



Impact Paper

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Abstract

This paper examines the significance of divination in traditional African medicine, highlighting its impact on patient trust, perception and health outcomes. Through critical reflections, this paper interrogates the power dynamics, epistemological assumptions and ontological commitments underlying traditional medical practices, exposing the complex interplay between divination, health and wellness. By exploring the intersection of traditional medicine and modern healthcare in Africa, this research aims to deepen our understanding of divination's role in promoting holistic well-being. This reflection concludes by suggesting ways to integrate traditional medicine into modern healthcare practices, emphasizing the importance of recognizing and respecting indigenous beliefs and practices. Ultimately, this research contributes to the growing body of literature on traditional medicine and its potential to enhance healthcare delivery in Africa.

Background

In ancient Africa, the practice of medicine was deeply embedded in cultural and spiritual beliefs. Traditional medicine plays a vital role in the healthcare systems of many African countries, with a significant proportion of the population relying on traditional healers for their healthcare needs (Oyebode et al., 2016). Divination is a largely contested superstitious or supernatural practice that seeks to discern hidden knowledge or insight and is an integral component of traditional medicine in Africa (Tella, 1979). In Southeast Nigeria, for example, Dibia traditional healers use divination practices such as Ifá to diagnose and treat illnesses (Anjorin et al., 2022). Despite its importance, divination in traditional medicine remains poorly understood, with many modern healthcare systems dismissing it as mere superstition. However, research has shown that divination plays a crucial role in patient care, influencing patient trust, perception and response to treatment (Peeters Grietens et al., 2012). To become a healer, one was believed to be chosen by the gods, possessing a divine understanding of medicinal herbs and treatments. This sacred calling was accompanied by rituals, incantations, sacrifices and libations, which not only appeased the gods but also had a profound psychological impact on patients (Mokgobi, 2014). The therapeutic process was a holistic experience, addressing the physical, spiritual and emotional aspects of well-being. Healers were revered for their ability to communicate with the divine, interpreting symptoms and prescribing treatments that went beyond mere physical remedies. This spiritual dimension of traditional medicine played a significant role in the perceived efficacy of treatments, as patients believed that the gods had sanctioned their healing (Gruca et al., 2014).

Modern medicine has come to recognize the value of this psychological dynamic, harnessing its power in various ways. The placebo effect, once dismissed as a mere trick of the mind, is now acknowledged as a legitimate therapeutic tool (Kihlstrom, 2008). In vaccinology and clinical trials, researchers exploit the placebo effect to enhance the efficacy of treatments (Caliskan et al., 2024). Even the symbolic authority of the white coat, once a hallmark of traditional medicine, continues to inspire trust and confidence in patients (Marques Caetano Carreira et al., 2021). Recognizing the rich historical and cultural heritage of traditional medicine allows us to gain a deeper understanding of the intricate dynamics that drive human healing. By incorporating spiritual and cultural beliefs into modern healthcare practices, we may unlock the potential for more comprehensive and effective treatments. This integration has the potential to not only improve patient outcomes but also enhance overall well-being, fostering a more inclusive and compassionate approach to healthcare that honors the diversity of human experience.

The World Health Organization (WHO) defines traditional medicine comprehensively as: The sum of knowledge, skills and practices that are rooted in the theories, beliefs and experiences of various cultures and are utilized to promote health, prevent, diagnose and treat physical and mental illnesses, as well as improve overall well-being (Abbo, 2011). The definition, as first outlined by the WHO in 2010, acknowledges the diversity of traditional medicine practices and recognizes their importance in healthcare systems worldwide.

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Traditional African healthcare has a rich and complex history, rooted in a holistic approach that incorporates physical, emotional and spiritual dimensions. This approach is characterized by three fundamental practices: divination, herbalism and spiritualism (Josephine Ozioma and Antoinette Nwamaka Chinwe, 2019). Divination has played a significant role in shaping the diagnosis, treatment and prevention of various health concerns, serving as a vital diagnostic and guidance tool (Thomas & Yidana, 2015). For centuries, African medicine and traditional care were grounded in these three fundamental approaches (Josephine Ozioma and Antoinette Nwamaka Chinwe, 2019). Through a nuanced examination of divination practices, we aim to uncover the ways in which this ancient practice contributes to the holistic approach of traditional African medicine.

