access to psychiatric treatment. Globally, over 150 million people suffer from depression, while 450 million people live with neurological or mental illnesses (Ndeti et al., 2006). In Sub-Saharan



Africa (SSA), depression rates range from 3.1% to 4.1%. Mental health issues contribute to 14% of the global disease burden, with 12% in low- and middle-income countries, 8.1% in high-income countries, and 10% in SSA. According to Oyeweso (2024), the Neuropsychiatric Hospital in Nigeria has faced enormous costs, with federal government overhead funding proving insufficient.

Many countries acknowledge the potential benefits of traditional healers in addressing mental health issues and are working to integrate them into their formal health-care systems, despite ongoing debates about their legitimacy (e.g., Indonesia, South Africa, Bali, Uganda, Papua New Guinea, New Zealand, Canada) (Ndeti et al., 2006).

The study also found that cultural and spiritual beliefs influence the perceived efficacy of HM. A significant reason consumers purchase HM is the high cost of mental health care at Nigeria's Neuropsychiatric Hospitals. The findings align with previous research showing that Nigeria's herbal medicine history is rooted in indigenous knowledge systems unique to the country's many ethnic groups (Nwosu, 1998; Tata et al., 2023). Onobhayedo and Airoboman (2022) emphasized that Nigeria's indigenous healing practices date back to pre-colonial times, with different ethnic groups developing distinct medical systems based on regional plants, minerals, and spiritual beliefs. Herbal medicine in Nigeria includes various therapeutic approaches, such as medicinal plants, therapeutic massage, and spiritual rites (Prakash et al., 2022; Iyiola et al., 2023).

The concept of Culturally Responsive Therapy (CRT) is also relevant in understanding how mental health is approached by individuals from different cultural backgrounds. CRT emphasizes the importance of cultural awareness in therapy, focusing on the idea that culture shapes individuals' beliefs, practices, and values. This framework is crucial when working with clients from diverse cultural backgrounds, as it helps therapists recognize the significance of cultural context in diagnosing and treating mental health issues (Castro-Olivo, 2017).

Finally, the paper addresses the issue of legislation and regulatory requirements surrounding HM marketing, advertising, usage, and validity claims. The presence of fake, subpar, or tainted herbal medicines poses significant risks to patient safety (WHO, 2019). The licensing of herbal medicinal products in Nigeria has advanced, with registration requiring proof of efficacy, safety, and quality. However, some practitioners of herbal medicine exploit the internet to offer unregulated products that are not NAFDAC-certified. These practitioners often mislead consumers by making false claims about the effectiveness of their remedies, which may cause patients to discontinue prescribed medications, potentially endangering their health.

## 5. Conclusion

Traditional medical practitioners (TMPs) are continually adapting their marketing strategies in response to societal changes. In Nigeria, the use of herbal medicine is widespread, with marketing methods such as advertising, word of mouth (WOM), and branding playing a central role in its popularity. The increasing demand for alternatives to conventional mental health treatments can be attributed to the limitations and gaps in neuropsychological healthcare facilities across the country.

The paper emphasizes the need for caution in understanding the role of traditional medicine in mental health care, particularly in avoiding cross-cultural biases. Specifically, the African perspective on mental illness, which often links it to spiritual or supernatural causes, differs significantly from Western conceptualizations that emphasize scientific, psychological, and biomedical explanations. This difference can lead to misunderstandings if not carefully considered. For example, a doctor employing a Western approach may dismiss spiritual or Indigenous explanations for mental illness as unscientific or ineffective, even though these views are integral to the treatment and understanding of the condition for many Indigenous patients. Recognizing and respecting these cultural perspectives is crucial to ensuring that mental health care is both inclusive and effective across diverse populations.

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Dr Umoh Samuel Uwem conceptualized, designed, and wrote the paper, conducted a literature review, and concluded this article. Prof Matshepo Catherine Matoane contributed to the editing and discussion.

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