The Smoke Screen Theory And the Impact on Indigenous Preventive Health care System in Southwest Nigeria

Principal Investigators Lecture Series

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Background

- Trajectory of discussion
- i) Denial of African medicine
- ii) Shift to an essentialist view about African medicine
- Iii) Pluralistic healthcare systems



Problem

- ATM has been accepted
- Although the patronise of ATM for cure in difficult cases or due to high cost of Western treatment is on the increase;
- Indigenous preventive methods are smoke screened out of use to ensure patronage of Western Basic Preventive Health Care (BPHC).
- Basic questions:



Smoke screen theory

- Smoke Screen theory is built around the following characteristics:
 - i) Publicity power
- ii) Mimicking of prevention
- iii) Made to look very appealing
- iv) Wrong description
- v) Imposition of cost





My field experience and thoughts

- Although there is a renewed interest in ATM, based on two reasons:
- First individual solution and alternative to high cost
- Manufacturers Drug development

- What then is my problem?
- There is a down play of interest in indigenous methods of preventing diseases.

Contemporary context

• Available and affordable -

• Expensive and appealing -



My submission

- Disease causation/aetiology
- i) supernaturally caused diseases
- Gbéré ayebi prevents evil, (iku arun, ofo, etc.)
- Gbéré asé'òtá (prevent enemies) this is to protect one from enemies.
- Gbéré àránsí (shield against attacks) this is to prevent possible affliction.



Preventives for natural conditions

- ii) naturally caused diseases
- Gbéré Incisions
- Èso Fruits
- Ewé herbes/vegetables
- $Egb\grave{o}$ root
- Àgúnmu blended mixture
- Àgbo herbal concoction
- Àsèje special meal



Making a case for indigenous methods

• There are different $\lambda g unmu$; there is no disease that $\lambda g unmu$ cannot prevent. It keeps the body alive and active, ensuring that it has all the necessary nutrients (Ifalowo Awogbile, 2023).





Conclusion

- Why has the more expensive become preferred to the cheaper?
- Why is the scarce preferred to the available?
- Why is the foreign more fashionable compared to the home grown?
- These are the ironies of the politics of the smoke screen theory that we need to grapple with in order to include indigenous methods of preventive medicine in Nigeria and Africa today.