Traditional medicine in Africa was rooted in institutional identities that relied on beliefs and spiritual connections, serving as a bridge between the afflicted and the divine (Kofi-Tsekpo, 2004). Traditional diviners, adorned in cultural attire and symbolic accouterments like feathers, masks and effigies, facilitated communication with the spiritual realm. In Southeast Nigeria, the Dibia marked their eyes with native chalk, signifying their role as intermediaries. These intercessors were known by various names across different tribes and cultures, including Sangoma in South Africa, Akomfo in Ghana, Shaman or Laibon in Kenya, and Dibia or Babalawo in Nigeria (Abdullahi, 2011). This diversity of names reflects the rich cultural heritage and unique traditions that underpin African traditional medicine. Once revered and influential members of their societies, traditional diviners and healers have been marginalized due to the misguided association of herbal medicine with voodoo or juju (Okaiyeto and Oguntibeju, 2021). However, some contemporary public health researchers argue that “African traditional medicine” should not be lumped together with “Alternative or Complementary medicine” (Kofi-Tsekpo, 2004). Instead, they advocate for a more nuanced understanding that aligns with the WHO’s definition, which emphasizes the importance of indigenous practices and experiences that are unique to specific cultures.

According to the United Nations, the African continent is expected to account for over 50% of global population growth between 2015 and 2050 (United Nations, 2017). This rapid growth underscores the urgent need for a strategic plan to address emerging health needs and improve global population health. The defining characteristics of this population growth in Africa are twofold: first, the continent is urbanizing at an unprecedented rate, with an estimated 56% of the population projected to live in urban areas by 2050 (United Nations, 2014); and second, Africa will be home to 35%–40% of all adolescents and children globally by 2050 (2014). These trends pose significant challenges and opportunities for healthcare systems, infrastructure and policies on the continent.

The rapidly urbanizing population in Africa, particularly the youth, is vulnerable to the growing threat of chronic noncommunicable diseases and multimorbidity, fueled by unhealthy urbanization practices such as high sugar and salt consumption (Oni et al., 2016). To mitigate this risk, it is essential to develop and implement sustainable solutions and Sustainable Development Goals (SDGs) tailored to the continent’s needs, with a focus on rural areas. This includes expanding vaccine coverage, promoting hygiene and safe sex practices through education, and launching inclusive and participatory social development campaigns in schools and universities.

According to the WHO, approximately 80% of Africans still rely on traditional medicinal plants for their healthcare needs (World Health Organization, 2002). While herbal medicine is readily available, the goal is to educate and promote the adoption of

modern medicines, particularly vaccines, to eradicate diseases such as malaria and HIV, for which vaccines are nearing completion of clinical trials. To achieve this, the implementation of Sustainable Development Goal 3 (SDG-3) – ensuring healthy lives and well-being for all at all ages – is crucial. Additionally, educating a new generation of urban health scholars at the grassroots and public policy levels is essential for driving this change.

Divination

Divination is an ancient and revered practice that endeavors to decipher the enigmatic complexities of events that surpass the realm of mundane comprehension, venturing into the mystical domain of the unknown (Peek, 1991; Curry, 2010). This esoteric art is deeply rooted in a tapestry of beliefs, subjective experiences and individualized practices, which diverge from the pragmatic and empirical foundations of conventional wisdom. Within the context of medicine and healing, divination is inextricably linked to a profound spiritual and religious framework, one that transcends the materialistic and reductionist paradigms of mainstream medical discourse (Egnew, 2005). The symbiotic integration of divination into traditional African medicine infuses the practice with a transcendent and supramundane essence, acknowledging the intricate interconnectedness of the corporeal and spiritual realms (Mokgobi, 2014). By embracing the mysteries of divination, traditional African medicine humbly recognizes the limitations of rational explanations and seeks to illuminate the profound enigmas that govern human existence (Okpako, 1999). This distinctive approach imbues traditional African medicine with a singular attribute, one that honors the labyrinthine complexities of human experience and the holistic interconnectedness of all phenomena (Busia, 2005). While its forms have evolved over time, divination remains a pervasive phenomenon, manifesting in various cultures. In European culture, for instance, divination takes the form of horoscopes and astrology, which remain popular practices to this day.

In the practice of traditional medicine, divination endears the sick, whether spurious or true, producing an effect on the mind via two pathways: induction and intuitive differentiation. This psychological component, akin to the placebo effect, is a crucial aspect of traditional remedies. Divination imbues trust in the caregiver through the patient’s beliefs and submission, fostering a bond that enhances the therapeutic relationship. Studies have shown that social attachment possesses a physiological background, with the release of oxytocin, a neuropeptide that promotes bonding and social behavior (Carter, 1998). This highlights the significance of divination in traditional medicine, as it leverages the psychological and social aspects of healing. Through selectively tapping into the patient’s beliefs and trust, divination contributes to the efficacy of traditional remedies, making it a vital component of traditional medicine. As such, divination remains an integral part of traditional medicine, shaping the dynamics of the patient–caregiver relationship and influencing health outcomes.

Critical reflection on the role of divination in traditional medicine

Challenging notions of objectivity

Divination in traditional medicine challenges conventional objectivity, revealing the intricate relationship between physical and spiritual aspects of healing (Kaptchuk, 2002). This perspective

prompts a reevaluation of medical knowledge and practice, acknowledging the integral role of spirituality and culture in health and wellness (Hsu, 2008). By expanding beyond the solely physical, divination confronts the dominant Western medical paradigm, recognizing that medical knowledge is shaped by cultural and historical context (Unschuld, 1985). This inclusive approach embraces the subjective and mystical aspects of healing, offering a nuanced understanding of health and wellness (Kleinman, 1980).

Power dynamics and cultural imperialism

Divination in traditional medicine raises crucial questions about power dynamics and cultural imperialism (Fanon, 1963), emphasizing the need to recognize and respect indigenous knowledge systems and diverse medical traditions (World Health Organization, 2019). The historical dominance of Western medicine has marginalized traditional practices, imposing a single, universal truth that disregards local wisdom (Escobar, 1995). Divination challenges this imperialism by reclaiming the value of indigenous knowledge and promoting a more inclusive understanding of health and wellness (Kleinman, 1980). By acknowledging the historical power imbalances that have silenced traditional voices, divination seeks to redress these injustices (Smith, 2012). By centering traditional medicine, divination subverts the dominant paradigm, creating space for diverse perspectives and practices (Foucault, 1973). This shift honors the cultural heritage of traditional medicine, celebrating the richness of global healing traditions (Hsu, 2008).

Embodiment and holism

Divination in traditional medicine emphasizes the interconnectedness of body, mind and spirit, promoting a holistic understanding of well-being that acknowledges the intricate web of factors influencing human experience (Kaptchuk, 2002). This approach recognizes that health is not solely physical but also deeply rooted in spiritual, emotional and environmental contexts (World Health Organization, 2019). Divination embodies this holistic perspective, considering the individual's unique circumstances, beliefs and values in the healing process (Kleinman, 1980). Embracing embodiment and holism, divination moves beyond reductionist approaches, seeking to address the root causes of illness rather than just its symptoms (Hahn, 1995). This inclusive and compassionate approach honors the complexity of human existence, fostering a deeper understanding of health, wellness and the human condition (Scheper-Hughes, 1990).

Epistemological humility

Divination in traditional medicine encourages epistemological humility, recognizing the limits of human knowledge and the mysteries that govern human existence (Gadamer, 1975). This approach acknowledges that health and wellness are not solely the domain of science but also of spirituality, intuition and cultural wisdom (Kaptchuk, 2002). Divination embodies this humility, embracing the unknown and the unknowable, and seeking guidance from forces beyond human control (Levi-Strauss, 1966). Divination in traditional medicine locks onto the unseen patterns of health and wellness, unlocking new possibilities for healing and transformation. In doing so, it frees itself from the

limiting keys of Western rationality, embracing a more holistic and expansive approach to understanding the human experience (Escobar, 1995). This humility fosters a deeper respect for the complexity of human experience, allowing for a more inclusive and compassionate approach to health and wellness (Scheper-Hughes, 1990).

Contextualizing traditional medicine

The role of divination in traditional medicine underscores the importance of contextualizing medical practices within their cultural, historical and social frameworks (Hsu, 2008). This approach acknowledges that health and wellness are dynamic and multifaceted, influenced by the distinct cultural narratives, environmental landscapes and political climates in which they are experienced (Kleinman, 1980). Divination in traditional medicine is deeply rooted in the specific traditions and beliefs of a community and is often tied to ancestral knowledge, spiritual practices and cultural rituals (Levi-Strauss, 1966). Divination's contextualized perspective underscores the imperative to safeguard and reverence indigenous knowledge systems, acknowledging traditional medicine as a precious cultural legacy that embodies the wisdom and experience of ancestral communities (Smith, 2012), and to recognize the diversity of medical practices and beliefs across cultures (Unschuld, 1985). This approach challenges the dominant Western medical paradigm, which often imposes a single, standardized approach to health and wellness, regardless of context (Fanon, 1963).

Divination's impact on trust psychology can be illustrated through the strategic trust game, a paradigm involving two players – the investor and the trustee (Kosfeld, 2007). In this game, trust is the cornerstone of decision-making and interpretation, as the investor decides how much to invest and the trustee chooses how much to return. This dynamic mirrors the trust relationship between patient and caregiver in traditional medicine, where divination influences the patient's trust and belief in the caregiver's remedies. Just as the trust game relies on mutual trust for success, divination fosters trust in traditional medicine, leading to a stronger therapeutic relationship and improved health outcomes.

Integrating traditional medicine into modern healthcare: Practical steps

Integrating traditional medicine into modern healthcare can be achieved through practical steps. Offering traditional medicine therapies as complementary services, such as acupuncture or herbal consultations, can enhance patient care. Training healthcare providers in cultural competence can also help them understand and respect diverse cultural beliefs and practices. Additionally, developing integrative medicine programs that combine conventional and traditional approaches can provide comprehensive care.

Further steps can include creating referral networks between conventional healthcare providers and licensed traditional practitioners, supporting research and evidence-based practice, and incorporating traditional medicine into medical education. Addressing regulatory and licensing issues can also facilitate integration. Fostering community engagement and involving local communities in the integration process can help ensure that healthcare services meet the diverse needs and preferences of the population.

Limitations

Integration of traditional medicine into modern healthcare systems presents several challenges that warrant attention. Notably, disparities in quality and safety standards between traditional and conventional medicine may compromise patient care. Specifically, traditional medicine practices and products may not be subject to the same rigorous testing and regulatory oversight as conventional medicine, raising concerns about efficacy, safety, and potential interactions with conventional treatments.

Effective integration requires careful consideration of cultural dynamics and power relationships. The adoption of traditional medicine practices by conventional healthcare systems can potentially lead to cultural appropriation and exploitation, disempowering traditional communities and erasing their cultural heritage. Moreover, the integration process may not always involve equitable partnerships between conventional healthcare systems and traditional communities, potentially perpetuating existing health disparities and power imbalances.

Conclusions

The practice of traditional medicine in Africa is deeply rooted in beliefs of divinity and superstition, which may seem primitive to some. Nevertheless, these beliefs play a significant psychological role in enhancing the patient's receptiveness to care. Therefore, this paper concludes that the use of traditional medicine in patient care is inextricably linked to beliefs of divinity and cannot be isolated from them. These beliefs shape the patient's trust, perception and response to treatment, making them an essential consideration in the delivery of traditional medicine. By acknowledging and respecting traditional African beliefs and practices, such as divination, healthcare providers can harness the psychological benefits of traditional medicine to improve patient outcomes, and by combining traditional knowledge with modern healthcare solutions, improve health outcomes and promote well-being for all Africans.

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Connections references

Alders RG, Vale MM (2024) How can Indigenous knowledge systems be respectfully shared and employed to improve the implementation of impactful One Health actions at all levels? *Research Directions: One Health*. 2, e9. <https://doi.org/10.1017/one.2024.9>.

References

Gadamer, H.-G. 1975) *Truth and Method*. Continuum.
Curry, P. (Ed.). 2010) *Divination: Perspectives for a New Millennium*, Ashgate

- Abbo, C.** (2011) Profiles and outcome of traditional healing practices for severe mental illnesses in two districts of Eastern Uganda. *Global Health Action*, 4(1). <https://doi.org/10.3402/gha.v4i0.7117>.
- Abdullahi AA** (2011) Trends and challenges of traditional medicine in Africa. *African Journal of Traditional, Complementary, and Alternative Medicines* 8(5 Suppl), 115–123. <https://doi.org/10.4313/ajtcam.v8i5S5>.
- Anjorin O and Hassan Wada Y** (2022) Impact of traditional healers in the provision of mental health services in Nigeria. *Annals of Medicine and Surgery* 82, 104755. <https://doi.org/10.1016/j.amsu.2022.104755>.
- Busia K** (2005) Medical provision in Africa – past and present. *Phytotherapy Research: PTR* 19(11), 919–923. <https://doi.org/10.1002/ptr.1775>.
- Caliskan EBBingel, U and Kunkel A** (2024) Translating knowledge on placebo and nocebo effects into clinical practice. *Pain Reports* 9(2), e1142. <https://doi.org/10.1097/PR9>.
- Carter CS** (1998) Neuroendocrine perspectives on social attachment and love. *Psychoneuroendocrinology* 23(8), 779–818. [https://doi.org/10.1016/s0306-4530\(98\)00055-9](https://doi.org/10.1016/s0306-4530(98)00055-9).
- Egnew TR** (2005) The meaning of healing: transcending suffering. *Annals of Family Medicine* 3(3), 255–262. <https://doi.org/10.1370/afm.313>.
- Escobar A** (1995) *Encountering Development: The Making and Unmaking of the Third World*. Princeton, NJ: Princeton University Press
- Fanon F** (1963) *The Wretched of the Earth*. New York City, NY: Grove Press
- Foucault M** (1973) *The Birth of the Clinic: An Archaeology of Medical Perception*. New York City, NY: Vintage Books
- UNICEF. Generation 2030| Africa** (2014) *Child Demographics in Africa*. New York: UNICEF
- Gruca Mvan Andel, T. R and Balslev H** (2014) Ritual uses of palms in traditional medicine in sub-Saharan Africa: a review. *Journal of Ethnobiology and Ethnomedicine* 10(1), 60. <https://doi.org/10.1186/1746-4269-10-60>.
- Hahn RA** (1995) *Sickness and Healing: An Anthropological Perspective*. New Haven, CT: Yale University Press
- Hsu E** (2008) *The Origins of Western Medicine in China. Theories of Health and Illness*. Farnham, UK: Ashgate
- Ozioma EJ and Nwamaka Chinwe OA.** (2019) Herbal Medicines in African Traditional Medicine. In: *Herbal Medicine*, London, UK: IntechOpen. <https://dx.doi.org/10.5772/intechopen.80348>.
- Kaptchuk TJ** (2002) *The Web that Has No Weaver: Understanding Chinese Medicine*. New York City, NY: McGraw-Hill
- Kihlstrom JF** (2008) Placebo: feeling better, getting better, and the problems of mind and body. *McGill Journal of Medicine: MJM: An International Forum for the Advancement of Medical Sciences by Students* 11(2), 212–214
- Kleinman A** (1980) *Patients and Healers in the Context of Culture*. Berkeley, CA: University of California Press
- Kofi-Tseko M** (2004) Institutionalization of African traditional medicine in health care systems in Africa. *African Journal of Health Sciences* 11(1-2), i-ii. <https://doi.org/10.4314/ajhs.v11i1.30772>.
- Kosfeld M** (2007) Trust in the brain. Neurobiological determinants of human social behavior. *EMBO Reports* 8(Suppl 1), S44–S47. <https://doi.org/10.1038/sj.embor.7400975>.
- Levi-Strauss C** (1966) *The Savage Mind*. Chicago, IL: University of Chicago Press
- Marques Caetano Carreira L, Correia A, Pereira A, Belo R, Madanelo L, Brito D, Gomes R, Monteiro L, Correia G, Maia C, Marques T, Sousa R, Abreu D, Matias C, Constantino L, & I Rosendo** (2021) Does the white coat influence satisfaction, trust and empathy in the doctor-patient relationship in the General and Family Medicine consultation? Interventional study. *BMJ Open* 11(12), e031887. <https://doi.org/10.1136/bmjopen-2019-031887>.
- Mokgobi MG** (2014) Understanding traditional African healing. *African Journal for Physical Health Education, Recreation, and Dance* 20(Suppl 2), 24–34
- Okaiyeto K and Oguntibeju OO** (2021) African herbal medicines: adverse effects and cytotoxic potentials with different therapeutic applications. *International Journal of Environmental Research and Public Health* 18(11), 5988. <https://doi.org/10.3390/ijerph>.
- Okpako DT** (1999) Traditional African medicine: theory and pharmacology explored. *Trends in Pharmacological Sciences* 20(12), 482–485. [https://doi.org/10.1016/s0165-6147\(99\)01406-6](https://doi.org/10.1016/s0165-6147(99)01406-6).

- Oni TSmit, Matzopoulos W, Adams RHunter, Pentecost J, Rother M, Albertyn HA, Behroozi Z, Alaba F, Kaba O, van der Westhuizen M, King C, Levitt MS, Parnell NS, Lambert S, E. V and members RICHE** (2016) Urban health research in Africa: themes and priority research questions. *Journal of Urban Health: Bulletin of the New York Academy of Medicine* 93(4), 722–730. <https://doi.org/10.1007/s11524-016-0050-0>.
- Oyebode OKandala, Chilton NB, P. J and Lilford RJ** (2016) Use of traditional medicine in middle-income countries: a WHO-SAGE study. *Health Policy and Planning* 31(8), 984–991. <https://doi.org/10.1093/heapol/czw022>.
- Peek PM** (1991) *African Divination Systems: Ways of Knowing*. Bloomington, IN: Indiana University Press
- Peeters Grietens KToomer, Boock EUm, Hausmann-Muela A, Peeters S, Kanobana H, Gryseels K, C and Muela Ribera J** (2012) What role do traditional beliefs play in treatment seeking and delay for Buruli ulcer disease?—insights from a mixed methods study in Cameroon. *PLoS One* 7(5), e36954. <https://doi.org/10.1371/journal.pone.0036954>.
- Scheper-Hughes N** (1990) Three propositions for a critically applied medical anthropology. *Social Science & Medicine* 30(2), 189–197. <https://doi.org/10.1016/0277-9>.
- Smith LT** (2012) *Decolonizing Methodologies: Research and Indigenous Peoples*. London, UK: Zed Books
- Tella A** (1979) The practice of traditional medicine in Africa. *Nigerian Medical Journal: Journal of the Nigeria Medical Association* 9(5-6), 607–612
- Thomas BA and Yidana A** (2015) Spiritual diagnostic laboratory: the role of diviners in the management and resolution of life crises. *American Journal of Sociological Research* 5(1), 7–13. <https://doi.org/10.5923/j.sociology.20150501.02>.
- United Nations, Department of Economic and Social Affairs, Population Division** (2014) *World urbanization prospects: the 2014 revision: highlights*. United Nations.
- United Nations** (2017) *World population prospects: the 2017 revision, key findings and advance tables. Working paper no. ESA/P/WP/248*. [Internet]. New York: United Nations, Department of Economic and Social Affairs, Population Division, Available from: https://esa.un.org/unpd/wpp/Publications/Files/WPP2017_KeyFindings.pdf.
- Unschuld PU** (1985) *Medicine in China: A History of Ideas*. Berkeley, CA: University of California Press
- World Health Organization (WHO)**. Traditional medicine (2019) Available at https://www.who.int/health-topics/traditional-complementary-and-integrative-medicine#tab=tab_1.
- World Health Organization** (2002) *WHO Traditional Medicine Strategy 2002-2005*. Geneva: WHO Press